

CON(TRA)CEPTS OF CARE:
SOUTHERN ALBERTA BIRTH CONTROL CENTRES
& REPRODUCTIVE HEALTHCARE, 1969-1979

A Thesis Submitted to the
College of Graduate and Postdoctoral Studies
In Partial Fulfillment of the Requirements
For the Degree of Doctorate of Philosophy
In the Department of History
University of Saskatchewan
Saskatoon, Saskatchewan

By

KARISSA ROBYN PATTON

© Copyright Karissa Robyn Patton, February 2021. All rights reserved.
Unless otherwise noted, copyright of the material in this thesis belongs to the author.

PERMISSION TO USE

In presenting this dissertation in partial fulfillment of the requirements for a Postgraduate degree from the University of Saskatchewan, I agree that the Libraries of this University may make it freely available for inspection. I further agree that permission for copying of this dissertation in any manner, in whole or in part, for scholarly purposes may be granted by the professor or professors who supervised my dissertation work or, in their absence, by the Head of the Department or the Dean of the College in which my thesis work was done. It is understood that any copying or publication or use of this dissertation or parts thereof for financial gain shall not be allowed without my written permission. It is also understood that due recognition shall be given to me and to the University of Saskatchewan in any scholarly use which may be made of any material in my dissertation.

Requests for permission to copy or to make other uses of materials in this thesis/dissertation in whole or part should be addressed to:

Head of the History Department
5A5, 9 Campus Dr #619
University of Saskatchewan
Saskatoon, Saskatchewan S7N 4L3 Canada

OR

The Dean of College of Graduate and Postdoctoral Studies
University of Saskatchewan
116 Thorvaldson Building, 110 Science Place
Saskatoon, Saskatchewan S7N 5C9 Canada

ABSTRACT

In 1969, as the government of Alberta rolled out their provincial healthcare policy the Canadian government decriminalized contraception and abortions approved by Therapeutic Abortion Committees. The unfortunate timing of both major legislative events meant that provincial birth control, abortion, and other reproductive and sexual health services remained in bureaucratic limbo for almost a decade until officially integrated into Alberta Healthcare Services between 1978 and 1979. Following decriminalization, activists and some medical professionals in southern Alberta established birth control centres using alternative reproductive health models and education plans to fill the voids in the new healthcare bureaucracy. These birth control centres, the Calgary Birth Control Association (CBCA) and the Lethbridge Birth Control and Information Centre (LBCIC), became hubs of reproductive and sexual health services, education, and expertise in 1970s Alberta, bringing an activist agenda to health services in this arena.

This study considers how activists like the women who established, ran, and visited the birth control centres, in southern Alberta spearheaded changes in reproductive health services that combined elements of feminism with principles of Medicare. By applying a reproductive justice framework, this dissertation examines the disparities in access to health and educational services based on race, age, and place and explores the activist legacies in so-called conservative regions.

Building on foundational scholarship on the history of birth control, reproductive rights, reproductive justice, and women's health activism, this dissertation argues that between 1969 and 1979 women's activism within and related to these local birth control centres significantly shaped local and regional discourses of health, reproduction, and feminist politics. In doing so, I recognized the groundwork set by the activists at the LBCIC and CBCA created space for Alberta to become an unexpected leader in providing reproductive healthcare services in 1970s western Canada.

ACKNOWLEDGMENTS

One winter evening in 2012, I called my Grandma. I had just watched PBS's *The Pill* that day in Carol Williams' History of Women class, so I was eager to talk to my grandmother about her memories of the creation of the pill and the decriminalization of contraception in Canada. To my disappointment, my Grandma did not remember either of these historical events.

When the Canadian government passed Omnibus Bill C-150 in May 1969, my grandma had a four-year-old daughter (my Mom) and was pregnant with her second child (my Uncle Robin). Grandma must have utilized newly legal contraception post-1969, but as a young working mother of two her memories about the 1960s and 1970s did not include legislation. Rather the memories she shared with me focused on her lack of sex education or accessible birth control information, and that her Church's marriage course taught her to be subservient to her husband (a lesson she resisted daily). More often than not, she told me that these topics were not supposed to be discussed, especially in public.

On the rare occasion when she did open up, she stubbornly provided as little detail as possible. She told me very little about her sex education outside of what was included in her rural grade eight classes in Lang, Saskatchewan. Yet, I found books like *Everything You Always Wanted to Know About Sex* (1969) stashed away in her belongings – proof she engaged with at least parts of the movement for women's sexual liberation. She was insistent that my mother learned about sex, puberty, and reproduction – an opportunity she did not have as a teen. So, one day in 1975, they went to the library and took out as many books on the topic that they could find. Even though she did not always want to talk about these topics explicitly, she was adamant that her daughter and grand-daughters deserved better sex and birth control education.

Her story shares many themes with this dissertation. She told me about the shame and stigma around premarital sex, contraceptive use, and abortion when she was growing up. She told me about how she hated the idea that women were supposed to be submissive, but she did not identify as a feminist. She told me about the limits of urban family planning programs for teenagers in small town Saskatchewan. And as someone who had received very little sex education herself, she told me about the significance of self-education literature when she wanted to teach my mom about bodies and reproduction.

I'm sure there is more overlap, but there are parts of my grandmother's story that she rarely, if ever, shared with anyone. I do not even dare share parts of her story here because she would be furious with me. I might have been the only one who ever heard parts of her history simply because I was always talking about the historical themes and moments that she experienced or witnessed in her own life – the same things she was taught not to discuss. I pushed that particular envelope on more than one occasion, and on more than one occasion, she pushed it back. However, I am more than grateful for those moments when she did share her stories with me.

My Grandma passed away unexpectedly in the middle of my PhD program, as I began writing this dissertation. Many of her stories, that she so desperately kept secret, were lost with her passing. The stories she did share with me inspired my interest in the history of reproductive health and sex education in the Canadian Prairies.

This dissertation and my scholarship overall would not be the same without her.

~

Many others helped make this dissertation a reality. I could not have asked for a better supervisory committee. The mentorship offered by this committee has meant the world to me.

Thank you to my stellar committee members Valerie Korinek and Katie Labelle – your guidance and feedback throughout this process have been invaluable. To my cognate, Angela Baerwald, thank you for your support and advice throughout this project. Many thanks for the thoughtful insight from my external committee member, Nancy Janovicek.

And to my supervisor and mentor Erika Dyck, words cannot express how happy I am that you were my guide throughout this endeavour. Over the past five years, we have worked together, written together, traveled together, and, now, experienced a global pandemic together. And throughout that time, you have coached me through my writing, encouraged me to think deeply and carefully about my analysis, and you have supported me through all of my projects. I know as I leave this dissertation behind and move forward that I will continue to have a mentor and friend in you. Thank you.

I am especially grateful to my supervisor and committee for their patience and kindness during the last months of my PhD program in the wake of the COVID-19 pandemic. Other graduate students have not been so lucky, and I appreciate your allyship & understanding.

To my family, thank you for always supporting me – even when you have no idea what exactly I'm doing. Todd, your unwavering support throughout my academic career has meant more than you know. I especially appreciate your positive attitude and encouragement – even when you know I've taken on too many projects... again. To my parents, thank you for always telling me I could do anything I put my mind to – even when I was a terrible teen who told you I never wanted to go to university. And thank you both for instilling in me two very different but equally intense work ethics. Thanks to you two, I always had the basic skills and determination to make it through a project of such a large scope. To my sisters, Breanna and Kaitlyn, thank you for listening – and now contributing – to my feminist rants. You two are my inspiration. Thank you, Kaitlyn for the last-minute trips to the Glenbow Archives to photograph sources for me. And to Oliver, thank you for your companionship and always making sure I take healthy breaks from writing. You were literally by my side throughout the majority of this project, and I appreciate your quiet solidarity.

Many friends offered their scholarly support during this process. Thank you to Letitia, Keira, Erin, Laura, Emily, Candice, Cheryl, and Anastasia for reading different iterations of this dissertation over the last few years. And thank you to the history of medicine crew at the University of Saskatchewan, the Canadian Society for the History of Medicine, and the Minnesota, Ontario, Manitoba, and Saskatchewan History of medicine conferences for your feedback and advice throughout my PhD career.

Thank you to everyone who offered moral support during this exciting and sometimes difficult process. To signatories and supporters of the BOYcott, you have no idea how much your friendship, mentorship, and encouragement has sustained me during the tail end of this project and beyond. Michelle, thank you for your constant encouragement and companionship during our writing dates. And to Carol, I cannot adequately express how much your mentorship and friendship means to me – in this project and beyond.

To my COVID writing group thank you for helping me get to the finish line during a pandemic. And to my good friend and COVID comrade, Kiera, thank you for the countless social distancing work sessions on my deck. I could not have gotten through the last few months without your friendship and support!

My lived experiences in the activist communities in Saskatoon and Lethbridge also inspired this dissertation. My scholarly work would be very different if not for my time working with community organizers. Thanks especially to my friend Bonnie who is always inspirational. I have learned so much about organizing, power dynamics, on-the-ground

labour and struggles, collaborations, being an ally and accomplice from the activists communities in Saskatoon and Lethbridge. All of these lessons drove my work and made me think about this topic in new and important ways.

Thank you to Doug Cass and the staff at the Glenbow Archives, and Andrew Chernevych and the team at the Galt Museum and Archives. Thank you to the staff at the Provincial Archives of Alberta and the University of Ottawa's Women's Movement Archives. The support you all offered during the research process is very appreciated.

Thank you to my narrators, Rita, Judy, Luba, Mary, Terri, and Pauline, for taking the time to share your stories with me. This dissertation is better because it includes your memories and expertise. And a special thank you to Pauline Hoskin for your invaluable donation to the Galt Museum and Archives, which more than doubled the documents on the LBCIC – your timing was perfect and very much appreciated.

Lastly, thank you to the Social Sciences and Humanities Research Council (2015-2018) and Associated Medical Services (2019/2020) for funding parts of my PhD education so I could research and write this dissertation.

TABLE OF CONTENTS

PERMISSION TO USE	i
ABSTRACT	ii
ACKNOWLEDGMENTS	iii
TABLE OF CONTENTS	vi
LIST OF FIGURES	viii
LIST OF ABBREVIATIONS	ix
MAPS OF ALBERTA	x
INTRODUCTION	1
HISTORIOGRAPHY & FRAMEWORK	4
WHY ALBERTA?: A LOCAL AND REGIONAL PERSPECTIVE	8
RECOGNIZING WOMEN’S REPRODUCTIVE ACTIVISM & LABOUR	15
SOURCES & CHAPTER OVERVIEW	20
CHAPTER 1: BIRTH CONTROL CENTRES & ALBERTA: PROVINCIAL POLITICS, HEALTHCARE, & CULTURE	26
ACTIVISTS AFTER DECRIMINALIZATION: ALLYSHIP, PRAGMATISM, & SERVICE PROVISION	28
DEBATING MORALITY, DEBATING ECONOMICS: BIRTH CONTROL CENTRE FUNDING, POLITICS, & COMMUNITY ACTION	33
SHIFTING AUTHORITY, CHANGING PRACTICE: BIRTH CONTROL CENTRES AS HEALTH SERVICES	50
CALL THE BIRTH CONTROL CENTRE: CREATING SPACES FOR REPRODUCTIVE AND SEXUAL HEALTH IN CONSERVATIVE SOUTHERN ALBERTA	62
WHOSE LABOUR?: COLLABORATIONS AND CONFLICT	72
CONCLUSION	73
CHAPTER 2: MODELS OF HEALTH: FEMINISM, CLIENT-DIRECTED SERVICES, & EDUCATION	75
RE-DEFINING HEALTH AND CARE: REPRODUCTION, SEX, AND WOMEN’S HEALTH, 1948-1979	77
FUELLED BY WOMEN’S HEALTH AND LIBERATION	86
DRIVEN BY CLIENTS’ EXPERIENCES AND NEEDS	95
RECLAIMING WOMEN’S KNOWLEDGE	101
CONCLUSION	105
CHAPTER 3: FROM BOOKLETS TO BREAST EXAMS: THE SIGNIFICANCE OF SELF-EDUCATION	106
SELF-EDUCATION, FEMINISM, AND WOMEN’S HEALTH MODELS IN THE 1970S	113
“PLEASE SEND ... IN AN UNMARKED ENVELOPE:” STIGMA, SURVEILLANCE, AND SELF-EDUCATION	117
SELF-EDUCATION LITERATURE: CLASS, GENDER, WHITE RESPECTABILITY, AND THE CONTRACEPTIVE CONSUMER	125
“WE HAVE FOUND OURSELVES CONTINUALLY HAMPERED BY THE LACK OF ‘GOOD’ INSTRUCTIONAL MEDIA:” TAILORED SELF-EDUCATIONAL CONTENT TO NORMALIZE HEALTH TOPICS	134
CONCLUSION	147
CHAPTER 4: THE STRUGGLES OF SISTERHOOD: DISTANCE, DIFFERENCE, & DIVERSITY IN 1970S BIRTH CONTROL CENTRE OUTREACH EDUCATION	148
A WHITE HETERONORMATIVE MOVEMENT IN A WHITE HETERONORMATIVE SPACE?: DIFFERENCE FEMINISM, DIVERSITY, AND THE POLITICS OF REPRODUCTION IN SOUTHERN ALBERTA	151
“ESPECIALLY FOR OUT-OF-TOWN WOMEN”: SOUTHERN ALBERTA LANDSCAPES OF DIFFERENCE FEMINISM & OUTREACH EDUCATION	160
<i>The CBCA Rural Outreach Program, est. 1972</i>	166
<i>English as an Additional Language Resources at the CBCA, 1972-1976</i>	171

<i>The CBCA's Native Family Planning Program, est. 1974</i>	173
ALLIANCES & ASSUMPTIONS: THE PRESUMED HETEROSEXUALITY OF REPRODUCTIVE HEALTH	182
PREVENTATIVE SEX EDUCATION FOR TEENS: AGE, RESPONSIBILITY, AND SEXUAL LIBERATION	187
CONCLUSION	193
CHAPTER 5: REHABILITATION OR LIBERATION?: THE TEENAGE SINGLE MOTHER, LEGAL RIGHTS, & ECONOMIC RESPONSIBILITY	195
THE CANADIAN ADOPTION MANDATE & WHITE TEENAGE MOTHERS AS "CANDIDATES OF REHABILITATION," 1945-1969	202
SINGLE MOTHERHOOD, LEGAL LIMITATIONS, AND FINANCIAL FEARS IN THE 1970s	207
"RETURN THEM TO SOCIETY AS SELF-CONFIDENT HUMAN BEINGS:" PREGNANT TEENS AS "CANDIDATES OF REHABILITATION" AT BANKVIEW SCHOOL IN THE 1970s	212
"SHE IS A VERY BRIGHT GIRL...": PREGNANT TEENS AS CANDIDATES OF LIBERATION AT BIRTH CONTROL CENTRES	225
CONCLUSION	236
CONCLUSION	238
APPENDIX	251
BIBLIOGRAPHY	259

LIST OF FIGURES

Image 2.1: “Barefoot doctor” conducting a breast exam on a Southern Alberta Cowgirl. Selected from an advertising flyer for the CBCA’s Women’s Health Weekend in 1976.	84
Image 2.2: Lethbridge Women’s Liberation Group Campout, June 1, 1973.	94
Image 3.1: Photo of Pauline Hoskin (LBCIC Director) holding a variety of self-education literature, including <i>How to Take the Worry Out of Being Close</i> , in front of the LBCIC lending library, December 1974. From the Galt Museum and Archives, 20171104.....	109
Image 3.2: Cover of <i>Escape From Fear</i> , Planned Parenthood Federation of America, originally published in 1956, reprinted in 1962.	127
Image 3.3: Cover from <i>You’ve Changed the Combination</i> , Denver: Rocky Mountain Planned Parenthood, 1973.	129
Image 3.4: Middle class, white couple kicking the stork away. From <i>The How-Not-To Book: Julius Schmid’s Guide to Modern Birth Control Methods</i> , 1970, pg. 2.	129
Image 3.5: Cover of <i>So You Don’t Want to be a Sex Object</i> , Denver: Rocky Mountain Planned Parenthood, 1973.	132
Image 3.6: Cover of <i>Stop Kidding Yourself!</i> , Denver: Rocky Mountain Planned Parenthood, 1973.	132
Image 3.7: “But I’m not that kind of girl,” Cartoon from the LBCIC’s Newsletter, January 1, 1977, pg. 6.....	134
Image 3.8: Everett Soop, “Tell you about the birds and the bees!!! After the sting?” in <i>Kainai News</i> , “Teenage Marriages,” February 2, 1978, pg. 8.	134
Image 3.9: Written and drawn instructions of how to conduct a self-breast-exam. Excerpt from “How to detect a lump in your breast,” in the LBCIC’s newsletter <i>Unity</i> , April 30, 1975, vol.1 no.8, page 3.	143

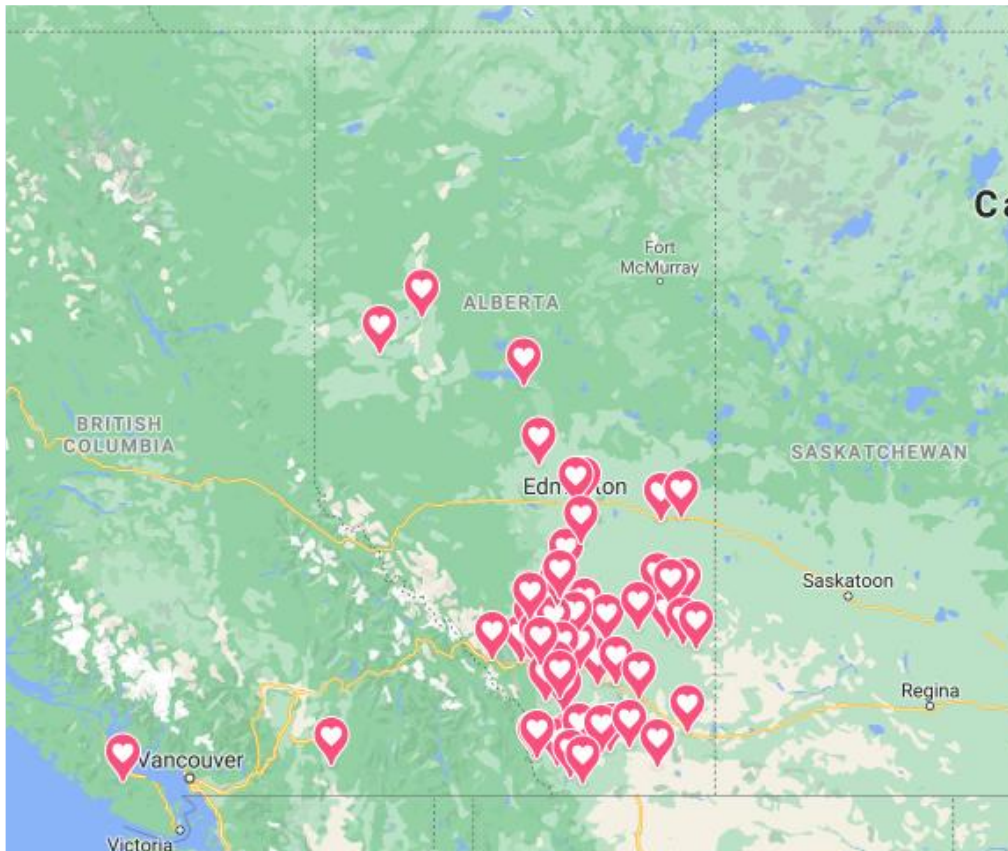
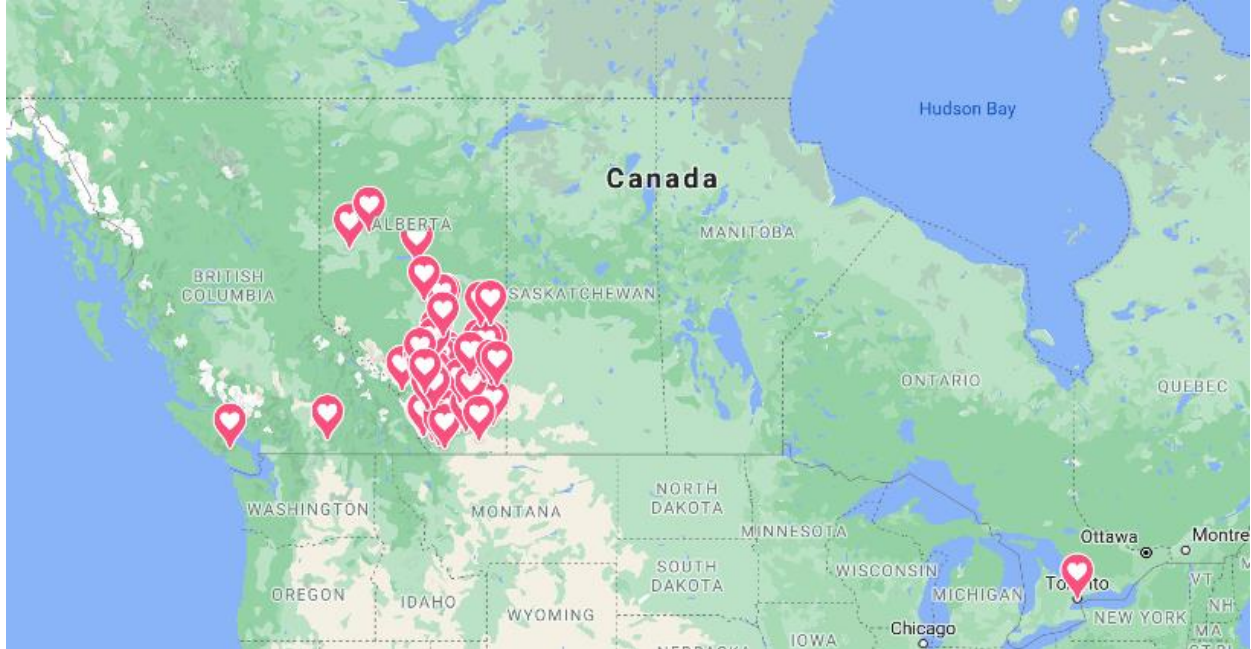
LIST OF ABBREVIATIONS

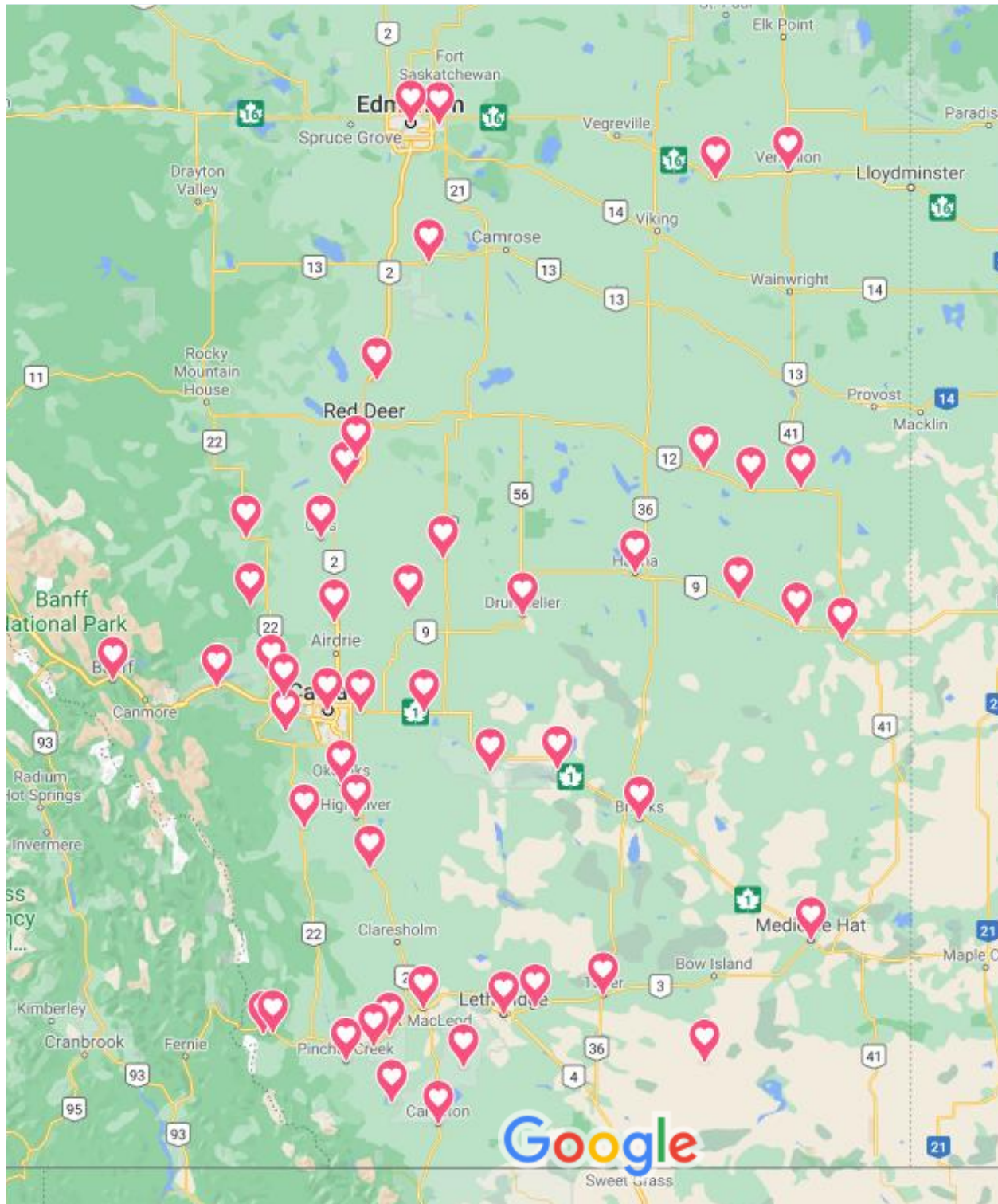
- AEDC – Adult Education Day Centre
- AMA – Alberta Medical Association
- ANWA – Alberta Native Women’s Association
- CAIC – Calgary Abortion Information Centre
- CBCA – Calgary Birth Control Association
- LBCIC – Lethbridge Birth Control and Information Centre
- LFPC – Lethbridge Family Planning Centre
- LIP – Local Initiatives Program
- PSS – Preventative Social Services
- TAC – Therapeutic Abortion Committee
- VANWS – Voice of Alberta Native Women’s Society
- VD – Venereal Disease

MAPS OF ALBERTA

SELECT COMMUNITIES IN CONTACT WITH THE CBCA & THE LBCIC, 1970-1979

These maps only represent places mentioned in this dissertation, and do not represent a complete list of CBCA and LBCIC contacts and connections





Click the following link for the interactive map: <https://goo.gl/maps/EaHJW8uuzENudtT36>

INTRODUCTION

In the summer of 1970 a group of women came together in Calgary, Alberta to talk about abortion. These Calgaryans were disillusioned by the restrictions of the new abortion laws passed in 1969. In particular, they were troubled by the necessity of Therapeutic Abortion Committees (TACs), limiting access to the medical operation by first requiring approval from medical boards. This group of women worried that people lacked adequate knowledge about how to navigate the new TAC process. After this meeting, they decided that they needed an organization that provided information about abortion, accessing abortion services, and the new Canadian legal context. Before the year's end, these women¹ established the Calgary Abortion Information Centre (CAIC).²

The CAIC initially focused on providing information about the new laws and TACs to women who needed abortions, but eventually expanded their mandate and services based on community needs. They also worked to raise consciousness about the serious limitations of the new abortion legislation. However, these activists were quickly overwhelmed by the numbers of women seeking information and guidance on how to access birth control and abortion services. The rapid recognition of local women's needs for abortion and birth control information services put pressure on the CAIC to extend its reach. In less than a year, the women running the CAIC realized they needed to expand their purview to include birth control as well as broader reproductive and sexual health services. By 1971 the CAIC activists changed the centre's name to signal this expanded mandate, calling it the Calgary Birth Control Association (hereafter the CBCA, or the Association).³

A year later, and about a two-hour drive south, a young nurse named Judy Burgess sought the help of two local doctors, Dr. Lloyd Johnson and Dr. Robert Hall, to establish another birth control centre in the small city of Lethbridge, Alberta. Following, in part, the model established in

¹ Martha Weir, Gunilla Mungan, Elie Silverman, Linda Morrill, Gloria Prescott, Heather Travers, Arlene McLaren, Vera Walsh, Maureen Stirling, Vern Price, Cathy Hankins, Carolyn Knox, Ann Nicholson were the thirteen women who established the CAIC in 1970. These women were teachers, university students, secretaries, bookstore clerks, housewives, and geological technicians. See: "Notebook kept by Martha Weir" M-7265-12; "Origins of the CBCA" in "Evaluation of the CBCA – In-house Evaluation Project, 1979-1980," M-7265-122, all found in the *Calgary Birth Control Association Collection* at the Glenbow Archives, Calgary, Alberta (*CBCA Collection*, GA).

² "Origins of the CBCA" in "Evaluation of the CBCA – In-house Evaluation Project, 1979-1980," M-7265-122; Rough draft of address about the CBCA in "Notebook Kept by Martha Weir," M-7265-12, *CBCA Collection*, GA.

³ CBCA Newsletter, July 17, 1971, in "Newsletters 1971-1974," M-7265-240, *CBCA Collection*, GA.

Calgary, the three medical professionals worked together to create the Lethbridge Birth Control and Information Centre (hereafter the LBCIC, or the Centre).⁴ Burgess had just graduated from the Galt School of Nursing in Lethbridge, and worked as a nurse while also offering volunteered labour to establish the LBCIC. In the fall of 1972 Judy applied for funding, found a rental space, created a clinic plan, and developed the LBCIC library and educational resources.⁵ After months of unpaid work, Burgess remembers the fall day in 1972 when the funding for the LBCIC was approved. She recalls, “I do remember this moment of being paid for the first time in years because I had been going to school. [laughs] I cashed the whole paycheck, and I put the money on my bed, and I yelled, ‘Ah, I got paid!’”⁶ Her hard work had paid off when the LBCIC opened its doors to the public in January 1973.

These centres and the women who established them were part of a much broader grassroots movement in the 1970s, and their local and regional stories provide insight into on-the-ground activism and services in Alberta. The origin stories and services provided by the Lethbridge Centre

⁴ Judy Burgess and John Martini, “Proposal Family Planning Division Department of National Health and Welfare” (1972), found in “Lethbridge Birth Control Association,” GR1983-0133, box 1, file 5, at the Provincial Archives of Alberta (PAA), Edmonton, Alberta.

⁵ Judy Burgess ran the Centre along with Clareanne “Tinky” Bush, the Centre’s first Counsellor. Burgess would leave the LBCIC in the fall of 1974 when she decided she would go back to school to become a registered nurse. As Burgess departed, Pauline Hoskin, a devoted volunteer at the Centre from its beginning and the woman who started the prenatal classes for single mothers, became the new director of the LBCIC. By August 1975, Pauline moved to Fort McLeod with her family⁵, and Margaret Aubert took over the role of director.⁵ Aubert was hired as the Centre’s Counsellor since February of 1975. From November 1975 to November 1976, Aubert was co-directors with Wendy Klassen. When Klassen left the Centre in 1976, Aubert took on the position in its entirety. By 1976 the Centre added a third paid position of “Volunteer Coordinator,” which was first held by Dawn Winters.

See: Judy Burgess, interviewed with Karissa Patton, October 9, 2014, transcript, interview and transcript can be found in “Oral History Project: Student Reproductive Rights Activism in Southern Alberta during the 1960s and 1970s,” 20171019, at the Galt Museum and Archives, Lethbridge, Alberta (JB, interview, Oct. 9, 2014, transcript, GMA); Pauline Hoskin, letter of resignation to LBCIC board of directors, June 30, 1975; “Our Staff,” Newsletter of the LBCIC, November 1, 1976; Review of Budget and Programs for January 1, 1974 to November 8, 1974; Proposal of Budget and Programs for 1975: Presented to the City of Lethbridge, the Province of Alberta Department of Preventative Social Services, and Family Planning Federation of Canada, 20171104, found in *the Lethbridge Birth Control and Information Centre, 1973-1975*, at the Galt Museum and Archives, Lethbridge, Alberta (LBCIC, 1973-1975 GMA).

⁶ Judy Burgess, interview with Karissa Patton, December 8, 2012, transcript, interview and transcript can be found in “Oral History Project: Student Reproductive Rights Activism in Southern Alberta during the 1960s and 1970s,” 20171019, at the Galt Museum and Archives, Lethbridge, Alberta (JB, interview, Dec. 8, 2012, transcript, GMA).

and Calgary Association were not necessarily unique; they were two of many birth control and reproductive health centres that opened across Canada and the United States in the 1970s.⁷ Like many other similar organizations in North America, these southern Albertan birth control centres provided essential information and became critical conduits in a transition from a landscape of criminalized choices, to legal ones.

The LBCIC and the CBCA relied on volunteers and community activists to run programs and provide services. Both Albertan birth control centres offered pregnancy tests, birth control information, and information about sympathetic doctors, birth control and abortion counselling, prenatal care and information for single mothers, and a library on contraceptive methods, abortion, venereal diseases (VD), and sexuality.⁸ The local and regional histories of these two centres reveal layers of activism, alliances, and expertise rooted in regional experiences and local challenges. Exploring the histories of these two birth control centres illustrates how activists provided resources, education, and information on reproductive and sexual health during a time when these very services were legally and socially in flux.

In this dissertation, I argue that women's activism within and related to these local birth control centres significantly shaped health, reproductive, and feminist politics in the province throughout the 1970s. The purpose of this dissertation is two-fold. First, I underscore the integral work of the birth control centres in providing reproductive healthcare services outside of mainstream medical institutions and services throughout the 1970s. I recognize the vital role played by birth control centre activists in establishing reproductive and sexual health services in their local and provincial communities, advocating for patients' rights, and shifting attitudes around women's social roles and sexuality. The feminist gains made over the decade are significant. The activists at both the LBCIC and the CBCA carved out space for their newly developed approach to feminist reproductive and sexual health expertise. The women who ran these southern Alberta birth control centres framed their mandates and services based on community needs. Using client-direction and feedback the birth control centre activists developed services and programs that were tailored to the region they lived in and the diverse clients they served. Exploring the stories of the birth control centres, the women who started, ran, and maintained the centres, and the women who sought

⁷ Sandra Morgen, *Into Our Own Hands: The Women's Health Movement, 1969-1990*, (New Jersey: Rutgers University Press, 2002), 70.

⁸ JB, interview, Oct. 9, 2014, transcript, GMA; JB, interview, Dec. 8, 2012, transcript, GMA; "The Birth Control & Information Centre," *Up* vol. 1 no. September 7 10, 1974, pg. 9, HQ 1480.L47.U6, found at the University of Ottawa's Women's Archives, Ottawa, Ontario (UOWA).

services from the centres reveal how the LBCIC and CBCA were important parts of the Alberta community and broader healthcare system in the 1970s.

Second, I consider the Calgary Association and the Lethbridge Centre as sites where the politics of women's liberation were debated and developed. Activists at the birth control centres and their clients navigated questions about rights, responsibilities, professionalism and expertise, age and agency, race, place, and access, technology, and sisterhood. The activists who ran the birth control centres and their outreach education programs embraced theories of difference feminism when it came to women's bodies.⁹ Early educational outreach from the CBCA and LBCIC celebrated women's bodies and health, but often failed to recognize difference among women's experiences with reproductive and sexual healthcare in the region. The birth control centers' educational coordinators, who were predominantly White and lived in urban centres, quickly learned that Indigenous women, women from rural communities, and teens faced specific barriers to reproductive and sexual health services. Accordingly, the educational programming at both centres was increasingly tailored to a variety of communities' needs in order to address women's diverse circumstances. The birth control centre activists' actions and reactions to women's difference – beyond the biological difference from men – reveals much about the politics of women's liberation and women's health in Alberta during the 1970s.

Historiography & Framework

My dissertation recognizes the significant on-the-ground-work of these birth control centres and it builds on foundational scholarship on the history of birth control, reproductive rights, and women's health activism in Canada and the United States.¹⁰ In particular, I identify influential players and institutions in the women's health movement and participate in reframing definitions of

⁹ Wendy Kline, *Bodies of Knowledge: Sexuality, Reproduction, and Women's Health in the Second Wave*, (Chicago: University of Chicago Press, 2010), 2.

¹⁰ There is a growing and rich body of scholarship on the history of reproductive rights feminism in 1970s Canada. See: Christabelle Sethna, "The Evolution of the *Birth Control Handbook*: From Student Peer-Education Manual to Feminist Self-Empowerment Text, 1968-1975," *CBHM* Vol. 23 No.1 (2006), 89-118; Christabelle Sethna, "The University of Toronto Health Service, Oral Contraception, and Student Demand for Birth Control, 1960-1970," *Historical Studies in Education* vol. 17 no. 2 (2005), 265-292; Christabelle Sethna, Beth Palmer, Katrina Ackerman, and Nancy Janovicek. "Choice Interrupted: Travel and Inequality of Access to Abortion Services since the 1960s." *Labour/Le Travail*, 71 (Spring 2013), 29-48; Katrina Ackerman and Shannon Stettner, "'The public is not ready for this': 1969 and the Long Road to Abortion Access," *Canadian Historical Review* vol. 100 no. 2, (June 2019), 239-256.

activism. The work of scholars like Beth Palmer,¹¹ Susan Smith,¹² Erika Dyck,¹³ Shannon Stettner,¹⁴ and Chris Bobel¹⁵ have encouraged historians to re-examine definitions of activism alongside notions of who counts as an activist by pointing to significant but often unrecognized women's contributions in women's health organizing. Other scholars have established the rich history of reproductive rights and women's health movements in Canada and the United States, exploring the various ways that activists strove to empower women by building alternative models of health and education.¹⁶ Some historians underscore the importance of regional studies in explaining on-the-ground and grassroots efforts to change reproductive health policy and practice.¹⁷ Collectively, this scholarship highlights how women shrewdly manipulated loopholes in legislation, covertly shirked policy in favour of providing the services and education people needed, and pushed against the

¹¹ Beth Palmer, "'Lonely, Tragic, but Legally Necessary Pilgrimages': Transnational Abortion Travel in the 1970s," *The Canadian Historical Review* vol. 92 no.4 (2011), 637-664.

¹² Susan L. Smith, *Sick and Tired of Being Sick and Tired: Black Women's Health Activism in America, 1890-1950* (Philadelphia: University of Pennsylvania Press, 1995).

¹³ Erika Dyck, "Sterilization and Birth Control in the Shadow of Eugenics: Married, Middle-Class Women in Alberta, 1930-1960s." *CBHM* Vol. 31 No.1 (2014), 165-187.

¹⁴ Shannon Stettner, "'He is Still Unwanted': Women's Assertions of Authority over Abortion in Letters to the Royal Commission on the Status of Women in Canada," *CBMH* Vol. 29 No. 1 (2012), 151-171.

¹⁵ Chris Bobel, "'I'm not an activist, though I've done a lot of it': Doing Activism, Being and Activist and the 'Perfect Standard' in a Contemporary Movement," *Social Movement Studies* Vol. 6 No. 2 (2007), 147-159.

¹⁶ See, for example, the important work of Morgen, *Into Our Own Hands* (2002); Laura Kaplan, *The Story of Jane: The Legendary Underground Feminist Abortion Service*, (Chicago: University of Chicago Press, 1995); Kline, *Bodies of Knowledge* (2010); Wendy Kline, "The Making of *Our Bodies, Ourselves*: Rethinking Women's Health and Second-Wave Feminism," in *Feminist Coalitions: Historical Perspectives on Second-Wave Feminism in the United States*, edited by Stephanie Gilmore and Sara Evans, (Urbana: University of Illinois Press, 2008); Sethna, "The Evolution of the *Birth Control Handbook*," 89-118; Sethna, "The University of Toronto Health Service," 265-292; Sethna, et al. "Choice Interrupted," 29-48; Ackerman and Stettner, "'The public is not ready for this'," 239-256; and Shannon Stettner, editor, *Without Apology: Writings on Abortion in Canada*, (Edmonton: University of Athabasca Press, 2016).

¹⁷ Erika Dyck, *Facing Eugenics: Reproduction, Sterilization, and the Politics of Choice*, (Toronto: University of Toronto Press, 2013); Dyck, "Sterilization and Birth Control in the Shadow of Eugenics," 165-187; Cathy Moran Hajo, *Birth Control on Main Street: Organizing Clinics in the United States, 1916-1939*, (Urbana: University of Illinois, 2010); Palmer, "'Lonely, Tragic, but Legally Necessary Pilgrimages'," 637-664; Lianne McTavish, "Abortion in New Brunswick" *Acadiensis* Vol, 44 No. 2 (Summer/Autumn 2015), 107-130; Kristin Burnett, *Taking Medicine: Women's Healing Work and Colonial Contact in Southern Alberta, 1880-1930*, (Vancouver: University of British Columbia Press, 2010); Kristin Burnett, "Obscured Obstetrics: Indigenous Midwives in Western Canada," in *Recollecting Lives of Aboriginal Women of the Canadian Northwest and Borderlands* (Athabasca: Athabasca University Press, 2014), 157-171.

political and medical establishments to secure healthcare access. Their work widens the definitions of activism to include the integral yet invisible labour that has been historically unrecognized or under-recognized.

Some historians of reproductive health, including Erika Dyck, Suzanne Klausen, and Colleen MacQuarrie, explore the historical relationships between the state, reproductive health, and women's resistance.¹⁸ This body of work examines the inequities within reproductive healthcare, underlining the intersections of medicine and healthcare, government policy, and reproduction. In particular, Dyck and Klausen call attention to how ethnicity, race, class, (dis)ability, and sexuality shaped citizens' healthcare access and experiences in Canada and South Africa, respectively. Other scholars, namely, Maureen Lux, Mary Jane McCallum and Adele Perry, have drawn attention to the specific histories of healthcare inequality in Canada in their discussion of Indigenous health and healthcare.¹⁹ While I emphasize the importance of on-the-ground activism at local birth control centres, I also examine how activists navigated health inequities when it came to teens, rural communities, and Indigenous clients.

A reproductive justice framework is essential when exploring the intersections of government policy, reproductive health inequities, and local resistance. Scholars Loretta Ross and Dorothy Roberts have provided valuable theoretical guidance in understanding and utilizing the reproductive justice framework. Ross herself was a key figure in establishing the SisterSong Women of Colour Reproductive Justice Collective and was part of the group that coined the term "reproductive justice" in 1994. Her work on the history and theory of reproductive justice is integral to any study about reproduction. The work of Ross and the SisterSong Collective illuminated that "for Indigenous women and women of colour it is important to fight equally for (1) the right to have a child; (2) the right not to have a child; and (3) the right to parent the children we have, as well as to control our birthing options, such as midwifery."²⁰ Women of colour and Indigenous women

¹⁸ Dyck, *Facing Eugenics*, 2013; Susanne Klausen, *Abortion Under Apartheid: Nationalism, Sexuality, and Women's Reproductive Rights in South Africa*, (London: Oxford University Press, 2015); Colleen MacQuarrie, Shannon Stettner, Claire Peirson, Fiona Bloomer, *Crossing Troubled Waters: Abortion in Ireland, Northern Ireland, and Prince Edward Island*. (Charlottetown: Island Studies Press at the University of Prince Edward Island, 2018).

¹⁹ Maureen Lux, *Separate Beds: A History of Indian Hospitals in Canada, 1920s-1980s*, (Toronto: University of Toronto Press, 2016); Adele Perry and Mary Jane Logan McCallum, *Structures of Indifference: An Indigenous Life and Death in a Canadian City*, (Winnipeg: University of Manitoba Press, 2018).

²⁰ Loretta Ross, "Understanding Reproductive Justice: Transforming the Pro-Choice Movement." *Off our Backs* vol. 36 no. 4 (2006), 14; also see her other work: Loretta Ross, "African-

often felt uncomfortable with the binary structure of pro-choice/pro-life movements, and a reproductive justice framework finally offered language and strategies to frame their own lived experiences. The emergence of the term and theoretical approach of reproductive justice made space for more intersectional conversations about reproductive health and family services. Dorothy Roberts' sociological and legal scholarship on race, White supremacy, pregnancy, addiction, foster care, and child apprehension, for example, exemplifies a scholarly reproductive justice approach. Her work in *Killing the Black Body* (1997) and *Shattered Bonds* (2002) illustrates how a reproductive justice framework can offer insight into complex relationships within and between feminisms, the state, medical, and family services.²¹ Similarly, historians like Barbara Gurr, Shannon Stettner, Suzanne Klausen, and others have underlined how concepts of nation, race, class, and sexuality inform how governments structure and provide reproductive healthcare services across diverse times and places.²² Their work has shown how reproductive justice frameworks can be applied to historical analyses.

Building on the critical texts of Ross, Roberts, Gurr, and others, I use a reproductive justice framework in this dissertation. As a framework for activism and scholarship, reproductive justice combines reproductive rights and social justice. In doing so, a reproductive justice framework uses the feminist concept of intersectionality to identify legal and social barriers to reproductive choices. In other words, a reproductive justice lens looks at how race, Indigeneity, class, sexuality, (dis)ability, as well as gender effects provision of birth control, reproductive health, and family services. The following chapters explore relationships between White urban activists and the diverse clientele of

American Women and Abortion,” in *Abortion Wars: A Half Century of Struggle, 1950-2000*, (Berkeley: University of California Press, 1998).

²¹ Dorothy Roberts, *Killing the Black Body: Race, Reproduction, and the Meaning of Liberty*, (New York: Vintage Books, Random House Publishing, 2016); Dorothy Roberts, *Shattered Bonds: The Color of Child Welfare*, (New York: Basic Civitas Books, Perseus Books Group, 2002).

²² To name just a few, see: Klausen, *Abortion Under Apartheid*, (2015); Dyck, *Facing Eugenics*, 2013; Sethna, et al., “Choice interrupted,” 2013; Stettner, ed., *Without Apology* (2016); Brianna Theobald, “Nurse, Mother, Midwife: Susie Walking Bear Yellowtail and the struggle for Crow Women’s Reproductive Autonomy,” *The Magazine of Western History*, Autumn 2016; Brianna Theobald, *Reproduction on the Reservation: Pregnancy, Childbirth, and Colonialism in the Long Twentieth Century*, (Chapel Hill: University of North Carolina Press, 2019); Karissa Haugeberg, *Women Against Abortion: Inside the Largest Moral Reform Movement of the Twentieth Century*, (Chicago: University of Illinois Press, 2017); Chris Finley, “Violence, genocide, and captivity: Exploring cultural representations of Sacajawea as a universal mother of conquest,” *American Indian Culture and Research Journal* 35, no. 4 (2011): 191-208; Jennifer Holland, *Tiny You: A Western History of the Anti-Abortion Movement*, (Berkeley: University of California Press, 2019).

the centres; how the LBCIC and CBCA educational programs were structured and provided in different communities; and how programs for mothers and families paralleled and diverged from those for contraception and abortion. In doing so, I examine the disparities in access to health and educational services based on race, age, and place.

Why Alberta?: A Local and Regional Perspective

Throughout this project, many people have asked me, “why Alberta?” or, “what is the significance of this topic beyond Alberta?” These kinds of sentiments are not surprising to others studying feminist or activist histories of the post-war Prairies. Scholars like Lois Harder, Tessa Jordan, Valerie Korinek, and others have asserted that assumptions about Canadian Prairie identity often renders Prairie feminists and activists less visible than their Vancouver- and Toronto-based counterparts in the historical literature.²³ It surprised some people that Alberta housed influential birth control centres in the 1970s, due to presumptions about the province’s reputation as a politically conservative and religiously pro-life region. The simple fact that these southern Alberta birth control centres existed at all is not the point of this dissertation. Instead, these local and regional stories capture valuable insights into broader themes surrounding the history of women’s liberation and reproductive healthcare in 1970s Canada. In particular, their histories help to show some of the trials and strengths of grassroots activism, the make-up of feminist models of health, and how women strategically created necessary health and family services to fit their own needs throughout the decade. The history of these birth control centres offers an important lens into the development of feminist models of health in the 1970s. At the same time, their regional perspective explains how those models were used and adapted on the ground.

²³ Other scholars have shared their experiences of glib reactions to their research on prairie activism. Lois Harder describes the typical response to her book about Feminism in Alberta: “that should be a short book.” Tessa Jordan explains that the first Canadian feminist Magazine, *Branching Out* “has completely fallen out of the historical record,” in part thanks to the magazine’s location in the Prairie city of Edmonton, Alberta. Similarly, in her introduction to *Prairie Fairies*, Valerie Korinek acknowledges that due to the regions’ religious and conservative reputation, “some will be surprised” that she chose the prairies as the focus of her study. Korinek challenges readers to reconsider the history of the prairies anew – separate from the imagined identities of the provinces that block queer stories and activism from view. See: Lois Harder, *State of Struggle: Feminism and Politics in Alberta*, (Edmonton: University of Alberta Press, 2003), ix; Tessa Jordan, *Feminist Acts: Branching Out Magazine and the Making of Canadian Feminism*, (Edmonton: University of Alberta Press, 2019), xxix, 229; Valerie Korinek, *Prairie Fairies: A History of Queer Communities and People in Western Canada, 1930-1985*, (Toronto: University of Toronto Press, 2018), 10.

Scholars such as Alan Artibise, Paul Voisey, and Nancy Janovicek have advocated the importance of local and regional histories. Debates about the place of local and regional histories in academia have persisted in recent decades. Some scholars have considered local and regional histories as projects better suited for popular, rather than academic, historians.²⁴ Other historians have shown how local and regional perspectives can provide significant historical perspectives, that are otherwise left out of larger national and intellectual histories. Alan Artibise champions the necessity for urban histories of Western Canada researched and shared using social science and historical methods. Historians like Artibise and Paul Voisey wrote social and political histories of Prairie cities and towns in the last decades of the 20th century. Building off his own work and that of others like Voisey, Artibise has continued to assert that by bringing local and regional stories back into the academic purview, “local history ceases to be parochial and become part of a larger story.”²⁵

Nancy Janovicek’s *No Place To Go: Local Histories of the Battered Women’s Shelter Movement* illustrates the importance of local and regional perspectives in understanding the history of feminist service-based movements in Canada. Janovicek identified the particular barriers feminist organizers faced in rural communities to challenge the historical trope that “feminist ideas began in urban centres and spread to small towns.”²⁶ By exploring the history of battered women’s shelters and women’s anti-violence organizing from local and regional perspectives Janovicek illustrates that activists’ on-the-ground work did not always align with national goals of legislations. Rather, her monograph underscores that “women’s needs, rather than government priorities, were the basis of their [the shelters’] services.”²⁷ Like Janovicek, my work utilizes local and regional perspectives to illuminate on-the-ground, community-directed reproductive health services offered at local birth control centres in 1970s southern Alberta.

This dissertation also illustrates why regional studies beyond the urban centers of Toronto, Vancouver, and Montreal, in particular, offer important narratives about activism in Canada. Valerie Korinek’s *Prairie Fairies* has already drawn attention to why historical studies about sexuality and queer history need to be more geographically diverse. Her work disrupts the fallacy that queer

²⁴ Alan Artibise, *Prairie Urban Development, 1970-1930*, (Ottawa: Canadian Historical Association, 2018), 5.

²⁵ Artibise, *Prairie Urban Development*, 6.

²⁶ Nancy Janovicek, *No Place To Go: Local Histories of the Battered Women’s Shelter Movement*, (Vancouver: University of British Columbia Press, 2007), 2.

²⁷ Janovicek, *No Place To Go*, 3.

people and movements can only exist within large urban centres.²⁸ She asserts that the “‘imagined prairies’ are quite different from the realities of these ‘modern’ cities.”²⁹

Much like Janovicek and Korinek’s arguments about women’s and queer activisms, the history of reproductive and sexual health activism benefits from a more diverse geographical scope. When histories of activism are limited to large urban settings, rural experiences are often rendered invisible or insignificant. The idea that urban dwellers are more inherently progressive than their rural counterparts has been perpetuated by focusing on urban spaces and maintaining a distinct binary understanding of urban and rural life. This dissertation focuses on the work of two urban prairie birth control centres and examines their reach into rural spaces. It considers why rural communities did not and could not establish birth control centres of their own. A focus on these Albertan centres underlines the connection between rural and urban spaces and people. This dissertation challenges the concept that rural communities are less prone to activism, much less feminist activism.

The proximity of urban and rural spaces in the Canadian Prairies offers a regionally specific lens into activist activities in the 1970s. Citizens in the small but rapidly growing cities of Calgary and Lethbridge as well as the surrounding rural communities, were not restricted by city boundaries.³⁰ Urban and rural residents travelled to other cities, towns, and communities often to visit family, access health services, pick up supplies, or on their way to enjoy outdoor activities in the mountains or grasslands.³¹ Korinek has shown this culture of travel and community building extended to activist communities as well.³² Janovicek has shown how Indigenous communities interacted with and participated in small town women’s movements.³³ Likewise, Indigenous reserves, small towns, and prairie cities often shared borders, services, and spaces in southern Alberta. Indigenous nations

²⁸ Korinek, *Prairie Fairies*, (2018).

²⁹ Korinek, *Prairie Fairies*, 10.

³⁰ Calgary’s population was 249,641 people in 1961 and 469,917 in 1976, and Lethbridge’s population of 35,454 people in 1961 and 46,752 in 1976. “Table 6: Population by census subdivisions, 1901-1961,” (*1961 Census of Canada Volume I: Population*, Ottawa: Statistics Canada, 1963), 6.77-6.83; “Table 3: Population for census divisions and subdivisions, 1971 and 1976,” (*1976 Census of Canada Volume I: Population, Geographic Distributions*, Ottawa: Statistics Canada, 1977), 3.40–3.43.

³¹ See, for example, description of Lethbridge and the surrounding area in: Judy Burgess and John Martini, “Proposal Family Planning Division Department of National Health and Welfare” (1972), GR1983-0133, box 1, file 5, found in “Lethbridge Birth Control Association,” PAA.

³² Korinek, *Prairie Fairies*, 23-24.

³³ Janovicek, *No Place To Go*, 10-14.

like the Tsuut'ina, the Siksika, and the Stoney Nakoda neighbored Calgary, Chestermere, and Strathmore. The proximity of the city of Lethbridge, the town of Cardston, and the Kainai Nation illuminates that cities, reserves, and religious towns often shared close quarters in southern Alberta. The town of Cardston, which housed the only Mormon temple in the province for over seventy-five years, lies directly across a small highway from the Kainai Nation. Both an hour's drive from Lethbridge, a fork in the road on Alberta's Highway 5 directs you to turn right to enter the Kainai reserve and left to enter the town of Cardston. Recognizing the proximity of these two communities, CBCA activists often scheduled educational outreach sessions at Cardston and the Kainai Nation on the same day.³⁴ The borders separating spaces, and presumptively communities, are not as cut and dry as they may seem on a map.

Increasing university enrollment and activist youth activities meant that prairie people were travelling more during the 1970s as well. With the establishment of the University of Calgary (1966) and the University of Lethbridge (1967), increasing numbers of young Albertans travelled to attend these Universities in the late 1960s and early 1970s.³⁵ Often students from out of town or province then visited friends' homes across the province for long weekends or holidays.³⁶ Student journalists and activists also travelled across the province and to other provinces frequently during the 1970s to organize activist campaigns. Oral history narrator Judy Burgess recalls going by bus to Edmonton in

³⁴ CBCA Local Initiatives Project, Spring 1973, in "Education Outreach, Local Initiatives Project, 1973," M-7265-111, *CBCA Collection GA*.

³⁵ Originally the University of Alberta - Calgary Campus (established in 1908), the University of Calgary was granted autonomy from the University of Alberta in 1966. A year later, the University of Lethbridge was established. See: the University of Calgary, "Our history," [ucalgary.ca](https://www.ucalgary.ca/about/our-story/our-history), last visited May 28, 2020, <https://www.ucalgary.ca/about/our-story/our-history>; James Tagg, "The Early Years: 1967-late 1970s," *UofL History: The Evolution of Campus*, [uleth.ca](https://blogs.ulethbridge.ca/50-years/the-early-years/), <https://blogs.ulethbridge.ca/50-years/the-early-years/>.

Several oral history narrators and letter-writers site the establishment of local universities as an influx of youth into the southern Alberta cities. Lethbridge, in particular, saw a significant shift in population size and demographic following the establishment of the UofL in 1967. See: JB, interview, Oct. 9, 2014, transcript, GMA; Rita Moir, interview with Karissa Patton, October 7, 2014, transcript (RM interview, Oct. 7, 2014, transcript, GMA); Luba Lisun, interview with Karissa Patton, December 1, 2015, transcript (LL, interview, Dec. 1, 2014, GMA); Mary Bochenko, interviewed with Karissa Patton, January 27, 2015, transcript (MB, interview, Jan. 27, 2015, transcript, GMA); interviews and transcripts can be found in "Oral History Project: Student Reproductive Rights Activism in Southern Alberta during the 1960s and 1970s," 20171019, at the Galt Museum and Archives, Lethbridge, Alberta; "Letters and Petitions Re: Funding of Birth Control Centre 1974," 2011.1085 069, in *Early City Record Collection* at the Galt Museum and Archives, Lethbridge (ECRC GMA).

³⁶ LL, interview, Oct. 7, 2014, transcript, GMA; MB, interview, Jan. 27, 2015, GMA.

1971 for a meeting of Alberta post-secondary student governments.³⁷ The inclusion of hitchhiking as part of the youth counterculture made it even easier for youth to travel to and from activist events.³⁸ Oral history narrator Rita Moir remembers regularly hitchhiking across Canada to different activist activities, including visits to Saskatoon to work on the Women's Liberation Press.³⁹ Rita, like many other women who worked at the southern Alberta birth control centres, did not grow up in the region, while many women from the CBCA and LBCIC like Judy Burgess had always called Alberta home.⁴⁰ Students, youth, and activists in the Prairie region were not confined to the limits of the city, town, or community borders. Youth were part of the Prairie culture of travelling long distances to build and maintain their communities.

The birth control centre activists and their clients also navigated these geographic and social landscapes beyond their homes. The birth control centres may seem on the surface to be local services but studying their movements and interactions with clients reveals their reach across the province – and even, sometimes beyond the provincial borders. Both the LBCIC introduced rural educational outreach programs in the early 1970s, creating opportunities that allowed urban activists and clients in rural areas to interact regularly.⁴¹ Many clients from rural communities would stop in at the birth control centres or write letters to the centres requesting advice if they could not make the trip into the city.⁴² Likewise, activists saw Indigenous clients at the urban birth control centres and reserves when they presented educational material.⁴³ Where people lived, and how they engaged with

³⁷ JB, interview Oct. 9, 2014, transcript, GMA.

³⁸ Linda Mahood, *Thumbing a Ride: Hitchhikers, Hostels, and Counterculture in Canada*, (Vancouver: University of British Columbia Press, 2018).

³⁹ Rita Moir, interview with Karissa Patton, December 13, 2012, transcript. Interviews and transcripts housed in “Oral History Project: Students’ Reproductive Rights Activism in Southern Alberta during the 1960s and 1970, 20171019, at the Galt Museum and Archives, Lethbridge, Alberta (RM, interview, Dec. 13, 2012, transcript, GMA).

⁴⁰ RM, interview, Dec. 13, 2012, transcript, GMA; JB, interview Oct. 9, 2014, transcript, GMA.

⁴¹ “Educational Outreach, 11968-1973,” M-7265-99; “Educational Outreach, 1974-1976,” M-7265-100; Educational Outreach, 1978,” M-7265-101, *CBCA Collection GA*.

⁴² See, for example, CBCA Progress Report June 1, 1972, pg. 40 in “History 1971-1975,” M-7265-185; LIP Grant Report, pg. 3, found in “Educational Outreach: Local initiatives Project, 1973,” M-7265-111; Letter to the CBCA from Laurence Epp, March 7, 1973; letter to the CBCA from Mrs. E. Hauck, c. November 1972; letter to the CBCA from Bill Warrener, September 28, 1972; letter to CBCA from Mary-Del Kells, December 15, 1972; letter to CBCA from Mrs. C. Glasier, October 4, 1972. In “Correspondence 1972,” M-7265-80; letter to the CBCA from Mr. and Mrs. J. McAuley, April 26, 1973. In “Correspondence 1973,” M-7265-81, *CBCA Collection GA*.

⁴³ See, for example, Letter to Leslie Bella from Martha Weir, November 21, 1974, in “Funding Source Health and Welfare,” M-7265-164; Notes from Jean December 15, 1972, in

the centres created fluid and dynamic patterns of interaction. The activists at the LBCIC and the CBCA even formed alliances with religious communities in urban and rural spaces in the province, in ways that challenged their urban, and mostly White, perspectives. Even with their many trips across the province, birth control centre activists often had to reframe their curricula and services to fit a variety of needs. Within the histories of the Calgary Association and the Lethbridge Centre are stories of settler-Indigenous relations, religious groups taking part (however big or small their efforts) in reproductive rights activism, and rural women teaching urban activists with their knowledge about the physiology of reproduction. While recognizing the boundaries between urban and rural, Indigenous and settler, youth and adult communities, in the case of reproductive activism these divisions were often blurred.

This dissertation challenges assumptions about so-called conservative spaces and activism. Narrator Luba Lisun recalled that even though Lethbridge was so close to “Cardston and Mormon towns,” and other religious counties, “it didn’t matter somehow, we just went ahead [with their activism].”⁴⁴ Similarly, Rita Moir remembered that she often found “pockets of feminists my age in those little conservative towns [in rural Alberta].”⁴⁵ Lisun and Moir’s memories of a strong women’s activist community that extended to rural and religious spaces challenge the region’s Bible Belt reputation as monolithically conservative. This study contributes to the growing body of literature that challenges the trope of the prairies as impenetrably heteronormative and complicit as a sexually repressed space.⁴⁶

This regional perspective is especially significant for Canadian histories of health because of the division of powers between federal and provincial governments and their respective influence on healthcare services. While the Canadian *Medical Care Act* federally mandated government healthcare in 1966, the design and implementation of Medicare remained under provincial jurisdiction. As provincial governments created their healthcare systems that conformed with the principles of

“Board Information Package 1977-1978,” M-7265-39; “Peer Education Community Outreach,” pg. 1, M-7265-101, *CBCA Collection* GA.

⁴⁴ LL, interview, Dec. 1, 2014, transcript, GMA.

⁴⁵ RM, interview, Oct. 7, 2014, transcript, GMA; also see *Up*, “Coalhurst Women,” vol. 1, no. 1 May 27, 1974.

⁴⁶ Leon Crane Bear, Larry Hannant, and Karissa Patton, eds, *Bucking Conservatism: Alternative Stories of Alberta from the 1960s and 1970s*, forthcoming, (Edmonton: Athabasca University Press, 2020); Sarah Carter and Nanci Langford, (eds) *Compelled to Act: Histories of Women’s Activism in Western Canada*, (Winnipeg: University of Manitoba Press, 2020); Korinek, *Prairie Fairies*, 2018; Candice Klein, “Sex in the City: Saskatoon was a Wide-Open Town!” *Folklore Magazine*, Forthcoming (Autumn 2020).

Medicare, the federal government introduced Omnibus Bill C-150. Tabled in 1967 and passed in May 1969, Bill C-150 amended the *Canadian Criminal Code*, decriminalizing birth control and partially decriminalizing abortion and homosexuality. Following these amendments to the *Criminal Code* in 1969, abortion was legalized but only performed if first approved by a Therapeutic Abortion Committee. These TACs had to include at least three medical doctors working within an accredited hospital. In the prairies, this meant that only doctors working at hospitals mostly in urban centres performed abortions. It remained illegal for midwives and physicians in private practice, who worked outside of cities or towns with hospitals, to perform the procedure. It is also important to note that not all hospitals had a TAC. For people living in rural communities, this meant a multi-hour drive just to attend a first meeting with a TAC. Then, if they were lucky enough that the TAC approved their abortion, these women had to schedule another long trip back to the urban hospital for the abortion procedure itself.

As the rules and regulations of the TACs trickled down from federal bill to local hospital boards, provincial legislation on healthcare was left to catch up. Historian Lianne McTavish has written about the gaps in abortion provision in New Brunswick due to the disconnect between the federal *Medical Care Act* and respective provincial healthcare policy. While the federal government may have decriminalized birth control and partially decriminalized abortion in 1969, it became incumbent upon individual provinces to decide how to incorporate reproductive and sexual health services into their healthcare systems.⁴⁷ The province of Alberta, for example, launched Alberta Healthcare the same year the federal government passed Omnibus Bill C-150. The unfortunate timing of both major legislative events meant that birth control, abortion, and other reproductive and sexual health services remained in bureaucratic limbo for almost a decade until officially integrated into Alberta Healthcare between 1978 and 1979.⁴⁸

To fill the voids in the new healthcare bureaucracy, activists and some medical professionals established alternative reproductive health models, services, and education plans. Stories of organizations like the Lethbridge Centre and the Calgary Association illustrate how activists created these alternative reproductive health spaces and provided safe and accessible reproductive health

⁴⁷ McTavish, “Abortion in New Brunswick,” (2015).

⁴⁸ Terri Forbis, interviewed with Karissa Patton, January 24, 2013, transcript. Interview and transcript can be found in “Oral History Project: Student Reproductive Rights Activism in Southern Alberta during the 1960s and 1970s,” 20171019, at the Galt Museum and Archives, Lethbridge, Alberta (TF, interview, Jan. 24, 2013, transcript, GMA).

services and education. The work at these centres does not mirror the “high profile”⁴⁹ of some reproductive rights activism like the feminist trek from Vancouver to Ottawa in 1970 to protest the paternalism of the TACs, famously known as Abortion Caravan, or the critical Morgentaler trials in Montreal that eventually led to the 1988 Supreme Court decision that abortion was a decision between a woman and her doctor.⁵⁰ The activists at the LBCIC and CBCA certainly supported these endeavours, but while others fought the legal barriers to reproductive rights, the Centre and the Association activists worked on a grassroots level to bring immediate care to women in their communities.

Recognizing Women’s Reproductive Activism & Labour

By adding the stories of the LBCIC and CBCA to the historical narrative of Canadian reproductive rights activism, this dissertation recognizes the birth control centre activists and their clients for the significant change they inspired within the country’s “Bible Belt.” This study questions why activists like the women who established, ran, and visited the birth control centres in southern Alberta take up such little space in the narratives about Canada’s activist history. Public and political discussion about newly legal abortion and contraception in the 1970s positioned Alberta, and Calgary in particular, as a place where abortions were readily available. By 1975 the *Calgary Herald* reported that Calgary, along with cities like Vancouver, Toronto, and Hamilton, was considered one of “the easiest Canadian cities in which to get a legal abortion.”⁵¹ Opponents of the new decriminalized abortion services pointed to Calgary in the 1970s as a hotbed of abortion procedures. For example, Alberta MP Douglas Roche – a steady opponent of the CBCA in particular – complained about the high number of abortion procedures performed in Alberta.⁵² While historical accounts point to Alberta as a place where new reproductive rights were enthusiastically put into action in the 1970s, the topic of reproductive health activism and labour is taken up in one scholarly article by Beth Palmer.⁵³ As Palmer argues, and this dissertation shows,

⁴⁹ Palmer, “‘Lonely, Tragic, but Legally Necessary Pilgrimages’,” 637-664.

⁵⁰ Palmer, “‘Lonely, Tragic, but Legally Necessary Pilgrimages’,” 637-664; Stettner, “‘He is Still Unwanted’,” 151-171.

⁵¹ “For and Against Factions Don’t Even Agree on Names,” *Calgary Herald*, August 2, 1975, pg. 25, news clipping found in “Lethbridge Birth Control Association,” GR1983-0133, box 1, file 1, PAA.

⁵² Douglas Roche, “Tighten the Abortion Law,” *Prairie Messenger*, March 16, 1975, 14.

⁵³ Palmer, “‘Lonely, Tragic, but Legally Necessary Pilgrimages’,” 637-664.

including the on-the-ground work of birth control centre activists in places like Calgary exposes important historical actors who shaped local and regional healthcare landscapes.

Post-decriminalization, Albertan activists were busy. In fact, Alberta had a high number of new family planning programs throughout the 1970s. According to files from the Alberta Family Planning Co-ordinating Committee, by 1972 there were eleven nationally funded family planning endeavours in the province, which expanded to include four additional projects in 1973 and 1974. Family planning and human sexuality projects that did not receive national funding, such as the Alberta Sexual Education Institute, also popped up across the province at this time.⁵⁴ The number of family planning projects that emerged in the early and mid-1970s marked Alberta and Ontario as the leading provinces for federally funded birth control initiatives.⁵⁵ In fact, the two provinces switched between having the first- and second-most funded family planning projects from year to year and even tied in 1972/1973 with eleven funded projects in each province. Considering the difference in population between the two provinces,⁵⁶ the number of Albertan family planning projects funded in the mid-1970s is significant.

The federally funded family planning initiatives in Alberta included a variety of programs. Some were research based, like the University of Alberta's Department of Community Medicine's research on service model development. Most of the funded projects were service based and focused on immediate and on-the-ground work needed in their communities.⁵⁷ For example, many Health Units, such as the Drumheller Health Region, established family planning clinics within their

⁵⁴ "Alberta Sexual Education Institute," M-7256-23, *CBCA Collection* GA.

⁵⁵ Chart compiled by Alberta Family Planning Co-ordinating Committee in 1972; Chart compiled by Alberta Family Planning Co-ordinating Committee in 1973; Chart compiled by Alberta Family Planning Co-ordinating Committee in 1974; Chart compiled by Alberta Family Planning Co-ordinating Committee in 1975. All Found in "Alberta Family Planning Co-Ordinating Committee 1975," M-7265-20, *CBCA Collection* GA.

⁵⁶ In 1971 Alberta had a population of 1,627,874 people, while Ontario had a population of 7,703,106 people. See "Table A2-14 Population of Canada, by province, census dates, 1851 to 1976," Historical Statistics of Canada, Section A: Population and Migration, [StatisticsCanada.ca](https://www150.statcan.gc.ca/n1/pub/11-516-x/sectiona/4147436-eng.htm), last accessed July 31, 2020, <https://www150.statcan.gc.ca/n1/pub/11-516-x/sectiona/4147436-eng.htm>.

⁵⁷ Chart compiled by Alberta Family Planning Co-ordinating Committee in 1972; Chart compiled by Alberta Family Planning Co-ordinating Committee in 1973; Chart compiled by Alberta Family Planning Co-ordinating Committee in 1974; Chart compiled by Alberta Family Planning Co-ordinating Committee in 1975. All Found in "Alberta Family Planning Co-Ordinating Committee 1975," M-7265-20, *CBCA Collection* GA. See Appendix for more detail.

existing practices.⁵⁸ Similarly, Indigenous homemakers' clubs and friendship centres, like the Slave Lake Friendship Centre, began offering family planning education and information in 1973.⁵⁹ Additionally, three new birth control and family planning centers were established in Edmonton, Calgary, and Lethbridge in the early 1970s.⁶⁰

Of the many family planning initiatives emerging in Alberta during the 1970s, the CBCA and LBCIC stood out as hubs of reproductive and sexual health activism and service provision. The Association and the Centre differed from many of the other family planning endeavours coming about in the early 1970s for several reasons. First, the CBCA and the LBCIC were brand new entities. Neither was established within the confines of an existing service or clinic. Because they were autonomous entities, they were not confined by existing bureaucracy or regulations. In other words, because the organizations started from scratch, they designed their services, programs, structure, and space the way they wanted. Secondly, both the Centre and the Association were the result of activist collaborations with medical professionals, politicians, and community members. These collaborations set up the CBCA and the LBCIC with widespread support and success in the 1970s. In the middle of the country's so-called Bible Belt, the LBCIC and the CBCA served as main hubs for reproductive and sexual health services and education in the Southern Alberta region, and, even, sometimes beyond.

Even compared with their sister organization in Edmonton, the CBCA and the LBCIC had a broader scope of services, resulting in a larger clientele but also more opposition. In 1976, for example, activists from the CBCA met with provincial Minister of Social Services and Community Health Helen Huntley to explain why they had such a vocal "anti-[CBCA] group" in Calgary. (The province suspended the CBCA's funding in late 1975 due to various complaints to the province.)

⁵⁸ Letter from A. Thompson to the CBCA, March 5, 1973, in "Education Outreach – Requests for Materials," M-7265-112, *CBCA Collection* GA; Proposal for Family Planning Education – Drumheller Health Unit, found in "Lethbridge Birth Control Association," GR1983-0133, box 1, file 1, PAA.

⁵⁹ Letter from Dorothee Haenschke to Rosalee Lewis, August 31, 1973, found in "Correspondence 1973," M-7265-82; Chart compiled by Alberta Family Planning Co-ordinating Committee in 1974, found in "Alberta Family Planning Co-Ordinating Committee 1975," M-7265-20, *CBCA Collection* GA. See Appendix for more detail.

⁶⁰ Chart compiled by Alberta Family Planning Co-ordinating Committee in 1972; Chart compiled by Alberta Family Planning Co-ordinating Committee in 1973; Chart compiled by Alberta Family Planning Co-ordinating Committee in 1974; Chart compiled by Alberta Family Planning Co-ordinating Committee in 1975. All Found in "Alberta Family Planning Co-Ordinating Committee 1975," M-7265-20, *CBCA Collection* GA. See Appendix for more detail.

During the meeting, the CBCA activists explained that their more explicit relationship with abortion activism drew more opposition than their Edmonton sisters. They explained that the differences in opposition to the local birth control centres in each city were related to the local health region's policies on abortion. For example, Edmonton doctors did not perform saline abortions and required a husband's consent for abortion procedures, limiting abortion options and access significantly compared to Calgary. Additionally, the activists explained that the Edmonton Family Planning Association did not offer pregnancy testing, which meant that they had fewer opportunities for abortion counselling than the CBCA. The Calgary Association's public stance on abortion, their referral services and relationships with doctors and TACs across the province created a unique space where their vocal opposition exceeded that of other birth control centres in the province.⁶¹ With this explanation, the CBCA was able to secure future provincial funding. The activists made a name for themselves for putting the community needs above backlash or lack of funding.

Similarly, the Lethbridge Centre had remarkable success in the 1970s compared to other small Alberta cities like Drumheller or Red Deer. In Drumheller, for example, the local health unit opened a family planning clinic that provided birth control prescription appointments and information pamphlets. Run by their local Health Unit, the Drumheller Family planning Clinic originally proposed evening educational classes and clinical services. Their plan "was not found to be appealing to the community."⁶² The Drumheller Family Planning Clinic scaled back their initial plans to include by-request educational presentations for local schools and community groups. The Health Unit running the Family Planning Clinic often relied on the CBCA for advice and resources.⁶³ In the first year of the project, one public health nurse worked one day per week to provide these educational presentations in Drumheller and area.⁶⁴ The birth control centre in Red Deer did not fare as well. Funded by an Opportunities for Youth Summer grant and run by students and youth, the Central Alberta Birth Control & Information Centre ran from June to September 1973. After much public debate in the local newspaper, the *Red Deer Advocate*, the Central Alberta centre's

⁶¹ Minutes from Meeting with Honourable Helen Huntley January 19, 1976, in "Abortion (Research – Foothills Hospital)," M-7265-15, found *CBCA Collection GA*.

⁶² Letter from A. Thomson to the CBCA, March 5, 1973, in "Education Outreach: Requests for Materials," M-7265-112, *CBCA Collection GA*.

⁶³ Letter from A. Thomson to the CBCA, March 5, 1973, in "Education Outreach: Requests for Materials," M-7265-112, *CBCA Collection GA*.

⁶⁴ Letter from A. Thompson to Family Planning, Health and Welfare Canada, August 20, 1975; Drumheller Health Unit, "Funding Proposal for Family Planning Education, December 1975," in "Drumheller, 1972-1975," GR1983.0133 Box 1, File 1, PAA.

services were discontinued when their grant ended in September.⁶⁵ Unlike the short-lived small city birth control centres in Drumheller and Red Deer, the LBCIC thrived from 1972-1978.

The LBCIC and the CBCA owed their success to their work with their clients to determine what services were needed on-the-ground across various communities, but this approach also meant they were constantly adapting their programs to suit the needs of their clients. The activists' urban and mostly White perspectives meant that the activists often had to go back to the drawing board – especially when it came to providing services for Indigenous women, women from rural communities, and teenagers. Nevertheless, their client-directed approach was effective. Both centres experienced a steady increase in the number of clients, educational outreach requests, and professional alliances across the decade. The CBCA and LBCIC administrative statistics alone denotes the popularity of both centres.⁶⁶ For example, from just January to June of 1973, the CBCA activists had answered 834 office telephone calls, received 561 office visits by appointment or walk-in, and facilitated ninety educational presentations that reached approximately 2083 people.⁶⁷ The LBCIC, comparatively, reached 603 people through their in-office services like counselling and pregnancy testing, with an additional 320 people attending the Centre's workshops.⁶⁸ By 1974, the LBCIC had provided personal or education service to over 2697 people.⁶⁹ By the end of the decade,

⁶⁵ See several news clippings from the *Red Deer Advocate* between June 5-29, 1973 in "Correspondence, 1973," M-7265-82, *CBCA Collection* GA.

⁶⁶ CBCA Newsletter May 3, 1972, in "Newsletters 1971-1974," M-7265-240; Speaking forum statistics of CBCA from January to March 1977 in "Abortion (Research- Foothills Hospital)," M-7265-15; CBCA Statistics for January-June 1979 in "Strategy Committee 1978," M-7265-66; "Letter Writing Campaigns 1977-1978," M-7265-189; CBCA Statistics for January-June 1979 in "Strategy Committee 1978," M-7265-66; "Operating Statistics for year of 1976," in "Educational outreach, 1974-1976," M-7265-100; Calgary Birth Control Association Fact Sheet, January 1 to June 30, 1973, in "Educational outreach, 1968-1973," M-7265-99, *CBCA Collection* GA. Lethbridge Birth Control and Information Centre Review of Budget and Programs for January 1, 1974 to November 8, 1974; "Proposal of Budget and Programs for 1975: Presented to the City of Lethbridge, the Province of Alberta Department of Preventative Social Services, and Family Planning Federation of Canada", *LBCIC 1973-1975* GMA. "Lethbridge Birth Control and Information Centre Annual Report and Evaluation, 1973 and Budget, 1974," November 1973, found in "Lethbridge Birth Control Association," GR1983-0133, box 1, file 5, PAA.

⁶⁷ "Calgary Birth Control Association Fact Sheet," January 1 to June 30, 1973, in "Educational outreach, 1968-1973," M-7265-99, *CBCA Collection* GA.

⁶⁸ "Lethbridge Birth Control and Information Centre Annual Report and evaluation, 1973 and Budget, 1974," November 1973, found in "Lethbridge Birth Control Association," GR1983-0133, box 1 file 5, PAA.

⁶⁹ "Lethbridge Birth Control and Information Centre Review of Budget and Programs for January 1, 1974 to November 8, 1974;" "Proposal of Budget and Programs for 1975: Presented to

the birth control centres were each serving a significant number of clients. In 1978, the CBCA alone reached 11,006 people through their office and outreach services.⁷⁰

It was the dedication to clients' needs and lived experiences and the centres' autonomy from existing medical clinics or social services that set their services apart from other family planning initiatives in the province. The paid and volunteer labour of activists at the CBCA and LBCIC is a significant part of the provincial and national histories of activism, feminism, reproduction, and healthcare in Canada. The stories captured in this dissertation expose a prairie-style activism, similarly outlined by Korinek and others,⁷¹ that privileged cooperation. These stories reveal the impact that women's on-the-ground organizing had within political, medical, and social spheres during the 1970s.

Sources & Chapter Overview

To gain insight into the politics of reproductive healthcare and women's liberation in 1970s Southern Alberta, I utilized several archival collections. Most significantly, I relied on the Calgary Birth Control Association Collection at the Glenbow Archives, the Lethbridge Birth Control and Information Centre fonds and the Papers of the Lethbridge Birth Control and Information Centre at the Galt Museum & Archives, the Voice of Alberta Native Women's Society (VANWS) Papers at the Provincial Archives of Alberta, and the VANWS conference reports at the University of Ottawa's Women's Movement Archives. The CBCA collection is by far the largest body of documents I examined. This comprehensive collection was invaluable in the creation of this dissertation. Because of the wealth of material available, these records allow for a more fulsome investigation of the CBCA's history. The LBCIC's fonds at the Galt are tiny in comparison but just as valuable to this dissertation.

the City of Lethbridge, the Province of Alberta Department of Preventative Social Services, and Family Planning Federation of Canada," *LBCIC, 1973-1975* GMA.

⁷⁰ CBCA Statistics for 1978 in "Strategy Committee 1978," M-7265-66, *CBCA Collection* GA.

⁷¹ Korinek, *Prairie Fairies*, 11; Erika Dyck and Karissa Patton, "Activists in the 'Bible Belt': Conservatism, Religion, and Recognizing Reproductive Rights in 1970s Southern Alberta," in *Compelled to Act: Histories of Women's Activism in Western Canada*, edited by Sarah Carter and Nanci Langford, (Winnipeg: University of Manitoba Press, 2020), 209-210; Karissa Patton, "Contraception, Community, and Controversy: The Lethbridge Birth Control and Information Centre, 1972-1978," in *Bucking Conservatism: Alternative Stories of Alberta from the 1960s and 1970s*, edited by Leon Crane Bear, Larry Hannant, and Karissa Robyn Patton, (Edmonton: Athabasca University Press, 2020).

In an attempt to balance the scales, I utilized ten oral history interviews, conducted between 2012 and 2017, with six women active at the LBCIC during the 1970s. After identifying a list of historical actors from the LBCIC archival files, I was able to find and connect with Judy Burgess, Rita Moir, Luba Lisun, Mary Bochenko, and Terri Forbis. During initial interviews narrators offered names of others I should interview. But many of the women I spoke to had lost touch with their LBCIC colleagues over the years so I had to find contact information for these narrators on my own. Burgess, Moir, Lisun, Bochenko, and Forbis were still active in health, community, and labour issues in the early 2010s so it was easier to connect with them because their work contact information was available online. After a few years of searching for Pauline Hoskin, I was able to connect with her after she donated her personal files from the LBCIC to the Galt Museum and Archives in 2017, alerting me to her continued interest in this topic. As my research on the southern Alberta birth control centres has progressed it has become more and more challenging to find narrators who I identified in the CBCA, LBCIC, and VANWS archival collections. Those I identified in the archival records had often relocated, and I had few resources to track them down.⁷² Others, sadly, had passed away. Fortunately, however, oral history narrators Burgess, Moir, Forbis, Lisun, Bochenko, and Hoskin generously shared their memories and experiences as feminist activists in Lethbridge with me, some of them more than once. These particular interviews include stories about the narrators' work at the LBCIC as staff, volunteers, or their role as supporters of the Lethbridge Centre in the 1970s. These interviews are essential because they flesh out the limited archival material on the LBCIC with the narrators' lived experiences. While the LBCIC may take up less space in parts of this dissertation, these oral history interviews amplify the voices of women active at the LBCIC in the 1970s.

It was clear to me that many of the women involved with the LBCIC and CBCA continued their activism beyond the 1970s. Many of the oral history narrators included in this dissertation had continued their health and community activism as health practitioners (in the cases of Burgess, Bochenko, and Forbis), labour organizers (like Lisun), and activist journalists (like Moir). But all of the women who shared their histories of the LBCIC and CBCA through oral interviews and archival donations offered an expertise that is invaluable to this dissertation. In true herstory fashion these personal and archival files and shared memories became part of a larger multi-decade and multi-generational political agenda to carve out space for women's activism in Alberta.

⁷² The almost near extinction of phonebooks has made it increasingly hard to find and contact historical actors for the 1970s, especially because many do not have an online presence.

These oral history interviews and some files from the CBCA archival collection utilized in this dissertation provides important biographical information about the women who ran these southern Alberta birth control centres during the 1970s. The archival files do not provide much information about employees or volunteers at the LBCIC or CBCA, apart from their names and, sometimes, their occupations. Based on these records, women from a variety of occupational and class backgrounds came together to establish and run these birth control centres in the 1970s. For instance, the women involved in the CAIC/CBCA and the LBCIC were teachers, university students, secretaries, bookstore clerks, housewives, social workers, nurses, physiologists, and geological technicians.⁷³ The oral history interviews analyzed in this dissertation also reveal that women who worked and volunteered at the LBCIC came from a variety of backgrounds: Pauline Hoskin was a mother of two and married to a Pastor-in-training when she worked at the LBCIC.⁷⁴ Women who ran the LBCIC like Hoskin and her predecessor Judy Burgess were nurses with public health work experience.⁷⁵ Many others who volunteered and supported the LBCIC were local students and activists like, Rita Moir, Luba Lisun, and Mary Bochenko.⁷⁶

Unlike occupation, race was not explicitly discussed in the archival files about LBCIC and CBCA employees and volunteers. Based on photographs from the CBCA archival collection, most of the women who worked at the Association, like the women who worked at the LBCIC, were

⁷³ “Notebook kept by Martha Weir” M-7265-12; “Origins of the CBCA” in “Evaluation of the CBCA – In-house Evaluation Project, 1979-1980,” M-7265-122, all found in the *CBCA Collection*, GA; “Lethbridge Birth Control and Information Centre Review of Budget and Programs for January 1, 1974 to November 8, 1974;” “Proposal of Budget and Programs for 1975: Presented to the City of Lethbridge, the Province of Alberta Department of Preventative Social Services, and Family Planning Federation of Canada,” *LBCIC, 1973-1975* GMA.

⁷⁴ Pauline Hoskin, interview with Karissa Patton December 20, 2017, transcript (PH, interview, Dec. 20, 2017, transcript).

⁷⁵ JB, interview Oct. 9, 2014, transcript, GMA.

⁷⁶ RM, interview, Dec. 13, 2012, transcript, GMA; Luba Lisun, interview with Karissa Patton, December 1, 2015, transcript (LL, interview, Dec. 1, 2014, GMA); Mary Bochenko, interviewed with Karissa Patton, January 27, 2015, transcript (MB, interview, Jan. 27, 2015, transcript, GMA).

White.⁷⁷ The only woman who worked at the CBCA during the decade and is explicitly identified as Indigenous was Dorreen Eaglespeaker.⁷⁸

The two VANWS collections provided a much-needed counter-narrative about the priorities of the predominately White perspective in women's rights activism in the province during the 1970s. These collections, along with the digital collection of the *Kainai News* at the University of Lethbridge Archives, provided an Indigenous perspective on birth control, abortion, health, women's rights and liberation, teen pregnancy, family, and adoption. When put in conversation with the birth control centres' institutional collections and oral interviews, these archival sources help to draw a broader picture of the conversations around reproductive rights, women's liberation, and reproductive rights in Alberta in the 1970s.

This dissertation is divided into five chapters. Chapter one explores political, economic, moral, and medical debates about the birth control centres purpose in the region. The chapter also analyzes the important on-the-ground alliances and collaborations between the activists who ran the birth control centres, civil servants, and medical professionals to provide the services and care needed in their communities. While the province, and more specifically the region of southern Alberta, are colloquially known for its religious and political conservatism, the chapter shows that the birth control centres were part of the political, medical, and cultural landscapes of the province in the 1970s.

The birth control centre activists utilized a feminist model of health and care that privileged community feedback and women's lived experiences to create a unique healthcare space in the region. The second chapter focuses on the feminist model of health practiced in the Calgary and Lethbridge birth control centres. Following the feedback from their clients, both centres operated under a model that amalgamated biomedical knowledge, women's lived experiences, and women's liberation philosophies. In doing so, they maintained that health was holistic – physical, emotional, mental, and sexual. As the centres' models were more focused on women's experiences and client

⁷⁷ "Photographs," M-7265-279, *CBCA Collection* GA; Judy Burgess, interview with Karissa Patton, December 8, 2012, transcript (JB, interview, Dec. 8, 2012, transcript, GMA); RM interview, Oct. 7, 2014, transcript, GMA, found in "Oral History Project: Student Reproductive Rights Activism in Southern Alberta during the 1960s and 1970s," 20171019, at the Galt Museum and Archives, Lethbridge, Alberta.

⁷⁸ "Summary of Local Initiatives Projects in Family Planning: Winter 1971-1972," compiled by the Family Planning Federation of Canada, in "History 1971-1975," M-7265-185, *CBCA Collection* GA.

feedback, educational programming became paramount to both the CBCA and LBCIC's service provision.

The third and fourth chapters of this dissertation focus on the educational programming provided by the Lethbridge Centre and Calgary Association. The two birth control centres provided educational opportunities across the province, adapting their assumptions about stigma, place, and even feminism. Chapter three analyses self-education initiatives and chapter four examines educational outreach programs provided by the birth control centres. Both of these services had a significant impact on women's lives and made considerable advances in the provision of sex and birth control education during the decade. However successful, an examination of these educational initiatives also reveals how White, urban activists often had to adapt their educational approaches – and quickly – to meet a variety of community needs that did not readily match the expectations or assumptions of the activists. Chapter three looks at the particular importance of self-educational material in the 1970s. The letters sent to the CBCA, requesting educational materials and information, underscore the significant need for self-educational opportunities during the decade, especially for youth and women living in rural communities. This chapter recognizes self-education as an important aspect of the women's health movement. But it also illuminates how the self-education literature itself contributed to the stigmatization of premarital sexuality. Chapter four examines the popular outreach programs at the birth control centres through the 1970s. Birth control centre educational staff and volunteers initially used a universal pedagogy and curriculum across the diverse communities they served. The birth control centre activists' struggles to adapt their outreach programming and to understand differences among women paralleled broader struggles in the 1970s feminist movements to conceptualize and forge "sisterhood" across diverse races, ages, and spaces.

The fifth and final chapter of the dissertation looks at programs created for pregnant women and mothers to highlight the critical connections between family planning activism and family services, foster care and adoption services in particular. More specifically, the chapter examines services for young, single pregnant women and new mothers in the 1970s. While birth control activists and civil servants created pre- and post-natal services for single women, they framed teenage motherhood as a threat to their young clients' futures. Teens enrolled in these programs were frequently encouraged to forgo motherhood until they had pursued an education and career.

The stories captured in these chapters reveal several debates about women's rights to control their fertility, the morality of pre- and extra-marital sex, and what age or social standing was suited

for parenthood. The rhetoric around individual “choice” and “fault” faced-off with calls for reproductive and sexual liberation. For example, activists called for better access to contraceptives and abortion, without spousal or parental consent. Conversely, some people used the legalization of contraceptives to blame women for unwanted pregnancies. Ideas about individual “choice” when it came to abortion and adoption were also used to characterize single mothers as selfishly abusing the welfare state. Following suit, questions about the responsibility of physicians and governments to provide health services paralleled the debates about individuals’ reproductive rights and responsibilities throughout the 1970s. Medicare policy coupled with the decriminalization of birth control, directed provincial governments to provide health services, including abortion procedures, contraception prescription appointments, and VD treatment. Throughout the decade, both birth control centres were funded through the province’s Preventative Social Services department rather than Alberta Health Services. Not recognized as health services through the government, the birth control centres became a site of debate about what counted as a health service, if their services should be included in basic healthcare, and who should pay for these services. Throughout the 1970s in southern Alberta, calls for collective rights when it came to sex, reproduction and family were met with new arguments about individual responsibility and financial burden. At the centre of these debates, the LBCIC and CBCA activists’ on-the-ground work significantly shaped the health, reproductive, and family planning politics in the province throughout the decade.

CHAPTER 1: BIRTH CONTROL CENTRES & ALBERTA: PROVINCIAL POLITICS, HEALTHCARE, & CULTURE

“The Centre is in a time of adolescence with challenging of old ways, struggling for identity, and forging out its route of being a people-helper.”¹

- Pauline Hoskin, *Unity*, June 30, 1975

“Our Centre is growing from “birth control and information” to family life education in response to our community’s requests and needs. We see the Birth Control and Information Centre, with its emphasis on education and information as a truly preventative social service.”²

- LBCIC Review and Budget Proposal,
Submitted to City of Lethbridge, November 1975

In 1975 Pauline Hoskin, then the Lethbridge Birth Control and Information Centre’s (LBCIC) coordinator, wrote these two updates about the progress of the LBCIC. The first update was published in the Centre’s newsletter *Unity* in June 1975, and the second was included in an official report and budget proposal submitted to the City of Lethbridge five months later. The quotations show how Hoskin strategically framed the centre’s work in multiple ways. When she wrote to the women who subscribed to *Unity*, she emphasized the role of the LBCIC as helping people navigate the effervescent times of the 1970s. In doing so, she signaled to the readers that the LBCIC was a safe space for women to inquire about reproductive and sexual health. Comparatively, her report to the City Council emphasized the Centre’s work in providing preventative healthcare education, signposting that the Centre’s services were also economically responsible. Hoskin knew that both municipal and, eventually, provincial government committees read the report to Lethbridge City Council, so she explicitly outlined how the Centre fit into the provincial department of Preventative Social Services. The difference in the two reports that Hoskin wrote in 1975 signifies the shrewd ways that she and other birth control centre activists navigated relationships between clients, politicians, local medical professionals, and other citizens during a time when birth control

¹ Goodbye letter from Pauline Hoskin to LBCIC membership, *Unity* vol. 1 no. 9, June 30, 1975, 20171104, found in *the Lethbridge Birth Control and Information Centre, 1973-1975*, at the Galt Museum and Archives, Lethbridge, Alberta (*LBCIC, 1973-1975*, GMA).

² “Lethbridge Birth Control and Information Centre Review of Budget and Programs for January 1, 1974 to November 8, 1974;” “Proposal of Budget and Programs for 1975: Presented to the City of Lethbridge, the Province of Alberta Department of Preventative Social Services, and Family Planning Federation of Canada,” *LBCIC, 1973-1975*, GMA.

centres provided health services that were publicly funded but not yet included in provincial healthcare policy.

The LBCIC and the Calgary Birth Control Association (CBCA) became part of the political, medical, and social spheres in their communities by carefully positioning their services as relevant to governments, healthcare professionals, and clients. When dealing with local politicians, the women who worked at the birth control centres strategically framed their services as preventative healthcare that ultimately offset costs of medical and social services for pregnant teens, abortion patients, and VD patients. As they framed their services as preventative and economically responsible, the birth control centre employees negotiated with politicians to secure funding for their reproductive and sexual health programs. Similarly, the LBCIC and CBCA benefitted from the volunteer labour and allyship of certain local medical professionals. Some doctors and nurses became volunteers and employees at their local birth control centres, while other sympathetic medical professionals forged alliances with the southern Alberta birth control centres as decriminalization opened up debates about how to integrate these services into medical practices. These sympathetic physicians and nurses even called upon the CBCA and LBCIC staff's expertise in reproductive and sexual health to inform their own practice throughout the decade. Importantly, the employees and volunteers at the birth control centres worked with their clients to make sure they provided the services needed on-the-ground in their communities. The CBCA and the LBCIC were gathering places, information centres, sex education leaders, support networks, and even a hub of expertise on the topics of reproductive and sexual health. As these relationships between birth control centres, politicians, the medical profession, and the local community developed, the CBCA and LBCIC intertwined with the local and provincial culture in the 1970s.

Throughout this decade, as ideas about birth control moved into the mainstream, debates about who had the knowledge and expertise to provide reproductive health services, who should fund the birth control centres, and what purpose the LBCIC and CBCA served in the local and provincial communities played out. The women who worked at the birth control centres and their allies shrewdly navigated these debates, forged strategic coalitions with local professionals, and built public support by strategically positioning the centres as integral features of public infrastructure and activist outreach.³ In doing so, the activists working at the birth control centres brokered financial

³ As Cathy Moran Hajo has established in her work, it was local level activism that forged significant relationships with local doctors, social workers, politicians, religious leaders, and, of course, their patients. In doing so, she argues that activism in local spaces reveals nuanced

support from municipal, provincial, and federal governments, garnered community support, and created mutually beneficial referral programs with sympathetic doctors across the province. As a result of these strategic coalitions, some doctors, nurses, and civil servants worked at the southern Alberta birth control centres or joined their boards. This chapter analyzes the establishment of the birth control centres by looking at how activists built relationships, secured funding, and debated the public utility of birth control in the immediate wake of its decriminalization. It highlights the LBCIC and CBCA as a significant part of the medical, political, and cultural landscape of the province in the 1970s, and underscores the acceptance, or at least tolerance, of the CBCA and LBCIC by a majority of physicians, politicians, and citizens in 1970s southern Alberta.

Activists After Decriminalization: Allyship, Pragmatism, & Service Provision

Even though birth control was decriminalized, and abortion made legal under the surveillance of TACs in 1969, the need for reproductive and sexual health information and education services was vast. Post-decriminalization Canadians did not instantly understand which birth control methods to use, how to get an abortion, or how the physiology of their reproductive systems worked, so information services had to be provided alongside legal contraception prescriptions and abortion procedures. Although the criminalization of the distribution of contraception and contraceptive information was removed from the *Criminal Code* in 1969, provincial health units did not automatically provide birth control services and, not all physicians chose to refer or perform abortion procedures; indeed it was not abundantly clear who was responsible for distributing contraceptive information after the legal changes. Yet, there was growing demand for information as outlined in early proposals for the LBCIC in 1971. The initial grant proposal to establish the Lethbridge Birth Control and Information Centre emphasized that in 1971 there were 114 confirmed (and 35 unconfirmed) cases of gonorrhoea and 169 “legal abortions performed”⁴ in the Lethbridge district. Despite the obvious need and use of abortion and VD health

relationships and collaborations. Cathy Moran Hajo, *Birth Control on Main Street: Organizing Clinics in the United States, 1916-1939* (Urbana: University of Illinois, 2010), 3.

⁴ Judy Burgess and John Martini, “Proposal Family Planning Division Department of National Health and Welfare” (1972), found in “Lethbridge Birth Control Association,” GR1983-0133, box 1, file 5, at the Provincial Archives of Alberta, Edmonton, Alberta (PAA); also see: Section of the 1973 Lethbridge Division of Social Hygiene, Lethbridge annual report in “Lethbridge Birth Control and Information Centre Annual Report and Evaluation, 1973 and Budget, 1974,” November 1973, found in “Lethbridge Birth Control Association,” GR1983-0133, box 1, file 5, PAA.

services in Lethbridge, and the newly legal means to discuss such topics, the LBCIC proposal explained that there were no formal services or education to deal with these specific health concerns. In Alberta during the 1970s, women were now legally allowed to ask their physicians for a birth control prescription, visit a Venereal Disease clinic, or undergo an abortion procedure at a hospital with a TAC, and Alberta Healthcare covered most of the costs.⁵ Yet, questions and barriers remained: which doctors were sympathetic to the new laws and regulations? What was an abortion, and would the procedure hurt? What kind of contraceptive method would work best for each person? How do you use condoms? Are young women who use contraception promiscuous? Is premarital sex immoral, even if unmarried couples use birth control to prevent pregnancies? Beyond these practical questions, medical professionals, civil servants, and the broader public pondered how the CBCA and the LBCIC fit into newly legislated provincial health policy, medical practice, and community life. The women who founded and ran the CBCA and LBCIC in the 1970s worked pragmatically with clients, physicians, nurses, politicians, and their communities to provide client-focused care that also met provincial healthcare needs.⁶

The debates about newly legal contraception and the role of local birth control centres divided politicians, physicians, and citizens across the province. These debates appeared in the media, letters of support for or opposition to the birth control centres, transcripts from the provincial legislature and federal house of commons, and in professional association minutes. Politicians debated the merits and drawbacks of publicly funding activist birth control centres. Physicians and nurses debated the medical utility of the CBCA and LBCIC: some medical professionals saw the services provided by the centres as advancing healthcare in their communities, while others saw the activist-run centres as a threat to their medical practice and authority. The public debated the social value of the local birth control centres: some citizens argued that the centres were a public good, while others claimed the centres were an immoral tax drain. Despite

⁵ In a letter to a client from November 20, 1972, CBCA activist Jean Phillips wrote that the doctor at their consultation clinic “charged \$50.00 over and above Medicare. Medicare pays \$67.00.” See: Letter from Maureen Sinclair to the CBCA, November 11, 1972, and letter from the CBCA to Maureen Sinclair, November 20, 1972, in “Correspondence, 1972,” M-7265-80; in a letter from the Alberta Healthcare Insurance Commission on May 9, 1973, J. M. Dewart explained that the Alberta Healthcare would cover \$58.00 for Vasectomy, \$100.00 for Tubal Ligation, \$67.00 for Vaginal Abortions – including another \$27.00 for Anaesthetic, and \$141.00 for Hysterectomies – including another \$35.00 for Anaesthetic. See Letter from J. M. Dewart to the CBCA, May 9, 1973, in “Correspondence, 1973,” M-7265-82, *CBCA Collection* GA.

⁶ See files on resource materials M-7265-347 to M-7265-394, *CBCA Collection* GA.

these divisions, many government bodies and medical associations officially recognized the need to improve reproductive and sexual health services throughout the 1970s. Likewise, some parents, teachers, and, even, church leaders recognized that the CBCA and LBCIC offered reproductive and sexual health education that was otherwise lacking in existing educational opportunities at home, school, or church.

The CBCA and LBCIC quickly built a broad and diverse base of support in their local communities, but not all of their supporters aligned with their women's health and liberation philosophies. Much of the official concerns from politicians, medical associations, and religious organizations often specifically focused on how to decrease rates of VD and abortions, how to reduce cases of teenage pregnancy, and to improve maternal health. While these objectives fit into wider discussions about improvements for women's health, they did not explicitly engage with women's liberation. But the citizens, doctors, and politicians who supported the southern Alberta birth control centres agreed that the CBCA and LBCIC provided a necessary service in their communities.

CBCA and LBCIC volunteers and employees created mutually beneficial relationships with community, political, and medical establishments, which required different kinds of political alliances that were not always overtly feminist. Neither birth control centre offered clinical services, so the women who ran them relied on sympathetic doctors and nurses in the province to provide clinical care to their clients. Both centres also relied on government funding throughout the decade, which made alliances with local, provincial, and federal politicians and civil servants integral to the centres' success. The benefits of the birth control centres' alliances with physicians and politicians went beyond service provision and funding. Having supportive medical professionals and civil servants stand behind them, enabled the LBCIC and CBCA activists to combat public claims of controversial information or unprofessionalism throughout the 1970s. Oral history narrators remember that the LBCIC's funding was less vulnerable when the activists built relationships with doctors, politicians, and the community more broadly. In her oral history interview, Terri Forbis recalls, "At that time, they [the LBCIC] were extremely controversial, and, therefore, they were vulnerable. They were vulnerable to the political winds and the people who had a lot of control – a lot of older, middle-aged men who had control over what services were being delivered."⁷ Forbis' recollections

⁷ Terri Forbis, interview with Karissa Patton, January 24, 2013, transcript. Interview and transcript housed in "Oral History Project: Students' Reproductive Rights Activism in Southern

underscore the necessity of strategic alliances between activists and local medical and political professionals to ensure the birth control centres' success. Once funding was secured from a Local Initiatives Program (LIP) grant, which required municipal, provincial, and federal government approval, activists had to maintain strong relationships with the medical and political communities in support of their next grant application. Activists involved with the centres knew that government funding kept the lights on. Certain doctors and politicians who wanted "preventative services" and the activists who ran the centres needed professional backing and government funds forged alliances to achieve their common goals.

As local doctors, nurses, civil servants, and politicians formed coalitions with their local birth control centres, some of them also volunteered their services and time to support the CBCA and LBCIC's efforts. Some of the birth control centre activists were medical professionals themselves. A nurse, Judy Burgess, and two local family doctors, Dr. Lloyd Johnston and Dr. Robert Hall, founded the LBCIC. The two Lethbridge physicians even donated the property where the centre made its home on 7th Street South in the city's downtown.⁸ In Calgary, some local health officials, like Dr. Agnes O'Neil, enthusiastically supported the CBCA. O'Neil showed her enthusiastic support of the CBCA throughout the 1970s in her role as the Director of the City of Calgary's Department of Health and, later, the Director of the Drumheller Health Region. O'Neil sent a five-dollar cheque to the organization in 1971 and became one of the first medical professional members of the CBCA.⁹ Like Burgess, many of the women, including Pauline Hoskin, Pat Schuster, and Patricia Anderson, who ran the centres throughout the 1970s were nurses.¹⁰ Other public health nurses frequently

Alberta during the 1960s and 1970, 20171019, at the Galt Museum and Archives, Lethbridge, Alberta (TF, interview, Jan. 24, 2013, transcript, GMA).

⁸ Judy Burgess, interview with Karissa Patton, December 8, 2012, transcript. Interview and transcript housed in "Oral History Project: Students' Reproductive Rights Activism in Southern Alberta during the 1960s and 1970, 20171019, at the Galt Museum and Archives, Lethbridge, Alberta (JB, interview, Dec. 8, 2014, transcript, GMA).

⁹ Letter from Dr. Agnes O'Neil, July 9, 1971, found in "Correspondence 1971," M-7265-79 *CBCA Collection GA*.

¹⁰ JB, interview, Dec. 8, 2014, transcript, GMA; PH, interview, Dec. 20, 2017, transcript; Letter from Mrs. Pat Schuster, RN, September 22, 1972, and Letter from Patricia Anderson to Dr. Hodgson, May 25, 1972, found in "Correspondence 1972," M-7265-80, *CBCA Collection GA*.

Also, according to the LBCIC's 1974 Annual Report and 1975 budget Request, volunteers like Nora Tennent were nurses. See, for example, "Lethbridge Birth Control and Information Centre Review of Budget and Programs for January 1, 1974 to November 8, 1974;" "Proposal of Budget and Programs for 1975: Presented to the City of Lethbridge, the Province of Alberta Department of Preventative Social Services, and Family Planning Federation of Canada," *LBCIC, 1973-1975 GMA*.

volunteered with the Association and the Centre to provide pregnancy testing, educational outreach classes, and prenatal courses for single women. When critics of the CBCA or LBCIC deemed the younger birth control centre staff and volunteers too young, too radical, or even unprofessional, the medical professionals and civil servants who worked with the centres provided an air of legitimacy and professionalism. But, while critics of the birth control centres sharply distinguished birth control activists from local medical or government professionals, in practice the categories of activist, medical professional, civil servant, and client often blurred. Local doctors, nurses, social workers, civil servants, teachers, and even geologists all joined youth, high school and university students, and homemakers as CBCA and LBCIC activists throughout the 1970s.¹¹ While the age, background, and feminist perspectives of the centre volunteers varied, the people who established and ran the CBCA and the LBCIC found solidarity in their calls for accessible and safe reproductive health services. Together, employees and volunteers ran the LBCIC and CBCA services effectively and efficiently, which fostered a strong sense of community.¹²

Activists who ran the birth control centres allied with sympathetic community members, medical professionals, and politicians, but they also grappled with the costs and benefits of their services becoming part of the medical mainstream, which sometimes meant downplaying their political or ideological significance when broadcasting news publicly. On the one hand, women who started and ran these birth control centres advocated for the implementation of reproductive and sexual health services into mainstream medical practice and healthcare policy. Many of the women who established the CAIC (later the CBCA), for instance, felt that the abolishment of TACs and normalizing abortion as a standard medical procedure ensured reproductive rights for women. On the other hand, many of the women who worked at the CBCA and LBCIC saw medical and

¹¹ Beth Palmer, “‘Lonely, Tragic, but Legally Necessary Pilgrimages:’ Transnational Abortion Travel in the 1970s,” *The Canadian Historical Review* Vol. 92 No.4 (2011), 663; Shannon Stettner, “‘He is Still Unwanted:’ Women’s Assertions of Authority over Abortion in Letters to the Royal Commission on the Status of Women in Canada.” *CBMH* Vol. 29 No. 1 (2012), 151-171; See: “Notebook by Martha Weir,” M-7265-12; “Origins of the CBCA” in “Evaluation of the CBCA – In-house Evaluation Project, 1979-1980,” M-7265-122, *CBCA Collection GA*.

¹² “Lethbridge Birth Control and Information Centre Review of Budget and Programs for January 1, 1974 to November 8, 1974;” “Proposal of Budget and Programs for 1975: Presented to the City of Lethbridge, the Province of Alberta Department of Preventative Social Services, and Family Planning Federation of Canada,” “Volunteerism,” Newsletter of the LBCIC, November 1, 1976, *LBCIC, 1973-1975 GMA*; “The Birth Control & Information Centre,” *Up* vol. 1 no. 7 September 10, 1974, pg. 9, HQ 1480.L47.U6, found at the University of Ottawa’s Women’s Archives, Ottawa, Ontario (UOWA); Origins of the CBCA in “Evaluation of CBCA In-House Evaluation Project, Proposal, planning, 1979-1980,” M-7265-122, *CBCA Collection GA*.

governmental institutions as inherently patriarchal. Many of these women believed that medical practices needed to be more widely reformed in order to achieve their goals of women's health and liberation. The activists at the Calgary Association and the Lethbridge Centre wanted to provide more than a brief prescription appointment offered at medical clinics. In many ways, the activists at the southern Alberta birth control centres hoped that one day the need for their work would cease – the day when women easily accessed reproductive and sexual health services without travelling long distances, navigating a TAC, or facing moral judgments from unsympathetic medical professionals. In the meantime, these women – students, youth, doctors, nurse, mothers, secretaries, and pastor's wives – came together to run local birth control centres that provided necessary reproductive and sexual health services in a way that let women drive their own healthcare and decision-making.

The women running the birth control centres pragmatically balanced their goals of women's liberation with their clients' immediate need for health services. Even with some medical and government professionals behind them, the CBCA and LBCIC's alternative space for women's health services and education operated on the fringe of provincial healthcare. Both birth control centres had to strategically align their services with government and medical institutional goals of "preventative services" in order to keep their funding. If the activists walked away from government funds on principle, they risked losing essential funding that provided care to all clients. The CBCA and LBCIC were essential spaces for negotiating the gulf between on-the-ground needs of their clients and service-based support, combined with the kind of activism that motivated some of the volunteers in the first place. The volunteers and staff of the birth control centres still educated clients, doctors, and politicians about the need for client-driven, and women-friendly health services, but also maintained relationships with political and medical institutions to help get their clients the services they needed. In Alberta, activists forged relationships with sympathetic politicians and medical professionals to integrate alternative practice models into the healthcare system, even before the province had officially embarked on this integration.

Debating Morality, Debating Economics: Birth Control Centre Funding, Politics, & Community Action

Throughout the 1970s, CBCA and LBCIC activists sought funding from Local Initiative Program (LIP) grants, which meant they had to broker support from the municipal, provincial, and

federal levels of government in that order.¹³ When it came to LIP grants, local political and community support was imperative because the grant proposals needed financial support from local city councils before the provincial or federal levels approved their portion of the funds.¹⁴ Municipal governments were required to contribute twenty percent of the approved budget, while provincial governments covered thirty percent, and the federal government contributed the remaining fifty percent of the funds approved for each LIP grant. When Judy Burgess applied for the LBCIC's first LIP grant in 1972, she strategically gathered support from government agencies at all levels: "none of them [local, provincial, and federal representatives] wanted to step up alone, so it was kind of this little game of trying to encourage them all to realize the other was interested."¹⁵ Initially, both the CBCA and the LBCIC were granted LIP grants without much difficulty. Calgary and Lethbridge municipal governments approved the birth control centre proposals in 1971 and 1972 respectively. From there the provincial department of Preventative Social Services and the federal departments of Family Planning (under the Ministry of Health and Welfare) and Manpower and Immigration agreed to contribute their portion of the LIP funds as well. Once the LIP grant was approved, the birth control centres had to renew the project funding every two years. The renewal of LIP grant funds was subject to reapproval of the project's funding at all three levels of government. Every two years upon the birth control centres grant reapproval, support and opposition from citizens often swayed local and provincial decisions about the birth control centres LIP funding.

Both the LBCIC and CBCA received their initial LIP grants easily in the early 1970s before they officially opened, but as public debates about the centres' role in their communities increased over time it was more difficult for CBCA and LBCIC staff to secure LIP grant renewals. Once the CBCA and LBCIC opened, word spread quickly about the LIP funded birth control centres. Citizens and politicians alike debated the value of publicly funding the CBCA and LBCIC – some supported government funding of the birth control centres, while others opposed using tax dollars to fund abortion and contraception services. Throughout the decade these public and political debates about the local birth control centres came to a head whenever the LIP funding was up for

¹³ We Ask Your Help Fundraising Flyer from the CBCA 1977 in "Strategy Committee 1977," M-7265-65, *CBCA Collection* GA; "Lethbridge Birth Control and Information Centre Review of Budget and Programs for January 1, 1974 to November 8, 1974;" "Proposal of Budget and Programs for 1975: Presented to the City of Lethbridge, the Province of Alberta Department of Preventative Social Services, and Family Planning Federation of Canada," *LBCIC, 1973-1975* GMA.

¹⁴ We Ask Your Help Fundraising Flyer from the CBCA 1977 in "Strategy Committee 1977," M-7265-65, *CBCA Collection* GA.

¹⁵ JB, interview, Dec. 8, 2014, transcript, GMA.

reapproval. Citizens and politicians underscored issues of economic responsibility, questions of authority over the topic of sex and abortion, and public need for sex education services as they debated the LIP funding of birth control centres. In response, the women who ran the birth control centres developed strategic responses to their opposition and solidified alliances with their supporters to secure funding for another two years.

The southern Alberta birth control centres had to frame their services as preventative in order to secure funding from the new provincial government in the 1970s. The newly elected Progressive Conservative (PC) provincial government (elected in September 1971), led by charismatic Peter Lougheed, championed social progress alongside conservative economic policies.¹⁶ Alberta was in the middle of an oil boom in the early 1970s. By the time the Calgary and Lethbridge birth control centres were established in the early 1970s, the PC government had begun to pour the increasing oil revenue into social programs and infrastructure while reducing taxes.¹⁷ It was happy to invest the province's oil revenue into social programs if it was economically prudent to do so. Much of the social services the PC government invested in were justified as economically responsible or preventative throughout the 1970s. The provincial department of Preventative Social Services (PSS) framed important social services in the province – like the birth control centres – as preventative measures that ultimately saved the taxpayer money and prevented social “problems” in Albertan communities. Within the department of PSS, the southern Alberta birth control centres in particular were framed as preventing high rates of VD, along with increasing rates of abortion, teen pregnancy, and single motherhood, all the while saving money that otherwise went to medical and social service expenses associated with these social “problems.” As long as the municipal governments and local communities did not put up a fuss about the birth control centres, the provincial department of Preventative Social Services approved LIP funding for the Association and the Centre throughout the decade.

Despite the new influx of funding for social programs, the issue of funding birth control centres did not sit well with all Alberta politicians. For example, the CBCA flagged Alberta Minister of Health, James Henderson's (Social Credit MLA for Leduc) oppositional views on abortion in

¹⁶ Paul Brunner, ed. *Lougheed & The War with Ottawa*, volume eleven in *Alberta in the 20th Century: A Journalistic History of the Province*, (Edmonton: United Western Communications Ltd, 2002), vi.

¹⁷ Brunner, ed. *Lougheed & The War with Ottawa*, vi; Clark Banak, *God's Province: Evangelical Christianity, Political Thought, and Conservatism in Alberta*, (Montreal & Kingston, McGill-Queen's University Press, 2016), 17-18.

1971: “James Henderson – acting Alberta Minister of Health – asked by a reporter about the possibility of abortion clinics in Alberta, replied ‘NEVER.’”¹⁸ Similarly, MLA for Lethbridge West Richard Grunewald (Social Credit) expressed his abhorration for the LBCIC to the *Globe & Mail* in 1974. The article stated that Grunewald “condemned a birth control information centre, which he has never visited, as little better than a shop where pornography is distributed.” In this article, the MLA went on to state that “If I were a committee of one, that damned thing wouldn’t be there” because he claimed that the Centre taught “‘young girls how to do it,’ and then how to ‘have an abortion and avoid all the unpleasantness.’”¹⁹ Henderson and Grunewald’s strong objections to the birth control centres reveal some political pushback, specifically from the recently dethroned Social Credit Opposition, to the provincially-funded birth control services in Alberta.

Even Federal MPs debated the public funding of the local birth control centres and the services they provided. In 1971 the Calgary City Council approved the CBCA’s first LIP grant, but the council stipulated that abortion counselling service were excluded from the LIP grant. The women who ran the CBCA raised enough money from other sources and continued their abortion counselling services without relying on these government funds.²⁰ However, in October 1972, an article in the *Globe & Mail* claimed that that the CBCA’s abortion counselling services worked to “expedite abortions.”²¹ Federal employment services associated with LIP funding investigated these claims, and the CBCA staff had to prove that any abortion counselling funds came from donations, not government grants.²² By January 1973, amid mounting concerns from some politicians that the federal government was funding abortion, the topic of the CBCA made its way to question period in the federal House of Commons. Douglas Roche (Progressive Conservative MP for Edmonton-Strathcona) stated that: “In view of the fact that the Calgary Birth Control Association has just received a second year grant from LIP for \$45,200, and this association last year opened abortion clinics which promoted easy abortion and set a precedent in the use of government money for

¹⁸ “Various new items (loosely quoted from memory)” in the CBCA newsletter July 17, 1971 in “Newsletters 1971-1974,” M-7265-240, *CBCA Collection* GA.

¹⁹ *The Globe and Mail*, “Alberta MLA assails birth control centre,” December 12, 1974, (page number unavailable), *LBCIC, 1973-1975* GMA.

²⁰ Meeting minutes of CBCA Strategy Committee, May 4, 1978, in “Strategy Committee 1978,” M-7265-66, *CBCA Collection* GA.

²¹ Letter from Martha Weir to the Editor of the *Globe & Mail*, October 30, 1972, in “Correspondence, 1972,” M-7265-80, *CBCA Collection* GA.

²² Letter to Ken Ouelette, November 23, 1972; Letter to Des Cox, November 27, 1972; Letter from Martha Weir to the Editor of the *Globe & Mail*, October 30, 1972, All found in “Correspondence, 1972,” M-7265-80, *CBCA Collection* GA.

abortion.”²³ Roche finished his speech that day by asking to “prohibit the Calgary Birth Control Association from reopening its abortion clinic.”²⁴ The minister of Manpower and Immigration, Robert Andras (Liberal MP for Port Arthur), defended the CBCA, stating that the Association was not operating an abortion clinic. Andras explained that Employment Services’ investigation found these accusations were the result of “an unfortunate error made in a newspaper about this project months ago.” He reassured Roache and the rest of the MPs present that “most local citizens consider it [the CBCA project] a very worthy one.”²⁵ The stipulation that the CBCA’s LIP funding could not fund abortion counselling remained throughout the decade, and the CBCA activists developed bookkeeping skills to “make clear that it [the LIP grant] is not spent on abortion info.”²⁶ Despite the new Medicare policy that covered the cost of abortions approved by TACs, this debate around government money funding abortion and birth control services became a hot-button issue in the 1970s.

Some citizens used local media to rebut opposition to the birth control centres from politicians like Roche, Henderson, and Grunewald, arguing that these birth control centres provided necessary preventative services. In direct response to MLA Grunewald, Lethbridge physician Dr. Ross Vant wrote to the *Lethbridge Herald* in December 1974: “Whether Mr. Greenwald [sic. Gruenwald] agrees or not, teenagers in all areas of Alberta are obviously indulging in sexual intercourse.”²⁷ In his letter, Vant specifically pointed to the Centre’s birth control and sex education services as a public necessity to decrease the rates of teenage pregnancy. While they debated the public usefulness and morality of the local birth control centres, both Gruenwald and Vant’s

²³ Commons Debates, Oral Questions: Abortion – Request that Calgary birth Control Association be prohibited from opening clinic, found in “Letters of Support, 1973,” M-7265-194, *CBCA Collection GA*.

²⁴ Commons Debates, Oral Questions: Abortion – Request that Calgary birth Control Association be prohibited from opening clinic, found in “Letters of Support, 1973,” M-7265-194, *CBCA Collection GA*.

²⁵ Commons Debates, Oral Questions: Abortion – Request that Calgary birth Control Association be prohibited from opening clinic, found in “Letters of Support, 1973,” M-7265-194, *CBCA Collection GA*.

²⁶ CBCA strategy Committee meeting April 21, 1977, in “Strategy Committee 1977,” M-7265-65, *CBCA Collection GA*.

²⁷ Draft of a letter to the Editor of the *Lethbridge Herald* from J. Ross Vant, M.D. December 20, 1974, in “Lethbridge Birth Control and Information Centre Annual Report and Evaluation, 1973 and Budget, 1974,” November 1973, found in “Lethbridge Birth Control Association,” GR1983-0133, box 1, file 5, PAA.

arguments focused on the “issue” of premarital sex and preventing teenage pregnancy. Whether it was arguments about the morality of abortion or the importance of preventing teen pregnancy, many citizens and politicians were concerned about women’s sexual and reproductive behaviour and choices. As the political and public debates focused on funding, morality, or preventive services, the public discourse about the local birth control centres increasingly strayed from the topic of bettering women’s health and liberation.

As the decade went on the local birth control centres faced a dilemma: the more public use and attention the centres received, the more they were the subject of debates about economic responsibility and public morality. Every two years when the centres’ LIP funding was up for renewal citizens wrote letters to the local media and municipal governments both in support of and in opposition to the birth control centres. While many of these letters were written to debate the government funding of the birth control centres, the letters reveal that issues of morality, taxes, expertise and authority, and public good were central to the debates about the birth control centres. Many citizens wrote to their local newspapers or governments “as a taxpayer” but their main objections often centred on claims that the birth control centres were immoral. Some of those people who opposed the birth control centres also claimed that the women running the centres were unqualified to provide reproductive and sexual health information. Conversely, the citizens who threw their support behind the CBCA and LBCIC often cited the centres as providing important services that improved community health and prevented social “issues,” like high rates of teen pregnancy and VD. Citizens on both sides employed ideas of morality and economic responsibility when debating public birth control and sex education services.

Citizens who opposed government funding of the birth control centres argued that the centres’ services offered were immoral and a threat to the heterosexual nuclear family unit. Many people wrote to the Calgary and Lethbridge City Councils in the 1970s “as a taxpayer,”²⁸ objecting to

²⁸ See letters from Gary Bowie, April 1, 1974; Mrs. Leo Davidson, April 2, 1974; Ray Keitgez, April 2, 1974; Mrs. Doris Dohm, April 2, 1974; Tereasa McLeod, April 2, 1974; Louis J. and M. Krammer, April 1, 1974; Kenneth Vsold, c. March-April 1974; Mrs. Rita Miller, April 2, 1974; Louana Poole, c. March-April 1974; Mr. and Mrs. J Buchan, April 2, 1974; Mrs. W. Griffin, March 30, 1974; Frances M. Burrows, c. March-April 1974; Bryant W. Stringam, April 2, 1974; Mrs. Prudence P. Pauline, April 2, 1974; Mabel Pezzy, c. March-April 1974; Glen L. Steed, c. March-April 1974; Venla Carpo, March 28, 1974; Lucille Hamilton, April 2, 1974; Mrs. D Wight, c. March-April 1974; Patricia D. Stiaens, c. March-April 1974; Mrs. Ethee Quechloeriner, c. March-April 1974; Mrs. Genevia Spencer, c. March-April 1974; O. Billingsley, March 30, 1974; Gertrude R. Welastee, April 2, 1974; Sam McCollen, April 2, 1974; Mrs. Ruby Stringan, April 2, 1974; Carol Cakles, c. March-April, 1974; Rosemary Edmunds, April 2, 1974; Carolyn Mayo, April 3, 1974; Sylvia Taylor, c.

the public finding of the CBCA and LBCIC. In 1974 a significant public debate about funding the LBCIC emerged when the Centre's LIP grant was up for renewal. Between March and April 1974 alone Lethbridge City Council received 138 letters in opposition to the LBCIC.²⁹ One person, who only identified as "An Interested Taxpayer," wrote to the Lethbridge City Council in the spring of 1974: "As a taxpayer I would like to go on record as opposed to the continuation of the 'Birth Control Centre.' Personally, I feel that the centre is an unnecessary expense..."³⁰ Some of these taxpayers who wrote to the Lethbridge City Council in the spring of 1974 claimed the LBCIC was a hotbed of immorality. Lois J. and M. Krammer went so far as to ask Lethbridge Mayor Andy Anderson "How much of the taxpayers' money has been squandered on this garbage [the sex education provided at the LBCIC]?"³¹ in their letter to city council in April 1974. In the same vein, Rita Miller's letter to city council that spring declared, "as a taxpayer I feel that our children should be protected from such filth [the sex education provided at the LBCIC]."³² Ray Keitgez described the LBCIC as "worse than a waste of money," and insisted that the educational material distributed by the LBCIC was "pornography."³³ Letter writer Doris Dohm explained that she felt the LBCIC was threatening the structure of the family unit in her letter to city council: "We protest most vigorously and allotment of taxpayers monies toward the Lethbridge Birth Control and Information Centre, or any other organization that seeks to demoralize and destroy the family unit and the

March-April 1974; Anne Banes, April 1, 1974; Mrs. Michilelly, c. March-April 1974; Mrs. Gordon Sheen, c. March-April 1974; Mrs. A Still, April 3, 1974; Donna Steed, c. March-April 1974; Mrs. Helda Mutch, c. March-April 1974; Mrs. Pearlle Murray, April 3, 1974; Mrs. Joseph Krammer, c. March-April 1974; A. Herham, April 3, 1974; "An Interested Taxpayer," April 1, 1974; S. O. Lalley, April 2, 1974; Linda Aworthy, c. March-April 1974; Mabel Barnwell, March 31, 1974; Patricia Hamilton, April 2, 1974; Mrs. A. G. Bourne, April 2, 1974; Eilytha Alstead, April 2, 1974; Mary Leister, April 2, 1974; Mrs. A. Baker, c. March-April 1974; Yvonne K. Wolff, c. March-April 1974; M. H. Furgason, March 1, 1974; Dr. and Mrs. N. Lamont Matkin, April 1, 1974; Dr. Ruedon Selk, April 1, 1974; Victor B. Erdman, April 2, 1974; Clark Qorelt, April 2, 1974; Harold. F Tamer, April 1, 1974; Robert Hamilton, April 1, 1974; Debbie Alison, April 2, 1974; to the Lethbridge City Council. Found in "Letters and Petitions Re: Funding of Birth Control Centre 1974," 2011.1085 069 in *Early City Record Collection* at the Galt Museum and Archives, Lethbridge (ECRC GMA).

²⁹ "Letters and Petitions Re: Funding of Birth Control Centre 1974," ECRC GMA.

³⁰ Letter from "An Interested Taxpayer" to Lethbridge City Council, April 1, 1974, Found in "Letters and Petitions Re: Funding of Birth Control Centre 1974," ECRC GMA.

³¹ Lois J. and M. Krammer, April 1, 1974, to Lethbridge City Council, found in "Letters and Petitions Re: Funding of Birth Control Centre 1974," ECRC GMA.

³² Letter from Rita Miller, April 2, 1974, to Lethbridge City Council, found in "Letters and Petitions Re: Funding of Birth Control Centre 1974," ECRC GMA.

³³ Letter from Ray Keitgez, April 2, 1974 to the Lethbridge City Council. Found in "Letters and Petitions Re: Funding of Birth Control Centre 1974," ECRC GMA.

home.”³⁴ The pejorative language used to describe the LBCIC – “garbage,” “filth,” “a waste” – and the arguments made about morality signaled to the city councillors the strong feelings citizens had about the publicly funded reproductive and sexual health services. Citizens like the Krammers, Miller, Keitgez, and Dohm, along with many others, objected to the LBCIC on moral grounds and used their status as taxpayers in their attempt to sway the city to defund the Centre. The volume of people writing to the Lethbridge City Council as “taxpayers” suggests that this title was strategically employed to remind local and provincial politicians of their power as taxpaying voters.

In some cases, the tactic of taxpayer pressure was successful in swaying politicians to reduce funding for the birth control centres or, at least, prevented the birth control centres from operating at full capacity. In 1974 student journalist Rita Moir reported that public objection to the LBCIC affected the Centre’s “contract with the Lethbridge transit service, for which they painted two large signs, and found one removed from the bus several weeks later.” In the article, she explained that the LBCIC’s bus ads were “interpreted as an attempt to force sex education on people who may not want this knowledge or who receive it at home.”³⁵ In 1975 Calgary taxpayer persuasion threatened the CBCA’s funding. The provincial department of Preventative Social Services denied the CBCA’s LIP grant renewal that year after multiple complaints from Calgary taxpayers. The PSS had just renewed LIP grants for the LBCIC and the Edmonton Family Planning Association, but held out on renewing the CBCA’s grant until the Association proved it had community support.³⁶ In a more extreme yet individual case of taxpayer opposition to the birth control centres, Derek Paul Maguire filed a lawsuit against the City of Calgary in 1979 because he claimed they used tax-dollars to fund the Calgary Birth Control Association’s abortion counselling.³⁷ The case was ultimately unsuccessful but went through legal proceedings in 1979 and 1980, bringing even more exposure to the issue of so-called “taxpayers rights.” Certain taxpayers’ preoccupation with their tax dollars funding services they found immoral caused several funding controversies for the LBCIC and CBCA throughout the 1970s. Each time the Association’s or the Centre’s LIP funding was up for renewal, the women who ran the birth control centres had to face the organized opposition to the services they provided.

³⁴ Letter from Mrs. Doris Dohm, April 2, 1974, to Lethbridge City Council, found in “Letters and Petitions Re: Funding of Birth Control Centre 1974,” *ECRC GMA*.

³⁵ Rita Moir, “Support for centre looks favourable,” the *Meliorist*, April 4, 1974, 4.

³⁶ “HELP!” Call for funding by the CBCA September 1975 in “Financial Donation University of Calgary Committee of 10,000, 1976-1979,” M-7265-150, *CBCA Collection GA*.

³⁷ See “Maguire Lawsuit,” M-7265-202, *CBCA Collection GA*.

Volunteers, staff, and board members of the CBCA and LBCIC built strategies to combat the opposition from taxpayers throughout the decade.

As some citizens opposed the birth control centre for economic reasons, others questioned the assumed age and credentials of the activists running the birth control centres. Some of the citizens claimed that the women who worked at the CBCA and LBCIC were not qualified to provide reproductive and sexual health services. Some argued that medical doctors ought to provide the services offered at the CBCA and LBCIC, while others argued that clergy were the proper authorities on the moral aspects of sex and family planning. In his letter to the Lethbridge City Council in 1974, Ray Keitgez, claimed that “if society demands that birth control (conception)[sic] information should be given to unmarried teen-agers, then a clinic operated by medical doctors (and never by hippie type unqualified persons) is the only proper answer.”³⁸ Similarly, other Lethbridge citizens wrote that “I do not want my children taught by a bunch of hippys [sic] or second class people that run this centre.”³⁹ While others even blamed the newly established (1969) University of Lethbridge for an increase of “radical” youth and immorality in Lethbridge. Lois J. and M. Krammer wrote “in the few short years that the U of L has been in operation, there are so many processes in action to hasten the deterioration of the morals of the students” in their letter to City Council in 1974.⁴⁰ In oral history interviews, women who worked at the LBCIC also remembered that some citizens felt that they were too young to provide sex education and that they used the Centre to “promot[e] promiscuity.”⁴¹ In her oral history interview, Judy Buresse remembered these complaints that emphasized her youth and the charges of “unprofessionalism” during her time as the LBCIC director from 1972 to 1975. Burgess recalled, “I looked like I was about fifteen.”⁴² Despite how old she looked, Burgess was a nurse who was professionally trained to provide reproductive and sexual health counselling, but her appearance and feminist views made her unqualified for her role as the director in the eyes of the opposition.

³⁸ Letter from Ray Keitgez to Lethbridge City Council, 2 April 1974, found in “Letters and Petitions Re: Funding of Birth Control Centre 1974,” *ECRC GMA*.

³⁹ Name Indiscernible, letter to Lethbridge City Council, ca. March-April 1974, found in “Letters and Petitions Re: Funding of Birth Control Centre 1974,” *ECRC GMA*.

⁴⁰ Lois J. and M. Krammer, April 1, 1974, to Lethbridge City Council, found in “Letters and Petitions Re: Funding of Birth Control Centre 1974,” *ECRC GMA*.

⁴¹ Rita Moir, interviewed with Karissa Patton, 7 October 2014, transcript, interview and transcript housed in “Oral History Project: Students’ Reproductive Rights Activism in Southern Alberta during the 1960s and 1970, 20171019, at the Galt Museum and Archives, (RM interview, Oct. 7, 2014, transcript, GMA).

⁴² JB, interview, Dec. 8, 2012, transcript, GMA.

As vocal opposition of the centres increased, putting the LBCIC and CBCA's funding in jeopardy every second year, the women who ran the birth control centres quickly developed strategies to muster more political and community support. Like the LBCIC, during the last half of the decade, the CBCA also faced reduced LIP funding and "well-organized smear campaign"⁴³ every second year. To counteract these "smear campaigns" the activists involved with LBCIC and CBCA created Boards of Governors, established referral programs with local social and medical organizations, developed relationships with their local politicians, and created highly motivated fundraising committees. The support from community members, local organizations, and government bodies remained paramount to ensure financial stability and continued operation for the centres throughout the decade.

In response to the public charges of unprofessionalism, activists who ran the centres strategically filled their boards with respected local professionals and forged alliances with community groups to give the birth control centres an extra air of credibility. In her oral history interviews, Burgess explains that she helped build up a Board of Directors and staff with "influential people in the community"⁴⁴ who "could stand by us [the LBCIC volunteers and staff] and say that this was a good idea."⁴⁵ She invited several local medical, education, and community professionals to join the Board and hired a physiologist, Clareanne "Tinky" Bush, to work at the centre.⁴⁶ Burgess explains that the LBCIC board members had clout in the local community and "could get budgets, help us get a space, help us navigate the groups that were against us."⁴⁷ A variety of other professionals and community members joined the Centre's board of directors throughout the 1970s, including professors of psychology and biology, pharmacists, high school counselors and administrators, university students, OBGYNs, religious leaders and counsellors, housewives, psychiatrists, librarians, and teachers.⁴⁸ Similarly, the CBCA and LBCIC staff and volunteers

⁴³ "¡SOS! CBCA NEEDS YOUR HELP IN ITS 1978-79 FUNDING REQUEST," Fundraising flyer in "Strategy Committee 1978," M-7265-66, *CBCA Collection* GA.

⁴⁴ JB, interview, Dec. 8, 2012, transcript, GMA.

⁴⁵ Judy Burgess, interview with Karissa Patton, October 9, 2014, transcript. Interview and transcript housed in "Oral History Project: Students' Reproductive Rights Activism in Southern Alberta during the 1960s and 1970, 20171019, at the Galt Museum and Archives (JB, interview, Oct. 9, 2014, transcript, GMA).

⁴⁶ JB, interview, Dec. 8, 2012, transcript, GMA.

⁴⁷ JB, interview, Oct. 9, 2014, transcript, GMA.

⁴⁸ "Lethbridge Birth Control and Information Centre Review of Budget and Programs for January 1, 1974 to November 8, 1974;" "Proposal of Budget and Programs for 1975: Presented to

established working relationships with many community groups and social services to complement the centres' professional boards. Activists built strong alliances with local social organizations throughout the 1970s, including "interdenominational ministers' and ladies church groups," youth and women's organizations, mental health and rehabilitation centres, organizations for persons with disabilities, teachers' unions, local schoolboards, university student clubs and faculty organizations, other family planning initiatives, and local YWCAs.⁴⁹ In times of financial precarity, the birth control

the City of Lethbridge, the Province of Alberta Department of Preventative Social Services, and Family Planning Federation of Canada," *LBCIC, 1973-1975 GMA*.

⁴⁹ See, for example: Brief from Mental Health Calgary on CBCA services February 22, 1977; Letter from the Canadian Mental Health Association to the CBCA, January 20, 1978; Letter from the Calgary Family Service Bureau to the CBCA, October 30, 1972; Letter from the Calgary Correctional Institution to the CBCA, December 20, 1972; Letter from the Alberta Sexuality Education Institute, December 22, 1972; Letter from the Pincher Creek Interprofessional Coordinating Committee to the CBCA, June 16, 1972; Letter from the Alberta Association of Social Workers to the CBCA, January 9, 1978; Letter from Alberta Association of Social Workers to the CBCA, January 25, 1979; Letter from the Calgary Distress Centre- Drug Centre to the CBCA, January 19, 1979; Letter from the John Howard Society of Alberta to the CBCA, January 18, 1979; Letter from University of Calgary Student Union to Mayor Rod Sykes, February 23, 1977; letter from University of Calgary Student Union to the CBCA, January 18, 1978; Letter from Donna Arvidson to the CBCA, February 18, 1977; Letter from Robert X. Ware to Barbara Scott, February 23, 1977; Letter from Neil W. Collin, January 25, 1979; Letter from the Faculty Women's Club at the University of Calgary, January 19, 1979; Letter from Rodger Mellow to the CBCA, January 22, 1979; Letter from E. A. Smith to the CBCA, May 18, 1972; Letter from C. C. Cameron and B. Connery to the Local initiatives Program, December 20, 1972; Letter from the Barbara MacDougal to the CBCA, January 22, 1979; Letter from the Calgary YWCA to the CBCA, March 22, 1973; Letter from the Parenthood Association of Edmonton to CBCA, February 8, 1977; Letter from Calgary Local Council of Women to CBCA, February 3, 1977; letter from the Calgary Rape Crisis Centre to the CBCA, December 14, 1977; Letter from the Calgary Women's Emergency Shelter to the CBCA, January 29, 1979; Letter from the Calgary Status of Women Action Committee, January 26, 1979; Letter from Planned Parenthood Alberta to the CBCA, January 22, 1979; ... found in "Letters of Support 1973," M-7265-194; "Letters of Support 1977," M-7265-195; "Letters of Support 1978," M-7265-196; "Letters of Support 1979," M-7265-197, *CBCA Collection GA*.

Letter from Lethbridge Community College Student Council to the City of Lethbridge, March 22, 1974; Letter from *The Meliorist* to the City of Lethbridge, April 8, 1974; Letter from University of Lethbridge's Student Society to the City of Lethbridge, March 14, 1974; Letter from the University of Lethbridge Senate to the City of Lethbridge, March 19, 1974; Letter from Roger H. Barnsley to the City of Lethbridge, March 22, 1974; Letter from Paul D. Lewis, Jr. to the City of Lethbridge, March 23, 1974; Letter from John McInnis to the City of Lethbridge, March 16, 1974; Letter from Wilma Winter to the City of Lethbridge, March 15, 1974; Letter from R.G. Koep to the City of Lethbridge, March 20, 1974; Letter from F. G. Cartwright to the City of Lethbridge, March 18, 1974; Letter from Lethbridge YWCA, March 15, 1974; Letter from the "Contemporary Women Program" through the YWCA to the City of Lethbridge, c. March 1974; Letter from P. Ann Harvey to the City of Lethbridge, c. March 1974; Letter from Jess Snow to the City of Lethbridge, March 11, 1974; Letter from Tom Chapman to the City of Lethbridge, March 11, 1974, *ECRC GMA*.

centres' board members and organizational allies sent letters of support and testimonials to City Councils and the provincial department of Preventative Social Services to help sway political funding decisions in the LBCIC and CBCA's favour. The LBCIC's strategy to build relationships and establish alliances with local professionals and professional organizations was integral to the centres' ability to acquire funding and provide reproductive and sexual health service to their communities throughout the 1970s.

The importance of these relationships the centres' activists forged within their communities was tested mid-decade when debates about the government funding of the birth control centres came to a head. Several oral history narrators remembered the swells of support from student and feminist communities in particular. Burgess remembers, "there was always a group of people to support you."⁵⁰ In particular, Burgess remembered a friend, Rita Moir, who was involved with the local women's liberation group and the *Meliorist*, the University of Lethbridge's Student Union newspaper. Moir fostered support for the centre in Lethbridge's feminist and student movements.⁵¹ Moir recalls that she and others who wrote for the *Meliorist* "mustered support for the Birth Control and Information Centre, and it took us a big step forward ... to get the support from City Council."⁵² Specifically, feminist and student groups mobilized crucial support for the LBCIC in 1974, during the public debates and petitions against the LBCIC's LIP renewal. Activists from the Centre, the Lethbridge Women's Liberation group, and post-secondary institutions started petitions to keep the LBCIC open, organized supportive letter campaigns, and lobbied others to do the same. Letters of support and the petition they created in the spring of 1974 all recognized the LBCIC as an essential social service in Lethbridge.⁵³ As Moir stated, the LBCIC "couldn't have survived as long as it had if it hadn't won over support."⁵⁴ With this expansive display of support, the Lethbridge City

"Lethbridge Birth Control and Information Centre Review of Budget and Programs for January 1, 1974 to November 8, 1974;" "Proposal of Budget and Programs for 1975: Presented to the City of Lethbridge, the Province of Alberta Department of Preventative Social Services, and Family Planning Federation of Canada," *LBCIC, 1973-1975* GMA.

⁵⁰ JB, interview, Dec. 8, 2012, transcript, GMA.

⁵¹ JB, interview, Dec. 8, 2012, transcript, GMA.

⁵² Rita Moir, interview with Karissa Patton, December 13, 2012, transcript. Interview and transcript housed at the Galt Museum and Archives, in "Oral History Project: Students' Reproductive Rights Activism in Southern Alberta during the 1960s and 1970, 20171019 (RM, interview, Dec. 13, 2012, transcript, GMA).

⁵³ "Letters and Petitions Re: Funding of Birth Control Centre 1974," *ECRC* GMA.

⁵⁴ RM, interview, Dec. 13, 2012, transcript, GMA.

Council and Mayor Anderson approved the continued municipal contribution for the LBCIC's LIP grant that year.

Similarly, CBCA staff and volunteers called upon their community support systems in 1975 when the province rejected their LIP grant. A "Save the CBCA" campaign in September 1975, asked citizens to declare their support for the Association: "You can help us by signing your name to the bottom part of this sheet and mailing it back to us as soon as possible. Also, please ask your friends to write out a similarly worded appeal and send it to us. ... Should you be able to help us in other ways, such as by taking part in demonstrations, please let us know. We welcome your suggestions for possible action."⁵⁵ In November 1975, some Calgarians moved away from their letter-writing tactics and opted for a more public display of support for the CBCA. The *Calgary Herald* covered a guerilla skit performance at four Calgary shopping malls on November 16, 1975. The article describes the skit, written and performed by the "Committee for Human Priorities" as a local demonstration that chastised provincial politicians for not supporting a necessary service:

Calgary shoppers were treated to a short skit Saturday presented to dramatize the need for funding for the Calgary Birth Control Association. ... Presenting the skit was the committee's latest attempt to correct what they feel is irresponsible allocation of government funds. "When money is available for airplanes and European trips, what does that say about priorities?" asked Lillian Dick, who gave a one-minute interpretation of the skit after each presentation. ... The Play's leading character represented Peter Lougheed dressed as a rabbit playing ball with men dressed in business suits and wearing oil derrek helmets labeled "elite." A female rabbit, Miss Birth Control Association, tried unsuccessfully throughout the play to draw attention to a growing number of baby rabbits scampering around the stage.⁵⁶

The citizens who put on this skit left no questions about where they stood on government spending when it came to birth control services. Just as those in opposition of the birth control centres argued that abortion, contraception, and sex education was immoral, these supporters of the CBCA argued that it was the provincial government's moral obligation and political responsibility to fund the centres as public and preventative services. This very public show of support for the CBCA that shamed the provincial government for pulling the plug, exposed a base of public support for the birth control centres and their services. This show of community support earned the CBCA staff a

⁵⁵ "HELP!" Call for funding by the CBCA September 1975 in "Financial Donation University of Calgary Committee of 10,000 1976-1979," M-7265-150, *CBCA Collection GA*.

⁵⁶ *Calgary Herald*, "Skit shown in drive for funds," November 17, 1975, news clipping found in "Lethbridge Birth Control Association," GR1983-0133, box 1, file 3, PAA.

meeting with Minter of PSS, Helen Huntley in January 1976. Huntley approved the CBCA's LIP grant shortly after this meeting.⁵⁷

By strategically using arguments of prevention and economic responsibility local professionals, community organizations, and activists often swayed the political winds in favour of the LBCIC and CBCA. Local community organizing by feminist and student activists along with community organization and professionals' support became integral to the financial stability of the LBCIC and CBCA. Organized support campaigns for the birth control centres increased throughout the decade. Increasing numbers of vocal supporters along with arguments that the birth control centres offset government spending and prevented "social problems" like teenage pregnancy, helped city councils and the department of PSS justify funding the birth control centres. Whether it came from the manager of a community organization, a school principal, or a feminist university student, whether it was a guerrilla-skit performance or a letter-writing campaign, public displays of support were the most effective method to secure government funding. When their funding was on the line both the CBCA and the LBCIC called upon community allies throughout the decade.

The growing community support for the LBCIC and CBCA along with categorization of the birth control centres as preventative social services fuelled alliances between local birth control centres and individual politicians in the second half of the decade. After the heated funding debates in 1974 and 1975, the activists running both southern Alberta birth control centres quickly established inroads with individual politicians. They realized that support from individual city councillors and the head of provincial Preventative Social Services was vital to secure LIP funding and ensure the LBCIC and CBCA's success. As members of the community grew increasingly vocal in their support for the birth control centres, individual politicians (both incumbents and those new on the scene) became more willing to proclaim their support for the centres' preventative services in council and in public. The discourse that the birth control centres' services were preventative and, therefore, economically responsible allowed politicians to support the birth control centres without explicitly stating their stances on abortion, premarital sex, or women's liberation. The rhetoric of prevention gave city councillors and MLAs the opportunity to discuss how the services at the LBCIC and CBCA were preventing teen pregnancy, reducing the number of abortions, and decreasing VD cases. And, the increasingly vocal community support for the birth control centres under the umbrella of preventative social services, meant politicians were less worried about losing

⁵⁷ Minutes from Meeting with Honourable Helen Huntley January 19, 1976, in "Abortion (Research – Foothills Hospital)," M-7265-15, *CBCA Collection* GA.

votes if they supported the LBCIC or CBCA. Alliances between the birth control centres' staff and individual politicians increased during the second half of the decade. Between 1975 and 1979 the CBCA built personal relationships with local and provincial politicians including, Calgary city counsellors Suzanne "Sue" Higgins,⁵⁸ Barbara Scott,⁵⁹ Naomi Whalen,⁶⁰ Gordon Shrake⁶¹ and others,⁶² as well as Minister of Alberta Preventative Social Services Helen Huntley.⁶³ Similarly, following the 1974 funding controversy, the Lethbridge Birth Control and Information Centre created strong coalitions with Lethbridge Mayor Andrew "Andy" Anderson (in office 1968-1986), City Manager Allister Findlay,⁶⁴ and the majority of the city councillors who supported their LIP grants from 1972-1978.⁶⁵ As birth control centres' staff built relationships with their local city councillors, individual politicians used the centres' growing reputation as preventative services to justify their political backing of the local birth control centres.

In late 1977 and early 1978, another LIP funding controversy forced CBCA activists to recruit new local political allies. In 1977, conflicts at the City of Calgary threatened the CBCA's funding once again when the Association's LIP grant was up for renewal, so the Association activists ramped up their efforts to bring local political allies into the fold. The decision to renew the CBCA's LIP grant that year had resulted in a tied vote in the municipal Community Services Committee. In

⁵⁸ Notes from a meeting between Sue Higgins and CBCA activists, December 14, 1977, found in "Strategy Committee 1978," M-7265-66, *CBCA Collection* GA.

⁵⁹ Letter from Barbara Scott, February 8, 1977, in "Letters of Support 1977," M-7265-195, *CBCA Collection* GA.

⁶⁰ Advice from Nomi Whalen on Funding Proposal Presentation to the City of Calgary found in "Strategy Committee 1978," M-7265-66, *CBCA Collection* GA.

⁶¹ Alderman Barbara Scott, Memorandum from the Office of the Aldermen, City of Calgary, February 24, 1978, in "Strategy Committee 1978," M-7265-66; Letter from Alderman Gordon Shrake to CBCA, May 16, 1977, in "Correspondence, January to June 1977," M-7265-90; Letter from Brian Lee to the CBCA, December 21, 1977, in "Correspondence, July to December 1977," M-7265-91, *CBCA Collection* GA.

⁶² "Names and Addresses of Elected Officials" updated with each of their positions on funding the CBCA, c. 1978 found in "Strategy Committee 1978," M-7265-66; Letter from Andrew Marshall, executive assistant to Mayor Rod Skyes, to the CBCA, June 28, 1973, in "Correspondence, 1973," M-7265-82; Letter from Ross Alger to CBCA, July 4, 1977, in "Correspondence, July-December 1977," M-7265-91, *CBCA Collection* GA.

⁶³ Minutes from Meeting with Honourable Helen Huntley January 19, 1976, in "Abortion (Research – Foothills Hospital)," M-7265-15, *CBCA Collection* GA.

⁶⁴ JB, interview, Oct. 9, 2014, transcript, GMA.

⁶⁵ Karissa Patton, "Parental Rights, Reproductive Rights, and Youth's Sexuality in Alberta, Then and Now," on *ActiveHistory.ca*, originally posted July 25, 2014, <http://activehistory.ca/2014/07/parental-rights-reproductive-rights-and-youths-sexuality-in-alberta-then-and-now/>.

previous years, the Mayor and Councillors followed the decision of the Community Services Committee. However, because the committee's tie vote, the mayor and city councillors made the final decision about the CBCA's LIP funding. A fundraising flyer explained the situation: The Association activists warned, "the fate of the C.B.C.A. now rests in the hands of city aldermen."⁶⁶ Having their funding under attack by opposition every two years, the CBCA Finance and Strategy Committees hoped to forestall some of the opposition and campaigned for community and political support in the Fall of 1977 and into February 1978. CBCA staff and volunteers organized "continued letter writing" campaigns to aldermen, held a membership drive, worked with the media to share "profile stories" on the CBCA, and ran ad campaigns in local newspapers.⁶⁷ The letter campaigns and news coverage got the attention of many city councillors that winter. In December 1977 Calgary Alderman⁶⁸ Sue Higgins even went to a CBCA open house to show her support for the organization when the government funding of the Association was called into question in 1977 and 1978. While at the open house, Higgins described the CBCA as "an absolutely essential service" and asserted that "freedom of choice is very important."⁶⁹ Higgins had only been elected into office in October 1977, making her public appearance and support for the CBCA one of her first public acts as a new and "feisty"⁷⁰ member of City Council. By January 1978 Alderwomen Barbara Scott and Pat Donnelly (both newly elected councillors), as well as Aldermen Gordon Shrake and Brian Lee (both incumbents) had promised their support for the CBCA along with Higgins, and the city renewed the LIP grant but reduced the budget from \$16,800 to \$14,000.

These city councillors' political support continued after the LIP decision in January 1978. The women who ran the CBCA made it clear to city council and their clients that the reduced LIP

⁶⁶ We Ask Your Help Fundraising Flyer in "Strategy Committee 1977," M-7265-65, *CBCA Collection* GA.

⁶⁷ President's Report in meeting minutes of Annual General Meeting 1978 in "Annual General Meeting 1978," M-7265-28; "!SOS! CBCA NEEDS YOUR HELP IN ITS 1978-79 FUNDING REQUEST," Fundraising flyer in "Strategy Committee 1978," M-7265-66, *CBCA Collection* GA.

⁶⁸ Sue Higgins was known, in part, for her distaste for "new" and more inclusive phrases to describe her role on city council. In particular she did not like "Aldermother," "Aldersister," or "Councillor." Her preferred title was "Alderboard" but for clarity sake I have not used that term here. Instead, I use "Alderman" to reflect her preferences.

⁶⁹ Notes on a conversation with Sue Higgins at CBCA Open House, December 14, 1977, in "Strategy Committee 1978," M-7265-66, *CBCA Collection* GA.

⁷⁰ *CBC News*, Sue Higgins, Former Calgary Alderman, Dies," February 17, 2014, accessed September 22, 2020, <https://www.cbc.ca/news/canada/calgary/sue-higgins-former-calgary-alderman-dies-1.2540191>.

funding meant significant cuts to their programs and services. The CBCA's 1978 annual report in January 1978 explicitly stated that the CBCA had to cut programs "drastically" unless government grants or public donations significantly increased.⁷¹ The staff and volunteers at the CBCA turned to their community support system and political allies to help lobby the City of Calgary to increase their LIP grant back to the previous year's amount. The Association sent out a "SOS" flyer in early February 1978 and asked their supporters for letters of support and to attend a "key meeting" of city council about their LIP funding increase on February 27.⁷² The CBCA supporters answered the calls by writing to their aldermen and sending letters of support for the CBCA staff to forward to city council.⁷³ Along with community support, Calgary city councillor Barbara Scott was particularly vocal in her support for the CBCA LIP increase in January and February 1978.⁷⁴ Just days before the "key" public meeting Scott sent a Memorandum from the Office of the Aldermen arguing that the reduced LIP grant offered to the CBCA failed to "recognize inflationary increases" and was ultimately "punitive – rather than helpful – toward the agency."⁷⁵ Thanks to the broad base of community and the vocal support of the city councillors the CBCA's funding package was eventually increased by \$1,400 before the "key meeting" of city council on February 27, 1978.

As the decade progressed, birth control centre staff and supporters strategically framed their services as preventative and economically responsible in order to secure funding and keep the birth control centres open. The arguments for and against publicly funded birth control centres throughout the 1970s debated the morality of the CBCA and LBCIC, the local and provincial governments economic responsibility to taxpayers, and the public utility of birth control centres. And, despite opposition and the region's reputation as politically and religiously conservative, birth control centres remained open and offered services throughout the 1970s. As the public and politicians debated the new legal and economic landscapes of decriminalized contraception, TACs,

⁷¹ Treasurer's Report – Finance Committee, CBCA Annual Report 1978, in "Annual General Meeting 1979," M-7265-28, *CBCA Collection GA*.

⁷² "SOS! CBCA NEEDS YOUR HELP IN ITS 1978-79 FUNDING REQUEST," Fundraising flyer in "Strategy Committee 1978," M-7265-66, *CBCA Collection GA*.

⁷³ "Letters of Support 1978," M-7265-196, *CBCA Collection GA*.

⁷⁴ Alderman Barbara Scott, Memorandum from the Office of the Aldermen, City of Calgary, February 24, 1978, in "Strategy Committee 1978," M-7265-66; Letter from Alderman Gordon Shrake to CBCA, May 16, 1977, in "Correspondence, January to June 1977," M-7265-90; Letter from Brian Lee to the CBCA, December 21, 1977, in "Correspondence, July to December 1977," M-7265-91, *CBCA Collection GA*.

⁷⁵ Alderman Barbara Scott, Memorandum from the Office of the Aldermen, City of Calgary, February 24, 1978 in "Strategy Committee 1978," M-7265-66, *CBCA Collection GA*.

and healthcare the local birth control centres and their LIP grants influenced larger debates about taxpayers' rights and social services in the province during 1970s.

Shifting Authority, Changing Practice: Birth Control Centres as Health Services

Just as politicians and citizens debated the place of birth control centres in provincial politics and economics, medical professionals debated the LBCIC and CBCA's place in provincial healthcare and services. Some medical professionals felt that the LBCIC and CBCA were undermining their medical expertise and authority; a few even publicly denounced the birth control centres.

Additionally, while some physicians in the province supported the LBCIC and CBCA in theory, they still worried that publicly announcing their activities might have financial implications for their own practice – either by losing paying patients or encouraging patients to seek overlapping services, like pregnancy testing, offered by the birth control centres. Despite the fears of some medical professionals, there were many physicians and nurses who saw the new local birth control centres as an important health education service to complement their practice. But, as the relationships between birth control centre staff and sympathetic doctors were built, new practices of reproductive health services developed in Alberta. The trajectory of the LBCIC and CBCA's relationships with the provincial medical community influenced larger debates about medical and experiential knowledge, professional and lived expertise, and physician and patient authority. The complex relationship between birth control centres and medical institutions in 1970s southern Alberta underscores a shifting cultural moment concerning medical authority over reproductive bodies.

The historical relationship between women and medical professionals became increasingly complex between the end of the Second World War and 1969 decriminalization. Leading up to the 1969 Omnibus Bill, some doctors also lobbied for more legal leeway to help their patients.⁷⁶ Many family physicians saw the fall out of criminalized contraception and abortion in multiple miscarriages, exhausted mothers, and unwanted children. Sympathetic doctors cautiously worked around legal loopholes to help women and families in these situations.⁷⁷ Many women had

⁷⁶ Dodd, Dianne. "The Canadian Birth Control Movement on Trial, 1936-1937." *Histoire Sociale/Social History* 16/32 (November 1983): 411-428; Angus McLaren, "Policing Pregnancies: Sexuality and the Family, 1900-1940," *The Transactions of the Royal Society of Canada* VI/III (1992), 17-23.

⁷⁷ Erika Dyck, "Sterilization and Birth Control in the Shadow of Eugenics: Married, Middle-Class Women in Alberta, 1930-1960s." *CBHM* Vol. 31 No.1 (2014), 165-187; Margaret S. Marsh, *The*

advocated for decriminalized and accessible contraception and abortion services for decades.⁷⁸ A relationship developed between sympathetic doctors and their female patients to work around laws or covertly discuss methods of family planning throughout the 20th century. From the 1940s to the 1960s, doctors in Alberta even used legal loopholes in eugenics legislation to secure sterilizations for married women.⁷⁹

A parallel history of medical abuse of women in post-war Canada shaped a more vitriolic relationship between other physicians and women patients. Historian Whitney Wood's work on women's birth experiences and activism in Canada during the twentieth century exposes the abuse some women suffered in hospital birthing rooms in the post-war era. In particular, Wood examines how these women advocated for more women-centered and natural birthing practices. After reports of patients tied to beds during labour and babies "held in" until the doctor arrived during the 1940s and 1950s, women began speaking out about their rights within medical spaces.⁸⁰ Similarly, historian Wendy Kline describes women's increasing frustration with the medical profession as it built up to the international women's health movement in the 1970s, when women opened their own health centres apart from the patriarchal structures of medical institutions.⁸¹ Paralleling other women's liberation actions in the 1970s, like activism that condemned violence against women and the women's shelter movement,⁸² women's health and birth control centres provided an alternative place for women to escape abusive institutions and situations.

By the time the laws about contraception and abortion were changing in Canada, these diverse and complex relationships between medical professionals and women patients were part of public debates about knowledge, authority, and power. Many doctors providing services and many women seeking services were pleased with their new legal freedoms following decriminalization in

Fertility Doctor: John Rock and the Reproductive Revolution, (Baltimore, Johns Hopkins University Press, 2008).

⁷⁸ Stettner, "He is Still Unwanted," 151-171; Dodd, "The Canadian Birth Control Movement on Trial," 411-428.

⁷⁹ Dyck, "Sterilization and Birth Control in the Shadow of Eugenics," (2014).

⁸⁰ See Whitney Wood's forthcoming book, *A New Way to Birth? Natural Childbirth in Canada and the World, 1930-2000*.

⁸¹ Kline's work has outlined the strained relationships between some physicians and women patients in the United States during the mid-twentieth century. Wendy Kline, *Bodies of Knowledge: Sexuality, Reproduction, and Women's Health in the Second Wave*, (Chicago: University of Chicago Press, 2010).

⁸² Nancy Janovicek, *No Place To Go: Local Histories of the Battered Women's Shelter Movement*, (Vancouver: University of British Columbia Press, 2007).

1969. Some medical professionals were glad the new TACs gave them the legal freedom to provide approved abortion while maintaining medical authority and precaution when it came to the clinical procedure. Other medical professionals and women patients, soon called for the abolishment of TACs to further increase women's and doctors' legal options when it came to abortion in Canada. Doctor across the country debated the utility of TACs in the early 1970s. In 1971 the CBCA newsletter highlighted the Canadian Medical Association's vote on whether "abortion should be a private matter" during their annual meeting in Halifax that year.⁸³ Seventy-four of the attending physicians voted that yes abortion ought to be a private matter, while seventy-one voted that it was not a private matter. While this vote suggests that a slight majority of doctors believed that women ought to make decisions about abortion privately (not by a TAC), with only a three-vote difference it is clear that doctors did not agree on the role of the TACs in Canada. As doctors debated TACs and their role in abortion decisions, women patients became increasingly vocal about their reproductive and sexual health choices in Canada as the 1960s and 1970s progressed. Oral history narrator Luba Lisun remembers many women in her community were excited about decriminalization in 1969 and explains that it "really made a difference for a lot of girls I knew. We were thinking about it for sure in high school, thinking about what could be different, how should it be different."⁸⁴ Even as women like Lisun saw decriminalization as an opportunity for change, some physicians were wary of, or even opposed to, shifting dynamics of power and authority in the medical sphere following decriminalization.

As birth control centres were established and the women's health and liberation movements became more prominent in the early 1970s, women working in the medical profession increasingly challenged gendered dynamics within medical institutions. Gender roles within medical clinics and hospitals were built upon the assumption that women were intellectually and biologically inferior to men.⁸⁵ Women were encouraged to take on naturally subordinate and nurturing roles out of the

⁸³ "Various new items (loosely quoted from memory)" in the CBCA newsletter July 17, 1971, in "Newsletters 1971-1974," M-7265-240, *CBCA Collection* GA.

⁸⁴ Luba Lisun, interview with Karissa Patton, December 1, 2014, transcript. Interview and transcript housed at the Galt Museum and Archives, in "Oral History Project: Students' Reproductive Rights Activism in Southern Alberta during the 1960s and 1970, 20171019 (LL, interview, Dec.1, 2014, transcript, GMA).

⁸⁵ Georgina Feldberg, "On the Cutting Edge: Science and Obstetrical Practice in a Women's Hospital, 1945-1960," in *Women, Health, and Nation*, edited by Georgina Feldberg, Molly Ladd-Taylor, Alison Li, and Kathryn McPherson, (Montreal & Kingston: McGill-Queen's University Press, 2003), 123.

public eye. So professional nurses were trained as “subordinate supports for male doctors.”⁸⁶ These gendered attitudes about women’s place within the medical field trickled into the work of nurses and birth control centre staff in the 1970s. Professional Oral history narrators remember patriarchal gender roles when working with certain physicians in the 1970s, especially when it came to their work at the birth control centers. Judy Burgess remembers the staunch power dynamics from her nurse training that fuelled some of these gendered sentiments around authority. She remembers that “there was an order of authority, and we [nurses] were very low on it.” In particular, she recalls that nurses “were not allowed to talk to the doctors unless they talked to us first” and had to offer up their chairs and pens to doctors or “get them anything that they wanted.”⁸⁷ Oral history narrator Terri Forbis also remembers unpleasant encounters with doctors when she spoke about sex education in local schools. She describes one encounter in the late 1970s where a doctor, also invited to speak about sex, contraception, and VD, told the students that the Lethbridge Family Planning Centre (LFPC)⁸⁸ was immoral:

One of the very first classes I did in high schools on birth control, I was there with a physician. ... And one of the kids in the class said, “well, is there just some place where we can go just because we want to talk about this? Like we don’t want to go to a doctor quite yet, we just want to talk about it.” And I’m thinking, “Yes! This is my time to jump in and say, “Yes, there is this place you can go to.” Well, the physician steps in and said, “Well, the trouble with places like that is the people who run them don’t have the kind of morals we want our young people exposed to.” ... But I did jump in there and say, “Well, as a matter of fact, this is where you go, and we are very careful to make sure that it’s your values in play and not mine.” So right from the beginning, I kind of knew what I was up against.⁸⁹

⁸⁶ Heather Stanley, “Unsex Me Here! Gender as a Barrier to Female Practice: A Historical Introduction to Women Doctors in Canada,” in *Female Doctors in Canada: Experience and Culture*, edited by Earle Waugh, Shelley Ross, and Shirley Schipper, (Toronto: University of Toronto Press, 2019), 28.

⁸⁷ Judy Burgess, Interview with Karissa Patton, October 2, 2014, transcript. Interview and transcript housed at the Galt Museum and Archives, in “Oral History Project: Students’ Reproductive Rights Activism in Southern Alberta during the 1960s and 1970, 20171019 (JB, interview Oct. 2, 2014, transcript, GMA).

⁸⁸ The Lethbridge Family Planning Centre opened in 1979 and took over birth control and abortion counselling services after the LBCIC closed in 1978.

⁸⁹ Terri Forbis, Interview with Karissa Patton, January 24, 2013, transcript. Interview and transcript housed at the Galt Museum and Archives, in “Oral History Project: Students’ Reproductive Rights Activism in Southern Alberta during the 1960s and 1970, 20171019 (TF, interview, Jan. 24, 2013, transcript, GMA).

Forbis explained that she was “gobsmacked” by this blunt encounter with the physician who knew she represented the Family Planning Centre. Her memories along with Burgess’ recollections highlight the strained relationships between some male physicians and nurses on either end of the decade. Their stories illuminate complex power struggles about who had medical and moral authority when it came to medicine and health services.

These tensions were particularly evident in debates over the role of the new TACs throughout the 1970s. Many TACs quickly emerged in the province after decriminalization, but not quickly enough to catch up with the growing number of women seeking abortions. The women who ran the Centre and Association necessarily worked with several TACs across the province, and established relationships with local abortion committees in order to facilitate abortion services for women in Alberta. Even as the women running the birth control centres worked with local TACs, they knew that the committees did not always work empathetically or quickly enough with their clients. Oral history narrator Terri Forbis explained that physicians on TACs “had to be pretty ok with abortion to even be the person that said yes.”⁹⁰ However, historian Nancy Janovicek’s work reveals that local citizens lobbied for pro-life individuals to join hospital boards “in order to withdraw hospital abortion services at the local level” in the neighbouring region of the West Kootenays in British Columbia.⁹¹ So while doctors who agreed to sit on TACs, had to be comfortable saying yes to abortions, at least sometimes, other medical professionals and citizens undermined the implementation of TACs at the hospital board level during the 1970s. The legal implementation of TACs did not guarantee women access to, or approval for, the abortion procedures they sought out. Local birth control centre activists therefore implemented programs to mitigate the often slow and complicated TAC process. By 1973, with wait times for an abortion procedure in Calgary alone ranging anywhere from two days to six weeks in 1973,⁹² the CBCA developed a program to facilitate abortion travel for Alberta women, as historian Beth Palmer has

⁹⁰ TF, interview, Jan. 24, 2013, transcript, GMA.

⁹¹ Nancy Janovicek, “Protecting Access to Abortion Services in Rural Canada: A Case Study of the West Kootenays, British Columbia.” *Women’s History Magazine* vol. 73 (Autumn, 2013), 19-28; Christabelle Sethna, Beth Palmer, Katrina Ackerman, and Nancy Janovicek, “Choice Interrupted: Travel and Inequality of Access to Abortion Services since the 1960s,” *Labour/Le Travail*, 71 (Spring 2013), 41.

⁹² “Birth Control Group on the Ropes,” *Calgary Herald*, August 2, 1973, news clipping found in “Lethbridge Birth Control Association,” GR1983-0133, box 1, file 1, PAA.

shown.⁹³ With the abortion travel program, CBCA staff and volunteers helped women access abortion procedures if local boards did not approve them in time or at all.

The CBCA and LBCIC staff and volunteers called for the abolition of TACs in favour of more accessible and less paternalist abortion services. The CBCA, in particular, worked to address the limits of TACs in the early 1970s. In a letter to the Attorney General in 1972, president of the CBCA Martha Weir chastised the TACs in Alberta that mandated husbands' or parents' consent to approve abortion procedures. She wrote, "The Criminal Code simply provides that an abortion is legal when it has been approved by a hospital abortion committee and when it is performed in an approved or accredited hospital. There is no mention in the Code of consent of the husband for a married woman or parent's consent for a minor..."⁹⁴ The birth control centre activists and their allies wanted to make abortion more accessible out of empathy and compassion for women's lived experiences. By 1973, then CBCA president Gunilla Mungan (1971-1973), argued that her work with clients at the CBCA made her particularly adept to recommend abortion policy change. In 1973 Mungan told reporters from the *Calgary Herald*, "When you talk with women who want abortions, you become more realistic about the problem of unwanted pregnancies and less inclined to make generalizations."⁹⁵ In line with their clients' experiences and the broader feminist calls for better abortion legislation, many of the birth control centres' staff and volunteers advocated that abortion ought to be a decision between a woman and her doctor.⁹⁶ Most of them championed the feminist call for "abortion on demand,"⁹⁷ which put them at odds with some physicians in the province.

Some medical professionals in Alberta saw the TAC as a necessary and "objective" intervention in providing newly legal abortion procedures. In 1975 *Calgary Herald* article, the TAC Chairman at the Foothills Hospital, Dr. K. I. Pearce, directly opposed women's calls for abortion on

⁹³ Palmer, "Tragic but legally necessary pilgrimages," 2011.

⁹⁴ Letter from Martha Weir to Attorney General Marvin Leitch, March 10, 1972, in "Correspondence 1972," M-7265-80, *CBCA Collection* GA.

⁹⁵ "Birth Control Centre on the Ropes," *Calgary Herald*, August 2, 1973, page number unknown.

⁹⁶ "Various new items (loosely quoted from memory)" CBCA newsletter July 17, 1971, in "Newsletters 1971-1974," M-7265-240, *CBCA Collection* GA.

⁹⁷ Judy Rebick, "The Women are Coming: The Abortion Caravan," in *Ten Thousand Roses: The Making of a Feminist Revolution*, (Toronto: Penguin Canada, 2005); Shannon Stettner, "We Are Forced to Declare War?: Linkages between the 1970 Abortion Caravan and Women's Anti-Vietnam War Activism," *Social History/Histoire Sociale* Vol. 46 No. 92 (November 2013), 423-441; Christabelle Sethna and Steve Hewitt, "Clandestine Operations: The Vancouver Women's Caucus, the Abortion Caravan, and the RCMP," *The Canadian Historical Review* Vol. 90 No. 3 (2009), 463-495.

demand and positioned himself and the TAC as the more responsible answer to legal abortion: “Abortions on demand becomes an unacceptable ethical alternative unless there is a built in careful, informed and personally detached professional examination of the total situation the patient finds herself in and not just the pregnancy alone.”⁹⁸ Pearce opposed abortion activism by directly referencing the feminist calls for “abortion on demand” in his statement. In the same article, Carol Robinson, an abortion counsellor at the Foothills Hospital, agreed with Pearce and argued for the committees to remain intact. She reassured the public, “We’re seeing that abortions are readily available but that they’re done with a great deal of responsibility.”⁹⁹ She reinforces Pearce’s opinions that medical professionals and TACs were the only responsible option to provide abortions. While Pearce and Robinson obviously supported legal abortion under the TACs, the language they used when speaking with the press suggests they did not fully support women’s liberation activists calls for further abortion legislation reform. By using terms like “informed,” “detached,” “careful,” and “responsibility” when referring to their roles within the TAC, Pearce and Robinson positioned themselves and other medical professionals as the authorities on abortions in terms of both the surgical aspects and the moral burdens. In doing so, their public statements suggested that women calling for “abortion on demand” and further abortion reform were irresponsible and unprofessional. Some medical professionals, like Pearce and Robinson, saw the women’s health movement and women becoming more vocal patients and colleagues as an affront to their medical authority and expertise.

Beyond the debates about TACs, doctors in Alberta questioned their role in the new legal landscape for reproductive healthcare in Alberta. In a 1972 letter to the CBCA, Dr. John Higgin, Chairman of the Alberta Medical Association’s (AMA) Maternal Welfare Committee, reported that “the committee feels that it must try to determine the degree of involvement of Alberta physicians in the whole area of contraception.”¹⁰⁰ In the same letter, Higgin stated that the AMA’s Maternal health committee wished to improve the contraceptive education and services provided in the province as a

⁹⁸ “For and Against Factions Don’t Even Agree on Names,” *Calgary Herald*, August 2, 1975, pg. 25, news clipping found in “Lethbridge Birth Control Association,” GR1983-0133, box 1, file 1, PAA.

⁹⁹ “For and Against Factions Don’t Even Agree on Names,” *Calgary Herald*, August 2, 1975, pg. 25, news clipping found in “Lethbridge Birth Control Association,” GR1983-0133, box 1, file 1, PAA.

¹⁰⁰ Letter from John R. Higgin, Chairman of the Maternal Welfare Committee of the Alberta Medical Association, March 14, 1972, found in “Correspondence 1972,” M-7265-80, *CBCA Collection* GA.

way to decrease the number of therapeutic abortions performed.¹⁰¹ Whether it was inclusive of therapeutic abortions or a means to replace them, many medical professionals in the province recognized the need for contraceptive counselling and education. The questions remained: who should provide these services? And, how would medical practices be affected by these new reproductive and sexual health services?

Some local physicians worried that their practice and community standing might be affected by supporting the new local birth control centres in their cities. One Calgary doctor outlined the private nature of his support in a letter to the CBCA in 1972: “Further to your letter dated August 23rd this is to inform you that my donation of \$25.00 to your association is to be as an anonymous. Although I would like to be a member of your association, I would gratefully request that you do not put my name in any of your advertisements or any newsletter or any publication.”¹⁰² This physician’s desire for anonymity suggests that some medical professionals were afraid their public support of the birth control centres would hurt their practice and their standing in the community. Stigma around the topics of birth control, abortion, and sex was still prominent despite decriminalization and public birth control centres popping up around the country. The caution expressed by these medical professionals suggests that they were worried about the potential fall out with their patients, community, or family was not worth the risk of pronouncing their support for the birth control centres. This fear did not prevent them from covertly participating in a reciprocal referral practice with their local birth control centres.

Other medical professionals were less worried about controversy and more concerned that an overlap in services might decrease their own income and client base. A volunteer named Jean, who kept detailed “diary entries” in the CBCA daily volunteer log, recorded several calls from women who sought cheaper options for contraceptive care after visiting a local doctor. On December 15, 1972, she complained about the thirty-dollar doctor’s fee to get a contraceptive loop, which was unaffordable for a client who was on living on support from social services. After Jean told the caller to contact family planning, who provided free clinical services, Jean wrote a note in

¹⁰¹ Letter from John R. Higgin, Chairman of the Maternal Welfare Committee of the Alberta Medical Association, March 14, 1972, found in “Correspondence 1972,” M-7265-80, *CBCA Collection* GA.

¹⁰² Letter from Dr. A. P. C. to the CBCA, September 5, 1972, found in “Correspondence 1972,” M-7265-80, *CBCA Collection* GA.

the volunteer log asking: “Doesn’t her doctor know about family planning? Or doesn’t he care?”¹⁰³ Oral history narrator Forbis also recalled that “physicians didn’t want to see their income impacted by everyone coming over to the Family Planning Centre” because there was an overlap in services.¹⁰⁴

By contrast, many of the sympathetic medical professionals in Alberta were genuinely concerned that they did not have enough time to provide birth control information in their own practices, so they saw the birth control centres’ services as complementary to their own work. The centres responded to this reality, by providing more in-depth conversations about reproductive and sexual health for patients who otherwise relied on lengthy visits to their physicians for this information. As oral history narrator Terri Forbis remembers, physicians “did not have the time [to provide sex education], for one thing. And it really wasn’t necessary [when the birth control centre was providing it]. It really wasn’t.”¹⁰⁵ By 1973 Lethbridge physician Dr. Stitt wrote a letter of support for the LBCIC stating, “I have been closely associated with the Birth Control and Information Centre ... I have found all the staff to be very helpful and co-operative in managing patient problems.”¹⁰⁶ Local doctors in Calgary similarly voiced their support for the birth control activists who provided client counselling. In 1975 a local newspaper summarized one Calgary doctor’s feelings about the Association: “many Calgary doctors, including [my]self, depend on the CBCA to distribute free birth control information particularly to young people.”¹⁰⁷ These medical professionals, along with other staff who ran the medical clinics, came to rely on the counselling and education labour of their local birth control centers.

In addition to concerns about timely service provision, sympathetic local physicians worried about gaps in their training that may affect their capacity to provide these newly legal services. While medical professionals were trained in fertility, reproduction, and abortion techniques for emergency miscarriage situations, instruction on how to prescribe contraception and perform an abortion as a legal and voluntary option for women introduced new challenges and health specializations. Even after decriminalization, Judy Burgess remembers that the topic of birth control was missing in her nursing training from 1969-1972. She recalled, “We had anatomy and physiology, so it

¹⁰³ Notes from Jean, December 15, 1972, in “Board information Package 1977-1978,” M-7265-39, *CBCA Collection* GA.

¹⁰⁴ TF, interview, Jan. 24, 2013, transcript, GMA.

¹⁰⁵ TF, interview, Jan. 24, 2013, transcript, GMA.

¹⁰⁶ Letter of support for the LBCIC from Dr. W. D. Stitt, October 26, 1973, found in “Lethbridge Birth Control Association,” GR.1983.0133, Box 1, file 5, PAA.

¹⁰⁷ Newspaper clipping, periodical unknown, “CBCA ‘prevention’ defended by doctor,” February 14, 1975, found in “Fundraising 1975,” M-7265-170, *CBCA Collection* GA.

[contraception] came up in reproduction. It came up in labour and delivery, but it did not come up in terms of sexual health. No. It wasn't part of a topic of interest for young adults. So, that's the knowledge control."¹⁰⁸ Burgess explained that even after decriminalization, her clinical training did not adequately prepare her for providing comprehensive reproductive and sexual health services. Her experience, like some other medical professionals, signifies a lack of training in comprehensive sexual and reproductive health even after decriminalization. In contrast with many medical institutions, the southern Alberta birth control centres were spaces designated to talk about physiological and social aspects of reproductive and sexual health. Often the women running the birth control centres and interested physicians came together to discuss new contraceptive methods, discuss the TAC process, consider alternative reproductive healthcare models, and learn about sex education pedagogy. Recognizing this gap in their own training before decriminalization, sympathetic medical professionals either worked at birth control centre to gain more expertise in the field or relied on the expertise of birth control centre staff to fill in their service gaps during the decade.

Birth control centre staff and volunteers were building a new area of expertise around reproductive and sexual health, but the CBCA and LBCIC did not offer clinical services to their clients. Both the Centre and the Association offered pregnancy tests, followed up by contraceptive and abortion counselling, but prescriptions and procedures did not fall under their purview. Instead, they developed expertise in one-on-one client counselling and group education services. Terri Forbis remembers, "at that time there were so few of us that had any skill set in how to talk about sexuality."¹⁰⁹ In her recollections about the LBCIC in particular, she stated that as the birth control centres developed this skill, many professionals in their communities sought the help of the LBCIC.¹¹⁰ As the activists at the Centre and the Association developed this expertise, the more relationships they built within the medical community, and their region more broadly. Sympathetic medical professionals and the women who ran the birth control centres came to rely on each other to ensure their patients were getting the care they needed.¹¹¹

¹⁰⁸ JB, interview, Oct. 2, 2014, transcript, GMA.

¹⁰⁹ TF, interview, Jan. 24, 2013, transcript, GMA.

¹¹⁰ TF, interview, Jan. 24, 2013, transcript, GMA.

¹¹¹ See, for example, "Lethbridge Birth Control and Information Centre Review of Budget and Programs for January 1, 1974 to November 8, 1974;" and "Proposal of Budget and Programs for 1975: Presented to the City of Lethbridge, the Province of Alberta Department of Preventative Social Services, and Family Planning Federation of Canada," *LBCIC, 1973-1975* GMA; "The Birth Control & Information Centre," *Up* vol. 1 no. 7 September 10, 1974, pg. 9; "Wednesday Night

As these reciprocal referral practices developed, sympathetic medical professionals grew more vocal in their support for the birth control centres and recognized the LBCIC and CBCA as important health services in the region. When opposition called the LBCIC and CBCA's funding into question, some local doctors even showed their support in public forums. Lethbridge doctors wrote letters of support of the LBCIC in 1973 to advocate for the City of Lethbridge to continue funding. Several highlighted the Centre's necessity in the community. W.D. Stitt stated in a letter of support for the LBCIC. He wrote, it "serves a very necessary and useful function in this community, counselling and educating individuals and groups."¹¹² Similarly, Dr. James Oshiro from Coaldale, Alberta, a small town just north of Lethbridge, wrote "... the mere fact that this centre rendered one thousand [clients in] service during the year would indicate that it is performing a function which is not being performed by any other community organization."¹¹³ Similarly, when the Calgary City Council threatened to pull funding from the CBCA in 1975 local doctor Ruth Simkin advocated for the Association. Dr. Simkin advocated for the CBCA in the local media, "defend[ing] the Calgary Birth Control Association for its work in "preventing abortions, not promoting them."¹¹⁴ She publicly claimed the CBCA provided integral birth control information in the city of Calgary, and "urged Calgary doctors to publicly support the work of the birth control association to ensure its continued operation."¹¹⁵ Stitt, Oshiro, and Simkin's advocacy on behalf of the birth control centres, shows that medical professionals and organizations publicly recognized and respected the work the services the CBCA and LBCIC provided. All three doctors highlighted the ways these birth control centres provided necessary services in the region that physicians could not offer.

As part of their strategic building of relationships with medical professionals, the women working at the CBCA and LBCIC relied on client feedback. Clients' experiences provided the birth control centres' staff with a more comprehensive picture of which medical professionals they trusted to provide compassionate reproductive and sexual healthcare in the province. Policies on referrals at

Presentations," *Up* vol. 1 no. 13 November 5, 1974, pg. 1, HQ 1480.L47.U6, UOWA; Letter from Dr. L. J. K. to Lethbridge City Council March 14, 1974, *ECRC GMA*.

¹¹² Letter of support for the LBCIC from Dr. W. D. Stitt, October 26, 1973, found in "Lethbridge Birth Control Association," GR.1983.0133, Box 1, file 5, at PAA.

¹¹³ Letter of support for the LBCIC from James Oshiro, March 19, 1974, found in "Lethbridge Birth Control Association," GR1983-0133, box 1, file 5, at PAA.

¹¹⁴ Newspaper clipping, periodical unknown, "CBCA 'prevention' defended by doctor," February 14, 1975, in "Fundraising 1975," M-7265-170, *CBCA Collection GA*.

¹¹⁵ Newspaper clipping, periodical unknown, "CBCA 'prevention' defended by doctor," February 14, 1975, in "Fundraising 1975," M-7265-170, *CBCA Collection GA*.

the birth control centres outline the many steps taken to ensure that any clinical or social referrals reflected the client's choice. The LBCIC, for example, had a detailed referral policy that stated, "She[the client] must make the decisions, and then the appropriate referrals are made."¹¹⁶ So while clients initiated the referral process, they also helped refine the referral lists at the CBCA and LBCIC. Volunteer logs, the reports kept on individual physicians and clinics, and questionnaires captured clients' experiences, which informed the birth control centres' relationship with specific physicians and clinics.¹¹⁷ The volunteer log from 1972, for example, recorded a conversation with Mr. Jennings, who promised to call after his vasectomy. This client saw a "Dr. M." and the volunteer wrote that Mr. Jennings would "call after he has a vasectomy done ... to let us know how he liked Dr. M."¹¹⁸ These detailed notes on clinics and physicians were a small part of building trusted allegiances with supportive doctors, nurses, and other medical professionals, which were all rooted in developing relationships with their clients. More formally, the CBCA kept several records that tracked client experiences and clinical services and behaviours by the CBCA and LBCIC throughout the 1970s. The files and questionnaires gathered by the CBCA in the early 1970s detailed how much clients paid, what the average wait time was, which services they offer, and at what week of pregnancy the physician would no longer perform abortions.¹¹⁹ Questionnaires for clients gathered information about their experiences, while questionnaires filled out by doctors gathered information about their policies around reproductive and sexual health services.¹²⁰

As the LBCIC and the CBCA kept track of sympathetic care, other doctors, nurses, and clinics made it on their "blacklists." Frustrated and, sometimes, distraught clients shared their stories of bad medical experiences with the women at the local birth control centres. The files kept by the

¹¹⁶ Letter from Judy Burgess to Mr. Archibald, November 2, 1973. Found in "Lethbridge Birth Control Association," GR1983-0133, box 1, file 5, at PAA; "The Birth Control & Information Centre," *Up* vol. 1 no. 7, September 10, 1974, pg. 9, HQ 1480.L47.U6, found at UOWA.

¹¹⁷ JB, interview, Oct. 9, 2014, transcript, GMA.

¹¹⁸ Note from Jean c. 1972 in "Board information Package 1977-1978," M-7265-39, *CBCA Collection* GA.

¹¹⁹ Notes on Dr. Motta in "Notebook Kept by Martha Weir," M-7265-12, *CBCA Collection* GA.

¹²⁰ "Questionnaire Completed Clients 1976," M-7265-336; "Notebook Kept by Martha Weir," M-7265-12; "Questionnaire Samples," M-7265-334; "Questionnaire Completed Clients 1976," M-7265-336; "Questionnaires Completed Clients 1977-1978," M-7265-337; "Questionnaires Completed Physicians [ca.1972]," M-7265-338; "Questionnaires Completed Physicians 1972," M-7265-339; "Questionnaires Completed Physicians 1978-1979," M-7265-343; "Questionnaires Completed Volunteers 1975-1967," M-7265-345; "Questionnaires Completed Volunteers 1978," M-7265-346; "Questionnaires Completed Physicians 1972," M-7265-338, *CBCA Collection* GA.

CBCA show that they kept particularly detailed records of these upsetting instances. Notes from Jean capture these stories with significant detail. In December 1972, she wrote about a woman who had a contraceptive loop inserted and found the pain unbearable: “said she screamed her head off and the nurse had to hold her down. ... I told her if she couldn’t tolerate the loop, get in touch with us, and we could send her to someone who inserted the Dalkon and someone who would do it under anaesthetic.”¹²¹ Jean’s insistence on recording this experience highlights the practice of detailed record-keeping about the services provided in local and regional contexts. The fact that Jean provided more specific information about alternative contraceptive methods, physicians, and, even, anesthetic options, suggests that she had a hand in influencing referrals. The women who ran and LBCIC and CBCA their clients strategically developed official blacklists, and unofficial gossip networks¹²² about which physicians to trust with their reproductive and sexual health matters.

Birth control centre staff, volunteers, and clients used these supportive reproductive and sexual healthcare networks and blacklists to assert themselves as active participants rather than passive patients in the new legal reproductive healthcare system. Using client feedback, staff at the centres figured out which physicians and clinics were vocally, or quietly supportive, and which physicians were to be avoided due to their unwillingness to work with the birth control centres for financial or moral reasons. The staff and volunteers focused their efforts on building relationships with enthusiastic and supportive medical professionals in their communities who looked to the birth control centres to fill in gaps in the services they offered. The women who ran the birth control centres were increasingly brought into supportive health practitioner communities and, in return, they brought sympathetic medical professionals into their women’s health activist communities. These birth control centres were deeply integrated into how reproductive and sexual health services operated on-the-ground in their local and regional communities.

Call the Birth Control Centre: Creating Spaces for Reproductive and Sexual Health in Conservative Southern Alberta

As the birth control centre staff created coalitions with political, medical, and community allies, the LBCIC and CBCA quickly became the go-to places for reproductive and sexual health

¹²¹ Note from Jean c. 1972 in “Board information Package 1977-1978,” M-7265-39, *CBCA Collection* GA.

¹²² Franca Iacovetta, “Gossip, Contest, and Power in the Making of Suburban Bad Girls: Toronto, 1945-60,” *The Canadian Historical Review*, vol. 80, no.4 (December 1999), 587-588.

information, resources, services, and training. The staff and volunteers at both southern Alberta birth control centres were known for their unique expertise about reproductive and sexual health, but also community wants and needs. The CBCA and LBCIC were specific safe spaces to have conversations about contraception, abortion, sex, and sexuality outside of the typical medical institutions. As word spread about this particular expertise at the birth control centres, community organizations, social services, and medical professionals across the province (and sometimes outside of the province) sought educational materials, training, information workshops, as well as general advice and services from the CBCA and LBCIC. Both southern Alberta birth control centres were woven into the cultural landscape of 1970s Alberta as community hubs of reproductive and sexual health expertise and services.

The CBCA and LBCIC's community presence extended beyond the medical and social sphere as they became part of the broader local communities. Staff and volunteers at the birth control centers were not shy about spreading the word about the services and programs they offered, but they knew that stigma about birth control, abortion and sex prevented some clients from visiting the birth control centres themselves. To get the word out and make citizens more comfortable the LBCIC and CBCA employees participated in a variety of community activities and events in the 1970s. Many of the women who ran the CBCA hosted booths at community fairs and, when their LIP funding was on the line, organized several community fundraising events – including a casino fundraiser in 1977.¹²³ The LBCIC activists also hosted booths at the annual Whoop Up Days fair and exhibition, and the CBCA hosted several information booths and built floats for the Calgary Stampede exhibition and parade several times during the decade.¹²⁴

These exhibitions were ideal events for the birth control centre staff to increase public awareness about the centres and demystify their services. The sheer number of people who saw the LBCIC or CBCA signage at the local exhibitions got the word out about the birth control centres. The Calgary Stampede alone attracted hundreds of thousands of locals and tourists each July, and by

¹²³ See, for example: Booth Application form for the Chinook Charity Bazaar, April 29, 1975, found in “Correspondence, 1975,” M-7265-87; “Fundraising Casino 1977,” M-7265-1977; “Fundraising Casino,” M-7265-1978-1979; “Fundraising Benefit Brunch, 1977-1978,” M-7265-175; “Fundraising Chinook Charity Bazaar, 1978,” M-7265-179, *CBCA Collection GA*.

¹²⁴ JB, interview, Oct. 2, 2014, transcript, GMA; “What does the Board of Directors Really Do?” in *Unity* vol. 1 no. 9 June 30, 1975, *LBCIC, 1973-1975 GMA*; Letter of application for Stampede Parade; CBCA stampede Booth Plans; Newspaper clipping, “Family Planning Booth Favourable,” by Margaret Calder, from the *Calgary Herald*, c. 1974 in “Strategy Committee, 1978,” M-7265-66, *CBCA Collection GA*.

1976 the event hosted over one million spectators.¹²⁵ With the high volume of visitors, these events also provided clients, especially youth, with an opportunity to visit the birth control centre booths or snag an information pamphlet with less surveillance. Lethbridge's Whoop Up Days and the Calgary Stampede, not considered the first place to look for local histories of birth control activism, hosted their local birth control centres several times over the decade. In doing so, the birth control centres asserted their place in the public and their regional communities.

The fact that the CBCA had been approved to participate in Stampede events was a public demonstration of acceptance of the Association by Alberta elite and illustrates a broader political and cultural acceptance of the CBCA in the region. The Stampede had been solidified as part of the Calgarian identity by the late 20th century and held significant political, economic, and community significance in Calgary and Alberta. Historians Mary Ellen Kelm and Max Foran have shown the cultural significance of rodeos and stampedes¹²⁶ in southern Alberta, and specifically the “cultural phenomenon” of the Calgary Stampede.¹²⁷ By the 1970s the Calgary Stampede was established as a local institution that reached back to 1886.¹²⁸ The local tradition soon became a regional cash cow, entwined with municipal and, to a lesser extent, provincial economies and politics.¹²⁹ Recognizing the Stampede as an important cultural aspect for many urban and rural Albertans, but also a significant part of the regional economy, a variety of politicians attended the event during the 1970s. Premier Peter Lougheed,¹³⁰ local MPs and MLAs, and other political figures, including Prime

¹²⁵ Wendy Dudley, “Guy’s Stampede Dream,” the *Calgary Herald*, July 3, 1998, 2.

¹²⁶ Rodeos are often smaller events that focus solely on the competitive events, like bull riding and barrel racing. Rodeos can also become part of larger stampedes, that include a wide range of rodeo competitions along with other attractions, including entertainment shows, non-rodeo competitions, parades, fair grounds and rides, and food concessions. See Mary Ellen Kelm, *A Wilder West: Rodeo in Western Canada*, (Vancouver: University of British Columbia Press, 2011), 4-6, glossary.

¹²⁷ Mary Ellen Kelm, *A Wilder West: Rodeo in Western Canada*, (Vancouver: University of British Columbia Press, 2011), 2; Max Foran, introduction to *Icon, Brand, Myth: The Calgary Stampede*, edited by Max Foran, Edmonton: Athabasca University Press, 2008), ix.

¹²⁸ The Calgary Stampede was formally established in 1912, but earlier iterations of the exhibition and rodeos – separately – date back to 1886. See Max Foran, “The Stampede in Historical Context,” in *Icon, Brand, Myth: The Calgary Stampede*, edited by Max Foran, Edmonton: Athabasca University Press, 2008), 2.

¹²⁹ Foran, Introduction, ix-x; Max Foran, “More Than Partners: The Calgary Stampede and the City of Calgary,” in *Icon, Brand, Myth: The Calgary Stampede*, edited by Max Foran, Edmonton: Athabasca University Press, 2008), 148-149, 153, 164-167.

¹³⁰ Peter Lougheed at the Calgary Stampede, July 1970, *Calgary Herald* Photographs Collection, Glenbow Archives, Calgary, Alberta, NA-5602-25.

Minister Pierre Trudeau (1971 and 1978),¹³¹ British Princes Charles and Andrew (1977),¹³² and even Queen Elizabeth (1973)¹³³ attended the Calgary Stampede in the 1970s. Because of its increasing cultural, economic, and, therefore, political clout, the Stampede Board was often made up of an “impressive aggregation of local business and social elites.”¹³⁴ On the surface, the Stampede Board and the CBCA made for strange bedfellows. The annual Calgary Stampede celebrated the masculinity and rigour of the mythical rugged cowboy,¹³⁵ which typically did not include discussions of women reproductive rights and sexual liberation. But by the second half of the 20th century the Stampede was also used to showcase Calgary’s modernity among other Canadian urban centers.¹³⁶ The desire to establish Calgary as a metropole by the municipal government and Stampede board alike, opened doors for groups like the CBCA to be featured alongside their cowboy counterparts at the important provincial event. The approval for the CBCA to be part of the Stampede exhibition and parade in the 1970s solidified its place within the region and, in the process, earned the Association respectability among some movers and shakers in the province.

The birth control centres reach into their respective communities extended beyond large scale community events to include deeper relationships with local groups. In 1974, Pauline Hoskin explained that the LBCIC worked with “family doctors, gynecological, and psychiatric specialists ... teachers, student counsellors, and ministers”¹³⁷ among others. While the CBCA received thousands of letters over the course of a decade, including those from several community organizations, medical associations, and local high schools.¹³⁸ Sometimes the authors of these letters sought specific

¹³¹ Primer Pierre Trudeau in the Stampede Parade, July 1971, *Calgary Herald* Photographs Collection, Glenbow Archives, Calgary, Alberta, NA-4476-1373; Ernest Harold Reksten, photograph of Primer Pierre Trudeau in the Stampede Parade, July 7, 1978, Glenbow Archives Photograph Collection, Glenbow Archives, Calgary, Alberta, S261-12.

¹³² Prince Charles and Prince Andrew at the Calgary Exhibition and Stampede, July 8, 1977, *Calgary Herald* Photographs Collection, Glenbow Archives, Calgary, Alberta, NA-2864-16941a.

¹³³ Queen Elizabeth at Calgary Exhibition and Stampede Indian Village, July 5, 1973, *Calgary Herald* Photographs Collection, Glenbow Archives, Calgary, Alberta, NA-2864-23281.

¹³⁴ Foran, “More Than Partners,” 167.

¹³⁵ Foran, “More Than Partners,” 148-149, 153, 164-167.

¹³⁶ Mary Ellen Kelm, *A Wilder West: Rodeo in Western Canada*, (Vancouver: University of British Columbia Press, 2011), 4.

¹³⁷ “Lethbridge Birth Control and Information Centre Review of Budget and Programs for January 1, 1974 to November 8, 1974;” “Proposal of Budget and Programs for 1975: Presented to the City of Lethbridge, the Province of Alberta Department of Preventative Social Services, and Family Planning Federation of Canada,” *LBCIC, 1973-1975* GMA.

¹³⁸ The community organizations reaching out to the CBCA in 1971 and 1972 alone included: The Family Service Association of Edmonton, the City of Calgary’s Social Services

information and advice: “I was told by a woman who went through your clinic that you had a pamphlet on the Seattle abortion scene. We would really be grateful if you could send us a copy of your pamphlet so we could help women in Edmonton seeking an abortion.”¹³⁹ While others, like President of the Calgary Public Schools Local 38 (ATA) Arthur Cowley and District home Economist in the Department of Agriculture of Alberta Yvonne Kennedy, requested educational literature. Cowley wrote on April 25, 1972: “If you have materials on the mentioned topics [human sexuality, birth control, VD], I would appreciate having these forwarded to our office so that they can be made available to teachers for possible use at Professional Days, or if so requested by the teachers concerned.”¹⁴⁰ As early as 1971 and 1972, many professionals in the province recognized the unique expertise the birth control centres had and reached out for guidance on their own family planning initiatives.

Even religious organizations and churches recognized the Association and Centre’s unique position and experience in community sexual health education. In 1972, Minister Robert Johnson for the Rundell Memorial United Church requested a CBCA educational workshop for youth in Banff: “I can not [sic] personally say that I approved of the actions of many young people, sexually, but I do not feel that they should not be denied the information that could save them from disease and other unfortunate occurrences...” Minister Johnson made it clear that he did not approve of premarital sex, but this did not stop him from reaching out on behalf of his congregation who wanted young people to learn how to practice safe sex. Before signing off, he asked the CBCA to

Department, the Canadian Mental Health Association in Alberta, Calgary Public School Local 38, district home economists through the Alberta Department of Agriculture, CKXL Community Radio, United Church Women’s League in Carbon, AB, Alberta 4H, Blairmore Preventative Social Services, Order of the Royal Purple in Castor, AB, University Student Unions in Calgary and Regina, Alberta Alcohol and Drug Abuse Commission, Standard High School Student Council, several students from Banff, Acme, Brooks, Lacombe, Calgary, Elmira, ON, and Aylmer, ON requesting information for school projects, activist organizations in Alberta like the Edmonton Abortion Referral Program, MOVE, Threshold, FIRST-US, as well as superintendents, administrators, and teachers at Nanton High School, Ernest Manning High School, Lord Beaverbrook High School, and Claresholm. See: “Correspondence 1971,” M-7265-79; “Correspondence 1972,” M-7265-80; “Police Liaison Orientation Program,” 1977, in “Educational Outreach 1974-1976,” M-7265-100; Letter from *Chatelaine* to CBCA, August 21, 1972; and Letter from Calgary Correctional institution Women’s Office, December 20, 1972, in “Correspondence 1972,” M-7265-80, *CBCA Collection GA*.

¹³⁹ Letter from Mary Gareau to the CBCA, November 30, 1971. Found in “Correspondence 1971,” M-7265-79, *CBCA Collection GA*.

¹⁴⁰ Letter from Arthur Cowley to the CBCA, April 25, 1972. Found in “Correspondence 1972,” M-7265-80, *CBCA Collection GA*.

“present an honest discussion of birth control and dangers of V.D.”¹⁴¹ Similarly, in 1974 the Lethbridge Ministerial Association wrote to the LBCIC offering their support. The letter explained that they did not believe the Centre promoted promiscuity, as some critics claimed.

They decided the Centre was helpful to the community: “Upon positive investigation, the Ministerial has conceded the function of the Birth-control-centre to be of helpfulness.”¹⁴²

Additionally, the Lethbridge Ministerial Association recognized the LBCIC as an essential community service and stated that the work done at the Centre often connected with “those whom the church may not be able to reach.”¹⁴³ Both letters from Minister Johnson and the Lethbridge Ministerial Association show that these church leaders recognized that these centres had developed valuable expertise and relationships within the community.¹⁴⁴ What is more, these expressions of support and collaboration between religious leaders and the local birth control centres illustrate that the CBCA and LBCIC were regarded as respectable enough to deal with controversial and delicate conversations about sex and reproduction. In a region colloquially known for its religious conservatism some religious leaders and groups sought out the local birth control centres expertise and community connections.

Local researchers used the birth control centres’ connections in the community too. For example, in 1974 and 1975 Master’s student Marlene Anger sought the CBCA’s help in her research on Therapeutic Abortion in Calgary. Anger’s study explored “the knowledge, attitudes, and practices of birth control of women who are requesting therapeutic abortion.” She left questionnaires with the CBCA to administer with willing clients during their pre- and post-abortion counselling sessions.¹⁴⁵

¹⁴¹ Letter from Robert K. Johnson to CBCA, 9 June 1972, “Correspondence, 1972,” M-7265-82, *CBCA Collection GA*.

¹⁴² Letter from the Lethbridge Ministerial Association to the LBCIC, May 18, 1974, in “Lethbridge Birth Control and Information Centre Annual Report and Evaluation, 1973 and Budget, 1974,” November 1973, found in “Lethbridge Birth Control Association,” GR1983-0133, box 1, file 5, PAA.

¹⁴³ Letter from the Lethbridge Ministerial Association to the LBCIC, May 18, 1974, in “Lethbridge Birth Control and Information Centre Annual Report and Evaluation, 1973 and Budget, 1974,” November 1973, found in “Lethbridge Birth Control Association,” GR1983-0133, box 1, file 5, PAA.

¹⁴⁴ Erika Dyck and Karissa Patton, “Activists in the “Bible Belt:” Conservatism, Religion, and Recognizing Reproductive Rights in 1970s Southern Alberta,” 197-217, in *Compelled to Act: Histories of Women’s Activism in Western Canada*, edited by Sarah Carter and Nancy Langford, (Winnipeg: University of Manitoba Press, 2020).

¹⁴⁵ Note from Rosalee to CBCA volunteers c. 1975 on Marlene Anger’s Study on birth control and Abortion in Calgary in “Abortion (Research – Foothills Hospital),” M-7265-15, *CBCA Collection GA*.

Anger also gave the questionnaires to TAC patients at the Foothills Hospital, but she specifically requested to work with the CBCA because of their relationships with individual clients and community organizations.¹⁴⁶ Anger's request to collaborate with the CBCA highlights their extensive client base and know-how around counselling and referral services for birth control and abortion.

Local organizations and service providers also identified critical gaps that these birth control centres filled. In 1973, the Rehabilitation Society of Lethbridge wrote: "Our agency has been in contact with the Birth Control & Information Centre since last Spring to help us in providing a programme for our young adults in life skills."¹⁴⁷ Similarly, in 1974 Jenna Baty, director of the YWCA, expressed her appreciation for the LBCIC counsellors who helped one of her clients and inquired: "I wonder in the Fall if we could use your counselling referral service on a more regular basis? We need counselling support badly but have neither the financial resources nor local concern in that area."¹⁴⁸ These local birth control centres reached people in their communities that other social, religious, or medical services did not always have the capacity to reach. The CBCA and LBCIC acted as a bridge between a variety of groups and provided integral support in their local and provincial communities when other organizations lacked the services or resources to do so.

Like the community organizations that called upon the Southern Alberta birth control centers, several doctors, hospital departments, and regional health units also sought educational material and training workshops from the new reproductive and sexual health experts in town. Health units, student health centres, and individual doctors and nurses across Alberta requested educational materials, talks, or workshops.¹⁴⁹ Nursing Instructor Pat Shuster, for example, sent

¹⁴⁶ Note from Rosalee to CBCA volunteers c. 1975 on Marlene Anger's Study on birth control and Abortion in Calgary in "Abortion (Research – Foothills Hospital)" M-7265-15, *CBCA Collection* GA.

¹⁴⁷ Letter of support for the LBCIC from the Rehabilitation Society of Lethbridge For the Handicapped, October 23, 1973; "Lethbridge Birth Control and Information Centre Annual Report and Evaluation, 1973 and Budget, 1974," November 1973, found in "Lethbridge Birth Control Association," GR1983-0133, box 1, file 5, at PAA.

¹⁴⁸ Letter from Jenna Baty of the YWCA to Judy Burgess of the LBCIC, June 15, 1973, in "Lethbridge Birth Control and Information Centre Annual Report and Evaluation, 1973 and Budget, 1974," November 1973, found in "Lethbridge Birth Control Association," GR1983-0133, box 1, file 5, at PAA.

¹⁴⁹ Health Units: Note from Jean c. 1972, in "Board information package, 1997-1978," M-7265-39; Letter from Chief Mountain Health Unit to the CBCA, March 28, 1971, in "Correspondence 1971," M-7265-79; Letter from City of Calgary Health Department, March 14, 1972, in "Correspondence 1972," M-7265-80, Letter from Chinook Health Region, October 31, 1972, both found in "Correspondence 1972," M-7265-80, *CBCA Collection* GA; Student Health Centres: Letter from C. McDavid, R.N, Southern Alberta Institute of Technology Student Health

requested material for her students at the Foothills Hospital in a letter: “As our students are often involved with teaching patients in regard to birth control, I would appreciate receiving copies of material available of the various contraceptive devices as soon as possible.”¹⁵⁰ Similarly, in 1972 Dr. Ian MacPhail turned to the CBCA for a presentation on abortion and birth control for the Alberta Chapter of the College of Family Physicians.¹⁵¹ The fact that several doctors, hospital departments, and regional health units requested educational material and outreach from the centres suggests that these doctors believed the CBCA and the LBCIC held and provided the best educational resources and skills in terms of reproductive and sexual health education and service provision. This suggests that while the Calgary and Lethbridge birth control centres operated as an alternative to institutional medical practices, medical professionals relied on them for valuable knowledge about contraception, abortion, and sexuality as well as how to talk to patients about these topics. Like the local and regional churches and the researchers, the medical professionals soon realized that the birth control center had the knowledge and connections to reach a broader base of clients.

Some physicians in the province began to consult with the CBCA and LBCIC when it came to advancing new knowledge about reproductive and sexual health provision. Correspondence between a CBCA employee and a doctor in Pincher Creek, for example, captures a conversation about the “morning-after pill.”¹⁵² Patricia Anderson, a registered nurse who worked with the CBCA, gave an educational presentation in Pincer Creek in May 1972, where she met the local physician, Dr. Hodgson. Later that month, she sent a follow-up letter to Hodgson with the information he requested on the “morning-after pill.” In the letter, she included the pharmacological dosage recommended for the “morning after pill,” its effects, and how it worked to make the

Nurse, March 4, 1971, found in “Correspondence 1971,” M-7265-79; Doctors: Letter from Dr. Agnes O’Neil, July 9, 1971, and letter from Dr. Henry FitzGibbons, December 15, 1971, both in “Correspondence 1971” M-7265-79; Letter from Dr. Ian MacPhail, c. January 1972, in “Correspondence 1972;” Nurses: Letter from Mrs. Pat Schuster, RN, September 22, 1972, and letter from Margaret Smith, RN, October 31, 1972, both found in “Correspondence 1972,” M-7265-80, *CBCA Collection GA*; Letter of support for the LBCIC from W. D. Stitt of the Bigelow Fowler Clinic, October 26, 1973, “Lethbridge Birth Control and Information Centre Annual Report and Evaluation, 1973 and Budget, 1974,” November 1973, found in “Lethbridge Birth Control Association,” GR1983-0133, box 1, file 5, at PAA.

¹⁵⁰ Letter from Mrs. Pat Schuster, RN, September 22, 1972, in “Correspondence 1972,” M-7265-80, *CBCA Collection GA*.

¹⁵¹ Letter from Dr. Ian MacPhail, c. January 1972, in “Correspondence 1972,” M-7265-80, *CBCA Collection GA*.

¹⁵² Letter from Patricia Anderson to Dr. Hodgson, May 25, 1972, in “Correspondence 1972,” M-7265-80, *CBCA Collection GA*.

“endometrium hostile to implantation of a fertilized ovum.” She also put the doctor in touch with a Calgary physician, Dr. Clapperton, who had more information.¹⁵³ That same year, a Dr. R. Higgin asked the association to participate in a survey conducted by the Maternal Welfare Committee of the Alberta Medical Association. The survey was designed for Alberta physicians, but Dr. Higgin wrote, “your help is most earnestly sought in completing and returning the enclosed brief questionnaire.”¹⁵⁴ By 1975, the Acting Deputy Minister of Health Services in the province even requested all information the CBCA had on prevention of VD.¹⁵⁵ By the end of the decade, the CBCA activists were invited to work with the University of Calgary Medical School to train medical students. The Association’s July 1977 newsletter included a call for “seven more women to work with us as professional patients in the training of medical doctors. As Professional patients, we will be responsible for teaching second year medical students to perform a humane and informative gynecological examination on a well patient.”¹⁵⁶ Throughout the decade, the CBCA was consulted by medical professionals for training in reproductive and sexual health service provision. Even though the southern Alberta birth control centers did not provide clinical services, medical professionals often relied on them to facilitate training or knowledge exchange about new reproductive and sexual health technologies and models of care. In doing so, these medical professionals recognized and utilized the expertise of the women who ran the birth control centres throughout the decade.

As the decade went on, physicians and medical institutions began to collaborate with the Association and Centre more regularly. As early as 1972, the CBCA created a consultation clinic for abortion referrals with the help of local physicians. Activists and doctors alike wanted these consultations to decrease “the time needed to make appointments and satisfy the legal red tape surrounding abortion” in the city.¹⁵⁷ So, the CBCA facilitated clinic times for doctors to consult with women who requested abortions. The physicians involved often took the women visiting the clinic

¹⁵³ Letter from Patricia Anderson to Dr. Hodgson, May 25, 1972, in “Correspondence 1972,” M-7265-80, *CBCA Collection GA*.

¹⁵⁴ Letter from John R. Higgin, Chairman of the Maternal Welfare Committee of the Alberta Medical Association, March 14, 1972, in “Correspondence 1972,” M-7265-80, *CBCA Collection GA*.

¹⁵⁵ Letter from Dr. Jean Nelson to the CBCA, January 10, 1975, in “Correspondence, 1974,” M-7265-85, *CBCA Collection GA*.

¹⁵⁶ The women who volunteered as professional patients were paid \$7 per hour for their training and teaching sessions. See: CBCA Newsletter, July 19, 1977, pg. 2, in “Newsletters (CBCA) 1975-1977,” M-7265-241, *CBCA Collection GA*.

¹⁵⁷ “Dear Friend” on the new abortion clinic service through the CBCA c. 1972 in “History 1971-1975,” M-7265-185, *CBCA Collection GA*.

on as clients and present their cases to the TACs at their affiliated hospitals.¹⁵⁸ This service was especially important for rural women who had to travel to Calgary for their abortions. With the consultation service, women from rural communities more easily accessed pregnancy tests, doctor referrals, and TAC appointments within one or two days. In some cases, the procedure might even occur during the same trip.¹⁵⁹ The consultation service at the Association exemplifies professional collaborations between the medical community and local grassroots birth control centres. In this case, the CBCA was the only space where an abortion service of this kind could succeed. The doctors who worked with the consultation clinic already had hospital privileges, but the medical institutional limits of timed appointments and billing procedures limited some physicians reach within typical medical spaces. With the LBCIC and CBCA's volunteer power, community connections, social consciousness, and alternative care models physicians worked within the birth control centers to create the change needed in their communities.¹⁶⁰

As specialist knowledge in reproductive and sexual healthcare developed, individual physicians benefitted from these collaborative efforts with birth control centres. Dr. Lloyd Johnston, who helped establish the LBCIC, expanded his expertise by working with the Centre. So much so that in 1975 Johnston was the Chairman of the Alberta Medical Association's Committee on Maternal Welfare.¹⁶¹ Judy Burgess recalls the Centre, "certainly was the start of my career" as a public health professional.¹⁶² Her work as an activist and a nurse at the LBCIC during the early 1970s set her on a successful career path from establishing youth clinics, to becoming the Director of a university health centre.¹⁶³ As activists at these centres were increasingly known as the hub of sexual and reproductive health expertise, medical professionals also benefitted professionally from their collaborations with the centres.

¹⁵⁸ "Dear Friend" on the new abortion clinic service through the CBCA c. 1972 in "History 1971-1975," M-7265-185, *CBCA Collection* GA.

¹⁵⁹ Letter from Maureen Sinclair to the CBCA, November 11, 1972, and letter from the CBCA to Maureen Sinclair, November 20, 1972, in "Correspondence, 1972," M-7265-80; "Dear Friend" on the new abortion clinic service through the CBCA c. 1972 in "History 1971-1975," M-7265-185, *CBCA Collection* GA.

¹⁶⁰ Correspondence between Dr. Bernard Martin-Smith and the CBCA, October 27, 1972, in "Correspondence, 1972," M-7265-80, *CBCA Collection* GA.

¹⁶¹ Letter from Alberta Medical Association January 28, 1975, in "Alberta Family Planning Co-Ordinating Committee, 1975," M-7265-20, *CBCA Collection* GA.

¹⁶² JB, interview, Dec. 8, 2012, transcript, GMA.

¹⁶³ JB, interview, Dec. 8, 2012, transcript, GMA.

Whose Labour?: Collaborations and Conflict

The medical-birth control centre collaborations continued throughout the 1970s, but by the end of the decade, the Calgary Association's work with some mainstream medical institutions became a point of conflict and, eventually, a labour issue. By the late 1970s, some Calgary physicians used the birth control centres to off-load their overburdened schedules. The labour relationship between the CBCA and the local Therapeutic Abortion Committees were especially fraught.¹⁶⁴ In 1978, CBCA board member Aaron Rynd expressed concern over the labour asked of the Association in the annual report that year. During a nursing strike in 1977-1978, Calgary Hospitals could not maintain their standard capacity to perform surgeries. Many activists felt "the burden cast upon CBCA" to fill in for the striking nurses because the CBCA was "asked to assess the urgency of our clients' need for the TA procedure" by the Foothills Hospital TAC. Ultimately, the Association's staff continued to monitor the demand for abortions and facilitate any abortion travel needed but refused to undercut the striking nurses. In the report for the CBCA's "Strategy Committee" in 1978, board member Aaron Rynd wrote that the CBCA staff had "emphasized repeatedly that our role is merely to provide information and referral" to local TAC requests during the nursing strike.¹⁶⁵ This one report captures a moment when collaboration between medical professionals and the activists at the CBCA was exploited for cheap, volunteer, and, even, scab labour.

Despite the increasingly problematic labour issues, medical professionals and other feminist groups noticed the southern Alberta birth control centres success in their communities. The coalitions formed between birth control centre activists, sympathetic medical professionals, and the local communities more broadly did not go unnoticed. Medical professionals and feminist organizations from other provinces and even some from the United States sought out the southern Alberta birth control centres' advice and resources. As early as 1971, the CBCA received a letter from a physician in Penticton, British Columbia, who wanted to collaborate with them on their abortion travel program. Dr. Henry FitzGibbon wrote, "Calgary, of course, is extremely well known for the really excellent work that has been done in family life and family planning in your city, and it is an example which should be followed by all other major cities in Canada."¹⁶⁶ Later, a variety of

¹⁶⁴ CBCA Board Workshop Meeting notes, June 17, 1978, in "Annual General Meeting 1978," M-7265-27, *CBCA Collection* GA.

¹⁶⁵ Aaron Rynd, Strategy Committee, CBCA Annual Report, 1978 in "Annual General Meeting 1979," M-7265-28, *CBCA Collection* GA.

¹⁶⁶ Letter from Dr. Henry FitzGibbon to CBCA, December 15, 1971, in "Correspondence 1971," M-7265-79, *CBCA Collection* GA.

feminist groups from Port Alberni to Toronto began to reach out to the southern Alberta birth control centres to build women's health knowledge across borders. Kathryn Hazel, for instance, wrote to her allies in Lethbridge, "I worked in Lethbridge nine years ago and am knocked out by the fact that you have such an active group. We are just getting off the ground here in Port Alberni! I have enclosed a money order to pay for a subscription [to your newsletter] for our centre."¹⁶⁷ Similarly, Kathleen McDonell from Toronto requested resources on women's health materials in a letter to the CBCA in 1975.¹⁶⁸ A year later the Toronto Department of Public Health wrote to the CBCA: "A Family Planning Service has recently been set up as a division of the City of Toronto Public Health. ... would you please send us any information you have on family planning programmes in your area..."¹⁶⁹ By the end of 1976, the CBCA even received a letter from the Committee on Women in Psychology of the American Psychological Association who asked for "any information describing the operations of your Center and the various service you provide."¹⁷⁰ The different geographical and professional currents by which the Calgary Association and the Lethbridge Centre provided resources and educational outreach illustrates that these feminist grassroots organizations were quite adept in communicating their purpose and importance to a range of individuals and organizations. From doctors in bordering provinces to professional women's committees in the United States, the CBCA became known locally and transnationally for their reproductive and sexual health expertise and skillful community organizing.

Conclusion

The CBCA and LBCIC were publicly funded to provide specific health services and education, but ultimately operated outside of new provincial healthcare policy, yet the southern Alberta birth control centres certainly did not operate on the fringe of their communities. Some tried to paint the women who ran the birth control as "hippies causing trouble." Professional and community allies rebutted, arguing that the Association and the Centre were preventative social services and it was economically irresponsible not to fund the birth control centres. While the

¹⁶⁷ "Feedback," *Up*, vol. 2 no.6, December 1975, pg. 21, HQ 1480.L47.U6, found at UOWA.

¹⁶⁸ Letter from Kathleen McDonell to the CBCA, July 11, 1975, in "Statistics, 1979," M-7265-420, *CBCA Collection* GA.

¹⁶⁹ Letter from the Toronto Department of Public Health to the CBCA, May 11, 1976, in "Correspondence, 1974," M-7265-85, *CBCA Collection* GA.

¹⁷⁰ Letter from Katherine Greene (APA) to the CBCA, December 1976, in "Correspondence from January to June 1977," M-7265-90, *CBCA Collection* GA.

discourse of preventative social services did not always fit in the LBCIC or CBCA's women's health mandates, the women who ran the centres used this sentiment to their own advantage when it came to attaining funding, building community relationships, and garnering public support. The more public support, the more clients and allies reached out to the birth control centres. As their client base expanded, both the CBCA and the LBCIC developed a more nuanced and sensitive set of expertise guided by feedback from their clients. The Centre and Association became a unique community space where clients and other service providers came to get information, training, or education. Other local medical establishments and social services relied on the LBCIC and CBCA to provide services, counselling, and education that they did not have the capability, resources, or time to provide. As the birth control centres were a larger part of the local health service provision in southern Alberta, they also became part of the regional community. Despite opposition or funding controversies, the CBCA and LBCIC were deeply integrated into the political, medical, and cultural landscapes of 1970s Alberta.

Although the region retained a politically conservative reputation, the CBCA and the LBCIC each became a significant presence in their local and regional communities, offering feminist services even with the support of political conservative government representatives and cultural symbols of rugged masculinity, like the Calgary Stampede. The work of CBCA and LBCIC staff within the community quickly spoke for itself and the two centres became important hubs of information, resources, and expertise on reproductive and sexual health services and education. Religious leaders reached out across the "Bible Belt," medical institutions sought training and advice despite some of their colleagues' worries about profits and authority, educational professionals requested workshops and literature in the face of controversy, and community organizations worked with the birth control centres to better serve their clients. The 1970s witnessed significant public displays of support for the birth control centers too, from guerrilla skit performances and approving birth control centre booths at local exhibitions, to doctors stating the importance of the CBCA and LBCIC in local newspapers, to clergy offering their official sign of approval of the centres. The southern Alberta birth control centres quickly became important players on a shifting landscape of reproductive health services and public health education. These collaborations and displays of support across political, medical, and cultural spheres of the province challenges the narrative of Alberta as a monolithic hotbed of conservatism.

CHAPTER 2: MODELS OF HEALTH: FEMINISM, CLIENT-DIRECTED SERVICES, & EDUCATION

Consider yourself 1st: You have to live with you for the rest of your life. Joe may run off to Indonesia with a belly-dancer. Your kids (if and when) may go to Mars or Afghanistan or take up organic farming. You'll still be with you, and if all you had in life was Joe and the kids, what's left for you won't be worth talking about.
– From the Birth Control & Information Centre.

– *Up* vol. 1, no. 5, July 29, 1974¹

In 1974 the LBCIC published the “Consider Yourself 1st” passage as an advertisement in the Lethbridge Women’s Place newsletter *Up*. The narrative in “Consider Yourself 1st” made for a strange ad for a local birth control centre. There was no explicit mention of birth control, reproduction, or sexual health – other than the question of “(if and when)” the reader would have children. Rather, the ad focused on mental wellbeing and encouraged individual fulfillment. Its cautionary tale warned women to find purpose and enjoyment outside of the roles of wife and mother. This advertisement pointed to the broader feminist call to challenge the idea that becoming a wife and mother was the utmost triumph or goal for women. Examining this 1974 birth control centre advertisement helps to illustrate how the LBCIC conceptualized health beyond physical wellbeing. The LBCIC and the CBCA argued that the social and cultural circumstances that tied women’s self-worth to her husband and children’s happiness contributed to poor health and operated under the idea that the health of the individual and the health of the community were deeply entwined. So, when the women who ran the LBCIC called for women to “consider themselves first,” they astutely connected the patriarchal rules about proper feminine roles to women’s lack of fulfillment and wellbeing.

The CBCA and the LBCIC created institutional space for nuanced discussions, new services, as well as sex and parenting education for a complex clientele. Unlike the family planning and birth control clinics, which served the vital role of providing birth control prescriptions, the Centre and the Association recognized that reproductive and sexual health went beyond accessing birth control and touched upon elements of family planning in the broadest sense. The birth control centres operated outside (although sometime in collaboration with) of these formal healthcare services, which afforded them more opportunity to participate in broader feminist and health activism in the 1970s. The women who established and ran the CBCA and LBCIC conceptualized their

¹ “Consider yourself 1st,” in *Up* vol. 1, no. 5, July 29, 1974, pg. 3, HQ 1480.L47.U6, found at the University of Ottawa’s Women’s Archives, Ottawa, Ontario (UOWA).

reproductive and sexual health services as more than physiology, reproductive organs, pregnancy, and venereal disease. In this way they were like the McGill students who published the *Birth Control Handbook*, or the Boston Women's Health Collective. The Albertan women knew that consciousness-raising and education about orgasms, masturbation, healthy relationships, self-value, women's liberation, and sexual liberation were integral to improving individual and community reproductive and sexual health. Ultimately, what made the Association and the Centre stand out among the various family planning initiatives was the broad scope of services offered and their willingness to take on any reproductive and sexual health issue – physiological or social – that came their way.

By the 1970s, birth control staff and volunteers looked to scientific and medical knowledge about reproduction, sex, and VD as a way to understand the physical female body. New scientific and medical knowledge about reproduction and sex in the 1950s and 1960s gave women new tools to understand the physical aspect of their bodies and sexualities. At the same time, women grew increasingly critical about their relationships with medical doctors. The women who ran the birth control centres necessarily maintained alliances with the medical community during the 1970s, but they ultimately aspired to also provide an alternative space from the existing bio-medical model of care offered at clinics and hospitals. The birth control centre staff and volunteers remained critical of patriarchy power dynamics they witnessed within medical institutions. While new-found knowledge about the sexual response and women's reproductive cycle became integral to the discussions and information shared at the CBCA and LBCIC, birth control centre employees looked beyond the traditional medical community for a women's healthcare model.

Women's liberation was at the heart of the larger women's health movement, and the southern Alberta birth control centres' staff and volunteers asserted that reproductive and sexual health was political. CBCA and LBCIC activists wanted women to reclaim their power when it came to their health and bodies. Women's liberation discussions about health and society in the larger international context underscored the CBCA and LBCIC's services and education, and birth control centre staff and volunteers aimed to flip existing medical models on their heads, by placing patients at the centre, and even encouraging patients to act as experts over their own bodies. In doing so, the CBCA and LBCIC developed reproductive and sexual health services based on client-direction and community needs. Unlike physicians at medical clinics and hospital TACs, the CBCA and LBCIC relied on clients' lived experiences to design their service provision. With clients at the helm, the birth control centres amalgamated biomedical knowledge, clients' lived experiences, and women's

liberation philosophies to establish services for women's physical, emotional, mental, and sexual health.

As birth control centres brought their community needs together with broader women's liberation goals of the 1970s, educational programming and outreach became paramount to both the CBCA and LBCIC's service provision. Staff and volunteers at the centres quickly realized that their clients needed to learn the basics about reproduction, sex, sexuality, birth control, abortion, even generate more knowledge and familiarity with their own bodies in order to make informed decisions about their reproductive and sexual health. As Terri Forbis explained, people were "hungry" for good sex and reproduction education.² Education became a valuable tool to address the health needs of clients and raise consciousness about health rights as a crucial part of women's liberation. At the end of the day, the model of health at both local birth control centres aimed to reclaim women's knowledge about reproductive and sexual health.

Re-defining Health and Care: Reproduction, Sex, and Women's Health, 1948-1979

Shifts in North American concepts of health and healthcare emerged following the Second World War and the implementation of the Nuremberg Code. The 1950s and 1960s saw a plethora of new healthcare policies and scientific experimentation around reproduction and sex. From the World Health Organization's (WHO) redefinition of health in 1948 to Mao's Barefoot Doctors program in 1960s China, women who ran the CBCA and LBCIC looked back to the previous three decades and drew inspiration from international cases to inform their model of health and care in 1970s southern Alberta. In doing so, the feminist activists in Alberta reimaged definitions of health and models of care and offered alternative services that considered women's rights and patients' rights as integral to their clients' overall health and wellbeing.

After the Nuremberg Trials exposed medical experimentation and health atrocities of the Second World War, the United Nations created the WHO to encourage health as a human right. The WHO was established in April 1948 with a constitution that defined health as "a state of complete physical, mental and social wellbeing and not merely the absence of disease or infirmity."³

² Terri Forbis, interview with Karissa Patton, January 24, 2013, transcript. Interview and transcript housed at the Galt Museum and Archives, in "Oral History Project: Students' Reproductive Rights Activism in Southern Alberta during the 1960s and 1970, 20171019 (TF, interview, Jan. 24. 2013, transcript, GMA).

³ The World Health Organization, "Constitution of the World Health Organization," (New York, July 22, 1946,) 2.

The organization worked with emergent national healthcare policies and health movements throughout the mid-twentieth century. By the late 1960s the WHO officials felt “that health should be seen in terms of its social, economic and political dimensions.” In doing so, the WHO leadership “aligned itself with various governmental and nongovernmental movements that sought greater equity in health across and within countries”⁴ during the late 1960s and 1970s. The WHO began with an expanded definition of health and the organization’s work was stimulated by the many civil and human rights campaigns during those decades, aligning patient rights within international human rights. By 1978, the WHO declared all persons possessed “a right and duty to participate individually and collectively in the planning and implementation of their healthcare.”⁵

While organizations, like the WHO, championed definitions of health and established patient rights, scientific research on sex and reproduction in the United States shook public ideas about sexuality, pleasure, and reproduction in Post-War North America. In 1948 and 1953, Alfred Kinsey, a zoologist in Indiana, USA, released *Sexual Behavior in the Human Male* and *Sexual Behavior in the Human Female* (respectively). As historian Miriam Reumann outlines, Kinsey’s two publications contained statistics about premarital, extramarital sex, same-sex encounters, “and virtually every other imaginable sexual statistic.” She argues that both books, as best-sellers, “spurred unprecedented public discussion of national sexual practices and ideologies.”⁶ By 1957, and on the other side of the country, William Masters and Virginia Johnson had started their experiments on the physiological sexual response. In 1966 they published *The Human Sexual Response* and brought the science of sex to the public.⁷

While Kinsey and, later, Masters and Johnson brought sexology into homes across North America, scientist Gregory Pincus worked on the birth control pill throughout the 1950s.⁸ After

⁴ Socrates Litsios (author), Elisabeth Heseltine (editor), *The Third Ten Years of the World Health Organization, 1968-1977* (Geneva: The WHO Press, 2008), 1.

⁵ The World Health Organization, “Declaration of Alma-Ata” at the International Conference on Primary Healthcare, Alma-Ata, USSR, 6-12 September 1978, declaration IV.

⁶ Miriam G. Reumann, *American Sexual Character: Sex, Gender, and National Identity in the Kinsey Reports*, (Berkeley: University of California Press, 2005), 1.

⁷ Margaret Jackson, “Sexology and the Universalization of Male Sexuality (From Ellis to Kinsey, Masters and Johnson),” in *The Sexuality Papers: Male Sexuality and the Social Control of Women*, edited by Lal Conveney, Margaret Jackson, Shiela Jeffreys, Leslie Kay, and Pat Mahony, (London: Routledge, originally published 1984, reprinted in 2019); Margaret Jackson, “‘Facts of Life’ or the eroticization of women’s oppression? Sexology and the social construction of heterosexuality,” *The Cultural Construction of Sexuality*, edited by Pat Caplan, (London: Routledge, 1987).

⁸ Elaine Tyler May, *America and the Pill: A History of Promise, Peril, and Liberation* (New York: Basic Books, 2010), 25.

clinical trials in Puerto Rico⁹ the Pill was produced and tentatively marketed in the United States in 1957 by G.D. Searle and Company.¹⁰ By 1960 the Pill was officially on the international market and quickly made its way to Canada. While contraception remained illegal in many states and Canada, many “physicians prescribed the Pill” to American and Canadian women under the guise of a vague diagnosis of “gynecological disorders.”¹¹ Complaints of side effects from the Pill surfaced less than a decade after the new reproductive wonder drug came on the market. After experimenters ignored Puerto Rican women’s claims of significant side effects of the Pill in the early 1950s,¹² reports of dangerous side effects from mild nausea and bloating to blood clots and strokes appeared in the media and the medical world by the late 1960s.¹³

American politicians and women taking the Pill grew concerned about the “dangers” of the Pill, and in 1970 United States Senator Gaylord Nelson from Wisconsin called for a Congressional hearing about the birth control pill. Congressmen interviewed doctors, scientists, and pharmacists from the drug companies, along with other “expert” men about the Pill during these hearings.¹⁴ Women who had actually experienced the side effects of the new contraceptive sat at the hearings and grew tired of listening to “expert” after “expert” misrepresenting their own experiences. Finally, the women stopped the hearings and called for their voices to be heard.¹⁵ They likened their experiences with the medical and pharmaceutical establishments to that of test rats and guinea pigs who “feed themselves, clean their own cages...”¹⁶ The Pill hearings were an integral moment in the rise of the women’s health movement, and health activism more broadly, during the 1970s. The hearings reinforced the patronizing ways that doctors treated patients, and women in particular, into the public eye. The women who spoke up in the Pill hearings brought public attention to inherent problems within medical practices and capitalist fast-tracked drug trials.¹⁷ Histories of the clinical

⁹ See: Laura J. Briggs, *Reproducing Empire: Race, Sex, Science, and US Imperialism in Puerto Rico* (Berkeley: University of California Press, 2003).

¹⁰ Briggs, *Reproducing Empire*, 2003.

¹¹ May, *America and the Pill*, 33.

¹² Briggs, *Reproducing Empire*, (2003).

¹³ Elizabeth Siegle Watkins, *On the Pill: A Social History of Oral Contraceptives, 1950-1970*, (Baltimore: Johns Hopkins University Press, 1998), 103-105; Public Broadcasting Service, “The Side Effects of the Pill,” *American Experience Education Material*, last accessed March 11, 2020, <https://www.pbs.org/wgbh/americanexperience/features/pill-side-effects/>.

¹⁴ Watkins, *On the Pill*, 105-107.

¹⁵ Watkins, *On the Pill*, 106-107.

¹⁶ *The Pill*, directed by Chana Gazit and David Steward, (2003; United States, Public Broadcasting Service, Documentary) DVD.

¹⁷ Watkins, *On the Pill*, 104-106.

trials for the Pill and the Pill hearings made clear that women's experiences were not taken seriously by the experimenters, the drug companies, and the general practitioners who were prescribing the Pill.

Women's increasing unrest with the medical community combined with the decriminalization of contraception in Canada and several American states during the late 1960s fueled the 1970s women's health movement. The Pill hearings triggered responses from women who were fed up with the medical status quo in the United States and Canada.¹⁸ Medical anthropologist and women's health activist Sandra Morgen points to the emergence of over 1,200 women's health clinics in the early 1970s¹⁹ as a key feature of feminist activism in the United States during the decade. Morgen explains that the activist who established and ran these health centres offered significant alternatives to existing medical institutions. She states, "as long as these clinics survive, they embody and exemplify a vision of healthcare that is different from mainstream medicine. Most important, feminist clinics and advocacy organizations articulated an approach to women's health that is fundamentally different from the biomedical model that is the core of mainstream medicine."²⁰

According to scholars including Georgina Feldberg, Sandra Morgen, Laura Kaplan, and Wendy Kline, feminist models of health were linked to women's liberation more broadly. Women's health centres encouraged women to reclaim their knowledge and authority when it came to their health and bodies. Even before the women's health movement garnered international attention in the early 1970s, women physicians "sought new ways to build and consolidate ... services for women, by women" in postwar Canada.²¹ Following these women physicians' footsteps, Morgen explains that by the 1970s the feminists who worked at the birth control centres across the United States took new radical approaches outside of medical institutions. As new autonomous birth control centres emerged, women health practitioners saw themselves as "revolutionaries whose

¹⁸ Watkins, *On the Pill*, 104.

¹⁹ Wendy Kline, "The Making of *Our Bodies, Ourselves*: Rethinking Women's Health and Second-Wave Feminism," in *Feminist Coalitions: Historical Perspectives on Second Wave Feminism in the United States*, edited by Stephanie Gilmore and Sara Evans, (Urbana: University of Illinois Press, 2008), 64.

²⁰ Sandra Morgen, *Into Our Own Hands: The Women's Health Movement in the United States, 1969-1990*, (New Brunswick: Rutgers University Press, 2002), 151.

²¹ Georgina Feldberg, "On the Cutting Edge: Science and Obstetrical Practice in a Women's Hospital, 1945-1960," in *Women, Health, and Nation*, edited by Georgina Feldberg, Molly Ladd-Taylor, Alison Li, and Kathryn McPherson, (Montreal & Kingston: McGill-Queen's University Press, 2003), 123.

organizations could model a new, empowering alternative healthcare, a platform from which to promote change in women and society at large.”²² Similarly, Kaplan’s history of the feminist abortion clinic operating in Chicago from 1968 to 1973, also known as “Jane,” emerged from a group of women “who saw something that needed to be done and did it.”²³ Kaplan explains that Jane activists used a service model that was based on “how they [the Jane activists] themselves wanted to be treated.”²⁴ Historian Wendy Kline explores the complicated relationship between scientific knowledge, medical practice, and women’s bodies. Kline outlines the women’s health movement as a “grassroots campaign that used a wide range of strategies to increase women’s power over their own bodies, including alternative healthcare organizations, advocacy, and education.”²⁵ These scholarly accounts emphasize how feminist activists recognized women’s particular health needs and built alternative services to fulfill those needs from the ground up. In doing so, the establishment of women-run health centres became integral to women’s liberation goals in the 1970s as women fought for more control over their health services.

The birth control centre activists in Calgary and Lethbridge looked to the medical and scientific world as well as the increasing influence of the women’s health movement to reimagine reproductive and sexual healthcare in their communities. The CBCA and LBCIC often invoked the WHO’s definition of health and women’s health movement critiques of medical institutions within their grant proposals, resource material, and advertisements. Building on that definition, the CBCA’s 1976 advertisement for their Women’s Health Weekend explained that: “Health is not simply absence of disease; it is dependent on environment, nutrition, physical self, contentment, and feeling O.K. with oneself.”²⁶ While the women who ran the Centre and Association embraced the idea that health was more than just physical wellness and the absence of illness, they created new scientific and medical knowledge about human sexuality and reproduction and integrated it into their educational programming. As oral history narrators recalled, most people knew very little about their

²² Morgen, *Into Our Own Hands*, 105.

²³ Laura Kaplan, *The Story of Jane: The Legendary Underground Feminist Abortion Service* (New York: Pantheon Books, 1996), xx.

²⁴ Kaplan, *The Story of Jane*, x.

²⁵ Kline, “The Making of *Our Bodies Ourselves*,” 64.

²⁶ The CBCA references the World Health Organization’s constitution in their project proposal for the Women’s Health Weekend Workshop to Alberta Preventative Social Services in 1976. See “Calgary Birth Control Association Special Project to PSS,” in “Workshops: Women’s Health Weekend 1976,” M-7265-458, found in the *Calgary Birth Control Association Collection*, at the Glenbow Archives, Calgary, Alberta (CBCA Collection GA).

bodies, the sexual response, and reproduction. Terri Forbis stated, “I had clients that were forty-four years old that had so little information about their bodies and about reproduction and what was happening. It wasn’t just limited to young people.”²⁷ She specifically emphasized the importance of Kinsey, Masters and Johnson’s public presence as an important opportunity to learn about the science of sex and the body. Like Forbis, the women working at the LBCIC and CBCA recognized the vital need to provide medical and scientific information about reproduction, sex, and bodies.

While many women sought these new opportunities to embrace scientific and medical knowledge about reproduction and sex, they did not necessarily seek that model of care provided at clinics and hospitals. By the early 1970s, women’s health centres and birth control centres offered women an alternative space and model of health. Historian Wendy Kline has traced how 1970s women’s health activists “challenged, expanded, and reinvented constructions of the female body and in particular reproductive health.”²⁸ Her work explores how women rejected medicine’s dismissal of characteristics deemed too feminine, like empathy and care, in favour of the apparently more masculine attribute of objectivity.²⁹ Clients’ experiences and rights were considered unimportant to a clinical diagnosis. By the 1970s, women’s health activists created important educational texts³⁰ and established health centres,³¹ and, in doing so, they crafted a better way for women to talk about, learn about, and take ownership of their reproductive and sexual health across North America.

Along with new popularized information about human sexuality and reproduction, the Association referenced material about women’s unrest in the healthcare system within their educational material. The CBCA educational coordinators distributed leaflets from the Vancouver

²⁷ Terri Forbis, interview with Karissa Patton, January 24, 2013, transcript. Interview and transcript housed at the Galt Museum and Archives, in “Oral History Project: Students’ Reproductive Rights Activism in Southern Alberta during the 1960s and 1970, 20171019 (TF, interview, Jan. 24, 2013m transcript, GMA).

²⁸ Wendy Kline, *Bodies of Knowledge: Sexuality, Reproduction, and Women’s Health in the Second Wave*, (Chicago: University of Chicago Press, 2010), 3.

²⁹ Kline, *Bodies of Knowledge*, 2.

³⁰ Christabelle Sethna, “The Evolution of the *Birth Control Handbook*: From Student Peer-Education Manual to Feminist Self-Empowerment Text, 1968-1975,” *Canadian Bulletin of Medical History* vol. 23 no.1 (2006), 89-118; Kline, *Bodies of Knowledge*, (2010); Kline, “The Making of *Our Bodies Ourselves*,” (2008).

³¹ Cathy Moran Hajo, *Birth Control on Main Street: Organizing Clinics in the United States, 1916-1939* (Urbana: University of Illinois, 2010), 3; Kaplan, *The Story of Jane* (1996), Morgen, *Into Our Own Hands* (2002); Beth Palmer, “‘Lonely, Tragic, but Legally Necessary Pilgrimages:’ Transnational Abortion Travel in the 1970s,” *The Canadian Historical Review* vol. 92 no.4 (2011), 637-664.

Women's Health Collective at their Well-Women Seminar in 1977 and 1978 that outlined that women were "dissatisfied with the quality of healthcare women had traditionally received. They were particularly concerned about women's special needs relating to reproduction which do not fit into the sickness model of medical practice."³² Educational programming included discussions about the role of doctors and medical institutions as women fought for their experiences to be taken seriously, without having to be treated for sexual or reproductive health as a malady or disorder, but instead a healthy part of their experiences as women. Much of the educational programming provided by the two southern Alberta birth control centres encouraged women to learn how to care for themselves and to hold doctors accountable to patients' rights.

Throughout the 1970s, staff at both local centres integrated discussions of patients' rights into their educational programming, from sexuality seminars to prenatal courses.³³ By the end of the decade, the CBCA's seminars on women's health explicitly instructed clients to embrace "self-care" and self-education when it came to reproductive and sexual health.³⁴ The CBCA's seminars and workshops taught women about their rights as patients, or about when they needed to consult a medical professional, or when they engaged in self-care. Part of the CBCA's "Well-Women Seminars in 1977 and 1978 included explicit information about what "a good gynecological exam should include" and encouraged women to ask for the items included on the list if their gynecologist did not provide them.³⁵

³² The Vancouver Women's Health Collective "Women's Self-Help Clinic" in "Workshops: Well-Woman Seminar 1977-1978," M-7265-457, *CBCA Collection GA*.

³³ See, for example, "CBCA Patients' Rights" c. 1977, in "Workshops – Well-Women Seminar, 1977-1978," M-7265-457, "Description of 1976 Women's Health Weekend," c. 1975, in "Workshops – Women's Health Weekend 1976," M-7265-458; "Sexuality and Sex," c. 1970-73, in Educational Outreach, 1968-1973," M-7265-99; CBCA Newsletter March 23, 1974, pgs. 1, 4, found in "Newsletters CBCA, 1971-1974," M-7265-240; CBCA bylaws, c. 1975, pg. 1, found in "Newsletters CBCA, 1975-1977," M-7265-241, *CBCA Collection GA*. Intake Survey from the LBCIC's Prenatal Class, c. 1974-1975, found in the *Lethbridge Birth Control and Information Centre, 1973-1976*, 20171104, at the Galt Museum and Archives, Lethbridge, Alberta (*LBCIC, 1973-1976 GMA*).

³⁴ Paper on health, medicine, the role of doctors, and self-care, c. 1977, in "Workshops: Well-Woman Seminar 1977-1978," M-7265-457, *CBCA Collection GA*.

³⁵ Copied from the New York Women's Health and Abortion Project, "The Gynecological Check-Up," c. 1977, found in "Workshops: Well-Woman Seminar 1977-1978," M-7265-457, *CBCA Collection GA*.



Image 2.1: “Barefoot doctor” conducting a breast exam on a Southern Alberta Cowgirl. Selected from an advertising flyer for the CBCA’s Women’s Health Weekend in 1976.

While new definitions of health, the scientific “discoveries” of Kinsey, Masters and Johnson, and Pincus, as well as women’s health and liberation movements, informed the birth control centres’ services, some women working at the CBCA also looked to reproductive health policies beyond North America. Several newsletters from the *International Family Planning Digest* saved in the CBCA’s archival collection, for instance, demonstrate that these Calgary women were reading about birth control, abortion, and sex education in places like Thailand, Mexico, Columbia, Indonesia, Korea, Bangladesh, Italy, Malaysia, and New Zealand.³⁶ And, in one case, Association educational coordinators may have even looked to the barefoot doctor program implemented in Maoist China as a model for their role as emergent lay-health-practitioners. The advertising flyer for the Women’s Health Weekend in 1976 appears to bring the worlds of the Chinese barefoot doctor program and

³⁶ *International Family Planning Digest*, vol. 2, no. 1, (March 1976); *International Family Planning Digest*, vol. 2, no. 3, (September 1976); *International Family Planning Digest*, vol. 2, no. 4, (December 1976); *International Family Planning Digest*, vol. 3, no. 4, (December 1977), found in “Resource Material: Newsletters Alan Guttmacher Institute, *International Family Planning Digest* 1976-1977,” M-7265-364, *CBCA Collection* GA.

the southern Alberta region together. The flyer features an image of one woman with a stethoscope and bare feet. Her mouth is open and one of her fingers is pointed, suggesting she is instructing the second woman in the image, who is topless and seated on an exam room table. The seated woman holds one arm across her lap, signalling the barefoot medical instructor is conducting a breast exam (image 2.1 above). The striking imagery of the cowboy boots *and spurs* worn by the seated woman directly pointed to the rural and “western” regional identity of the southern Alberta cowboys and cowgirls. While many clients might not have caught the reference, the depiction of the health practitioner in bare feet likely signposted a rural model of care within the Chinese Communist Party’s barefoot doctor program of the 1960s and 1970s.³⁷ Under the Chinese barefoot doctors program, health practitioners commissioned to provide healthcare in China’s rural communities were rarely doctors themselves. Many of the health practitioners employed by the Chinese government were farmers who received “medical and paramedical training.”³⁸ Many women working at the CBCA, were not medical professionals themselves, but they may have related to the barefoot doctors in rural China as peer or lay-practitioners serving their communities. These CBCA staff and volunteers found themselves providing reproductive and sexual healthcare and education in their respective cities and surrounding rural communities. Consequently, the barefoot doctor program in China may have offered an alternative model of healthcare that the CBCA educational staff identified with as lay-health-practitioners.³⁹

³⁷ Historians such as Lan Angela Li have identified that part of the concern over rural healthcare in China was linked to Mao’s militarization of rural people. Her work has shown complexities of the Barefoot Doctors as their role in Communist propaganda in the 1960s and 1970s China. Lan Angel Li, “The Edge of Expertise: Representing barefoot doctors in Cultural Revolution China” *Endeavour* vol. 39 no.3-4 (2015), 160-167.

³⁸ Le Yang and Hongman Wang, “Medical Education: What About the Barefoot Doctors?” *the Lancet* vol. 390 no.10104 (October 2017), 1736.

Le Yang and Hongman Wong, like Lan Angela Li, have uncovered complexities in the histories of the barefoot doctors programs. In particular, they argue that the program was set into place to implement bio-medical services to replace traditional Chinese medical practices in rural China.

³⁹ I recognize that this image is likely a reference to the barefoot doctor program in China during the 1960s and 1970s. Because many feminist during the 1970s debated the value of communism and Marxism, and the CBCA in particular subscribed to newsletters about international reproductive health issues during the decade, I argue at least some of the women working at the CBCA would have been aware of the Chinese barefoot doctor program. It is unclear, however, whether women attending these workshops would have understood the reference to the barefoot doctor in this particular advertisement.

Both centres operated under a feminist model of health that considered medical science, feminist philosophy, and their clients' experiential knowledge. The Southern Alberta Centres drew from international discussions about health and healthcare, addressed feminist critiques of medical institutions, and found unique and innovative ways to implement these models tailored to the needs of the local communities. These international developments about the science of reproduction and sex, along with innovative healthcare models, fed the southern Alberta grassroots birth control centres, and stimulated employees at the LBCIC and the CBCA who relied on women's lived experiences to inform their client-directed services and programming throughout the 1970s.

Fuelled by Women's Health and Liberation

The on-the-ground labour of women running birth control centres like the CBCA and LBCIC is often recognized as important in the broader history of reproductive rights activism, but often juxtaposed with more "radical" approaches taken in the 1960s and 1970s.⁴⁰ Following suit, some scholars have questioned whether women's health and birth control centres are inherently feminist. As historian Beth Palmer has pointed out, the CBCA was "adamant about ensuring clients were not alienated by any explicitly political perspective" in her research on the CBCA's program to facilitate abortion travel in the early 1970s.⁴¹ Palmer also correctly points out that not all CBCA volunteers and clients identified as feminists either.⁴² The earlier rendition of the Association, the Calgary Abortion Information Centre (CAIC), as Palmer explains, had proclaimed that their organizing centred on providing immediate care for women experiencing unwanted pregnancies.⁴³

⁴⁰ Hajo, *Birth Control on MainStreet*, (2010); Palmer, "Lonely, tragic, but legally necessary pilgrimages'," (2011); Erika Dyck, "Sterilization and Birth Control in the Shadow of Eugenics: Married, Middle-Class Women in Alberta, 1930-1960s," *CBHM* Vol. 31 No.1 (2014), 165-187; Stettner, Shannon. "He is Still Unwanted: Women's Assertions of Authority over Abortion in Letters to the Royal Commission on the Status of Women in Canada," *CBMH* vol. 29 no. 1 (2012), 151-171; Carol Williams, "Reproduction Matters' – A Southern Alberta Case Study," in the Parkland Research Report on Political Challenges and Digital Frontiers: Reproductive Health and Services in Southern Alberta, 9-10; Dyck Erika and Karissa Robyn Patton, "Activists in the Bible Belt: Conservatism, Religion, and Recognizing Reproductive Rights in 1970s Southern Alberta," in *Called to Action: Histories of Women's Activisms in Western Canada* edited by Sarah Carter and Nancy Langford (University of Manitoba Press, 2020 – forthcoming); Palmer, "Lonely, tragic, but legally necessary pilgrimages'," 644-646; Loraine Greaves, Introduction to *Personal and Political: Stories from the Women's Health Movement, 1960-2010*, (Toronto: Second Story Press, 2018).

⁴¹ Palmer, "Lonely, tragic, but legally necessary pilgrimages'," 644.

⁴² Palmer, "Lonely, tragic, but legally necessary pilgrimages'," 663.

⁴³ Palmer, "Lonely, tragic, but legally necessary pilgrimages'," 645.

The CBCA's abortion travel facilitation similarly focused on the clients' immediate need for abortion services rather than an explicit feminist education on reproductive rights. Many women who came to the CBCA seeking timely abortion procedures did not care about whether the women running the Association held picket signs at marches during their time outside of the centre. Instead, they focused on the kind of care they received, that their experience was taken seriously, and that they got an abortion when they needed one.⁴⁴

The assumption that implicit feminist politics at birth control centers make them less radical than other feminist activities in the 1970s minimizes the strategic and purposeful framing of these centres in providing necessary services. Terri Forbis who worked at the Lethbridge Family Planning Centre explained the radical nature of the on-the-ground service provision at the LBCIC in the early 1970s: "People were hungry for information... There was very little even print material in the library – the Kinsey studies for people were a big deal. ... it [sex] was just so not talked about, and people were really hungry for it, really hungry for it. But they still had to get it served under the table. That's why the Birth Control and Information Centre was so controversial – it was really putting it [sex and reproduction] on the table."⁴⁵ Palmer underscores the importance of the CBCA as essential players in on-the-ground reproductive health activism in Canada. Historian Nancy Janovicek's work has shown that in smaller Canadian cities and towns feminist groups organizing women's shelters often did not explicitly expose their women's liberation politics, and in turn were able to bring a broad base of women together for consciousness raising in their communities. She argues, "often feminists organizing in smaller towns made a strategic decision not to identify as feminists to gain community support for the transition house. This encouraged women to who did not identify with the women's movement to join the group, and many of these women developed a feminist consciousness through their advocacy for abused women."⁴⁶ Historian Tessa Jordan has shown that other Alberta-based feminist groups employed similar consciousness raising strategies in the 1970s in her monograph on "Canada's first national second-wave feminist magazine," *Branching Out*. Jordan's work shows that the feminist editors at *Branching Out* aimed to reach a wide audience of women whether they

⁴⁴ Letters of appreciation do not thank activists for their political views, but their care, empathy, and successful network of abortion providers in the US, and other provinces. See: "Letters of Appreciation, 1973," M-7265-90; "Letters of Appreciation, 1974," M-7265-91; "Letters of Appreciation, 1975," M-7265-92; "Letters of Appreciation, 1976-1979," M-7265-93, *CBCA Collection* GA.

⁴⁵ TF, interview, Jan. 24, 2013m transcript, GMA.

⁴⁶ Nancy Janovicek, *No Place To Go: Local Histories of the Battered Women's Shelter Movement*, (Vancouver: University of British Columbia Press, 2007), 3.

identified as feminists or not. Jordan cautions her readers that the magazine's mandate to reach a broad audience does not mean that the magazine was not political. Rather, Jordan showcases how the editors at *Branching Out* used their magazine to raise consciousness across a variety of women's groups – not only those identified as radical feminists – across Canada. And, like Palmer, Janovicek, and Jordan other scholars have expanded historical considerations of activism to include other factors like service provision, letter writing, and civil disobedience.⁴⁷ The activists running these southern Alberta birth control centres prioritized the immediate need for on-the-ground work and consciousness-raising over protests and marches, which have more often been featured in the historiography.⁴⁸

Defining the work of the CBCA as a less radical or less explicit form of activism problematically overshadows the context in which these women were fighting in the 1970s. Establishing a network for abortion travel a year or two following the decriminalization of abortion was radical. Shrewdly skirting the state-imposed TAC system to help women access abortion was radical. The establishment of birth control centres as an alternative to medical institutions a mere year or two after decriminalization was radical. The abortion travel network established at the CBCA alone shows that the Association's staff and volunteers took on the state, took power back from the medical establishment, and did what had to be done to get women the reproductive services they needed. That they accomplished this by cooperating with state actors may superficially downplay their activism, but this study suggests that they deserve to be re-evaluated as radical actors who operated strategically to meet their women's health and liberation objectives.

At both southern Alberta birth control centres, women's health and liberation infused their model of health, care, and service provision. By the end of the 1970s, the CAIC became the CBCA, and the centre's focus had expanded beyond abortion, and women's liberation became more explicitly central to their service provision. Notes from Jean in the CBCA's 1972 volunteer logbook

⁴⁷ Susan Smith, *Sick and Tired of Being Sick and Tired: Black Women's Health Activism in America, 1890-1950* (Philadelphia: University of Pennsylvania Press, 1995); Kaplan, *The Story of Jane* (1996); Palmer, "Lonely, tragic, but legally necessary pilgrimages," (2011); Stettner, "He is still Unwanted," (2012); Sethna, "The Evolution of the *Birth Control Handbook*," (2006); Dyck, "Sterilization and Birth Control in the Shadow of Eugenics," (2014).

⁴⁸ The historical approach in this dissertation follows the lead of scholars like Palmer, Kline, Stettner, and Janovicek who illuminate the importance of every day and on-the-ground activism within a variety of feminist movements. Kline, *Bodies of Knowledge*, (2012); Palmer, "Lonely and Tragic, but legally necessary pilgrimages," (2011); Stettner, "He is still Unwanted," (2012); Janovicek, *No Place To Go*, (2007).

describe the presence of women's liberation philosophies beyond reproductive and sexual health. Jean often recounted the discussions about birth control, abortion, VD, and the client's overall wellbeing in her remarkably detailed written recollections of her counselling sessions. In December 1972, after counselling a client on VD treatment, abortion, and contraceptive options, Jean wrote about how she concluded the session as they sat and "talked casually:"

'How did you know you had v.d. pretty hard for a girl to tell sometimes.'
'Bill went down and found out he has it, so they sent for me.'
I wonder – who gave it to who-----
'I want to get married, but Bill doesn't want to.' I have to bite my tongue to keep from saying 'so your luck hasn't been all bad.'
'Talk to your worker about training.'
'I started a course in hair dressing but quit after two months.'
'Life should hold something better than this for you, discuss it with Mr. Bashk.'
'Yes, I will.'
Give her the names of Drs. [redacted], [redacted], and [redacted]. They have all handled welfare abortions, waiving their fees over and above. He can contact them direct or he can work through us, doesn't matter.⁴⁹

While some of Jean's recollections included her thoughts during the session, the actual conversation with the woman she counselled goes beyond finding birth reproductive and sexual health services. Jean asks about the client's life, the situation with her partner. She counselled the client on how to find a job so she will not be dependent on her boyfriend (as Jean hoped the client would kick him to the curb anyway). Jean's counselling deals directly with the problem of accessing abortion services while also addressing the underlying concern of helping this client lead a liberated life. Similar to the LBCIC advertisement encouraging women to "consider yourself 1st," Jean encouraged the client to find fulfillment outside of marriage. Volunteers, like Jean, put women's individual lives and experiences in conversation with social, political, and reproductive contexts to encourage women's liberation. In doing so, the southern Alberta birth control activists established these birth control centres as an alternative space for clients to get reproductive and sexual healthcare beyond clinical care.

⁴⁹ Notes from Jean December 15, 1972, in "Board Information Package 1977-1978," M-7265-39, *CBCA Collection GA*.

I have not redacted any information from sources I found in the CBCA collection. The redaction in this source and others from the CBCA collection occurred prior to my access to these source.

Both the Association and the Centre wanted to create an alternative health space for women in their communities. Even the LBCIC, established by medical professionals, followed the call from other regional women's health movements to create a new health model of care by and for women. Burgess remembers the LBCIC as a stark alternative to the medical clinics in town: "we had events where we had people help out, and lots of young people used to stop by and hang out and talk with us. It wasn't the busy rigour of a medical centre, by any means, and it wasn't a drop-in centre either, so it was kind of halfway in-between. We had structured hours and some structured appointments, but we also had this space where we could interact with just whoever showed up."⁵⁰ Burgess's memories are a reminder of a conscious decision to provide a service, unlike medical institutions, where clients felt comfortable dropping in, sitting down, and talking with someone for as long as they needed.

Using emergent "herstories"⁵¹ of midwives and the development of gynecology as medical specialty, and debating the role of doctors in this new era of self-help healthcare, the CBCA and LBCIC made sure women in Alberta had options beyond the mainstream medical establishment. In Lethbridge, segments from Barbara Ehrenreich and Dierdre English's histories of midwives and women healers in *Witches, Midwives, and Nurses*, were printed in the local student newspaper and shared at the birth control centres,⁵² and presentations about "Women and gynecology" were held at the public library to discuss women's rights as gynecology patients.⁵³ Rita Moir remembers feminist student journalists using the *Meliorist* to discuss women's health and medical institutions during the decade. She recalls one article in particular written by local women's liberation activist, Addie Miron – a two page spread titled "Gynecology Off Our Backs." The article was originally printed in *Chatelaine* and discussed "gynecological horror stories ranging from medical insensitivity and

⁵⁰ Judy Burgess, interview with Karissa Patton, October 9, 2014, transcript. Interview and transcript housed at the Galt Museum and Archives, in "Oral History Project: Students' Reproductive Rights Activism in Southern Alberta during the 1960s and 1970, 20171019 (JB, interview, Oct. 9, 2014, transcript, GMA).

⁵¹ Women involved in reproductive health and feminist activism in Lethbridge frequently discussed "herstory." See issues of the *Meliorist* and *Up*, for example, Maryhellen Vicars, "'Women in Film' Series Proposed," *Meliorist*, March 24, 1972, 3; *Meliorist*, "A Canadian Women's Calendar," January 25, 1974, 2; *Meliorist*, "Keeping all the Days Straight," September 29, 1976, 6; *Up: Herstory 1975* edition, January 1975, vol. 2 no. 1, 1-17, HQ1480.L47.U6, found in UOWA.

⁵² Barbara Ehrenreich and Deirdre English, "A History of Women Healers;" "Doctors Without Degrees," *Witches, Midwives, Nurses* (1973), reprinted in the *Meliorist*, January 25, 1973, pgs. 4-5.

⁵³ "Wednesday Night Presentations," *Up* vol. 1 no. November 13 5, 1974, pg. 1.

callousness at the mildest to unashamed malpractice at the worst.”⁵⁴ In Calgary, the CBCA held educational seminars about women’s health and the role of doctors. The CBCA distributed resources from a variety of women’s health centres and advocates, including Calgary doctor Frances Wren who argued that women must reclaim authority over their bodies from doctors: “We are taught that sickness comes from outside (germs) and need scientific treatment, manipulation and intervention by doctors... We know more about our bodies and selves than anyone else – and we must use this, and learn.”⁵⁵

Employees at the Centre and the Association recognized the intersections of women’s social, political, and economic issues as a significant part of women’s health. Moir remembers that local feminists engaged with a multiplicity of issues. She identified women and religion, women in the workforce, unions, and sexual assault as topics that paralleled and informed her work within and beyond the LBCIC: “There wasn’t any issue concerning women that we weren’t examining and questioning and challenging.”⁵⁶ She also recalls the LBCIC intervening in public conceptualizations of health in the 1970s. Her memories illuminate that the LBCIC framed the health as holistic – beyond physical health: “Nothing just stopped at one issue. We were looking at everything. We were looking at childcare, rates of pay, and all of those issues together. They’re all linked, of course. So, women’s health in general. The Birth Control Information Centre wasn’t just about birth control. It was about reproductive health, women’s choices, all of that. Who owns our bodies? What was the attitude of the medical system?”⁵⁷ Her words underscore local feminists’ conceptualization of women’s liberation beyond her body and reproduction as inherent to women’s health and wellbeing. Similarly, the women working at the CBCA reflected on their services in 1978, underlining the connection between their reproductive and sexual health services and other women’s issues: “It is apparent that no one working in the field of family planning can avoid becoming concerned with the status of women, and the reverse is equally true.”⁵⁸

⁵⁴ A. Miron, “Gynecology Off Our Backs,” originally published in *Chatelaine*, (c. 1974; date and issue unknown), republished in the *Meliorist*, March 8, 1974, pgs. 4-5.

⁵⁵ Dr. Frances Wren on Women’s Health, c. 1976, in “Workshops Women’s Health Weekend 1976,” M-7265-458, *CBCA Collection* GA.

⁵⁶ Rita Moir, interview with Karissa Patton, October 7, 2014, transcript. Interview and transcript housed at the Galt Museum and Archives, in “Oral History Project: Students’ Reproductive Rights Activism in Southern Alberta during the 1960s and 1970, 20171019 (RM, interview, Oct. 7, 2014, transcript, GMA).

⁵⁷ RM, interview, Oct. 7, 2014, transcript, GMA.

⁵⁸ “Peer Education, Community Outreach Education,” pg. 4, in “Educational Outreach 1978,” M-7265-101, *CBCA Collection* GA.

The CBCA and LBCIC staff and volunteers saw the physiological, the mental, and the emotional aspects of reproductive and sexual health as deeply entwined. The services offered at the CBCA and LBCIC often included topics beyond the physiology of reproduction, birth control, and abortion to include a variety of topics on women's liberation, sexual liberation, and the importance of relationships in healthy sexuality. While they provided basic information on sex, birth control, and how to prevent VD they also created space to talk about how healthy sexuality was an essential part of living a healthy life. The educational programs and literature at both centres offered information on both the physical side of human sexuality education – the physiology of sex, reproduction and conception, and contraception. Nevertheless, the Centre and the Association also offered information and counselling about the social aspects of human sexuality like why sex education is a right, and that healthy relationships and communication are part of a healthy sexual life.⁵⁹ In the first edition of the LBCIC's newsletter *Unity* in 1974, the Centre listed several educational talks and workshops on the following topics: Family Planning; Abortion: Myths and Reality; Morality and the Adolescent; The New Morality?; The Unwed Mother; Value in human Relationships; VD: What, When, Who; Rape and the Law; Adult Sexuality; The Centre: Aims and Objectives.⁶⁰ The Association similarly offered a variety of literature and education materials on abortion, birth control, menopause, VD, rape crisis centres, sexuality and the sexual revolution, homosexuality, "Anatomy and Physiology: Human Sexual Response," "Living with Sex," "Alternative Forms of Sexual Expression" throughout the 1970s.⁶¹ In line with their educational programming, the Centre and Association's referral services also expanded to include local medical and social services. So, they built connections with medical and social services from clinics to counselling services, schools to church groups, and Drug information Centres to Women's Centres.⁶² The CBCA and the LBCIC

⁵⁹ See: "Resource Material: Miscellaneous Pamphlets on Women's Health, Birth Control, etc., ca. 1960s-1990s," M-7265-355, *CBCA Collection GA*.

⁶⁰ "Clubs and organizations," *Unity*, vol.1 no.1 September 27, 1974, pg. 6, *LBCIC, 1973-1975 GMA*.

⁶¹ "Educational Outreach 1968-1973," M-7265- 99; "Educational Outreach 1974-1976," M-7265-100; "Educational Outreach 1978," M-7265-101; "Educational Outreach, Exercises Used 1976-1979," M-7265-105, *CBCA Collection GA*.

⁶² For example, the CBCA formed coalitions with a variety of organizations within their first year (1971): including but not limited to, the Drug and Information Centre, Calgary Public School Board, the University of Calgary and their Student Union, King Church, Junior League, Henry Wise Wood High School, Mount Royal College, Lord Beaverbrook High School, Voice of Women, Calgary Family Services, Crescent Heights High School. Names and organizations found in "Notebook by Martha Weir," M-7265-12, *CBCA Collection GA*.

recognized the need for social and medical aspects of health to ensure women's wellbeing beyond physical health.

Discussions about sexuality illuminated how the birth control centres' staff and volunteers brought physical and social wellbeing together. Women's sexual liberation was a topic that infused much of the programming and literature at the CBCA and LBCIC. Terri Forbis recalls that emergent birth control centres in the 1970s worked "at empowering women to take control of their sexuality, not just their birth control."⁶³ Similarly, the CBCA's early educational materials pointed to sexuality as part of "one's self-concept and how one relates to others."⁶⁴ The calls for sexual liberation and, more specifically, feminist calls for women's liberation (sexual and otherwise) informed these activist models of health as much as the discussions about paternalism and doctors' authority over women's health choices in the women's health movement. The Centre's newsletter *Unity* in April 1975 called for better, more open attitudes about sex and sexuality as part of one's wellbeing. In a poem, with direct references to the religious controls around life and sex, one activist asked why not change the narrative around sex from "Thou Shall Not" to "Thou Shalt Love:"

Thou Shall not...

Is it possible that a concerned individual or group of individuals in our society can change the pervading attitude towards sex from 'Thou shall not' to a life-affirming approach involving creative and responsible sexual expression?

Can the pervading attitude of our society as a gloomy struggle for identity hope to have some joy injected into it? A sexual involvement whether as a deep commitment or casual affection may be one possibility of bringing joyous pleasure to a person and couple.

Let us transfer from sex denial to sex affirmation and see sex as a healthy human drive.

Thou shalt love....⁶⁵

Similarly, in 1974 the LBCIC reported that they "enjoyed mutual referral with agencies such as the Alberta Department of Health and Social Development, Department of Social Hygiene, YWCA, Women's Place." See: "Lethbridge Birth Control and Information Centre Review of Budget and Programs for January 1, 1974, to November 8, 1974;" "Proposal of Budget and Programs for 1975: Presented to the City of Lethbridge, the Province of Alberta Department of Preventative Social Services, and Family Planning Federation of Canada," *LBCIC, 1973-1975* GMA.

⁶³ TF, interview, Jan. 24, 2013m transcript, GMA.

⁶⁴ "'Sexuality' and 'Sex,'" in "Educational Outreach, 1968-1973," M-7265-99, *CBCA Collection* GA.

⁶⁵ "Thou shalt love," *Unity* vol. 1 no. 8, April 30, 1975, pg. 1, *LBCIC, 1973-1975* GMA.

Calling for sex and pleasure to be understood as part of being a healthy person, the author tied social and sexual oppression to poor health. The women working at the LBCIC and the CBCA aimed to shift the discourse around sexuality and women's liberation as part of their goal to improve women's health and wellbeing overall. In other words, both birth control centres believed that healthy sexuality was essential to one's overall wellbeing and health. In doing so, the staff at the CBCA and LBCIC encouraged women to be active participants in, and enjoy, sex, rather than conceptualizing sex as a marital or reproductive duty. The feminists working at the birth control centers believed achieving equality within intimate sexual partnerships aligned directly with achieving equality in larger legal and social spheres. They asserted that increasing women's sexual, social, and legal opportunities also improved their overall wellbeing and health.



Image 2.2: Lethbridge Women's Liberation Group Campout, June 1, 1973.

Photo courtesy of Rita Moir.

Back row (left to right): Bev Johnson, Dee Bell, Luba Lisun, Karen [Last Name Unknown];

Middle row (left to right): Marg Koep, Frances (Isobel) Isaakson, Rita Moir;

Front row (left to right): Judy Burgess, Bev [Last Name Unknown], Addie Miron.

Women's reproductive and sexual liberation was foundational to these feminist birth control centres in southern Alberta. The work of the women who ran and volunteered at the CBCA and LBCIC informed their feminism, and their feminism informed their practice. Judy Burgess remembers her time as the director of the LBCIC as part of her broader feminist activism. She recalled, that while the LBCIC, the Lethbridge Women's Liberation Group (image 2.2 above), and

the local Women's Place centre were all separate entities, the work at all three crossed over: "I was being formed by my feminist work, and that feminist group was in support of what I was doing and some of them [local feminists] were more actively involved [in the LBCIC]."⁶⁶ Lethbridge feminist and activist extraordinaire, Rita Moir, also remembers the multiplicity of her activism during the 1970s: "There was a labour movement, there was a women's movement, there was so much going on. ... But at the same time, we were working at the women's centre and the Birth Control Information Centre and bringing those voices – women's voices – to whatever venue we could."⁶⁷ Moir's emphasis on women's voices as an integral part of her feminist work at the LBCIC and beyond signifies the importance of lived experiences that drove the Centre's model of health.

Driven by Clients' Experiences and Needs

Following in the footsteps of many feminist health centres,⁶⁸ the LBCIC and the CBCA took direction from clients as a way to disrupt the status quo in healthcare and society more broadly. Many clinics in the women's health movement strategically privileged patients' direction over the expertise of civil servants or medical professionals.⁶⁹ Scholar Laura Kaplan shows that women's health activists "realized that, in order to equalize power, it was essential to base medical care, or any kind of service, on respect for the people needing that service. The focus belonged not on the person with expertise, but on the person needing it."⁷⁰ In their day-to-day work, local birth control centers often prioritized immediate and practical ways to help their clients.⁷¹ This client-centred approach, used by many feminist health activists, including the LBCIC and the CBCA, effectively shifted the power away from the medical establishment, social workers, and government agencies, putting more power in the hands of women health consumers. The Calgary Association and the Lethbridge Centre worked with their clients to create the most useful services and educational programming for their communities.

Client- and community-directed care was essential to the birth control centres' feminist model of health. As women living in these local communities and perhaps sharing some experiences

⁶⁶ JB, interview, Oct. 9, 2014, transcript, GMA.

⁶⁷ RM, interview, Oct. 7, 2014, transcript, GMA.

⁶⁸ Hajo, *Birth Control on Main Street*, 3; Kaplan, *The Story of Jane*, 283-284; Morgen, *Into Our Own Hands*, 105.

⁶⁹ Kline, *Bodies of Knowledge*, 2.

⁷⁰ Kaplan, *The Story of Jane*, 283-284.

⁷¹ Hajo, *Birth Control on Main Street*, 3.

with the clients themselves, Centre and Association staff worked to create birth control centres as sites of community building. Oral history narrators recount the importance of client direction and community belonging at the LBCIC. Judy Burgess remembered that even though she did not grow up in Lethbridge, that her work to provide community-driven care made the city feel like home: “We brought a sense of community, and we got to be part of that community too, and we lived in the neighbourhoods.”⁷² Similarly, Rita Moir explained that the small city and rural connections in Lethbridge inspired community building across causes and generations: “Lethbridge was pretty rural compared to Montreal or big cities. We were far more likely to form coalitions because we didn’t have a critical mass of people that you could have groups that were all 22-year-olds or all 30-year-olds or all 70-year-olds. You brought together people who wanted to talk about the same thing and grapple the same issues.”⁷³ The geographical and social landscapes of the region inspired significant community building in Lethbridge, in particular.⁷⁴ The community building within and outside of the Centre’s walls often inspired the reproductive and sexual health services and care the women who ran the birth control centers provided.

The transition from the CAIC to the CBCA in 1971 exemplifies their client-based approach to care. Soon after the opening of the CAIC, the employees realized that women in Alberta needed on-the-ground help in accessing abortion as well as other reproductive and sexual health services. Many women who came to the CAIC, seeking information on abortion services, also sought information on birth control methods and access, human sexuality, and, sometimes, divorce. Within the first month of the CAIC’s operation, the centre’s director Martha Weir wrote about the limited services for women seeking contraception: “We feel that every woman should have the benefit of a thorough discussion of birth control methods with an informed and understanding person. ... Unfortunately, not many women actually have this opportunity, and this is particularly true of the young unmarried women.”⁷⁵ Weir recognized the lack of sex education and contraceptive counselling services in the city, especially for teens and youth. So, in the summer of 1971, the CAIC decided to form a sister organization, the Calgary Birth Control Association (CBCA). For a few

⁷² RM, interview, Oct. 7, 2014, transcript, GMA.

⁷³ RM, interview, Oct. 7, 2014, transcript, GMA.

⁷⁴ Janovicek argues that women’s activism in small towns and cities across Canada similarly worked together across political views and feminist theories for the sake of getting their clients the services they needed. See Janovicek, *No Place To Go*, 6.

⁷⁵ Rough draft of address about the CBCA in “Notebook Kept by Martha Weir,” M-7265-12, *CBCA* Collection GA.

months, the CAIC and the CBCA ran simultaneously out of side-by-side office spaces at the Crescent Heights Unitarian Church.

The experience gained by the organizers and volunteers at the CAIC helped them to realize that a focus on unwanted pregnancy and abortion was not enough. The women working at the Association acknowledged early on that many needed information, counselling, and services focused on preventing pregnancy in the first place. By the summer of 1971, the CAIC disbanded to operate under a wider span of services through the CBCA. The transition was explained in the first CBCA newsletter in July 1971:

Since our work is becoming increasingly birth control oriented from 80% abortion vs 20% birth control when we started to now about 50-50 with the hope of someday getting to 80% birth control vs. 20% abortion (dream!). We feel this is the logical way to go anyhow.

We chose to call a spade a spade and title the new group the ‘Calgary Birth Control Association’ – using ‘control’ in its widest sense.⁷⁶

Those who established the CAIC, and later the CBCA, did not lose sight of their original goals of abortion counselling and maintained that this necessary service was imperative to the radical feminist push for women’s right to control their fertility.

Following their significant transition from abortion services to birth control services in the “widest sense”⁷⁷ of the word, the CBCA employees continuously turned to clients’ experiences to inform their services. As soon as they opened, the CBCA started planning for three key projects, funded through their Local Initiatives Program (LIP) grant. Two of these projects focused on educational outreach programs, but the third project focused on research in community sexual and reproductive health needs.⁷⁸ The CBCA hired five people that year to create, distribute, and analyze a “survey to determine the needs of family planning in the Calgary area for the present and future.”⁷⁹ Using questionnaires sent to “the general public (mainly adults), high school students, and physicians

⁷⁶ CBCA Newsletter, July 17, 1971, in “Newsletters 1971-1974,” M-7265-240, *CBCA* Collection GA.

⁷⁷ CBCA Newsletter, July 17, 1971, in “Newsletters 1971-1974,” M-7265-240, *CBCA* Collection GA.

⁷⁸ CBCA Newsletter, July 17, 1971, in “Newsletters 1971-1974,” M-7265-240, *CBCA* Collection GA.

⁷⁹ CBCA Newsletter, July 17, 1971, in “Newsletters 1971-1974,” M-7265-240, *CBCA* Collection GA.

working in gynecology and family practice,”⁸⁰ the CBCA was determined to use this research to provide services the public wanted and needed.

In 1972 the CBCA created a research and development committee to their on-the-ground survey of community needs “related to birth control, abortion and sterilization.”⁸¹ In part, the Association’s continued research was necessary as staff and volunteers dealt with new and unexpected situations. The CBCA’s March 1972 newsletter explained many of the Association’s resources and programming developed during a crisis, such as a rejection from a TAC. They wrote that the new research and development committee “would assess future areas of concern to us and attempt to develop resources for use when the need occurs. In effect, this committee also probed the future of the Birth Control Association and its potential in this city.”⁸² The Association sent out three surveys to the general public (across various income brackets), youth (anyone under twenty-five-years-old), and social workers to “determine the knowledge, attitudes and practices of birth control” in Calgary.⁸³ Illustrating some of the growing pains the CBCA experienced in their first few years of operation, the newsletter section also illustrates their devotion to their community.

Like the Association, the LBCIC used surveys and administrative statistics to determine community and needs. In the Centre’s annual review to Lethbridge City Council, they explained that they recorded each contact, and an “ongoing assessment of these statistics helps to change the Centre’s direction.”⁸⁴ In particular, they emphasized the Centre’s program for single mothers as an example of “instituting a plan when a specific need was expressed by clients.”⁸⁵ This section of the report concluded, “As long as the Centre’s Board, staff and volunteers continue to be aware of the

⁸⁰ CBCA summary of LIP funding Winter 1971-1972 in “History 1971-1975,” M-7265-185, *CBCA Collection GA*.

⁸¹ CBCA Newsletter, March 21, 1972, in “Newsletters 1971-1974,” M-7265-240, *CBCA Collection GA*.

⁸² CBCA Newsletter, March 21, 1972, in “Newsletters 1971-1974,” M-7265-240, *CBCA Collection GA*.

⁸³ “Description of the CBCA Birth Control Education,” c. 1973, pg. 1-2, in “Education Outreach 1968-1973,” M-7265-99, *CBCA Collection GA*.

⁸⁴ “Lethbridge Birth Control and Information Centre Review of Budget and Programs for January 1, 1974, to November 8, 1974;” “Proposal of Budget and Programs for 1975: Presented to the City of Lethbridge, the Province of Alberta Department of Preventative Social Services, and Family Planning Federation of Canada,” *LBCIC, 1973-1976 GMA*.

⁸⁵ “Lethbridge Birth Control and Information Centre Review of Budget and Programs for January 1, 1974, to November 8, 1974;” “Proposal of Budget and Programs for 1975: Presented to the City of Lethbridge, the Province of Alberta Department of Preventative Social Services, and Family Planning Federation of Canada,” *LBCIC, 1973-1976 GMA*.

clients' and group members' requests and needs, our Centre will grow in the direction that members of our community express."⁸⁶ The LBCIC explicitly recounts their devotion to community- and client-directed services within their first year of operation. Throughout the decade, client experiences informed the services and programs at the CBCA and the LBCIC, through a variety of questionnaires and surveys.⁸⁷ Both the Centre's and Association devotion to client feedback to shape the services they offered illustrates their adherence to a women's health model of care. In doing so, they effectively transitioned power to health consumers and away from the expertise of medical institutions.

The LBCIC and CBCA staff navigated clients' complex situations because they were astutely connected to their community needs and services. Another note from Jean at the CBCA explains the rigmarole many clients often had to go through to access reproductive and sexual health services at local clinics and social services. Jean wrote about an upcoming appointment with a grade twelve student named Edna in 1972: "A woman phoned for her. Edna is in St. Mary's Grade 12 and she has been told by counsellor there that she couldn't get an abortion. Parents kicked her out (long before this, they don't know). She is going into third month preg. apparently. Told woman about clinic and said if Edna has a guardian appointed, she could go through clinic, otherwise, we will have to send her elsewhere."⁸⁸ Like Edna, many clients often tried to get help from clinics and social services and were eventually sent to the CBCA. Jean's notes show that staff and volunteers at the Association worked through many complex situations to fulfil clients' particular needs. Jean, as a volunteer, knew whether Edna needed a guardian, how Edna could get a guardian appointed, and

⁸⁶ "Lethbridge Birth Control and Information Centre Review of Budget and Programs for January 1, 1974, to November 8, 1974;" "Proposal of Budget and Programs for 1975: Presented to the City of Lethbridge, the Province of Alberta Department of Preventative Social Services, and Family Planning Federation of Canada," *LBCIC, 1973-1976 GMA*.

⁸⁷ CBCA bylaws 1975 in "Annual General Meeting 1977," M-7265-26; "Questionnaire Samples," M-7265-334; "Questionnaire Completed Clients 1976," M-7265-336; "Questionnaires Completed Clients 1977-1978," M-7265-337; "Questionnaires Completed Physicians [ca.1972]," M-7265-338; "Questionnaires Completed Physicians 1972," M-7265-339; "Questionnaires Completed Physicians 1978-1979," M-7265-343; "Questionnaires Completed Volunteers 1975-1967," M-7265-345; "Questionnaires Completed Volunteers 1978," M-7265-346, *CBCA Collection GA*.

Letter from Judy Burgess to R. W. Tooley (Director of Family Planning at the Department of National Health and Welfare), December 7, 1972, in "Lethbridge Birth Control Association," GR1983-0133, box 1, file 5, PAA; "Questionnaire – Sexual Attitudes" and a Questionnaire for Prenatal Classes at LBCIC, *LBCIC, 1973-1975 GMA*; Pauline Hoskin, interview with Karissa Patton, December 20, 2017, transcript.

⁸⁸ Note from Jean c. 1972 in "Board information Package 1977-1978," M-7265-39, *CBCA Collection GA*.

the Edna's alternative options. The fact she had the kind of information readily available and made on-the-fly suggestions illustrates her in-depth knowledge about how the many systems in their communities worked and how to skirt those systems.

The women who ran the Centre and Association demonstrated a keen ability and willingness to address reproductive and sexual health issues that further set the birth control centres apart from other clinical and social services. Staff at the CBCA noticed "the difficulties that busy medical and social work professionals have in providing consistent, empathetic support to clients in the difficult areas of sexuality and contraception."⁸⁹ The two southern Alberta birth control centres differentiated themselves from these busy medical professionals as group of volunteers who were "able to work with clients as equals and peers, in a relaxed, friendly environment."⁹⁰ In 1974 Pauline Hoskin a volunteer at the LBCIC (later she became the director of the Centre) wrote about the benefits of the Centre's immediate service provision: "Another advantage [of the LBCIC] is the immediate help a person can receive compared to the appointment system and information taking of other agencies."⁹¹ The better care and expediency of services clients' experienced when they visited the CBCA and the LBCIC worked in the both southern Alberta birth control centres' favour.

While both birth control centres offered counselling and information services upon opening, clients' experiences quickly underlined a deep need for educational programming. Educational outreach became a significant part of the CBCA and LBCIC services in 1972 and 1974, respectively. The LBCIC's report to the department of Preventative Social Service in November 1974 highlights the shift to more comprehensive educational services: "The continuing need for the Birth Control and Information Centre in our community is shown by the number of individuals who continue to consult the Centre's staff. The Centre's directions have changed in response to the community request for not only information but also educational programs."⁹² As they continued their counselling and referral services, they strategically figured out ways to work with and around existing

⁸⁹ Origins of the CBCA in "Evaluation of CBCA In-House Evaluation Project, Proposal, planning, 1979-1980," M-7265-122, found *CBCA Collection GA*.

⁹⁰ Origins of the CBCA in "Evaluation of CBCA In-House Evaluation Project, Proposal, planning, 1979-1980," M-7265-122, *CBCA Collection GA*.

⁹¹ Pauline Hoskin, copy of a letter to the editor sent to the *Lethbridge Herald* on March 12, 1974, *LBCIC, 1973-1975 GMA*.

⁹² "Lethbridge Birth Control and Information Centre Review of Budget and Programs for January 1, 1974, to November 8, 1974;" "Proposal of Budget and Programs for 1975: Presented to the City of Lethbridge, the Province of Alberta Department of Preventative Social Services, and Family Planning Federation of Canada," *LBCIC, 1973-1975 GMA*.

medical and social services – both the LBCIC and CBCA increasingly brought educational material and services into their practice.

Reclaiming Women’s Knowledge

As soon as each birth control centre opened, the employees were flooded with requests for educational workshops. Just as medical professionals requested information from the birth control centres, resource materials and training workshops, many other community services and individuals sought educational services from the Lethbridge and Calgary centres. As early as 1972, the CBCA was reporting increasing numbers of requests for educational programs.⁹³ In the first half of 1973 alone, the Association reported ninety educational presentations that reached over 2,000 people.⁹⁴ Similarly, the LBCIC reported requests for educational workshops immediately after opening in January 1973 and reached 1,400 people through their educational outreach that year.⁹⁵ The birth control centers’ educational programs were, in part, so popular due to the absence of similar services available in the province in the early 1970s.⁹⁶ Even after the curriculum for CALM (Career And Life Management) was made mandatory for grade eleven students in the province in 1973, many teachers called upon the CBCA and LBCIC to teach the human sexuality unit.⁹⁷

While the CBCA and LBCIC initially set out to provide mainly counselling services, educational outreach quickly became an integral part of how both birth control centres conceptualized and practiced their own model of healthcare. Judy Burgess wrote about the importance of education in 1974, as she reflected on the LBCIC’s first year of operation: “We aim to educate, and by education, foster the values necessary for healthy and responsible sexuality within our community, ensuring that young people and adults will determine their sexual and other conduct by considering its long-range effects on their own personal development and the highest good of

⁹³ CBCA Newsletter, September 15, 1972, pg. 2, in “Newsletters (CBCA) 1971-1974,” M-7265-240, *CBCA Collection*, GA.

⁹⁴ “Statistics on Education Presentations,” June 1973, in “Education Outreach 1968-1972,” M-7265-99; CBCA Local Initiatives Project, Spring 1973, in “Education Outreach, Local Initiatives Project, 1973,” M-7265-111, *CBCA Collection*, GA.

⁹⁵ Brief on LBCIC submitted to Lethbridge City Council, March 1974, in “Lethbridge Birth Control Association” GR 1983.0133 Box 1, File 5, PAA.

⁹⁶ “Lethbridge Birth Control and Information Centre Review of Budget and Programs for January 1, 1974, to November 8, 1974;” “Proposal of Budget and Programs for 1975: Presented to the City of Lethbridge, the Province of Alberta Department of Preventative Social Services, and Family Planning Federation of Canada,” *LBCIC, 1973-1975* GMA.

⁹⁷ Barbara Lacey, interview by Karissa Patton, February 11, 2013, transcript.

others.”⁹⁸ Burgess’s report underscores the critical role education played in the Centre’s service provision. The report also illustrates that Burgess conceptualized education as an essential tool for clients’ wellbeing, both physically and socially.

Over time, the CBCA and LBCIC identified educational outreach as one of the “primary functions”⁹⁹ of the birth control centers and devoted much of their resources into educational programming. As the Centre and Association provided more outreach presentations, the more community feedback they received. Within a few years, the diversity and specificity of the curricula increased at both birth control centres. While the CBCA had offered general presentations about birth control for youth in 1971,¹⁰⁰ by the mid-1970s, the educational staff and volunteers presented tailored programs for nurse retraining on abortion, for youth about the sexual revolution, for women’s groups about menopause and breast cancer, and even human sexuality courses for “emotionally handicapped youth.”¹⁰¹ Similarly, while the LBCIC had offered a general sexuality seminar in 1974,¹⁰² only a few years later, the educational coordinators had created specific programming about the biology of the reproductive system and birth control, psychology and sexuality, sociology and sexuality, and women’s liberation.¹⁰³

Aligning with their feminist model of care and service provision, the centres’ educational outreach programs balanced factual knowledge about the body, reproduction, and human sexuality with lessons that dispelled myths about sex, sexuality, reproduction, and VD. While both the CBCA and the LBCIC often used the terms “objective” or “factual” to describe their educational workshops, the material was always infused with feminist consciousness-raising and made space for experiential knowledge. In a 1973 description of their outreach programs, the CBCA stated their education staff were “armed with current, factual information, diagrams, films, and slides, our

⁹⁸ “Lethbridge Birth Control and Information Centre Review of Budget and Programs for January 1, 1974, to November 8, 1974;” “Proposal of Budget and Programs for 1975: Presented to the City of Lethbridge, the Province of Alberta Department of Preventative Social Services, and Family Planning Federation of Canada,” *LBCIC, 1973-1975* GMA.

⁹⁹ “Educational Services,” Newsletter of the LBCIC, November 1, 1976, *LBCIC, 1973-1975* GMA.

¹⁰⁰ See: “Educational Outreach, 1968-1973,” M-7265-99, *CBCA Collection* GA.

¹⁰¹ See: “Educational Outreach, 1974-1976,” M-7265-100, *CBCA Collection* GA.

¹⁰² “Sexuality workshop,” *Unity* vol.1 no. 8, April 30, 1975, pg. 5, *LBCIC, 1973-1975* GMA.

¹⁰³ “Lethbridge Birth Control and Information Centre Review of Budget and Programs for January 1, 1974, to November 8, 1974;” “Proposal of Budget and Programs for 1975: Presented to the City of Lethbridge, the Province of Alberta Department of Preventative Social Services, and Family Planning Federation of Canada,” *LBCIC, 1973-1975* GMA.

trained personnel are available to give presentations to all interested groups.”¹⁰⁴ While the workshops given by the CBCA and the LBCIC provided facts and scientific explanations for bodily systems, the birth control centers’ staff paired these topics with broader discussions of the social and cultural aspects of sex. An early rendition of the workshop “Living With Sex,” outlined seven key components to be taught: “1. Human Growth and Development; 2. Sexual function – physiology of arousal; 3. Sexual function – communication; 4. Male and Female Roles; 5. Varieties of Sexual Expression; 6. Pregnancy and Birth; 7. Birth Control.”¹⁰⁵ The discussion of the scientific and factual side of human sexuality – physiology, human growth and development – are linked with topics that investigate a broader understanding of healthy sexuality – communication, sexual expression – and women’s liberation – male and female roles, birth control.

Sharing lived experiences became a vital part of each centre’s outreach curricula. One of the best examples of how the birth control centres utilized lived experiences as a teaching tool comes from the resource material from a 1973 workshop on abortion. The CBCA used stories pulled from a variety of experiences of women seeking abortions. CBCA educational coordinators and volunteers presented each case to an audience who acted as a TAC. The Association’s program introduced four women: seventeen-year-old grade twelve student Lee, who is seven and a half weeks pregnant and who was recently accepted to a pre-Medicine program at the University of Calgary; thirty-two-year-old executive assistant Ruth, who is sixteen weeks pregnant and takes care of her elderly parents; forty-year-old mother of four Joan, who became pregnant during a brief affair while she and her husband were separated; and graduate students and married couple Betsy (twenty-two) and John (twenty-four) who are about to embark on an exciting research trip for the next two years. The specificity of the personal, medical, and legal details in these educational scenarios are significant. The information given about “Joan” outlines her personal situation, her medical options, and the legal avenues and barriers she faces:

¹⁰⁴ “Description of the CBCA Birth Control Education,” c. 1973, pg. 1-2, in “Education Outreach 1968-1973,” M-7265-99, *CBCA Collection* GA.

¹⁰⁵ “Living with Sex: Human Sexuality Information and Discussion,” in “Education outreach 1968-1972,” M-7265-99, *CBCA Collection* GA.

Joan – 40 – Mother of 4 children 6-16 years.
Walt, her husband, 45 – had a successful vasectomy three years ago.
Couple had marital problems.
Temporarily separated, now back together – things looking better in the relationship.
Unknown to Walt, Joan had a short affair with a neighbour during their separation.
Joan’s last menstrual period _____ - her period is 2 weeks overdue.
Joan doesn’t want Walt to know – especially now that things are better within the family.
He’s working up north, but Joan would need his consent except at one local hospital.
Joan would like to have an abortion and a tubal ligation at the same time.
She has a history of ovarian cysts – basis for explanation of any scar she might have from the operation.¹⁰⁶

Following each scenario, the workshop coordinator described each woman’s options, legally and medically. The educational facilitator explained that earlier term pregnancies were terminated with a D&C or vacuum aspiration, while later-term abortions used a saline-induced miscarriage. In Joan’s scenario, the women teaching the course also presented a hysterectomy as an option. During this particular exercise, the facilitator explained each “character” scenario, the barriers they might face, and the abortion methods and options. In Joan’s scenario, the facilitator told the audience that Joan likely needed her husband’s permission to access the abortion procedure.

Exploring in detail the personal circumstances of the four women introduced in the workshop along with the medical options and the legal framework of the TACs allowed the CBCA to present factual information about medical and legal situations as well as lived experiences and raising consciousness about why abortion services are needed. They also used these scenarios to consider “possible solutions” to the rising number of abortion procedures. In particular, they explored three main options in the workshop: “1) Better contraceptive education. 2) Wider availability of contraceptive devices (possibly free). 3) Wider scope of family life education K-12 to make people knowledgeable & comfortable with their own sexuality.”¹⁰⁷ Using stories of different experiences to invoke empathy and raise awareness about the importance of reproductive and sexual health, the CBCA brought the personal, medical, and political together.

In line with the model of healthcare, the CBCA and LBCIC embraced their educational programming mission combined with medical-scientific knowledge about bodies, women’s lived experiences, and feminist theory and methods. The education outreach offered by the birth control

¹⁰⁶ “Resource outline – Abortion,” 1973, in “education outreach 1974-1976,” M-7265-100, *CBCA Collection* GA.

¹⁰⁷ “Resource outline – Abortion,” 1973, in “education outreach 1974-1976,” M-7265-100, *CBCA Collection* GA.

centres became an essential part of the alternative health services offered at the Centre and Association. Unlike the ten-minute appointments with a physician, the outreach presentations offered in-depth information about how bodies functioned rooted in women's circumstances and experiences. Association and Centre staff used feminist consciousness-raising models in their educational programming to encourage empathy and empowerment. In doing so, clients not only directed content, but their experiential knowledge was valued and shared within educational presentations. This feminist approach to educational outreach at the LBCIC and CBCA, purposefully decentralized medical authority, and acknowledge women as the experts of their own bodies, reproduction, and sexuality.

Conclusion

When Oral history narrator Rita Moir reflected on the significance of the LBCIC in the 1970s, she said, "Of course it was a small women's centre in a rural Southern Alberta community, but you can imagine that the voice it gave and the information provided and the place it was for women who just weren't ready to fit into that stereotype of what a woman should be."¹⁰⁸ The Centre, like the Association, inherently challenged conservative notions of womanhood in their mandate to facilitate fertility control. Moir's memories reflect the Centre's place in the broader women's health and liberation movements during the 1970s. While both the CBCA and LBCIC were influenced by several emergent reconsiderations of health and healthcare in post-war North America, the activities of the southern Alberta centres reflect a feminist model, practice, and curriculum. The women running the Association and the Centre put feminist philosophies about bodily autonomy and women's empowerment as well as women's lived experiences in conversation with medical-scientific knowledge about reproduction and sex. The LBCIC and CBCA staff built relationships with clients and formed coalitions with community services to better develop referral services, provide educational outreach, and help people access the care they needed – no matter how simple or complex the situation. In doing so, birth control centre employees and volunteers incorporated social aspects of health and lived experiences in ways that medical institutions and social services never did. The on-the-ground services both southern Alberta birth control centres provided filled the gaps within existing medical and social services, while encouraging clients – women in particular – to take charge of their own bodies, reproduction, and wellbeing.

¹⁰⁸ RM, interview, Oct. 7, 2014, transcript, GMA.

CHAPTER 3: FROM BOOKLETS TO BREAST EXAMS: THE SIGNIFICANCE OF SELF-EDUCATION

This was written for you.

Male. Female. Revolutionary. Fascist.

Anyone interested in knowing what goes on between your knees and your navel and learning how to make some of these functions more rewarding and less threatening.

In case your doctor was too busy to tell you, your mother too embarrassed, or your sex ed. teacher prohibited, here it is. Birth control methods. A discussion of abortion and VD. A separate list of local places to go for help. Some useful organizations. And suggested reading.

Please use this information for your own freedom, health, and happiness. Choose contraceptive methods that fit your physical needs and style of living. And use it. If your sexual activity coincides only with national holidays or a full moon, you won't need daily protection. And no method will be effective if it's left in its case, package, wrapper, tube, or on the drugstore shelf.

How to Take the Worry out of Being Close (c.1971-1972)¹

The passage above comes from the popular sex education booklet *How to Take the Worry out of Being Close*. Marion Johnson Grey and Roger W. Grey self-published the booklet in 1971. The authors distributed the booklet widely, and gave many women's health centres in North America republishing rights, enabling health centre activists to update the sections titled "Organizations" and "Suggested Reading" to fit into local, regional, and national contexts.² While perhaps not as well-known as the McGill Students' *Birth Control Handbook* (1968)³ and the Boston Women's Collective,

¹ *How to Take the Worry out of Being Close: An Egg and Sperm Handbook*, revised Calgary edition, published by the Calgary Birth Control Association in 1972. Originally written by Marion Johnson Grey and Roger W. Grey and originally self-published in Oakland, California, 1971, pg. 1, found in file M-7265-55, "Resource Material: Miscellaneous pamphlets on women's health, birth control, etc. ca 1960s-1990s" in the *Calgary Birth Control Association Collection* at the Glenbow Archives, Calgary, Alberta (CBCA Collection GA).

² The copyright page of the pamphlet states, "We are interested in the widest possible distribution of this information at low cost. Reprint permission will be given to those with similar objectives." *How to Take the Worry out of Being Close*, revised Calgary edition, 1972, pg. 1, found in "Resource Material: Miscellaneous pamphlets on women's health, birth control, etc. ca 1960s-1990s," M-7265-55, CBCA Collection GA.

³ Christabelle Sethna, "The Evolution of the *Birth Control Handbook*: From Student Peer-Education Manual to Feminist Self-Empowerment Text, 1968-1975," *Canadian Bulletin of Medical History* Vol. 23 No.1 (2006), 89-118.

Our Bodies Ourselves (1970),⁴ *How to Take the Worry out of Being Close* was a staple in the birth control centre libraries across Canada and the USA.⁵ This booklet was not only available but was one of the top items requested at the small lending libraries of both the Centre and the Association throughout the 1970s.⁶ The CBCA even requested republishing rights from Johnson Grey and Grey and revised the original publication to include local and national organizations and suggested readings for their clients.⁷ *How to Take the Worry* grew in popularity in southern Alberta (and beyond) because it discussed sex as natural part of life and destigmatized contraceptive use and fertility control, but the booklet's significance stretches beyond its popularity. Johnson Grey and Grey wrote the self-education booklet so that anyone (even fascists!) had access to pleasant and fulfilling sex education. The booklet was small and easily reproduced, which made it easy to share en masse. Teens were able to easily conceal these booklets and pamphlets from disapproving parents, or nosey neighbours. When it came to accessible sex education in the 1970s, the self-education pedagogy represented in *How to Take the Worry* was just as important as the content within its pages.

Self- and peer-education literature were particularly important to the birth control and women's health movements in the 1960s and 1970s. Historians Christabelle Sethna and Wendy Kline have established the significance of self-education texts in the birth control, women's health, and women's liberation movements, studying the *Birth Control Handbook* and *Our Bodies, Our Selves*, respectively. Both Kline and Sethna argue that these self-education texts were essential to fostering new attitudes towards reproductive health in the 1970s that encouraged people to take their bodies, sexuality, and reproduction into their own hands, in order to make informed reproductive and sexual

⁴ Wendy Kline, *Bodies of Knowledge: Sexuality, Reproduction, and Women's Health in the Second Wave*, (Chicago: University of Chicago Press, 2010); Wendy Kline, "The Making of *Our Bodies, Ourselves*: Rethinking Women's Health and Second-Wave Feminism," in *Feminist Coalitions: Historical Perspectives on Second Wave Feminism in the United States*, edited by Stephanie Gilmore and Sara Evans, (Urbana: University of Illinois Press, 2008).

⁵ Sandra Morgen, *Into Our Own Hands: The Women's Health Movement in the United States, 1969-1990*, (New Brunswick: Rutgers University Press, 2002); Kline, *Bodies of Knowledge* (2010); Sethna, "The Evolution of the *Birth Control Handbook*," (2006).

⁶ Found in many letters and requests for materials in CBCA files: "Educational Outreach, Requests for Materials, 1972-1974," M-7265-112; Correspondence files from 1971-1979, M-7265-79 to M-7265-95, *CBCA Collection* GA.

⁷ The copyright page from the CBCA's copy of *How to Take the Worry* states, "Revised Calgary Edition published by the Calgary Birth Control Association - - - 1972." *How to Take the Worry out of Being Close*, revised Calgary edition, 1972, pg. 1, found in "Resource Material: Miscellaneous pamphlets on women's health, birth control, etc. ca 1960s-1990s," M-7265-55, *CBCA Collection* GA.

decisions. Sethna shows how Montreal students took it upon themselves to learn about birth control, abortion, and sex, and shared their newfound knowledge with others. The *Birth Control Handbook* paved the way for community-built self-education material in the late 1960s and early 1970s. Kline similarly argues that *Our Bodies, Our Selves* created a new way of learning and knowing about bodies and health outside the confines of medical spaces. Both Kline and Sethna emphasized the importance of self-educational texts in the late 1960s and 1970s to combat medical gatekeeping of reproductive and sexual health knowledge from women and unmarried youth.

Self-help and self-education literature, including the *Birth Control Handbook*, *Our Bodies, Ourselves*, and *How to Take the Worry* were prominently featured in the LBCIC and CBCA lending libraries, and significantly influenced the models of healthcare and education at the two birth control centers.⁸ Judy Burgess even described *Our Bodies, Ourselves* as the LBCIC's "Bible" because of its "very strong feminist message."⁹ CBCA staff were similarly influenced by the goal to facilitate clients' "own freedom, health, and happiness" through sex education, as outlined in *How to Take the Worry Out of Being Close*.¹⁰ These self-educational texts were especially valuable in southern Alberta, where many citizens sought sex and contraceptive education but worried about the stigma associated with topics of sexuality and fertility control. The self-education literature available at the CBCA and LBCIC allowed individuals to discretely explore health topics that were often cast off as moral and private issues.

⁸ See, for example: Correspondence between the Boston Women's Health Book Collective and the CBCA, July 1973, and the "Bulk Order Form" from the *Birth Control Handbook* c. July 1973, in "Correspondence, 1973," M-7265-82, *CBCA Collection* GA.

⁹ Judy Burgess, interview with Karissa Patton, October 2, 2014, transcript, interview and transcript housed at the Galt Museum and Archives, in "Oral History Project: Students' Reproductive Rights Activism in Southern Alberta during the 1960s and 1970, 20171019 (JB, interview, Oct. 2, 2014, transcript, GMA).

¹⁰ *How to Take the Worry out of Being Close*, revised Calgary edition, 1972, found in "Resource Material: Miscellaneous pamphlets on women's health, birth control, etc. ca 1960s-1990s," M-7265-55, *CBCA Collection* GA.



Image 3.1: Photo of Pauline Hoskin (LBCIC Director) holding a variety of self-education literature, including *How to Take the Worry Out of Being Close*, in front of the LBCIC lending library, December 1974. From the Galt Museum and Archives, 20171104.

Even after new contraceptive technologies emerged and birth control was decriminalized in Canada, residual social and institutional barriers often prevented parents, teachers, and physicians from effectively educating their children, students, and patients about sex. While some parents, teachers, and physicians found these topics immoral or inappropriate and suppressed or ignored these issues all together,¹¹ Johnson Grey and Grey were more concerned with the many adults who

¹¹ Karissa Patton, “Parental Rights, Reproductive Rights, and Youth’s Sexuality in Alberta, Then and Now,” *ActiveHistory.ca*, posted July 25, 2014. <http://activehistory.ca/2014/07/parental-rights-reproductive-rights-and-youths-sexuality-in-alberta-then-and-now/>.

wanted to provide sex education to youth but did not know how to do so effectively: “In case your doctor was too busy to tell you, your mother too embarrassed, or your sex ed. teacher prohibited, here it is.”¹² Johnson Grey and Grey knew that there were many adults who wanted to provide good sex education for youth, but did not always have the knowledge, time, skills, resources, or permission to do so. When some parents wanted to teach their children about sex, reproduction, and contraception, their limited knowledge – stemming from their own lack of or inadequate sex education – limited even their best efforts.¹³ Similarly, some teachers who wanted human sexuality education included in their curriculums often confronted the realities of inadequate curricula or administrative gatekeeping that prevented them from providing effective sex education for their students.¹⁴ And sympathetic physicians often found they did not have adequate time to provide robust sex education during their regular practice.¹⁵ *How to Take the Worry* highlighted that education by parents and teachers, even some physicians, was irregular and often ineffective. Johnson Grey and Grey also underlined the significant need for self-education literature to mitigate the inequitable nature of sex and contraceptive education during the new era of decriminalization. In doing so, the small self-published booklet also combatted the top-down moralizing of sex and contraceptive education in schools, clinics, churches, or homes.

Self-educational literature was particularly vital to addressing the social and geographical barriers youth and people living in rural communities faced in southern Alberta. Despite the legality of contraception and abortion in the 1970s, social stigma around premarital sexuality, contraception, and abortion made it difficult for many citizens to walk through the doors of the birth control

¹² *How to Take the Worry out of Being Close*, revised Calgary edition, 1972, found in “Resource Material: Miscellaneous pamphlets on women’s health, birth control, etc. ca 1960s-1990s,” M-7265-55, *CBCA Collection* GA.

¹³ See, for example, Letters from Winnifred C. Mills, Rosina L. Staddon, R.G. Koep, Wilma G. Winter to Lethbridge City Council, c. March-April 1974, found in “Letters and Petitions Re: Funding of Birth Control Centre 1974,” 2011.1085 069, in *Early City Record Collection* at the Galt Museum and Archives, Lethbridge (ECRC GMA).

¹⁴ Lethbridge Birth Control and Information Centre Review of Budget and Programs for January 1, 1974 to November 8, 1974; “Proposal of Budget and Programs for 1975: Presented to the City of Lethbridge, the Province of Alberta Department of Preventative Social Services, and Family Planning Federation of Canada,” found in *Lethbridge Birth Control and Information Centre, 1973-1975* at the Galt Museum & Archives, Lethbridge, Alberta (LBCIC, 1973-1976 GMA).

¹⁵ Letter of support for the LBCIC from Dr. W. D. Stitt, October 26, 1973, found in “Lethbridge Birth Control Association,” GR.1983.0133, Box 1, file 5, at the Provincial Archives of Alberta, Edmonton, Alberta (PAA); Newspaper clipping, periodical unknown, “CBCA ‘prevention’ defended by doctor,” February 14, 1975, found in “Fundraising 1975,” M-7265-170, *CBCA Collection* GA.

centres publicly. These circumstances were especially true for unmarried young people who worried about parents, teachers, family friends, or neighbours knowing they visited the local birth control centre because these adults might condemn them for being sexually active, or at least considering sexual activity, before marriage.¹⁶ Very few small towns and rural communities had their own birth control centres in the 1970s,¹⁷ and some people living in rural areas worried about community surveillance when the CBCA or LBCIC showed up to give outreach presentations.¹⁸ In small and close knit rural communities, it was likely that the most of the residents from the small town eventually learned who attended the CBCA or LBCIC presentations. With less anonymity than their urban counterparts, young people and even some adults in rural communities avoided the presentations for fear of public scandal or gossip.¹⁹ And, even though the CBCA had an impressive rural outreach education program throughout the 1970s, their efforts did not mean they presented workshops in every town or community across the province. Other people living in rural communities – especially in northern Alberta – often did not even have the opportunity to attend outreach education programming from the birth control centers.²⁰ For others living in more remote rural areas, the long drive to the city to visit the birth control centres required an overnight stay, time off work, and, sometimes, babysitting.²¹ Even so, many people in rural communities, and youth from across Alberta (urban and rural) looked to the southern Alberta birth control centres for their sex

¹⁶ Elizabeth Siegle Watkins, *On the Pill; A Social History of oral Contraceptives, 1950-1970*, (Baltimore: Johns Hopkins University Press, 1998), 1-2.

¹⁷ Some rural health regions, like Millburn-Vermillion, Drumheller, Wetoka, Sturgeon, and Peace River, had birth control clinics, but only Slave Lake and, much later, the Kainai nation were the only rural communities that actually had their own birth control centre in the 1970s.

Chart compiled by Alberta Family Planning Co-ordinating Committee in 1972; Chart compiled by Alberta Family Planning Co-ordinating Committee in 1973; Chart compiled by Alberta Family Planning Co-ordinating Committee in 1974; Chart compiled by Alberta Family Planning Co-ordinating Committee in 1975. All Found in “Alberta Family Planning Co-Ordinating Committee 1975,” M-7265-20, *CBCA Collection* GA, see Appendix for more detail; Classified ad for the Blackfeet Family Health Centre, *Kainai News*, August 2, 1979, pg.18.

¹⁸ CBCA Progress Report June 1, 1972, pg. 40 in “History 1971-1975,” M-7265-185, *CBCA Collection* GA.

¹⁹ CBCA Progress Report June 1, 1972, pg. 40 in “History 1971-1975,” M-7265-185, *CBCA Collection* GA.

²⁰ While some communities north of Edmonton occasionally requested a presentation or information from the CBCA, the association mainly served cities, towns and communities in southern and central Alberta. See: “Contacts – Presentations,” in “Educational Outreach: Rural Areas, 1972,” M-7265-13, *CBCA Collection* GA.

²¹ Letter to the CBCA from Donna R. Nichols, August 8, 1972. In “Correspondence 1972,” M-7265-80, *CBCA Collection* GA.

education needs. Rather than presentation requests, these clients asked for self-education literature along with information about reproductive and sexual healthcare in the province. The CBCA mailed self-education materials to inquiring individuals, which allowed people to explore topics of sex and sexuality, reproduction, contraception, abortion, and VD within the privacy of their own homes. This kind of privacy alleviated many readers' worries about surveillance from unsympathetic doctors, judgmental pharmacists, nosy neighbors, or scandalized family friends. The self-education literature allowed many teens and unmarried adults to learn about topics, such as contraception, abortion, and VD in-depth without medical, familial, or social oversight.

While mailing booklets and pamphlets to people helped ease some barriers to accessible reproductive and sexual health information, self-education literature and methods had their own limitations. The libraries at the Association and the Centre included a variety of self-education literature that discussed the physiological and social aspects of reproductive and sexual health, but most of the pamphlets housed in the birth control centers' libraries maintained a narrow definition of sexual liberation. Many booklets available touted the heterosexual, middle-class, and married couple as ideal candidates for new family planning technologies.²² Other texts framed sexually active teenagers as irresponsible and perpetuated stigma around premarital sex.²³ The narrow views on reproductive and sexual liberation in the literature presented challenges for many of the women running the birth control centers, some of whom wanted to destigmatize sexuality, contraceptive use, and abortion. In addition to some problematic pamphlets, the CBCA and LBCIC educational teams had to constantly adapt their self-education pedagogy to emergent health concerns and educational technologies throughout the 1970s. In particular, increasing worries about breast cancer and the breast self-exam posed new challenges for the self-education methods used by educators at the Centre and the Association. While the women running the birth control centers tried to include information about breast cancer and diagrams about self-breast-exams in their newsletters and pamphlets, these new skills were best learned in a face-to-face environment. The need for some in-

²² Planned Parenthood, *Escape from Fear*, (New York: The Planned Parenthood Federation of America, 1956; 1962); Planned Parenthood, *What Every Man Should Know about Birth Control*, New York, Planned Parenthood Federation, 1969; Health and Welfare Canada, pamphlet "Family Planning," 1972, found in "Resource Material, Miscellaneous Pamphlets," M-7265-355, *CBCA Collection GA*.

²³ Rocky Mountain Planned Parenthood, *Stop Kidding Yourself*, Denver, 1973; Rocky Mountain Planned Parenthood, *So You Don't Want to be a Sex Object*, (Denver: Rocky Mountain planned Parenthood, 1973), found in "Resource Material: Miscellaneous Pamphlets on women's health, birth control, etc. 1960s-1990s," M-7265-355, *CBCA Collection GA*.

person education forced the CBCA and LCBIC educators to get creative in their pedagogy in order to provide good women's health education and to ensure that their clients had the anonymity and privacy they requested. The women running the Association and the Centre cleverly created self-education opportunities using old and new technologies, like poems, cartoon drawings, films, and even television programming. The staff at the birth control centers adapted to the limits of self-education literature – whether it was stigmatizing premarital sex or a topic that needed in-person instruction. Over the course of the decade, the birth control centres sent material to people in rural communities and teens across the region, published new resources to fill the gaps within in the literature itself, and created educational opportunities that embraced new media as they worked with their clients towards a broader goal of destigmatizing sex, contraception, and abortion.

Self-Education, Feminism, and Women's Health Models in the 1970s

Self-help and self-education were integral parts of women's liberation movement during the early 1970s²⁴ and the birth control centres actively participated in local and regional self-help initiatives. In 1972 the CBCA organized an entire conference titled "Self-Help '72," which featured a variety of organizations that promoted self-help, self-education, and women's liberation causes across the province. Described as a conference "for women who want to get things done,"²⁵ the program featured women presenters from Lethbridge, Calgary, and Edmonton "representing day care, overnight shelters, half-way houses, a feminist newspaper, homes for unwed mothers, and the Community Law Centre," and, of course, the CBCA.²⁶ There was even a screening of an educational film by local lawyer Marie-Ann Shaw called "Do-It-Yourself Divorce."²⁷ The women from the CBCA who organized Self-Help '72 wanted the attendees to continue their self-help and self-education practices after the conference. So, the organizers created takeaway booklets that featured

²⁴ Tessa Jordan, *Feminist Acts: Branching Out Magazine and the Making of Canadian Feminism*, (Edmonton: University of Alberta Press, 2019), xxvii.

²⁵ "Self-Help '72" in the CBCA Newsletter September 15, 1972, found in "Newsletters (CBCA) 1971-1974, M-7265-240, *CBCA Collection GA*.

²⁶ "Self-Help '72" in the CBCA Newsletter September 15, 1972 in "Newsletters (CBCA) 1971-1974," M-7265-240, *CBCA Collection GA*.

²⁷ Self-Help '72" in the CBCA Newsletter, July 31, 1972, pg. 3, found in "Newsletters (CBCA) 1971-1974," M-7265-240, *CBCA Collection GA*.

information about each participating organization along with other services for women's self-help available in the province.²⁸

Alberta feminists at Self-Help '72 emphasized this feature as key to women's empowerment. Women learning about their legal and medical rights, how to write their own newsletters, where to go in abusive situations, and the ins and outs of cooperative daycare was a significantly political act in the early 1970s. Self-help and self-education armed women with the knowledge they needed to be independent from men in their lives. The activists at the birth control centers knew that ending individual women's reliance on men as breadwinners, lawyers, policy makers, and health practitioners, brought women one step closer to their feminist goals of equal pay, marriage and property law reform, and better reproductive rights.²⁹

Feminist self-help epistemology became particularly entwined with women's health activism in the United States and Canada during the late 1960s and early 1970s. Historian and Women and Gender Studies scholar Michelle Murphy has shown that self-help was an integral part of "second wave" radical feminist movements in the California.³⁰ Her work on vaginal self-examinations argues that these self-exams "served as the exemplar of [a] redistribution of power that allowed women to reclaim their bodies."³¹ Like their American counterparts, the education teams at the CBCA and LBCIC saw self-education as key to their fight for women's health liberation throughout the 1970s.³² A 1976 funding proposal for the CBCA's "Women's Health Weekend Workshop" underlined the need for women's health self-education, arguing that "self-knowledge improves our self-concept, which is so important to our healthy functioning, and this encourages preventative health measures."³³ As Johnson Grey and Grey had alluded to when they stated that doctors were often

²⁸ Self-Help '72" in the CBCA Newsletter, July 31, 1972, pg. 3, in "Newsletters (CBCA) 1971-1974," M-7265-240, *CBCA Collection GA*.

²⁹ "Self-Help '72" in the CBCA Newsletter September 15, 1972, pg. 3 in "Newsletters (CBCA) 1971-1974," M-7265-240, *CBCA Collection GA*.

³⁰ Michelle Murphy, "Immodest Witnessing: The Epistemology of Vaginal Self-Examinations in the U.S. Feminist Self-Help Movement," *Feminist Studies*, vol. 30, no. 1 (Spring 2004), 115-147.

³¹ Murphy, "Immodest Witnessing," 138.

³² In the proposal, the CBCA identifies women's health as one of the most requested topics for educational literature and presentations from the general public. See: "Calgary Birth Control Association Special Project to P.S.S.," in "Workshops: Women's Health Weekend 1976," M-7265-458, *CBCA Collection GA*.

³³ "Calgary Birth Control Association Special Project to P.S.S.," in "Workshops: Women's Health Weekend 1976," M-7265-458; "Women and Health" in the CBCA newsletter November 27, 1974 pg. 5, in "Newsletters (CBCA) 1971-1974," M-7265-240, *CBCA Collection GA*.

“too busy”³⁴ to educate patients about their bodies, sexuality, and contraceptive choices, the CBCA educational team asserted that women had to actively learn about their own bodies, rather than rely on the limited information provided by many physicians. The LBCIC and CBCA’s self-education initiatives encouraged clients to reclaim power from medical institutions by becoming the experts of their own bodies and health. Activists running the CBCA and LBCIC emphasized the individual and cultural importance of women’s health self-education in their fight to increase their reproductive, sexual, and bodily autonomy. Rita Moir recalled that the educational opportunities offered at the LBCIC’s were about more than learning about contraceptive methods: “as young women dealing with issues of birth control, and rape, and unwanted pregnancies – it sounds melodramatic, but we were fighting for our lives, our futures ... what is a woman’s right to control her own body, and who has possession and control over her body?”³⁵ For Moir, and many other southern Alberta feminists like her, reproductive and sexual health self-educational opportunities were integral to women’s liberation and empowerment as well as their health and overall wellbeing.

To facilitate their clients’ empowerment vis-à-vis education, the women running the CBCA and the LBCIC stocked their libraries with self-education literature that emphasized the importance of both physiological and cultural information about healthy sexuality. The lending libraries and self-education literature were a significant component of the educational mission of both southern Alberta birth control centres. The centres promoted their libraries in every newsletter and grant application, throughout the decade: “There is a small lending library at the Centre and a large supply of free literature related to sexuality, geared to all ages.”³⁶ The plethora of pamphlets and booklets within the CBCA and LBCIC libraries covered sexual anatomy and physiology, puberty, VD, abortion, contraceptives, sex and contraception, pregnancy, and birth options for a variety of age groups.³⁷ Other educational material available at the birth control centres covered topics that

³⁴ *How to Take the Worry out of Being Close*, revised Calgary edition, 1972, in “Resource Material: Miscellaneous pamphlets on women’s health, birth control, etc. ca 1960s-1990s,” M-7265-55, *CBCA Collection GA*.

³⁵ Rita Moir, interview with Karissa Patton, December 13, 2012, transcript. Interview and transcript housed at the Galt Museum and Archives, in “Oral History Project: Students’ Reproductive Rights Activism in Southern Alberta during the 1960s and 1970, 20171019 (RM interview, Dec. 13, 2012, transcript, GMA).

³⁶ “The Birth Control & Information Centre,” *Up* vol. 1 no. 7, September 10, 1974, pg. 9, HQ 1480.L47.U6, the University of Ottawa’s Women’s Archives, Ottawa, Ontario (UOWA).

³⁷ *How to Take the Worry out of Being Close*, revised Calgary edition, 1972; Planned Parenthood – World Population, *Questions and Answers about Birth Control Pills*, New York, c. 1971-73; Planned Parenthood – World Population, *Questions and Answers about Intrauterine Devices*, New York, c. 1971-

contributed to a broader sense of health and wellbeing, including literature on self-worth, sexuality, sexual attitudes and relationships, how to talk about sex with parents, partners, or youth, rape, and communication about sex and family planning.³⁸ For example, the booklet *So You Don't Want to be a Sex Object* (image 3.5 below), guided young women to be “a person” rather than “a ‘My Somebody [my wife, my girlfriend]’” was a featured booklet in the birth control centre libraries.³⁹ The CBCA library housed a short essay written by Sol Gordon, titled “Sexual Rights for People... Who Happen to be Handicapped.”⁴⁰ The women running the Association and the Centre intentionally diversified their respective libraries to include literature about the physical side of human sexuality as well as the mental and emotional aspects of sexual health and reproductive rights. In doing so, the activist working at the southern Alberta birth control centres emphasized sex as more than a precursor to procreation, and framed sexuality as a healthy part of life. The women running the CBCA and LBCIC utilized a combination of scientific information about bodies and reproduction and the

73; *The How-Not-To Book: Julius Schmid's Guide to Modern Birth Control Methods*, 1970; Nancy Wood and Joyce Chorney, *Birth Control Information: Services, Health, Body, VD*, Edmonton: Edmonton Family Planning Service, 1973; Planned Parenthood, *What Every Man Should Know about Birth Control*, New York, Planned Parenthood Federation, 1969; Syntex Laboratories, *What you should know about oral contraceptives*, 1969; Health and Welfare Canada, *VD*, c. 1970s; Donna Cherinak and Allan Feingold, *Birth Control Handbook*, Montreal: Montreal Health Press, 1973; Donna Cherinak and Allan Feingold, *VD Handbook*, Montreal: Montreal Health Press, 1972; other publications with no publishing information include: *The Perils of Puberty*, *Life Begins*, all found in file M-7265-55, “Resource Material: Miscellaneous pamphlets on women’s health, birth control, etc. ca 1960s-1990s,” *CBCA Collection GA*.

³⁸ “Miscellaneous Pamphlets on Women’s Health, Birth Control, Etc. 1960s-1990s,” M-7265-355; “Newsletters (CBCA), 1971-1974,” M-7265-240; “Newsletters (CBCA), 1975-1977,” M-7265-241; “Newsletters (CBCA, 1978-1979,” M-7265-242; “Grant applications, 1979,” M-7265-181, *CBCA Collection GA*.

1974, 1975 editions of *Unity* in *LBCIC, 1973-1976 GMA*; 1974, 1975, 1976, 1977 editions of *Unity* in “Resource Materials, Newsletters, the Lethbridge Birth Control and information Centre, 1974-1977,” M-7265-394, *CBCA Collection GA*; 1974, 1975, 1976 editions of *Up*, The Lethbridge Women’s Liberation Group Newsletter, HQ1480.L47.U6, UOWA.

³⁹ Rocky Mountain Planned Parenthood, *So You Don't Want to be a Sex Object*, Denver, 1973. In “Resource Material: Miscellaneous Pamphlets on women’s health, birth control, etc. 1960s-1990s,” M-7265-355, *CBCA Collection GA*.

⁴⁰ Gordon argues that youth with physical and mental disabilities must receive that same kind of sex education provided to other youth as part of destigmatizing social and cultural marginalization of “people who happen to be handicapped.”

Sol Gordon, *Sexual Rights for People... Who Happen to be Handicapped*, (Syracuse: Centre on Human Policy, 1974), found in “Resource Material: Miscellaneous Pamphlets on women’s health, birth control, etc. 1960s-1990s,” M-7265-355, *CBCA Collection GA*.

feminist literature about sexual and reproductive liberation as a tactic to normalize sex and sexual health in their communities.

“Please send ... in an unmarked envelope:” Stigma, Surveillance, and Self-Education

The women running the Association and the Centre knew that self-education literature was integral to providing good sex and birth control education, especially as they realized that their in-person services were not accessible to everyone in the region. In the 1970s, people across the province increasingly sent letters to the CBCA requesting self-education material and other reproductive and sexual health information.⁴¹ Many of these letters were from teens living in urban and rural communities as well as many adult women from small towns and remote communities. Most of these women and youth writing to the CBCA requested self-educational material – and requested it was sent covertly by mail – in order to avoid parental or community surveillance. Even though contraception and abortion were legal in Canada when they sent the letters, youth and unmarried women still faced a great deal of stigma when it came to pre- or extra-marital sexuality, birth control, and abortion. The LBCIC and the CBCA saw self-education literature as an important tool in addressing their clients’ concerns about surveillance while also providing educational materials about sex, contraception, and abortion to unmarried youth and single women.

For decades leading up to the 1970s, premarital sexuality caused significant moral panic in Canada and elsewhere.⁴² Throughout the twentieth century legal interventions in countries like

⁴¹ Letter to the CBCA from Sandra Morris, Michelle O’Reilly, and Dana Fisher, December 6, 1972; Letter to the CBCA from Laurence Epp, March 7, 1973; Letter to the CBCA from Mrs. E. Hauck, c. November 1972; Letter to the CBCA from Bill Warrener, September 28, 1972; Letter to CBCA from Mary-Del Kells, December 15, 1972; Letter to CBCA from Mrs. C. Glasier, October 4, 1972; Letter from “a Friend” to the CBCA, November 4, 1972; Letter to the CBCA from Sharon Wheale, October 10, 1972; letter to the CBCA from Mrs. E. Hauck, c. November 1972; Letter to the CBCA from Donna R. Nichols, August 8, 1972, in “Correspondence 1972,” M-7265-80; Letter from “Elly” to the CBCA, October 4, 1973, found in “Correspondence, 1973,” M-7265-82; letter to the CBCA from Mr. and Mrs. J. McAuley, April 26, 1973. In “Correspondence 1973,” M-7265-82, *CBCA Collection GA*.

⁴² J. Shoshanna Ehrlich, *Regulating Desire: From Virtuous Maiden to Purity Princess*, (New York: State University of New York Press, 2014), 3; Mary Louise Adams, *The Trouble With Normal: Postwar Youth and the Making of Heterosexuality*, (Toronto: University of Toronto, 1997); Tamara Meyers, *Caught: Montreal’s Modern Girls and the Law, 1869-1945*, (Toronto: University of Toronto, 2006); Carol Dyhouse, *Girl Trouble: Panic and Progress in the History of Young women*, (London & New York: Zed Books, 2013); Amanda H. Littauer, *Bad Girls: Young Women, Sex, and Rebellion Before the Sixties*, (Chapel Hill: University of North Carolina Press, 2015).

Canada, Britain, and America were enacted to “protect, manage, and/or control the sexuality of young women” and youth’s sexuality was policed by social workers, teachers, medical professionals, and judges.⁴³ Following the Second World War, premarital sexual activity was specifically categorized as delinquent and immoral, and fears about young women’s sexual delinquency and teenage pregnancy increased along with the rise of “teenage culture” in the late 1940s and throughout the 1950s.⁴⁴ Young middle-class White women’s sexuality and pregnancy outside of marriage were seen as particular threats to the middle class standing and values in post-war English Canada.⁴⁵ By the 1960s, moral panic about sexual “permissiveness,” teenage women’s “sexually suggestive” clothing like miniskirts,⁴⁶ and the population bomb amplified concern about “babies having babies” in North America.⁴⁷ At the turn of the 1970s, some citizens worried that legal contraception and local birth control centres encouraged teenage “permissiveness” and premarital sexuality in Canada.⁴⁸ Teens looking for contraceptive prescriptions, abortion referral, or education on sexuality and their bodies in the 1970s faced significant stigma about premarital sex despite the changing laws and emergent reproductive health services.

Adult surveillance and social stigma around premarital sex presented significant barriers for many teens seeking contraception or abortion thanks to the enduring stigma about premarital sex in the 1970s. Some teenagers worried that a relative, teacher, family friend, or neighbour might see them entering the local birth control centres and tell their parents. A note in the CBCA files recorded a literature request from one local teen: “wants information about contraception mailed out to her. When asked, said she did not want to come down to centre.”⁴⁹ Other teens worried that even just entering the birth control centres risked being exposed as sexually active. And, when certain youth got up the nerve to visit the birth control centres, they still had to face family

⁴³ Quotation from Ehrlich, *Regulating Desire*, 3. Also see: Adams, *The Trouble With Normal* (1997); Tamara Meyers, *Caught*, (2006); Dyhouse, *Girl Trouble*, (2013); Littauer, *Bad Girls*, (2015).

⁴⁴ Adams, *The Trouble with Normal*, 42-44.

⁴⁵ Adams, *The Trouble with Normal*, 67-69.

⁴⁶ Dyhouse, *Girl Trouble*, 162-164.

⁴⁷ Ehrlich, *Regulating Desire*, 4.

⁴⁸ Rita Moir, interviewed with Karissa Patton, 7 October 2014, transcript, interview and transcript housed in “Oral History Project: Students’ Reproductive Rights Activism in Southern Alberta during the 1960s and 1970, 20171019, at the Galt Museum and Archives, (RM interview, Oct. 7, 2014, transcript, GMA); Letter from Ray Keitges to Lethbridge City Council, 2 April 1974, found in “Letters and Petitions Re: Funding of Birth Control Centre 1974,” *ECRC GMA*.

⁴⁹ Note in “correspondence, 1973,” M-7265-82, *CBCA Collection GA*.

physicians and local pharmacists to obtain contraceptives.⁵⁰ Even some sympathetic (CBCA or LBCIC approved) local doctors, hit too close to home for local teenage clients – literally. A note from Jean in December 1972 describes an abortion counselling session with one pregnant teen and her sister. When Jean suggests one of the CBCA’s approved doctors, the client refused because the doctor lived in her neighbourhood and knew her parents. Jean recounted this brief part of the session: “How about Dr. [redacted]?” “No, I went to school with his son, and they live just down the street from us.”⁵¹ For this Calgary teen, even the growing city felt small enough that being discovered by her parents or neighbours remained a significant risk. If teens eventually found a sympathetic doctor to prescribe them birth control they still had to face local pharmacists and hide any billing from their parents.⁵² During a time when pharmacies even kept condoms behind the counter, accessing any contraceptives at community drugstores proved difficult for teens, who worried about being seen by neighbours or family friends.⁵³ If teenagers jumped through the many hoops to obtain their contraceptives and skirted the many adults in their life, they still had to hide Alberta Health billing from their parents. Terry Forbis remembers one of her roles at the Lethbridge Family Planning Centre was to teach teens to ask for suppressed billing from the doctor’s office. Suppressed billing ensured that youth’s trips to the local clinic for a birth control prescription or abortion referral did not show up on their families’ Alberta Health Services summary at the end of the year.⁵⁴ The provincial healthcare regulations and bureaucracy significantly limited teenagers

⁵⁰ Terri Forbis, interview with Karissa Patton, January 24, 2013, transcript. Interview and transcript housed at the Galt Museum and Archives, in “Oral History Project: Students’ Reproductive Rights Activism in Southern Alberta during the 1960s and 1970, 20171019 (TF interview, Jan. 24, 2013, transcript, GMA).

⁵¹ Diary entry from Jean, December 15, 1972, in “Board information Package 1977-1978,” M-7265-39, *CBCA Collection* GA.

I have not redacted any information from sources I found in the CBCA collection. The redaction in this source and others from the CBCA collection occurred prior to my access to these source.

⁵² TF interview, Jan. 24, 2013, transcript, GMA.

⁵³ Andrea Tone, “Condom Kings,” in *Devices and Desires: A History of Contraceptives in America*, (New York: Hill & Wang, 2001), 183-200.

⁵⁴ Forbis explains that Alberta citizens used to receive an annual summary of the services they used. These summaries also included any services used by “dependents.” Teens visiting a clinic without their parents’ knowledge had to learn to specifically ask for suppressed billing to ensure their covert prescription appointment, abortion referral, abortion procedure, or VD treatment did not show up on their parents’ Alberta Health Services Summary. TF interview, Jan. 24, 2013, transcript, GMA.

access to contraception throughout the decade. For teens who did access these services, they had to work hard to hide their contraceptive use or abortion referral from adults in their lives.

To covertly access reproductive and sexual health information many teens asked the CBCA to provide literature on abortion or birth control in letters throughout the 1970s.⁵⁵ In 1972, three Calgary teenagers wrote to the Association, asking the staff to discretely send information about birth control methods and abortion :

We are girls who have begun to have sexual relationships with our boyfriends. We would like to have information on the eight different methods of contraception.⁵⁶ Along with this, could you please, send us some information on abortion?

We would appreciate it very much. Please send this information to Sandra Morris, address as above, in an unmarked envelope, as the parents involved would not approve.⁵⁷

These three teens worried about the fall out with their parents if they were caught at the CBCA, so they relied on self-education literature from the Association to learn about sex and contraception. For many teenagers in the province, soliciting literature about birth control, abortion, and sex from the birth control centres by mail was more accessible than going to their doctors or the Calgary and Lethbridge birth control centres themselves. Unlike a public visit to the birth control centres, self-education booklets and pamphlets were small and easily hidden under pillows, in a drawer, or some even inside other books.⁵⁸ While contraception and abortion was legally available for teenagers in the 1970s, the cultural attitudes that chastised premarital sex and teen pregnancy presented significant barriers to teens access to reproductive and sexual health services. The women at the CBCA established self-education initiatives and sent literature to teens across the province in response to

⁵⁵ Letter to the CBCA from Sandra Morris, Michelle O'Reilly, and Dana Fisher, December 6, 1972; letter from Miss S. Dunn, October 12, 1972; Letter from Helen Yellowlees, October 27, 1972; Letter from Kathleen Christiaen, November 8, 1972; Letter from Kara Dillsley, November 23, 1972; Letter from Sue Brown, November 8, 1972; Letter from Terry Court, December 4, 1972; Letter from Monty Stenton, December 2, 1972; Letter from Marlys Reynow, December 5, 1972 found in "Correspondence 1972," M-7265-80; Letter from Debbie Swayne, June 11, 1973; Letter from Tim Phillips, c. June 1973; Wendy Spraakman, January 25, 1974, found in "Correspondence 1973," M-7265-82 *CBCA Collection* GA.

⁵⁶ "The Eight Methods of Birth Control" is a pamphlet that was available at the CBCA.

⁵⁷ Letter to the CBCA from Sandra Morris, Michelle O'Reilly, and Dana Fisher, December 6, 1972, in "Correspondence 1972," M-7265-80, *CBCA Collection* GA.

⁵⁸ Many of these pamphlets were smaller than a piece of 8.5x11-inch paper. The largest books, *Our Bodies, Ourselves* and *The Birth Control Handbook* were about the size of a piece of 8.5x11-inch paper, while the smallest pamphlets were about 3x5 inches.

the social barriers youth faced in the 1970s. The self-education mail outs from the association provided learning opportunities for youth even in the face of surveillance of youth's sexuality and social stigma about premarital sex and pregnancy.

For many rural women and youth just accessing general health services was a task in and of itself and asking rural physicians for contraceptive prescriptions and abortion referrals presented some risk to their community standing. Ackerman's work on Maritime Canada has shown that following decriminalization in Canada, "finding doctors willing to work in rural areas in the Atlantic Provinces was a constant problem and many physicians' moral opposition to reproductive health services compounded the issue."⁵⁹ Alberta rural communities often faced similar barriers to accessible reproductive and sexual healthcare after decriminalization. A survey conducted by the CBCA in the early 1970s revealed that many small towns and rural communities in the province had few medical services within a reasonable distance from their homes.⁶⁰ In particular, these surveys revealed that some Alberta towns, like Acme and Penhold, had no hospital, no drug store, and no doctors, so residents relied on neighbouring communities for any of their reproductive and sexual health needs.⁶¹ Even when rural women and youth made the trek to the nearest doctor, the chance that the doctor was not sympathetic to reproductive and sexual health queries remained a risk. Medical professionals' personal or religious objections to abortion and contraception also prevented the establishment of rural reproductive healthcare in the province. For example, communities, like Oyen, had few doctors and they were "generally opposed" to abortion, making it hard for women to obtain an abortion referral.⁶² Similarly, even though the town of Pincher Creek housed a hospital and some sympathetic doctors in the area were willing to prescribe birth control, the town's catholic

⁵⁹ Katrina Ackerman, "Before Mifegymiso: A History of Rural Women's Access to Abortion," November 24, 2016, *ActiveHistory.ca*, last accessed September 27, 2020, <https://activehistory.ca/2016/11/before-mifegymiso-a-history-of-rural-womens-access-to-abortion/>. For more context also see: Katrina Ackerman, "The Dark, Well-Kept Secret: Abortion Experience in the Maritime Provinces," in *Abortion: History, Politics, and Reproductive Justice after Morgentaler*, edited by Shannon Stettner, Kristin Burnett, and Travis Hay, (Vancouver: University of British Columbia Press, 2017), 133-151.

⁶⁰ CBCA Rural Outreach Surveys, 1972, Responses from Acme, Bassano, Blairmore, Brooks, Consort, Foremost, Hanna, Veteran, Cereal, Innisfail, Oyen, Penhold, Pincer Creek, Red Deer, and Strathmore, in "Education Outreach, Rural Areas 1972," M-7265-113, *CBCA Collection* GA.

⁶¹ CBCA Rural Outreach Surveys, 1972, Responses from Acme, Penhold, in "Education Outreach, Rural Areas 1972," M-7265-113, *CBCA Collection* GA.

⁶² CBCA Rural Outreach Surveys, 1972, Responses from Oyen, in "Education Outreach, Rural Areas 1972," M-7265-113, *CBCA Collection* GA.

hospital did not perform therapeutic abortions.⁶³

Many rural teens, in particular, had to travel to other towns or cities to obtain contraception prescriptions and abortion referrals. The fear of being “caught” asking for condoms at the local pharmacy was amplified for teenagers in small towns and rural communities. Smaller populations in small towns and rural communities meant people were more likely to be recognized heading into a workshop from the birth control centres or picking up their contraception prescription at the drug store on main street.⁶⁴ If teens lived in a community with doctors and a pharmacy, some local physicians only prescribed contraception to adults, or required parental consent to anyone under the age of eighteen, as was the case in Red Deer and Consort.⁶⁵ It was not easy for teenagers in rural locations to travel to the urban birth control centres, or even the pharmacy in the next town over, unless they had access to a car and an explanation for their parents on why they needed to visit Calgary or Lethbridge. Forbis recalled that it was “pretty hard for a teenager in Cardston or Crowsnest Pass to get to Lethbridge.”⁶⁶ While women and youth living in urban centres also worried about parental consent requirements and facing unsympathetic medical professionals, many of them found another sympathetic doctor in their city. For rural teenagers, getting to another rural physician at all and, specifically, finding someone who prescribed contraception to and referred abortions for unmarried youth, often meant a multi-hour drive.

Many adults in rural communities also worried about social surveillance and stigma in their communities and wrote to the birth control centres in order to anonymously obtain reproductive health information.⁶⁷ Historian Katrina Ackerman’s work on abortion access in Canada’s Maritime provinces has outlined the “challenges women faced when trying to obtain abortion in tight-knit rural communities.”⁶⁸ Her work underlines the extralegal barriers to abortion following decriminalization of abortion in 1969, and emphasizes the social and psychological costs rural women faced if their communities found out about their unwanted pregnancies and abortion in the 1970s and 1980s. Like their Maritime counterparts, Alberta people living in rural communities were

⁶³ CBCA Rural Outreach Surveys, 1972, Responses from Pincher Creek, in “Education Outreach, Rural Areas 1972,” M-7265-113, *CBCA Collection* GA.

⁶⁴ TF interview, Jan. 24, 2013, transcript, GMA.

⁶⁵ CBCA Rural Outreach Surveys, 1972, Responses from Red Deer, Consort, in “Education Outreach, Rural Areas 1972,” M-7265-113, *CBCA Collection* GA.

⁶⁶ TF interview, Jan. 24, 2013, transcript, GMA.

⁶⁷ Letter from “Elly” to the CBCA, October 4, 1973, found in “Correspondence, 1973,” M-7265-82, *CBCA Collection* GA.

⁶⁸ Ackerman, “The Dark, Well-Kept Secret,” 133.

often markedly secretive about their reproductive and sexual health needs. Many women and some men from small communities, like Coronation, Three Hills, Cochrane, Crossfield, Sherwood Park, Lacombe, and Hillspring, wrote letters to the birth control centres requesting materials on birth control, abortion, and vasectomies.⁶⁹ Most of these letter writers sought information and resources from the CBCA because it provided them more anonymity than going to the nearest physician. In her oral history interview, Terri Forbis explained the importance of anonymity when providing reproductive and sexual health services to people from rural communities: “people who [were] teachers, or other physicians even, in surrounding communities came here [to Lethbridge] for service because they need anonymity. Because it’s still [in 2013] hard to go to the family doctor in Fort McLeod and say, ‘I think I have an STI,’ when you’re the teacher or the town mayor or whoever you are, never mind the teenagers.”⁷⁰ In 1972, one person from Lacombe was so worried about being identified while requesting information about birth control from the CBCA that they sent a stamped return envelope and signed their letter only as “a Friend.”⁷¹

Other rural citizens worried about the professional and social fallout if it was even suggested that they were engaging in premarital sexual activity. A CBCA progress report from June 1972 explained that stigma around premarital sex prevented many rural people from attending birth control centres educational workshops their own towns: “In many cases, we were told by people in attendance that they knew people who wanted to come, but who felt they ‘couldn’t afford to be seen’ at lectures of this type. This certainly included the younger generation and such people as local unmarried school teachers.”⁷² Moral panic about premarital sexuality was so intense in some areas that unmarried school teachers worried about losing their jobs if it was even suggested that they were sexually active outside of marriage. The stigma around premarital sex, contraception and abortion combined with the close-knit nature of rural communities in Alberta, burdened locals who did not want to expose their premarital sexual activity or unwanted pregnancy but desperately

⁶⁹ Letter to the CBCA from Laurence Epp, March 7, 1973; letter to the CBCA from Mrs. E. Hauck, c. November 1972; letter to the CBCA from Bill Warrener, September 28, 1972; letter to CBCA from Mary-Del Kells, December 15, 1972; letter to CBCA from Mrs. C. Glasier, October 4, 1972. In “Correspondence 1972,” M-7265-80; letter to the CBCA from Mr. and Mrs. J. McAuley, April 26, 1973, in “Correspondence 1973,” M-7265-82, *CBCA Collection GA*.

⁷⁰ TF interview, Jan. 24, 2013, transcript, GMA.

⁷¹ Letter from “a Friend” to the CBCA, November 4, 1972. In “Correspondence 1972,” M-7265-80, *CBCA Collection GA*.

⁷² CBCA Progress Report June 1, 1972, pg. 40 in “History 1971-1975,” M-7265-185, *CBCA Collection GA*.

sought reproductive and sexual health services.

Women from rural areas seeking abortions were particularly worried about keeping their unwanted pregnancy a secret from their communities and turned to the CBCA for help. Many rural women wrote to the CBCA in the 1970s and requested information about where to go to get a pregnancy test, where to go and which doctors to see to get an abortion referral, and how much of the abortion procedure costs were covered by provincial healthcare.⁷³ Some of these letters also reveal how hard these women worked to keep their abortion a secret from their families and communities. One young widow from Wanham, Alberta, wrote to the CBCA on August 8, 1972:

I am approximately 8 weeks pregnant. I want an abortion. I am a widow of 1 yr. + have one son born shortly after his father was killed. I allowed my loneliness to get the better of me one night. I am in good health, 26 yrs. old.

I must have the abortion before school starts in Sept. if at all possible because I am to be teaching in a small private church school and do not want to have to take time off and make up an acceptable explanation.

I am not well off financially but the situation is desperate and I can afford the necessary expenses and am willing to travel out of the country in order to obtain this service.

What can your office do to help me?⁷⁴

For this woman in Wanham, seeking an abortion was taboo enough in her community that she wrote to the CBCA, some seven hundred kilometers away, before visiting the closest physician. Her letter suggests that any public knowledge about her abortion put her job at the local “church school” and, likely, her economic well-being at risk. To ensure a good social standing in her community and economic security for herself and her son, she was willing to travel across the national border, approximately ten hours’ drive away. Abortion travel to the United States was not uncommon in Alberta during the 1970s. This letter writer likely contacted the CBCA because she heard that the Association was facilitating women’s abortion travel to American cities like Seattle.⁷⁵ But her readiness to undertake an extensive several-day trip underscores her resolve to obtain an abortion and hide her unplanned pregnancy from her community.

The CBCA and LBCIC earned a reputation for providing client-directed and non-judgemental services, which offered teenage and rural clients an alternative to their local medical

⁷³ Letter to the CBCA from Sharyn Wheale, October 10, 1972; letter to the CBCA from Mrs. E. Hauck, c. November 1972. In “Correspondence 1972,” M-7265-80, *CBCA Collection* GA.

⁷⁴ Letter to the CBCA from Donna R. Nichols, August 8, 1972. In “Correspondence 1972,” M-7265-80, *CBCA Collection* GA.

⁷⁵ Beth Palmer, “‘Lonely, Tragic, but Legally Necessary Pilgrimages:’ Transnational Abortion Travel in the 1970s,” *The Canadian Historical Review* vol. 92 no.4 (2011), 637-664.

professionals when seeking reproductive and sexual health information. The widow in Wanham, just like other single adult women in Three Hills or teens in Consort and Calgary, turned to the CBCA not just for self-education literature but reproductive and sexual healthcare information throughout the 1970s. The lack of health services more generally in rural areas were not the only barrier for local contraceptive users. The letters sent from Alberta teens and rural citizens to the CBCA in the 1970s underlines how significantly stigma about sex outside of marriage, contraceptive use, and abortion affected access to reproductive and sexual healthcare in the province. The birth control centres offered Albertans the opportunity to request information and educational material on reproductive and sexual health matters without the worry of community surveillance.

Self-Education Literature: Class, Gender, White Respectability, and the Contraceptive Consumer

While the popular booklet *How to Take the Worry Out of Being Close* claimed that contraceptive education was for everyone, other self-education texts within the birth control centres' libraries more narrowly defined sexual and reproductive freedom. Educational teams at the LBCIC and CBCA worked hard to diversify the literature in their libraries to cover a range of physiological and social sexual health issues.⁷⁶ An analysis of the self-educational materials housed at the CBCA during the 1970s, however, framed the White, middle-class, heterosexual married couple as the responsible contraceptive consumer and further stigmatized premarital sex and teenage pregnancy. Booklets and pamphlets for married couples presented contraception as a tool to plan a family while the couple also enjoyed sex as a natural part of life. Conversely, literature written for teenage and unmarried women offered a binary choice between sex with contraception or abstinence and instructed unmarried women to prevent pregnancy at all costs. As the women running the birth control centers in southern Alberta hoped to destigmatize sex and contraceptive use the literature available to their clients often perpetuated stigma about sex and fertility control outside of marriage.

The discourse in the self-help literature was informed by broader social mid-century commentary about contraceptive use that promoted contraception for married White couples from

⁷⁶ See, for example: How to talk to teenagers about something that's not easy to talk about: Facts about the facts of life, c.1970s; Sol Gordon, *Sexual Rights for People... Who Happen to be Handicapped*, Syracuse: The Centre on humanity Policy, 1974, in Resource Material: Miscellaneous Pamphlets on women's health, birth control, etc. 1960s-1990s," M-7265-355; resource materials list Barry Cunningham's 1971 *Gay Power: The Homosexual Revolt* as literature available at the CBCA, found in "Resource Material, Bibliographies, 1970-1992," M-7265-347, *CBCA Collection GA*.

the middle and upper classes as a means to responsibly plan their families. As Historian Elizabeth Siegel Watkins shows, by the mid 1960s contraceptive use was understood both as a significant part of a healthy marriage as well as a “moral and political” duty to address growing concerns about population explosion.⁷⁷ The discourse around responsible contraceptive use in the United States in the 1960s perpetuated long held beliefs about race, class, and sexuality. White married couples from the middle and upper classes using the new medical technology of “the Pill” came to represent modernity and morality. Watkins argues that while the new medical technology of “the Pill” revolutionized birth control in the early 1960s, “the contraceptive revolution did not cause the sexual revolution.”⁷⁸ White unmarried women from the middle and upper classes, were discouraged from using contraception “because it implied, correctly, not only that these women were having sex but also that they were planning ahead for it.”⁷⁹ Society was less scandalized about unmarried women from lower classes and women of colour using contraception. Rather, people of colour and those from the working class were targeted for contraceptive programs fuelled by economic concerns about over population and welfare costs.⁸⁰ Following the emergence new contraceptive technologies in the 1960s, discourse about sex and fertility control painted the White middle-class married couple as the model contraceptive consumers, reinforced middle and upper-class ideals about young White women’s chastity, and framed the easily distributed “Pill” as a tool for population control for working-class and racialized women.⁸¹

The discourse that framed contraception as a tool for healthy middle-class marriages was embedded in mid-century family planning self-education literature. In 1956, Planned Parenthood collaborated with Marvel Comics to produce a comic book titled *Escape from Fear* (image 3.2 below). The comic was even illustrated by the artist who worked on the popular comic book *Spiderman*.⁸² The family planning comic starred couple Ken and Joan, who were so in love but did not want any more children. The cover insinuated the importance of sex and birth control for White middle class

⁷⁷ Elizabeth Siegle Watkins, *On the Pill; A Social History of oral Contraceptives, 1950-1970*, (Baltimore: Johns Hopkins University Press, 1998), 1-3.

⁷⁸ Watkins, *On the Pill*, 1.

⁷⁹ Watkins, *On the Pill*, 1-2.

⁸⁰ Watkins, *On the Pill*, 2.

⁸¹ Watkins, *On the Pill*, 1-3.

⁸² Planned Parenthood, *Escape from Fear*, (New York: The Planned Parenthood Federation of America, 1956; 1962), inside cover, found in “Resource Material, Miscellaneous Pamphlets,” M-7265-355, *CBCA Collection GA*; Erika Dyck and Maureen Lux, *Challenging Choices: Canada’s Population Control in the 1970s*, (Montreal & Kingston: McGill-Queens University Press, 2020).

couples, like Ken and Joan, whose “marriage was on the rocks – because they loved each other!” *Escape from Fear* explains that Ken and Joan, already parents to three children, did not want another child but could not stand the idea of a sexless marriage. By the end of the comic, the couple finds a birth control method that works for them and “Six months later . . . Ken and Joan [were] happy again, free from fear . . .”⁸³ *Escape from Fear* was reprinted and redistributed in 1962, following the birth control Pill entering U.S. and Canadian pharmaceutical markets. While the comic advocated for the use of medical contraceptives in the late 1950s and 1960s, the Planned Parenthood publication strongly implied that contraception was a tool for modern married couples, not single men and women.

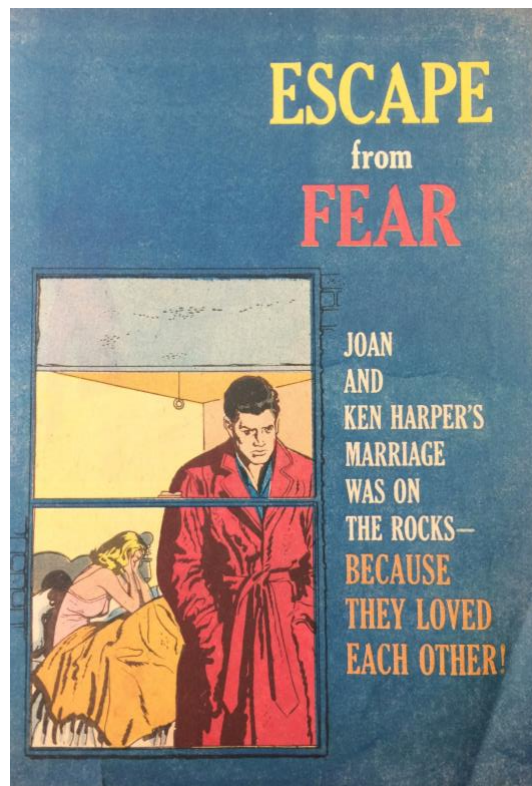


Image 3.2: Cover of *Escape From Fear*, Planned Parenthood Federation of America, originally published in 1956, reprinted in 1962.

⁸³ Planned Parenthood, *Escape from Fear*, (New York: The Planned Parenthood Federation of America, 1956; 1962), found in “Resource Material, Miscellaneous Pamphlets,” M-7265-355, *CBCA Collection GA*.

The belief that White middle class married couples were the ideal contraceptive consumer persisted into the 1970s following the 1969 decriminalization of contraception in Canada. The 1962 reprint of *Escape from Fear* was part of the CBCA's lending library in the 1970s, but it was not the only pamphlet that placed family planning and birth control within the confines of White middle class marriages. Almost all self-education texts in the birth control centre libraries exclusively featured White bodies. Some of the literature explicitly featured characters with White skin tones printed in colour (see image 3.2 above and 3.3 below),⁸⁴ while other pamphlets represented White characters in blue, black, or red ink prints (see images 3.4, 3.5, 3.6 below).⁸⁵ Similarly, many of the self-educational pamphlets continued to frame marriage as a precursor to contraceptive use and economic responsibility as a necessity to parenthood in the late 1960s and early 1970s. One 1969 Planned Parenthood pamphlet, titled *What Every Man Should Know About Birth Control*, described contraception as a tool for couples to “decide the number of children they want and when they **choose** to have them – not just by chance.”⁸⁶ Perhaps more accurately described as what every *married* man should know about contraception, the 1969 pamphlet outlines the significance of family

⁸⁴ See, for example, Planned Parenthood, *Escape from Fear*, (New York: The Planned Parenthood Federation of America, 1956; 1962); Rocky Mountain Planned Parenthood, *You Changed the Combination*, (Denver: Rocky Mountain Planned Parenthood, 1974), found in “Resource Material, Miscellaneous Pamphlets,” M-7265-355, *CBCA Collection GA*.

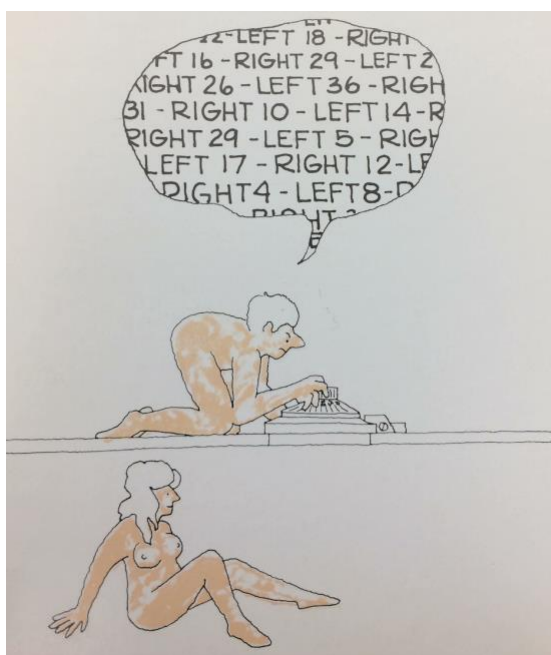
⁸⁵ See, for example, Planned Parenthood, *What Every Man Should Know about Birth Control*, New York, Planned Parenthood Federation, 1969; *The How-Not-To Book: Julius Schmid's Guide to Modern Birth Control Methods*, 1970; Rocky Mountain Planned Parenthood, *Stop Kidding Yourself*, Denver, 1973; Rocky Mountain Planned Parenthood, *So You Don't Want to be a Sex Object*, (Denver: Rocky Mountain planned Parenthood, 1973), found in “Resource Material, Miscellaneous Pamphlets,” M-7265-355, *CBCA Collection GA*.

Scholars Matthew Henry and Michael Chaney highlight that characters representing racialized populations are often explicitly indicated as such by darker skin tones. Both Henry and Chaney argue that in the absence of explicit racialization of characters in cartoons, the characters are depicted as White. See: Matthew A. Henry, “‘You’re an American Now’: Race, Ethnicity, and Nationality on *The Simpsons*,” 45-78, in *The Simpsons, Satire, and American Culture*, (New York: Palgrave & MacMillan, 2012); Michael A. Chaney, “Coloring Whiteness and Blackvoice in Minstrelsy: Representations of Race and Place in *Static Shock*, *King of the Hill*, and *South Park*,” *Journal of Popular Film and Television* vol.31, no4. (2004), 176-184.

Also, journalists have called attention to the assumed Whiteness of literary characters as it links to the more recent phenomenon of popular books turned films or series. See: Anna Holmes, “White Until Proven Black: Imaging Race in *Hunger Games*,” *The New York Times*, March 30, 2012. Accessed January 30, 2020, <https://www.newyorker.com/books/page-turner/white-until-proven-black-imagining-race-in-hunger-games>.

⁸⁶ Emphasis in the original. Planned Parenthood, *What Every Man Should Know about Birth Control*, New York, Planned Parenthood Federation, 1969. Found in “Resource Material, Miscellaneous Pamphlets,” M-7265-355, *CBCA Collection GA*.

planning as part of a healthy marriage and economically responsible parenthood. The pamphlet explained that well-planned pregnancies allowed couples to save up enough money before they become parents, which, in turn, allowed couples to have a “happier, more relaxed sex life.”⁸⁷ Similarly, a 1972 pamphlet on “Family Planning” from Health and Welfare Canada encouraged married couples to use birth control as a means to space out births and responsibly choose how many children to have.⁸⁸ The absence of bodies of colour, and the consistent emphasis that couples ought to be married and financially secure before having children show that racist and classist mid-century discourse about contraception persisted into the 1970s. Despite the emergence of new birth control technologies and decriminalization, much of the self-education literature signaled that people



(Left)

Image 3.3: Cover from *You've Changed the Combination*, Denver: Rocky Mountain Planned Parenthood, 1973.



(Right)

Image 3.4: Middle class, white couple kicking the stork away. From *The How-Not-To Book: Julius Schmid's Guide to Modern Birth Control Methods*, 1970, pg. 2.

⁸⁷ Emphasis in the original. Planned Parenthood, *What Every Man Should Know about Birth Control*, New York, Planned Parenthood Federation, 1969. Found in “Resource Material, Miscellaneous Pamphlets,” M-7265-355, *CBCA Collection GA*.

⁸⁸ Health and Welfare Canada, pamphlet “Family Planning,” 1972. In “Resource Material: Miscellaneous Pamphlets on women’s health, birth control, etc. 1960s-1990s,” M-7265-355, *CBCA Collection GA*.

from the working class, people of colour, unmarried youth – young women especially – were not included in the narrow definitions of sexual and reproductive liberation.

Much of the literature within the birth control centre libraries did not adequately address the realities unmarried youth faced as contraceptive users because it represented contraceptive consumers as respectable White middle-class adults. For example, *The How Not to Book*, produced and distributed by Julius Schmid condom manufacturer, follows the narrative of a smartly dressed couple as they learn about birth control methods. On the second page of the booklet, a man wearing a suit and tie kicks away a stork while his partner, a woman in a dress and heels, stands by his side (see image 3.4 above).⁸⁹ The way the couple is dressed, and even the way their hair is styled, suggests that they are members of the middle class. Both partners were drawn with short, clean cut hair and the man was depicted wearing a suit and tie, none of which signified any of youth “anti-fashion” trends of the early 1970s, such as unisex blues jeans and long hair.⁹⁰ In southern Alberta, youth noticed the distinction between Julius Schmid’s contraceptive ads and their own calls for reproductive and sexual freedom. In 1978, *Meliorist* journalists at the University of Lethbridge ran an “ad parody” of the Julius Schmid booklet and corresponding ads, satirizing the middle class respectability within the Julius Schmidt ads about sex and contraception. In their March 31, 1978 edition of the newspaper the *Meliorist* writers published a satirical ad for “Jules Schit.” The ad contained advice such as “for best results, copulation should proceed at a distance of at least 30 feet.” And descriptions of “rubber prophylactics” that while the product “prevented normal pregnancies, has led to a rash of mutant rubber plants.”⁹¹ These Lethbridge university youth did not see their own needs and realities reflected in the Julius Schmid literature and decided to poke fun at the middle class respectability of the *How Not To* couple.

Some new 1970s self-educational literature was created specifically for unmarried young women after decriminalization in 1969, but many of these pamphlets and booklets presented young unmarried women with the ultimatum to use contraceptives or stay abstinent in order to avoid

⁸⁹ *The How-Not-To Book: Julius Schmid's Guide to Modern Birth Control Methods*, 1970, pg. 2. Found in “Resource Material: Miscellaneous Pamphlets” M-7265-355, *CBCA Collection* GA.

⁹⁰ Jochen Strähle, ed. *Fashion & Music*, (Singapore: Springer, 2018), 38; Daniel Milford-Cottam, *Fashion in the 1970s*, (London: Bloomsbury Publishing, 2018), 15, 35-37; Valerie Steele, “Anti-Fashion: The 1970s,” *Fashion Theory* vol. 1 no.3 (1997), 279-295.

⁹¹ *The Meliorist*, “Jules Schit would like to sweet talk you into putting your money where your mouth is,” March 31, 1978, pg. 4; *The Meliorist*, “Meliorist wins Schmid/Schit Award,” and “Julius Schmid: Jules Schit Award ‘Alberta Crude,’” October 6, 1978, pg. 7.

unwanted pregnancy. A 1973 Planned Parenthood pamphlet titled, *Stop Kidding Yourself* (image 3.6 below), told young single women to “grow up” and choose between contraceptives or abstinence:

There are only two kinds of honest girls: Girls with the courage of their convictions to have responsible sex and girls with the courage to stay a virgin until they're married. Being the first kind means that you use contraception. ... And if you're too embarrassed, too scared, too ambivalent to decide which kind of girl you are -- you'd better go back home and stay there until you grow up.
STOP KIDDING YOURSELF, BABY. YOU CAN'T HAVE IT BOTH WAYS.⁹²

Similarly, other pamphlets presented dichotomies between “good girls” that used contraception or stayed abstinent and “bad girls” who did neither.⁹³ Another 1973 Planned Parenthood pamphlet, *You Don't Want to be a Sex Object*, (image 3.5 below), told young women not to “play it both ways.” The pamphlet directed young women to explore their sexuality while resisting the urge to conform to patriarchal expectations of women. When it came to contraceptive use, however, *How Not to be a Sex Object* presented young unmarried women's sexuality as a dichotomous choice between “old-fashioned” or liberated: “If you have decided to be the old-fashioned girl, ... OK, be it. Be it all the time. ... If you've decided you don't want all that manipulation, ... then be something else. All the time. Consistently.”⁹⁴ The barriers to accessible reproductive and sexual health services that southern Alberta youth described in their letters to the LBCIC and CBCA were not represented in these pamphlets. The authors of the Planned Parenthood pamphlets assumed that youth had access to contraceptive prescriptions in their communities. Rather than educating youth about how to access contraception *Stop Kidding Yourself* and *So You Don't Want to be a Sex Object* accused young women of being irresponsible, ignorant, or stubborn.⁹⁵ In doing so, both pamphlets perpetuated stigma about irresponsible premarital sex and teenage use of contraception.

⁹² (Capitalization from original). Rocky Mountain Planned Parenthood, *Stop Kidding Yourself*, Denver, 1973, found in “Resource Material: Miscellaneous Pamphlets on women's health, birth control, etc. 1960s-1990s,” M-7265-355, *CBCA Collection* GA.

⁹³ See, for example: Rocky Mountain Planned Parenthood, *You Changed the Combination*, (Denver: Rocky Mountain Planned Parenthood, 1974), 3. Found in “Resource Material, Miscellaneous Pamphlets,” M-7265-355, *CBCA Collection* GA.

⁹⁴ Rocky Mountain Planned Parenthood, *So You Don't Want to be a Sex Object*, (Denver: Rocky Mountain Planned Parenthood, 1973), 12. Found in “Resource Material, Miscellaneous Pamphlets,” M-7265-355, *CBCA Collection* GA.

⁹⁵ (Capitalization from original). Rocky Mountain Planned Parenthood, *Stop Kidding Yourself*, Denver, 1973. In “Resource Material: Miscellaneous Pamphlets on women's health, birth control, etc. 1960s-1990s,” M-7265-355, *CBCA Collection* GA.



(Left)

Image 3.5: Cover of *So You Don't Want to be a Sex Object*, Denver: Rocky Mountain Planned Parenthood, 1973.

(Right)

Image 3.6: Cover of *Stop Kidding Yourself!*, Denver: Rocky Mountain Planned Parenthood, 1973.

The stigma surrounding premarital sex and young women's contraceptive use continued to prevent youth from accessing birth control in the 1970s but did not stop unmarried youth from having sex. Teens in the 1970s did not have to worry about the legality of contraception unlike youth in previous decades. Despite decriminalisation and local birth control centre activists' attempts to destigmatize contraception, the idea that "good" middle class young women did not go on "the Pill" persisted well into the 1970s. Some southern Alberta teens continued to avoid contraceptives because of the stigma perpetuated within and outside of the self-education literature. A cartoon from the LBCIC's January 1977 newsletter underscored that stigma about young women's contraceptive use did not prevent pregnancy outside of marriage. In the cartoon (image 3.7 below) a doctor sits at a desk, with a troubled expression and points to a big bottle labeled "The Pill." An obviously pregnant young woman stands in front of the doctor and says, "But I'm not that kind of

girl.”⁹⁶ The cartoon illuminates that the stigma around which “kind of girls” used contraceptives was so significant that even a pregnant young woman (assumed to be unwanted by the context of the cartoon) does not want to take “the Pill.” Similarly, the southern Alberta Indigenous newspaper, the *Kainai News*, featured a cartoon that depicted a teenage man approaching an older Indigenous man with an obviously pregnant young woman in the background (see image 3.8 below). The annoyed older man says, “Tell you about the birds and the bees!!! After the Sting?” The cartoon was published alongside an article titled “Teenage Marriages” in February 1978, advocating for better communication between parents and teenagers about sex, pregnancy, contraception, and relationships.⁹⁷ Discourse about teenage sexuality taught young women that both accessing contraception and becoming pregnant outside of marriage made them “promiscuous,” which threatened their chance of marriage in the future.⁹⁸ The LBCIC and *Kainai News* cartoons, both produced in southern Alberta and published within a year of each other, underscored that this unrealistic ultimatum for youth’s sexual and contraceptive choices led to higher rates of teenage pregnancies.

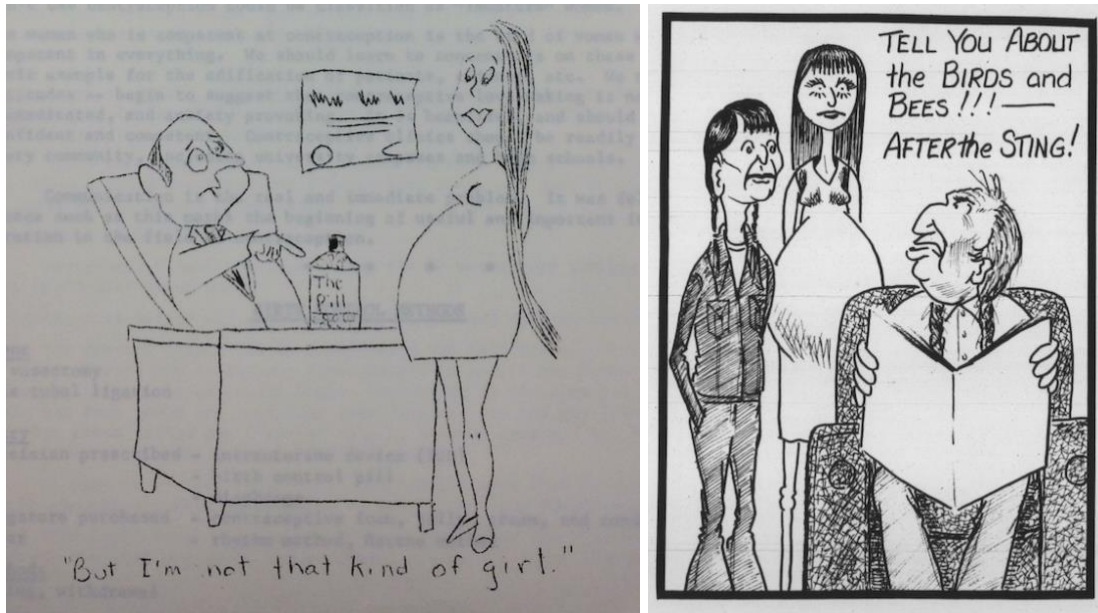
While the women at the birth control centres criticized the unrealistic treatment of youth’s sexuality in newsletters, the literature in their libraries perpetuated the stigma around teenage women’s sexuality and contraceptive use. Whether designed for young single women or married couples, much of the 1970s literature on contraception identified White, heterosexual, and middle-class married couples as *the* responsible contraceptive consumers. Much of the general literature on family planning and contraception from the late 1950s to the early 1970s were designed to teach married men and women how to maintain a healthy sex life and happy marriage, all while saving money for a planned baby. Following decriminalization more sex and contraceptive educational pamphlets and booklets were designed for youth. But these texts for youth perpetuated narratives about naïve teens, who were not responsible enough to have sex because they were not ready for parenthood. This discourse about youth’s sexuality presented the educational teams at the CBCA and LBCIC with a catch-twenty-two when it came to their self-education initiatives. On the one hand, self-education initiatives were vital to making contraceptive and sex education accessible to many of their teenage and rural clients. On the other hand, the literature available often perpetuated

⁹⁶ “But I’m not that kind of girl” cartoon, the LBCIC’s Newsletter, January 1, 1977, pg. 6, found in “Resource material Newsletters Lethbridge Birth Control and Information Centre, Newsletter 1974-1977,” M-7265-394, *CBCA Collection* GA.

⁹⁷ *Kainai News*, “Teenage Marriages,” February 2, 1978, pg. 8.

⁹⁸ Ehrlich, *Regulating Desire*, 19.

the stigma around sex and contraception outside of marriage that the birth control centre activists resisted.



(Left)

Image 3.7: "But I'm not that kind of girl," Cartoon from the LBCIC's Newsletter, January 1, 1977, pg. 6.

(Right)

Image 3.8: Everett Soop, "Tell you about the birds and the bees!!! After the sting?" in *Kainai News*,

**"We have found ourselves continually hampered by the lack of 'good' instructional media:"⁹⁹
Tailored Self-Educational Content to Normalize Health Topics**

Educational staff and volunteers at both birth control centres eventually created their own self-education materials in response to the limited – and sometimes problematic – self-education resources within their lending libraries. As early as 1972 the CBCA educational coordinators flagged the limits of the self-education literature as a significant barrier to their work and submitted a grant proposal to fund the development of educational media. At the beginning of the grant application they wrote: "we have found ourselves continually hampered by the lack of 'good' instructional

⁹⁹ Peer Education, Community Outreach Education," pg. 3, c. 1972, in "Educational Outreach 1978," M-7265-101, *CBCA Collection* GA.

media.”¹⁰⁰ In the same document, the CBCA staff claimed that only one existing booklet (*How to Take the Worry out of Being Close*) “has proven to have the combination of characteristics required: attractive design; readable prose and layout of figures; intelligent and thorough, but not too complicated review of contraception, abortion, sterilization; discussion of sex-related diseases and infections (VD, vaginal infections, etc.) in a clear, simple, and non-moralizing manner.”¹⁰¹ CBCA and LBCIC staff used their newsletters and alternative local student news media to promote and distribute sexual and reproductive health literature that was informative, “non-moralizing,” and offered a women’s health perspective on the topics. In line with their feminist model of health CBCA educational coordinators frequently tailored their self-educational programs to community needs. By 1972, the educational team at the CBCA had already received dozens of letters requesting self-educational literature materials and were surveying clients about their sex and contraceptive educational needs.¹⁰² With this experiences and research behind them, the women running the CBCA felt that they had “a clear idea of what is needed”¹⁰³ when it came to self-educational media in their communities. Eventually, both centres publish their own educational material in their respective newsletters. Creating “good” educational literature was not the only hurdle the CBCA and LBCIC educational teams faced in their self-educational programming, however. As the decade went on, women’s health concerns expanded beyond reproductive and sexual health matters to included breast and cervical cancers. The self-exam became a significant aspect of women’s health education in the mid-1970s onward in response to women’s growing concerns about cancer. The hands-on nature of self-breast-exams were not easily captured within written self-education materials, so activists at the CBCA and LBCIC adjusted their self-educational techniques to include, diagrams, remote educational retreats, and television programming. By using their own newsletters, creating

¹⁰⁰ Peer Education, Community Outreach Education,” pg. 3, c. 1972, in “Educational Outreach 1978,” M-7265-101, *CBCA Collection* GA.

¹⁰¹ Emphasis in the original. Peer Education, Community Outreach Education,” pg. 3, c. 1972, in “Educational Outreach 1978,” M-7265-101, *CBCA Collection* GA.

¹⁰² “Questionnaire Completed Clients 1976,” M-7265-336; “Notebook Kept by Martha Weir,” M-7265-12; “Questionnaire Samples,” M-7265-334; “Questionnaire Completed Clients 1976,” M-7265-336; “Questionnaires Completed Clients 1977-1978,” M-7265-337; “Questionnaires Completed Physicians [ca.1972],” M-7265-338; “Questionnaires Completed Physicians 1972,” M-7265-339; “Questionnaires Completed Physicians 1978-1979,” M-7265-343; “Questionnaires Completed Volunteers 1975-1967,” M-7265-345; “Questionnaires Completed Volunteers 1978,” M-7265-346; “Questionnaires Completed Physicians 1972,” M-7265-338; *CBCA Collection* GA.

¹⁰³ Peer Education, Community Outreach Education,” pg. 3, c. 1972, in “Educational Outreach 1978,” M-7265-101, *CBCA Collection* GA.

their own content, and adapting to emergent women's health concerns, the women running the birth control centres tailored the educational information within the newsletters to their clients' health concerns.

Following the claim that they “could not possibly turn out anything worse than what is generally available”¹⁰⁴ in their 1972 grant application, the CBCA educational team launched two educational videos and an information pamphlet between 1973 and 1974. The educational team at the Association asserted that much of the available sex education literature was inadequate (in scope and tone), but they claimed that most audio-visual resources on human sexuality and reproductive health were even worse. In their 1972 grant application they described the existing films and slides as “expensive and poor [inadequate].”¹⁰⁵ Most of the films available focused on contraception as a form of family planning for married couples or relied on scare tactics when discussing VD, which made it difficult to talk about contraception and sex with teens: “most teenagers simply jeer at marriage-oriented films on sexuality and ‘planning your family’ and at the moral attitude of films on VD.”¹⁰⁶ The grant was successful and in 1973 the CBCA launched an educational video, “VD and You.”¹⁰⁷ The following year, the Association debuted another video and corresponding information pamphlet titled, “Abortion: An Objective View.”¹⁰⁸ By creating their own sexual and reproductive health educational media in the early 1970s, the CBCA's educational team challenged messages about sexuality and contraception from significant organizations like Planned Parenthood and National Health and Welfare. Even as the birth control centre staff and volunteer created new resources, they continued to explore new ways to provide self-education to their clients in the region.

¹⁰⁴ Peer Education, Community Outreach Education,” pg. 3, c. 1972, in “Educational Outreach 1978,” M-7265-101, *CBCA Collection* GA.

¹⁰⁵ Peer Education, Community Outreach Education,” pg. 3, c. 1972, in “Educational Outreach 1978,” M-7265-101, *CBCA Collection* GA.

¹⁰⁶ Peer Education, Community Outreach Education,” pg. 3, c. 1972, in “Educational Outreach 1978,” M-7265-101, *CBCA Collection* GA.

¹⁰⁷ See “Education Outreach: Video Produced by CBCA, “Abortion: An Objective View” 1973-1974,” M-7265-119; and “Education Outreach: Video Produced by the CBCA, “VD and You” 1973, M-7265-118; “Description of the CBCA Birth Control Education,” c. 1973, pg. 1-2, in “Education Outreach 1968-1973,” M-7265-99, *CBCA Collection* GA.

¹⁰⁸ See “Education Outreach: Video Produced by CBCA, “Abortion: An Objective View” 1973-1974,” M-7265-119; and “Education Outreach: Video Produced by the CBCA, “VD and You” 1973, M-7265-118; “Description of the CBCA Birth Control Education,” c. 1973, pg. 1-2, in “Education Outreach 1968-1973,” M-7265-99, *CBCA Collection* GA.

During the decade, both the CBCA and LBCIC educational teams increasingly utilized their newsletters¹⁰⁹ and alternative local student news media to promote and distribute better educational material for a variety of clients. While the women running the birth control centres had little control over the commentary within some educational literature, they used their newsletters and their alliance with local student journalists to recommend certain self-educational resources to their clients. They published reviews and recommendations within their newsletters to let women across the region know which pamphlets were worth their clients' postage and time.¹¹⁰ By 1974, educational teams at the LBCIC and CBCA also selected excerpts from specific booklets and pamphlets to share in their newsletters and in local student newspapers. The October 1974 edition of the LBCIC's *Unity* republished several short articles under the headline "prevent ←→ educate."¹¹¹ These articles included, "myths and attitudes surrounding rape," "Affect Change Pre- and Post-abortion" (a reprint of an abstract by Linda McHarg), as well as "methods of birth control."¹¹² Similarly, between 1967 and 1979 the *Meliorist* (University of Lethbridge), the *Gauntlet* (University of Calgary), the *Endeavour* (Lethbridge Community College), and the *Reflector* (Mount Royal College) published hundreds of articles and educational excerpts about reproduction, abortion, birth control, sex, sexuality and topics women's health that aligned with the local birth control centres recommended readings.¹¹³ The two university student newspapers in particular, the *Meliorist* and the *Gauntlet*, reprinted excerpts from self-education literature recommended by the birth control centers, like

¹⁰⁹ The CBCA's newsletter first appears in 1971 under the lackluster name, "Newsletter," but is renamed "Con(tra)cepts" from 1978 to 1979. See examples of the CBCA newsletters in "Newsletters, 1971-1974," M-7265-240; "Newsletters, 1975-1977" M-7265-241; and "Newsletters, 1978-1979," M-7265-242, *CBCA Collection GA*.

The LBCIC published the first edition of their newsletter *Unity* in September of 1974. By 1976 they changed the newsletter and opted for the less dazzling name of the "Birth Control and Information Centre Newsletter." See several editions of the LBCIC newsletters, *LBCIC, 1973-1975 GMA*.

¹¹⁰ Nearly every newsletter from the CBCA references literature or offers a book review of new self-educational material. See CBCA and LBCIC newsletters: "Literature Review," *Unity*, October 25, 1974, vol. 1, no. 2. pg. 3, *LBCIC, 1973-1975 GMA*; "Literature Review," *Unity*, September 27, 1974, vol. 1, no. 1, pg. 5, "Newsletters (CBCA 1971-1974)," M-7265-240, *CBCA Collection GA*.

¹¹¹ *Unity*, vol. 1, no. 2, October 25, 1974, pg. 2, *LBCIC, 1973-1975 GMA*.

¹¹² *Unity*, vol. 1, no. 2, October 25, 1974, pg. 2, 6, *LBCIC, 1973-1975 GMA*.

¹¹³ Patton, "We were having conversations that weren't comfortable for anybody, but we were feisty," 2015, 113-115.

Planned Parenthood's *You've Changed the Combination*, and *The Joy of Sex*.¹¹⁴ Building on existing alliances with local student activists and their growing client base in the region the women at the LBCIC and CBCA used alternative media sources to promote and distribute their recommended self-education literature and facilitate better self-education for their clients. Like the self-education pamphlets themselves, newsletters and newspaper clippings were easily hidden inside school work or in a purse so it provided the anonymity and privacy many birth control clients required. The newsletters and student newspaper articles effectively cut out much of the moralizing or tone-deaf messages about premarital sexuality and contraceptive use because the birth control centres' education coordinators featured literature that normalized sex, contraceptive use, and abortion.

As birth control centre staff worked to destigmatize reproductive and sexual health by promoting certain texts, they increasingly utilized feminist pedagogy of consciousness-raising¹¹⁵ in their newsletters. Over the course of the decade, the LBCIC and CBCA newsletters shared local women's health experiences, often expressed through poetry. A poem about unwanted pregnancy and abortion by local Calgarian, M. Tanton was featured in the CBCA's February 1973 newsletter:

An Unwanted Pregnancy

A what?	An Explanation
A desperation	A Revelation
A condemnation	A purification
A vilification	A beautification
	An exhilaration
	Emancipation
	An abortion
	-M. Tanton ¹¹⁶

Tanton's poem recounted the reactions to a woman's, perhaps Tanton's, unwanted pregnancy and abortion. Tanton underscored both external judgments about unplanned pregnancies and abortion

¹¹⁴ See for example: The *Meliorist*, reprint of Rocky Mountain planned Parenthood's "You've Changed the Combination," January 21, 1975; the *Gauntlet*, "The Joy of Sex," February 15, 1974. Also see: Patton, "We were having conversations that weren't comfortable for anybody, but we were feisty," 2015, 113-115.

¹¹⁵ Amy Tobin, 'I'll Show You Mine, If You Show Me Yours: Collaboration, Consciousness-Raising and Feminist-Influenced Art in the 1970s', in *Tate Papers*, no.25, (Spring 2016); Michelle Moravec, "Toward a History of Feminism, Art, and Social Movements in the United States," *Frontiers: A Journal of Women Studies* vol.33, no. 2 (2012): 22-54; Brain Norman, "The Consciousness-Raising Document, Feminist Anthologies, and Black Women in 'Sisterhood Is Powerful,'" *Frontiers: A Journal of Women Studies* vol.27, no. 3 (2006): 38-64.

¹¹⁶ M. Tanton, "An Unwanted Pregnancy," in CBCA Newsletter, February 23, 1973, pg. 4. Found in "Newsletters (CBCA 1971-1974)," M-7265-240, *CBCA Collection* GA.

alongside individual feelings of liberation. In line with feminist consciousness-raising methods, the poem personalized the topic of unwanted pregnancy and abortion. Similarly, the poem below (c.1977), was shared and distributed by the CBCA jokingly outlined a variety of birth control methods and contraceptive negotiations between partners:

There was once a gal who used foam,
But was weary to use it alone
She said to her mate
While out on a date
A SAFE¹¹⁷ - or you'll have to go home!!

A woman who'd chosen a coil
Through heavy menstruation did toil,
She changed to a T,
And to her great glee,
Those noxious effects she did foil.

Said a gent in a moment of doubt.
Oh M'Gowd 'Is it time to pull out?'
Said the lady below
Oh no dear don't go
Now she suffers a nausea bout.

There once was a man named Bill
Whose girlfriend was put on the pill
She forgot to take it
They continue to MAKE it
Her abdomen resembles a hill.¹¹⁸

The author and distributor of this poem is unknown, but the creative, and controversial, poem underlined common contraceptive mistakes and encouraged sexual partners to avoid such mistakes and unwanted pregnancies. These poems encouraged readers to learn about abortion and contraception from a place of empathy or relatability. Cleverly, featuring women's experiences with sex and reproductive health choices allowed readers to see themselves in the pages of the birth control centres' newsletters. Clients who related to pregnancy scares after a failed attempt at the withdrawal method, or who had a terrible experience with a contraceptive coil, or who faced a desperate situation with an unwanted pregnancy might not feel so alone once they read about someone else's experiences. Unlike some of the self-education literature that encouraged married

¹¹⁷ Safe was used as slang for condom.

¹¹⁸ Untitled poem on Contraceptives, c. 1977, in "Alberta Social Services and Community Health," M-7265-24, *CBCA Collection GA*.

couples to plan a family and told teens that they must prevent pregnancy by inaccessible contraception or abstinence, these poems normalized common contraceptive mistakes along with feelings of relief when accessing abortion.

By 1974, the birth control centres' staff identified their newsletters as a significant platform to publish their own self-educational material and combat stigma around reproductive and sexual health topics. In the November 1974 edition of their newsletter the CBCA staff emphasized the importance of women's health self-help and -education: "Women are becoming increasingly involved in their own healthcare, starting self-help clinics, dialoguing with their physicians, advocating patients right, etc."¹¹⁹ From 1974 onwards, staff and volunteers at both birth control centres published their own articles about rape crisis centres, birth control methods, abortion, and women's health.¹²⁰ Some of these articles provided scientific information about how certain contraceptive technologies worked. Both the LBCIC and CBCA newsletters featured information about IUDs in 1975 and 1976, respectively, explaining the efficacy of the IUD was, how medical professionals inserted the device, how it prevented conception, as well as the "side effects or disadvantages."¹²¹ Other articles from the birth control centers staff used this scientific information to dispel myths and stigma about sexual health concerns. In the April edition of *Unity* (LBCIC newsletter), for instance, an article about VD contested common misconceptions about how people contracted VD: "Venereal diseases are spread by sexual intercourse between persons of the same and opposite sex. As V.D. germs soon die away from the warm moist protection of the body, they are not spread via toilet seats, door-knobs, hands, money, nor do they have anything to do with lifting or straining."¹²² The article's discussion of VD underscore the need for safe sex practices, but also encourages readers not to be afraid of people who happen to have VD. Birth control centre educational teams tailored their newsletter content to address emergent reproductive and women's

¹¹⁹ CBCA Newsletter, November 27, 1974, pg. 5, in "Newsletters (CBCA) 1971-1974," M-7265-240, *CBCA Collection* GA.

¹²⁰ See, for example, "The Abortion Controversy – Coming to a Head?" in CBCA Newsletter, October 10, 1974, pg. 2-4; "Rape Crisis Centre" in the CBCA Newsletter, November 8, 1973, pg. 3; "Rape Crisis Centre" in the CBCA Newsletter, March 23, 1974, pg. 4; "Men & Contraception," CBCA Newsletter, November 27, 1974, pg. 4-5; "Women and health," CBCA Newsletter, November 27, 1974, pg. 5-6; "Progestasert I.U.D.," CBCA Newsletter, July 28, 1976, pg. 5. Found in "Newsletters (CBCA 1971-1974)," M-7265-240, *CBCA Collection* GA.

See, for example, "I.U.D." *Unity* vol.1 no.8, April 30, 1975, pg. 5; "Venereal Disease: How do you get VD?" *Unity* vol.1 no.8, April 30, 1975, pg. 4, *LBCIC, 1973-1975* GMA.

¹²¹ "I.U.D.," *Unity* vol. 1 no. 8, April 30, 1975, pg. 5, *LBCIC, 1973-1975* GMA.

¹²² "Venereal Disease," *Unity*, vol. 1 no. 8, April 30, 1975, pg. 4, *LBCIC, 1973-1975* GMA.

health issues of the region. Some of the newsletter content represented broader women's health topics, like information about new IUDs, while other articles addressed specific sexual health myths that clients had inquired about at their local birth control centre, like misinformation about how VD is contracted. Either way, the birth control centres' staff created a self-education platform, built on scientific information and women's lived experiences, to promote sex, contraception, VD, and abortion as a normal part of women's reproductive and sexual lives.

In addition to the educational material on sex, birth control, and VD, intensifying concerns about women and cancer brought in depth discussions about breast cancer into the birth control centres' newsletters in the mid-1970s. Ovarian and breast cancer became significant topics of concerns in the women's health movement in the over the course of the decade. The CBCA and LBCIC staff used their newsletters to highlight important news and resources on breast cancer, such as the *Calgary Herald's* series on "a book by Dr. Philip Strax, Early Detection: Breast Cancer."¹²³ The educational teams at the birth control centers occasionally also published their own material about women and cancer in the mid-1970s. In April 1975 the LBCIC's *Unity* featured a two part discussion about breast cancer: "A Sane Look at Cancer" and "What about a Lump in the Breast."¹²⁴ This two part exposé about cancer took up half of the LBCIC's newsletter that month and described the most common types of cancers found in women (cervical, breast, intestine, skin), as well as detailed which methods were used to detect cancer, including the "pap test."¹²⁵ The amount of space dedicated to "A Sane Look at Cancer" and "What about a Lump in the Breast" signals that women's concerns about breast cancer was significant, both in the region and beyond, by 1974 and 1975. The mounting concerns about cancer solidified the topic of breast cancer as a major topic within CBCA and LBCIC educational programs throughout the second half of the decade.

The self-breast-exam became a significant part of the CBCA and LBCIC's self-education programming as concerns about cancer increased in the mid-1970s. Both LBCIC articles, "A Sane Look at Cancer" and "What about a Lump in the Breast," encouraged women to "visit [their] family doctor regularly for a physical examination," and to inform their doctors if they discover a lump. But "What About A lump in the Breast," also explained that "[u]nfortunately a great number of women

¹²³ CBCA Newsletter, October 10, 1974, pg. 4. Found in "Newsletters (CBCA 1971-1974)," M-7265-240, *CBCA Collection* GA.

¹²⁴ "A Sane look at Cancer," "What about a lump in the breast?" *Unity* vol. 1 no. 8, April 30, 1975, pg. 2-3, *LBCIC, 1973-1975* GMA.

¹²⁵ "A Sane look at Cancer," *Unity* vol. 1 no. 8, April 30, 1975, pg. 2, *LBCIC, 1973-1975* GMA.

are panic stricken at this initial discovery. Fearful of cancer and a radical mastectomy, they carry this secret for months, sometimes years, without discussing it with anyone, even their own doctor.”¹²⁶ Historian and biologist Ilana Lowy has shown that women often feared the invasive surgeries associated with a cancer diagnosis in the mid-twentieth century. Her monograph *Preventative Strikes: Women, Precancer, and Prophylactic Surgery* illuminated the emotional aftermath women felt after undergoing preventative surgeries like hysterectomies, ovariectomies, and mastectomies, which often invoked “an extreme sense of loss in terms of sexuality and femininity.”¹²⁷ The fear described in “What About A Lump in the Breast” was not just a fear of cancer itself, but women’s fear of losing their femininity and sexuality because of a mastectomy. The birth control centres promoted the self-breast-exam and encouraged women to take their health concern into their own hands. By 1974, Pauline Hoskin, then director of the centre, included breast exams into the purview of the LBCIC services.¹²⁸ And by 1975, both the CBCA and LBCIC newsletters encouraged women to “learn how to examine your breasts every month.”¹²⁹ The educators at the birth control centres encouraged women to face their fears about breast cancer by taking control over their own breast-exams and embracing their autonomy when it came to their health.

The hands on approach of the self-breast-exam presented a challenge for the women running the CBCA and LBCIC self-education programming, which relied heavily on written resources. The self-breast-exam importantly fortified women’s autonomy and expertise about their own bodies, but the actual process of the self-exam was not easily captured in written descriptions. Women working at birth control centres in Alberta began to publish drawn diagrams of a self-breast-exam in their self-education literature in the mid-1970s. The Edmonton Family Planning Service offered instructions for a self-breast-exam, complete with diagrams, in their 1973 publication *Birth Control Information: Services, Health, Body, VD*.¹³⁰ The women running the LBCIC similarly included written instructions and a hand-drawn diagram (image 3.9 below) of a self-breast-exam in

¹²⁶ “What About a Lump in the Breast,” *Unity*, vol.1 no. 8, April 30, 1975, pg. 3, *LBCIC, 1973-1975 GMA*.

¹²⁷ Ilana Lowy, *Preventative Strikes: Women, Precancer, and Prophylactic Surgery*, (Baltimore: Johns Hopkins University Press, 2010), 219.

¹²⁸ Pauline Hoskin, Cover letter for director position at the Birth Control and Information Centre, July 2, 1974, *LBCIC, 1973-1975 GMA*.

¹²⁹ “A Sane look at Cancer,” *Unity* vol. 1 no. 8, April 30, 1975, pg. 2, *LBCIC, 1973-1975 GMA*.

¹³⁰ Nancy Wood and Joyce Chorney, *Birth Control Information: Services, Health, Body, VD*, Edmonton: Edmonton Family Planning Service, 1973. In “Resource Material: Miscellaneous Pamphlets on women’s health, birth control, etc. 1960s-1990s,” M-7265-355, *CBCA Collection GA*.

their newsletter in 1975.¹³¹ The women running the CBCA and LBCIC found themselves in another self-education dilemma, as the demand for self-exam instruction increased. The birth control centres' staff realized that they had to adapt their self-education methods beyond written resources to adequately educate women about the self-exam. By 1976, the number of articles written for self-education purposes declined as both centres shifted their focus to the hands-on approach of self-examination as a significant focus of women reclaiming autonomy over their health. The women running the birth control centres recognized the importance of self-exams but the new hands-on approach to education did not guarantee privacy in the same way that self-educational literature did. Learning self-exam techniques properly required attendance at public workshops run by the birth control centres' staff. And the public nature of these events prevented some unmarried women's participation. In the second half of the decade the LBCIC and CBCA staff and volunteers found new, creative ways to provide their clients with comprehensive self-education during the era of the self-exam.

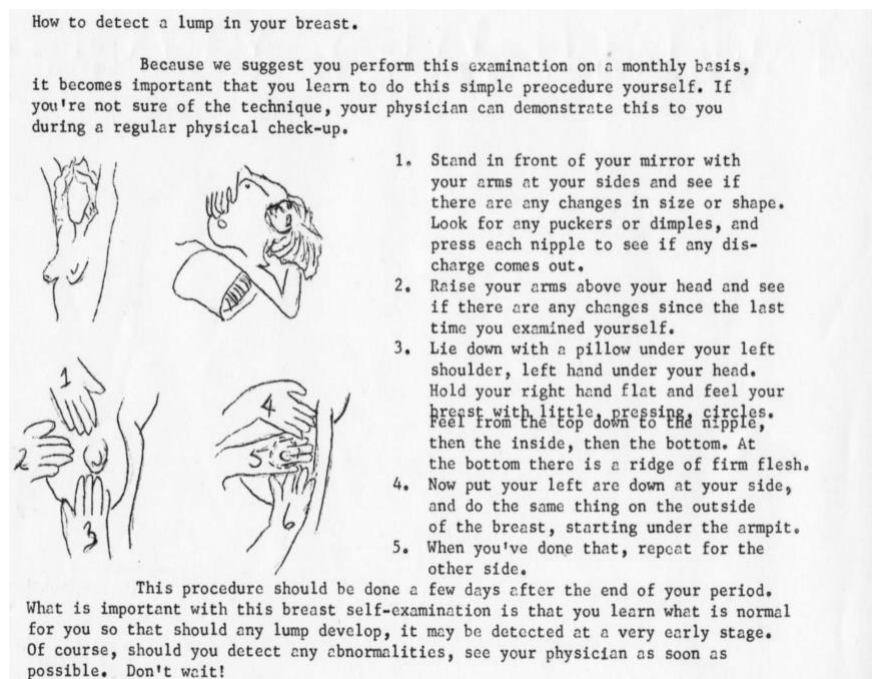


Image 3.9: Written and drawn instructions of how to conduct a self-breast-exam. Excerpt from "How to detect a lump in your breast," in the LBCIC's newsletter *Unity*, April 30, 1975, vol.1 no.8, page 3.

¹³¹ "What About a Lump in the Breast," *Unity*, vol.1 no. 8, April 30, 1975, pg. 3, LBCIC, 1973-1975 GMA.

Educational teams at the LBCIC and CBCA necessarily explored new avenues or educational programming that taught women how to take control of their own healthcare and maintained some anonymity for their clients. Both the LBCIC and CBCA offered tailored workshops about breast cancer and women's health that offered some anonymity. As early as 1974, the LBCIC hosted film viewings for "Our Bodies, Ourselves Film-Women and Cancer" at the public library.¹³² Workshops in general did not offer as much anonymity as a booklet that clients read within the privacy of their own homes. But the public library was a more neutral space than the LBCIC, and unmarried people did not worry about being caught going into the public library the same way they worried about being seen at the birth control centre. The CBCA also hosted workshops for clients to learn about women's health and self-exams. Between 1976 and 1978 the Association offered developed two women's health workshops: the "Women's Health Weekend" and the "Well Woman Seminars." The self-breast-exam was featured prominently in the Women's Health Weekend 1976 program as an entire half-day session.¹³³ The flyer for the event even included an image of a southern Albertan woman learning how to conduct a breast exam (image 2.1 on page 82).¹³⁴ The self-exam was similarly featured in two panels at the CBCA's Well Woman Seminar in 1978: a morning panel, "Rights and Responsibilities of Health Institutions to Support Health of Self" and an afternoon panel, "Rights and Responsibilities of Individuals to Support Health of Self."¹³⁵ Building off a similar program offered by the Vancouver Women's Health Collectives' "Women's Self-Help Clinic" (VWHC), both panels underscored self-exams as an essential tool for women's liberated health. Resource material for the seminar encouraged clients use the self-breast-exam "to take the care of their bodies into their own hands."¹³⁶ Like the LBCIC's film viewing, the CBCA's Women's Health Weekend and Well Woman Seminars were offered outside of the Association's walls. The Well Woman Seminar was held at the University of Calgary, which, like the Lethbridge public Library, put some clients at more at ease than attending a workshop at the association itself. The 1976 Women's

¹³² Advertisement for Media Van films and workshops in June 1974, in *Up* vol. 1 no. 2, June 10, 1974, pg. 5, HQ 1480.L47.U6, UOWA.

¹³³ Women's Health Weekend Agenda found in "Workshops Women's Health Weekend 1976," M-7265-458, *CBCA Collection GA*.

¹³⁴ Advertising flyer for the CBCA's Women's Health Weekend in 1976, found in "Workshops – Women's Health Weekend 1976," M-7265-458, *CBCA Collection GA*.

¹³⁵ Program for the Well-Women Seminar 1978 in "Workshops: Well-Woman Seminar 1977-1978," M-7265-457, *CBCA Collection GA*.

¹³⁶ The Vancouver Women's Health Collective "Women's Self-Help Clinic" in "Workshops: Well-Woman Seminar 1977-1978," M-7265-457, *CBCA Collection GA*.

Health Weekend was held outside of the city at the Silver Creek Guest Ranch in Water Valley, Alberta.¹³⁷ The remote location of the Women's Health Weekend offered clients much more anonymity compared to the many other workshops offered by the CBCA and LBCIC in the 1970s. But, participants also needed to pay the thirty dollar registration fee,¹³⁸ have access to transportation, and a solid excuse to explain an entire weekend away from home. Educators at the CBCA and the LBCIC experimented with workshops that provided clients some anonymity while still offering important instruction about self-breast-exams throughout the second half of the decade. Holding self-help and self-exam workshops in neutral and out-of-town locations offered slightly more anonymity than events at the birth control centres themselves but were only offered for a few women at a time. Despite the birth control centre activists' best efforts, workshops still lacked some of the privacy and wider accessibility that made self-education programs effective.

In the late 1970s the women running the CBCA embraced local broadcast television as a new self-education platform in order to reach a wide audience and offer clients more anonymity. In 1977 the CBCA worked with the Calgary Community Antenna Television (CATV) station to produce a five-episode TV series, titled *Our Bodies, Our Sexuality*, that appeared on local cable, channel ten.¹³⁹ The series included five episodes: "Anatomy, Physiology, and the Human Sexual Response," "Pregnancy and Childbirth," "Birth Control and Abortion," "Subfertility," and "Women's Health." The CBCA educational team envisioned the television series as a tool to provide self-education and ensure anonymity for clients who accessed the series from the privacy of their own homes. Given that sixty percent of Canadians had a television in their home by 1975, the CBCA TV programs were available to many residents in Calgary and surrounding areas in the late 1970s.¹⁴⁰ And, the series was popular enough in 1977 to warrant a second season of the CBCA programming the following year. The Association's educational team produced another television series, titled *Fertile: To be, or Not to Be*, in 1978. This series had six episodes on the topics of "Anatomy and Physiology," "Parent-Infant Bonding," "High Risk Pregnancy," "Subfertility,"

¹³⁷ Advertising flyer for the CBCA's Women's Health Weekend in 1976, found in "Workshops – Women's Health Weekend 1976," M-7265-458, *CBCA Collection* GA.

¹³⁸ Advertising flyer for the CBCA's Women's Health Weekend in 1976, found in "Workshops – Women's Health Weekend 1976," M-7265-458, *CBCA Collection* GA.

¹³⁹ "Education outreach: TV Series Produced by the CBCA, "Our Bodies, Our Sexuality" 1977," M-7265-114; CBCA Newsletter, October 17, 1977, in "Newsletters, 1975-1977," M-7265-241, *CBCA Collection* GA.

¹⁴⁰ Robert E. Babe, "Cable Television," *The Canadian Encyclopedia*, last updated, December 16, 2013, <https://www.thecanadianencyclopedia.ca/en/article/cable-television>.

“Sterilization,” and “Birth Control.”¹⁴¹ Using the technology of local cable television, the women at the CBCA provided “clear, simple, and non-moralizing”¹⁴² information about a variety of reproductive and sexual health topics, with visual instructions, to viewers across Calgary and area.

Like their other self-educational media, the two seasons of the CBCA TV program offered more than just facts about reproduction, contraception, and sexuality, and promoted women’s health liberation using consciousness raising tactics. Historian Valerie Korinek has exposed the significant regional impact of local activist television programming in her discussion of “Out TV” in Winnipeg during the early-1980s. Korinek argues that the activist TV program was integral to local queer community building and consciousness raising throughout its tenure.¹⁴³ The CBCA TV series, like “Out TV,” radically brought topics like sexuality and contraception into publicly televised conversations without requiring viewers to leave the privacy of their own homes. The title of the CBCA’s TV series directly referenced the Boston Women’s Health Collective’s *Our Bodies, Ourselves* but also employed the women’s health pedagogy promoted in the influential feminist women’s health text. While not the sole focus of the series, the episode on women’s health did address cancer and “some steps women themselves can take to improve their own healthcare.”¹⁴⁴ Feminists in southern Alberta utilized this platform in the late 1970s and well into the 1980s as a way to review important women’s liberation issues for a broad audience. Terri Forbis, for example, remembers she appeared on the Lethbridge local Alisha Rasmussen Show on a three-part series “all about sexuality” in the early 1980s.¹⁴⁵ Forbis identified the TV series as an essential step in bringing topics of sexual health out into the open.

From producing educational television series to mailing *How to Take the Worry out of Being Close* to local teens, the educational teams at the CBCA and the LBCIC increasingly tailored self-education material and provision to the regional needs of clients throughout the 1970s. Like the self-education literature, the birth control centres’ newsletters, and the women’s health workshops, the

¹⁴¹ “Education Outreach: TV Series produced by CBCA “Fertile: To be or not to be” 1978,” M-7265-115, *CBCA Collection* GA.

¹⁴² Emphasis in the original. Peer Education, Community Outreach Education,” pg. 3, c. 1972, in “Educational Outreach 1978,” M-7265-101, *CBCA Collection* GA.

¹⁴³ Valerie Korinek, “*Wilde Times*: Community and Organizational Development in Winnipeg, 1970-1985,” in *Prairie Fairies: A History of Queer Communities and People in Western Canada, 1930-1985*, (Toronto: University of Toronto Press, 2018), 147-152.

¹⁴⁴ “Our Bodies, Our Sexuality, Program 5,” in “Education outreach: TV Series Produced by the CBCA, “Our Bodies, Our Sexuality” 1977,” M-7265-114, *CBCA Collection* GA.

¹⁴⁵ TF interview, Jan. 24, 2013, transcript, GMA.

Association's television programs were not universally accessible to clients. Surveillance at home may have prevented teens from tuning into the CBCA's TV episode about contraception, just as broader social surveillance prevented them from asking the local pharmacist for condoms. And many clients living in remote areas did not have access to Calgary's local cable channel 10, just as they were not always able to travel to Calgary or Lethbridge to attend women's health workshops. The women running the birth control centres continually adapted their self-education approaches to provide widely accessible information that aligned with community health concerns. By the end of the 1970s, TV programs, literature shared covertly by mail, newsletters, and hands-on seminars remained significant parts of educational programming at the CBCA and LBCIC to accommodate client's wide ranging comfortability and accessibility issues.

Conclusion

Throughout the 1970s, women at the LBCIC and CBCA constantly adapted their educational approaches and tailored self-education materials as part of their feminist desire to destigmatize sexual health and encourage women to take control of their own healthcare. The educators at the birth control centers used self-education media to arm women with knowledge about their own bodies and encouraged women to use this knowledge as assertive decision makers in medical spaces. In doing so, the CBCA and LBCIC staff inextricably tied self-education about the female body, reproduction, and sexuality to broader goals of women's liberation. These same education teams wanted liberation for all, so they did not settle for existing educational literature that perpetuated stigma about premarital sexuality or hand drawn diagrams of the self-breast-exam. Instead, they created and adapted self-education programming to address inequitable access to sexual and reproductive health services and education in the region during the 1970s.

CHAPTER 4: THE STRUGGLES OF SISTERHOOD: DISTANCE, DIFFERENCE, & DIVERSITY IN 1970s BIRTH CONTROL CENTRE OUTREACH EDUCATION

Therefore, the purpose of this clinic is to simplify and speed up the process of obtaining abortion, especially for out-of-town women.

CBCA Flyer about Abortion Services, c. 1972¹

With the next volunteer session, we hope to train native women to work within their community, increasing preventative education in the area of birth control, VD, and human sexuality.

LBCIC Annual Report 1973²

Until the school systems offer adequate family life education, we feel that a sexuality program for youth is a necessity.

LBCIC Annual Report 1973³

Upon the respective openings of the Association and the Centre, their educators developed educational programming about birth control, sexuality, and abortion. Based on clients' calls for good education and information services, educational outreach quickly became a significant part of both the CBCA and LBCIC mandates in the early 1970s.⁴ As the quotations above demonstrate, the CBCA and LBCIC educational teams drew attention to the need for specific programming for different communities as early as 1972 and 1973, respectively.⁵ The people who worked at the birth control centres were mostly White women living in urban centres.⁶ While some of them grew up in

¹ "Dear Friend" information on new abortion program c. 1971-1975 found in "History 1971-1975," M-7265-185, in the *Calgary Birth Control Association Collection* at the Glenbow Archive, Calgary, Alberta (CBCA Collection GA).

² Brief on the LBCIC to the Community Services Advisory Committee, GR1983-0133, box 1, file 5, found in *Lethbridge Birth Control Association* at the Provincial Archives of Alberta, Edmonton, Alberta (PAA).

³ Brief on the LBCIC to the Community Services Advisory Committee, GR1983-0133, box 1, file 5, found in *Lethbridge Birth Control Association* PAA.

⁴ "Lethbridge Birth Control and Information Centre Review of Budget and Programs for January 1, 1974, to November 8, 1974;" "Proposal of Budget and Programs for 1975: Presented to the City of Lethbridge, the Province of Alberta Department of Preventative Social Services, and Family Planning Federation of Canada," 20171104, found in *the Lethbridge Birth Control and Information Centre, 1973-1975* at the Galt Museum and Archives, Lethbridge, Alberta (LBCIC, 1973-1975 GMA).

⁵ "Dear Friend" information on new abortion program c. 1971-1975 found in "History 1971-1975," M-7265-185, CBCA Collection GA; Brief on the LBCIC to the Community Services Advisory Committee, GR1983-0133, box 1, file 5, found in *Lethbridge Birth Control Association* PAA.

⁶ "Photographs," M-7265-279, CBCA Collection GA; Luba Lisun, interview with Karissa Patton, December 1, 2015, transcript (LL, interview, Dec. 1, 2014, GMA); Mary Bochenko, interviewed with Karissa Patton, January 27, 2015, transcript (MB, interview, Jan. 27, 2015, transcript, GMA); Judy Burgess, interview with Karissa Patton, December 8, 2012, transcript (JB, interview, Dec. 8, 2012, transcript, GMA); Rita Moir, interviewed with Karissa Patton, 7 October 2014, transcript, (RM interview, Oct. 7, 2014, transcript, GMA), found in "Oral History Project:

rural spaces, their White and urban perspectives often limited the purview of the birth control centre services in the early 1970s. As the decade progressed, these women increasingly built coalitions with women in rural areas, Indigenous women, and teenagers in order to tailor their educational outreach programs to the needs of different communities.⁷ Despite these coalitions, the outreach programming at the birth control centres reflected limited perspectives about teenage sexual liberation and assumptions about southern Alberta women's universal barriers to reproductive healthcare.

While the story of educational outreach services at the birth control centres is not exclusively tied to the CBCA, this narrative relies heavily on CBCA files. Information about LBCIC outreach programs is comparatively sparse.⁸ By contrast, the CBCA educational outreach material was carefully collected from 1968-1979 and saved, filling several archival boxes and files.⁹ The glimpses of the LBCIC education programming suggest that their curricula and approaches aligned with those developed by CBCA educators during the decade.¹⁰ Combining the robust archival story of the CBCA with the more fragmented files about the LBCIC reveals a regional approach to outreach education and on-the-ground feminist struggles to address women's diverse reproductive experiences.

Student Reproductive Rights Activism in Southern Alberta during the 1960s and 1970s," 20171019, at the Galt Museum and Archives, Lethbridge, Alberta.

⁷ Karissa R. Patton and Emily B. Kaliel, "Building Community and Transforming Knowledge: Histories of Women's Health Practitioners and Community-Based Health Services in 20th-Century Alberta, Canada," *Canadian Bulletin of Medical History*, vol. 37, no. 2 (Fall 2020), 427-460; "Education Outreach, Rural Areas, 1972," M-7265-113; "Calgary Birth Control Association Education Outreach: January to December 1973 – Native Associations," c. January 1974, in "Educational Outreach 1968-1973," M-7265-99; CBCA Pamphlet for Teen Information Exchange: Teen Leadership Course in Communication, Relationships, Sexuality, c. 1972, in "Resource material Miscellaneous pamphlets on women's health, birth control, etc. ca. 1960s-1990s," M-7265-371, *CBCA Collection GA*.

⁸ Papers of the Lethbridge Birth Control and Information Centre, 19861102030, at the Galt Museum and Archives, Lethbridge, Alberta; *The Lethbridge Birth Control and Information Centre, 1973-1975*, 20171104, at the Galt Museum and Archives, Lethbridge, Alberta; "Oral History Project: Students' Reproductive Rights Activism in Southern Alberta during the 1960s and 1970," 20171019, at the Galt Museum and Archives; *Lethbridge Birth Control Association*, GR1983-0133, found in at the Provincial Archives of Alberta, Edmonton, Alberta.

⁹ See files M-7265-99 to M-7265-120 on CBCA educational outreach from 1968-1978, *CBCA Collection GA*.

¹⁰ Brief on the LBCIC to the Community Services Advisory Committee, GR1983-0133, box 1, file 5, found in *Lethbridge Birth Control Association PAA*.

A quick note on the terminology used in this chapter. In 1988, historian Joan Scott famously challenged historians of women, gender, and sexuality to critically diversify their terminology and analysis when using catch-all terms like “women.” Her essay “Women’s History” argued that historical analyses of gender revealed layers of hierarchies among women and enhanced historical inquiries about women’s lives by recognizing how different women had different experiences.¹¹ In this chapter, I discuss the many different women who worked at or sought services from the southern Alberta birth control centres in the 1970s. Following the advice of Scott, I use specific terms, like White, Indigenous, immigrant, non-English-speaking, teenage, young adult, and youth, to describe these women. I recognize that these categories are not cut-and-dry and try to be as specific as possible given the limitations of the archival sources.

The women who worked at the southern Alberta birth control centres were mostly White women. I use the term “White” to describe these women though some of them came from diverse ethnic backgrounds. By the 1970s most of these White women did not experience systemic-discrimination based on their ethnicity or the colour of their skin, and these White women conceptualized their oppression as primarily rooted in gender discrimination.¹² These White women, despite their diverse European ethnic backgrounds, resisted the societal and cultural pressures to get married and have children in the decade.¹³ This positionality differentiates these White women’s reproductive experiences significantly from those of Indigenous women in the region who were targets of eugenics, and child apprehension programs.¹⁴

The archival sources offered little specificity when it came to the background and identities of CBCA clients, especially Indigenous and immigrant clients. I recognize the many Indigenous nations in the region like the Kainai, Piikani, Siksika, Tsuut’ina, and Stoney-Nakoda, and have described individual women as members of their specific nations when possible. While many clients were identified as “native” in the CBCA files, the records from the birth control centres rarely

¹¹ Joan Wallach Scott, “Women’s History,” in *Gender and the Politics of History Second Edition*, (New York: Columbia University Press, 1999), 25-26.

¹² Royden Loewen and Gerald Friesen, *Immigrants in Prairie Cities: Ethnic Diversity in Twentieth Century Canada*, (Toronto: University of Toronto Press, 2009) 103-105; Frances Swyripa, *Storied Landscapes: Ethno-Religious Identity and the Canadian Prairie*, (Winnipeg: University of Manitoba Press, 2010).

¹³ LL, interview, transcript, Dec. 1, 2014, GMA; MB, interview, Jan. 27, 2015, transcript, GMA; RM interview, Oct. 7, 2014, transcript, GMA.

¹⁴ Erika Dyck, *Facing Eugenics: Reproduction, Sterilization, and the Politics of Choice*, (Toronto: University of Toronto Press, 2013), 83

referenced the distinct national identities of their Indigenous clients. Throughout this chapter, I refer to these women as Indigenous, unless directly quoting the sources which often use the term “native.”

Similarly, the sources lack precision when discussing immigrant women. Some of the educational resources from the CBCA highlighted the need for birth control education for women who did not speak English. Some of these programs were described as classes for “new Canadians” and in those instances I categorize these programs as education for immigrant women. Otherwise, I categorize these language-focused resources from the CBCA more broadly as education for Non-English-speakers in the region.

Lastly, I use the terms “youth,” “teenager,” and “young adult” throughout this chapter to capture the experiences of unmarried people in their teens and early twenties. Unmarried youth (teens and young adults) often faced significant barriers when it came to stigma about premarital sex. Teenagers (seventeen years old or younger) and young adults (eighteen years old and older) often had different experiences with birth control and sex education throughout the decade on presumptions about their unmarried status. I use the terms teenagers and young adults to distinguish between these two age groups in this chapter.

A White Heteronormative Movement in a White Heteronormative Space?: Difference Feminism, Diversity, and the Politics of Reproduction in Southern Alberta

At the turn of the 1970s, new “difference” feminist theories emerged as a prominent motivator for radical and socialist feminist organizing.¹⁵ Difference feminism emphasized and celebrated women’s biological and social difference from men.¹⁶ In doing so, difference feminists challenged “liberal” feminist arguments that women deserved equal representation within existing legal, social, and political systems because women and men were ultimately the same. Conversely, difference feminists argued that existing social and cultural systems were inherently patriarchal.¹⁷ Women who embraced this new difference theory called for the complete restructuring of economic, political, and legal institutions to create new systems that allowed women and men alike

¹⁵ Linda Nicholson, *The Second Wave: A Reader in Feminist Theory*, (New York & London: Routledge, 1997), 3.

¹⁶ Nicholson, *The Second Wave*, 3.

¹⁷ Nicholson, *The Second Wave*, 3.

to succeed despite their differences.¹⁸ Theories about women's difference and calls to smash the patriarchy continued to gain ground in the early 1970s, but difference feminist theory often ironically failed to recognize differences among women.¹⁹ As scholar Linda Nicholson has explained, many feminists' inadequate theorizing about difference among women during the decade were rooted in their attempts to unify women against the patriarchy.²⁰ She states, "certainly by the late 1970s, most second wave feminists were sensitive to the charges of exclusion that lesbians, women of colour, working-class women, etc. were marking against many of the texts and demands of the [feminist] movement."²¹ Nicholson and others argue that as feminists increasingly acknowledged difference among women and built coalitions with diverse women's groups, their efforts were often still couched in assumptions of women's universal experiences – especially when it came to biology and reproduction.²² The assumptions that Whiteness and heterosexuality were normative and that White, middle-class, straight women represented common experiences for all women fuelled ideas of women's universal experiences and oppression.²³

Women's health activism in the late 1960s and early 1970s was significantly shaped by emergent feminist theories about difference.²⁴ In her discussion of the influential women's health text *Our Bodies, Ourselves* historian Wendy Kline explains that difference feminists "placed the female body at the centre of their identity."²⁵ In line with other difference feminists who called for the reformation of existing institutions, women's health activists argued that medical science and institutions were inherently patriarchal.²⁶ And, feminists involved in the women's health movement

¹⁸ Nicholson, *The Second Wave*, 3.

¹⁹ Nicholson, *The Second Wave*, 3.

²⁰ Nicholson, *The Second Wave*, 3-4.

²¹ Nicholson, *The Second Wave*, 3.

²² Nicholson, *The Second Wave*, 4; Wendy Kline, *Bodies of Knowledge: Sexuality, Reproduction, and Women's Health in the Second Wave*, (Chicago: University of Chicago Press, 2010), 47-48.

²³ Nicholson, *The Second Wave*, 4; Kline, *Bodies of Knowledge*, 2; Loretta Ross and Rickie Solinger, *Reproductive Justice: An Introduction*, (Oakland: University of California Press, 2017), 47-48; Judy Rebick, *Ten Thousand Roses: The Making of a Feminist Revolution*, (Toronto: Penguin Canada, 2005); Nancy Adamson, "Feminists, Libbers, Lefties, and Radicals: the Emergence of the Women's Liberation Movement," in *A Diversity of Women: Ontario, 1945-1980*, edited by Joy Parr, (Toronto: University of Toronto Press, 1995), 252-280.

²⁴ Kline, *Bodies of Knowledge*, 1-3; Ross & Solinger, *Reproductive Justice*, 47-48.

²⁵ Kline, *Bodies of Knowledge*, 1.

²⁶ Kline, *Bodies of Knowledge*, 1-2; Lorraine Greaves, *Personal and Political: Stories from the Women's Health Movement, 1960-2010*, edited by (Toronto: Second Street Press, 2018), 10, 13.

emphasized their biological difference from men as a means to empower and unify women against the patriarchy within medical and scientific spaces.²⁷

The concept that women's biological, sexual, and reproductive experiences were universal fuelled early women's health initiatives but also often forestalled women's health activists' work across various communities of women.²⁸ As some reproductive rights were won in the late 1960s and early 1970s, women of colour and Indigenous women in Canada and the United States increasingly called attention to how "the concept of choice mask[ed] the different economic, political, and environmental contexts in which women's lived their reproductive lives."²⁹ Despite these calls, White women continued to look for commonalities among women and "often focused solely and fiercely on women's right to prevent conception and unwanted births."³⁰ White women health organizers formed coalitions with women of colour, Indigenous women, and others but mostly organized around reproductive rights, women's health, and calls for better sex education. Indigenous, Black, and Chicana women in Canada and the United States organized separately from their White feminist counterparts and fought for accessible maternal health services, pregnancy, and motherhood.³¹ Even as the women's health movement increasingly collaborated with other Black feminist or Indigenous feminist groups in the 1970s, the efforts largely remained focused on women's "universal" need for better birth control, abortion, and sex education services.³²

The historiography of feminism, women's health, and reproductive justice over the past twenty years has revealed the complexity of second wave feminism in the United States and Canada. Early histories of difference feminism and White feminists' efforts to politicize women's universal experiences fuelled historical myths claiming that feminism in the 1970s was monolithically White

²⁷ Kline, *Bodies of Knowledge*, 3.

²⁸ Kline, *Bodies of Knowledge*, 4.

²⁹ Ross & Solinger, *Reproductive Justice*, 47.

³⁰ Ross & Solinger, *Reproductive Justice*, 47-48.

³¹ Ross & Solinger, *Reproductive Justice*, 48-49; Betina Roth, *Separate Roads to Feminism: Black, Chicana, and White Feminist Movements in America's Second Wave*, (Cambridge: Cambridge University Press, 2004), 40-42.

³² Wendy Kline, "The Making of *Our Bodies, Ourselves*: Rethinking Women's Health and Second Wave Feminism," in *Feminist Coalitions: Historical Perspectives on Second-Wave Feminism in the United States*, edited by Stephanie Gilmore and Sara Evans, (Urbana: University of Illinois Press, 2008), 76-77; Candice Klein, "'Sisterhood is powerful but not easy': Conflict, American Imperialism, and Splintering the 1971 Vancouver Indochinese Women's Conference," (MA Thesis, Simon Fraser University, 2015).

and heteronormative.³³ Many scholars have shown that the whitewashing of this historical moment has overshadowed influential feminist movements led by women of colour, Indigenous women, and lesbian women.³⁴ Since the early 2000s scholars have argued that 1970s women's activism was made up of many complex and multifaceted *feminisms*.³⁵ Betina Roth's monograph *Separate Roads to Feminism*, for instance, demonstrates that women of colour developed their own distinct feminist movements during the so-called second wave in the 1960s and 1970s United States.³⁶ Similarly, Loretta Ross, underscores Black women's significant organizing for accessible abortion in the 1960s and 1970s, shattering the historical myth that Black women did not fight for abortion rights until later in the twentieth century.³⁷ Others like Anne Valk have shown how feminists organized across race- and class-lines to fight for affordable healthcare that included abortions in 1969 Washington D.C.³⁸ And Radha Nayar describes the significance of the grassroots Immigrant Women's Health

³³ Roth, *Separate Roads to Feminism*, 2; Tess Jordan, *Feminist Acts: Branching Out Magazine and the Making of Canadian Feminism*, (Edmonton: University of Alberta Press, 2019), xxi; Stephanie Gilmore and Sara Evans, eds. *Feminist Coalitions: Historical Perspectives on Second-Wave Feminism in the United States*, (Urbana: University of Illinois Press, 2008), 2.

³⁴ Roth, *Separate Roads to Feminism*, 2; Gilmore & Evans, *Feminist Coalitions*, 2; Ross & Solinger, *Reproductive Justice*, 47; Sarah Nickle and Amada Fehr, *In Good Relation: History, Gender, and Kinship in Indigenous Feminisms*, (Winnipeg: University of Manitoba Press, 2020), 3; Christina Rousseau, "Wages Due Lesbians: Visibility and Feminist Organizing in 1970s Canada," *Gender, Work, & Organization* vol. 22, no. 4 (May 2015), 18-32; Thomas E. Warner, *Never Going Back: A History of Queer Activism in Canada*, (Toronto: University of Toronto, 2002), 173-182; Becki Ross, *The House That Jill Built: A Lesbian Nation in Formation*, (Toronto: University of Toronto, 1995); Jordan, *Feminist Acts*, xxi; Lynne Marks, Margaret Little, Megan Gaucher, and T. R. Noddings, "'A Job that Should be Respected': contested visions of motherhood and English Canada's second wave women's movements, 1970-1990," *Women's History Review* vol. 25 no. 5 (2016), 771-790.

³⁵ Betina Roth emphasizes the importance of using the plural "feminisms" to recognize the significant and distinct feminist organizing among women of colour in the United States. Roth, *Separate Roads to Feminism*, 2. Editors of *In Good Relation*, Amada Fehr and Sarah Nickle, also use the term "feminisms" to capture the complexity and multiplicity of Indigenous feminist thought. Fehr and Nickle, *In Good Relation*, 3.

Also see, for example: Gilmore & Evans, *Feminist Coalitions*, (2008); and Rickie Solinger, *Abortion Wars: A Half Century of Struggle, 1950-2000*, (Berkeley: University of California Press, 1998).

³⁶ Roth, *Separate Roads to Feminism*, 2.

³⁷ Loretta Ross, "African-American Women and Abortion," in *Abortion Wars: A Half Century of Struggle, 1950-2000*, edited by Rickie Solinger, (Berkeley: University of California Press, 1998), 161.

³⁸ Anne Valk, "Fighting for Abortion as a 'Health Right' in Washington D.C.," in *Feminist Coalitions: Historical Perspectives on Second-Wave Feminism in the United States*, edited by Stephanie Gilmore and Sara Evans, (Urbana: University of Illinois Press, 2008), 135-137.

centre in Toronto.³⁹ Brianna Theobald's work has shown the significant grassroots reproductive healthcare systems Indigenous women created on the Crow Reservation in Montana throughout the twentieth century.⁴⁰ And Barbara Gurr, similarly outlines the 1970s roots of contemporary Indigenous-created reproductive justice systems and practices on the Pine Ridge Reservation in South Dakota.⁴¹ This growing body of work significantly illustrates that women of colour and Indigenous women were active agents in their own reproductive healthcare.

Likewise, scholars have examined the significant lesbian feminist organizing in the 1970s.⁴² Lesbian feminism emerged as a result of straight women routinely centring their oppression on heterosexual experiences. In the 1970s, lesbian women, who had struggled with sexism in gay liberation organizations and homophobia amongst feminist activists, created their own activist groups and communities.⁴³ The historical accounts of lesbian feminist organizing in the Canadian West is growing. Candice Klein's work on feminist organizing in Vancouver during the early 1970s, has shown that while straight women's alliances fractured along lines of race, nationalism, and politics, lesbians facing similar divisions forged strong and lasting friendships and alliances.⁴⁴ Historian Valerie Korinek brings the significant histories of queer activism on the prairies to the forefront in her monograph *Prairie Fairies*. Korinek reveals how lesbian feminists gained new ground

³⁹ Radha Nayar, "Filomena Carvalho and the Immigrant Women's Health Centre, in *Personal and Political: Stories from the Women's Health Movement, 1960-2010*, edited by Lorraine Greaves (Toronto: Second Street Press, 2018), 166-169.

⁴⁰ Brianna Theobald, *Reproduction on the Reservation: Pregnancy, Childbirth, and Colonialism in the Long Twentieth Century*, (Chapel Hill: University of North Carolina Press, 2019), 16-17.

⁴¹ Barbara Gurr, *Reproductive Justice: The Politics of Healthcare for Native American Women*, (New Brunswick: Rutgers University Press, 2015), 10.

⁴² Valerie J. Korinek, *Prairie Fairies: A History of Queer Communities and People in Western Canada, 1930-1985*, (Toronto: University of Toronto, 2018), 115, 197-198;

⁴³ Judy Rebick, *Ten Thousand Roses*, 101-106; Nancy Adamson, "Feminists, Libbers, Lefties, and Radicals: The Emergence of the Women's Liberation Movement," in *A Diversity of Women: Ontario 1945-1980*, edited by Joy Parr, (Toronto: University of Toronto Press, 1995), 266, 274; Nancy Adamson, Linda Briskin, Margaret McPhail, *Feminists Organizing For Change: The Contemporary Women's Movement in Canada*, (Toronto: Toronto University Press, 1988), 58-61; Rousseau, "Wages Due Lesbians," 364-374; Korinek, 197-198; Jordan, *Feminist Acts*, 110-111; Candice Klein, "'Sisterhood is powerful but not easy': Conflict, American Imperialism, and Splintering the 1971 Vancouver Indochinese Women's Conference," (MA Thesis, Simon Fraser University, 2015), 66-69; Sheila Jeffreys, *The Lesbian Revolution: Lesbian Feminism in the UK, 1970-1990*, (London: Routledge, 2018).

⁴⁴ Candice Klein, "'Sisterhood is powerful but not easy': Conflict, American Imperialism, and Splintering the 1971 Vancouver Indochinese Women's Conference," (MA Thesis, Simon Fraser University, 2015), 66-69.

in the prairies in the late 1970s and early 1980s as lesbian women began to use donated sperm to have their own children.⁴⁵ Lesbians from Saskatoon even organized an educational workshop on do-it-yourself inseminations at the popular prairie queer festival Metamorphosis.⁴⁶ Korinek's work highlights that gay men and straight feminists were often uncomfortable with lesbian couples taking control of their reproduction causing further fractures within the gay rights and feminist movements.⁴⁷

Alongside the histories about women of colour, immigrant women, Indigenous women, and lesbians' grassroots activism in the so called second wave are stories that expose the limits of heteronormative and predominantly White feminist and women's health movements in the 1970s.⁴⁸ Wendy Kline, for example, has shown how the Boston Women's Health Book Collective struggled to incorporate the reproductive and sexual health needs of women of colour and lesbian women within the pages of the revolutionary women's health text *Our Bodies, Ourselves*.⁴⁹ As scholars like Nickle and Fehr, and Roth have shown, the history of feminism in the United States and Canada is a story of both "connections and cleavages" between women's activist groups.⁵⁰ This vibrant body of historical literature reveals that many women formed alliances across race, sexuality, and class lines to fight certain issues in 1970s, but ultimately women of colour, Indigenous women, and lesbian women created their own movements in order to adequately address their specific needs.⁵¹ The history of reproductive and sexual health outreach education programs at the CBCA and LBCIC in the 1970s parallel these histories of collaboration and exclusion.

Much like the scholarship that disrupted myths about the monolithic nature of 1970s feminism, many scholars have challenged the historical narrative that the Canadian Prairies were uniformly masculine, White, heterosexual, and conservative spaces. Over the last two decades, inspired in part by Alberta and Saskatchewan's 2005 centennial celebrations, literary scholars,

⁴⁵ Korinek, *Prairie Fairies*, 197-198.

⁴⁶ Korinek, *Prairie Fairies*, 198.

⁴⁷ Korinek, *Prairie Fairies*, 197-198.

⁴⁸ Ruth Sipmkin, "Ask the Right Questions: Lesbians and the healthcare system," in *Personal and Political: Stories from the Women's Health Movement, 1960-2010*, edited by Lorraine Greaves (Toronto: Second Street Press, 2018), 199-200; Candice Klein, "'Sisterhood is powerful but not easy': Conflict, American Imperialism, and Splintering the 1971 Vancouver Indochinese Women's Conference," (MA Thesis, Simon Fraser University, 2015), 34-35.

⁴⁹ Kline, "The Making of *Our Bodies, Ourselves*," 76-78.

⁵⁰ Direct quote from: Roth, *Separate Roads to Feminism*, 3; Fehr and Nickle, *In Good Relation*, 3.

⁵¹ Roth, *Separate Roads to Feminism*, 3; Kline, "The Making of *Our Bodies, Ourselves*," 76-78; Barbara Gurr, *Reproductive Justice*, 10.

political scientists, and historians have taken issue with the constructed historical and contemporary identity of Canada's prairie provinces.⁵² In 2005 scholars Sarah Carter, Leslie Erikson, Patricia Roome, and Char Smith lamented the fact that "after nearly three decades of increasingly sophisticated work in women's and gender history, popular and academic narratives of the West continue to privilege the masculine and to be dominated by the powerful images of the whisky trader, Indian chief, cowboy, Mountie, missionary, stalwart pioneer, farmer, and politician."⁵³ As women's and gender historians have increasingly included women's stories to the historical identity of the prairies, other scholars have expanded the stories of sexuality in the region. Valerie Korinek's *Prairie Fairies* significantly adds the stories of queer communities and people to the historical narrative about post-war Alberta, Saskatchewan, and Manitoba.⁵⁴ And her article "'Bachelor Girl Farmers' and the Queer Challenges to Western heteronormativity" calls out the presumed heterosexuality of prairie people in early twentieth century history.⁵⁵

Other historians have highlighted the increasingly ethnic and racial diversity of the region throughout the twentieth century.⁵⁶ Allison Marshall's work has outlined the long history of Chinese-Canadian's roots in the prairies, linked to the broader government colonialist projects in the late nineteenth century.⁵⁷ Some historians and community groups have, likewise, underlined the

⁵² Aritha Van Herk, *Mavericks: An Incurable History of Alberta*, (Toronto: Penguin Canada, 2001); Sarah Carter, Lesley Erikson, Patricia Roome, and Char Smith, editors, *Unsettled Pasts: Reconceiving the West Through Women's History*, (Calgary: University of Calgary Press, 2005); Doreen Barrie, *The Other Alberta: Decoding a Political Enigma*, (Regina: University of Regina Press, 2006); Geo Takach, *Will the Real Alberta Please Stand Up?* (Edmonton: University of Alberta Press, 2010); Alvin Finkel, Sarah Carter, and Peter Fortna, editors, *The West and Beyond: New Perspectives on an Imagined Region*, (Edmonton: Athabasca University Press, 2010); Adele Perry, Elylt Jones, and Leah Morton, *Place and Replace: Essays on Western Canada*, (Winnipeg: University of Manitoba Press, 2014); Leon Crane Bear, Larry Hannant, and Karissa Patton, editors, *Bucking Conservatism: Alternative Stories of Alberta from the 1960s and 1970s*, (Edmonton: University of Athabasca Press, 2021 – forthcoming).

⁵³ Carter, Erikson, Roome, and Smith, eds, introduction to *Unsettled Pasts*, 4.

⁵⁴ Korinek, *Prairie Fairies*, (2018).

⁵⁵ Valerie Korinek, "'Bachelor Girl Farmers' and the Queer Challenges to Western heteronormativity," *Journal of the Canadian Historical Association* vol.29, no. 1 (2010), 182-189.

⁵⁶ Loewen and Friesen, *Immigrants in Prairie Cities*, (2009); Swyripa, *Storied Landscapes*, (2010).

⁵⁷ Alison Marshall, *Cultivating Connections: The Making of Chinese Prairie Canada*, (Vancouver: university of British Columbia press, 2014); also see, Alison Marshall, *The Way of the Bachelor: Early Chinese Settlement in Manitoba*, (Vancouver: University of British Columbia Press, 2011); Alison Marshall, "Railways, Racism, and Chineseness on the Prairies," in *Place and Replace: Essays on Western Canada*, edited by Adele Perry, Elylt Jones, and Leah Morton, (Winnipeg: University of Manitoba Press, 2014), 107-122.

significance of Black settlers in Alberta and Saskatchewan.⁵⁸ Histories of Hutterite, Mennonite, and Doukhobor settlement in Canada reveal the significance of these ethnic communities in the making of the Canadian West.⁵⁹ And other historians have examined how many interned Japanese-Canadians made homes in the prairie communities where they had been forcibly relocated during the Second World War.⁶⁰ In line with these histories of racial and ethnic diversity on the prairies, many scholars have argued that the presumed Whiteness of the region fuels the erasure of Indigenous peoples and their right to land in Western Canada.⁶¹ This growing body of work about ethnic communities, Black settlement, and Indigenous nations on the Prairies challenges the myth of the region as monolithically White.

⁵⁸ See: Jenna Bailey, David Este, Deborah Dobbins, and Shiloh Centre for Multicultural Roots, *We Are The Roots: Black Settlers and Their Experiences of Discrimination on the Canadian Prairies*, (Bailey & Soda Films, 2018), film; R. Bruce Shepard, "Plain Racism: The Reaction Against Oklahoma Black Immigrants to the Canadian Plains," in *Immigration and Settlement, 1870-1939*, edited by Gregory Marchildon, (Regina: University of Regina Press, 2009), 483-506.

⁵⁹ Simon Evans and Peter Peller, "Mapping an Ethnic Isolate: The Diffusion of Hutterite Colonies across the Prairies and Northern Great Plains," *Great Plains Quarterly* vol. 38, no. 4 (2018), 357-385; Simon Evans, "Hutterite Agriculture in Alberta: The contribution of an Ethnic Isolate," *Agricultural History* vol. 93, no. 4 (Fall 2019), 656-681; Royden Loewen, *A Village Among Nations: "Canadian" Mennonites in a Transnational World, 1916-2006*, (Toronto: University of Toronto Press, 2013); Ashleigh, Androsoff, "The Trouble With Teamwork: Doukhobor Women's Plow Pulling in Western Canada, 1899," *Canadian Historical Review* vol. 100, no. 4 (December 2019), 540-563.

⁶⁰ Aya Fujiwara, "Informal Internment: Japanese Canadian Farmers in Southern Alberta, 1941-1945," in *Civilian Internment in Canada: Histories and Legacies: An Edited Collection*, edited by Rhonda Hinther and James Mochoruk, (Winnipeg: University of Manitoba Press, 2020), 167-179.

⁶¹ See scholarly and public work by historians like: Penelope Edmunds, "Unpacking Settler Colonialism's urban Strategies: Indigenous People's in Victoria, British Columbia, and the Transition to a Settler-Colonial City," *Urban History Review* vol. 38, no. 2 (2010), 4-20; Julie Tomiak, Tyler McCreary, David Hugill, Robert Henry, Heather Dorries, *Settler City Limits: Indigenous Resurgence and Colonial Violence in the Urban Prairie West*, (Winnipeg: University of Manitoba Press, 2019); Jesse Thistle, "Kiskisimwin – remembering: Challenging Indigenous Erasure in Canada's Public History Displays," *ActiveHistory.ca*, July 3, 2017, last accessed, November 10, 2020, <https://activehistory.ca/2017/07/kiskisimwin-remembering-challenging-indigenous-erasure-in-canadas-public-history-displays/>.

Other historians have written about Canada's history of colonialism and Indigenous erasure outside of the West: Victoria Freeman, "'Toronto has no History!' Indigeneity, Settler Colonialism, and Historical Memory in Canada's Largest City," *Urban History Review* vol. 38, no. 2 (2010), 21-35; Rebecca Shrubbs, "'Canada has no history of Colonialism?' Historical Amnesia: The Erasure of Indigenous People's for Canada's History" (MA thesis, University of Victoria, 2014); Susan Neylan, "Canada's Dark Side: Indigenous Peoples and Canada's 150th Celebration," *Origins: Current Events in Historical Perspective*, vol. 11, no. 9 (June 2018, last accessed November 10, 2020, <http://origins.osu.edu/article/canada-s-dark-side-indigenous-peoples-and-canada-s-150th-celebration>).

The history of the educational outreach programs at the CBCA and LBCIC in the 1970s examines how feminist coalitions and divisions developed on-the-ground in the southern Alberta region, echoing broader feminist struggles for sisterhood across these various categories of women during the decade. The women's health movement was influenced by feminist theories in the late 1960s and early 1970s that especially emphasized and celebrated women's difference from men.⁶² At the turn of the '70s, however, feminists across Canada and the United States struggled to align their celebration of women's biological difference from men with the diversity of lived experiences among women.⁶³ Despite coalitions across feminist groups in their fight for accessible contraception and abortion in the 1970s,⁶⁴ White, straight feminists often failed to adequately consider how race, ethnicity, sexuality, and sometimes class, shaped other women's fight against the patriarchy. Much like the broader feminist struggles for sisterhood during the decade, the CBCA and LBCIC educational outreach programs were underscored by White urban activists' limited definitions of reproductive rights and freedom. As the educators at the CBCA and LBCIC worked with women in rural communities, Indigenous women, and youth they increasingly recognized the specific geographical and social barriers women faced in the region when it came to accessing sex education, birth control, and abortion.⁶⁵ While the women at the birth control centres considered distinct access needs for people based on geography and age, they often failed to meaningfully account for other factors of diversity, including Indigeneity, ethnicity and language, or sexuality.⁶⁶ The analysis of the

⁶² Kline, *Bodies of Knowledge*, 2; Nicholson, *The Second Wave*, 3-4.

⁶³ Kline, *Bodies of Knowledge*, 2; Kline, "The Making of *Our Bodies, Ourselves*," 76-77; Candice Klein, "'Sisterhood is powerful but not easy': Conflict, American Imperialism, and Splintering the 1971 Vancouver Indochinese Women's Conference," (MA Thesis, Simon Fraser University, 2015).

⁶⁴ Anne Valk, "Fighting for Abortion as a 'Health Right' in Washington, D.C." in *Feminist Coalitions: Historical Perspectives on Second-Wave Feminism in the United States*, edited by Stephanie Gilmore and Sara Evans, (Urbana: University of Illinois Press, 2008); Loretta J. Ross, "African-American Women and Abortion," in *Abortion Wars: A Half Century of Struggle, 1950-2000*, edited by Rickie Solinger, (Berkeley: University of California Press, 1998); Ross and Solinger, *Reproductive Justice*, (2017).

⁶⁵ "Dear Friend" information on new abortion program c. 1971-1975 in "History 1971-1975," M-7265-185; CBCA Administrative Chart of Contacts for Presentations in Rural Areas, 1972, in "Education Outreach, Rural Areas, 1972," M-7265-113; CBCA Progress Report, March 3, 1972, pg.2, in "History 1971-1975," M-7265-185; Letter from CBCA (Dorreen Eaglespeaker) to the Morley Band Office, February 29, 1972, in "Education Outreach, Rural Areas 1972," M-7265-113; "Calgary Birth Control Association Education Outreach: January to December 1973 – Native Associations," c. January 1974, in "Educational Outreach 1968-1973," M-7265-99, *CBCA Collection GA*.

⁶⁶ Resource Outline for the Adult Vocational Centre's English for New Canadian's Course, January 1975, found in "Educational outreach, 1974-1976," M-7265-100, *CBCA Collection GA*; Pauline Hoskin, interview with Karissa Patton, December 20, 2017, transcript; Micah, interviewed

CBCA's outreach programs below outlines how women's liberation activism converged and splintered in 1970s southern Alberta.

“Especially for out-of-town women”: Southern Alberta Landscapes of Difference Feminism & Outreach Education

At the turn of the 1970s, as legislation about reproductive rights shifted and feminist birth control centres open their doors, the region was far from a racial, ethnic, or cultural monolith. Following the Second World War immigration boomed in Alberta, along with the other Canadian prairie provinces, as many European refugees came to Canada after the war.⁶⁷ In the 1950s and 1960s German, Ukrainian, Polish, Dutch, Italian, Greek, Hungarian and Czech newcomers, and Japanese-Canadians released from internment camps, joined established Chinese-Canadian, Hutterite, and other European settler communities in making southern Alberta their home.⁶⁸ In the region, Hutterite colonies, Indigenous nations, and urban centres existed in close proximity.⁶⁹ Japanese-Canadian communities and White Mormon settlers went to church side-by-side on Sundays in Raymond, Alberta, which housed a Jodo Shinshu Buddhist Church beside Church of Jesus Christ Latter Day Saints buildings on the town's main drive.⁷⁰ And, Calgary became a hub for newcomers from “Asia, Latin America, the Caribbean, the Middle East, and Africa” in the 1970s.⁷¹ Post-war urbanization led to widespread migration of White and Indigenous people from rural spaces to urban centres.⁷² By the 1970s, rural areas along with cities like Lethbridge and Calgary housed people from a broad variety of racial, ethnic, and cultural backgrounds.⁷³

by Erin Flegg, August 1, 2013, video interview, available at the Archives of Lesbian Oral Testimony, <https://www.alotarchives.org/content/micah-and-erin>; “A Letter from Sappho” in *Up* vol. 2 no. 2 (February 1975), pg. 14-15. Found in HQ 1480.L47.U6 at the University of Ottawa Women's Archives, Ottawa, Ontario.

⁶⁷ Loewen and Friesen, *Immigrants in Prairie Cities*, 57.

⁶⁸ Loewen and Friesen, *Immigrants in Prairies Cities*, 66-69.

⁶⁹ For example, the Cayley, AB Hutterite colony, the Tssut'ina nation, the Siksika nation, the Piikani nation, and the city of Calgary are all within an hour's drive or less from each other.

⁷⁰ Aya Fujiwara, “Japanese-Canadian Internally Displaced Persons: Labour Relations and Ethno-Religious Identity in Southern Alberta, 1942-1953,” *Labour/Le Travail* vol. 69 (Spring 2012), 63-89; “Raymond Buddhist Church,” *Heritage Resource Management Information Systems (HeRMIS)*, last accessed November 10, 2020, <https://hermis.alberta.ca/ARHP/Details.aspx?DeptID=1&ObjectID=4665-0482>.

⁷¹ Loewen and Friesen, *Immigrants in Prairies Cities*, 8, 102.

⁷² Loewen and Friesen, *Immigrants in Prairies Cities*, 7-8, 58-59.

⁷³ Swyripa, *Storied Landscapes*, (2010).

Recognizing this ethnic and racial diversity in Alberta is particularly important to understanding the history of reproductive politics in the province throughout the 20th century. For most of the century the province carried out eugenic policy through the Sexual Sterilization Act, which was passed in 1928 and decriminalized sterilization surgeries for eugenic purposes. As historian Erika Dyck has shown in *Facing Eugenics*, Alberta's Sexual Sterilization Act was fuelled by eugenic feminism and Anglo-Saxon women's definitions of femininity and morality as well as White-supremacist scientific theories and government policies.⁷⁴ As Dyck outlines, provincial eugenic policies and sterilizations were "foisted upon certain people and denied to others."⁷⁵ In particular, policies prohibited White, Anglo-Saxon, middle-class women from accessing voluntary sterilization for birth control purposes. The same policies actively targeted working class, immigrant, and Indigenous peoples for eugenic sterilization at different times throughout the century.⁷⁶ She explains that working-class people and Eastern European immigrants, characterized as mentally unfit by medical and political elite, became significant targets of the provincial eugenics program in the province in the 1920s and 1930s.⁷⁷ Initially Indigenous people were not significant targets for the provincial Eugenics programs because politicians and scientists followed theories of social Darwinism and "assumed that such populations were in a state of natural decline."⁷⁸ By the 1960s and early 1970s, however, Indigenous and Metis women were the "chief targets" of the province's eugenics program.⁷⁹ In 1972 the newly elected Progressive Conservative Party in Alberta repealed the Sexual Sterilization Act as the eugenic practices were increasingly recognized as outdated in scientific theory and a violation of human rights in the province.⁸⁰ But for Indigenous women and families, other policies of coerced sterilization and child apprehension continued well into the 1970s and beyond.⁸¹ These eugenic policies and practices led to a wide range of reproductive experiences in the province between the 1920s and 1970s, which influenced different women's reproductive and

⁷⁴ Dyck, *Facing Eugenics*, 9, 22.

⁷⁵ Dyck, *Facing Eugenics*, 4.

⁷⁶ Dyck, *Facing Eugenics*, 7, 9, 12, 54-58.

⁷⁷ Dyck, *Facing Eugenics*, 50-51.

⁷⁸ Dyck, *Facing Eugenics*, 56.

⁷⁹ Dyck, *Facing Eugenics*, 83.

⁸⁰ Dyck, *Facing Eugenics*, 4.

⁸¹ Allyson Stevenson, "Intimate Integration: A Study of Transracial Adoption in Saskatchewan, 1944-1984," (Ph.D. Diss., University of Saskatchewan, 2015); Raven Sinclair (*Ótiskewápímsken*), Michael Anthony Hart (*Kaskitémabíkan*), and Gord Bruyere (*Amawaajbitang*), *Wícihitowin Aboriginal Social Work in Canada*, (Halifax & Winnipeg: Fernwood Publishing, 2009), 93.

sexual health needs within a landscape of decriminalized contraception and abortion in the early 1970s.

As legal landscapes of reproductive choices shifted between 1969 and 1972, widespread feminists debates about difference among women were amplified by two 1973 Canadian Supreme Court cases, *Murdoch v. Murdoch* and *AG v. Lavell*.⁸² These legal cases brought to light specific issues that rural and Indigenous women faced (respectively) in Canada and became significant stimuli for the national feminist movements during the early 1970s.⁸³ The *Murdoch v. Murdoch* case resided over the divorce, child custody, and property claims of Nanton farmer Irene Murdoch and her husband. Starting in 1971, Murdoch and her lawyer fought for the custody of her teenage son and “equitable partnership interest in the Murdochs’ ranch.”⁸⁴ In October 1973, the Supreme Court of Canada denied Murdoch’s claim to the property.⁸⁵ Feminists across the nation rebuked the Supreme Court’s decision, calling for change to the legal discrimination of Canadian women.⁸⁶ As Irene Murdoch brought awareness to the discrimination against women within Canadian family and property law, Jeanette Lavell’s case exposed the discrimination against Indigenous women within the *Indian Act*. In 1970 Jeanette Lavell (Wikwemikong Ojibwa)⁸⁷ challenged the section 12 (1)(b) of the *Indian Act* that stated Indigenous women who married non-Indigenous men lost their status and band rights.⁸⁸ Her case inspired the widespread support from Indigenous women across Canada who had also “married

⁸² Mysty Clapton, “*Murdoch v. Murdoch*: The Organizing Narrative of Matrimonial Property Law Reform,” *Canadian Journal of Women and the Law* vol. 20, no. 2 (2008), 216.

⁸³ Clapton, “*Murdoch v. Murdoch*,” 216.

⁸⁴ Pernille Jakobson, “*Murdoch v. Murdoch*: Feminism, Property, and the Prairie Farm in the 1970s,” in *Place and Replace: Essays on Western Canada*, edited by Adele Perry, Esvyllt Jones, and Leah Morton, (Winnipeg: University of Manitoba Press, 2014), 41.

⁸⁵ Jakobson, “*Murdoch v. Murdoch*,” 40.

⁸⁶ Jakobson, “*Murdoch v. Murdoch*,” 40.

⁸⁷ Jordan, *Feminist Acts*, 79-80; Corinne George, “‘We are on the outside looking in ... But, we are still Indians’: Alberta Indigenous Women Fighting for Status Rights, 1968-1985,” in *Bucking Conservatism: Alternative Stories of Alberta from the 1960s and 1970s*, (Edmonton: University of Athabasca Press, 2021) – forthcoming; Corinne George, “‘If I Didn't do Something, My Spirit Would Die...’: Grassroots Activism of Aboriginal Women in Calgary and Edmonton, 1951-1985.” Master of Arts Thesis, University of Calgary, 2008.

⁸⁸ Jordan, *Feminist Acts*, 79-80; Corinne George, “‘We are on the outside looking in ... But, we are still Indians’: Alberta Indigenous Women Fighting for Status Rights, 1968-1985,” in *Bucking Conservatism: Alternative Stories of Alberta from the 1960s and 1970s*, (Edmonton: University of Athabasca Press, 2021) – forthcoming; Corinne George, “‘If I Didn't do Something, My Spirit Would Die...’: Grassroots Activism of Aboriginal Women in Calgary and Edmonton, 1951-1985.” Master of Arts Thesis, University of Calgary, 2008.

out” and lost their status and propelled the Indigenous women’s rights movement in Canada.⁸⁹ In Alberta, Kathleen Steinhauer and Nellie Carlson, both *Onicikiskwapowin* Cree women from Saddle Lake established the provincial branch of Indian Rights for Indian Women (IRIW) in 1973.⁹⁰ The Alberta IRIW raised awareness about Lavell’s case and the many other Indigenous women across Canada who had lost their status.⁹¹ A few months after the Alberta IRIW was founded the Supreme Court of Canada ruled against Lavell’s claim that section 12(1)(b) discriminated against Indigenous women.⁹²

Both of these cases were well publicized in newspapers across the country in the early 1970s.⁹³ In Alberta, women’s rights groups and feminist publications brought attention to these pivotal feminist cases. The Alberta IRIW group organized a panel about Lavell’s case at the University of Calgary in January 1973, hoping to garner support for Lavell and others like her.⁹⁴ Edmonton-based feminist magazine published articles by IRIW activist Jenny Margetts (*Onicikiskwapowin* Cree) about the Lavell case and broader legal discrimination against Indigenous women in the Indian Act.⁹⁵ In Lethbridge, the local women’s liberation newsletter *Up* published

⁸⁹ Corinne George, “‘We are on the outside looking in ... But, we are still Indians:’ Alberta Indigenous Women Fighting for Status Rights, 1968-1985,” in *Bucking Conservatism: Alternative Stories of Alberta from the 1960s and 1970s*, (Edmonton: University of Athabasca Press, 2021) – forthcoming; Corinne George, “‘If I Didn’t do Something, My Spirit Would Die...’: Grassroots Activism of Aboriginal Women in Calgary and Edmonton, 1951-1985.” Master of Arts Thesis, University of Calgary, 2008.

⁹⁰ Nellie Carlson, Kathleen Steinhauer, and Linda Goyette, *Disinherited Generations: Our struggle to Reclaim Treaty Rights for First Nations Women and Their Descendants*, (Edmonton: University of Alberta Press, 2013), 55-71.

⁹¹ Nellie Carlson, Kathleen Steinhauer, and Linda Goyette, *Disinherited Generations: Our struggle to Reclaim Treaty Rights for First Nations Women and Their Descendants*, (Edmonton: University of Alberta Press, 2013), 55-71.

⁹² Jordan, *Feminist Acts*, 80; 1; Corinne George, “‘We are on the outside looking in ... But, we are still Indians:’ Alberta Indigenous Women Fighting for Status Rights, 1968-1985,” in *Bucking Conservatism: Alternative Stories of Alberta from the 1960s and 1970s*, (Edmonton: University of Athabasca Press, 2021) – forthcoming; Corinne George, “‘If I Didn’t do Something, My Spirit Would Die...’: Grassroots Activism of Aboriginal Women in Calgary and Edmonton, 1951-1985.” Master of Arts Thesis, University of Calgary, 2008.

⁹³ Jakobson, “Murdoch v. Murdoch,” 40; Jordan, *Feminist Acts*, 79-81.

⁹⁴ Corinne George, “‘We are on the outside looking in ... But, we are still Indians:’ Alberta Indigenous Women Fighting for Status Rights, 1968-1985,” in *Bucking Conservatism: Alternative Stories of Alberta from the 1960s and 1970s*, (Edmonton: University of Athabasca Press, 2021) – forthcoming; Corinne George, “‘If I Didn’t do Something, My Spirit Would Die...’: Grassroots Activism of Aboriginal Women in Calgary and Edmonton, 1951-1985.” Master of Arts Thesis, University of Calgary, 2008.

⁹⁵ Jordan, *Feminist Acts*, 79-81.

articles that discussed *Murdoch v. Murdoch*, among a significant uptick of articles about marriage and property laws, in 1974.⁹⁶ The timing of these well-publicized cases within mainstream and feminist media corresponds with the establishment of the rural and Indigenous outreach programs at the CBCA. Already focused on their role as urban-hubs for reproductive and sexual healthcare in the region, the broadcast of Murdoch and Lavell's stories compelled White feminists at the CBCA and LBCIC to grapple with rural and Indigenous women's difference.

The establishment of the CBCA's rural and Indigenous outreach programs in the early 1970s reflects a regionally specific perspective as well as broader national discussions about rural and Indigenous women's rights in the early 1970s. The women who established the LBCIC and CBCA included services for the "surrounding rural areas" near Lethbridge and Calgary within their mandates from the beginning, even before they established any specific rural or Indigenous outreach education.⁹⁷ Familiar with the fact that many people living in rural areas, or sometimes even smaller cities, had to travel to large urban centres for their healthcare needs, the women running the birth control services envisioned their centres as similar urban-hubs for reproductive and sexual healthcare and education.⁹⁸ Underscoring a prairie travel culture and the importance of networks within the prairie region in her monograph *Prairie Fairies*, Korinek argues that the "migrations within the prairies from rural to urban areas, as well as from the north to the more urbanized south, captures a previously hidden world."⁹⁹ This world of migration and networks across urban, rural, and reserve borders shaped the focus on geographical barriers to reproductive healthcare within the rural outreach program and, later, the Native Family Planning program at the CBCA.¹⁰⁰

⁹⁶ Patricia Krasinski and Charlotte Ziebarth, "Position Paper on Matrimonial Property Law," *Up* vol. 1 no. 8, September 24, 1974, pgs. 3-4; "Matrimonial Rights," *Up* vol. 1 no. 3, June 24, 1974, pg. 3; "Women and the Law," *Up* vol. 1 no.5, July 29, 1974, pg. 7.

⁹⁷ Judy Burgess and John Martini, "Proposal Family Planning Division Department of National Health and Welfare" (1972), found in GR1983-0133, box 1, file 5 in *Lethbridge Birth Control Association* PAA.

⁹⁸ Judy Burgess and John Martini, "Proposal Family Planning Division Department of National Health and Welfare" (1972), found in GR1983-0133, box 1, file 5 in *Lethbridge Birth Control Association* PAA.

⁹⁹ Korinek, *Prairie Fairies*, 9.

¹⁰⁰ Letter to the CBCA from Laurence Epp, March 7, 1973; Letter to the CBCA from Mrs. E. Hauck, c. November 1972; Letter to the CBCA from Bill Warrener, September 28, 1972; Letter to CBCA from Mary-Del Kells, December 15, 1972; Letter to CBCA from Mrs. C. Glasier, October 4, 1972; Letter from "a Friend" to the CBCA, November 4, 1972; Letter to the CBCA from Sharon Wheale, October 10, 1972; letter to the CBCA from Mrs. E. Hauck, c. November 1972; Letter to the CBCA from Donna R. Nichols, August 8, 1972, in "Correspondence 1972," M-7265-80; Letter from "Elly" to the CBCA, October 4, 1973, found in "Correspondence, 1973," M-7265-82; letter to the

The Association's focus on rural women and Indigenous women's birth control and sex education stood out among other birth control centers in early 1970s Canada. According to a 1971 report from the Family Planning Federation of Canada, the CBCA was the only federally funded "Family Planning" project that even mentioned rural and Indigenous women in their mandate.¹⁰¹ The report listed seven family planning initiatives, including three in Ontario, one in Quebec, two in New Brunswick, and the CBCA. The description of the Association's mandate highlighted their "educational program on birth control for rural communities" and mentioned that the women running the CBCA had hired a "native woman" for their "educational program on the reserves."¹⁰² By 1972, the CBCA's programs for rural and Indigenous women still stood out especially among projects in larger urban centers. Association staff sent a survey to their birth control centre comrades across the country asking, "what you are doing in the area of rural education and information projects?"¹⁰³ While few responses of the survey are saved in the CBCA files, the response from the Montreal Family Planning Association stated, "we have no rural areas."¹⁰⁴ The distinct prairie travel culture of migration and networks that often blurred the borders between urban and rural spaces influenced a distinct regional outreach focus at the CBCA. Barriers related to travel and space became a significant motivator for the outreach programs at the CBCA in the 1970s.

The women running the CBCA easily empathized with women who faced geographical barriers to accessible reproductive healthcare, but their own positionality made many other reproductive health barriers less obvious to them. There is not a lot of detailed information about the many staff members and volunteers at the LBCIC and CBCA. Oral history interviews, a small collection of photographs, and some saved administrative files do explain that, some of the birth control centre staff and volunteers came from long-settled and more recently immigrated Ukrainian

CBCA from Mr. and Mrs. J. McAuley, April 26, 1973. In "Correspondence 1973," M-7265-82; *CBCA Collection GA*.

¹⁰¹ "Summary of Local Initiatives Projects in Family Planning: Winter 1971-1972," compiled by the Family Planning Federation of Canada, in "History 1971-1975," M-7265-185, *CBCA Collection GA*.

¹⁰² "Summary of Local Initiatives Projects in Family Planning: Winter 1971-1972," compiled by the Family Planning Federation of Canada, in "History 1971-1975," M-7265-185, *CBCA Collection GA*.

¹⁰³ Letter to Planned Parenthood Ottawa Incorporated, March 6, 1972, in "Correspondence, 1972," M-7265-80, *CBCA Collection GA*.

¹⁰⁴ Letter to CBCA from the Montreal Family Planning Association, March 20, 1972, in "Correspondence, 1972," M-7265-80, *CBCA Collection GA*.

families, and represented a variety of class backgrounds, but staff and volunteers at both birth control centres were almost exclusively White and straight women.¹⁰⁵ Some of the women working at the CBCA and LBCIC grew up in rural communities and remembered the long drive into the nearest town or city to see a doctor. These women empathized with rural women seeking sympathetic physicians who prescribed contraception or made abortion referrals.¹⁰⁶ From the perspective of these White birth control centre activists, geographic barriers to reproductive health services presented common problems for women across the region. As the women running the birth control centres ventured into rural and Indigenous communities, their outreach education materials in hand, they encountered language barriers and stories of reproductive colonialism. The CBCA education team created new resources for women who were not fluent in English and created new outreach programs for Indigenous women. Throughout the decade as White CBCA and LBCIC staff tried to integrate understandings of difference among women, but their normative assumptions about women's universal oppression dominated their activist mission.

The CBCA Rural Outreach Program, est. 1972

The CBCA education team launched their Rural Outreach program in February 1972, to address the geographic barriers to accessible reproductive healthcare in the region.¹⁰⁷ The women working at the Association hoped to build their rural program based on client feedback and need. The CBCA education team sent letters and surveys to several rural health unit directors and public health nurses inquiring about their local reproductive and sexual health services. This 1972 survey of rural areas in southern Alberta asked: how many doctors lived in or served the community, the location of the closest hospital, if abortion or contraceptive sterilizations were accessible at the nearest medical institution, if the local drug store provided contraceptives, and if unmarried people had access to any of these services.¹⁰⁸ The findings from this survey were important to the women at

¹⁰⁵ LL, interview, transcript, Dec. 1, 2014, GMA; MB, interview, Jan. 27, 2015, transcript, GMA.

¹⁰⁶ LL, interview, transcript, Dec. 1, 2014, GMA; MB, interview, Jan. 27, 2015, transcript, GMA.

¹⁰⁷ CBCA Progress Report to Federal Department of Manpower & Immigration, March 3, 1972, found in "History, 1971-1975," M-7265-185, *CBCA Collection* GA.

¹⁰⁸ CBCA Rural Outreach Surveys, 1972, Responses from Acme, Bassano, Blairmore, Brooks, Consort, Foremost, Hanna, Veteran, Cereal, Innisfail, Oyen, Pennhold, Pincher Creek, Red Deer, and Strathmore, in "Education Outreach, Rural Areas 1972," M-7265-113, *CBCA Collection* GA.

the CBCA as they tried to assess the healthcare landscape beyond Calgary's borders. Many rural women wrote to the CBCA between 1970 and 1972 outlining how difficult it was to access contraceptive and abortion services in their more remote communities,¹⁰⁹ which underscored the need for accessible and timely reproductive and sexual health services, "especially for out-of-town women" in the region.¹¹⁰ From Acme to Youngstown, the CBCA education team quickly built relationships with physicians, nurses, home-economists, educators, town councillors, and Indigenous band administrators across the region.¹¹¹ The CBCA's rural outreach program fulfilled some of the service gaps as they provided sex and birth control education in rural communities across southern Alberta. By the end of April 1972 alone, the CBCA's had presented a total of forty-seven presentations, including workshops for a Native Women's Conference at Olds College, and booked another eleven presentations for various small towns, rural and Indigenous communities to take place in May and June of that year.¹¹² The rural outreach program remained one of the most-requested services at the CBCA throughout the decade.¹¹³ The popularity of the CBCA's rural outreach services between 1972 and 1979 suggests that the Association educators were filling a significant gap and addressing barriers of distance when it came to accessible rural reproductive and sexual health education services in the 1970s. Despite the program's popularity, the urban women running the rural outreach program faced a steep learning curve, from the agricultural calendar to

¹⁰⁹ Letter to the CBCA from Laurence Epp, March 7, 1973; Letter to the CBCA from Mrs. E. Hauck, c. November 1972; Letter to the CBCA from Bill Warrener, September 28, 1972; Letter to CBCA from Mary-Del Kells, December 15, 1972; Letter to CBCA from Mrs. C. Glasier, October 4, 1972; Letter from "a Friend" to the CBCA, November 4, 1972; Letter to the CBCA from Sharon Wheale, October 10, 1972; letter to the CBCA from Mrs. E. Hauck, c. November 1972; Letter to the CBCA from Donna R. Nichols, August 8, 1972, in "Correspondence 1972," M-7265-80; Letter from "Elly" to the CBCA, October 4, 1973, found in "Correspondence, 1973," M-7265-82; letter to the CBCA from Mr. and Mrs. J. McAuley, April 26, 1973. In "Correspondence 1973," M-7265-82, *CBCA Collection GA*.

¹¹⁰ "Dear Friend" information on new abortion program c. 1971-1975 in "History 1971-1975," M-7265-185, *CBCA Collection GA*.

¹¹¹ CBCA Administrative Chart of Contacts for Presentations in Rural Areas, 1972, in "Education Outreach, Rural Areas, 1972," M-7265-113, *CBCA Collection GA*.

¹¹² CBCA LIP Progress report April 10, 1972, in "History 1971-1975," M-7265-185, *CBCA Collection GA*.

¹¹³ See: CBCA Education Co-Ordinator – Position Description, June 26, 1978, found in "Education Outreach, 1978," M-7265-101, *CBCA Collection GA*.

the intricacies of small town community surveillance, when it came to rural women's experiences and needs.¹¹⁴

When the program started in 1972, CBCA educators initially envisioned their rural outreach education as a temporary program to provide contraception, abortion, and sex education in rural areas and encouraged local women to start their own community birth control associations.¹¹⁵ In the eyes of the sex education instructors, establishing "birth control and family planning information services started in these small towns" easily addressed the barrier of distance between rural women and the urban birth control centres.¹¹⁶ But the lack of privacy and heightened community surveillance in small towns made many rural women and youth feel that a birth control association in their community was not feasible or welcomed.¹¹⁷ By 1973, no rural women who had connected with the CBCA's outreach instructors wanted to start their own birth control association. This puzzled the Association educators: "We have found, inevitably, that developing the interest and enthusiasm for such an undertaking has been more difficult than we had expected. No one contacted in Calgary's surrounding rural area has yet leapt forward to carry the banner of volunteer family planning. Nonetheless, we still have hopes."¹¹⁸ While the instructors hoped for rural birth control associations to pop up across the region, many rural women worried about social surveillance in their towns. Community surveillance was so significant in some areas that people did not even attend CBCA programming because they did not want to be seen in the audience.¹¹⁹ Yet, the CBCA educators continued to pursue their goal of establishing centres in rural areas across the

¹¹⁴ "Dear Friend" information on new abortion program c. 1971-1975 in "History 1971-1975," M-7265-185; CBCA Rural Outreach Surveys, 1972, Responses from Acme, Bassano, Blairmore, Brooks, Consort, Foremost, Hanna, Veteran, Cereal, Innisfail, Oyen, Pennhold, Pincer Creek, RedDeer, and Strathmore, in "Education Outreach, Rural Areas 1972," M-7265-113, Calgary, Alberta. Peer Education, Community Outreach Education," pg. 2, c. 1972, in "Educational Outreach 1978," M-7265-101, *CBCA Collection* GA.

¹¹⁵ Peer Education, Community Outreach Education," pg. 2, c. 1972, in "Educational Outreach 1978," M-7265-101, *CBCA Collection* GA.

¹¹⁶ Peer Education, Community Outreach Education," pg. 2, c. 1972, in "Educational Outreach 1978," M-7265-101, *CBCA Collection* GA.

¹¹⁷ Peer Education, Community Outreach Education," pg. 2, c. 1972, in "Educational Outreach 1978," M-7265-101, *CBCA Collection* GA.

¹¹⁸ Peer Education, Community Outreach Education," pg. 2, c. 1972, in "Educational Outreach 1978," M-7265-101, *CBCA Collection* GA.

¹¹⁹ CBCA Progress Report June 1, 1972, pg. 40 in "History 1971-1975," M-7265-185, *CBCA Collection* GA.

region well into 1973, and effectively diminished rural clients' early concerns about surveillance in their communities.¹²⁰

Moreover, the women at the CBCA assumed that a lack of knowledge about reproductive and sexual health was stopping rural women from starting their own community birth control information centers. Rural Albertans, like their urban counterparts, submitted many requests for reproductive and sexual health information and education services from the CBCA in the 1970s, underscoring the widespread “hunger” for information about sex and contraceptives post-decriminalization.¹²¹ To the surprise of many women at the CBCA, most of their rural clients had at least a foundational knowledge about birth, conception, contraception, and even abortion¹²² as it related to animal husbandry. Having worked on family farms and ranches, many rural women who sought services from the CBCA often had the upper hand on their urban counterparts who had little to no similar opportunities to learn about reproduction. Oral history narrator Francis remembered that her husband had more knowledge on the topics of reproduction and preventing pregnancies than she did because of his agricultural background. She recalled that her husband and his siblings, “grew up on the farm too, so they would know [about reproduction].”¹²³ The CBCA education team's preoccupation with outreach education and establishing “birth control and family planning information”¹²⁴ programs in rural areas were couched in inaccurate assumptions that women living in urban areas were more exposed to sex and reproductive education in the cities, than their rural counterparts.

In reality, it was often the urban instructors' own lack of knowledge about aspects of rural life, like the seeding and harvesting seasons, that limited the reach of the rural outreach project. After a year of presenting sex and birth control education workshops in rural areas, the CBCA's rural outreach team was very confused when the requests for presentations suddenly declined over the spring in 1973 as some of them encountered the agricultural calendar for the first time. The

¹²⁰ Peer Education, Community Outreach Education,” pg. 2, c. 1972, in “Educational Outreach 1978,” M-7265-101, *CBCA Collection* GA.

¹²¹ TF, interview, Jan. 24, 2013, transcript, GMA.

¹²² See reference to bovine abortion in a pamphlet on “Infectious Bovine Rhinotracheitis and Bovine Abortion” from the Saskatchewan Department of Agriculture, January 14, 1972, in “Farm Development Projects,” M2002.1, at the Esplanade Arts & Heritage Centre Archives, Medicine Hat, Alberta.

¹²³ “Francis,” interview with Karissa Patton, March 24, 2012, transcript.

¹²⁴ Peer Education, Community Outreach Education,” pg. 2, c. 1972, in “Educational Outreach 1978,” M-7265-101, *CBCA Collection* GA.

Association LIP progress report in 1973 explained the drop in educational presentations over the late spring and early summer: “The early summer months were difficult because of agricultural work that consumed most of the energies of the rural population.”¹²⁵ The instructors at the CBCA had not considered that many rural communities worked around an agricultural calendar. The education teams’ scant understandings of agricultural labour and seasons was further underscored in an earlier draft of this report, which noted “harvesting” as the barrier to early summer appointments. The activists had to correct this to “agricultural work” when someone realized that harvest happens in the fall, not the early summer.¹²⁶

As CBCA staff worried about the geographic barriers to reproductive and sexual health services, rural women in the region strategically utilized the CBCA’s outreach program to achieve their own reproductive sexual health goals. In the first two years presentation requests from schools or from local teens often had to be approved by a local school or parents’ board. The CBCA educators saw this as an impediment, but some rural teens and women used this process to get sex education curriculum on local school board agendas. The Calgary Association education team described this technique in a 1973 report:

... our request to make a school presentation is usually forwarded to a parent-teacher body or to a rural school board; these groups often conclude that it is not feasible to attempt to educate teenagers about birth control at present, when there is no on-going sex education program for our special work to fit into. Yet, considering these matters, they are forced to see that there is a current need for birth control and sex education and frequently decide to start developing a program for their teenagers. To us this means that although our outreach program may not result in an educational presentation, it usually does push community leaders into dealing with social problems they might prefer to ignore.¹²⁷

Rural women often utilized the services at the CBCA to access reproductive and sexual health information as well as to strategically pressure local policymakers to create sex and birth control education programs for the youth in their communities.

Rural women’s reproductive knowledge and political strategizing forced CBCA educators to adjust their services and approach to fit with rural communities’ need for accessible services and

¹²⁵ LIP Grant Report, pg. 3, found in “Educational Outreach: Local Initiatives Project, 1973,” M-7265-111, *CBCA Collection*.

¹²⁶ “Peer Education Community Outreach,” pg. 2, found in “Educational Outreach 1978,” M-7265-101, *CBCA Collection*.

¹²⁷ Peer Education, Community Outreach Education,” pg. 2, c. 1973, in “Educational Outreach 1978,” M-7265-101, *CBCA Collection* GA.

consciousness raising support.¹²⁸ Many rural women faced a lack of services and limited privacy in small towns and remote areas, which made them reluctant to openly seek out sex and birth control education opportunities.¹²⁹ Yet, the early iterations of the CBCA rural outreach program focused on shrinking the gap between rural communities and urban health services and knowledge. As CBCA instructors learned about agricultural calendars and harvest, small town surveillance and political strategies, and, in some cases, animal husbandry they were able to provide better outreach programs to their clients in small towns and remote areas. These lessons in rural women's difference when it came to reproductive knowledge and community organizing expanded the urban CBCA instructors' vision for their outreach programming. As the decade progressed, geographic barriers to reproductive healthcare remained a significant focus within the rural outreach program, but the outreach education team slowly acknowledged a wider set of barriers to reproductive healthcare.

English as an Additional Language Resources at the CBCA, 1972-1976

With the establishment of the rural outreach program in 1972, the CBCA educators began to recognize language as another important barrier that some women faced when accessing birth control information. Association staff and volunteers likely noticed an increasing need for educational resources for women who did not speak English or who were learning English as an additional language in the cities and in rural areas they visited. Educational literature and outreach programming were designed for English-readers and -speakers, but gradually the CBCA activists sought out new reproductive and sexual health resources for non-English speakers. The August 1972 CBCA newsletter explained that the Association had acquired a new educational film about birth control for women who did not speak English, or who spoke English as an additional language: "In the case of a language barrier, they [CBCA staff] show a cartoon film which illustrates all the birth control methods without spoken commentary, using only a music background and multi-lingual captions."¹³⁰ The newsletter does not state which languages are included in the "multi-lingual captions," or how the CBCA educators planned to engage with women about topics besides birth control, like VD, abortion, or sexuality, when there was a language barrier. The CBCA's

¹²⁸ Peer Education, Community Outreach Education," pg. 2, c. 1973, in "Educational Outreach 1978," M-7265-101, *CBCA Collection* GA.

¹²⁹ CBCA Progress Report June 1, 1972, pg. 40 in "History 1971-1975," M-7265-185, *CBCA Collection* GA.

¹³⁰ CBCA newsletter August 21, 1972, pg. 2, in "Newsletters (CBCA) 1971-1974," M-7265-240, *CBCA Collection* GA.

educational programming to address language barriers eventually expanded beyond the cartoon resource to include a one-day-course on birth control for women who spoke English as an additional language. In January 1975 the CBCA held their first course on “English for New Canadians” at the Adult Vocational Centre with the objective “to supply a functional vocabulary of terms used to describe male-female anatomy and birth control concerns to a physician.”¹³¹ The resource materials for the course at the Adult Vocational Centre and the newsletter mentioning the birth control cartoon are the only records of CBCA curriculum tailored to women’s diverse language needs for the 1970s. While language and ethnicity considerations remained a very small part of the CBCA’s outreach programming throughout the 1970s, these few sources suggest that there was an evolving understanding of women’s reproductive healthcare needs in the region.

Like much of the outreach programming at the CBCA, the few resources designed for non-English-speaking women underscored White feminist’s belief that birth control was a primary and universal concern for women, regardless of language or ethnicity. Apart from addressing language barriers, the small pool of CBCA educational resources for women who did not speak English exclusively focused on birth control and patients’ rights. In 1975 the CBCA instructors emphasized the course at the Adult Vocation Centers as providing education “as women to women,” and discussed the importance of patient rights when dealing with physicians, which aligned with other women’s health programming they offered at the CBCA.¹³² The mimicry of existing programs for non-English speaking clients suggests that the CBCA education team assumed that language was the most significant barrier that immigrant women and non-English-speaking Canadians faced as they tried to access reproductive and sexual healthcare. Small in comparison to other programs that addressed geographic barriers to reproductive healthcare, language barriers were seen as an “add-on”¹³³ to existing programs. As the women working at the CBCA tried to embrace difference among women when it came to language, they designed their non-English resource material based on the presumption that women’s biological, sexual, and reproductive intentions were universal. The Association instructors used the subtitled cartoon or, later, the English as an additional language pedagogy to enhance their existing outreach curricula in urban and rural areas.

¹³¹ Resource Outline for the Adult Vocational Centre’s English for New Canadian’s Course, January 1975, found in “Educational outreach, 1974-1976,” M-7265-100, *CBCA Collection* GA.

¹³² Resource Outline for the Adult Vocational Centre’s English for New Canadian’s Course, January 1975, found in “Educational outreach, 1974-1976,” M-7265-100, *CBCA Collection* GA.

¹³³ Nicholson, *The Second Wave*, 4.

The CBCA's Native Family Planning Program, est. 1974

CBCA educators initially included Indigenous communities as part of the rural outreach program in 1972, before creating the Native Family Planning program two years later. The Association educators' choice to amalgamate services for White rural women and Indigenous women (assumed to live on rural reserves) into one rural focused program illustrates their early assumptions about reproductive health needs in the region. In adding their Indigenous educational services to the existing rural program, the education team at the Association perpetuated the stereotype that Indigenous people only lived separately from White settlers. In line with this assumption, the educational team at the CBCA framed distance from urban health services and education as the primary concern when it came to Indigenous women's reproductive and sexual liberation. Over time Indigenous women emphasized their specific reproductive health needs and approaches while working with the Association educators.¹³⁴ Working with Indigenous women in the first half of the decade, the education team at the CBCA learned about reproductive colonialism and recognized that it was important to have Indigenous women as instructors to deliver birth control education on reserves. So, in 1974, the CBCA created a specific "Native Family Planning" program for reserve communities in collaboration with existing programs established by the Voice of Alberta Native Women's Association (VANWS).¹³⁵ Despite the coalitions between the CBCA activists and the VANWS activists in the 1970s, the Native Family Planning program curriculum focused on birth control and sexual health education, leaving the issues of coercive sterilization and child apprehension in Indigenous women's hands.

Indigenous women in 1970s Canada faced a double-edged sword when it came to reproductive and sexual healthcare. On the one hand, the women who wanted access to newly decriminalized contraceptive and abortion services first had to jump through many bureaucratic

¹³⁴ "Education Outreach, Rural Areas, 1972," M-7265-113; Notes from Jean December 15, 1972, in "Board Information Package 1977-1978," M-7265-39, "Calgary Birth Control Association Education Outreach: January to December 1973 – Native Associations," c. January 1974, in "Educational Outreach 1968-1973," M-7265-99, *CBCA Collection* GA.

¹³⁵ "Calgary Birth Control Association Education Outreach: January to December 1973 – Native Associations," c. January 1974, in "Educational Outreach 1968-1973," M-7265-99; Letter to CBCA from Edith Thompson, c. June -July 1973, in "Correspondence, 1973," M-7265-82; CBCA Progress Report, March 3, 1972, pg.2, in "History 1971-1975," M-7265-185; Letter from CBCA (Dorreen Eaglespeaker) to the Morley Band Office, February 29, 1972, in "Education Outreach, Rural Areas 1972," M-7265-113; "Calgary Birth Control Association Education Outreach: January to December 1973 – Native Associations," c. January 1974, in "Educational Outreach 1968-1973," M-7265-99, *CBCA Collection* GA.

hoops as federal and provincial governments debated whether Indigenous peoples' healthcare was a federal or provincial responsibility, and resultantly who should pay for the services.¹³⁶ Many historians have outlined how governments have implemented inadequate healthcare systems – especially reproductive health services – as part of their assimilationist and colonialist agendas in Canada and the United States.¹³⁷ On the other hand, the same provincial and federal governments had implemented policies of coerced sterilization and child apprehension, leaving Indigenous women worried about having and keeping children.¹³⁸ In the 1960s and 1970s Alberta Indigenous women became targets of the provincial eugenics program while government adoption and foster care programs were created targeting Indigenous children for apprehension.¹³⁹ Indigenous women in the province who wanted birth control faced hurdles just to access health services as other Indigenous women fought for their right to pregnancy and parenthood.

By the early 1970s when CBCA activists were establishing their outreach programs Indigenous women in the province had already been advocating for better health services for years. Indigenous women across Canada have a long history of activism and resistance.¹⁴⁰ In the late 1960s in Alberta, the Voice of Alberta Native Women's Society (VANWS) emerged as an activist powerhouse.¹⁴¹ The women running VANWS had advocated for improved health services, including reproductive health, on reserves since their founding in 1968. In their first year of operation alone, VANWS activists established necessary health information services within homemakers clubs and friendship centres across the province and created a Community Health Worker program with the

¹³⁶ Notes from Jean December 15, 1972, in "Board Information Package 1977-1978," M-7265-39, *CBCA Collection* GA; Dyck, *Facing Eugenics*, 56-57; Maureen Lux, *Separate Beds: A History of Indian Hospitals in Canada, 1920s-1980s*, (Toronto: University of Toronto Press, 2016).

¹³⁷ Lux, *Separate Beds*, (2016); Gurr, *Reproductive Justice*, (2015); Ross & Solinger, *Reproductive Justice*, 17.

¹³⁸ Dyck, *Facing Eugenics*, 80-83; Allyson Stevenson, "Intimate Integration: A Study of Transracial Adoption in Saskatchewan, 1944-1984," (Ph.D. Diss., University of Saskatchewan, 2015), 60-67, 257-263.

¹³⁹ Dyck, *Facing Eugenics*, 80-83; Alyson Stevenson, "Intimate Integration: A Study of Transracial Adoption in Saskatchewan, 1944-1984," (Ph.D. Diss., University of Saskatchewan, 2015), 60-67, 257-263.

¹⁴⁰ Sarah A. Nickel, *Assembling Unity: Indigenous Politics, Gender, and the Union of BC Indian Chiefs*, (Vancouver, University of British Columbia Press, 2019); Kathryn Magee, "'For Home and Country': Education, Activism, and Agency in Alberta Native Homemakers' Clubs, 1942-1970," *Native Studies Review* vol.18 no. 2 (2009), 27-49.

¹⁴¹ Report of First Alberta Native Women's Conference, March 12-15, 1968, pg. 32, in "VANWS Conferences, 1968-1971," 10-00156-137-1, University of Ottawa Women's Archives.

cooperation of many Indigenous nations across the province.¹⁴² By 1972, the VANWS Community Health Workers program was renamed Native Community Services and received LIP funding to hire “caseworkers.”¹⁴³ These caseworkers provided health information on hygiene, sanitation, communicable disease, and family health and worked with “Public Health nurses and other services that are available for Indian people from Public Health, Medical, and all other services; [acting] as an interpreter when necessary.”¹⁴⁴ Within four years of operation, the women running VANWS, along with their many contacts within the many nations across the province, had created and established a robust provincial health program for Indigenous communities by Indigenous women.

Indigenous-led health programs were essential in the 1960s and 1970s as many Indigenous women were weary of outsiders touting birth control. In the early 1970s, as women celebrated their legal right to access birth control and TAC abortions across Canada, the province’s eugenics legislation and practices were still in effect.¹⁴⁵ The women involved with VANWS had already experienced their fair share of colonialist birth control “education” by the early 1970s. At the VANWS’s Native Women’s Conference in 1969, for instance, a presentation on birth control by Dr. Douglas Ringrose ended poorly. Conference attendee, Bernice Fox (Kainai Blackfoot Confederacy) wrote about Ringrose’s presentation in the *Kainai News*, explaining that Ringrose “... emphasized that all women should be taking birth control pills – and even had devices on display and explained in every detail how they work. It was very disgusting because the undertone of his talk was that the ‘government is trying to get rid of Indians.’”¹⁴⁶ While the inclusion of a presentation about birth control illustrates that Indigenous women were engaging with the emergent contraceptive mentality, Fox’s disgust with the way Ringrose presented the topic reveals a long history of reproductive colonialism in the province. Presentations from White medical professionals like Ringrose paired

¹⁴² “Homemakers Clubs,” and “Friendship Centres,” in the Alberta Native Women’s conference Recommendations, 1968. Found in *Voice of Alberta Native Women’s Society* at the Provincial Archives of Alberta, Edmonton, Alberta, PR1999-0465-249; Report of First Alberta Native Women’s Conference, March 12-15, 1968, pg. 32, in “VANWS Conferences, 1968-1971,” 10-00156-137-1, University of Ottawa Women’s Archives.

¹⁴³ “VANWS report on the Second Annual Conference,” March 1969, pg. 21. Found in *Voice of Alberta Native Women Society* at the Provincial Archives of Alberta, Edmonton, Alberta, GR1979-0152-85.

¹⁴⁴ “VANWS report on the Second Annual Conference,” March 1969, pg. 21. Found in *Voice of Alberta Native Women Society* at the Provincial Archives of Alberta, Edmonton, Alberta, GR1979-0152-85.

¹⁴⁵ Dyck, *Facing Eugenics*, 25.

¹⁴⁶ Bernice Fox, “Alberta Native Women’s Conference: “We Are Responsible,”” *Kainai News* March 15, 1969, pg. 1-2.

with the eugenics and adoption policies in the province were part of a larger colonialist goal of diminishing Indigenous populations and destroying Indigenous culture; understandably, many Indigenous women wary of outsiders pedalling birth control information, including physicians and White feminists who uncritically presented birth control as a modern option for all women at the turn of the 1970s.

By the early 1970s, the CBCA had emerged as a community service that helped Indigenous women navigate complex health bureaucracies to access reproductive and sexual healthcare. Women working at the CBCA had developed an on-the-ground understanding of healthcare bureaucracy and often utilized their networks of health professionals to help Indigenous women access reproductive health services. Facing discrimination from medical professionals and health policy bureaucrats, Indigenous women who lived in Calgary, small towns, or reserves often came to the CBCA and LBCIC for their reproductive and sexual health needs in the 1970s.¹⁴⁷ Overworked or unsympathetic health professionals from other family planning clinics and programs in Calgary also sent Indigenous clients to the CBCA for their sexual health, abortion, or birth control needs.¹⁴⁸ One client's experience captured in Jean's volunteer "diary" entries illustrates the complex healthcare situations Indigenous women faced in the 1970s. Jean's December 15, 1972 entry described her interaction with "Mrs. B.:"

'Sit down and tell me your problem.' 'I have v.d. [sic] I've been for a penicillin shot. They gave me some antibiotics too. I told them I was pregnant, and they sent me to the Family Planning Clinic. They wouldn't talk to me there and said to go and see you.' I explain the different hospitals' procedures and then bring up the money part. That has to always be discussed so there are no problems when the girl goes for her appointment. 'I am living common-law. We are on welfare and welfare knows me only as Mrs. _____. No, the Indian Affairs wouldn't help. I came from some place in Manitoba. We have no money. No, I can't remember my worker's name, but he is Hindu. I go to the South Side welfare office.' All this in answer to my questions. 'Gosh, dear, I just can't send you to a doctor from here, under these circumstances. I'll call your worker and we'll work together.' Call Social Development, Mr. Bashk, her worker is out for the rest of the day. Talk to his secretary. Yes, welfare pays her medical expenses, but secretary hasn't run into an abortion case before and just doesn't know ----- Make an appointment for Mrs. B. to see Mr. Bashk Monday morning, December 18, at 9 a.m. (she wouldn't tell me her correct name). 'I have to have another penicillin

¹⁴⁷ Notes from Jean December 15, 1972, in "Board Information Package 1977-1978," M-7265-39, *CBCA Collection* GA; Petition in support of the LBCIC c. April 1974, 2011.1085 069, *Early City Record Collection* at the Galt Museum and Archives, Lethbridge (ECRC GMA).

¹⁴⁸ Notes from Jean December 15, 1972, in "Board Information Package 1977-1978," M-7265-39, *CBCA Collection* GA.

shot on Monday morning.’ ‘That’s O.K. They open at 8:30. Be there, then head straight for the S.D. office.’¹⁴⁹

Jean’s recounting of her counselling session with Mrs. B, exemplifies the many hoops Indigenous women had to jump through to access reproductive and sexual health services even after decriminalizing contraception and implementing reproductive health services in the province. In Mrs. B’s particular case seeking abortion services and a prescription for VD in 1972, she had consulted Welfare services, Indian Affairs, and the Calgary Family Planning Clinic (a different state-run entity than the birth control centre) before coming to the Calgary Association. Mrs. B had been bounced around from one organization to the next, with no clear guidance for accessing the services she desired, or confirmation about whether Welfare or Indian Affairs would pay for these kinds of services.¹⁵⁰ Her experience reveals a colonial system that privileged dollars and cents over easily accessible health services for Indigenous women.¹⁵¹

While the interaction between Jean and Mrs. B suggests that the CBCA was one of few places that adequately helped Indigenous women navigate colonialist healthcare policies, parts of the interaction also reveal the complex relationship between White and Indigenous women during the decade. Jean navigated colonialist healthcare policy to get Mrs. B the services she needed and quickly, but her entry also reveals that she was grappling with her own White bias. At the beginning of Jean’s diary entry about Mrs. B, she wrote, “Little Indian girl walked in (you think, why do you say Indian, you don’t say White).”¹⁵² Jean did not record Mrs. B’s age, the entry suggests that Mrs. B was an adult, at least over eighteen. Jean’s description of “little Indian girl,” discursively others and infantilizes Mrs. B. Although Jean is reflexive about qualifying the client as “Indian,” her White paternalism peeks through her otherwise empathetic demeanour during her time with Mrs. B. Perhaps Jean’s White paternalism was obvious to Mrs. B as well who refused to tell Jean her “correct name.”¹⁵³ These small but significant moments between Jean and Mrs. B captured in Jean’s

¹⁴⁹ Notes from Jean December 15, 1972, in “Board Information Package 1977-1978,” M-7265-39, *CBCA Collection* GA.

¹⁵⁰ Notes from Jean December 15, 1972, in “Board Information Package 1977-1978,” M-7265-39, *CBCA Collection*.

¹⁵¹ Maureen Lux, *Separate Beds: A History of Indian Hospitals in Canada, 1920s-1980s*, (Toronto: University of Toronto Press, 2016).

¹⁵² Notes from Jean December 15, 1972, in “Board Information Package 1977-1978,” M-7265-39, *CBCA Collection* GA.

¹⁵³ Notes from Jean December 15, 1972, in “Board Information Package 1977-1978,” M-7265-39, *CBCA Collection* GA.

recollections suggest that even as the CBCA earned a reputation for navigating complex reproductive healthcare policies, Indigenous-settler relations within the CBCA continued to bear hallmarks of colonialism or colonial attitudes.

As the CBCA launched their rural outreach program in 1972, the White women working at the Association built coalitions with Indigenous women in the province. The staff at the CBCA hired Dorreen Eaglespeaker (Kainai, Blackfoot Confederacy) in 1972 to “investigate the possibility of presenting this educational program on the reserves” as part of the rural outreach program.¹⁵⁴ Eaglespeaker vouched for the CBCA outreach program as she built connections with other Indigenous women across various nations in the region.¹⁵⁵ With Eaglespeaker’s help, the CBCA educators were invited to present at the 1972 VANWS conference in Olds, Alberta.¹⁵⁶ Following the conference, the CBCA’s outreach coordinators and the VANWS Native Community Services’ caseworkers decided to work together to provide better reproductive and sexual health education for reserve communities. Women working at the CBCA provided pamphlets and other resources to Native Community Services and offered training on reproduction, birth control, and human sexuality information for the VANWS caseworkers throughout 1972 and 1973.¹⁵⁷ As their collaborations with VANWS expanded the CBCA’s reputation as a hub for reproductive and sexual healthcare reached other Indigenous birth control initiatives in the province. In 1973 and 1974, CBCA staff member Rosalee Lewis worked with Dorothee Haenschke to establish a family planning service at the Slave Lake Friendship Centre. The CBCA provided training for the personnel at the Friendship Centre and offered guidance for their LIP grant application throughout 1973.¹⁵⁸ By 1974 the Slave Lake Friendship Centre’s Family Planning Services was a fully funded LIP program.¹⁵⁹

¹⁵⁴ “Summary of Local Initiatives Projects in Family Planning: Winter 1971-1972,” compiled by the Family Planning Federation of Canada, in “History 1971-1975,” M-7265-185, *CBCA Collection* GA.

¹⁵⁵ CBCA LIP Progress report April 10, 1972, in “History 1971-1975,” M-7265-185; Contact and presentation information on Brocket in “Educational Outreach, Rural Areas, 1972,” M-7265-113; CBCA Local Initiatives Project, Spring 1973, in “Education Outreach, Local Initiatives Project, 1973,” M-7265-111, *CBCA Collection* GA.

¹⁵⁶ CBCA LIP Progress report April 10, 1972, in “History 1971-1975,” M-7265-185. Found in the *Calgary Birth Control Association Collection* at the Glenbow Archives, Calgary, Alberta.

¹⁵⁷ Letter to CBCA from Edith Thompson, c. June -July 1973, in “Correspondence, 1973,” M-7265-82, *CBCA Collection* GA.

¹⁵⁸ Letter from Dorothee Haenschke to Rosalee Lewis, August 31, 1973, found in “Correspondence 1973,” M-7265-82, *CBCA Collection* GA.

¹⁵⁹ Chart compiled by Alberta Family Planning Co-ordinating Committee in 1974. Found in “Alberta Family Planning Co-Ordinating Committee 1975,” M-7265-20, *CBCA Collection* GA.

Between Eaglespeaker's work, the connections made at the VANWS conference, and the work with the Slave Lake Friendship Centre, the White women working at the CBCA gradually learned about Indigenous women's specific reproductive health concerns but were slow to recognize Indigenous women's own reproductive health knowledge. Similar to the outreach instructors' assumptions about rural communities, some women working at the CBCA were surprised to learn that Indigenous women were the knowledge keepers of reproductive health practices, "handed down from their mothers or grandmothers."¹⁶⁰ In 1974, the CBCA's Martha Weir wrote about a presentation by three Indigenous women from Alberta who shared their knowledge of contraception with the Family Planning Federation of Canada:

...These women began to talk informally about their own experiences with traditional methods of birth control, sterilization and abortion, and about the stories handed down from their mothers or grandmothers about the functions of the tribal medicine women. What came as a welcome surprise to the family planners (most of whom can be characterized as white, middle-class urbanized Canadians) was not so much the efficacy attributed to these methods as the cultural inclination to accept them. The discussions which ensued reassured all of us that native people are more than willing to have and use information on birth control, sterilization, and venereal disease as well as on abortion in some cases.¹⁶¹

Weir continued that in light of this presentation, she wanted to "expand our [CBCA] contacts among native people, both in the city and on reserves..."¹⁶² Weir's excitement and surprise at the Indigenous women's traditional reproductive health knowledge underscored her assumptions that "white, middle-class urbanized Canadians" were more educated about reproductive and sexual health than their Indigenous counterparts. By 1974, Weir remained an affiliate with the CBCA but was no longer a part of their day-to-day operation, so it is likely that other women from the CBCA who were actually working with Indigenous women had already been schooled in traditional Blackfoot or Cree reproductive health practices. Even if Weir was late to this realization, her letter reflects broader assumptions about reproductive health knowledge as universal.

The same year that Weir called for expanded alliances between White and Indigenous family planners, the women at the CBCA and the women running VANWS officially joined forces and

¹⁶⁰ Letter to Leslie Bella from Martha Weir, November 21, 1974 in "Funding Source Health and Welfare," M-7265-164, *CBCA Collection* GA.

¹⁶¹ Letter to Leslie Bella from Martha Weir, November 21, 1974, in "Funding Source Health and Welfare," M-7265-164, *CBCA Collection* GA.

¹⁶² Letter to Leslie Bella, M-7265-164, *CBCA Collection* GA.

created the “Native Family Planning” program.¹⁶³ The women at the CBCA applied for LIP funding to “train native women to work within their community, increasing preventative education in the area of birth control, VD, and human sexuality,”¹⁶⁴ and VANWS caseworkers provided educational services and information to women on reserves in the province.¹⁶⁵

The Native Family Planning Program was unique from other CBCA outreach projects in many ways, indicating that the White outreach coordinators at the CBCA came to recognize and address some of their Indigenous sisters’ reproductive healthcare needs. Early progress reports about the Native Family Planning program from the CBCA acknowledged that Indigenous communities had specific needs that “trained indigenous workers should deal with.”¹⁶⁶ The Association outreach coordinators stepped back and took on the role of facilitators as Indigenous women led the Native Family Planning outreach program. The CBCA staff utilized LIP funds and their extensive training programs to set VANWS caseworkers up for success, but ultimately set up the program so caseworkers worked independently from the Association: “We plan to hire two office workers (a nurse and a social worker) and six half-time caseworkers. Indigenous personnel will enable them to work more independently of the office staff during the remainder of the project.”¹⁶⁷ While the new program offered group presentations and workshops like the other CBCA outreach projects, the Native Family Planning curriculum uniquely focused on one-on-one educational services provided by Indigenous caseworkers for Indigenous communities.¹⁶⁸ These specific aspects of the Native Family Planning program stood out from other outreach curricula and pedagogy at the CBCA, suggesting that the Association education team followed Indigenous women’s lead. Addressing the fact that the long history of reproductive colonialism, which made many Indigenous women suspicious of outsiders, the Native Family Planning project was designed for one-on-one educational session provided by Indigenous caseworkers. White CBCA educators conceded control

¹⁶³ Correspondence between CBCA (Rosalee Lewis) and National Health and Welfare, November 21, 1974, in “Funding Source Health and Welfare,” M-7265-164, *CBCA Collection* GA.

¹⁶⁴ Brief on the LBCIC to the Community Services Advisory Committee, GR1983-0133, box 1, file 5, found in *Lethbridge Birth Control Association* PAA.

¹⁶⁵ Correspondence between CBCA (Rosalee Lewis) and National Health and Welfare, November 21, 1974, in “Funding Source Health and Welfare,” M-7265-164, *CBCA Collection* GA.

¹⁶⁶ Correspondence between CBCA (Rosalee Lewis) and National Health and Welfare, November 21, 1974, in “Funding Source Health and Welfare,” M-7265-164, *CBCA Collection* GA.

¹⁶⁷ “Peer Education Community Outreach,” pg. 2. Found in “Educational Outreach 1978,” M-7265-101, *CBCA Collection* GA.

¹⁶⁸ Correspondence between CBCA (Rosalee Lewis) and National Health and Welfare, November 21, 1974, in “Funding Source Health and Welfare,” M-7265-164, *CBCA Collection* GA.

of Indigenous outreach services and stepped up as facilitators to support existing Indigenous-led projects in the province.

Despite the coalitions between the CBCA and VANWS and the White outreach coordinators' recognition of Indigenous women's knowledge and pedagogy, the Native Family Planning program perpetuated White activists' concerns about geographic barriers to reproductive health services. The women at the CBCA pushed beyond their own lived experiences and recognized the need for educational program for Indigenous women by Indigenous women. Even in these moments when White CBCA activists heeded the guidance of Indigenous women, the Native Family Planning program was still designed for outreach education on reserves that prioritized barriers of distance from health services.¹⁶⁹ For the White outreach coordinators, closing the gap between reserve communities and urban health services and education was paramount. The method of closing the geographical gap, whether it was through a CBCA workshop or a one-on-one session with an Indigenous caseworker, did not matter to the White women at the centres as long as their educational outreach services were accessible across the region. And while Indigenous women living on remote reserves or in small towns faced the same spatial barriers as their White rural counterparts, the focus on geography within the Native Family programming eclipsed Indigenous women's specific concerns about reproductive colonialism regardless of distance from the service.

Similarly, as the women running the CBCA recognized the need for Indigenous women, rather than White women, to deliver birth control information on reserves, they failed to recognize how Indigenous women's concerns about coercive sterilization and child apprehension fit into their purview of reproductive and sexual health services. Most of the training offered for Indigenous caseworkers focused on "birth control, VD, and human sexuality."¹⁷⁰ The alliance forged between women at the CBCA and VANWS activists were built around a White feminist agenda that conceptualized birth control and abortion as the key to women's reproductive liberation. Indigenous women in the province had to rely on their own Indigenous women's communities to address issues of coercive sterilization and child apprehension in the province.¹⁷¹ This created a complex

¹⁶⁹ Royden Loewen and Gerald Friesen, *Immigrants in Prairie Cities: Ethnic Diversity in Twentieth-Century Canada*, (Toronto: University of Toronto Press, 2009), 57; Notes from Jean December 15, 1972, in "Board Information Package 1977-1978," M-7265-39, *CBCA Collection* GA.

¹⁷⁰ Brief on the LBCIC to the Community Services Advisory Committee, GR1983-0133, box 1, file 5, found in *Lethbridge Birth Control Association* PAA.

¹⁷¹ Report of the VANWS Foster Care Program (October 1975-June 1976) PR1999.0465.78, pg. 1, at the Provincial Archives Of Alberta, Edmonton, Alberta.

relationship between White feminists and Indigenous women's rights activists in 1970s Alberta. The labour of White women at the CBCA to run the Native Family Planning program meant VANWS organizers had more time to dedicate to other, and often more important, issues on their agenda. When White feminists failed to recognize reproductive colonialism, however, Indigenous women were often burdened with the additional emotional and mental labour of explaining their needs to their White counterparts.¹⁷² Even after hearing about, and witnessing, the reproductive colonialism that Indigenous women faced, the Association activists assumed that the geographic barriers to contraceptive and abortion services they had experienced themselves were the primary concern for all southern Alberta women. In doing so, even when working with Indigenous women to bring sexual health outreach programs to reserve communities, birth control centre educators failed to adequately integrate more diverse visions for reproductive health activism that included Indigenous women's feminism and family planning objectives.

Alliances & Assumptions: The Presumed Heterosexuality of Reproductive Health

The 1969 legislation that had decriminalized birth control and TAC abortions in Canada similarly removed homosexual acts from the Criminal Code.¹⁷³ Decriminalization allowed reproductive rights and gay liberation activists to lobby for reproductive and sexual liberation in Canada without the threat of arrest or persecution, and both movements became increasingly visible following the passing of the 1969 Omnibus Bill.¹⁷⁴ Yet, neither abortions nor same-sex sexuality were fully decriminalized in Canada in 1969. As abortions continued to be policed through TACs, gay people, especially gay men, were arrested at increasing rates throughout the 1970s and 1980s under indecency laws.¹⁷⁵ As historians Valerie Korinek, Thomas Hooper, and Tom Warner have shown, in some places, including Calgary, the threat of police violence under the guise of enforcing

¹⁷² Nancy Janovicek, *No Place To Go: Local Histories of the Battered Women's Shelter Movement*, (Vancouver: University of British Columbia Press, 2007), 11.

¹⁷³ Tom Warner, *Never Going Back: A History of Queer Activism in Canada* (Toronto: University of Toronto Press, 2002), 100.

¹⁷⁴ Warner, *Never Going Back*, 100.

¹⁷⁵ Although it is important to note that the 1969 omnibus Bill C-150 only partially decriminalized abortion and homosexuality. The state continued to restrict and police abortion through the TACs, while gay men, in particular, were arrested at increasing rates throughout the 1970s and 1980s for under indecency laws. See, for example: Kevin Allen, "Our History with the Police," *Calgary Gay History* July 27, 2017, accessed May 28, 2020, <https://calgarygayhistory.ca/2017/07/27/our-history-with-the-police/>.

indecent laws was paired with social discrimination of queer people that persisted in the 1970s.¹⁷⁶ The stories of queer people and communities Korinek shares in *Prairie Fairies* reveal that particularly in Alberta many people did not feel safe outing themselves as gay to their neighbours or colleagues.¹⁷⁷ The complex legal and social landscape for queer people in the 1970s both propelled gay liberation activism and stifled some individual's choices to be "out" as gay.¹⁷⁸ The tumultuous legal and social landscapes queer people faced significantly shaped the politics of feminist reproductive rights organizing.¹⁷⁹

As some lesbian feminists began to splinter off from women's liberation groups in larger urban centres across Canada and the United States,¹⁸⁰ straight and lesbian feminists in southern Alberta relied on unity to keep their activism afloat in the early 1970s.¹⁸¹ Oral history narrator Rita Moir, a straight feminist activist, explained "separatist" movements in Lethbridge "just couldn't have worked [because] there wouldn't have been enough people."¹⁸² She recalls that women activists in the region were "far more likely to form coalitions because we didn't have a critical mass of people," like larger urban-centres such as Montreal, Vancouver, or Toronto.¹⁸³ She remembers that the Lethbridge women's liberation group and the LBCIC "brought together people who wanted to talk about the same thing and grapple with the same issues" across generations and identities.¹⁸⁴ Like Moir, oral history narrator Micah describes the various class and labour backgrounds of her feminist cohort in Calgary in the 1970s.¹⁸⁵ Micah was married to a man when she first moved to Calgary in

¹⁷⁶ Tom Warner, *Never Going Back: A History of Queer Activism in Canada* (Toronto: University of Toronto Press, 2002), 100; Thomas Hooper, "More Than Two Is a Crowd: Mononormativity and Gross Indecency in the *Criminal Code*, 1981-82," *Journal of Canadian Studies* 48, no. 1 (2014): 68; Korinek, *Prairie Fairies*, 214-216, 355-357.

¹⁷⁷ Korinek, *Prairie Fairies*, 214-216, 355-357.

¹⁷⁸ Korinek, *Prairie Fairies*, 214-216, 355-357

¹⁷⁹ Korinek, *Prairie Fairies*, 197-198.

¹⁸⁰ Candice Klein, "'Sisterhood is powerful but not easy': Conflict, American Imperialism, and Splintering the 1971 Vancouver Indochinese Women's Conference," (MA Thesis, Simon Fraser University, 2015), 66-69.

¹⁸¹ RM, interview, Oct. 7, 2014, transcript, GMA; Micah, interviewed by Erin Flegg, August 1, 2013, video interview, available at the Archives of Lesbian Oral Testimony, <https://www.alotarchives.org/content/micah-and-erin>.

¹⁸² RM, interview, Oct. 7, 2014, transcript, GMA.

¹⁸³ RM, interview, Oct. 7, 2014, transcript, GMA.

¹⁸⁴ RM, interview, Oct. 7, 2014, transcript, GMA.

¹⁸⁵ She describes her Calgary "social circle" a diverse group of women that mixed, "women who didn't have a lot of education," prostitutes and former prostitutes, and daughters of billionaires. See: Micah, interviewed by Erin Flegg, August 1, 2013, video interview, available at the Archives of Lesbian Oral Testimony, <https://www.alotarchives.org/content/micah-and-erin>.

the early 1970s and then came out as a lesbian a few years later. She also likely worked with the CBCA as an outreach educator during some of her time in the city. She recalls working “doing outreach sex education for a family planning agency in Calgary” that required her to “go all over southern Alberta to the little itty-bitty towns...”¹⁸⁶ Similar to Moir’s recollections about the feminist community in Lethbridge, Micah described the 1970s feminist community in Calgary as “a wonderful, small, very close-knit, very accepting women’s community – which it would have to be in a place like Calgary. Nobody could afford to be that kind of picky. ... we got along because we needed each other.”¹⁸⁷ Her memories, like Moir’s recollections, reveal that these small feminist communities in Lethbridge and Calgary relied on activist unity, across class, sexuality, and cause lines to ensure their success in the region. Both active in southern Alberta in the early 1970s, Rita and Micah’s memories of unity and collaboration are likely a reflection of the time rather than an indication that lesbian women stayed within heteronormative feminist groups without criticism throughout the decade. Korinek argues that “it is only in the late 1970s through to the mid-1980s that one can see these divides [between lesbian feminists and straight feminists, lesbians and gay men activists] being breeched” on the prairies.¹⁸⁸ During much of the decade, the regional necessity of unity both encouraged coalitions and stifled some women’s voices in the movement.

Post-decriminalization, the limited public-knowledge about homosexuality, and in some cases homophobia, fuelled CBCA and LBCIC staff’s stereotypes about gay men and women as the “other.” Adrienne Rich’s iconic 1982 essay “Compulsory Heterosexuality and Lesbian Existence” demonstrated that “lesbian experience is perceived on a scale ranging from deviant to abhorrent or simply rendered invisible” within mainstream feminist movements.¹⁸⁹ Her work and the work of others illustrate how homosexuality was considered uncommon or abnormal continued to fuel early 1970s feminist thought in Canada and the United States.¹⁹⁰ Candice Klein outlines that in the early

¹⁸⁶ She describes her Calgary “social circle” a diverse group of women that mixed, “women who didn’t have a lot of education,” prostitutes and former prostitutes, and daughters of billionaires. See: Micah, interviewed by Erin Flegg, August 1, 2013, video interview, available at the Archives of Lesbian Oral Testimony, <https://www.alotarchives.org/content/micah-and-erin>.

¹⁸⁷ Micah, interviewed by Erin Flegg, August 1, 2013, video interview, available at the Archives of Lesbian Oral Testimony, <https://www.alotarchives.org/content/micah-and-erin>.

¹⁸⁸ Korinek, *Prairie Fairies*, 115.

¹⁸⁹ Rich, “Compulsory Heterosexuality,” 229.

¹⁹⁰ Rich, “Compulsory Heterosexuality,” 229; Shulamith Firestone, “The Dialectic of Sex,” in *The Second Wave: A Reader in Feminist Theory* ed. Linda Nicholson (New York & London: Routledge, 1997); Candice Klein, “‘Sisterhood is powerful but not easy’: Conflict, American Imperialism, and Splintering the 1971 Vancouver Indochinese Women’s Conference,” (MA Thesis, Simon Fraser

1970s some feminist organizers' heteronormativity manifested in their assumptions that lesbian women looked and acted differently from straight women. She describes the experience of one Vancouver feminist organizer, named Cyndia Cole, meeting an out lesbian for the first time in 1971: "the young woman standing before her wore long hair, a tucked in blouse, short skirt and stockings – nothing that matched Cole's expectations of a stereotypical lesbian at the time."¹⁹¹ Like Cole, LBCIC educator Pauline Hoskin admitted that her exposure to specific gay neighbourhoods while growing up in Toronto reinforced certain stereotypes about "what a homosexual was like."¹⁹² Hoskin explained that there were physical neighbourhoods in Toronto "where homosexuals tended to live," and these neighbourhoods had a specific gay culture, "certain ways of dressing and talking," that stood out to her as an outsider.¹⁹³ When she moved to Lethbridge and began working at the LBCIC, Hoskin thought there were no gay people in the city due to the absence of a queer neighbourhood. Reflecting on her time at the LBCIC she stated: "in Lethbridge [gay people] were normal people. They had children and they had friends and they interacted with everybody else. You did not know that they were homosexual. So, you know, when I look back, yes there were homosexuals. But at the time, they were normal people – they weren't that [stereotype]."¹⁹⁴ Hoskin's assumption that queer men and women were "other" or not "normal" in the 1970s meant that they remained "hidden"¹⁹⁵ from the LBCIC's assessment of community need throughout the decade. Micah's colleagues (likely from the CBCA) also perpetuated the concept of homosexuality as "other" and abnormal. Despite her memories of unity Micah recalled that some of her sex education colleagues often told her that her sexual attraction to women was "a phase."¹⁹⁶ These comments about Micah's sexuality, fuelled by homophobia or assumptions that a "normal" women like her were not lesbians, reveals a significant bias about same-sex sexuality from the straight-identifying CBCA educators. These assumptions about homosexuality from the birth control centre activists in

University, 2015), 65; Thea Cacchioni, *Big Pharma, Women, and the Labour of Love*, (Toronto: University of Toronto Press, 2015), 10-19 114-117.

¹⁹¹ Candice Klein, "'Sisterhood is powerful but not easy': Conflict, American Imperialism, and Splintering the 1971 Vancouver Indochinese Women's Conference," (MA Thesis, Simon Fraser University, 2015), 65.

¹⁹² Pauline Hoskin, interview with Karissa Patton, December 20, 2017, transcript.

¹⁹³ Pauline Hoskin, interview with Karissa Patton, December 20, 2017, transcript.

¹⁹⁴ Pauline Hoskin, interview with Karissa Patton, December 20, 2017, transcript.

¹⁹⁵ Pauline Hoskin, interview with Karissa Patton, December 20, 2017, transcript.

¹⁹⁶ Micah, interviewed by Erin Flegg, August 1, 2013, video interview, available at the Archives of Lesbian Oral Testimony, <https://www.alotarchives.org/content/micah-and-erin>.

the early 1970s effectively carved lesbian women's experiences and needs out of both centres purview.¹⁹⁷

Ironically, while many women at the CBCA and LBCIC assumed that gay people were a small and distinct minority of the population, the birth control centre sexuality curricula included discussions *about* homosexuality that emphasized same-sex sexuality as normal and healthy. Women working at the southern Alberta birth control centers discussed homosexuality in some of their sexuality seminars and workshops throughout the decade.¹⁹⁸ Most of these discussions focused on debunking medical or legal theories about homosexuality as deviant, a pathologized disorder, or a crime.¹⁹⁹ Oral history narrator, Judy Burgess remembers being taught that gay people were “sexually deviant” in her nursing courses in 1970 and 1971.²⁰⁰ When she opened the LBCIC she actively resisted this medical pathologization of homosexuality and taught Centre clients that same-sex sexuality was “normal” and “healthy.”²⁰¹ Early educational resource materials from the CBCA indicate that the Association educators often answered questions like “what are the views of a homosexual?” and “why is homosexuality considered to be something that people slur?”²⁰² In response, some sexuality workshops offered by the CBCA critiqued social definitions about normal sexuality. One resource guide for the CBCA's Sexuality and Sex Role workshop in 1975 included guided discussions about how “society has developed a framework for sexual expression – heterosexual, married, privacy.”²⁰³ In this workshop the Association instructors challenged participants to think about homosexuality, as a valid sexual expression, break down social assumptions about sexual norms.²⁰⁴ These CBCA and LBCIC workshops that rejected systemic legal, medical, and social discrimination against homosexuals do not align with the personal

¹⁹⁷ “A Letter from Sappho” in *Up* vol. 2 no. 2 (February 1975), pg. 14-15. Found in HQ 1480.L47.U6 at the University of Ottawa Women's Archives, Ottawa, Ontario.

¹⁹⁸ “Questions asked during Parent Discussion Group: Homosexuality,” c. 1968, in “Educational Outreach 1968-1972,” M-7265-99, *CBCA Collection* GA; “The Services We Provide,” Newsletter of the LBCIC, November 1, 1976, *LBCIC, 1973-1975* GMA.

¹⁹⁹ Resource Outline for Sexuality and Sex Roles Workshop, c. 1975 in “Education Outreach, 1974-1976,” M-7265-100, *CBCA Collection* GA.

²⁰⁰ JB, interview, Dec. 14, 2014, transcript, GMA.

²⁰¹ JB, interview, Dec. 14, 2014, transcript, GMA.

²⁰² “Questions asked during Parent Discussion Group: Homosexuality,” c. 1970, in “Educational Outreach 1968-1972,” M-7265-99, *CBCA Collection* GA.

²⁰³ Resource Outline for Sexuality and Sex Roles Workshop, c. 1975 in “Education Outreach, 1974-1976,” M-7265-100, *CBCA Collection* GA.

²⁰⁴ Resource Outline for Sexuality and Sex Roles Workshop, c. 1975 in “Education Outreach, 1974-1976,” M-7265-100, *CBCA Collection* GA.

heterosexism of the birth control centre educators. The focus on gay peoples' rights within legal, medical, and social spaces ultimately aligned with the women's health and difference feminist models practiced at the CBCA and LBCIC. The way homosexuality was discussed in these outreach materials suggest that the women working at the birth control centres understood sexuality rights for gay people as they related to similar rights they, as straight women, were also fighting for: the examples of the medical pathologization and oppression of homosexuality reinforced their own calls for new medical models and systems that oppressed women patients; and framing homosexuality as normal bolstered their own efforts to break down social norms that placed "moral" sexual activity within the confines of marriage and procreation.

Homosexuality was included in certain CBCA and LBCIC curricula as it pertained to women's liberation goals. As Linda Nicholson argues, even as 1970s feminists engaged with the concept of difference among women many assumed that "the effects of race, class, sexuality, etc. merely 'added on' to this commonality in gender."²⁰⁵ CBCA and LBCIC educators recognized that gay people were often oppressed by the same social, legal, and medical systems that oppressed women's sexual and reproductive liberation. The birth control centres staff's assumptions of women and gay people's common oppression, spilled over into their outreach curriculums. The birth control centres' instructors categorized educational topics about reproductive organs and physiology, the human sexual response, and VD as biologically and sexually universal leaving no need for tailored curriculums for different populations. And education teams at the centres presumed that gay people would not procreate so deemed topics about reproduction, birth control, prenatal and maternal health as irrelevant to gay people. These assumptions about common oppression, sexual responses as universal, and reproduction as exclusively heterosexual permeated the birth control centres educational programming throughout the decade. The 1970s outreach programs at the southern Alberta birth control centres effectively siloed queer people and sexuality as a convenient add-on to support women's health and liberation politics.

Preventative Sex Education for Teens: Age, Responsibility, and Sexual Liberation

As the incorporation of geography, language and ethnicity, indigeneity, and sexuality ebbed and flowed in the CBCA's outreach programming throughout the decade, age and marital status also arose as a criterion that activists felt needed careful attention when it came to educational

²⁰⁵ Nicholson, *The Second Wave*, 4.

programing. Throughout the 1970s, sex and contraceptive education curricula for teens and unmarried young adults were prominent in the Centre and Association outreach programs.²⁰⁶ Upon their respective openings, the CBCA and LBCIC's outreach services focused heavily on programs for teens, parents of teenagers, and unmarried young adults.²⁰⁷ Even as more specific programs for rural and Indigenous communities emerged in the birth control centers curricula, the need for comprehensive sex education for teens remained a major concern.²⁰⁸ The White women working at the birth control centres easily related to the stigma, surveillance, and paternalistic policies that other young women faced when trying to access contraceptives.²⁰⁹ Some of the birth control staff and volunteers were unmarried young adults themselves who fought with pharmacists and physicians about their right to access contraceptives without their parents' permission.²¹⁰ But, moral panic about teenage pregnancy also fuelled the CBCA's outreach education for teens.²¹¹ The educators at the CBCA and LBCIC characterized their outreach programs for teens as important preventative social services.²¹² In doing so, the CBCA education team often promoted teens' rights to sex

²⁰⁶ Letter to the CBCA from Sandra Morris, Michelle O'Reilly, and Dana Fisher, December 6, 1972; Letter to the CBCA from Laurence Epp, March 7, 1973; Letter to the CBCA from Mrs. E. Hauck, c. November 1972; Letter to the CBCA from Bill Warrenner, September 28, 1972; Letter to CBCA from Mary-Del Kells, December 15, 1972; Letter to CBCA from Mrs. C. Glasier, October 4, 1972; Letter from "a Friend" to the CBCA, November 4, 1972; Letter to the CBCA from Sharon Wheale, October 10, 1972; letter to the CBCA from Mrs. E. Hauck, c. November 1972; Letter to the CBCA from Donna R. Nichols, August 8, 1972, in "Correspondence 1972," M-7265-80; Letter from "Elly" to the CBCA, October 4, 1973, found in "Correspondence, 1973," M-7265-82; letter to the CBCA from Mr. and Mrs. J. McAuley, April 26, 1973. In "Correspondence 1973," M-7265-82, *CBCA Collection GA*.

²⁰⁷ "Something's Happening Here," in "Education Outreach 1968-1972," M-7265-99; "Living with Sex: Human Sexuality Information and Discussion," in "Education outreach 1968-1972," M-7265-99; "Parents Discussion Groups" in "Education outreach, 1968-1972," M-7265-99, *CBCA Collection GA*; for LBCIC examples also see: Goodbye letter from Paulin Hoskin to LBCIC membership, *Unity* vol. 1 no. 9, June 30, 1975, *LBCIC, 1973-1975 GMA*.

²⁰⁸ President's report, the Calgary Birth Control Associations 1978 Annual Report in "Annual General Meeting 1979," M-7265-8, *CBCA Collection GA*.

²⁰⁹ LL, interview, transcript, Dec. 1, 2014, GMA; MB, interview, Jan. 27, 2015, transcript, GMA; RM interview, Oct. 7, 2014, transcript, GMA; JB, interview, Dec. 8, 2012, transcript, GMA.

²¹⁰ CBCA Rural Outreach Surveys, 1972, Responses from Red Deer, Consort, in "Education Outreach, Rural Areas 1972," M-7265-113, *CBCA Collection GA*

²¹¹ President's report, the Calgary Birth Control Associations 1978 Annual Report in "Annual General Meeting 1979," M-7265-8, *CBCA Collection GA*.

²¹² President's report, the Calgary Birth Control Associations 1978 Annual Report in "Annual General Meeting 1979," M-7265-8, *CBCA Collection GA*.

education and accessible contraception as a means to prevent pregnancy without affording teens the same rights to sexual and reproductive freedom as their adult counterparts.

In the new landscape of decriminalized reproductive choices and the contraceptive mentality, the women running both birth control centres initially designed their services for teenagers and young unmarried adults.²¹³ Moral panic about teen sexuality and teen pregnancy was not new in the 1970s, but decriminalization of contraception and abortion renewed concerns about teenage women's promiscuity.²¹⁴ The women who established the CBCA and LBCIC saw the recent decriminalization of birth control as an opportunity to educate teens about human sexuality, reproduction, and contraception, and assumed that teenagers would make up a large portion of their client base. Martha Weir, the first director of the CAIC/CBCA, described her surprise upon opening when the clients visiting the association were married or divorced, already had children and were "older than expected."²¹⁵ Weir and others running the CBCA had prepared programming for women "between 16 and 20. Young unmarried girls [sic] either in high school, college, or just starting to work..."²¹⁶ Similarly, oral history narrator Judy Burgess remembered that the LBCIC's services "certainly targeted young people ... as young as fourteen, fifteen through the twenties."²¹⁷ As CBCA and LBCIC staff realized their clientele was much more diverse than they had expected, unmarried youth wrote to the centres outlining concerns about community surveillance and stigma about premarital sex that prevented them from accessing some services at the birth control centers.²¹⁸

As the CBCA outreach coordinators sought ways to provide teens with accessible sex education, they ran into problems of adult gatekeeping. CBCA and LBCIC educators struggled to

²¹³ "Something's Happening Here," in "Education Outreach 1968-1972," M-7265-99; "Living with Sex: Human Sexuality Information and Discussion," in "Education outreach 1968-1972," M-7265-99; "Parents Discussion Groups" in "Education outreach, 1968-1972," M-7265-99, *CBCA Collection* GA; for LBCIC examples also see: Goodbye letter from Paulin Hoskin to LBCIC membership, *Unity* vol. 1 no. 9, June 30, 1975, *LBCIC, 1973-1975* GMA.

²¹⁴ Mary Louise Adams, *The Trouble With Normal: Postwar Youth and the Making of Heterosexuality*, (Toronto: University of Toronto, 1997); Tamara Meyers, *Caught: Montreal's Modern Girls and the Law, 1869-1945*, (Toronto: University of Toronto, 2006); Carol Dyhouse, *Girl Trouble: Panic and Progress in the History of Young women*, (London & New York: Zed Books, 2013); Amanda H. Littauer, *Bad Girls: Young Women, Sex, and Rebellion Before the Sixties*, (Chapel Hill: University of North Carolina Press, 2015).

²¹⁵ "Notebook kept by Martha Weir," M-7265-12, *CBCA Collection* GA.

²¹⁶ "Notebook kept by Martha Weir," M-7265-12, *CBCA Collection* GA.

²¹⁷ JB, interview, Dec. 8, 2012, transcript GMA.

²¹⁸ Letter to the CBCA from Sandra Morris, Michelle O'Reilly, and Dana Fisher, December 6, 1972, in "Correspondence 1972," M-7265-80, *CBCA Collection* GA.

find school boards that approved sex education in the early 1970s. In 1972, the Association outreach coordinators celebrated their achievement that they “finally... penetrated two public high schools in Calgary with programs on birth control and sexuality.”²¹⁹ Even when teens sought out sex education at their schools or youth groups, the content of the formal education remained under the control of adults, many of whom held more traditional positions of authority.²²⁰ This often limited the outreach education for teens to discussions about sexual anatomy and reproductive physiology, as well as theoretical conversations about sex and contraception.²²¹ These restrictions on the topic discussed in high school sex education presentations frustrated CBCA educators who argued that factual and in-depth education about sex, reproduction, and contraceptive methods was the best way to prevent teenage pregnancies.²²²

CBCA educators created programs to curb adult gatekeeping of sex education topics but they also emphasized the importance of effective sex education as a means to prevent teen pregnancy. In 1972 CBCA educators designed a peer-education program for teens called the Teenage Information Exchange (TIE).²²³ In early 1972 a recent survey conducted by the CBCA suggested that peer-education methods were the most effective when teaching teens about sex and contraception. The survey result summary stated: “of those who cited “friends” [as their source of information], 61% turned out to be adequately informed on birth control. ... We interpret these figures as an indication that the casual, small groups or one-to-one encounters are the most effective

²¹⁹ Peer Education, Community Outreach Education,” pg. 1, c. 1972, in “Educational Outreach 1978,” M-7265-101, *CBCA Collection* GA.

²²⁰ See letters to the CBCA from, the Alberta Teacher’s Association, the Calgary Public School Local 38, Claresholm School Super Intendent, Principal of Nanton High School, Ernest Manning High School (Calgary), Carstairs School, a student from Elmira, AB, Educators for Brooks, AB, Standard High School Student Council, Student at Lord Beaverbrook High School (Calgary), a student from Banff, AB, 1971-1972, in “Correspondence, 1971,” M-7265-79 and “Correspondence, 1972,” M-7265-80, *CBCA Collection* GA.

²²¹ TF, interview, Jan. 24, 2013, transcript, GMA; Lethbridge Birth Control and Information Centre Review of Budget and Programs for January 1, 1974 to November 8, 1974; Proposal of Budget and Programs for 1975. Presented to the City of Lethbridge, the Province of Alberta Department of Preventative Social Services, and Family Planning Federation of Canada, *LBCIC 1973-1976* GMA.

²²² “Questions asked during Parent Discussion Group: Homosexuality,” c. 1968, in “Educational Outreach 1968-1972,” M-7265-99, *CBCA Collection* GA; “The Services We Provide,” Newsletter of the LBCIC, November 1, 1976; “Sex-Ed Outreach,” *Unity* vol. 1 no. June 9, 30, 1975, *LBCIC 1973-1976* GMA.

²²³ CBCA Pamphlet for Teen Information Exchange: Teen Leadership Course in Communication, Relationships, Sexuality, c. 1972, in “Resource material Miscellaneous pamphlets on women’s health, birth control, etc. ca. 1960s-1990s,” M-7265-371, *CBCA Collection* GA.

way of conveying contraceptive information.”²²⁴ In line with their findings, the CBCA educators established TIE and taught teenage volunteers about sex, reproduction, and birth control and trained them “in the skills and knowledge necessary to become resource people” for their peers.²²⁵ These teen volunteers became peer-educators at the Association’s TIE drop-in centre.²²⁶ The CBCA educators designed the TIE program to rectify any inaccurate or incomplete sex and contraceptive information teens got at school, at home, at church, or from friends. The 1972 pamphlet about the Teen Information Exchange stated, “we at the CBCA, are concerned that teenagers are not receiving complete, accurate & unbiased information regarding their sexuality & reproductive health.”²²⁷ In contrast to the limited curriculum CBCA educators were allowed to offer in schools or religious groups, the CBCA’s TIE program offered “information about health care, sexuality, anatomy, pregnancy, birth control & relationships.”²²⁸ In the eyes of the education team at the CBCA the TIE program rectified broader barriers to accessible sex education for teens, like adult surveillance and inadequate or incomplete sex education curriculums.

The TIE pamphlet described a wide-ranging list of reproductive and sexual health topics for teens to discuss and learn about, but in reality the CBCA’s outreach curricula for teens differed from the curricula for adults. On the surface, it appeared that most of the Association’s workshops discussed birth control methods, abortion, reproductive physiology, and social aspects of sexuality like relationships and gender roles.²²⁹ While CBCA programming for adults often discussed contraception and abortion as part of women’s sexual and reproductive liberation, Association instructors encouraged teens to learn about and use contraception if they were sexually active to

²²⁴ CBCA peer-education outreach survey, 1972, found in “Educational Outreach, 1978,” M-7265-101, *CBCA Collection* GA.

²²⁵ CBCA Pamphlet for Teen Information Exchange: Teen Leadership Course in Communication, Relationships, Sexuality, c. 1972, in “Resource material Miscellaneous pamphlets on women’s health, birth control, etc. ca. 1960s-1990s,” M-7265-371, *CBCA Collection* GA.

²²⁶ CBCA Pamphlet for Teen Information Exchange: Teen Leadership Course in Communication, Relationships, Sexuality, c. 1972, in “Resource material Miscellaneous pamphlets on women’s health, birth control, etc. ca. 1960s-1990s,” M-7265-371, *CBCA Collection* GA.

²²⁷ CBCA Pamphlet for Teen Information Exchange: Teen Leadership Course in Communication, Relationships, Sexuality, c. 1972, in “Resource material Miscellaneous pamphlets on women’s health, birth control, etc. ca. 1960s-1990s,” M-7265-371, *CBCA Collection* GA.

²²⁸ CBCA Pamphlet for Teen Information Exchange: Teen Leadership Course in Communication, Relationships, Sexuality, c. 1972, in “Resource material Miscellaneous pamphlets on women’s health, birth control, etc. ca. 1960s-1990s,” M-7265-371, *CBCA Collection* GA.

²²⁹ “Educational Outreach, 1968-1973,” M-7265-99; “Educational Outreach, 1974-1976,” M-7265-100; “Educational Outreach, 1978,” M-7265-101; “Educational Outreach, Exercises used 1976-1979,” M-7265-105, *CBCA Collection* GA.

prevent pregnancy, full stop. A discourse of responsibility was especially evident in the CBCA educational curriculum for teens. Throughout the decade, Association outreach coordinators were preoccupied with how to better “reach the teen population.”²³⁰ The programming they designed often offered “information and access to contraception, while encouraging conscious, responsible decision-making about sexual activity.”²³¹ Even when the CBCA education team established teen-led education initiatives, like TIE, teenage clients were treated as students rather than collaborators.²³² As staff implemented top-down educational agendas that underlined teenage sexuality as inevitable but irresponsible, they effectively siloed teens from broader feminist goals of women’s sexual liberation.

The distinction between teen and adult is especially apparent when comparing the CBCA programs for teenagers and the CBCA programs for young unmarried adults in the 1970s.²³³ Both operating in “university cities,” the women working at the CBCA and the LBCIC had a very strong relationship with local university students.²³⁴ And many of the women working at the birth control centers were post-secondary students themselves.²³⁵ While the education provided to high school students was often limited to pregnancy and venereal disease prevention, curricula designed for university students explored a wider variety of topics related to sexuality and sexual liberation. For example, the CBCA outreach coordinators offered a workshop titled “Living with Sex” at the University of Calgary in 1971, which explored topics of the physiological and communication

²³⁰ President’s report, the Calgary Birth Control Associations 1978 Annual Report in “Annual General Meeting 1979,” M-7265-8, *CBCA Collection* GA.

²³¹ President’s report, the Calgary Birth Control Associations 1978 Annual Report in “Annual General Meeting 1979,” M-7265-8, *CBCA Collection* GA.

²³² CBCA Pamphlet for Teen Information Exchange: Teen Leadership Course in Communication, Relationships, Sexuality, c. 1972, in “Resource material Miscellaneous pamphlets on women’s health, birth control, etc. ca. 1960s-1990s,” M-7265-371, *CBCA Collection* GA.

²³³ Living with Sex: Human Sexuality Information and Discussion,” in “Education outreach 1968-1972,” M-7265-99; CBCA Pamphlet for Teen Information Exchange: Teen Leadership Course in Communication, Relationships, Sexuality, c. 1972, in “Resource material Miscellaneous pamphlets on women’s health, birth control, etc. ca. 1960s-1990s,” M-7265-371, *CBCA Collection* GA.

²³⁴ Karissa Robyn Patton, “We were having conversations that weren’t comfortable for anybody, but we were feisty:” Re-Conceiving Student Activism Against Reproductive Oppression in Calgary and Lethbridge during the 1960s and 1970s,” Master’s Thesis, University of Lethbridge, 2015, 108-112.

²³⁵ Karissa Robyn Patton, “We were having conversations that weren’t comfortable for anybody, but we were feisty:” Re-Conceiving Student Activism Against Reproductive Oppression in Calgary and Lethbridge during the 1960s and 1970s,” Master’s Thesis, University of Lethbridge, 2015, 108-112. LL, interview, Dec. 1, 2014, GMA; RM, interview, Oct. 7, 2014, transcript, GMA; MB, interview, Jan. 27, 2015, transcript, GMA.

aspects of sexual function, “varieties of sexual expression,” reproduction, as well as contraception as a means to sexual liberation.²³⁶ The emphasis on sexuality and contraception within the “Living with Sex” course offers a stark contrast to the emphasis on “accurate information” and “responsible decision-making” in birth control centre outreach for teens in the 1970s.²³⁷

The CBCA staff ended the decade where they began, with educational programming focused on the necessity of progressive and factual teen education, but as a preventative measure to address rising teen pregnancy rates. Outreach coordinators at the CBCA and teens seeking sex education services at the end of the 1970s still faced the same problems of inadequate sex education that their predecessors had encountered at the beginning of the decade: “Most young people lack complete, accurate information on contraception, and those who do receive this information do so in an atmosphere which suggests ‘this is for later – of course you have no need for it now.’ (i.e. if you do need it, you are doing something wrong).”²³⁸ By 1979, after all the work they had gone through to create better teen-friendly outreach programs, the CBCA educators continued to frame good teen sex education as a means to address “high” teen pregnancy rates. For example, the CBCA’s 1979 Annual General Meeting report stated: “In 1958, 6301 babies were born out of wedlock in Canada to girls between 15 to 19 years of age; in 1976, more than 19,000. At the same time, the overall birth rate in Canada has declined by almost 45 percent. Add to this the fact that most of the girls are keeping their babies, and you have a picture of the tragedy involved.”²³⁹ Despite their frustration with the inadequate sex education for teens outside of the Association, outreach coordinators continued to frame teenage sexual and reproductive health as a means of preventing pregnancy rather than a right to sexual and reproductive liberation.

Conclusion

The learning curves that White urban birth control centre educators faced in 1970s southern Alberta reveal the politics of collaboration, paralleling broader feminist struggles to understand and

²³⁶ “Living with Sex: Human Sexuality Information and Discussion,” in “Education outreach 1968-1972,” M-7265-99, *CBCA Collection GA*.

²³⁷ President’s report, the Calgary Birth Control Associations 1978 Annual Report in “Annual General Meeting 1979,” M-7265-8, *CBCA Collection GA*.

²³⁸ President’s report, the Calgary Birth Control Associations 1978 Annual Report in “Annual General Meeting 1979,” M-7265-8, *CBCA Collection GA*.

²³⁹ President’s report, the Calgary Birth Control Associations 1978 Annual Report in “Annual General Meeting 1979,” M-7265-8, *CBCA Collection GA*.

embrace difference among women during this period. The regional stories of the CBCA and LBCIC outreach programs show how White birth control activists came to focus so attentively on the geographic barriers to reproductive and sexual healthcare for southern Albertan women over the decade. Educators' assumptions about women's universal reproductive experiences were challenged as they encountered different women and learned about the specific barriers rural, Indigenous, immigrant and teenage women faced when it came to accessing reproductive and sexual healthcare information and services. These realizations kept the CBCA education team busy as they developed new outreach programs and acquired new resources to better address additional barriers like language and ethnicity, or colonialist health policy. Even as the White women working at the CBCA encountered diverse women with diverse needs and desires, the staff often perpetuated assumptions that women unanimously ranked accessible birth control and abortion as the top priority for reproductive liberation. Their White, urban and heterosexual definitions of reproductive freedom overwhelmed other considerations that might have complicated that agenda. Throughout the decade, as CBCA activists came to recognize space, language, indigeneity, and, to some extent, sexuality, as important aspects that shaped women's reproductive lives, their teen outreach education remained a "preventative social service" that saved society at large, and teens in particular, from the economic and social hardship of single teenage motherhood.

CHAPTER 5: REHABILITATION OR LIBERATION?: THE TEENAGE SINGLE MOTHER, LEGAL RIGHTS, & ECONOMIC RESPONSIBILITY

CW: this chapter discusses themes of coerced adoption and sexual assault.

Linda tumbled into last summer with all the exuberance of a pretty, popular 17-year-old. Life was a lark. She had zipped through her second last year of high school with honors. Swimming, parties, movies, gossip with the gang stretched ahead. And, most important, she was in love with Larry, the boy she might marry someday when they were through with school and university and ready to settle down.

Then she got pregnant.

She was terrified. Abortion, marriage, running away to hide, none of her alternatives were any good. She was ashamed and guilty and afraid of what her parents would think.

Suzanne Zwarun, "The High School for Pregnant Teenagers,"
the *Calgary Herald*, February 28, 1970¹

The story of Linda was featured in the *Calgary Herald* on February 28, 1970 within a three-page article about Calgary's Bankview School for pregnant and parenting teens. Linda was a real student at Bankview who shared her story with *Herald* reporter Suzanne Zwarun in 1970 as the school made headlines as the first school in Canada designed exclusively for pregnant and parenting teenage women. In Calgary, like in many other cities in postwar Canada and the United States, school board regulations prevented pregnant women from attending school during their pregnancies, effectively segregating them from their peers and educational opportunities.² Calgary's new Bankview school offered students the opportunity to continue their schooling throughout their pregnancy by providing guided correspondence learning and prenatal programs. Zwarun quoted Linda extensively in the article, emphasizing both the anxiety Linda experienced when she found out she was pregnant as well as Linda's relief when she found out she did not have to postpone the completion of her high school diploma.³ But Zwarun also presented teen pregnancy as a threat to

¹ Suzanne Zwarun, "The high school for pregnant teenagers," *the Calgary Herald*, February 28, 1970, pg. 8, found in "Adult Education Day Centre," M-7265-17 in the *Calgary Birth Control Association Collection* at the Glenbow Archives, Calgary, Alberta (CBCA Collection, GA).

² Rickie Solinger, *Wake Up Little Susie: Single Pregnancy and Race Before Roe v. Wade*, (New York: Routledge, 1992), 109-110; Deirdre Kelly, "Pregnant with Meaning: Teen Mothers and the Politics of inclusive Schooling," in *Children, Teachers, and Schools in the History of British Columbia*, (Edmonton: Brush Education, 2003), 390-391.

³ Zwarun, "The high school for pregnant teenagers," pg. 8, found in "Adult Education Day Centre," M-7265-17, *CBCA Collection*, GA.

young women's educational opportunities, independence, and an economically secure future. The educational, legal, health, and counselling services provided at Bankview were new and progressive options for young women seeking prenatal healthcare and educational services in Calgary. But, in line with Zwarun's article, the foundational philosophy behind Bankview school framed teenage motherhood as an impediment to young women's futures.

While educators, public health nurses, counsellors, and other civil servants established Bankview School, women running the CBCA and LBCIC also created programs for single pregnant women and single mothers.⁴ Since their respective openings, both birth control centres' educational teams offered programs for teens about sexuality, contraception, and abortion. By 1974, the Centre and Association staff expanded their services across the "family planning spectrum"⁵ and developed prenatal courses and housing programs for single pregnant women in the region.⁶ Like Bankview administrators, the staff at the Association and the Centre created these programs in response to the stigma that single pregnant women faced at school or work, at medical clinics, and, even, in their own homes.⁷ Unlike Bankview's program, the prenatal and housing services for single pregnant women offered at the CBCA and LBCIC were infused with lessons about women's health concerns, patients' rights, and accessible health service provision throughout the 1970s. Other educational programming at the CBCA and LBCIC taught teens about sex, contraception, and abortion as a means to prevent teen pregnancy.⁸ The programs designed for pregnant youth similarly encouraged

⁴ "The Unwed Mother and her Child" Course with the U of C Medical School, 1976, found in "Education Outreach: U of C Medical Students Unit on Unwed Mothers, 1973-1974," M-7265-117, *CBCA Collection* GA; "Birth Control/Information Centre," *Up* vol. 1 no. September 8 24, 1974, pg. 2, HQ 1480.L47.U6, found at the University of Ottawa's Women's Archives, Ottawa, Ontario (UOWA).

⁵ Lynn Van Luven, "Family Planning Association says: 'BCIC meeting needs in vital areas,'" *Lethbridge Herald*, January 27, 1975, pg. 16, found in "Lethbridge Birth Control Association," GR1983.0133 Box 1 File 1 at the Provincial Archives of Alberta, Edmonton, Alberta (PAA).

⁶ "Birth Control/Information Centre," *Up* vol. 1 no. September 8 24, 1974, pg. 2, HQ 1480.L47.U6, UOWA; "Homes for Single Pregnant Women," *Unity* vol. 1 no. 9, June 30, 1975, 20171104, found in *Lethbridge Birth Control and Information Centre, 1973-1975* at the Galt Museum and Archives, Lethbridge, Alberta (*LBCIC 1973-1975* GMA); Pauline Hoskin, interview with Karissa Patton, December 20, 2017, transcript (PH, interview, Dec. 20, 2017, transcript).

⁷ PH, interview, Dec. 20, 2017, transcript; Judy Burgess, interview with Karissa Patton, December 8, 2012, transcript. Interview and transcript housed at the Galt Museum and Archives, in "Oral History Project: Students' Reproductive Rights Activism in Southern Alberta during the 1960s and 1970, 20171019 (JB, interview, Dec. 8, 2012, transcript, GMA); Deirdre Kelly, "Pregnant with Meaning," 390-391; Solinger, *Wake Up Little Susie*, 109-110.

⁸ President's report, the Calgary Birth Control Associations 1978 Annual Report in "Annual General Meeting 1979," M-7265-8, *CBCA Collection* GA.

teens to forgo motherhood and presented abortion as the best choice for young single pregnant women. The women who designed the programs for pregnant teenage women at the CBCA and LBCIC recognized that the social and legal barriers single mothers faced often prevented young women from earning degrees, entering the workforce, and reinforced women's dependence on men and the welfare state.⁹ The programs and educational supports the Centres developed revealed a desire to support young women in making choices that led to their independence.

Despite the decriminalization in 1969, many young people were not able to access abortion and contraception and rates of teen pregnancy increased throughout the 1970s. Many teen pregnancies occurred because young people had inadequate sex education and limited access to contraceptives. Some youth avoided contraceptive use because of the stigma associated with the "kind of girl" who used the Pill, while community surveillance prevented others from accessing contraception.¹⁰ Some youth, who had received inadequate sex education did not know about reproduction, contraception, or pregnancy.¹¹ Some pregnant teens did not know they were pregnant right away and were too far along for the local TAC to approve an abortion.¹² Many teens were prevented from obtaining an abortion because the local hospital required parental consent.¹³ And some pregnant teens did not pursue a TAC-approved abortion at all for religious reasons.¹⁴ For whatever reason southern Alberta teens found themselves pregnant, local birth control centre employees and civil servants recognized a high need for prenatal and educational service for single pregnant women in the region.

Bankview staff maintained that a supportive educational services were integral to helping pregnant teens in the early 1970s. Employees at Bankview, like Ward Steckel, Bill McCormick, Alma Jordan, and Claire Van Loon, had previously worked as teachers or counsellors and witnessed many

⁹ Zwarun, "The high school for pregnant teenagers," pg. 10, found in "Adult Education Day Centre," M-7265-17, *CBCA Collection*, GA.

¹⁰ J. Shoshanna Ehrlich, *Regulating Desire: From Virtuous Maiden to Purity Princess*, (New York: State University of New York Press, 2014), 19; "But I'm not that kind of girl" cartoon, the LBCIC's Newsletter, January 1, 1977, pg. 6, found in "Resource material Newsletters Lethbridge Birth Control and Information Centre, Newsletter 1974-1977," M-7265-394, *CBCA Collection* GA.

¹¹ Peer Education, Community Outreach Education," pg. 3, c. 1972, in "Educational Outreach 1978," M-7265-101, *CBCA Collection* GA.

¹² "Notebook by Martha Weir," M-7265-12, *CBCA Collection* GA.

¹³ CBCA Rural Outreach Surveys, 1972, Responses from Red Deer, Consort, in "Education Outreach, Rural Areas 1972," M-7265-113, *CBCA Collection* GA.

¹⁴ "Notebook by Martha Weir," M-7265-12, *CBCA Collection* GA.

young women lose out on educational opportunities because of an unplanned pregnancy.¹⁵ Steckel believed in the Bankview program so much that he even came out of his retirement to become the first principal of the school in 1970.¹⁶ In the records saved within the archives, none of the Bankview employees publicly identified as feminists or aligned with the women's liberation movement, although they all discussed young women's right to education and maligned social stigmatization of pregnant teens.¹⁷ As educators and counsellors, Steckle, McCormick, Jordan, Van Loon, and other Bankview staff maintained that a completed high school diploma was key to rehabilitating young pregnant women to become successful and financially independent citizens.¹⁸

The prenatal programs offered at the LBCIC and CBCA, while offering educational services, were more focused on women's health and liberation. At the LBCIC the women involved in the prenatal courses, Judy Burgess and Pauline Hoskin were both nurses and feminists living in Lethbridge. Hoskin created and ran the Centre's prenatal program in 1973 for single pregnant women, who often felt ostracised by married women and medical professionals in other prenatal courses in the city.¹⁹ As nurses, Burgess and Hoskin had observed the discrimination of single pregnant women in medical spaces and designed their prenatal programs to help young pregnant women access prenatal services and find their voice as a maternity patient.²⁰ Some women running the birth control centres, like Burgess, had also experienced discrimination as single mothers within medical spaces themselves.²¹ Their own experiences as single mothers and nurses fuelled their women's health activism and their design of the prenatal courses offered to local single pregnant women.

The women running the birth control centres and the administrators at Bankview operated under different models of care but shared common goals, so they often worked together to fill gaps

¹⁵ Zwarun, "The high school for pregnant teenagers," pg. 8, 10, found in "Adult Education Day Centre," M-7265-17, *CBCA Collection*, GA.

¹⁶ Zwarun, "The high school for pregnant teenagers," pg. 8, found in "Adult Education Day Centre," M-7265-17, *CBCA Collection*, GA.

¹⁷ Zwarun, "The high school for pregnant teenagers," pg. 8-10; Bankview Year End Report, 1970-71; Bankview Year End Report, 1971-72; Bankview Year End Report, 1972-73; Bankview Year End Report, 1973-74, found in "Adult Education Day Centre," M-7265-17, *CBCA Collection*, GA.

¹⁸ Zwarun, "The high school for pregnant teenagers," pg. 8-10; Bankview Year End Report, 1970-71; Bankview Year End Report, 1971-72; Bankview Year End Report, 1972-73; Bankview Year End Report, 1973-74, found in "Adult Education Day Centre," M-7265-17, *CBCA Collection*, GA.

¹⁹ PH, interview, Dec. 20, 2017, transcript; JB, interview, Dec. 8, 2012, transcript, GMA.

²⁰ PH, interview, Dec. 20, 2017, transcript; JB, interview, Dec. 8, 2012, transcript, GMA.

²¹ JB, interview, Dec. 8, 2012, transcript, GMA.

in existing health, social, and family services in 1970s. Civil servants working at Bankview and the women running the birth control centres saw teen pregnancy as an unfortunate fallout of inadequate sex education and inaccessible contraception for youth. Staff and volunteers involved in these southern Alberta programs for single pregnant women recognized teen pregnancy as a common occurrence that required specific services. The education teams at the LBCIC, the CBCA, and Bankview provided prenatal courses as well as educational outreach about single mothers' legal rights, the adoption process, and counselling services (individual, couples, and family).²² Throughout the decade, the women running the southern Alberta birth control centres built essential relationships with the administration at Bankview School to expand their reproductive and sexual health referral services. The CBCA and LBCIC staff provided information about Bankview School for their teenage clients who pursued adoption or motherhood rather than abortion.²³

Administrators at Bankview School reciprocally allied themselves with the CBCA and often called upon Association educators to provide sex and birth control education for the Bankview students in the 1970s.²⁴ Bankview administrators and prenatal educators at the birth control centers created services for single pregnant women in an effort to support them. Some young women were prevented from attending school and finishing their courses, many unmarried pregnant women were uncomfortable sitting among several married women and couples in mainstream prenatal classes, and some were chastised by local, non-sympathetic medical professionals.²⁵ All publicly funded, the programs offered by the CBCA, LBCIC, and Bankview worked together and provided unique spaces exclusively for single pregnant women to access services and build community with women in similar situations.²⁶

²² Zwarun, "The high school for pregnant teenagers," pg. 8-10, found in "Adult Education Day Centre," M-7265-17, *CBCA Collection*, GA.

²³ Adult Education Day Centre pamphlet, c. 1969, found in "Adult Education Day Centre," M-7265-17, *CBCA Collection* GA.

²⁴ Bankview Year End Report, 1973-74, pg. 3, found in "Adult Education Day Centre," M-7265-17, *CBCA Collection* GA.

²⁵ JB, interview, Dec. 8, 2012, transcript, GMA.

²⁶ The provincial Health and Development Services funded Bankview, while the provincial Department of Preventative Social Services funded both the CBCA and LBCIC. See: Bankview Year End Report, 1973-74, pg. 2, found in "Adult Education Day Centre," M-7265-17; "We Ask Your Help" Fundraising Flyer from the CBCA 1977 found in "Strategy Committee 1977," M-7265-65, *CBCA Collection* GA; Lethbridge Birth Control and Information Centre Review of Budget and Programs for January 1, 1974 to November 8, 1974; Proposal of Budget and Programs for 1975: Presented to the City of Lethbridge, the Province of Alberta Department of Preventative Social Services, and Family Planning Federation of Canada, *LBCIC 1973-1975* GMA.

Despite their significant intervention into local health and social services, all three programs inadvertently perpetuated moral and economic panic about young single women raising babies. Bankview administrators and birth control activists alike saw teen pregnancy as a result of broader social failures when it came to reproductive health services and sex education. But with newly legal contraceptive and abortion services, single motherhood was increasingly conceived as a choice.²⁷

Bankview and birth control centre employees often discouraged young single women from keeping their children because of the social, economic, and legal hardships young single mothers and “illegitimate” children faced in the 1970s.²⁸ Well into the 1970s Canadian family, citizenship, and rape laws significantly disadvantaged single mothers and their children, safeguarding absentee fathers’ income rather than the financial and social wellbeing of the mother and child.²⁹ So, the Bankview administrators and reporters, like Zwarun, described students who kept their babies as inevitable welfare recipients.³⁰ Educators and civil servants working at Bankview encouraged their students to avoid legal and economic disparity by either getting married if they wanted to keep their baby or putting their babies up for adoption if they stayed single. The women running the birth control centres also worried about the legal barriers single mothers faced and grew concerned about how women’s deflated wages economically disadvantaged single mothers and their children. While educators at Bankview worried about single mothers and their children living on welfare, birth control centres’ staff worried that single motherhood stifled teenage women’s chances at liberation.

CBCA and LBCIC educators had already developed campaigns that encouraged young women to use birth control to avoid pregnancy.³¹ Other programming at the birth control centres

²⁷ Solinger, *Wake Up Little Susie*, 10.

²⁸ Dominique Clément, “Sex Discrimination in Canadian Law: From Equal Citizenship to Human Rights Law,” in *Canada’s Legal Past: Looking Forward, Looking Back*, edited by Mélanie Méthot, Ted McCoy, and Lydsay Campbell, (Calgary: University of Calgary Press, 2020), 252; Constance Backhouse, *Carnal Crimes: Sexual Assault Law in Canada, 1900-1975*, (Toronto: The Osgoode Society for Canadian Legal History, 2008), 11-13; Bankview School’s Year End Report, 1970-71, pg. 6, found in “Adult Education Day Centre,” M-7265-17, *CBCA Collection* GA; JRS, “Illegitimate Children,” *Up*, vol.2 no.2, February 1975, pg.10-11; *Up*, “Citizenship Bill C-20,” vol.3 no.1, March 1976, pg.18; “Rape and the Law,” *Up* vol.3 no.2, June 1976, pg. 14-15, HQ 1480.L47.U6, UOWA.

²⁹ Clément, “Sex Discrimination in Canadian Law,” 252-253; JRS, “Illegitimate Children,” *Up*, vol.2 no.2, February 1975, pg.10-11, HQ 1480.L47.U6, UOWA.

³⁰ Zwarun, “The high school for pregnant teenagers,” pg. 10, found in “Adult Education Day Centre,” M-7265-17, *CBCA Collection*, GA.

³¹ President’s report, the Calgary Birth Control Associations 1978 Annual Report in “Annual General Meeting 1979,” M-7265-8, *CBCA Collection* GA.

aimed at inspiring women to pursue a life outside of the roles of wife and mother.³² In the eyes of many CBCA and LBCIC staff, newly legalized abortion offered pregnant teens the opportunity to move forward into adulthood unencumbered by the legal, economic, and social hardships of single motherhood and misogynistic gender roles. The discourse about teenage abortion and motherhood within the birth control centre programs often framed teens who chose to keep their children and remained single as naïve, while those who kept their children and got married were characterized as unnecessarily conforming to patriarchal norms about women's place in society. Within the programs at Bankview and the birth control centres, teens were not considered immoral for becoming pregnant, but they were often considered naïve or selfish if they decided to keep their babies and become single mothers.

While many young pregnant women sought practical and non-judgemental prenatal health and educational services from these programs in the 1970s, their decisions did not always align with the visions of educational rehabilitation at Bankview or women's liberation at the birth control centres. These young women's experiences and ambitions did not always align with Bankview staff's demarcation of economic security or birth control centres educators' definitions of women's liberation. The archival sources saved about these southern Alberta services for single pregnant women in the 1970s, contain very little information about the young women who utilized these services. Zwarun's article and Bankview's year-end reports highlighted that some students who attended Bankview resisted the discourse that they should forgo teenage motherhood.³³ Many young women who attended Bankview or participated in the birth control centres' prenatal courses kept their children, either as single mothers or after getting married.³⁴

This analysis of programming for single pregnant women at the LBCIC, CBCA, and Bankview reveals a complex story of genuine attempts to make life better for single pregnant women within programs founded on narrow definitions of economic independence and women's liberation. The services for single pregnant women provided by Bankview, the CBCA, and the LBCIC were unique in their communities – and likely the only services specifically designed to help single

³² "Consider yourself 1st," in *Up* vol. 1, no. 5, July 29, 1974, pg. 3, HQ 1480.L47.U6, UOWA.

³³ Zwarun, "The high school for pregnant teenagers," pg. 8-10; Bankview Year End Report, 1970-71; Bankview Year End Report, 1971-72; Bankview Year End Report, 1972-73; Bankview Year End Report, 1973-74, found in "Adult Education Day Centre," M-7265-17, *CBCA Collection*, GA.

³⁴ Bankview School's Year End Report, 1970-71, pg. 5; Bankview School's Year End Report, 1971-72, pg. 4; Bankview School's Year End Report, 1972-73, pg. 2; Bankview School's Year End Report, 1973-74, pg. 5, found in "Adult Education Day Centre," M-7265-17, *CBCA Collection* GA.

pregnant and parenting women.³⁵ In this way, Bankview and the birth control centres' programs were radical and progressive interventions into regional social, educational, and health services. The underlying views about teenage motherhood within these programs were far less radical. Bankview staff ultimately defined young women's success based on White and middle-class notions of the heteronuclear family, merit, and economic success free from government "handouts."³⁶ And discourse about teenage pregnancy within the birth control centres' programs hierarchized young women's choices, presenting abortion as the best option, then adoption, then single motherhood, and then, the worst choice of all, teenage marriage. As educators at Bankview, the CBCA, and the LBCIC addressed service gaps and tried to circumvent legal and economic difficulties for pregnant teens; their programs also perpetuated the rhetoric that teenage single motherhood was legally, economically, and socially irresponsible.

The Canadian Adoption Mandate & White Teenage Mothers as "Candidates of Rehabilitation," 1945-1969

Rhetoric about the harms of teenage and single motherhood in the 1970s was fuelled by a longer history that idealized White, middle-class heteronormative nuclear families in Canada. Following the Second World War, new family policy and social discourse about gender roles women discouraged women from remaining in the workforce as moral panic about gender roles and the state of the nuclear family set in to Postwar Canadian society.³⁷ After a turbulent wartime when families were separated, many Canadian men were away from home, and women across the country took up work in the public sphere, the image of a strong Canadian family became the centrepiece of postwar nation building. Historians Joan Sangster and Raymond Blake have shown how family policy and services in postwar Canada encouraged women to return to their "natural" place in the

³⁵ Bankview Year End report, 1970-71, pg. 10; Zwarun, "The high school for pregnant teenagers," pg. 8, 10; Zwarun, "The high school for pregnant teenagers," pg. 10, found in "Adult Education Day Centre," M-7265-17, *CBCA Collection*, GA.

³⁶ Raymond Blake, Introduction to *From Rights to Needs: A History of Family Allowances in Canada, 1929-1992*, (Vancouver: University of British Columbia Press, 2009), 11-12; Valerie J. Andrews, *White Unwed Mothers: Adoption Mandate in Postwar Canada*, (Bradford: Demeter Press, 2018), 22-23, 28; *Solinger, Wake Up Little Susie*, 2, 14.

³⁷ Joan Sangster, "Domesticating Girls: The Sexual Regulation of Aboriginal and Working-Class Girls in Twentieth Century Canada," pg. 179-204, in *Contact Zones: Aboriginal & Settler Women in Canada's Colonial Past*, edited by Katie Pickles and Myra Rutherdale, (Vancouver: University of British Columbia Press, 2005), 179; Blake, *From Rights to Needs*, 11-12.

home, after necessarily working in essential industries during the war.³⁸ New postwar family policies, like family allowances, encouraged women to take part in “creating a new social order”³⁹ in Canada. Blake argues that “the state immediately recognized the importance of cultivating and encouraging strong families and saw an important role for mothers in that process” throughout their postwar expansion of the welfare state.⁴⁰ And Sangster underscores that these same policies idealized White, middle-class, heteronormative nuclear families.⁴¹ Sangster and others, like scholar Valerie Andrews, have exposed that as new postwar family policy and services emerged, so did the “construction of good women as white stay-at-home mothers.”⁴²

The Canadian government’s postwar preoccupation with the heteronuclear family as the key to the “new social order”⁴³ directly influenced post-war Canadian adoption mandates and instigated, what scholar Valerie Andrews calls, a “mass surrender” of children born outside of marriage between 1945 and 1969.⁴⁴ Postwar family policy left little space for single mothers and “illegitimate children,” who were seen as a threat to the nuclear family and an economic drain on the newly established welfare state.⁴⁵ Andrews has documented changes in postwar Canadian adoption practices as they aligned with new family policies. In particular, her work shows that for almost three decades following the Second World War, “babies from unmarried mothers were adopted in numbers never seen prior to, or since, in Canadian history.”⁴⁶ Throughout the 1940s, 1950s, and 1960s parents, social workers, and judges sent unmarried pregnant women to maternity homes, where young women hid their pregnancy and secretly gave their babies up for adoption.⁴⁷ Andrews explains that most of the mass surrender adoptions occurred in maternity homes for single women.

³⁸ Sangster, “Domesticating Girls,” 179; Blake, *From Rights to Needs*, 11-12.

³⁹ Blake, *From Rights to Needs*, 12.

⁴⁰ Blake, *From Rights to Needs*, 11-12.

⁴¹ Joan Sangster, “Domesticating Girls,” 179.

⁴² Quotation from Andrews, *White Unwed Mothers*, 28. Also see: Sangster, “Domesticating Girls,” 179-104; Mary Louise Adams, *The Trouble With Normal: Postwar Youth and the Making of Heterosexuality*, (Toronto: University of Toronto, 1997), 25.

⁴³ Blake, *From Rights to Needs*, 12.

⁴⁴ Andrews, *The White Unwed Mother*, 22.

⁴⁵ Solinger, *Wake Up Little Susie*, 3, 6, 148-149; Andrews, *The White Unwed Mother*, 22-23.

⁴⁶ Andrews, *The White Unwed Mother*, 165.

⁴⁷ Andrews, *The White Unwed Mother*, 22-23, 28; Solinger, *Wake Up Little Susie*, 2, 14; Anne Petrie, *Gone to an Aunt’s: Remembering Canada’s Homes for Unwed Mothers*, (Toronto: McClelland & Stewart, 2013); Ann Fessler, *The Girls Who Went Away: The Hidden History of Women Who Surrendered Children for Adoption in the Decades Before Roe v. Wade*, (New York: Penguin Press, 2006).

She also argues that many of the young women held in these maternity homes were coerced into putting their children up for adoption.⁴⁸

White single pregnant women and their babies were particularly targeted as “candidates of rehabilitation” by adoption mandates in postwar Canada and the United States. Historians, like Mary Louise Adams, J. Shoshanna Ehrlich, Joan Sangster, Valerie Andrews, and Rickie Solinger, discuss the social and political management of White middle-class teenage women’s sexuality in mid-century Canada and the United States.⁴⁹ Postwar policymakers, social workers, and broader public discourse chastised young White women for “engaging in patterns of sexual and reproductive behaviours that had long been identified with the racialized other.”⁵⁰ As the state celebrated the White middle-class heteronuclear family as a pillar of Canadian society and postwar adoption mandates were institutionalized in state run services and family legislation, White unmarried pregnant women and their children were increasingly seen as “candidates of rehabilitation.”⁵¹ Parents and social workers believed that the separation of White unmarried mothers and their babies set both mother and child up for another chance at becoming part of the middle-class nuclear family. Young White women were told that if they put their babies up for adoption they solidified their future place as a wife and mother – as long as their pregnancy out of wedlock remained hidden from future partners and society.⁵² Solinger and Andrews have shown that adoption mandates in both the United States and Canada shifted in the 1950s and 1960s as policymakers, social workers, and infertile married couples increasingly assigned value to illegitimate White babies.⁵³ In the eyes of federal and provincial governments, these adoptions allowed the infertile couple to do their part as good middle-class White Canadians by starting a family, while saving unmarried White mothers and illegitimate children from a life of welfare dependence.⁵⁴

⁴⁸ Andrews, *The White Unwed Mother*, 22; Solinger, *Wake Up Little Susie*, 4.

⁴⁹ Ehrlich, *Regulating Desire*, 4; Mary Louise Adams, *The Trouble With Normal: Postwar Youth and the Making of Heterosexuality*, (Toronto: University of Toronto, 1997), 67; Joan Sangster, “Girls in conflict with the law: exploring the construction of female ‘delinquency’ in Ontario, 1940-1960,” in *Through Feminist Eyes: Essays on Canadian Women’s History*, (Edmonton: Athabasca University Press, 2011), 253; Andrews, *The White Unwed Mother*, 22; Solinger, *Wake Up Little Susie*, 148-149;

⁵⁰ Ehrlich, *Regulating Desire*, 4.

⁵¹ Andrews, *The White Unwed Mother*, 162.

⁵² Andrews, *The White Unwed Mother*, 22-23, 28; Solinger, *Wake Up Little Susie*, 2, 14; Fessler, *The Girls Who Went Away*, (2013).

⁵³ Solinger, *Wake Up Little Susie*, 148-149; Andrews, *The White Unwed Mother*, 22-23.

⁵⁴ Solinger, *Wake Up Little Susie*, 6, 148-149; Andrews, *The White Unwed Mother*, 22-23.

In the 1960s the demand for White babies continued to increase and new government assimilation policies emerged, amplifying politics of race, motherhood, and adoption policy in Canada. Andrews identifies the 1960s as the decade with the highest number of coerced adoptions suggesting that this period ran parallel to the history of the colonial policies and practices of the Sixties Scoop. The state used these adoption mandates strategically against Indigenous and single White women alike, but Indigenous and unmarried White mothers experienced child apprehension in starkly different colonial contexts. While unmarried White women were seen as candidates of rehabilitation because of their Whiteness, Indigenous mothers were cast-off as incapable of caring for children because of their Indigeneity.⁵⁵ White babies were taken from their birth mothers and given to infertile couples to uphold the ideal of the White middle-class family. Indigenous babies and children were taken from their families and communities as an assimilation tactic.⁵⁶ Historian Allyson Stevenson has exposed how federal and provincial governments utilized the ideal of the hetero-nuclear family to justify removal of Indigenous children and enlist White families to adopt them.⁵⁷ Indigenous children adopted out often lost their cultural connection to their nation along with their Indian status, which effectively ended the federal responsibility to adopted Indigenous children to uphold their treaty rights.⁵⁸ The 1960s federal and provincial governments ramped up their adoption mandates, utilizing the reproduction of White unwed women and Indigenous women to maintain the primacy of the White, middle-class, heteronormative Canadian family. For Indigenous families the 1960s were only the beginning as the numbers of Indigenous children apprehended continued to climb for the rest of the twentieth century and into the twenty-first century.⁵⁹ Conversely, as the 1970s began adoption rates for White single mothers and their children sharply declined.⁶⁰

⁵⁵ Andrews, *The White Unwed Mother*, 162; Alyson Stevenson, “Intimate Integration: A Study of Transracial Adoption in Saskatchewan, 1944-1984,” (Ph.D. Diss., University of Saskatchewan, 2015), 60-67, 257-263.

⁵⁶ Raven Sinclair (*Ótiskewápímsken*), Michael Anthony Hart (*Kaskitémahikan*), and Gord Bruyere (*Amawaajbitang*), *Wícihitowin Aboriginal Social Work in Canada*, (Halifax & Winnipeg: Fernwood Publishing, 2009), 93.

⁵⁷ Stevenson, “Intimate Integration: A Study of Transracial Adoption in Saskatchewan, 1944-1984,” (Ph.D. Diss., University of Saskatchewan, 2015).

⁵⁸ Sinclair, et.al., *Wícihitowin*, 93.

⁵⁹ Raven Sinclair, Forward of *Ohpikihaakan-ohpihmeh Raised Somewhere Else: A 60s Scoop Adoptee's Story of Coming Home*, by Colleen Cardinal, (Winnipeg: Roseway Publishing, 2018), 1.

⁶⁰ Andrews, *The White Unwed Mother*, 170.

A saturation of the adoption market and foster care system, the decriminalization of contraception and abortion, and increasing women's liberation efforts all contributed to the declining adoption rates in the 1970s. As Andrews examines, by the mid 1960s social workers and policymakers found that "the number of prospective adoptive homes were not keeping pace with the numbers of babies available."⁶¹ By the mid-1960s the number of illegitimate birth was significantly higher than the decade previous, making it difficult to find homes for all the babies in state care.⁶² The number of "illegitimate" births and adoption rates decreased as contraception was decriminalized and abortion made legal under TACs.⁶³ Following the 1969 legislative changes, single women had more options to legally prevent and terminate pregnancies and the growing impact of the women's liberation movement began challenging the social shaming of premarital sex and pregnancy outside of marriage.⁶⁴ At the turn of the decade the postwar mandate had been rendered ineffective and expensive, and legal access to contraceptive and abortion services presented more options for sexually active single women. As the 1970s began, services for single pregnant women in Canada shifted away from maternity homes of the postwar era to fit with changing discourse about women's rights, single motherhood, teen pregnancy, and economic responsibility of the welfare state.⁶⁵

In the 1970s, employees at Bankview School, the CBCA, and the LBCIC provided services that humanized single pregnant women, but these programs were still influenced by middle-class and White perspectives of progress and economic responsibility. Civil servants working at Bankview and the activists working at the birth control centres aimed to provide more positive experiences for single pregnant women and mothers than the maternity homes for unwed pregnant women in the decades before. Similar to the maternity homes, however, the students who attended Bankview were predominantly White teens, most of whom Bankview staff encouraged to get married or surrender their babies.⁶⁶ The women who utilized the CBCA and LBCIC services for single pregnant women

⁶¹ Andrews, *The White Unwed Mother*, 176.

⁶² Andrews, *The White Unwed Mother*, 176-177.

⁶³ Solinger, *Wake Up Little Susie*, 235-237; Andrews, *The White Unwed Mother*, 170-171.

⁶⁴ Solinger, *Wake Up Little Susie*, 235-237; Andrews, *The White Unwed Mother*, 170-171.

⁶⁵ Solinger, *Wake Up Little Susie*, 235-237; Andrews, *The White Unwed Mother*, 170-171; Veronica Strong-Boag, *Fostering Nation?: Canada Confronts its History of Childhood Disadvantage*, (Waterloo: Wilfred Laurier Press, 2011), 49; Anne Lorene Chambers, *A Legal History of Adoption in Ontario, 1921-2015*, (Toronto: University of Toronto Press, 2016), 8.

⁶⁶ See photos and written article from, Zwarun, "The high school for pregnant teenagers," pg. 8-10, found in "Adult Education Day Centre," M-7265-17; Bankview Year End report, 1970-71;

were only identified by their average ages and marital status – all of the women were not married and most of them were teens or in their early twenties.⁶⁷ The racial, ethnic, class, or religious background of the women who used the LBCIC and CBCA services were not explicitly recorded in the historical records saved within the archives. Whiteness and White perspectives did infuse the foundations of the programs at Bankview, the CBCA, and the LBCIC. Bankview’s program was framed by notions of middle-class Whiteness and economic responsibility that ultimately chastised young single mothers who “chose” to live on welfare. And the programs for single pregnant women at the CBCA and LBCIC were infused with White perspectives of reproductive liberation and choice. Within these programs for single pregnant women, the right to prevent and terminate pregnancy was upheld as the prime goal of women’s reproductive liberation, while not fully recognizing many women’s fight for their right to be mothers.

Single Motherhood, Legal Limitations, and Financial Fears in the 1970s

Even though adoption rates were declining, and some reproductive rights had been secured, Canadian laws and judicial proceedings continued to disadvantage single mothers and unmarried women well into the 1970s. The report from the *Royal Commission on the Status of Women (RCSW)*, published in 1970, identified the many Canadian laws that discriminated against women, and “submitted 167 recommendations for legislative reform.”⁶⁸ While the federal government of Canada introduced the *Statute Law (Status of Women) Amendment Act* in 1974, many citizenship and family laws and judicial proceedings remained discriminatory to women throughout the remainder of the decade.⁶⁹ Throughout the decade, in southern Alberta, local feminists drew attention to legal discrimination against women in Canada.⁷⁰ The educators at Bankview, the CBCA, and the LBCIC

Bankview Year End Report, 1971-72; Bankview Year End Report 1972-73; Bankview Year End Report, 1973-74 found in “Adult Education Day Centre,” M-7265-17, *CBCA Collection GA*.

⁶⁷ Pauline Hoskin, interview with Karissa Patton, December 20, 2017, transcript.

⁶⁸ Dominique Clément, “Sex Discrimination in Canadian Law: From Equal Citizenship to Human Rights Law,” in *Canada’s Legal Past: Looking Forward, Looking Back*, edited by Mélanie Méthot, Ted McCoy, and Lydsay Campbell, (Calgary: University of Calgary Press, 2020), 252.

⁶⁹ Clément, “Sex Discrimination in Canadian Law,” 253.

⁷⁰ JRS, “Illegitimate Children,” *Up*, vol.2 no.2, February 1975, pg.10-11; *Up*, “Citizenship Bill C-20,” vol.3 no.1, March 1976, pg.18; “Rape and the Law,” *Up* vol.3 no.2, June 1976, pg. 14-15; “NAC Report cont.,” *Up* vol. 3 no.2, June 1976, pg. 8, HQ 1480.L47.U6, UOWA.

worried about the particular discrimination young single mothers and their children faced under patriarchal legitimacy, citizenship, and rape laws.⁷¹

Throughout most of the decade Canadian laws limited women and children's rights separate from husbands or "legitimate" fathers, respectively.⁷² As historian Dominique Clément has shown, many Canadian laws were "rooted in the belief that women were dependents" of men.⁷³ At the turn of the decade Canadian legitimacy laws still defined children born outside of marriage as illegitimate – or *filius nullius*, "the son of no man."⁷⁴ Under federal legitimacy laws, unmarried fathers had little obligation to provide financial support, and their "illegitimate" children had no right to inherit any property or wealth from their "punitive" fathers.⁷⁵ Canadian courts also required proof of paternity before women made any legal claims to financial support from their children's fathers.⁷⁶ Similarly, federal citizenship laws contained "separate policies for women who married non-citizens, such as refusing to automatically recognize their future children's Canadian citizenship."⁷⁷ Children born to Canadian women and their non-Canadian husbands were not automatically recognized as Canadian citizens until 1976.⁷⁸ Under both of these laws, women and children remained legal dependents of their husbands and fathers. Until the late 1970s, unless a woman was married to a Canadian man, she and her children were not recognized as legitimate citizens with full financial rights. As Canadian legislation loosened its grip on women's reproductive choices when it came to preventing and terminating pregnancy in 1969, illegitimacy and citizenship continued to limit women's legal rights and choices when it came to motherhood.

Rape laws and judicial proceedings in Canada also limited women's sexual and paternal rights well into the 1970s. Laws about sexual offences, including rape, "continued to rest on a woman's

⁷¹ Bankview School's Year End Report, 1970-71, pg. 6, found in "Adult Education Day Centre," M-7265-17, *CBCA Collection GA*; Lethbridge Birth Control and Information Centre Review of Budget and Programs for January 1, 1974 to November 8, 1974; Proposal of Budget and Programs for 1975: Presented to the City of Lethbridge, the Province of Alberta Department of Preventative Social Services, and Family Planning Federation of Canada, *LBCIC 1973-1975 GMA*.

⁷² Clément, "Sex Discrimination in Canadian Law," 241.

⁷³ Clément, "Sex Discrimination in Canadian Law," 241.

⁷⁴ JRS, "Illegitimate Children," *Up*, vol.2 no.2, February 1975, pg.10-11, HQ 1480.L47.U6, UOWA.

⁷⁵ JRS, "Illegitimate Children," *Up*, vol.2 no.2, February 1975, pg.10-11, HQ 1480.L47.U6, UOWA.

⁷⁶ JRS, "Illegitimate Children," *Up*, vol.2 no.2, February 1975, pg.10-11, HQ 1480.L47.U6, UOWA.

⁷⁷ Clément, "Sex Discrimination in Canadian Law," 252.

⁷⁸ *Up*, "Citizenship Bill C-20," vol.3 no.1, March 1976, pg.18, HQ 1480.L47.U6, UOWA.

‘previously chaste character’ up to twenty-one years old, while the burden was on the accused to prove otherwise.”⁷⁹ In the late 1970s, rape was “still considered a sexual offence rather than an assault of a violent nature,” which ultimately “implicated the victim,” rather than the assaulter, to prove their innocence.⁸⁰ Judicial proceedings on rape cases also forbade juries from convicting assaulters based on rape survivors testimony, because it was not considered objective evidence.⁸¹ As historian Constance Backhouse has shown, these rape laws and judicial proceeding put the onus on young pregnant women to prove their chastity previous to the assault.⁸² When sexual assault resulted in pregnancy, assaulters and the courts often framed young pregnant women as “girls” who did not want to take responsibility for their immoral actions.⁸³ Backhouse’s work reveals the social and legal discourse about men’s “masculine entitlement” to women’s bodies and sexual intercourse, which disadvantaged women survivors of assault.⁸⁴ If the accused was found not guilty or acquitted, pregnant sexual assault survivors had even fewer legs to stand on when it came to receiving financial support for their “illegitimate” children. The treatment of sexual assault survivors in judicial proceedings meant that even charges of rape did not always result in financial support – from individual men or the state – for single mothers and illegitimate children.⁸⁵

The women’s liberation movement in Canada brought issues of sexual assault, women’s legal and economic disparity, and stigma around premarital sexuality and pregnancy into the open and southern Alberta feminists called for widespread social, legal, and economic changes. Throughout the early 1970s, local feminist newsletters in southern Alberta called attention to gender discriminatory laws in Canada. Tessa Jordan’s *Feminist Acts*, for example, has shown that the Edmonton-based feminist magazine *Branching Out* often offered “rigorous analysis of how Canadian law affects the lives of Canadian women.”⁸⁶ Likewise, but on a smaller scale, the local Women’s centre in Lethbridge promoted legal reform through their newsletter, *Up*.⁸⁷ Between 1974 and 1976

⁷⁹ Clément, “Sex Discrimination in Canadian Law,” 253.

⁸⁰ “Rape and the Law,” *Up* vol.3 no.2, June 1976, pg. 14-15, HQ 1480.L47.U6, UOWA.

⁸¹ “NAC Report cont.,” *Up* vol. 3 no.2, June 1976, pg. 8, HQ 1480.L47.U6, UOWA.

⁸² Backhouse, *Carnal Crimes*, 11-13.

⁸³ Backhouse, *Carnal Crimes*, 114-116, 263.

⁸⁴ Backhouse, *Carnal Crimes*, 11-12.

⁸⁵ Backhouse, *Carnal Crimes*, 116-117; Solinger, *Wake Up Little Susie*, 3.

⁸⁶ Tessa Jordan, *Feminist Acts: Branching Out Magazine and the Making of Canadian Feminism*, (Edmonton: University of Alberta Press, 2019), 182-183.

⁸⁷ JRS, “Illegitimate Children,” *Up*, vol.2 no.2, February 1975, pg.10-11; *Up*, “Citizenship Bill C-20,” vol.3 no.1, March 1976, pg.18; “Rape and the Law,” *Up* vol.3 no.2, June 1976, pg. 14-15; “NAC Report cont.,” *Up* vol. 3 no.2, June 1976, pg. 8, HQ 1480.L47.U6, UOWA.

the editors of *Up* specifically highlighted gender discrimination within Canadian legitimacy, citizenship, and rape laws. The newsletter published the reprint of a *Weekend Magazine* article about legitimacy laws and so-called illegitimate children in 1975.⁸⁸ This article, aptly titled “Children Who Aren’t,” detailed the shortcomings of Canadian legitimacy laws – including the part of the law that stated that illegitimate children automatically gained legitimacy through formal adoption.⁸⁹ The article importantly described the story of one Canadian woman, and single mother, who tried to adopt her own son in 1973 in order to remove him from the legal category of “illegitimate.”⁹⁰ In March 1976, *Up* published a call to action for women to write to their MPs, Prime Minister Pierre Trudeau, and Opposition leader Joe Clark (Progressive Conservative) in support of the federally tabled Bill C-20.⁹¹ The proposed legislations gave “Canadian mothers an equal right with Canadian fathers to confer citizenship upon their children, and equalizes residence requirements for aliens married to Canadian women and men, to enable them to become citizens.”⁹² A few months later, *Up* published another call to action regarding proposed amendments to the Canadian rape laws and judicial proceedings.⁹³ In June 1976, *Up* writers explicitly reported on the limitations of Canadian rape laws and the proposed amendments to “remove the need for a judge to warn the jury not to convict on a testimony of the victim” and that lawyers were no longer permitted to “question the victim to past sexual activity unless a written request is filed beforehand proving that this evidence is necessary.”⁹⁴ These local legal discussions and calls to action in *Up* underscore that southern Alberta feminists saw women’s sexual and parental rights as critical to women’s liberation goals. As the women’s liberation movement brought the fight for women’s legal rights and equality into the open, certain civil servants and women’s groups – like the administrators at Bankview and the women running the birth control centres – created services that helped women navigate the limits of Canadian laws.

⁸⁸ JRS, “Illegitimate Children,” *Up*, vol.2 no.2, February 1975, pg.10-11, HQ 1480.L47.U6, UOWA.

⁸⁹ JRS, “Illegitimate Children,” *Up*, vol.2 no.2, February 1975, pg.10-11, HQ 1480.L47.U6, UOWA.

⁹⁰ JRS, “Illegitimate Children,” *Up*, vol.2 no.2, February 1975, pg.10-11, HQ 1480.L47.U6, UOWA.

⁹¹ *Up*, “Citizenship Bill C-20,” vol.3 no.1, March 1976, pg.18, HQ 1480.L47.U6, UOWA.

⁹² *Up*, “Citizenship Bill C-20,” vol.3 no.1, March 1976, pg.18, HQ 1480.L47.U6, UOWA.

⁹³ “NAC Report cont.,” *Up* vol. 3 no.2, June 1976, pg. 8, HQ 1480.L47.U6, UOWA.

⁹⁴ “NAC Report cont.,” *Up* vol. 3 no.2, June 1976, pg. 8, HQ 1480.L47.U6, UOWA.

Fears about the legal and economic limitations for single mothers infused the programs at Bankview and the two local birth control centres in the 1970s. Bankview's programs offered legal counselling for their students and often talked around issues of sexual assault and "girls getting into trouble" against their wishes.⁹⁵ While administrators at Bankview recognized the limitations for single mothers within existing the legal and economic systems, their programs encouraged students to get married or put their children up for adoption in order to fit in with the same discriminatory systems.⁹⁶ The women running the birth control centres recognized the discrimination against women in Canadian laws but provided limited legal counselling on legitimacy, citizenship, or parental rights compared to Bankview's program. The staff at the LBCIC and CBCA services, however, brought sexual assault into their programs explicitly by the mid-1970s, when the centres established rape crisis programs at both birth control centres.⁹⁷ In 1974 Pauline Hoskin proposed that the Centre expand the Centre's rape crisis services to include "education and information on legal, medical, and counselling aspects."⁹⁸ Birth control centre staff and volunteers actively called for legal and social reform, and joined other local feminist activists in their calls to repeal sexist laws that disadvantaged women.⁹⁹ While feminists awaited broader legislative changes, women running the birth control centres encouraged women to utilize the reproductive rights they had already won, namely legalized contraceptive and abortion services. The discourse underlining the programs at the LBCIC and CBCA presented abortion as the best option for young women to avoid legal and

⁹⁵ Historian Estell Freedman's current work examines coded language women used to talk about sexual assault and harassment. See: Justine Modica, "How Women's Oral History Collection Reveal the "Silent" History of Sexual Violence," *The Clayman Institute for Gender Research*, December 17, 2019, accessed May 25, 2020, <https://gender.stanford.edu/news-publications/gender-news/how-women-s-oral-history-collections-reveal-silent-history-sexual>.

⁹⁶ Zwarun, "The high school for pregnant teenagers," pg. 8-10, found in "Adult Education Day Centre," M-7265-17, *CBCA Collection*, GA.

⁹⁷ Lethbridge Birth Control and Information Centre Review of Budget and Programs for January 1, 1974 to November 8, 1974; Proposal of Budget and Programs for 1975: Presented to the City of Lethbridge, the Province of Alberta Department of Preventative Social Services, and Family Planning Federation of Canada, *LBCIC 1973-1975 GMA*; "Educational Outreach 1968-1973," M-7265- 99; "Educational Outreach 1974-1976," M-7265-100; "Educational Outreach 1978," M-7265-101; "Educational Outreach, Exercises Used 1976-1979," M-7265-105, *CBCA Collection* GA.

⁹⁸ Lethbridge Birth Control and Information Centre Review of Budget and Programs for January 1, 1974 to November 8, 1974; Proposal of Budget and Programs for 1975: Presented to the City of Lethbridge, the Province of Alberta Department of Preventative Social Services, and Family Planning Federation of Canada, *LBCIC 1973-1975 GMA*.

⁹⁹ JRS, "Illegitimate Children," *Up*, vol.2 no.2, February 1975, pg.10-11; *Up*, "Citizenship Bill C-20," vol.3 no.1, March 1976, pg.18; "Rape and the Law," *Up* vol.3 no.2, June 1976, pg. 14-15; "NAC Report cont.," *Up* vol. 3 no.2, June 1976, pg. 8, HQ 1480.L47.U6, UOWA.

economic discrimination that came with single motherhood. The staff and Bankview and the two southern Alberta birth control centres recognized that Canadian family and criminal laws in the 1970s continued to disadvantage single mothers and limited their reach as service-providers. As much as the people running Bankview and birth control centres reviled these discriminatory laws, the programs that they developed often worked within these legal landscapes and provided a hierarchy of choice when it came to single motherhood.

“Return them to society as self-confident human beings:”¹⁰⁰ Pregnant Teens as “Candidates of Rehabilitation” at Bankview School in the 1970s

Originally a small, religious program in Calgary, Bankview school became a pilot project in the Calgary Board of Education’s (public school division) correspondence learning division in the Fall of 1969. For the first seven months of operations the supported correspondence learning program was held in a Church basement as the Adult Education Day Centre (AEDC).¹⁰¹ Calgary Catholic Family Services established the ADEC in March 1969, just before the federal government decriminalized contraception and partially decriminalized abortion.¹⁰² While the ADEC’s name was vague as to which educational service they provided and for whom, the program was established as an alternative service for teenagers who wanted to continue their schooling while pregnant.¹⁰³ The religious affiliation suggests that this program was created, in part, to support young women who did not choose to terminate their pregnancies. And when the ADEC opened in March 1969 abortion was about to be decriminalized under TACs, so the establishment of the program was likely created in response to the changing abortion laws. By September 1969, the program was taken over by the Calgary Board of Education as part of the Correspondence Learning and Adult Education departments and moved to Bankview School, a recently closed elementary school.¹⁰⁴ While the program had moved to the public school division, the school kept its affiliation with Catholic Family

¹⁰⁰ Zwarun, “The high school for pregnant teenagers,” pg. 8, found in “Adult Education Day Centre,” M-7265-17, *CBCA Collection*, GA.

¹⁰¹ Adult Education Day Centre pamphlet, c. 1969, found in “Adult Education Day Centre,” M-7265-17, *CBCA Collection* GA.

¹⁰² Adult Education Day Centre pamphlet, c. 1969, found in “Adult Education Day Centre,” M-7265-17, *CBCA Collection* GA.

¹⁰³ Adult Education Day Centre pamphlet, c. 1969, found in “Adult Education Day Centre,” M-7265-17, *CBCA Collection* GA.

¹⁰⁴ Bankview Year End Report, 1970-1971; Zwarun, “The high school for pregnant teenagers,” 8, found in “Adult Education Day Centre,” M-7265-17, *CBCA Collection* GA.

Services' adoption program throughout the decade.¹⁰⁵ In its first year of operation, the school offered correspondence learning, prenatal classes, birth control and sex education classes, legal advisement, along with individual, group, family, and couples counselling.¹⁰⁶

The limited remaining archival sources about Bankview School in the 1970s reveal the complex nature of the progressive program for pregnant teens that operated within social, legal, and economic systems that routinely disadvantaged single mothers. The archived sources on the Bankview School include some saved clippings of news coverage of the school's opening in 1970 along with the School's first four annual reports.¹⁰⁷ The three-page exposé by Suzanne Zwarun in February 1970, offers particular insight into experiences of the teenagers attending Bankview School. The year-end reports from Bankview offer more detailed information about the program and enrollment rates. While these sources are limited in numbers, they illuminate the foundational philosophies of Bankview, as well as how these philosophies operated in practice. Zwarun's exposé on Bankview in 1970 as well as the year-end reports underlined the specific need for an educational program for pregnant teens in an educational system that did not allow them to continue their schooling.¹⁰⁸

The administrators at Bankview recognized that teen pregnancy was not uncommon and felt that making pregnant teens hide away from society was cruel.¹⁰⁹ By providing educational services to pregnant and parenting teens, Bankview staff also created a unique public space where these teenagers built a community of young single pregnant women.¹¹⁰ While Bankview staff pushed the boundaries when it came to pregnant teens' place in the educational and social systems in Calgary, they continued to work within restrictive legal and economic boundaries. Counsellors, teachers, and

¹⁰⁵ Catholic Family Service flyer, c.1969-70, found in "Adult Education Day Centre," M-7265-17, *CBCA Collection GA*.

¹⁰⁶ Zwarun, "The high school for pregnant teenagers," pg. 8-10, found in "Adult Education Day Centre," M-7265-17; Bankview Year End report, 1970-71; Bankview Year End Report, 1971-72; Bankview Year End Report 1972-73; Bankview Year End Report, 1973-74 found in "Adult Education Day Centre," M-7265-17, *CBCA Collection GA*.

¹⁰⁷ Zwarun, "The high school for pregnant teenagers," 8-10, found in "Adult Education Day Centre," M-7265-17; Bankview Year End report, 1970-71; Bankview Year End Report, 1971-72; Bankview Year End Report 1972-73; Bankview Year End Report, 1973-74 found in "Adult Education Day Centre," M-7265-17, *CBCA Collection GA*.

¹⁰⁸ Solinger, *Wake Up Little Susie*, 109-110; Kelly, "Pregnant with Meaning," 390-391.

¹⁰⁹ Zwarun, "The high school for pregnant teenagers," pg. 8, found in "Adult Education Day Centre," M-7265-17, *CBCA Collection GA*.

¹¹⁰ Zwarun, "The high school for pregnant teenagers," pg. 8-9; Bankview Year End Report 1971-72, pg. 9 found in "Adult Education Day Centre," M-7265-17, *CBCA Collection GA*.

administrators provided the Bankview students with detailed information about legitimacy laws and family laws and presented marriage or adoption as the best, most responsible choices for the teen mothers and their children. Bankview presented pregnant teens with improved educational and, to some extent, social options at the turn of the decade, but ultimately used gender discriminatory laws to discourage single motherhood.

By February 1970, local newspapers shared stories about Bankview students' experiences at the first Canadian school for pregnant and parenting teens, underscoring the social and educational importance of Bankview. Susanne Zwarun used stories about certain Bankview students, captured in her three-page *Calgary Herald* exposé on Bankview in early 1970, to promote the school as a unique and compassionate option for pregnant teenagers.¹¹¹ The article opens with Linda's story. As Zwarun explains, Linda was a Calgary teen entering grade twelve when she became pregnant. Based on Linda's experience captured in the *Herald*, her unwanted pregnancy made it seem as though her dreams of finishing high school and moving on to a university degree were thwarted;¹¹² once she found out she was pregnant, even everyday realities of teen life, like dating, hanging out with friends, extracurricular activities, or helping with the grocery shopping, felt impossible for Linda.¹¹³ The article did not explain why but Linda did not feel that abortion was an option that suited her.¹¹⁴ Instead, Linda chose to carry out her pregnancy and put her child up for adoption. But she had plans to attend university in the Fall and wanted to complete her high school diploma, so she also enrolled at Bankview.¹¹⁵ Before Bankview, young pregnant women, like Linda, often got married and raised their children or were sent away to maternity homes that placed their children up for adoption, leaving them with few educational opportunities.¹¹⁶ Using Linda's story as a narrative device throughout the three-page exposé, Zwarun portrays Bankview as a compassionate and modern intervention into the limited options for pregnant teenagers at the turn of the decade. In line with Zwarun's article, Bankview school positively impacted pregnant teens in the 1970s.

¹¹¹ Andrews, *The White Unwed Mother*, 165.

¹¹² Zwarun, "The high school for pregnant teenagers," pg. 8, found in "Adult Education Day Centre," M-7265-17, *CBCA Collection GA*.

¹¹³ Zwarun, "The high school for pregnant teenagers," pg. 8, found in "Adult Education Day Centre," M-7265-17, *CBCA Collection GA*.

¹¹⁴ Zwarun, "The high school for pregnant teenagers," pg. 8, found in "Adult Education Day Centre," M-7265-17, *CBCA Collection GA*.

¹¹⁵ Zwarun, "The high school for pregnant teenagers," pg. 8, found in "Adult Education Day Centre," M-7265-17, *CBCA Collection GA*.

¹¹⁶ Andrews, *The White Unwed Mother*, 165.

Bankview expanded pregnant teenage women's educational choices in Calgary significantly during the 1970s.¹¹⁷ School Boards across Canada, including the Calgary Board of Education that backed Bankview, did not allow pregnant women to attend classes because many administrators felt that a visibly pregnant teenager set a bad example for other students.¹¹⁸ Some schools even suspended pregnant teens on the grounds of immoral behaviour.¹¹⁹ Bankview's program, alternatively, allowed pregnant and parenting teenage women to attend and complete coursework. According to Bankview year-end reports, the young women who attended Bankview school between 1970 and 1974 were all pregnant or new mothers between the ages of thirteen and nineteen.¹²⁰ As students at Bankview, these women had access to educational instruction, counselling services, as well as prenatal and birth control services.¹²¹ While the students completed their coursework through correspondence learning, the school also provided classroom spaces, a library, a gymnasium, and teachers¹²² to help students earn their full high school diplomas. Because Bankview utilized existing correspondence learning programs, pregnant women could start their program at any point in the school year and create a flexible timetable around their due date. The Bankview students who wanted to pursue a university degree were provided with resources to finish their high school education. For others, the school offered vocational training, including typing and home economics courses, to prepare them for working and domestic life after high school.¹²³ In this way, Bankview significantly offered options for pregnant teenagers to continue their high school education during a time when they were otherwise segregated from existing educational institutions.

The administrators and teachers who established Bankview saw the school for pregnant and parenting teens as an important disruption of existing educational regulations and social stigma

¹¹⁷ Zwarun, "The high school for pregnant teenagers," pg. 8, found in "Adult Education Day Centre," M-7265-17, *CBCA Collection*, GA.

¹¹⁸ Solinger, *Wake Up Little Susie*, 109-110; Kelly, "Pregnant with Meaning," 390-391.

¹¹⁹ Solinger, *Wake Up Little Susie*, 109-110.

¹²⁰ Bankview Year End report, 1970-71; Bankview Year End Report, 1971-72; Bankview Year End Report 1972-73; Bankview Year End Report, 1973-74 found in "Adult Education Day Centre," M-7265-17, *CBCA Collection*, GA.

¹²¹ Bankview Year End report, 1970-71; Bankview Year End Report, 1971-72; Bankview Year End Report 1972-73; Bankview Year End Report, 1973-74 found in "Adult Education Day Centre," M-7265-17, *CBCA Collection*, GA.

¹²² Most of the teachers worked part-time on an hourly wage due to the school's low budget. See: Zwarun, "The high school for pregnant teenagers," pg. 8, found in "Adult Education Day Centre," M-7265-17, *CBCA Collection*, GA.

¹²³ Zwarun, "The high school for pregnant teenagers," pg. 8-10, found in "Adult Education Day Centre," M-7265-17, *CBCA Collection*, GA.

about teen pregnancy. Zwarun explained, “when Bankview started, established institutions that work with unwed mothers were skeptical. They warned school officials that the girls [sic] would never attend; pregnant girls [sic] would not be seen in public. Allowing them to hide would be the most compassionate answer.”¹²⁴ Employees and Bankview actively resisted this point of view. Bill McCormick, one of Bankview’s founders, made his feelings known in the *Herald* article, telling Zwarun that he was “angered by people who expect the girls [sic] to hide their faces in shame.”¹²⁵ McCormick denounced maternity homes and everything they represented for teenage mothers. He explained that as an educator he had seen many young women who were “hidden, sent away to another town, put in institutions at a time when all they needed was support.”¹²⁶ McCormick explained that providing a public space for pregnant teens to continue their education was important to ensuring a positive future for the young pregnant women: “with a girl’s [sic] family behind her and her education uninterrupted, half the battle is won.”¹²⁷ Bankview Principal, Ward Steckle similarly told Zwarun that Bankview was just a starting point for better services for single pregnant women: “Bankview certainly isn’t the whole answer ... We have a long way to go to provide adequate services for the unwed mother. We’re doing something to help, but it’s just a start.”¹²⁸ Following McCormick and Steckle’s lead, Zwarun championed Bankview as a program that helped pregnant teenagers “get rid of their guilt [sic] feelings and return them to society as self-confident human beings.”¹²⁹ Unlike maternity homes from earlier decades, Bankview did not seek to hide and punish young pregnant women. Rather, Bankview staff created a program that promoted broader acceptance of pregnant teens and actively pushed against social commentary of teen pregnancy as a moral failing of young women.

Bankview employees tried to change attitudes about premarital sex and pregnant teens by encouraging students to be open about their pregnancy. Students quoted in Zwarun’s article

¹²⁴ Zwarun, “The high school for pregnant teenagers,” pg. 8, found in “Adult Education Day Centre,” M-7265-17, *CBCA Collection*, GA.

¹²⁵ Zwarun, “The high school for pregnant teenagers,” pg.10, found in “Adult Education Day Centre,” M-7265-17, *CBCA Collection*, GA.

¹²⁶ Zwarun, “The high school for pregnant teenagers,” pg.10, found in “Adult Education Day Centre,” M-7265-17, *CBCA Collection*, GA.

¹²⁷ Zwarun, “The high school for pregnant teenagers,” pg. 10, found in “Adult Education Day Centre,” M-7265-17, *CBCA Collection*, GA.

¹²⁸ Zwarun, “The high school for pregnant teenagers,” pg. 10, found in “Adult Education Day Centre,” M-7265-17, *CBCA Collection*, GA.

¹²⁹ Zwarun, “The high school for pregnant teenagers,” pg. 8, found in “Adult Education Day Centre,” M-7265-17, *CBCA Collection*, GA.

explained how they had previously assumed that “only bad girls [get] pregnant.”¹³⁰ Bankview students had learned that sex before marriage, especially if it resulted in pregnancy, was immoral. Because they were taught that only “bad girls” have sex outside of marriage, the pregnant teens often felt as though they were “bad” or “immoral.” Bankview staff challenged this attitude about premarital sex and pregnancy and taught the students that teen sexuality and pregnancy was a common occurrence. Rather than shaming the students for having sex, Bankview staff encouraged the students to talk openly about their pregnancy with friends and family. In the *Herald* article “Linda explained that many of her friends admitted they had also been sexually active when they found out she was pregnant – forcing Linda to realize that ‘it isn’t just naughty girls [sic] who do it.’”¹³¹ Zwarun similarly underlined the importance of parents’ support for the pregnant teens at Bankview. Under the sub-headline: “The girl’s [sic] father shares her guilt,”¹³² she told readers that many parents of the pregnant teens felt guilty because they had not talked to their children about sex and reproduction. Quoting Linda again, Zwarun, accentuates Bankview’s specific counselling services for the students and their parents to discuss these feelings. Linda even told Zwarun that her unplanned pregnancy brought her and her father “closer together.”¹³³ The Bankview program was set up with counselling services that encouraged students to be open about their pregnancy in order to combat stigma about teenage sexuality. The goals of the Bankview program reached beyond educational opportunities to include broader change to attitudes about teenage pregnancy.

The Bankview program also offered housing and moral support for the students who did not have the same kind of family and community care as Linda. Some students were sent to Bankview from out of town or out of province either to conceal their pregnancy from their home communities or because Bankview was their only opportunity to finish their diploma. Others came to Bankview in search of education and a place to stay after they were kicked out of their homes for being pregnant.¹³⁴ Zwarun’s article and Bankview’s year-end reports discuss the importance of their

¹³⁰ Zwarun, “The high school for pregnant teenagers,” pg. 8, found in “Adult Education Day Centre,” M-7265-17, *CBCA Collection*, GA.

¹³¹ Zwarun, “The high school for pregnant teenagers,” pg. 8, found in “Adult Education Day Centre,” M-7265-17, *CBCA Collection*, GA.

¹³² Zwarun, “The high school for pregnant teenagers,” pg.10, found in “Adult Education Day Centre,” M-7265-17, *CBCA Collection*, GA.

¹³³ Zwarun, “The high school for pregnant teenagers,” pg. 10, found in “Adult Education Day Centre,” M-7265-17, *CBCA Collection*, GA.

¹³⁴ Bankview Year End report, 1970-71, pg. 10; Zwarun, “The high school for pregnant teenagers,” pg. 8, 10, found in “Adult Education Day Centre,” M-7265-17, *CBCA Collection*, GA.

“boarding home project” to help house students both “from out of town and those for whom it was not possible to remain in their own homes.”¹³⁵ Zwarun shared the story of one Bankview student, named Elaine, who came to Bankview from a small town in British Columbia. Zwarun described Elaine as a young woman, who was “withdrawn, hostile, and angry at the world, when she first arrived at Bankview.”¹³⁶ Zwarun continued, explaining that Elaine’s demeanor “thawed” after receiving support from Bankview staff and students.¹³⁷ In the article, Zwarun suggested that Elaine had no family support following her pregnancy but argued that the sense of community at Bankview allowed women like Elaine to “blossom.”¹³⁸ The program at Bankview provided Elaine with more than just correspondence education and included a support network and a place to live. Even when accounting for Zwarun’s celebratory perspective of Bankview, her article and the school’s year-end reports detailed the necessity of educational, housing, and support services for young women like Elaine.

In the early 1970s, Bankview offered a unique space for pregnant teenagers to build a community. Zwarun, in her article, and Bankview administration, in the school’s year-end reports, emphasized the importance of community building around the students’ shared experiences. In Zwarun’s article, Linda attributed the sense of community at Bankview to the fact that the students “all have something in common.”¹³⁹ To encourage community building further, in 1971 the school implemented student support groups as a key part of the program. The 1971/1972 year-end report argued that the new student support groups helped “facilitate discussions which enable girls [sic] to give mutual support” around personal relationships and decision making.¹⁴⁰ The report also revealed that students guided the support group meetings, and asked for “frank, specific discussions regarding such problem areas as: how do you deal with sex? How to relate to boys on a date? how

¹³⁵ Quotations from: Bankview Year End report, 1970-71, pg. 10 found in “Adult Education Day Centre,” M-7265-17, *CBCA Collection*, GA. Also see: Zwarun, “The high school for pregnant teenagers,” pg. 8-10, found in “Adult Education Day Centre,” M-7265-17, *CBCA Collection*, GA.

¹³⁶ Zwarun, “The high school for pregnant teenagers,” pg. 8-9, found in “Adult Education Day Centre,” M-7265-17, *CBCA Collection*, GA.

¹³⁷ Zwarun, “The high school for pregnant teenagers,” pg. 8-9, found in “Adult Education Day Centre,” M-7265-17, *CBCA Collection*, GA.

¹³⁸ Zwarun, “The high school for pregnant teenagers,” pg. 8-9, found in “Adult Education Day Centre,” M-7265-17, *CBCA Collection*, GA.

¹³⁹ Zwarun, “The high school for pregnant teenagers,” pg. 8-9, found in “Adult Education Day Centre,” M-7265-17, *CBCA Collection*, GA.

¹⁴⁰ Bankview Year End Report 1971-72, pg. 9 found in “Adult Education Day Centre,” M-7265-17, *CBCA Collection* GA.

much do you tell of your past? how do you react when asked about the illegitimate pregnancy? how do you get back into circulation?”¹⁴¹ The student support groups at Bankview facilitated community building and allowed students to discuss their collective concerns about how to create a social life following their pregnancy. Unlike other Calgary schools that segregated pregnant women from their peers, one of the main goals at Bankview was to foster a community among young single pregnant women.

The Bankview program also provided reproductive and sexual health education for their students, including preventative health classes on birth control provided by the CBCA. As news of the new Calgary school for pregnant teens spread, local physicians, public health nurses, and counsellors volunteered their time to help Bankview school provide these services.¹⁴² Some of the women working at the CBCA had volunteered with the ADEC and continued to volunteer at Bankview. CBCA educational outreach instructor, and public health nurse, Carol Ann Sears provided the prenatal courses and birth control education for Bankview students.¹⁴³ Women running the CBCA also kept information about the ADEC and Bankview (including the year-end reports), suggested a relationship between the CBCA and Bankview. Mostly likely, CBCA staff and volunteers offered information about Bankview School to teens who did not want an abortion but wanted to complete their schooling. These health education services were important for the health and wellbeing of the students at Bankview, who felt out of place in external prenatal classes full of married women.¹⁴⁴ The purpose of the birth control education at Bankview, however, was underscored as a preventative measure. In the 1970/1971 year-end report, the Bankview administration described birth control and sex education courses as part of their broader goal to teach students to exercise “internal controls” and “self-discipline.”¹⁴⁵ Bankview administrators saw birth control and sex education as a preventative measure to ensure that their students did not get pregnant outside of marriage again. Bankview staff emphasised the normalcy of teenage pregnancy and encouraged broader acceptance of teenage mothers in a society that did not adequately teach

¹⁴¹ Bankview Year End Report 1971-72, pg. 9 found in “Adult Education Day Centre,” M-7265-17, *CBCA Collection* GA.

¹⁴² Bankview Year End report, 1970-71, pg. 2-3; Bankview Year End report, 1971-72, pg. 3, found in “Adult Education Day Centre,” M-7265-17, *CBCA Collection* GA.

¹⁴³ Adult Education Day Centre pamphlet, c. 1969, Bankview Year End report, 1970-71, pg. 4, found in “Adult Education Day Centre,” M-7265-17, *CBCA Collection* GA.

¹⁴⁴ JB, interview, Dec. 8, 2012, transcript, GMA.

¹⁴⁵ Bankview School’s Year End Report, 1970-71, pg. 3, found in “Adult Education Day Centre,” M-7265-17, *CBCA Collection* GA.

youth about sex, reproduction, and contraception. But, the same Bankview employees utilized birth control and sex education as a method to prevent further teen pregnancies and single motherhood. No matter how supportive of the pregnant teens in their program, Bankview staff ultimately endeavoured to decrease rates of teen pregnancy and single motherhood.

Similar to the health education programming, Bankview helped to secure legal services for students to inform them about their legal options, but the staff ultimately underscored single motherhood as an irresponsible decision. Largely inspired by the legal and economic limitations that single mothers still faced in the 1970s, administrators at Bankview provided legal counselling and resources to their students. These legal services included “information regarding the legal and financial rights of both the unmarried mother and the punative father”¹⁴⁶ and the “legal formalities of placing a child for adoption.”¹⁴⁷ Zwarun and Bankview staff describe these legal services as necessary to help the student make informed choices about their future.¹⁴⁸ The way certain teens’ decisions were described by Zwarun and Bankview employees, however, suggests that single motherhood was considered the wrong choice at Bankview. Within Zwarun’s article and the school’s year-end reports, single motherhood was discussed as an irresponsible choice that resigned young women and their children to a life of welfare dependence.¹⁴⁹ In Zwarun’s article, one counsellor at Bankview explained, “keeping the baby causes anxiety too. Babies are more expensive than teenagers realize. ... most 16- and 17-year-olds simply aren’t ready to be tied down to the responsibility of a child, with or without a father.”¹⁵⁰ Bankview staff encouraged students to either give up their children for adoption and continue their schooling or, if they were old enough, marry their child’s father and keep the baby.¹⁵¹ The educational and legal programs at Bankview diametrically categorized pregnant teens’ decisions as irresponsible and responsible. Not unlike like

¹⁴⁶ Bankview School’s Year End Report, 1970-71, pg. 6, found in “Adult Education Day Centre,” M-7265-17, *CBCA Collection* GA.

¹⁴⁷ Zwarun, “The high school for pregnant teenagers,” pg. 10, found in “Adult Education Day Centre,” M-7265-17, *CBCA Collection* GA.

¹⁴⁸ Bankview School’s Year End Report, 1970-71, pg. 6, found in “Adult Education Day Centre,” M-7265-17, *CBCA Collection* GA.

¹⁴⁹ Zwarun, “The high school for pregnant teenagers,” pg. 8-10; Bankview School’s Year End Report, 1970-71; Bankview School’s Year End Report, 1971-72; Bankview School’s Year End Report, 1972-73; Bankview School’s Year End Report, 1973-74, found in “Adult Education Day Centre,” M-7265-17, *CBCA Collection* GA.

¹⁵⁰ Zwarun, “The high school for pregnant teenagers,” pg. 10, found in “Adult Education Day Centre,” M-7265-17, *CBCA Collection* GA.

¹⁵¹ Zwarun, “The high school for pregnant teenagers,” pg. 10, found in “Adult Education Day Centre,” M-7265-17, *CBCA Collection* GA.

post-war era maternity home staff and adoption policy makers, Bankview administrators saw pregnant teens as candidates of rehabilitation.

The administrators at Bankview often described their students as smart and respectable teenage women who chose to continue their education instead of succumbing to a life of single motherhood. As scholars Solinger and Andrews have shown, young single White pregnant women in postwar Canada and the United States were encouraged secretly give up their children to preserve their image as White middle-class and educated young women.¹⁵² Parents and social workers encouraged the pregnant teens to embrace the image of the smart and respectable White woman to attract a future husband.¹⁵³ In 1970, Bankview staff perpetuated the ideal that smart and respectable White young women had bright futures, which insinuated that single motherhood dashed any hopes of a happy future. Principal Steckel estimated that only one-in-ten pregnant teens in Calgary attended the school in February 1970.¹⁵⁴ And he told Zwarun that the young women attending Bankview were smarter than the average teenager:

‘Academically, most of them do better here than they were doing wherever they came from, partly because there’s a high student-teacher ratio. They get the attention they wouldn’t get in a larger school, and the more attention they get, the harder they work. Anyway, they’re very bright kids. Most of them have an IQ at least 10 points higher than the average high school student.’ It’s likely that Bankview’s girls [sic] are smarter simply because honour-roll students are more apt to want to continue their education.¹⁵⁵

Steckel further argued that Bankview’s program was beneficial for furthering the education of pregnant teens. But he also implied that Bankview’s program attracted responsible young women who valued education. In reality, in the first two years almost half of the pregnant teens who had enrolled at Bankview withdrew from the program to get married and keep their babies.¹⁵⁶ And in the 1971/72 school year the students who stayed enrolled at Bankview only boasted a fifty-six percent course completion rate.¹⁵⁷ Yet, in her article Zwarun sympathetically featured students like Linda,

¹⁵² Solinger, *Wake Up Little Susie*, 16, 25-26; Andrews, *The White Unwed Mother*, 162.

¹⁵³ Solinger, *Wake Up Little Susie*, 16, 25-26; Andrews, *The White Unwed Mother*, 162.

¹⁵⁴ Zwarun, “The high school for pregnant teenagers,” pg. 8, found in “Adult Education Day Centre,” M-7265-17, *CBCA Collection GA*.

¹⁵⁵ Zwarun, “The high school for pregnant teenagers,” pg. 8, found in “Adult Education Day Centre,” M-7265-17, *CBCA Collection GA*.

¹⁵⁶ Bankview School’s Year End Report, 1970-71, pg. 1, found in “Adult Education Day Centre,” M-7265-17, *CBCA Collection GA*.

¹⁵⁷ Bankview Year End Report 1971-72, pg. 9 found in “Adult Education Day Centre,” M-7265-17, *CBCA Collection GA*.

who planned to continue her schooling, put her baby up for adoption, and pursue a university degree.¹⁵⁸ Zwarun and Steckel strategically used the narrative of the smart and responsible “girls” who attended Bankview and left marriage and children for later “when they were through with school and university and ready to settle down,”¹⁵⁹ to discourage students from choosing single motherhood in the early 1970s. In doing so, Bankview staff framed education and motherhood as mutually exclusive for pregnant teens. When Steckel described the one in ten pregnant teens who attended Bankview as smart and responsible, he signalled that these pregnant young women were too smart and responsible to choose motherhood before they were married and economically secure.

For some of the pregnant teens enrolled at Bankview, staff and parents encouraged them to keep their children, but only if they were engaged to be married. If Linda represented the smart and responsible pregnant teens who chose adoption and an education, Bankview student Nancy represented the “good” pregnant teens who chose to get married and keep their babies. In the 1950s and 1960s, “married pregnancy” was understood as “the final step of maturity for a female.”¹⁶⁰ At Bankview, if staff considered a student and her partner responsible enough for marriage then they might recommend that the couple keep their baby. Nancy’s story was captured in Zwarun’s 1970 article and used as an example of how Bankview rehabilitated pregnant teens to become responsible mothers. Zwarun explains, that Bankview staff described Nancy as a “borderline delinquent’ when she entered Bankview. Her boyfriend was equally irresponsible.”¹⁶¹ Quoting one of Bankview’s counsellors, Zwarun explains that Nancy and her boyfriend improved their “outlook” after counselling sessions at the school. Because of Nancy’s improved outlook and her engagement many Bankview staff “approve[d]” of her choice to keep her baby.¹⁶² By categorizing motherhood as responsible within the confines of marriage Bankview employees suggested that single motherhood was legally and economically irresponsible choice.

¹⁵⁸ Zwarun, “The high school for pregnant teenagers,” pg. 8, found in “Adult Education Day Centre,” M-7265-17, *CBCA Collection GA*.

¹⁵⁹ Zwarun, “The high school for pregnant teenagers,” pg. 8, found in “Adult Education Day Centre,” M-7265-17, *CBCA Collection GA*.

¹⁶⁰ Solinger, *Wake Up Little Susie*, 131.

¹⁶¹ Zwarun, “The high school for pregnant teenagers,” pg. 10, found in “Adult Education Day Centre,” M-7265-17, *CBCA Collection GA*.

¹⁶² Zwarun, “The high school for pregnant teenagers,” pg. 10, found in “Adult Education Day Centre,” M-7265-17, *CBCA Collection, GA*.

Students who chose single motherhood were described as not emotionally or economically secure enough to keep their children. In postwar Canada and the U.S. White unmarried pregnant women who wanted to keep their babies were often categorized as neurotic and by the 1960s, these single mothers were often pathologized as “the girl nobody loved.”¹⁶³ Social workers and psychologists explained that these single mothers who “nobody loved” put their emotional need before the economic security of themselves and their children.¹⁶⁴ By 1970, Bankview staff still categorized single motherhood as a naïve and selfish choice. In her article, Zwarun used the story of another Bankview student named Connie to emphasize that single motherhood was not encouraged at Bankview. The article suggests that Connie was pregnant as a result of sexual assault and explains that she was kicked out of her parents’ house for wanting to keep her baby. Like many cases of sexual assault,¹⁶⁵ Connie never reported or charged the young man who raped her.¹⁶⁶ According to Zwarun, Connie got pregnant after a sexual assault on her first date: “Connie ended her first date in tears. The boy assumed she would sleep with him. After all, she obviously knew the score.”¹⁶⁷ Counsellors at Bankview told Zwarun, that they worried that Connie’s baby would be a constant reminder of the assault she had endured.¹⁶⁸

Referencing her sexual assault and her economic situation, one counsellor quoted in Zwarun’s article described Connie’s situation as “utter hell.” The Bankview counsellor explained that Connie was “disowned by her wealthy parents, because she insisted on keeping her baby.”¹⁶⁹ A woman and still a teenager, Connie was considered financially insecure outside of the family economy of her parents or a husband.¹⁷⁰ Like Linda, Connie wanted to complete her high school

¹⁶³ Solinger, *Wake Up Little Susie*, 96; Andrews, *The White Unwed Mother*, 26; Kelly, “Pregnant with Meaning,” 398-399.

¹⁶⁴ Solinger, *Wake Up Little Susie*, 96; Kelly, “Pregnant with Meaning,” 398-399.

¹⁶⁵ Backhouse has shown that most sexual assaults remained unreported in the twentieth century. See: Backhouse, *Carnal Crimes*, 8, 11.

¹⁶⁶ Zwarun, “The high school for pregnant teenagers,” pg. 10, found in “Adult Education Day Centre,” M-7265-17, *CBCA Collection*, GA.

¹⁶⁷ Zwarun, “The high school for pregnant teenagers,” pg. 10, found in “Adult Education Day Centre,” M-7265-17, *CBCA Collection*, GA.

¹⁶⁸ Zwarun, “The high school for pregnant teenagers,” pg. 10, found in “Adult Education Day Centre,” M-7265-17, *CBCA Collection*, GA.

¹⁶⁹ Zwarun, “The high school for pregnant teenagers,” pg. 10, found in “Adult Education Day Centre,” M-7265-17, *CBCA Collection*, GA.

¹⁷⁰ Ehrlich has shown that adolescent women were considered part of the domestic family economy during the second half of the twentieth century in the United States. See: Ehrlich, *Regulating Desire*, 128.

diploma and had enrolled in a university program for the next year. And like Nancy, Connie kept her baby. But unlike Linda and Nancy, Connie was not economically tied to her parents or a husband. Bankview staff discouraged Connie from keeping her baby and underscored her lack of parental or spousal financial support as reason to give up her child. A Bankview counsellor told Zwarun that Connie had “enrolled in university with the aid of student loans and welfare,” and emphasized that “expenses are a constant struggle.”¹⁷¹ Citing her experience of sexual assault and her reliance on welfare and student loans, Connie’s story was juxtaposed with students like Linda and Nancy, who chose adoption and education or marriage and motherhood, respectively. Connie, and teens like her, were labelled as emotionally traumatized, economically dependent, and not ready to fend for themselves, let alone a baby.

While Connie’s case was presented as an unfortunate exception to the otherwise responsible pregnant teens enrolled at Bankview, in reality many students resisted the narratives of rehabilitation at Bankview and became single mothers. As abortion rates and accessibility of birth control increased during the 1970s, Bankview’s enrollment decreased.¹⁷² But even with declining enrollment between 1970s and 1974, nearly forty percent of Bankview students kept their children.¹⁷³ According to Bankview’s year-end reports, many pregnant teens withdrew from Bankview and kept their babies (these cases were not included in statistics about the number adoptions from fully enrolled students).¹⁷⁴ The students who stayed in the Bankview program also pushed back against staff who pressure them to make certain decisions. Bankview’s 1971/72 year-end report highlighted one instance of student resistance in the school’s new “child care group” education and counseling option.¹⁷⁵ This new course option covered topics of infant care and budgeting for students who

¹⁷¹ Zwarun, “The high school for pregnant teenagers,” pg. 10, found in “Adult Education Day Centre,” M-7265-17, *CBCA Collection*, GA.

¹⁷² Bankview School’s Year End Report, 1973-74, pg. 2; Bankview School’s Year End Report, 1971-72, pg. 1, in “Adult Education Day Centre,” M-7265-17, *CBCA Collection* GA.

¹⁷³ Between 1970 and 1974, the school reported one hundred and eighteen students surrendered their children, while seventy-one kept their children. See: Bankview School’s Year End Report, 1970-71, pg. 5; Bankview School’s Year End Report, 1971-72, pg. 4; Bankview School’s Year End Report, 1972-73, pg. 2; Bankview School’s Year End Report, 1973-74, pg. 5, found in “Adult Education Day Centre,” M-7265-17, *CBCA Collection* GA.

¹⁷⁴ Bankview School’s Year End Report, 1973-74, pg. 4, found in “Adult Education Day Centre,” M-7265-17, *CBCA Collection* GA.

¹⁷⁵ Bankview School’s Year End Report, 1971-72, pg. 8, found in “Adult Education Day Centre,” M-7265-17, *CBCA Collection* GA.

chose to keep their children.¹⁷⁶ Student feedback deemed the course “unsuccessful” because “it was felt that the information was presented to the girls [sic] in such a way that, rather than provide support, it seemed a confrontation, and they withdrew.”¹⁷⁷ The young pregnant women who attended Bankview did not always conform to the narrative of reformation propagated at Bankview and many kept their children and remained single.

In the 1970s, staff at Bankview claimed that “counsellors try not to pressure girls [sic] into giving up their babies,”¹⁷⁸ but a narrative of White middle-class rehabilitation infused the programs at Calgary’s school for pregnant teenagers. Zwarun’s article in the *Calgary Herald* championed Bankview as a progressive intervention into services for pregnant single women. And the school did provide important educational, health, and community building opportunities explicitly designed for single pregnant teenagers in the 1970s. But, like decades previous, Bankview counsellors and administrators adhered to the idea that “a girl or woman could transcend her maladjustment [pregnancy outside of marriage] simply by marriage, or by preparing herself for a marriageable future.”¹⁷⁹ Bankview educators and counsellors warned the teens attending Bankview of legal, economic, and social hardships of unwed motherhood and encouraged to secure a good future by getting married or surrendering their babies. In doing so, Bankview’s staff upheld the idealization of the White, middle-class nuclear family, and rejected single motherhood as a valid social, legal, or economic option for women well into the 1970s.

“She is a very bright girl...”:¹⁸⁰ Pregnant Teens as Candidates of Liberation at Birth Control Centres

In the early 1970s, the CBCA and the LBCIC created programs for single pregnant women and mothers, alongside their birth control, abortion, and sexual health services. If the students at Bankview represented the one-in-ten pregnant teens in Calgary, as Steckel claimed, then prenatal and pregnancy care programs at the birth control centres filled the void for other single pregnant women

¹⁷⁶ Bankview School’s Year End Report, 1971-72, pg. 8, found in “Adult Education Day Centre,” M-7265-17, *CBCA Collection* GA.

¹⁷⁷ Bankview School’s Year End Report, 1971-72, pg. 8, found in “Adult Education Day Centre,” M-7265-17, *CBCA Collection* GA.

¹⁷⁸ Zwarun, “The high school for pregnant teenagers,” pg. 8, found in “Adult Education Day Centre,” M-7265-17, *CBCA Collection*, GA.

¹⁷⁹ Solinger, *Wake Up Little Susie*, 16.

¹⁸⁰ “Notebook by Martha Weir,” M-7265-12, *CBCA Collection* GA.

in the region. The women running the birth control centers were concerned about the high rates of teen pregnancy in southern Alberta, which they blamed on a lack of adequate sex and birth control education in their communities. In response to the teen pregnancy rates and clients' needs, both the LBCIC and the CBCA offered prenatal education and the LBCIC started a housing program for unmarried women in southern Alberta.¹⁸¹ While the programs for single pregnant women at the birth control centres were open to anyone, women who sought prenatal classes and housing services "primarily were late teens and early twenty-year-olds."¹⁸² These programs were integral for teenage women otherwise marginalized from other social and medical spaces in their communities. Like the other educational programs at the Centre and Association, the prenatal courses at both birth control centres were directed by client needs and feedback and emphasized patients' rights within medical spaces.¹⁸³ Inspired by broader calls for women's liberation the birth control centres' staff advocated legal, social, and economic changes that improved mothers' rights throughout the decade. Many birth control centre activists hoped that young women found purpose in their lives beyond the domestic roles of marriage and motherhood and they worried that teenage motherhood solidified young women's dependence on men and the state.¹⁸⁴ While they waited for a cultural shift in the status of women, many birth control centres employees considered abortion the best option for pregnant teens to escape the patriarchal confines of domesticity in the 1970s.¹⁸⁵ The politics of teenage motherhood played out within the birth control centres prenatal programs in the 1970s:

¹⁸¹ "Birth Control/Information Centre," *Up* vol. 1 no. September 8 24, 1974, pg. 2, HQ 1480.L47.U6, UOWA; Intake Survey from the LBCIC's Prenatal Class, c. 1974-1975, *LBCIC 1973-1975 GMA*.

¹⁸² PH, interview, Dec. 20, 2017, transcript.

¹⁸³ "Calgary Birth Control Association Special Project to PSS," in "Workshops: Women's Health Weekend 1976," M-7265-458; CBCA bylaws 1975 in "Annual General Meeting 1977," M-7265-26; "Questionnaire Samples," M-7265-334; "Questionnaire Completed Clients 1976," M-7265-336; "Questionnaires Completed Clients 1977-1978," M-7265-337; "Questionnaires Completed Physicians [ca.1972]," M-7265-338; "Questionnaires Completed Physicians 1972," M-7265-339; "Questionnaires Completed Physicians 1978-1979," M-7265-343; "Questionnaires Completed Volunteers 1975-1967," M-7265-345; "Questionnaires Completed Volunteers 1978," M-7265-346; *CBCA Collection GA*; Letter from Judy Burgess to R. W. Tooley (Director of Family Planning at the Department of National Health and Welfare), December 7, 1972, GR1983-0133, box 1, file 5, *LBCIC PAA*; "Questionnaire – Sexual Attitudes" and "Questionnaire for Prenatal Classes," *LBCIC 1973-1975 GMA*; PH, interview, Dec. 20, 2017, transcript.

¹⁸⁴ "Consider yourself 1st," in *Up* vol. 1, no. 5, July 29, 1974, pg. 3, HQ 1480.L47.U6, UOWA.

¹⁸⁵ "Notebook by Martha Weir," M-7265-12; "Resource outline – Abortion," 1973, in "education outreach 1974-1976," M-7265-100, *CBCA Collection GA*.

Centre and Association staff called for better medical, legal and economic status for women and mothers but simultaneously discounted teenage marriage and motherhood as a valid choice for young women.

The women running the LBCIC and CBCA recognized the need for sympathetic prenatal courses for single pregnant women in southern Alberta in the mid-1970s. At the LBCIC, instructor Pauline Hoskin designed a prenatal program for single women with community building in mind. Hoskin encouraged clients to build community in her prenatal classes at the LBCIC. Building community was key in the prenatal course for single pregnant women who often felt ostracized in other local prenatal classes or mother groups. To foster support networks among clients, Hoskin implemented a two-pronged approach in the LBCIC's prenatal programming:

We offer a program of prenatal education mainly oriented toward the problems of the single mother, offering individual as well as group contact. The group situation provides the opportunity for young women in similar situations to meet and discuss their problems, as well as learning about pregnancy. Individual attention provides an opportunity for the BCIC to give them additional support.¹⁸⁶

One-on-one counselling sessions allowed young women to consider their options in-depth, but the program also offered group debriefs where single mothers discussed their hopes, fears, and decisions with other women in similar situations. The LBCIC prenatal courses provided more than prenatal education but fostered a community among single pregnant women when they were otherwise cut out of other maternal and prenatal communities.

In line with their community building approach, the LBCIC educators tailored their prenatal education curriculum to the participants' individual and collective needs. Hoskin developed an intake survey that drove individual and group curricula for the LBCIC's prenatal courses. Each client enrolled in the Centre's prenatal course indicated "yes," "no," or "maybe" beside twenty topic options on the intake survey. The LBCIC's prenatal course took a holistic approach to maternal health and offered educational units on social, legal, emotional, and medical aspects of single motherhood and adoption. On the intake survey, participants chose from topics like, "the legal aspects of being an unmarried mother," "adoption regulations," "birth control," "feelings about sexual relationships," "the man's involvement in, and feelings towards my pregnancy," and "the development of the baby in the uterus."¹⁸⁷ Using the intake survey, Hoskin and other LBCIC

¹⁸⁶ "Birth Control/Information Centre," *Up* vol. 1 no. September 8 24, 1974, pg. 2, HQ 1480.L47.U6, UOWA.

¹⁸⁷ Intake Survey from the LBCIC's Prenatal Class, c. 1974-1975, *LBCIC 1973-1975 GMA*.

instructors tailored the course to fit with individual and group interests. If none of the participants indicated an interest in adoption, the curriculum focused on other topics of interest for the expectant mothers. If clients overwhelmingly indicated adoption as a topic of interest, activist educators provided detailed information about the legal process and emotional effects associated with adoption. If one or two participants indicated they wanted to learn about adoption, the instructors discussed adoption options with them in their individual sessions. Unlike Bankview employees who ultimately discouraged single motherhood, the LBCIC's prenatal instructors followed a curriculum designed by the prenatal clients themselves.

The need for a housing program also came into focus as single pregnant women attended the LBCIC's prenatal courses in the mid-1970s. Like some of the women who enrolled at Bankview, some LBCIC clients needed a place to stay. Some women were kicked out of their homes, while others hope to live away from their communities in order to keep their pregnancy a secret.¹⁸⁸ The LBCIC created a housing program for single pregnant women in 1975.¹⁸⁹ By June 1975, an LBCIC advertisement in *Up* announced their program: "HOMES FOR SINGLE PREGNANT WOMEN,"¹⁹⁰ and indicated that three families "would welcome single pregnant women in their homes" – two in the city of Lethbridge and one in a "rural area" outside of Lethbridge.¹⁹¹ In an oral history interview, Pauline Hoskin remembered that having both rural and urban options was important to some women who wanted privacy away from their own communities: "if they wanted that anonymity, they could move out of Lethbridge. Or, if they were from a rural area, they could move into Lethbridge or Calgary."¹⁹² Hoskin also recalled that many of the women who used the housing program did not want to live in a maternity home, so LBCIC staff and board members solicited supportive families and community organizations to help house single pregnant women: "These were not just people we had advertised for, the board members knew them personally, so we knew that they were safe situations that they could go to."¹⁹³ The housing program quickly grew to include families in Lethbridge, Calgary, and rural areas in southern Alberta as well as a group-home

¹⁸⁸ PH, interview, Dec. 20, 2017, transcript.

¹⁸⁹ "Homes for Single Pregnant Women," *Unity* vol. 1 no. 9, June 30, 1975, *LBCIC 1973-1975 GMA*.

¹⁹⁰ "Homes for Single Pregnant Women," *Unity* vol. 1 no. 9, June 30, 1975, *LBCIC 1973-1975 GMA*.

¹⁹¹ "Homes for Single Pregnant Women," *Unity* vol. 1 no. 9, June 30, 1975, *LBCIC 1973-1975 GMA*.

¹⁹² PH, interview, Dec. 20, 2017, transcript.

¹⁹³ PH, interview, Dec. 20, 2017, transcript.

setting for single pregnant women at the Lethbridge YWCA.¹⁹⁴ For Hoskin and other LBCIC staff, providing housing for otherwise homeless or unsafe single pregnant women was key to improving the prenatal healthcare offered in the region.

Discrimination against single pregnant women and mothers within medical spaces also influenced the birth control centres' to include patients' rights in their prenatal education programming. Young women who sought prenatal education from the CBCA and LBCIC shared their poor experiences at local clinics.¹⁹⁵ Oral history narrator Judy Burgess remembered that pregnant teens, "weren't very accepted at the public health clinic" in Lethbridge.¹⁹⁶ Burgess even shared her own story of discriminatory medical treatment after she gave birth to her first child. Burgess was not married and in her early twenties when her daughter was born. In her interview Burgess explained that her boyfriend and, later, his best friend had come to visit her at the hospital. After the second visit from her partner's friend, Burgess encountered the head nurse: "she came in afterward and said, "you know, you're going to have to decide who the father of this baby is." And I went, "what!" ... I was fragile. I just had this baby, and I was hormonal. It was like being hit with a brick."¹⁹⁷ Sometimes based on their own experiences as well as those of their clients, women running the birth control centres, like Burgess, incorporated patients' rights education and consciousness-raising into their prenatal programs. The LBCIC's prenatal program, for instance, included "the care given by a doctor during routine visits" and "care given during hospitalization" as essential topics of discussion. Educators at the LBCIC and CBCA armed their clients with basic facts about maternity patients' rights and outlined the care women should expect from medical professionals before, during, and after labour.

By 1976, in addition to teaching women to advocate for themselves, CBCA staff began teaching medical students how to adequately, and compassionately, provide healthcare to single pregnant women and mothers. Their 1976 course, titled "The Unmarried Mother and Her Child," was the brainchild of CBCA educators and local physician Dr. E. J. Love,¹⁹⁸ who taught at the University of Calgary Medical School. The course discussed the legal impediments for unmarried

¹⁹⁴ PH, interview, Dec. 20, 2017, transcript; "Homes for Single Pregnant Women," *Unity* vol. 1 no. 9, June 30, 1975, *LBCIC 1973-1975 GMA*.

¹⁹⁵ Letter from Linda Vancutsem (CBCA) to the Medical Department of Carnation Company, March 5, 1973, found in "Education Outreach: Requests for Materials, 1972-1974," M-7265-112, *CBCA Collection GA*.

¹⁹⁶ JB, interview, Dec. 8, 2012, transcript, *GMA*.

¹⁹⁷ JB, interview, Dec. 8, 2012, transcript, *GMA*.

¹⁹⁸ This is not a pseudonym.

mothers and “illegitimate” children as well as the “physicians role in adoption,” and underscored the importance of teen-friendly policies for contraceptive and abortion services.¹⁹⁹ Rather than putting the onus on women to remind physicians of their rights as patients, CBCA educators worked with medical school professors to encourage up-and-coming doctors to provide empathetic care to single pregnant women and mothers. If the CBCA educators’ consciousness-raising approach was not enough to convince the medical students that single pregnant women should receive non-judgmental care, the Association’s instructors also underscored the influence of their referral program in the region. Throughout the course, Association staff also emphasized the many services they provided to women in Calgary, including their robust client referral program that only recommended sympathetic medical professionals.²⁰⁰ The CBCA education team skillfully utilized feminist consciousness-raising strategies and leveraged their coalitions between clients and the medical community to encourage safer medical space for single pregnant women and mothers.

Along with discrimination in medical spaces, feminists in southern Alberta called attention to the legal, economic, and social discrimination against single mothers in 1970s Canada. Like the feminist slogan of “women are persons” from earlier in the century, a new slogan declared “mothers are people” in the Lethbridge feminist newsletter *Up* in the mid- to late-1970s. Alberta feminists published information about sexist Canadian legitimacy, citizenship, and rape laws within the pages of *Up*, *Branching Out*, and some local student newspapers.²⁰¹ But local women also called for broader

¹⁹⁹ “The Unwed Mother and her Child” Course with the U of C Medical School, 1976, found in “Education Outreach: U of C Medical Students Unit on Unwed Mothers, 1973-1974,” M-7265-117, *CBCA Collection* GA.

²⁰⁰ “The Unwed Mother and her Child” Course with the U of C Medical School, 1976, found in “Education Outreach: U of C Medical Students Unit on Unwed Mothers, 1973-1974,” M-7265-117, *CBCA Collection* GA.

²⁰¹ See, for example: Judy Burgess, interview with Karissa Patton, December 8, 2012, transcript; Rita Moir, interview with Karissa Patton, December 13, 2012, transcript, interviews and transcripts housed at the Galt Museum and Archives, in “Oral History Project: Students’ Reproductive Rights Activism in Southern Alberta during the 1960s and 1970, 20171019; and Tami Gaudry, “Letters to the Editor: Daycare Centre Needed Next Year,” *The Endeavour*, April 2, 1973; “Day Care Centre Possible as LCC,” *The Endeavour*, September 10, 1973; “Day care organized,” *The Endeavour*, February 4, 1974; “Day Care Centre operating at LCC,” *The Endeavour*, February 25, 1974; “All day child program popular on campus,” *The Endeavour*, September 23, 1974; Lorraine Pawlinsky, “Daycare issue surprises U of L and LCC meeting members,” *The Endeavour*, September 28, 1978; “Day care return recommended,” *The Endeavour*, February 8, 1979; “Daycare considered,” *The Endeavour*, April 5, 1979; “Daycare essential service – MacNeil,” *The Endeavour*, September 27, 1979; “Lethbridge First to Begin New Daycare Subsidy Program,” *The Endeavour*, September 27, 1979; “Day Care Soon Underway,” *The Meliorist*, November 10, 1972; “Child Care On Campus,” *The Meliorist*, November 24, 1972; “Working Out the Kinks – U of L Child Care Co-op,” *The Meliorist*,

social and policy change, like state-funded daycare programs and maternity leave, to improve mothers' and children's rights.²⁰² Daycare and maternity leave were significant signposts of the 1970s women's liberation movement as enhancements that increased women's ability to have a career and achieve economic independence from men.²⁰³ Articles in *Up* consistently advocated for daycare, maternity leave but also called for job legislation that protected women's wages and careers. Feminist writers at *Up*, along with feminists across Canada, fought for better and accessible daycare, maternity leave, equal wages, and job security that alleviated the double burden mothers faced at home and at work and ensured women's financial independence from men.²⁰⁴ Within the existing legal and economic landscape that forced many women to rely on husbands for financial and family security, feminist discourse at the time framed marriage and motherhood as barriers to women's independence.

As some feminists increasingly critiqued marriage and motherhood as part of existing patriarchal systems, others used moral panic about teenage pregnancy and economic concerns about single mothers to advocate for better abortion access. As Erika Dyck and Maureen Lux argue in *Challenging Choices*, panic that teenage mothers were an increasing economic burden for taxpayers

October 18, 1973; "Student Initiated Course on Day Care," *The Meliorist*, November 1, 1973; "Day Care is 'Lookin' Good.'"

²⁰² JB, interview, Dec. 8, 2012, transcript; Rita Moir, interview with Karissa Patton, December 13, 2012, transcript, interviews and transcripts housed at the Galt Museum and Archives, in "Oral History Project: Students' Reproductive Rights Activism in Southern Alberta during the 1960s and 1970, 20171019.

²⁰³ Lisa Passoli, "Child Care and Feminism in Canada," in Glenda Tibe Bonifacio, ed., *Gender, Feminism, and Global Cross-Cultural Connections: International and Interdisciplinary Perspectives* (Emerald Publishing, November 2017), 129–40; Royal Commission on the Status of Women, *The Report of the Royal Commission on the Status of Women in Canada* ([Ottawa]: Royal Commission on the Status of Women, 1970), ix.

²⁰⁴ Advertisements for babysitting referral services in *Up* vol. 1, no.3 June 24, 1974, pg. 6; vol. 1, no. July 4 9. 1974, pg. 2; vol.1, no. 5, July 29, 1974, pg. 6; Advertisement for a film screening in May 1974, in *Up* vol.1 no. 1, May 27, 1974, pg. 6; "Observational Nursery U of L," *Up* vol. 1 no. July 4 9, 1974, pg. 11; "What is an abused Child, the Child Protection Registry," *Up* vol. 1 no.9 October 1974, pg. 8; "Children's Rights," *Up* vol. 1 no. October 10 22, 1974, pg. 2; "On behalf of young children," *Up* vol. 1 no. October 10 22, 1974, pg. 4; "Children and Community Responsibility," *Up* vol. 1, no. October 10 22, 1974, pg. 6-7; "Mobile Parent Observational Nursery," *Up* vol. 1 no. 15, December 2, 1974, pg. 2; "DAYCARE," *Up* vol.2 no.6 December 1975, pg. 20; "What's up at WP?," *Up* vol. 2 no. September 5, 1975, pg. 2; "Maternity Leave in Alberta," *Up* vol. 2 no. 6, December 1975, pg. 21; "18 weeks Leave," *Up* vol.3 no.1 March 1976, pg. 18; "Daycare in Lethbridge," *Up* vol. 1 no.6, August 12, 1974, pg. 6, HQ 1480.L47.U6, UOWA; Letter to Judy Burgess from Jeanna Beaty (Lethbridge YWCA), June 15, 1973, in "Lethbridge Birth Control Association," GR1983.0133 Box 1 File 5 PAA.

loomed large in the 1970s. Dyck and Lux have shown how some abortion advocates in Canada utilized the moral and economic panic around teenage pregnancy in the 1970s to advocate for more accessible abortion services.²⁰⁵ Some women involved with the birth control centres similarly used rising rates of teen pregnancy to advocate for better abortion access. For instance, one of the CAIC/CBCA founders, Martha Weir wrote in her journal (c.1970-1971), arguing that abortion was the best choice “for the young girl [sic] who is not mature enough yet to marry and raise a family.”²⁰⁶ Other entries in Weir’s CBCA journal included rough drafts of speeches and press releases for the Association between 1970s and 1971, and the rising rates of teen pregnancy often appear as part of Weir’s argument to make abortion more accessible. Weir’s writings reveal that she, as a spokesperson for the CAIC and CBCA in the early 1970s perpetuated moral panic that single pregnant teenagers were not responsible or economically independent enough to become mothers.²⁰⁷ In doing so, Weir offers abortion as the best choice for pregnant teens, who avoided the burden of motherhood during their adolescence, and relieved society of the economic burden of single mothers on welfare.

Stories of “smart” and, therefore, independent pregnant teens who chose abortion in order to pursue degrees and careers were commonplace in the CBCA’s consciousness-raising methods in the early 1970s. Weir left her position as a staff member and spokesperson for the CBCA in 1972 but remained affiliated with the Association throughout the decade.²⁰⁸ After her departure, speeches and press releases did not use teenage pregnancy as explicitly to argue for better abortion access. Like Weir, Association staff continued to use the trope of the pregnant teenager within their consciousness-raising sessions throughout the decade. Similar to the way Zwarun portrays Linda from Bankview, the CBCA’s consciousness-raising stories about pregnant teens described how an unwanted pregnancy had thwarted “smart” young women’s dreams of a university degree and career. One story about pregnant seventeen-year-old “Ethel” from Weir’s journal states, “Ethel has stopped going to school, no longer sees her friends, and shows signs of extreme anxiety. ... Her mother and her sister have had great hopes for Ethel because she is a very bright girl [sic]...”²⁰⁹

²⁰⁵ See: “Teenagers and the Economics of Abortion,” in Erika Dyck and Maureen Lux’s forthcoming book *Challenging Choices: Canada’s Population Control in the 1970s* (Montreal & Kingston: McGill-Queen’s University Press, 2020).

²⁰⁶ “Notebook by Martha Weir,” M-7265-12, *CBCA Collection* GA.

²⁰⁷ “Notebook by Martha Weir,” M-7265-12, *CBCA Collection* GA.

²⁰⁸ CBCA Newsletter, March 21, 1972, pg. 1, found in “Newsletters (CBCA) 1971-1974,” M-7265-240, *CBCA Collection* GA.

²⁰⁹ “Notebook by Martha Weir,” M-7265-12, *CBCA Collection* GA.

Similarly, the story of another pregnant seventeen-year-old named “Lee” from a 1973 CBCA workshop on abortion more explicitly describes abortion as the best choice for young women pursuing an education. The narrative from the workshop explains that after discovering she was pregnant, Lee “...considered unwed mothers homes, the school for unmarried pregnant teenagers, and giving up the child for adoption – since she has always been taught that abortion is murder. But she is a Grade 12 Honours student, planning to enter U of C Pre-Medicine next term.”²¹⁰ The stories of Ethel and Lee are likely based on the lived experiences of one or several CBCA clients, and do represent real concerns and considerations of single pregnant teens who did not want an unwanted pregnancy to prevent them from pursuing a degree and career.²¹¹ The way Ethel and Lee’s story are presented reveal that, despite the service they provided to single pregnant women and mothers, the women who worked at the LBCIC and CBCA assumed that all teen pregnancies were unplanned and unwanted. Because they assumed teenage pregnancies as unwanted, birth control centre activists in southern Alberta conceptualized newly legal abortion as the obvious answer for pregnant teenage women. By emphasizing abortion as the best choice for Ethel and Lee, the Association educators also implied that there was a hierarchy of liberated choices for teenage women – placing child-free and educated youth at the top and teenage mothers at the bottom.

Popular feminist theories in the 1960s and 1970s encouraged women to use newly legalized contraceptive technologies and abortion services to control their fertility and live their lives unencumbered by the domestic sphere.²¹² Emergent herstories in the 1970s revealed how men had used marriage and theories about gender roles to exclude women from legal and economic independence in Western Anglo-Saxon cultures.²¹³ And popular feminist literature in the 1960s and 1970s by authors like Betty Freidan, Gloria Steinem, and Germaine Greer, encouraged women to

²¹⁰ “Resource outline – Abortion,” 1973, in “education outreach 1974-1976,” M-7265-100, CBCA Collection GA.

²¹¹ See “Part One: Speaking from Experience,” 77-123, from *Without Apology: Writings on Abortion in Canada*, edited by Shannon Stettner, (Edmonton: Athabasca University Press, 2016).

²¹² See, for example, Simone de Beauvoir, *The Second Sex*, English translation, (New York: Knopf Doubleday Publishing, 1953); Betty Freidan, *The Feminine Mystique*, (New York: Norton Paperback, 1963); see various work by Gloria Steinem like “A Bunny’s Tale,” *Show*, May 1963, June 1963, and “After Black Power, Women’s Liberation,” *New York Magazine*, April 4, 1969; Germaine Greer, *The Female Eunuch*, (London: MacGibbon & Kee Ltd., 1970); Shulamith Firestone, *The Dialectic of Sex: The Case for a Feminist Revolution*, (New York: William Morrow & Co, 1970); Boston Women’s Health Collective, *Our Bodies, Ourselves*, (Boston: New England Free Press, 1970).

²¹³ Robin Morgan, editor, *Sisterhood is Powerful: Writings from the Women’s Liberation Movement*, (New York: Random house publishing, 1970); June Sochen, *Herstory: A Woman’s View of American History*, (New York: Alfred Publishing Company, 1974).

reject a life contained to the repressive domestic sphere.²¹⁴ In line with these iconic feminist texts, many reproductive rights activists saw decriminalized abortion and new contraceptive technologies – like the Pill and IUDs – as tools to break free from the chains of patriarchal marital, reproductive, and sexual expectations.²¹⁵ Despite an increase in the number of women who enrolled in university programs and entered the job force in the 1960s and 1970s,²¹⁶ unequal pay and career opportunities continued to disadvantage the modern career woman throughout the decade.²¹⁷ Similarly, Canadian family and citizenship laws disadvantaged single mothers and their children well in to the decade. It was within this complex legal and economic landscape that some feminists deemed teenage motherhood a threat to young women’s liberation from domesticity. Feminists in southern Alberta called for mothers’ legal rights alongside their call for women’s rights to prevent pregnancy and motherhood.²¹⁸ But, ultimately, new contraceptive mentality and the legal means to prevent and terminate pregnancies, eclipsed any concerns about teenage women’s rights to motherhood.

Feminist practice that siloed motherhood and marriage as part of the patriarchal control of women mainly represented White, middle-class women’s reproductive experiences. Throughout the twentieth century White femininity was defined by an adherence to domesticity as various national

²¹⁴ Freidan, *The Feminine Mystique*, (1963); Greer, *The Female Eunuch*, (1970); Steinem, “A Bunny’s Tale,” 1963; Steinem, “After Black Power, Women’s Liberation,” 1969.

²¹⁵ Margrit Eichler, “Grasping the Ungraspable: Socio-Legal Definitions of the Family in the Context of Sexuality,” *Transactions of the Royal Society of Canada* 6/3 (1992), 8.

²¹⁶ Elaine H. Chalus. “From Friedan to Feminism: Gender and Change at the University of Alberta, 1960-1970,” in *Standing on New Ground: Women in Alberta*, edited by Catherine A. Cavanaugh and Randi R. Warne (Edmonton: University of Alberta Press, 1993).

²¹⁷ “It’s about time...” *Up*, vol. 1 no. 2, June 10, 1974, pg. 2-3; “Extracts from the employment act,” *Up*, vol. 1, no. 4, July 8, 1974, pg. 9-10; “Maternity Leave in Alberta,” vol. 2, no. 6, December 1975, pg. 20, HQ 1480.L47.U6, UOWA.

²¹⁸ JRS, “Illegitimate Children,” *Up*, vol.2 no.2, February 1975, pg.10-11; *Up*, “Citizenship Bill C-20,” vol.3 no.1, March 1976, pg.18; “Rape and the Law,” *Up* vol.3 no.2, June 1976, pg. 14-15; Advertisements for babysitting referral services in *Up* vol. 1, no.3 June 24, 1974, pg. 6; vol. 1, no. July 4 9. 1974, pg. 2; vol.1, no. 5, July 29, 1974, pg. 6; Advertisement for a film screening in May 1974, in *Up* vol.1 no. 1, May 27, 1974, pg. 6; “Observational Nursery U of L,” *Up* vol. 1 no. July 4 9, 1974, pg. 11; “What is an abused Child, the Child Protection Registry,” *Up* vol. 1 no.9 October 1974, pg. 8; “Children’s Rights,” *Up* vol. 1 no. October 10 22, 1974, pg. 2; “On behalf of young children,” *Up* vol. 1 no. October 10 22, 1974, pg. 4; “Children and Community Responsibility,” *Up* vol. 1, no. October 10 22, 1974, pg. 6-7; “Mobile Parent Observational Nursery,” *Up* vol. 1 no. 15, December 2, 1974, pg. 2; “DAYCARE,” *Up* vol.2 no.6 December 1975, pg. 20; “What’s up at WP?,” *Up* vol. 2 no. September 5, 1975, pg. 2; “Maternity Leave in Alberta,” *Up* vol. 2 no. 6, December 1975, pg. 21; “18 weeks Leave,” *Up* vol.3 no.1 March 1976, pg. 18; “Daycare in Lethbridge,” *Up* vol. 1 no.6, August 12, 1974, pg. 6, HQ 1480.L47.U6, UOWA.

policies encouraged White Anglo women to be “mothers of the nation.”²¹⁹ Other government policies throughout the twentieth century discouraged Immigrant, Indigenous, and poor women from reproducing.²²⁰ In Alberta eugenics legislation was implemented and fervently carried out throughout most of the twentieth century to prevent certain people from reproducing.²²¹ As Erika Dyck has shown in *Facing Eugenics*, between 1928 and 1972, Alberta’s *Sexual Sterilization Act* targeted Eastern European immigrants, poor people, anyone deemed mentally unfit to parent, and Indigenous and Metis women.²²² During the twentieth century White middle-class, Anglo women were seen as valuable for reproducing the nation, while women of colour, Indigenous women, Immigrant women, and poor White women were often targets of population control.²²³ For many White women involved in the 1970s feminist movement preventing and terminating pregnancies was a revolutionary intervention within a long history of nationalist reproduction and family policies. This perspective, however, was not representative of women’s diverse reproductive experiences across Canada and defined motherhood as compulsory rather than a right.

Feminist discourse about motherhood, reproductive rights, and women’s liberation influenced the birth control centres educational programming, which framed pregnant teens as candidates of liberation in the 1970s. While teenage pregnancy was mostly condemned in postwar Canadian society, some social reformers saw it as an apt opportunity to “assimilate” otherwise “wilful and assertive” young White women into proper gender roles.²²⁴ By the 1970s, teen pregnancy

²¹⁹ Cynthia Comacchio, *Nations are built of Babies: Saving Ontario’s Mothers and Children, 1900-1940*, (Montreal & Kingston: McGill-Queen’s University Press, 1998).

²²⁰ Erika Dyck, *Facing Eugenics: Reproduction, Sterilization, and the Politics of Choice*, (Toronto: University of Toronto Press, 2013); Angus McLaren, “Birth Control and Abortion in Canada, 1870-1920,” *Canadian Historical Review* vol. 3 (1978); Shannon Lea Stettner, “Women and Abortion in English Canada: Public Debates and Political Participation, 1959--70.” York University (Canada), 2011; Beth Palmer, “‘Lonely, Tragic, but Legally Necessary Pilgrimages’: Transnational Abortion Travel in the 1970s,” *The Canadian Historical Review* 92 (December 2011); Erika Dyck, “Sterilization and Birth Control in the Shadow of Eugenics: Married, Middle-Class Women in Alberta, 1930-1960s,” *CBMH/BCHM* vol. 31 no. 1 (2014); Claudia Malacrida, *A Special Hell: Institutional Life in Alberta’s Eugenic Years*, (Toronto: University of Toronto Press, 2015); Angus McLaren and Arlene Tigar McLaren, *The Bedroom and The State: The Changing Practices and Politics of Contraception and Abortion in Canada, 1880-1997*, (Oxford: Oxford university Press, 1997); Diane Dodd, “The Canadian Birth Control Movement: Two Approaches to the Dissemination of Contraceptive Technology,” *Scientia Canadensis: Canadian Journal of the History of Science Technology and Medicine* Vol. 9 No. 1 (1985); Dodd, “The Canadian Birth Control Movement on Trial.”

²²¹ Dyck, *Facing Eugenics*, 7-8.

²²² Dyck, *Facing Eugenics*, 7-8.

²²³ Andrews, *The White Unwed Mother*, 22-23; Dyck, *Facing Eugenics*, 7-8.

²²⁴ Adams, *The Trouble With Normal*, 69.

no longer automatically confined young women to “proper” gender roles because teens were able to legally prevent and terminate pregnancies. While the employees at Bankview sought to rehabilitate pregnant teens to fit within the White middle-class nuclear family structure, women at the birth control centres hoped to facilitate young pregnant women’s liberation from the confines of motherhood and marriage. Birth control centre staff used educational programming about abortion to champion teenagers, like “Lee” and “Ethel,” who chose to terminate their pregnancies to pursue a degree and career. Until women had gained equal legal, economic, and family rights to their male counterparts, single motherhood and teenage motherhood were touted as avoidable obstacles with in the discussion of abortion at the CBCA and LBCIC. Teenage woman who chose motherhood, when legal abortion was an option, were considered lost to the patriarchal roles of the domestic sphere.

While the CBCA and LBCIC staff provided important on-the-ground services to single pregnant mothers in the 1970s, the discourse about teenage pregnancy and abortion within the birth control centres’ educational programming framed teenage mothers as complicit in patriarchal domesticity. The LBCIC’s prenatal and housing programs were built around clients’ needs and encouraged single pregnant women to assert their rights as patients within medial spaces. Unlike Bankview’s programs for single pregnant women, the LBCIC prenatal instructors did not pressure young women to get married or surrender their children. The discourse around teenage pregnancy and abortion within the broader CBCA and LBCIC curricula, however, encouraged abortion as the best choice for pregnant teens. Influenced by primarily White women’s definitions of liberation, his discourse positioned teenage motherhood in opposition to women’s liberation. On the flip side, pregnant teens who chose to terminate pregnancies and pursue a career were celebrated for embracing the newly legal abortion services and facilitating their own intellectual and economic independence.

Conclusion

The programs created for single pregnant women and mothers at Bankview and the southern Alberta birth control centres were progressive and sincere attempts to address the legal, economic, and social disadvantages of single motherhood in the 1970s. The programs at the LBCIC, CBCA, and Bankview were a welcomed reprieve for many pregnant teens and single mothers, who were not allowed to continue their schooling, kicked out of their parents’ homes, or received insensitive treatment at local medical clinics. The programs at Bankview and the birth control

centers were far from perfect, however. Bankview, LBCIC, and CBCA educators assumed that all teen pregnancies were unwanted and conceptualized sex education and birth control access for teens as a preventative measure. So, even though staff from all three programs hoped to address systemic problems single pregnant women faced in Alberta, they offered teens limited and individualistic choices when it came to their reproduction. Bankview administrators perpetuated moral panic about single mothers reliant on welfare to support themselves and their children and encouraged young women to surrender their children or get married. In doing so, the program for pregnant teens at Bankview school reinforced postwar narratives that pregnant teens and illegitimate children were candidates for rehabilitation when they adhered to the “norm” of the White middle-class nuclear family. While CBCA staff likely sent pregnant teens, who hoped to finish their education to Bankview, it is less likely that they wholeheartedly supported the Bankview administration’s goals of getting young women back on track to the heteronormative nuclear family. Conversely, feminist discourse in the 1970s characterized pregnant teens as candidates of *liberation*, as long as they broke free from the compulsory domesticity of the White middle-class nuclear family. By presenting teen pregnancies as unwanted and abortion as the best choice for pregnant teens, birth control centre educators stifled teenage women’s rights to be mothers. The programs at the CBCA, the LBCIC, and the Bankview school characterized teenage sexuality as natural and inevitable, advocated for accessible sex and contraceptive education for teens, but ultimately delegitimized teenage motherhood as an irresponsible choice.

CONCLUSION

Someday—hopefully—this booklet will be very out-of-date. Until then, watch for new developments that come along. Even now the availability of contraception and abortion varies from place to place. You'll also notice that explanations vary depending on the source you use. And some of the information conflicts. In the end, you should rely on your own common sense, be as responsible as you can, and HAVE FUN.¹

The above passage, published in the CBCA's and LBCIC's most popular educational booklet *How to Take the Worry out of Being Close*, encapsulated the hopes of many 1970s reproductive rights activists that one day their fight would end. Yet, half a century later much of the content in this booklet remains relevant. Even after the Supreme Court case of *R. v. Morgentaler* fully decriminalized abortion and abolished the TACs in Canada in 1988, individual provinces implemented their own regulations of abortion procedures and coverage under their healthcare legislation.² Access to contraception and abortion still varies from province to province, health region to health region, and sometimes clinic to clinic because of these post-1988 provincial regulations.³ Misinformation and conflicting advice may have become more prominent since the 1970s with the emergence and widespread access to the internet.⁴ And many contraceptive users are

¹ *How to Take the Worry out of Being Close: An Egg and Sperm Handbook*, revised Calgary edition, published by the Calgary Birth Control Association in 1972. Originally written by Marion Johnson Grey and Roger W. Grey and originally self-published in Oakland, California, 1971, pg. 2.

² Shannon Stettner, Kristin Burnett, and Travis Hay, Introduction to *Abortion: History, Politics, and Reproductive Justice after Morgentaler*, (Vancouver, University of British Columbia Press, 2017), 7, 9.

³ Christabelle Sethna and Marion Doull, "Accidental Tourism: Canadian Women, Abortion tourism, and Travel," *Women Studies*, vol. 41, no. 4 (2012), 457-475; Jessica Shaw, "Full-Spectrum Reproductive Justice: The affinity of Abortion Rights and Birth Activism," *Networks of Social Justice: Transnational Activism and Social Change*, vol. 7, no. 1 (2013), 143-159.

⁴ Adele Shartzter, Bridgette Courtot, Stacey McMorrow, Sarah Benatar, Genevieve M. Kenney, "Knowledge Gaps and Misinformation about Birth Control Methods Persists in 2016," *Urban.com* (the Urban Institute), September 14, 2016, last accessed, November 8, 2020, <https://www.urban.org/research/publication/knowledge-gaps-and-misinformation-about-birth-control-methods-persist-2016>; Eve Weiss and Kristen Moore, "An assessment of the Quality of Information Available on the Internet About the IUD and the Potential Impact on Contraceptive Choices," *Contraception*, vol. 68, no. 5 (November 2005), 359-364; Alisha Tara Tolani and Sophia Yen, "Many Websites Fail to Dispel Myths About IUDs, Emergency Contraception, Birth Control, and Proper Timing of Pap Smears," *Journal of Adolescent Health* vol. 44, no. 2, (February 2009), S24-S25.

still waiting for new or improved birth control technologies to come along in 2021.⁵ Even though birth control centre activists created and provided essential reproductive and sexual healthcare in the 1970s, contemporary contraceptive users continue to face similar frustrations around access and service-provision.

In 1969 as the federal government decriminalized birth control and therapeutic abortions, the Alberta government began rolling out its provincial healthcare plan, leaving many reproductive and sexual health services in policy limbo for most of the decade.⁶ Unwilling to wait for the government to develop accessible abortion and birth control services, some southern Alberta women created their own birth control centres to provide reproductive and sexual healthcare and education.⁷ In 1970 a group of women in Calgary created the CAIC (which became the CBCA a year

Also see Kaitlyn Mitchell and Carly Giles work about how contemporary Pregnancy Crisis Centres and anti-abortion activists spread misinformation about abortion procedures on online and advertising methods in Carol Williams, Katelyn Mitchell, and Carly Giles, *Political Challenges and Digital Frontiers: Reproductive Health and Services in Southern Alberta*, report published by the Parkland institute, October 2019,

https://www.parklandinstitute.ca/political_challenges_and_digital_frontiers.

⁵ Eliza Brooke, “The Bitter Pill: Why isn’t birth control better?” *The Goods by Vox*, June 25, 2019, last accessed November 8, 2020, <https://www.vox.com/the-goods/2019/6/25/18715504/birth-control-side-effects-pill-iud>; *Villianesse.com*, “Why do all my birth control options suck?” last accessed November 8, 2020, <https://www.villianesse.com/think/why-do-all-my-birth-control-options-suck>; Hannah Smothers, “There isn’t a birth control option for women that doesn’t suck and that’s a problem,” *Cosmopolitan.com*, October 6, 2016, last accessed November 8, 2020, <https://www.cosmopolitan.com/sex-love/a4801012/there-isnt-a-birth-control-option-for-women-that-doesnt-suck-and-thats-a-problem/>; Elizabeth Kiefer, “A birth control pill for men includes a side effect that has frustrated women for decades,” *The Washington Post*, March 23, 2018, last accessed November 8, 2020, <https://www.washingtonpost.com/news/soloish/wp/2018/03/23/a-potential-birth-control-pill-for-men-includes-a-side-effect-that-has-frustrated-women-for-decades/>.

⁶ Terri Forbis, interviewed with Karissa Patton, January 24, 2013, transcript. Interview and transcript can be found in “Oral History Project: Student Reproductive Rights Activism in Southern Alberta during the 1960s and 1970s,” 20171019, at the Galt Museum and Archives, Lethbridge, Alberta (TF, interview, Jan. 24, 2013, transcript, GMA).

⁷ “Origins of the CBCA” in “Evaluation of the CBCA – In-house Evaluation Project, 1979-1980,” M-7265-122; Rough draft of address about the CBCA in “Notebook Kept by Martha Weir,” M-7265-12; CBCA Newsletter, July 17, 1971, in “Newsletters 1971-1974,” M-7265-240, *CBCA Collection*, GA; Judy Burgess and John Martini, “Proposal Family Planning Division Department of National Health and Welfare” (1972), found in “Lethbridge Birth Control Association,” GR1983-0133, box 1, file 5, at the Provincial Archives of Alberta (PAA), Edmonton, Alberta; Judy Burgess, interviewed with Karissa Patton, October 9, 2014, transcript, interview and transcript can be found in “Oral History Project: Student Reproductive Rights Activism in Southern Alberta during the 1960s and 1970s,” 20171019, at the Galt Museum and Archives, Lethbridge, Alberta (JB, interview, Oct. 9, 2014, transcript, GMA).

later)⁸ and in 1972 a local nurse and two doctors established the LBCIC.⁹ Throughout the decade Association and Centre's staff continually worked with sympathetic medical professionals, politicians, and community organizers to integrate comprehensive reproductive and sexual topics into mainstream healthcare and education.¹⁰ The birth control centre activists simultaneously challenged existing mainstream services to incorporate women's health concerns and teen-friendly practices.¹¹ Even though the women working at the birth control centres often felt as though they were fighting an uphill battle,¹² their efforts had paid off. Their community-directed work was significantly integrated into some local medical schools and many medical clinics and educational programs throughout the region. Even some church groups began working with these organizations during the 1970s.¹³ Despite the significant impact of the southern Alberta birth control centres in

⁸ "Origins of the CBCA" in "Evaluation of the CBCA – In-house Evaluation Project, 1979-1980," M-7265-122; CBCA Newsletter, July 17, 1971, in "Newsletters 1971-1974," M-7265-240, *CBCA Collection*, GA.

⁹ Judy Burgess and John Martini, "Proposal Family Planning Division Department of National Health and Welfare" (1972), found in "Lethbridge Birth Control Association," GR1983-0133, box 1, file 5, (PAA); JB, interview, Oct. 9, 2014, transcript, GMA.

¹⁰ "Lethbridge Birth Control and Information Centre Review of Budget and Programs for January 1, 1974 to November 8, 1974;" "Proposal of Budget and Programs for 1975: Presented to the City of Lethbridge, the Province of Alberta Department of Preventative Social Services, and Family Planning Federation of Canada," "Volunteerism," Newsletter of the LBCIC, November 1, 1976, found in *Lethbridge Birth Control and Information Centre, 1973-1975*, 20171104, at the Galt Museum and Archives, Lethbridge, Alberta (*LBCIC 1973-1975* GMA); "The Birth Control & Information Centre," *Up* vol. 1 no. 7 September 10, 1974, pg. 9, HQ 1480.L47.U6, found at the University of Ottawa's Women's Archives, Ottawa, Ontario (UOWA); Origins of the CBCA in "Evaluation of CBCA In-House Evaluation Project, Proposal, planning, 1979-1980," M-7265-122, found *CBCA Collection* GA.

¹¹ Notes from Jean December 15, 1972, in "Board Information Package 1977-1978," M-7265-39; Dr. Frances Wren on Women's Health, c. 1976, in "Workshops Women's Health Weekend 1976," M-7265-458; CBCA Progress Report June 1, 1972, pg. 40 in "History 1971-1975," M-7265-185, *CBCA Collection* GA; A. Miron, "Gynecology Off Our Backs," originally published in *Chatelaine*, (c. 1974; date and issue unknown), republished in the *Meliorist*, March 8, 1974, pgs. 4-5; TF interview, Jan. 24, 2013, transcript, GMA.

¹² "¡SOS! CBCA NEEDS YOUR HELP IN ITS 1978-79 FUNDING REQUEST," Fundraising flyer in "Strategy Committee 1978," M-7265-66, *CBCA Collection* GA; "Volunteerism," Newsletter of the LBCIC, November 1, 1976, *LBCIC, 1973-1975* GMA.

¹³ Letter from Barbara Scott, February 8, 1977, in "Letters of Support 1977," M-7265-195; Minutes from Meeting with Honourable Helen Huntley January 19, 1976, in "Abortion (Research – Foothills Hospital)," M-7265-15; Letter from Robert K. Johnson to CBCA, 9 June 1972, "Correspondence, 1972," M-7265-82; Letter from Arthur Cowley to the CBCA, April 25, 1972; Letter from Mrs. Pat Schuster, RN, September 22, 1972, in "Correspondence 1972," M-7265-80; *CBCA Collection* GA; Letter from the Lethbridge Ministerial Association to the LBCIC, May 18, 1974, in "Lethbridge Birth Control and Information Centre Annual Report and Evaluation, 1973

changing the conversation on reproductive health options, many of the hopes, struggles, and goals of those early activists feel all too familiar today. That is because the gaps between federal decriminalization and provincial reproductive and sexual healthcare policy between 1969 and 1979 created a unique space for the southern Alberta birth control centres to flourish. But by the late 1970s, debates about individual taxpayers' rights and calls for publicly funded reproductive and sexual health services came to a head. Eventually, some reproductive and sexual health services were absorbed into Alberta Health Services (AHS), and the birth control centres were increasingly marginalized from official provincial healthcare and social services.

In the 1970s the services provided by the LBCIC and CBCA filled significant gaps in reproductive and sexual healthcare and education in the province. From pregnancy testing and abortion counselling, to prenatal health courses, and rural educational outreach programs the LBCIC and CBCA provided reproductive and sexual health services and outreach at a capacity unmatched by other regional medical and social services in the 1970s. The two southern Alberta birth control centers became hubs for reproductive and sexual healthcare in the province during this pivotal period as medical professionals, politicians, and citizens sought advice, information, training, and educational materials from the CBCA and LBCIC staff.¹⁴ Inadequate sex education, community surveillance, or local hospital policies prevented many people in Alberta from accessing newly decriminalized contraceptive and abortions services.¹⁵ The staff and volunteers at the birth control centers recognized many of these barriers and worked with their clients to improve access to sex education, birth control information, and abortion services by acting in some ways as liaisons

and Budget, 1974,” November 1973; Letter of support for the LBCIC from W. D. Stitt of the Bigelow Fowler Clinic, October 26, 1973, “Lethbridge Birth Control and Information Centre Annual Report and Evaluation, 1973 and Budget, 1974,” November 1973, found in “Lethbridge Birth Control Association,” GR1983-0133, box 1, file 5, PAA.

¹⁴ See, for example, Letter from Dr. Ian MacPhail, c. January 1972, in “Correspondence 1972,” M-7265-80; Notes from a meeting between Sue Higgins and CBCA activists, December 14, 1977, found in “Strategy Committee 1978,” M-7265-66; Letter to the CBCA from Donna R. Nichols, August 8, 1972. In “Correspondence 1972,” M-7265-80, *CBCA Collection* GA.

¹⁵ See, for example, Letters from Winnifred C. Mills, Rosina L. Staddon, R.G. Koep, Wilma G. Winter to Lethbridge City Council, c. March-April 1974, found in “Letters and Petitions Re: Funding of Birth Control Centre 1974,” 2011.1085 069, *Early City Record Collection* at the Galt Museum and Archives, Lethbridge (*ECRC* GMA); Lethbridge Birth Control and Information Centre Review of Budget and Programs for January 1, 1974 to November 8, 1974; “Proposal of Budget and Programs for 1975: Presented to the City of Lethbridge, the Province of Alberta Department of Preventative Social Services, and Family Planning Federation of Canada,” *LBCIC, 1973-1976* GMA; Peer Education, Community Outreach Education,” pg. 3, c. 1972, in “Educational Outreach 1978,” M-7265-101, *CBCA Collection* GA.

between community members and hospital services, navigating an uncharted moral minefield by coordinating education efforts with the need to secure sympathetic physicians and removing this burden from the often frightened, desperate, or time-strapped women in need.¹⁶

The important reproductive and sexual health services and education provided at these local birth control centres in the 1970s is a significant part of the Canadian Medicare story. Recognizing how communities came together to create their own reproductive and sexual healthcare between 1969 and 1979 reveals an explicit set of conversations about gender, sexuality, and reproduction that intersected with emergent health policy. As provinces responded to the federal healthcare agenda, it was up to provincial and local authorities to determine the shape of those systems. Reproductive health activists in Alberta made sure to hold the door open for a provincial healthcare system that could not ignore the need to integrate reproductive health options, even in a region that traditionally supported conservative political parties.

The regional and local perspectives used in this dissertation are essential to uncovering activists' on-the-ground work that significantly shaped health, reproductive, sexual, and family politics in the province of Alberta during the 1970s. The community-based, grassroots nature of activist initiatives, like LBCIC and the CBCA, have rendered them less visible within the historiography than high-profile marches, caravans, court cases, or demonstrations that occurred in larger urban centers.¹⁷ But the regional histories of the LBCIC and CBCA's grassroots activism are essential to understanding national and international histories of activism and feminism. Both of these birth control centres were located in southern Alberta cities, but the counsellors, educators, and volunteers at the centres worked with women, youth, medical professionals, politicians, and, even, some clergy came from across the province. The interactions between birth control centre staff and Alberta citizens occurred across urban, rural, and First Nations Reserve borders. And the geographical and social makeup of the region deeply influenced what kinds of services the two southern Alberta birth control centres provided and how the staff provided them.¹⁸ Exploring the

¹⁶ Peer Education, Community Outreach Education," pg. 3, c. 1972, in "Educational Outreach 1978," M-7265-101, *CBCA Collection GA*.

¹⁷ Beth Palmer, "Lonely, Tragic, but Legally Necessary Pilgrimages: Transnational Abortion Travel in the 1970s," *The Canadian Historical Review* vol. 92 no.4 (2011), 637-664; Stettner, "He is Still Unwanted," 151-171.

¹⁸ "Educational Outreach, 1968-1973," M-7265-99; "Educational Outreach, 1974-1976," M-7265-100; "Educational Outreach, 1978," M-7265-101, *CBCA Collection GA*; RM, interview, Oct. 7, 2014, transcript, GMA; Luba Lisun, interview with Karissa Patton, December 1, 2015, transcript (LL, interview, Dec. 1, 2014, GMA) found in "Oral History Project: Student Reproductive Rights

history of reproductive rights activism from a local and regional standpoint enhanced the analysis and recognition of the on-the-ground labour and grassroots organizing that occurred at the LBCIC and CBCA between 1969 and 1979.

The histories of the LBCIC and CBCA are part of a larger history about the struggles and successes of the women's health and liberation movements in Canada. The women at the LBCIC and CBCA developed a model of healthcare that incorporated several emergent medical models and challenged the status-quo of the doctor-patient relationship.¹⁹ Using a feminist model of healthcare that underscored philosophies from the women's health movement staff at these organizations designed their services around client- and community-feedback.²⁰ Despite their emphasis on community-directed service provision, the women working at the birth control centres, who were mostly White and lived in urban areas, faced a steep learning curve when it came to serving rural, Indigenous, and teenage women. Sometimes the LBCIC and CBCA educators' attempts to fill gaps in the existing health and social services were limited by assumptions about women's universal needs and aspirations. Like many feminist initiatives in the 1970s, the staff at the Centre and Association struggled to rectify notions about women's shared experiences of sexism with difference among women's experiences, especially when it came to race, place, and age. The struggles to build adequate and tailored services for local clients mirror many struggles in the larger international feminist movement in the 1970s to build "sisterhood" in a manner that welcomed a variety of women and their experiences. The White and urban birth control centre activists collaborated with women from rural communities, Indigenous women's rights activists, and teenagers to better tailor their programming to a more diverse set of needs. Despite these collaborations, the discourse about

Activism in Southern Alberta during the 1960s and 1970s," 20171019, at the Galt Museum and Archives, Lethbridge, Alberta.

¹⁹ "Wednesday Night Presentations," *Up* vol. 1 no. November 13 5, 1974, pg. 1, HQ1480.L47.U6, UOWA; A. Miron, "Gynecology Off Our Backs," originally published in *Chatelaine*, (c. 1974; date and issue unknown), republished in the *Meliorist*, March 8, 1974, pgs. 4-5.

²⁰ "Lethbridge Birth Control and Information Centre Review of Budget and Programs for January 1, 1974, to November 8, 1974;" "Proposal of Budget and Programs for 1975: Presented to the City of Lethbridge, the Province of Alberta Department of Preventative Social Services, and Family Planning Federation of Canada," *LBCIC, 1973-1976* GMA; CBCA bylaws 1975 in "Annual General Meeting 1977," M-7265-26; "Questionnaire Samples," M-7265-334; "Questionnaire Completed Clients 1976," M-7265-336; "Questionnaires Completed Clients 1977-1978," M-7265-337; "Questionnaires Completed Physicians [ca.1972]," M-7265-338; "Questionnaires Completed Physicians 1972," M-7265-339; "Questionnaires Completed Physicians 1978-1979," M-7265-343; "Questionnaires Completed Volunteers 1975-1967," M-7265-345; "Questionnaires Completed Volunteers 1978," M-7265-346, *CBCA Collection* GA.

reproductive rights maintained at the birth control centres defined women's liberation based on White women's reproductive experiences.

As birth control centres gained momentum in the 1970s, they became the sites of debate about reproductive rights and responsibilities. Throughout the 1970s, concerns about economic, sexual, and reproductive responsibility paralleled calls for reproductive, patients, and women's rights in the region. Women running the birth control centres believed that their clients had a right not just to access but to participate in the building of good reproductive and sexual healthcare services. As the activists at the CBCA and LBCIC advocated for these rights, they also participated in generating discourse about economic and reproductive responsibilities throughout the decade. As some citizens argued that publicly funded birth control centres infringed on their individual rights as taxpayers, birth control centre staff and their supporters argued that the government had a responsibility to fund essential community services.²¹ Some politicians and citizens contended that decriminalized birth control and abortion encouraged sexual immorality and irresponsibility.²² In response, staff at the CBCA and LBCIC promoted sexual and reproductive responsibility, especially within their programming for teens, the group that critics seemed most concerned about.²³ The educational literature and programming for teens offered at the birth control centres maintained that teenage sexuality was risky and characterized teens as inadvertently less sexually responsible than adults.²⁴ Even the revolutionary 1971 self-education booklet, *How to Take the Worry*, warned readers to "be as

²¹ Pauline Hoskin, copy of a letter to the editor sent to the *Lethbridge Herald* on March 12, 1974, *LBCIC 1973-1975 GMA*; "Maguire Lawsuit," M-7265-202, *CBCA Collection GA*.

²² Rita Moir, interviewed with Karissa Patton, 7 October 2014, transcript, interview and transcript housed in "Oral History Project: Students' Reproductive Rights Activism in Southern Alberta during the 1960s and 1970, 20171019, at the Galt Museum and Archives, (RM interview, Oct. 7, 2014, transcript, GMA); Name Indiscernible, letter to Lethbridge City Council, ca. March-April 1974; Letter from Ray Keitges to Lethbridge City Council, 2 April 1974; Letter from Lois J. and M. Krammer to Lethbridge City Council, , April 1, 1974, found in "Letters and Petitions Re: Funding of Birth Control Centre 1974," *ECRC GMA*; *The Globe and Mail*, "Alberta MLA assails birth control centre," December 12, 1974, (page number unavailable), *LBCIC, 1973-1975 GMA*.

²³ "Something's Happening Here," "Living with Sex: Human Sexuality Information and Discussion," "Parents Discussion Groups" in "Education outreach, 1968-1972," M-7265-99, at *CBCA Collection GA*; for LBCIC examples also see: Goodbye letter from Paulin Hoskin to LBCIC membership, *Unity* vol. 1 no. 9, June 30, 1975, *LBCIC 1973-1975 GMA*.

²⁴ "Resource outline – Abortion," 1973, in "education outreach 1974-1976," M-7265-100, *CBCA Collection GA*.

responsible as you can” but “HAVE FUN.”²⁵ When it came to moral panic about teenage motherhood, birth control centre staff, their critics, and their supporters employed consistent arguments about the responsible use of the welfare state. The birth control centres’ staff emphasized the state’s financial responsibility to enshrine collective reproductive rights and services, but they also reinforced notions of individual responsibility when it came to the contraceptive and abortion rights that had already been won.

By the end of the 1970s regional health units in Alberta included some reproductive and sexual health services in to the purview of Alberta Health Services (AHS), which legitimized these services as part of public healthcare but also called the public funding of the local birth control centres into question. In 1977, student journalists at the *Meliorist* announced the city council’s plans to open a Family Planning Centre, run by the Health Unit, to take the place of the LBCIC.²⁶ Even though this new Family Planning Centre had not opened yet, by the end of February 1978, the city council denied funding to the LBCIC for the first time in six years. The council cited the eventual opening of a new family planning centre under the health region as the reason for withdrawing funds, signalling that they did not want to pay for the same services twice.²⁷ In September 1978 the LBCIC closed for good when their LIP funds ran out. While many people grieve the loss of the birth control centre, some found solace in knowing that the health region and province had finally included significant aspects of reproductive and sexual health into their healthcare policies.²⁸ By the end of the 1970s the local and provincial politicians responded to debates about the publicly funded reproductive and sexual health services with a compromise: the services remained publicly funded as they were officially included in provincial healthcare but, as part of the AHS, the services had to be provided by medical professionals in AHS facilities. This policy compromise effectively cut LBCIC activists out of the new provincial reproductive and sexual health services and replaced the LBCIC’s community-based model with a policy-based bureaucracy.

The new Lethbridge Family Planning Centre (LFPC) opened in the spring of 1979 and brought sexual and reproductive health services back to Lethbridge but the new centre was heavily

²⁵ *How to Take the Worry out of Being Close: An Egg and Sperm Handbook*, revised Calgary edition, published by the Calgary Birth Control Association in 1972. Originally written by Marion Johnson Grey and Roger W. Grey and originally self-published in Oakland, California, 1971, pg. 2.

²⁶ Eugene Plawiuk and N. Smirnow, “Alderman’s stand called ‘rhetoric,’” *the Meliorist*, February 18, 1977, pg. 5.

²⁷ Brett Loney, “Birth Control Centre loses funding,” *the Meliorist*, February 17, 1978, pg. 2.

²⁸ JB, interview, Oct. 9, 2014, transcript, GMA.

regulated by the health unit. The LFPC offered many of the same services that the LBCIC provided throughout the decade, like pregnancy testing, birth control and abortion counselling, and educational programming about sex.²⁹ But local policymakers and politicians from the health unit and city council oversaw the LFPC activities through an appointed advisory board. Founding director of the LFPC, Terri Forbis described the significant limitations she encountered under watchful gaze of the advisory board: “probably only a couple of them were really supportive of the clinic [LFPC], the rest were there as monitors, as watch dogs to ensure that we were doing the right things.”³⁰ Some reproductive and sexual health services were offered with an air of legitimacy as they were incorporated into the purview of the Lethbridge Health Unit and AHS in 1979, but this legitimacy came with significant regulation of the services Forbis provided at the LFPC. The integration of services into the provincial healthcare system arrived as a bitter-sweet victory for LBCIC activists. On the one hand, their hard work had paid off and they no longer had to scramble for volunteers or compete for funding on an annual basis. But, on the other hand, the institutionalization of reproductive health services shifted considerable control away from the activists and bureaucratized a series of programs that had been carefully calibrated with communities.

The CBCA, which remained open, came to rely less and less on government grants following the 1970s but have maintained their activist roots to this day. The Association still exists today as the Centre for Sexuality, which financially relies on “funding organizations ... and corporate donors” as well as “community donors.”³¹ The people running the Centre for Sexuality still emphasise education and activism as a key part of their work. Their website banner reads, “we teach, we train, we advocate.” The mandate at the Centre for Sexuality has expanded to be more inclusive of LGBTQ2+ clients and offers pregnancy and STI testing. The Calgary Centre for Sexuality’s vision of “healthy bodies, healthy relationships, and healthy communities” for “All Albertans to experience healthy sexuality across the lifespan”³² remains true to its original goals of community advocacy that are reminiscent of its precursor, the CBCA. While reproductive health services were institutionalized and regulated within AHS in Lethbridge, as their government funding decreased

²⁹ TF, interview, Jan. 24, 2013, transcript, GMA.

³⁰ TF, interview, Jan. 24, 2013, transcript, GMA.

³¹ “About Us,” *Centre for Sexuality*, last accessed April 1, 2020, <https://www.centreforsexuality.ca/about-us/>.

³² “About Us,” *Centre for Sexuality*, last accessed April 1, 2020, <https://www.centreforsexuality.ca/about-us/>.

activists in Calgary maintained their alternative healthcare model and service through charitable donations that have sustained the organization and allowed it to operate outside of the frame of Alberta Health Services.

Yet, many of these community-based services remain essential in the region today. Some of the goals that birth control centre activists worked towards in the 1970s, including making birth control and abortion services more accessible, destigmatizing contraceptive use, abortion, and premarital sex, and restructuring the doctor-patient relationship, remain some of the signposts of contemporary feminist movements.³³ Access to contraception, abortion, and sex education across national, provincial, and even local borders varied in the 1970s and still vary now.³⁴ In Alberta today, many feminists call for provincial governments to loosen their regulation on abortion access and increase reproductive and sexual health services in rural areas.³⁵ Much of the sex education curricula

³³ Jillian Viera, “The case for universal contraception coverage,” *The Star*, August 17, 2020; Giuseppina Di Meglio and Elisabeth Yorke, “Position Statement: Universal Access to No-Cost Contraception for Youth in Canada,” *Pediatric Child Health*, vol. 24, no. 3, (2019), 160-169; Action Canada for Sexual Health & Rights, “Unequal Access to Abortion Across Canada,” July 25, 2019, accessed November 1, 2020, <https://www.actioncanadashr.org/news/2019-07-25-unequal-access-abortion-across-canada>; Malika Sharma, “Applying Feminist Theory to Medical Education,” *the Lancet*, February 9, 2019.

³⁴ Palmer, “‘Lonely, Tragic, but Legally Necessary Pilgrimages,’” 637-664; Lianne McTavish, “Abortion in New Brunswick” *Acadiensis* Vol, 44 No. 2 (Summer/Autumn 2015), 107-130; Sethna and Doull, “Accidental Tourism,” (2012); Shaw, “Full-Spectrum Reproductive Justice,” (2013).

³⁵ Jennifer Dressler, Nanamma Maughn, Judith A. Soon, Wendy V. Norman, “The Perspective of Rural Physicians Providing Abortion in Canada: Qualitative Findings of the BC Abortion Providers Survey (BCAPS),” *PLOS ONE*, June 28, 2013, <https://doi.org/10.1371/journal.pone.0067070>; Jennifer Hulme, Sheila Dunn, Edith Guilbert, Judith Soon, and Wendy Norman, “Barriers and Facilitators to Family Planning Access in Canada,” *Health Policy/Politiques de Santé*, vol. 10, no. 3, (February 2015), 48-63, <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4748342/>; Olivia Bowden, “Many women can’t access birth control – is ordering online the solution?” *Global News* December 3, 2019, accessed May 25, 2020, <https://globalnews.ca/news/6248607/ordering-birth-control-online/>; Action Canada for Sexual Health and Rights, Press Release, “Abortion Access Across Canada Remains Unequal, New Report Shows, 2019, <https://www.actioncanadashr.org/about-us/media/2019-09-23-abortion-access-across-canada-remains-unequal-new-report-shows>; Natalie Valteau, “Reaction grows to bill that would allow doctors to refuse procedures based on moral objections,” *CBCNews*, November 9, 2019, accessed November 1, 2020, <https://www.cbc.ca/news/canada/calgary/conscience-rights-alberta-legislature-abortion-ucp-bill-207-1.5354209>; Jessica Shaw and Nancy Janovicek, “Bill 9 is a necessary step toward equitable abortion access,” *Calgary Herald*, June 2, 2018, accessed November 1, 2020, <https://calgaryherald.com/opinion/columnists/shaw-and-janovicek-bill-9-is-a-necessary-step-toward-equitable-abortion-access>; The Canadian Press, “Anti-Abortion ads ordered off buses in Lethbridge, Alta.,” *CTVNews*, April 4, 2018, accessed November 1, 2020, <https://www.ctvnews.ca/canada/anti-abortion-ads-ordered-off-buses-in-lethbridge-alta-1.3871448>;

for Canadian teens remains inadequate and often limits the discussions about sex to preventing pregnancy and STI, excluding teens, especially LGBTQ2+ youth, from conversations about pleasure and sexual liberation.³⁶ Teens still rely heavily on self- and peer-education to learn about sex, sexuality, and contraception.³⁷ Even though rates of teenage pregnancy have decreased in the region since the 1970s,³⁸ pregnant Calgary teens are still routinely segregated from their peers and encouraged to attend the contemporary iteration of Bankview: the Louise Dean School.³⁹ Indigenous women and families continue to face coercive sterilization and disproportionate rates of child apprehension in Canada.⁴⁰ And Indigenous women and women of colour in Canada continue

Terry Vogt, "Lethbridge pro-life celebrating court win over controversial bus ads," *CTVNews*, October 30, 2020, last accessed November 1, 2020, <https://calgary.ctvnews.ca/lethbridge-pro-life-celebrating-court-win-over-controversial-bus-ads-1.5168956>.

³⁶ See, for example: Caroline Alphonso, "Ford government scraps controversial Ontario sex-ed curriculum," *The Globe and Mail*, July 11, 2018, last updated July 11, 2018, <https://www.theglobeandmail.com/canada/article-doug-ford-government-scraps-controversial-ontario-sex-ed-curriculum/>; Andrew Russell, "Doug Ford reverting back to 1998 sex-ed curriculum is 'dangerous' for kids, experts say," *Global News*, July 12, 2018, last updated July 12, 2018, <https://globalnews.ca/news/4327836/doug-ford-1998-sex-ed-curriculum-dangerous/>; Andrew Russell, "Doug Ford is returning Ontario to a 1998 sex-ed curriculum. Some teachers are fighting back," *Global News*, July 13, 2018, last updated July 13, 2018, <https://globalnews.ca/news/4330893/doug-ford-ontario-1998-sex-ed-curriculum-teachers/>; Brianna Sharpe, "Are the Queer Kids Alright In Kenney's Alberta?," *The Sprawl*, May 5, 2020, accessed May 20, 2020, <https://www.sprawlcalgary.com/lgbtq-gsa-kenney-alberta>; Dean Bennett, "Alberta Introduces amended Education Act, Opposition says LGBTQ kids at risk," *Global News*, June 5, 2019, last updated June 9, 2019, <https://globalnews.ca/news/5356225/alberta-education-system-teachers-students-ucp-gsa/>; Laura Osman, "Health-care disparities face by LGBTQ Canadians widened by coronavirus: researchers," *Global News*, April 27, 2020, last updated May 28, 2020, <https://globalnews.ca/news/6874284/healthcare-disparities-lgbtq-coronavirus/>.

³⁷ Linda Yang, "Letting Teens Teach Each Other Sex Ed Works," *Vice*, December 13, 2016, accessed on November 1, 2020, <https://www.vice.com/en/article/j5e8g4/letting-teens-teach-each-other-sex-ed-works>; Audrey Carleton, "Why Netflix's 'Big Mouth' provides teens with better at Sex Ed than Doug Fords Government," *Vice*, October 15, 2018, accessed November 1, 2020, https://www.vice.com/en/article/evw7xa/big-mouth-is-better-at-sex-ed-than-doug-fords-government?utm_source=reddit.com; Kate Ellis, "TikTok is Sex-Ed O'clock: Revolutionizing the Way Sexual Education is Taught," *The McGill Daily*, February 17, 2020, accessed November 1, 2020, <https://www.mcgilldaily.com/2020/02/tiktok-its-sex-ed-oclock/>.

³⁸ Alexander McKay, "Trends in Canadian National and Provincial/Territorial Teen pregnancy Rates; 2001-2010," *The Canadian Journal of Human Sexuality* vol. 21, no. 3-4, (2012), 162.

³⁹ "Louise Dean School," *Calgary Board of Education*, last accessed November 1, 2020, <https://school.cbe.ab.ca/school/louisedean/Pages/default.aspx>.

⁴⁰ See, for example: Alex Soloducha, "Sask. Indigenous women file lawsuit claiming coerced sterilization," *CBC News*, October 10, 2017, last updated October 10, 2017, <https://www.cbc.ca/news/canada/saskatchewan/sask-indigenous-women-file-lawsuit-claiming-coerced-sterilization-1.4348848>; Kelly Geraldine Malone, "Indigenous woman alleges coerced

to call upon on their White counterparts to practice better intersectional feminism and reproductive justice.⁴¹

As the 1970s ended and Alberta Health Services brought some aspects of sexual and reproductive health service under their purview, reproductive and sexual healthcare in the region shifted significantly. The women who ran the birth control centres made a significant impact on the reproductive and sexual healthcare in the province as many new physicians and nurses were trained in the areas of contraception and abortion and the medical community reevaluated aspects of the doctor-patient relationship.⁴² The women who ran the birth control centres had developed a specific expertise and gained authority as experts in the region during the 1970s. But by the end of the decade even some of their sympathetic supporters favoured physician-run services within official government policy over the community-driven services offered at the birth control centres.⁴³ As the birth control centres were slowly pushed to the fringe of publicly funded healthcare, non-clinical

sterilization in Saskatchewan in December,” *The Canadian Press*, April 4, 2019, last updated April 4, 2019, <https://globalnews.ca/news/5131859/coerced-sterilization-saskatchewan/>; Avery Zingel, “Indigenous women come forward with accounts of forced sterilization, says lawyer,” *CBC News*, April 18, 2019. Last updated April 18, 2019: <https://www.cbc.ca/news/canada/north/forced-sterilization-lawsuit-could-expand-1.5102981>; *CBC News*, “Alberta looks to boost native foster parent numbers,” August 24, 2007, Last updated August 24, 2007, <https://www.cbc.ca/news/canada/calgary/alberta-looks-to-boost-native-foster-parent-numbers-1.670916>; Kyle Edwards, “Fighting Foster Care,” *McLean’s*, February 1, 2018, accessed November 15, 2019, <https://www.macleans.ca/first-nations-fighting-foster-care/>; Olivia Stefanovich, “Trudeau government seeks judicial review of tribunal to compensate First Nations Kids,” *CBC News*, October 4, 2019. Last updated October 4, 2019, https://www.cbc.ca/amp/1.5308897?_twitter_impression=true.

⁴¹ Kayla Butler, “‘Entire System’ Need to Change: Indigenous Women Encounter Unique Issues Regarding Reproductive Rights,” *CityNews*, Jun 26, 2019, last accessed November 1, 2020, <https://toronto.citynews.ca/2019/06/26/indigenous-women-reproductive-rights/>; Erika Violet Lee and Tasha Spillett, “Indigenous Women on the Prairies Deserve Reproductive Freedom,” *CBCNews*, November 25, 2017, last updated November 25, 2017, <https://www.cbc.ca/news/indigenous/opinion-indigenous-women-reproductive-freedom-1.4418787>; Naomi Seyers, “The Stories of Women that White Feminism Forgot,” *Huffington Post*, October 19, 2018, last updated October 19, 2018, https://www.huffingtonpost.ca/naomi-sayers/indigenous-international-womens-day_a_23378966/.

⁴² Lorraine Greaves, introduction to *Personal and Political: Stories from the Women’s Health Movement, 1960-2010*, (Toronto: Second Story Press, 2018), 1.

⁴³ Eugene Plawiuk and N. Smirnow, “Alderman’s stand called ‘rhetoric,’” *the Meliorist*, February 18, 1977, pg. 5; Brett Loney, “Birth Control Centre loses funding,” *the Meliorist*, February 17, 1978, pg. 2.

community needs were increasingly characterized as individual responsibilities.⁴⁴ The moral baggage of the changing attitudes about sex, decriminalized contraception and abortion, and responsible economics that inspired women and medical professionals to establish the southern Alberta birth control centres in the early 1970s remained well into the 1980s and beyond.⁴⁵ Assertions of individual taxpayers' rights, responsible use of the welfare state, and preventative (read economically responsible) services still clash with calls for accessible and comprehensive reproductive and sexual healthcare in Alberta. And activist service-providers from groups like the CBCA/Centre for Sexuality continue to fill in gaps within official healthcare policies and services. Between 1969 and 1979 economics of reproductive rights and responsibilities were shifting, and the ground work set by the LBCIC and CBCA activists ultimately merged with other political agendas, even conservative ones, that created space for Albertan activist women to become unexpected leaders in providing reproductive healthcare services in western Canada.

⁴⁴ Peder Clark, "'Problems of Today and Tomorrow': Prevention and the National Health Service in the 1970s," *Social History of Medicine* vol. 33, no. 3 (August 2020), 981-1000; Erika Dyck and Maureen Lux, "Vasectomies and the Dilemma of Male Reproduction," *Challenging Choices: Canada's Population Control in the 1970s*, (Montreal & Kingston: McGill-Queen's University Press, 2020) – forthcoming.

⁴⁵ Loretta Ross and Rickie Solinger, *Reproductive Justice: An Introduction*, (Oakland; University of California Press, 2017, 51-54.

Appendix

Family Planning Project Grants Approved and Paid 1972/1973¹					
Location	Recipient Agency	Purpose	Type	Amount	Length
National (4)	Family Planning Federation of Canada	Service Extension	S	\$500,000	C
	Service de Regulation des Naissances (SERENA)	Service Extension	S	\$172,000	C
	University of Alberta – Faculty of Medicine	Med. Students’ National Conference on F.P. in Curricula	T	\$15,761	N
	Canadian Association of Schools of Social Work	Seminar on F.P. and Social Work Education	T	\$19,084	N
Newfoundland (1)	Family Planning Association of Newfoundland	Provincial F.P. Conference	T	\$10,425	N
Nova Scotia (1)	Nova Scotia Department of Public Welfare	F.P. Training program for social welfare staff (design)	T	\$8750	N
New Brunswick (3)	NB Department of Health	Staffing NB Family Planning Association	S	\$20,000	C
	Edmundston FP Clinic	Service Extension	S	\$12,692	C
	NB Family Planning Association	Provincial FP Conference	T	\$7000	N
Quebec (3)	Loyola University	Psychological Concepts of Sexuality	T	\$10,000	N
	Federation de Quebec pour la Planning des naissances	Exhibit 4e Salon de la femme, Montreal	T	\$20,000	N
	Federation du Quebec pour la Planning des naissances	Provincial FP Conference	T	\$8352	N
Ontario (11)	University of Guelph	Film on Student attitudes to F.P.	D	12,132	C

¹ Chart compiled by Alberta Family Planning Co-Ordinating Committee in 1972. Found in “Alberta Family Planning Co-Ordinating Committee 1975” in the *Calgary Birth Control Association* Collection at the Glenbow Archives, Calgary, Alberta, M-7265-20.

	Wellington-Dufferin-Guelph Health Unit	F.P. Clinic	S	20,185	C
	Women's' College Hospital Toronto	F.P. Clinic	S	46,986	C
	University of Toronto Population Unit	Nurse Fellowship	F	27,660	C
	University of Toronto Department of Medicine	Research and Teaching Fellowship	F	24,500	C
	University of Waterloo	F.P. Seminar	T	881	N
	University of Toronto School of Social Work	Book of Reading in F.P.	T	4,720	N
	McMaster University School of Social Work	Multidisciplinary F.P. Course (Design)	T	3,820	N
	Kitchener-Waterloo Planned Parenthood	Training Project	T	10,025	N
	Planned Parenthood Ottawa	Training for F.P. Educators	T	934	N
	University of Guelph	Teaching of Sex Education	R	9,000	N
Manitoba (2)	Winnipeg Health Dept.	Family Planning Clinic	S	9,191	N
	Family Planning Assn. of Manitoba	Population Research	R	16,625	N
Saskatchewan (2)	Regina Health Dept.	F. P. Clinic	D	4,891	N
	Sask. Dept. of Health	Staffing F. P. Assn. of Sask.	S	20,000	C
Alberta (11)	Sturgeon Health Unit	F. P. Education	D	\$3250	C
	Medicine Hat Health Unit	F. P. Clinic	D	\$4300	C
	Minburn-Vermilion Health Unit	F. P. Clinic	D	\$5285	C
	Peace River Health Unit	F. P. Program	D	\$2900	C
	Wetoka Health Unit	F. P. Program	S	\$3000	C
	Chinook Health Unit	F. P. Clinic	S	\$4500	C
	Drumheller Health Unit	F. P. Clinic	S	\$3087	C
	Lethbridge Birth Control Clinic	Service Extension	S	\$4500	C
AB Department of Health and Social Development	F. P. Consultants	T	\$17,000	C	

	Calgary Birth Control Assn.	Education Directives	T	\$9458	C
	University of AB Dept. of Sociology	Growth of Alberta Families	R	\$32,600	N
British Columbia (7)	Family Planning Assn. of B.C.	Nurse Coordinator for Clinics	D	6,384	N
	B.C. Dept. of Health	F.P. Clinic Equipment	S	3,150	N
	B.C. Dept. of Human Resources	Staff Seminar in F.P.	T	3,585	N
	University of B.C. Faculty of Medicine	Fellowship in Demography and Population Studies	F	22,260	C
	F.P. Assn. of B.C.	Training in Clinic Organization	T	4,632	C
	F.P. Assn. of B.C.	Training of Clinical	T	4,095	C
	F.P. Assn. of B.C.	Provincial F.P. Conference	T	9,400	N
TOTAL: \$1,150,00					
Legend: S – Service, T – Training, D – Demonstration, R – Research, F – Fellowship C – Continuing – will require further support, N – Non-recurring – completed in current year					

Family Planning Project Grants Approved and Paid 1973/1974²					
Total Projects Supported - 31 Total Amount Awarded - \$1,249,203					
Location	Recipient Agency	Purpose	Type	Amount	Length
National (3)	Family Planning Federation of Canada	Service Extension	S	\$457,500	C
	Family Planning Federation of Canada	Attitude & Awareness Study	D	\$40,700	N
	Service de Régulation des Naissances (SERENA)	Service Extension	S	\$150,000	C
Nova Scotia (3)	Dalhousie University Dept. of Obstetrics & Gynecology	Professional Training Program	T	\$15,520	N

² Chart compiled by Alberta Family Planning Co-Ordinating Committee in 1973. Found in "Alberta Family Planning Co-Ordinating Committee 1975" in the *Calgary Birth Control Association* Collection at the Glenbow Archives, Calgary, Alberta, M-7265-20.

	Dalhousie University Dept. of Obstetrics & Gynecology	Family Life Conference	T	\$2,763	N
	N.S. Dept. of Social Services	Staff Training	T	\$30,634	N
New Brunswick (1)	Edmundston Comité de Planning Familial	Service de Planning Familial	S	\$16,946	C
Quebec (3)	Fédération du Québec pour le Planning des Naissances	Salon de la Femme 1973	T	\$4,323	N
	Ministère des Affaires Sociales	Formation des professionnels en milieu scolaire	T	\$29,900	N
	Ministère des Affaires Sociales	Information preventive en milieu scolaire	D	\$120,100	C
Ontario (6)	Carleton University Dept. of Sociology & Anthropology	Carleton-Ottawa- Algonquin student Project	R	\$31,380	N
	North Bay Family Life Centre	Family Planning Service	S	\$10,000	N
	University of Toronto Dept. Of Preventative Medicine	Research & Training Fellowship	F	\$29,710	C
	University of Toronto School of Hygiene	Nurse Fellowship	F	\$30,930	C
	Wellington-Dufferin- Guelph Health Unit	Family Planning Clinic	S	\$26,275	C
	Women's College Hospital Toronto	Birth Control Clinic	S	\$20,000	C
Manitoba (2)	Manitoba Metis Federation	Family Planning Project	D	\$19,972	N
	University of Manitoba Dept. of Sociology	Post-doctoral Fellowship	T	\$11,108	N
Saskatchewan (1)	Regina Health Department	Family Planning Clinic Study	R	\$7,689	N
Alberta (8)	AB Department of Health and Social Development (P)	Family Planning Consultants	T	\$22,000	C
	Calgary Birth Control Assn. (V)	Education Director	T	\$13,400	C

	Edmonton Social Service Department (M)	AB Family Planning Conference	T	\$5708	N
	Minburn-Vermilion Health Unit (M)	F. P. Program	D	\$7165	C
	Slave Lake Native Friendship Center (V)	F. P. Service	S	\$8800	C
	University of AB Department of Community Medicine (U)	Service Model Development	R	\$30,000	C
	University of AB Dept. of Sociology (U)	Growth of Alberta Families	R	\$5050	N
	Wetoka Health Unit (M)	F. P. Program	S	\$2200	C
British Columbia (4)	B.C. Dept. of Health Services	Honouraria for Clinic Staff	S	\$17,940	N
	University of B.C. Faculty of Medicine	Fellowship in Demography & Population Studies	F	\$29,812	C
	University of B.C. Faculty of Medicine	Indian Attitude Study	R	\$34,343	N
	Vancouver General Hospital Social Service Department	Counselling Project	D	\$17,335	N
Legend: M – Municipal, P – Provincial, U – University, V - Voluntary S – Service, T – Training, D – Demonstration, R – Research, F – Fellowship C – Continuing – will require further support, N – Non-recurring – completed in current year					

Family Planning Project Grants Approved and Paid 1974/1975³					
Total Projects Supported - 38					
Total Amount Awarded - \$1,750,000					
Location	Recipient Agency	Purpose	Type	Amount	Length
National (3)	Canadian Assn. of Schools of Social Work	F.P. Workshop	T	\$11,111	N
	Family Planning Federation of Canada	Service Extension	S	\$600,000	C
	Service de Régulation des Naissances (SERENA)	Service Extension	S	\$180,000	C

³ Chart compiled by Alberta Family Planning Co-Ordinating Committee in 1974. Found in "Alberta Family Planning Co-Ordinating Committee 1975" in the *Calgary Birth Control Association* Collection at the Glenbow Archives, Calgary, Alberta, M-7265-20.

Newfoundland (1)	Family Planning Assn. of Nfld.	Community Education	T	\$13,800	C
PEI (1)	Family Planning Assn. of P.E.I.	Community Education	T	\$16,019	C
New Brunswick (3)	Edmundston Comité de Planning Familial	Service de Planning Familial	S	\$23,933	N
	N.B. Dept. of Health	Staff Family Planning Assn. of N.B.	S	\$15,000	C
	Family Planning Assn. of N.B.	F.P. Seminar	T	\$7,255	N
Quebec (2)	Ministère des Affaires Sociales	Services consultatifs aux adultes	S	\$220,000	C
	Ministère des Affaires Sociales	Information preventive en milieu scolaire	D	\$115,000	C
Ontario (14)	Carleton University	Carleton-Ottawa-Algonquin Student Project	R	\$9,493	N
	Family Service Assn. of Hamilton	Sex Education	D	\$21,301	C
	Huron County Health Unit	F.P. Clinic	S	\$14,200	N
	Kitchener-Waterloo Planned Parenthood	Community Education	T	\$10,628	C
	McMaster University	Multidisciplinary Learning Program	T	\$36,100	C
	Planned parenthood Ontario	Provincial F.P. Conference	T	\$25,000	N
	Planned Parenthood Ottawa	French Community Outreach Program	D	\$12,880	C
	University of Guelph	Student Film Evaluation	D	\$20,000	N
	University of Guelph	Student Sexual Attitudes	R	\$2,000	N
	University of Toronto	Fellowship	F	\$33,124	N
	University of Toronto	Male Attitude Study	R	\$44,670	C
	University of Toronto	Nutrition Counselling in a F.P. Clinic	D	\$16,265	N

	University of Western Ontario	Pharmacists' Role in F.P.	R	\$22,940	N
	Women's College Hospital Toronto	Birth Control Clinic	S	\$10,000	N
Manitoba (1)	University of Manitoba	Fellowship	F	\$29, 203	C
Saskatchewan (2)	Sask. Dept. of Health	Staff Family Planning Assn. of Sask.	S	\$20,000	C
	University of Regina	Fellowship	F	\$31,987	C
Alberta (8)	AB Department of Health and Social Development (P)	Family Planning Consultants	T	\$27,000	N
	Calgary Birth Control Assn. (V)	Community Education	T	\$21,112	N
	Edmonton Family Planning Association (V)	Community Education	T	\$9000	C
	Lethbridge Birth Control Centre	F. P. Service	S	\$5000	N
	Minburn-Vermilion Health Unit (M)	F. P. Program	D	\$12,300	N
	Slave Lake Native Friendship Center (V)	F. P. Service	S	\$23,347	C
	University of AB Department of Community Medicine (U)	Service Model Development	R	\$7310	C
	Wetoka Health Unit (M)	F. P. Program	S	\$11,316	N
British Columbia (3)	Family Planning Assn. of B.C.	Nurse Coordinator for Clinics	D	\$20,146	N
	University of B.C.	Fellowship	F	\$40, 624	C
	University of B.C.	Indian Attitude Study	R	\$10, 956	N

Legend: M – Municipal, P – Provincial, U – University, V - Voluntary
S – Service, T – Training, D – Demonstration, R – Research, F – Fellowship
C – Continuing – will require further support, N – Non-recurring – completed in current year

Federal Funded Family Planning Projects [in Alberta] (To November 3, 1975)⁴

Agency	Type of Project	Federal Funding
--------	-----------------	-----------------

⁴ Chart compiled by Alberta Family Planning Co-Ordinating Committee in 1975. Found in "Alberta Family Planning Co-Ordinating Committee 1975" in the *Calgary Birth Control Association* Collection at the Glenbow Archives, Calgary, Alberta, M-7265-20.

Division of Local Health Services	Consultation and Training	1) \$17,000 for March 1/73 – February 28/74 2) \$22,000 March 1/74 – Feb. 29/75 3) \$27,000 for third and final year
City of Edmonton Social Service Department	Provincial Conference	\$5,708 granted. Conference held May 16th – 18 th , 1973
Minburn-Vermillion Health Unit	Clinical, Educational, and Counselling Services. (Clinic discontinued. Education-Counselling Program continued and expanded).	1) \$5,285 for May 1, 1973 to April 30, 1974 2) \$7,165 for May 1, 1974 to April 30, 1975 3) \$12,300 for third and final year
Drumheller health Unit	Education, Counselling and Referral Services	1) \$3,087 for January 1/75 to December 31/76
Chinook Health Unit	Clinical, Educational, and Counselling Services	\$4,500 for May 1, 1973 to April 30, 1974. Renewal not required.
Wetoka Health Unit	Education, Counselling, and Referral	1) \$3,000 for Feb. 1/73 to Jan. 31/75 2) \$2,200 for Feb. 1/75 – Jan. 3/76 3) \$11,316 for third and final year
Medicine Hat Health Unit	Clinical, Educational, and Counselling Service. (Clinic discontinued after three months' operation due to public opposition).	\$4,300 for Dec. 20/73 to Dec. 20/74. Second year funding not requested.
Sturgeon Health Unit (Barrhead)	Education, Counselling, and Referral	\$3,250 for Feb./73 to January 31/74. Renewal not requested.
Peace River Health Unit	Education, Counselling, and Referral	\$2,900 for Oct. 1/73 to Sept. 30/74. Second year funding not requested.
Calgary Birth Control Association	Education, Counselling, and Referral	1) \$9,458.00 for April 1/73 to March 31/74 2) \$13,400.00 for April 1/74 – March 31/75 3) \$21,112 for third and final year
Edmonton Family Planning Services	Education, Counselling, and Referral	1) \$9,000 for Sept. 1/74 to August 31/75 \$22,000 pending
Lethbridge Birth Control & Information Centre	Education, Counselling, and Referral	1) \$4,500.00 for April 1/73 to March 31/74 2) \$5,000.00 for April 1/74 to March/31/75
Slave Lake Community Action Group	Education, Counselling, and Referral	1) \$8,800 for Sept. 1/73 to Aug. 31/74 2) \$23,347 for second year
University of Alberta Department of Sociology	Research "Gap" Study - (Growth of Alberta Families)	\$32,600 plus a supplementary grant of \$5,505 for <u>one</u> year period – June/73 – June/74
University of Alberta Department of Community Medicine	Research "Development and Validation of Models for the Location, Selection and Evaluation of Family Planning	1) \$30,000 for Sept. 1/74 to August 31/75 2) \$7.310 supplement

Bibliography

Primary Sources

- Alberta Native Women's Association Fonds, PR1999.0465, at the Provincial Archives of Alberta, Edmonton, Alberta.
- "Calgary Birth Control Association," GR1983.0133.0003, at the Provincial Archives of Alberta, Edmonton, Alberta.
- "Calgary Birth Control Association," GR1983.0133.0006, at the Provincial Archives of Alberta, Edmonton, Alberta.
- "Drumheller," GR1983.0133.0001, at the Provincial Archives of Alberta, Edmonton, Alberta.
- "Lethbridge Birth Control Association," GR1983.0133.0005, at the Provincial Archives of Alberta, Edmonton, Alberta.
- Lethbridge Birth Control and Information Centre Fond, 20171104, at the Galt Museum and Archives, Lethbridge, Alberta.
- "Letters and Petitions Re: Funding of Birth Control Centre 1974," 2011.1085/069, in the Early City Record Collection, at the Galt Museum and Archives, Lethbridge, Alberta.
- Oral History Project: Students' Reproductive Rights Activism in Southern Alberta during the 1960s and 1970, 20171019, at the Galt Museum and Archives, Lethbridge, Alberta.
- Mary Bochenko, interviewed with Karissa Patton, January 27, 2015, transcript.
- Judy Burgess, interview with Karissa Patton, December 8, 2012, transcript.
- Judy Burgess, Interview with Karissa Patton, October 2, 2014, transcript.
- Judy Burgess, interviewed with Karissa Patton, October 9, 2014, transcript.
- Judy Burgess, interviewed with Karissa Patton, December 18, 2014, transcript.
- Terri Forbis, interview with Karissa Patton, January 24, 2013, transcript.
- Luba Lisun, interview with Karissa Patton, December 1, 2015, transcript.
- Rita Moir, interview with Karissa Patton, December 13, 2012, transcript.
- Rita Moir, interview with Karissa Patton, October 7, 2014, transcript.
- Papers of the Lethbridge Birth Control and Information Centre, 19861102030, at the Galt Museum and Archives, Lethbridge, Alberta.
- Pauline Hoskin, interview with Karissa Patton December 20, 2017, transcript.
- The Calgary Birth Control Association Collection, M-7265-1 to M-7265-458, at the Glenbow Archives, Calgary, Alberta.
- The Lethbridge Women's Liberation Group Newsletter, *Up*, 1974-1976, HQ1480.L47.U6, at the University of Ottawa's Women's Archives, University of Ottawa, Ottawa, Ontario.
- Voice of Alberta Native Women's Society Conferences 1968-1971, 10-00156-137, at the University of Ottawa's Women's Archives, University of Ottawa, Ottawa, Ontario.
- Voice of Alberta Native Women's Society Fonds, GR1979.0152., at the Provincial Archives of Alberta, Edmonton, Alberta.
- Voice of Alberta Native Women's Society, Constitution and By-laws, PR1984.0028.1, at the Provincial Archives of Alberta, Edmonton, Alberta.

Secondary Sources

- Abrams, Lynn. *Oral History Theory*. New York: Routledge, 2010.
- Ackerman, Katrina. "Before Mifegymiso: A History of Rural Women's Access to Abortion," November 24, 2016, *ActiveHistory.ca*, last accessed September 27, 2020, <https://activehistory.ca/2016/11/before-mifegymiso-a-history-of-rural-womens-access-to-abortion/>.

- Ackerman, Katrina. "The Dark, Well-Kept Secret: Abortion Experience in the Maritime Provinces," in *Abortion: History, Politics, and Reproductive Justice after Morgentaler*, edited by Shannon Stettner, Kristin Burnett, and Travis Hay, 133-151. Vancouver: University of British Columbia Press, 2017.
- Ackerman, Katrina and Shannon Stettner. "'The public is not ready for this': 1969 and the Long Road to Abortion Access." *Canadian Historical Review* Vol. 100 No. 2, (June 2019), 239-256.
- Adams, Mary Louise. *The Trouble with Normal: Postwar Youth and the Making of Heterosexuality*. Toronto: University of Toronto Press, 1997.
- Adamson, Nancy. "Feminists, Libbers, Lefties, and Radicals: The Emergence of the Women's Liberation Movement." In *A Diversity of Women: Ontario, 1945-1980*, edited by Joy Parr, 252-280. Toronto: University of Toronto Press, 1995.
- Andrews, Valerie J. *White Unwed Mothers: Adoption Mandate in Postwar Canada*. Bradford: Demeter Press, 2018.
- Androsoff, Ashleigh. "The Trouble With Teamwork: Doukhobor Women's Plow Pulling in Western Canada, 1899." *Canadian Historical Review* Vol. 100, No. 4 (December 2019), 540-563.
- Artibise, Alan. *Prairie Urban Development, 1970-1930*. Ottawa: Canadian Historical Association, 2018.
- Backhouse, Constance. *Carnal Crimes: Sexual Assault Law in Canada, 1900-1975*. Toronto: The Osgoode Society for Canadian Legal History, 2008.
- Bailey, Jenna, David Este, Deborah Dobbins, and Shiloh Centre for Multicultural Roots. *We Are The Roots: Black Settlers and Their Experiences of Discrimination on the Canadian Prairies*. Bailey & Soda Films, 2018. Film.
- Banak, Clark. *God's Province: Evangelical Christianity, Political Thought, and Conservatism in Alberta*. Montreal & Kingston, McGill-Queen's University Press, 2016.
- Barrie, Doreen. *The Other Alberta: Decoding a Political Enigma*. Regina: University of Regina Press, 2006.
- Blake, Raymond. *From Rights to Needs: A History of Family Allowances in Canada, 1929-1992*. Vancouver: University of British Columbia Press, 2009.
- Bobel, Chris. "'I'm not an activist, though I've done a lot of it': Doing Activism, Being and Activist and the 'Perfect Standard' in a Contemporary Movement." *Social Movement Studies* Vol. 6 No. 2 (2007), 147-159.
- Briggs, Laura J. *Reproducing Empire: Race, Sex, Science, and US Imperialism in Puerto Rico*. Berkeley: University of California Press, 2003.
- Brunner, Paul. Editor. *Lougheed & The War with Ottawa*, volume eleven in *Alberta in the 20th Century: A Journalistic History of the Province*. Edmonton: United Western Communications Ltd, 2002.
- Burnett, Kristin. *Taking Medicine: Women's Healing Work and Colonial Contact in Southern Alberta, 1880-1930*. Vancouver: University of British Columbia Press, 2010.
- Burnett, Kristin. "Obscured Obstetrics: Indigenous Midwives in Western Canada." *Recollecting Lives of Aboriginal Women of the Canadian Northwest and Borderlands*. Athabasca: Athabasca University Press, 2014.
- Carlson, Nellie, Kathleen Steinhauer, and Linda Goyette. *Disinherited Generations: Our struggle to Reclaim Treaty Rights for First Nations Women and Their Descendants*. Edmonton: University of Alberta Press, 2013.
- Carter, Julian B. "Birds, Bees, and Venereal Disease: Toward an Intellectual History of Sex Education." *Journal of the History of Sexuality* Vol. 10 No. 2 (April 2001), 213-249.
- Carter, Sarah, Lesley Erickson, Patricia Roome, and Char Smith. *Unsettled Pasts: Reconceiving the West Through Women's History*. Calgary: University of Calgary Press, 2005.
- Chalus, Elaine H. "From Friedan to feminism: gender and change at the University of Alberta, 1960-1970." In *Standing on New Ground: Women in Alberta*, edited by Catherine A. Cavanaugh and Randi R. Warne, 119-144. Edmonton: University of Alberta Press, 1993.

- Chambers, Anne Lorene. *A Legal History of Adoption in Ontario, 1921-2015*. Toronto: University of Toronto Press, 2016.
- Chaney, Michael A. "Coloring Whiteness and Blackvoice in Minstrelsy: Representations of Race and Place in *Static Shock*, *King of the Hill*, and *South Park*." *Journal of Popular Film and Television* Vol. 31, No. 4. (2004), 176-184.
- Clapton, Mysty. "Murdoch v. Murdoch: The Organizing Narrative of Matrimonial Property Law Reform." *Canadian Journal of Women and the Law* Vol. 20, No. 2 (2008), 197-230.
- Clark, Peder. "Problems of Today and Tomorrow?: Prevention and the National Health Service in the 1970s." *Social History of Medicine* Vol. 33, No. 3 (August 2020), 981-1000.
- Clément, Dominique. "Sex Discrimination in Canadian Law: From Equal Citizenship to Human Rights Law." 241-269. In *Canada's Legal Past: Looking Forward, Looking Back*, edited by Mélanie Méthot, Ted McCoy, and Lydsay Campbell, 241-270. Calgary: University of Calgary Press, 2020.
- Comacchio, Cynthia. *Nations are built of Babies: Saving Ontario's Mothers and Children, 1900-1940*. Montreal & Kingston: McGill-Queen's University Press, 1998.
- Davis, Angela. *Women, Race, & Class*. New York: Random House, 1981.
- de Beauvoir, Simone. *The Second Sex*. English translation. New York: Knopf Doubleday Publishing, 1953.
- DeRogatis, Amy. "What Would Jesus Do?: Sexuality and Salvation in Protest Evangelical Sex Manuals, 1950s to Present." *Church History* Vol. 74 No. 1 (March 2005), 97-137.
- DiGenio, Natasha. "Censorship and Authority in Sex Education: Three Court Cases from 1970s America." *American Educational Journal* Vol. 43 No. 2 (2016), 225-240.
- Di Meglio, Giuseppina and Elisabeth Yorke. "Position Statement: Universal Access to No-Cost Contraception for Youth in Canada." *Pediatric Child Health* Vol. 24, No. 3, (2019), 160-169.
- Dodd, Dianne. "The Canadian Birth Control Movement on Trial, 1936-1937." *Histoire Sociale/Social History* 16/32 (November 1983): 411-428.
- Dowbiggin, Ian. *The Sterilization Movement and Global Fertility in the Twentieth Century*. New York: Oxford University Press, 2008.
- Dyck, Erika. *Facing Eugenics: Reproduction, Sterilization, and the Politics of Choice*. Toronto: University of Toronto Press, 2013.
- Dyck, Erika. "Sterilization and Birth Control in the Shadow of Eugenics: Married, Middle-Class Women in Alberta, 1930-1960s." *CBHM* Vol. 31 No.1 (2014), 165-187.
- Dyck, Erika and Maureen Lux. "Population Control in the "Global North"?: Canada's Response to Indigenous Reproductive Rights and Neo-Eugenics." *The Canadian Historical Review* Vol. 97 No. 4 (December 2016), 481-512.
- Dyck, Erika and Maureen Lux. *Challenging Choices: Canada's Population Control in the 1970s*. Montreal & Kingston: McGill-Queen's University Press, 2020.
- Dyck, Erika and Karissa Patton. "Activists in the "Bible Belt": Conservatism, Religion, and Recognizing Reproductive Rights in 1970s Southern Alberta." In *Compelled to Act: Histories of Women's Activism in Western Canada*, edited by Sarah Carter and Nancy Langford, 197-217. Winnipeg: University of Manitoba Press, 2020.
- Dyhouse, Carol. *Girl Trouble: Panic and Progress in the History of Young Women*. London & New York: Zed Books, 2013.
- Edmunds, Penelope. "Unpacking Settler Colonialism's urban Strategies: Indigenous People's in Victoria, British Columbia, and the Transition to a Settler-Colonial City." *Urban History Review* Vol. 38, No. 2 (2010), 4-20.
- Ehrenreich, Barbara and Deirdre English. *Witches, Midwives, Nurses*. Old Westbury: Feminist Press, 1973.

- Ehrlich, J. Shoshanna. "From Birth Control to Sex Control: Unruly Young Women and the Origins of the National Abstinence-Only Mandate." *CBMH* Vol. 30 No. 1 (2013), 77-99.
- Eichler, Margrit. "Grasping the Ungraspable: Socio-legal definitions of the Family in the context of Sexuality." *Transactions of the Royal Society of Canada* 3 (1992):3-15.
- Erwin, Lorna. "Neoconservatism and the Pro-family Movement." *Canadian Review of Sociology and Anthropology* Vol. 30 No. 3 (1993), 401-420.
- Evans, Simon. "Hutterite Agriculture in Alberta: The contribution of an Ethnic Isolate," *Agricultural History* Vol. 93, No. 4 (Fall 2019), 656-681.
- Evans, Simon and Peter Peller. "Mapping an Ethnic Isolate: The Diffusion of Hutterite Colonies across the Prairies and Northern Great Plains." *Great Plains Quarterly* Vol. 38, No. 4 (2018), 357-385.
- Feldberg, Georgina. "On the Cutting Edge: Science and Obstetrical Practice in a Women's Hospital, 1945-1960." In *Women, Health, and Nation*, edited by Georgina Feldberg, Molly Ladd-Taylor, Alison Li, and Kathryn McPherson, 123-143. Montreal & Kingston: McGill-Queen's University Press, 2003.
- Fessler, Ann. *The Girls Who Went Away: The Hidden History of Women Who Surrendered Children for Adoption in the Decades Before Roe v. Wade*. New York: Penguin Press, 2006.
- Finkel, Alvin, Sarah Carter, and Peter Fortna. Editors. *The West and Beyond: New Perspectives on an Imagined Region*. Edmonton: Athabasca University Press, 2010.
- Finley, Chris. "Violence, genocide, and captivity: Exploring cultural representations of Sacajawea as a universal mother of conquest." *American Indian Culture and Research Journal* Vol. 35, No. 4 (2011): 191-208.
- Firestone, Shulamith. *The Dialectic of Sex: The Case for a Feminist Revolution*. New York: William Morrow & Co, 1970.
- Foran, Max. Editor. *Icon, Brand, Myth: The Calgary Stampede*. Edmonton: Athabasca University Press, 2008.
- Freeman, Victoria. "'Toronto has no History!' Indigeneity, Settler Colonialism, and Historical Memory in Canada's Largest City." *Urban History Review* Vol. 38, No. 2 (2010), 21-35.
- Freidan, Betty. *The Feminine Mystique*. New York: Norton Paperback, 1963.
- Fujiwara, Aya. "Informal Internment: Japanese Canadian Farmers in Southern Alberta, 1941-1945." 167-179. In *Civilian Internment in Canada: Histories and Legacies: An Edited Collection*, edited by Rhonda Hinther and James Mochoruk, 167-179. Winnipeg: University of Manitoba Press, 2020.
- Fujiwara, Aya. "Japanese-Canadian Internally Displaced Persons: Labour Relations and Ethno-Religious Identity in Southern Alberta, 1942-1953." *Labour/Le Travail* Vol. 69 (Spring 2012), 63-89.
- George, Corinne. "'If I Didn't do Something, My Spirit Would Die...': Grassroots Activism of Aboriginal Women in Calgary and Edmonton, 1951-1985." Master of Arts Thesis, University of Calgary, 2008.
- Gilmore, Stephanie and Sara Evans. Editors. *Feminist Coalitions: Historical Perspectives on Second-Wave Feminism in the United States*. Urbana: University of Illinois Press, 2008.
- Gluck, Sherna Berger, and Daphne Patai. *Women's Words: The Feminist Practice of Oral History*. London: Routledge, 1991.
- Green, Monica H. "Gendering the History of Women's Healthcare." *Gender & History* 20/3 (November 2008): 487-518.
- Greer, Germaine. *The Female Eunuch*. London: MacGibbon & Kee Ltd., 1970.
- Greaves, Lorraine. Editor. *Personal and Political: Stories from the Women's Health Movement, 1960-2010*. Toronto: Second Story Press, 2018.

- Gurr, Barbara. *Reproductive Justice: Politics of Healthcare for Native American Women*. New Brunswick: Rutgers University Press, 2014.
- Hajo, Cathy Moran. *Birth Control on Main Street: Organizing Clinics in the United States, 1916-1939*. Urbana: University of Illinois, 2010.
- Harder, Lois. *State of Struggle: Feminism and Politics in Alberta*. Edmonton: University of Alberta Press, 2003.
- Haugeberg, Karissa. *Women Against Abortion: Inside the Largest Moral Reform Movement of the Twentieth Century*. Chicago: University of Illinois Press, 2017.
- Healey, Jenna. "Rejecting Reproduction: The National Organization for Non-Parents and Childfree Activism in 1970s America." *Journal of Women's History* Vol. 28 No. 1 (Spring 2006), 131-156.
- Henry, Matthew A. "You're an American Now: Race, Ethnicity, and Nationality on *The Simpsons*." 45-78. In *The Simpsons, Satire, and American Culture*. New York: Palgrave & MacMillan, 2012.
- Holland, Jennifer. *Tiny You: A Western History of the Anti-Abortion Movement*. Berkeley: University of California Press, 2019.
- Hooper, Thomas. "More Than Two Is a Crowd': Mononormativity and Gross Indecency in the *Criminal Code*, 1981-82." *Journal of Canadian Studies* Vol. 48, No. 1 (2014): 53-81.
- Hulme, Jennifer, Sheila Dunn, Edith Guilbert, Justih Soon, and Wendy Norman. "Barriers and Facilitators to Family Planning Access in Canada." *Health Policy/Politiques de Santé*, Vol. 10, No. 3, (February 2015), 48-63.
- Iacovetta, Franca. "Gossip, Contest, and Power in the Making of Suburban Bad Girls: Toronto, 1945-60." *The Canadian Historical Review*, Vol. 80, No.4 (December 1999), 585-623.
- Jackson, Margaret. "'Facts of Life' or the eroticization of women's oppression? Sexology and the social construction of heterosexuality." *The Cultural Construction of Sexuality*, edited by Pat Caplan, 52-81. London: Routledge, 1987.
- Jackson, Margaret. "Sexology and the Universalization of Male Sexuality (From Ellis to Kinsey, Masters and Johnson)." In *The Sexuality Papers: Male Sexuality and the Social Control of Women*, edited by Lal Conveney, Margaret Jackson, Shiela Jeffreys, Leslie Kay, and Pat Mahony. London: Routledge, originally published 1984, reprinted in 2019.
- Jakobson, Pernille. "Murdoch v. Murdoch: Feminism, Property, and the Prairie Farm in the 1970s." In *Place and Replace: Essays on Western Canada*, edited by Adele Perry, Elyllt Jones, and Leah Morton, 40-58. Winnipeg: University of Manitoba Press, 2014.
- Janesick, Valerie J. *Oral History for the Qualitative Researcher: Choreographing the Story*. New York & London: Guilford Press, 2010.
- Janovicek, Nancy. *No Place To Go: Local Histories of the Battered Women's Shelter Movement*. Vancouver: University of British Columbia Press, 2007.
- Janovicek, Nancy. "Protecting Access to Abortion Services in Rural Canada: A Case Study of the West Kootenays, British Columbia." *Women's History Magazine* Vol. 73 (Autumn, 2013), 19-28.
- Jeffreys, Sheila. *The Lesbian Revolution: Lesbian Feminism in the UK, 1970-1990*. London: Routledge, 2018.
- Jordan, Tessa. *Feminist Acts: Branching Out Magazine and the Making of Canadian Feminism*. Edmonton: University of Alberta Press, 2019.
- Kaplan, Laura. *The Story of Jane: The Legendary Underground Feminist Abortion Service*. Chicago: University of Chicago Press, 1995.
- Kelly, Deirdre. "Pregnant with Meaning: Teen Mothers and the Politics of inclusive Schooling." In *Children, Teachers, and Schools in the History of British Columbia*, edited by Jean Barman and Mona Gleason, 390-407. Edmonton: Brush Education, 2003.

- Kelm, Mary Ellen. *A Wilder West: Rodeo in Western Canada*. Vancouver: University of British Columbia Press, 2011.
- Kelm, Mary-Ellen. *Colonizing Bodies: Aboriginal Health and Healing in British Columbia 1900-1950*. Vancouver: University of British Columbia Press, 1998.
- Klausen, Susanne. *Abortion Under Apartheid: Nationalism, Sexuality, and Women's Reproductive Rights in South Africa*. London: Oxford University Press, 2015.
- Klein, Candice. "‘Sisterhood is powerful but not easy’: Conflict, American Imperialism, and Splintering the 1971 Vancouver Indochinese Women’s Conference," (MA Thesis, Simon Fraser University, 2015).
- Kline, Wendy. *Bodies of Knowledge: Sexuality, Reproduction, and Women's Health in the Second Wave*. Chicago: University of Chicago Press, 2010.
- Kline, Wendy. "The Making of *Our Bodies, Ourselves*: Rethinking Women’s Health and Second-Wave Feminism." In *Feminist Coalitions: Historical Perspectives on Second Wave Feminism in the United States*, edited by Stephanie Gilmore and Sara Evans, 63-83. Urbana: University of Illinois Press, 2008.
- Korinek, Valerie J. *Prairie Fairies: A History of Queer Communities and People in Western Canada, 1930-1985*. Toronto: University of Toronto, 2018.
- Leavitt, Sarah Abigail. "‘A Private Little Revolution’: The Home Pregnancy Test in American Culture." *Bulletin of the History of Medicine* Vol. 80 No. 2 (Summer 2006), 317-345.
- Li, Lan Angel. "The Edge of Expertise: Representing barefoot doctors in Cultural Revolution China." *Endeavour* Vol. 39 No. 3-4 (2015), 160-167.
- Loewen, Royden. *A Village Among Nations: ‘Canadian’ Mennonites in a Transnational World, 1916-2006*. Toronto: University of Toronto Press, 2013.
- Loewen, Royden and Gerald Friesen. *Immigrants in Prairie Cities: Ethnic Diversity in Twentieth Century Canada*. Toronto: University of Toronto Press, 2009.
- Lord, Alexandra M. *Condom Nation: The U.S. Government's Sex Education Campaign from World War I to the Internet*. Baltimore: Johns Hopkins University Press, 2010.
- Lord, Alexandra M. "‘Naturally Clean and Wholesome’: Women, Sex Education, and the United States Public Health Service, 1918-1925." *Social History of Medicine* Vol. 17 No. 3 (2004), 423-441.
- Lowy, Ilana. *Preventative Strikes: Women, Precancer, and Prophylactic Surgery*. Baltimore: Johns Hopkins University Press, 2010.
- Luker, Kristin. *When Sex Goes to School: Warring Views on Sex – and Sex Education – Since the Sixties*. New York: W. W. Norton & Company, 2006.
- Lux, Maureen. *Medicine the Walks: Disease, Medicine, and Canadian plains People, 1880-1940*. Toronto: University of Toronto Press, 2001.
- Lux, Maureen. *Separate Beds: A History of Indian Hospitals in Canada, 1920s-1980s*. Toronto: University of Toronto Press, 2016.
- MacQuarrie, Colleen, Shannon Stettner, Claire Peirson, Fiona Bloomer. *Crossing Troubled Waters: Abortion in Ireland, Northern Ireland, and Prince Edward Island*. Charlottetown: Island Studies Press at the University of Prince Edward Island, 2018.
- Magee Labelle, Kathryn. "‘For Home and Country’: Education, Activism, and Agency in Alberta Native Homemakers’ Clubs, 1942-1970." *Native studies Review*. Vol. 18, No. 2 (2009), 27-49.
- Mahood, Linda. *Thumbing a Ride: Hitchhikers, Hostels, and Counterculture in Canada*. Vancouver: University of British Columbia Press, 2018.
- Malacrida, Claudia. *A Special Hell: Institutional Life in Alberta's Eugenic Years*. Toronto: University of Toronto Press, 2015.

- Marks, Lynne, Margaret Little, Megan Gaucher, and T. R. Noddings. "A Job that Should be Respected": contested visions of motherhood and English Canada's second wave women's movements, 1970-1990." *Women's History Review* vol. 25 no. 5 (2016), 771-790.
- Marshall, Alison. *Cultivating Connections: The Making of Chinese Prairie Canada*. Vancouver: university of British Columbia Press, 2014.
- Marshall, Alison. *The Way of the Bachelor: Early Chinese Settlement in Manitoba*. Vancouver: University of British Columbia Press, 2011.
- May, Elaine Tyler. *America and the Pill: A History of Promise, Peril, and Liberation*. New York: Basic Books, 2010.
- McCallum, Mary Jane Logan. *Indigenous Women, Work and History, 1940-1980*. Winnipeg: University of Manitoba Press, 2014.
- McKay, Alexander. "Trends in Canadian National and Provincial/Territorial Teen pregnancy Rates; 2001-2010." *The Canadian Journal of Human Sexuality* Vol. 21, No. 3-4, (2012), 161-175.
- McKeown, Thomas. *The Role of Medicine: Dream, Mirage, or Nemesis?* Princeton: Princeton University Press, 1979.
- McLaren, Angus. *A History of Contraception: From Antiquity to the Present Day*. Oxford: B. Blackwell, 1990.
- McLaren, Angus. "Birth Control and Abortion in Canada, 1870-1920." *Canadian Historical Review* Vol. 3 (1978).
- McLaren, Angus. *Our Own Master Race: Eugenics in Canada, 1885-1945*. Toronto: McClelland Stewart, 1990.
- McLaren, Angus. "Policing Pregnancies: Sexuality and the Family, 1900-1940." *The Transactions of the Royal Society of Canada* VI/III (1992).
- McLaren, Angus and Arlene Tigar McLaren. *The Bedroom and The State: The Changing Practices and Politics of Contraception and Abortion in Canada, 1880-1997*. Oxford: Oxford university Press, 1997.
- McTavish, Lianne. "Abortion in New Brunswick." *Acadiensis* Vol. 44 No. 2 (2015), 107-130.
- Mehlman, Natalia. "Sex Ed... and the Reds?: Reconsidering the Anaheim Battel over Sex Education, 1962-1969." *History of Education Quarterly* Vol. 47 No. 2 (May 2007), 203-232.
- Milford-Cottam, Daniel. *Fashion in the 1970s*. London: Bloomsbury Publishing, 2018).
- Miller, Alice M. "Sexual but not Reproductive: Exploring the Junction and Disjunction of Sexual and Reproductive Rights." *Health and Human Rights* Vol. 4 No. 2 (2000), 69-109.
- Moravec, Michelle. "Toward a History of Feminism, Art, and Social Movements in the United States." *Frontiers: A Journal of Women Studies* Vol. 33, No. 2 (2012): 22-54.
- Morgan, Robin. Editor. *Sisterhood is Powerful: Writings from the Women's Liberation Movement*. New York: Random house publishing, 1970.
- Morgen, Sandra. *Into Our Own Hands: The Women's Health Movement in the United States, 1969-1990*. New Brunswick: Rutgers University Press, 2002.
- Nelson, Jennifer. *More Than Medicine: A History of the Feminist Women's Health Movement*. New York: New York University Press, 2015.
- Nicholson, Linda. *The Second Wave: A Reader in Feminist Theory*. New York & London: Routledge, 1997.
- Nickel, Sarah A. *Assembling Unity: Indigenous Politics, Gender, and the Union of BC Indian Chiefs*. Vancouver, University of British Columbia Press, 2019.
- Nickle, Sarah and Amada Fehr. *In Good Relation: History, Gender, and Kinship in Indigenous Feminisms*. Winnipeg: University of Manitoba Press, 2020.
- Norman, Brain. "The Consciousness-Raising Document, Feminist Anthologies, and Black Women in 'Sisterhood Is Powerful.'" *Frontiers: A Journal of Women Studies* Vol.27, No. 3 (2006): 38-64.

- Ouellette, Grace J. M. W. *The Fourth World: An indigenous Perspective on Feminism, and Aboriginal Women's Activism*. Halifax: Fernwood publishing, 2002.
- Palmer, Beth. "Lonely, Tragic, but Legally Necessary Pilgrimages: Transnational Abortion Travel in the 1970s." *The Canadian Historical Review* Vol. 92 No.4 (2011), 637-664.
- Passoli, Lisa. "Child Care and Feminism in Canada." In *Gender, Feminism, and Global Cross-Cultural Connections: International and Interdisciplinary Perspectives*. edited by Glenda Tibe Bonifacio, 129-140. Bingley: Emerald Publishing, 2017.
- Patton, Karissa Robyn. "We were having conversations that weren't comfortable for anybody, but we were feisty." Re-Conceiving Student Activism Against Reproductive Oppression in Calgary and Lethbridge during the 1960s and 1970s," Master's Thesis, University of Lethbridge, 2015.
- Patton, Karissa R. and Emily B. Kaliel. "Building Community and Transforming Knowledge: Histories of Women's Health Practitioners and Community-Based Health Services in 20th-Century Alberta, Canada," *Canadian Bulletin of Medical History*, vol. 37, no. 2 (Fall 2020), 427-460.
- Perry, Adele, Esyllt Jones, and Leah Morton. *Place and Replace: Essays on Western Canada*. Winnipeg: University of Manitoba Press, 2014.
- Perry, Adele and Mary Jane Logan McCallum. *Structures of Indifference: An Indigenous Life and Death in a Canadian City*. Winnipeg: University of Manitoba Press, 2018.
- Petrie, Anne. *Gone to an Aunt's: Remembering Canada's Homes for Unwed Mothers*. Toronto: McClelland & Stewart, 2013.
- Rebick, Judy. *Ten Thousand Roses: The Making of a Feminist Revolution*. Toronto: Penguin Canada, 2005.
- Reumann, Miriam G. *American Sexual Character: Sex, Gender, and National Identity in the Kinsey Reports*. Berkley: University of California Press, 2005.
- Rich, Adrienne. "Compulsory Heterosexuality and Lesbian Existence." In *The Lesbian and Gay Studies Reader*, edited by Henry Abelove, Michele Aina Barale, and David M. Halperin, 227-254. New York: Routledge, 1993.
- Rifkin, Mark. *When Did Indians Become Straight?: Kinship, the History of Sexuality, and Native Sovereignty*. Oxford; Oxford University Press, 2011.
- Roberts, Dorothy. *Killing the Black Body: Race, Reproduction, and the Meaning of Liberty*. New York: Vintage Books, Random House Publishing, 2016.
- Roberts, Dorothy. *Shattered Bonds: The Color of Child Welfare*. New York: Basic Civitas Books, Perseus Books Group, 2002.
- Ross, Becki. *The House That Jill Built: A Lesbian Nation in Formation*. Toronto: University of Toronto, 1995.
- Ross, Loretta. "African-American Women and Abortion." In *Abortion Wars: A Half Century of Struggle, 1950-2000*. Berkley: University of California Press, 1998.
- Ross, Loretta, Lynn Roberts, Erika Derkas, Whitney Peoples, and Pamela Bridgewater Toure. Editors. *Radical Reproductive Justice: Foundations, Theory, Practice, and Critiques*. New York: Feminist Press, 2017.
- Ross, Loretta. "Understanding Reproductive Justice: Transforming the Pro-Choice Movement." *Off Our Backs* Vol. 36 No. 4 (2006), 14-19.
- Ross, Loretta, and Rickie Solinger. *Reproductive Justice: An Introduction*. Oakland: University of California Press, 2017.
- Roth, Betina. *Separate Roads to Feminism: Black, Chicana, and White Feminist Movements in America's Second Wave*. Cambridge: Cambridge University Press, 2004.
- Rousseau, Christina. "Wages Due Lesbians: Visibility and Feminist Organizing in 1970s Canada." *Gender, Work, & Organization* Vol. 22, No. 4 (May 2015), 18-32.

- Sangster, Joan. "Domesticating Girls: The Sexual Regulation of Aboriginal and Working-Class Girls in Twentieth Century Canada." 179-204. In *Contact Zones: Aboriginal & Settler Women in Canada's Colonial Past*, edited by Katie Pickles and Myra Rutherdale, 179-203. Vancouver: University of British Columbia Press, 2005.
- Scott, Joan Wallach. *Gender and the Politics of History Second Edition*. New York: Columbia University Press, 1999.
- Sethna, Christabelle. "The Evolution of the *Birth Control Handbook*: From Student Peer-Education Manual to Feminist Self-Empowerment Text, 1968-1975." *Canadian Bulletin of Medical History* Vol. 23 No.1 (2006), 89-118.
- Sethna, Christabelle. "The University of Toronto Health Services, Oral Contraception, and Student Demand for Birth Control, 1960-1970." *Historical Studies in Education* Vol 17, No. 2 (2005), 265-292.
- Sethna, Christabelle and Marion Doull. "Accidental Tourism: Canadian Women, Abortion tourism, and Travel." *Women Studies* Vol. 41, No. 4 (2012), 457-475.
- Sethna, Christabelle and Steve Hewitt. "Clandestine Operations: The Vancouver Women's Caucus, the Abortion Caravan, and the RCMP." *The Canadian Historical Review* Vol. 90 No. 3 (2009), 463-495.
- Sethna, Christabelle, Beth Palmer, Katrina Ackerman, and Nancy Janovicek. "Choice Interrupted: Travel and Inequality of Access to Abortion Services since the 1960s." *Labour/Le Travail*, 71 (Spring 2013), 29-48.
- Shaw, Jessica. "Full-Spectrum Reproductive Justice: The affinity of Abortion Rights and Birth Activism." *Networks of Social Justice: Transnational Activism and Social Change* Vol. 7, No. 1 (2013), 143-159.
- Shepard, R. Bruce. "Plain Racism: The Reaction Against Oklahoma Black Immigrants to the Canadian Plains." 483-506. In *Immigration and Settlement, 1870-1939*, edited by Gregory Marchildon, 483-506. Regina: University of Regina Press, 2009.
- Shrubbs, Rebecca. "'Canada has no history of Colonialism: Historical Amnesia: The Erasure of Indigenous People's for Canada's History,'" (MA thesis, University of Victoria, 2014).
- Simmons, Christina. "'I Had to Promise... Not to Ask 'Nasty' Questions Again': African American Women and Sex and Marriage Education in the 1940s." *Journal of Women's History* Vol. 27 No. 1 (Spring 2015), 110-135.
- Sinclair, Raven. (*Otiskewápiwskew*), Michael Anthony Hart (*Kaskitémahikan*), and Gord Bruyere (*Amawaajbitang*), Wícihitowin *Aboriginal Social Work in Canada*. Halifax & Winnipeg: Fernwood Publishing, 2009.
- Smith, Susan L. *Sick and Tired of Being Sick and Tired: Black Women's Health Activism in America, 1890-1950*. Philadelphia: University of Pennsylvania Press, 1995.
- Sochen, June. *Herstory: A Woman's View of American History*. New York: Alfred Publishing Company, 1974.
- Solinger, Rickie. *Abortion Wars: A Half Century of Struggle, 1950-2000*. Berkley: University of California Press, 1998.
- Solinger, Rickie. *Wake Up Little Susie: Single Pregnancy and Race Before Roe v. Wade*. New York: Routledge, 1992.
- Srigley, Katrina, Stacey Zembrzycki, and Franca Iacovetta. *Beyond Women's Words: Feminisms and the Practices of Oral History in the Twenty-First Century*. London: Routledge, 2018.
- Stanley, Heather. "'Unsex Me Here!' Gender as a Barrier to Female Practice: A Historical Introduction to Women Doctors in Canada." In *Female Doctors in Canada: Experience and Culture*, edited by Earle Waugh, Shelley Ross, and Shirley Schipper, 46-58. Toronto: University of Toronto Press, 2019.

- Strähle, Jochen. Editor. *Fashion & Music*. Singapore: Springer, 2018.
- Steele, Valerie. "Anti-Fashion: The 1970s." *Fashion Theory* Vol. 1 No.3 (1997), 279-295.
- Stevenson, Allyson. "Intimate Integration: A Study of Transracial Adoption in Saskatchewan, 1944-1984." Ph.D. Diss., University of Saskatchewan, 2015.
- Stettner, Shannon. "'He is Still Unwanted': Women's Assertions of Authority over Abortion in Letters to the Royal Commission on the Status of Women in Canada." *CBMH* Vol. 29 No. 1 (2012), 151-171.
- Stettner, Shannon. "'We Are Forced to Declare War': Linkages between the 1970 Abortion Caravan and Women's Anti-Vietnam War Activism." *Social History/Historie Sociale* Vol. 46 No. 92 (November 2013), 423-441.
- Stettner, Shannon. Editor. *Without Apology: Writings On Abortion in Canada*. Edmonton: Athabasca University Press, 2016.
- Stettner, Shannon, Kristin Burnett, and Travis Hay. Editors. *Abortion: History, Politics, and Reproductive Justice after Morgentaler*. Vancouver, University of British Columbia Press, 2017.
- Stettner, Shannon and Tracy Penny Light. "The Politics of Reproductive Health History: Visible, Audible and Consequential." *CBHM* Vol. 31 No. 2 (2014), 9-24.
- Strong-Boag, Veronica. *Fostering Nation?: Canada Confronts its History of Childhood Disadvantage*. Waterloo: Wilfred Laurier Press, 2011.
- Stote, Karen. "The Coercive Sterilization of Aboriginal Women in Canada." *American Indian Culture and Research Journal* Vol. 36 No. 3 (2012), 117-150.
- Swyripa, Frances. *Storied Landscapes: Ethno-Religious Identity and the Canadian Prairie*. Winnipeg: University of Manitoba Press, 2010.
- Takach, Geo. *Will the Real Alberta Please Stand Up?* Edmonton: University of Alberta Press, 2010.
- Theobald, Brianna. "Nurse, Mother, Midwife—Susie Walking Bear Yellowtail and the struggle for Crow Women's Reproductive Autonomy." *The Magazine of Western History*, Autumn 2016.
- Theobald, Brianna. *Reproduction on the Reservation: Pregnancy, Childbirth, and Colonialism in the Long Twentieth Century*. Chapel Hill: University of North Carolina Press, 2019.
- Thistle, Jesse. "Kiskiswin – remembering: Challenging Indigenous Erasure in Canada's Public History Displays." *ActiveHistory.ca*, July 3, 2017. Last accessed, November 10, 2020, <https://activehistory.ca/2017/07/kiskiswin-remembering-challenging-indigenous-erasure-in-canadas-public-history-displays/>.
- Tobin, Amy. 'I'll Show You Mine, If You Show Me Yours: Collaboration, Consciousness-Raising and Feminist-Influenced Art in the 1970s.' *Tate Papers*, No.25, (Spring 2016).
- Tolani, Alisha Tara and Sophia Yen. "Many Websites Fail to Dispel Myths About IUDs, Emergency Contraception, Birth Control, and Proper Timing of Pap Smears." *Journal of Adolescent Health* Vol. 44, No. 2, (February 2009), S24-S25.
- Tomes, Nancy. "The Patient as A Policy Factor: A Historical Case Study of The Consumer/Survivor Movement in Mental Health." *Health Affairs* Vol. 25 No. 3 (2006), 720-729.
- Tomiak, Julie, Tyler McCreary, David Hugill, Robert Henry, Heather Dorries. *Settler City Limits: Indigenous Resurgence and Colonial Violence in the Urban Prairie West*. Winnipeg: University of Manitoba Press, 2019.
- Tone, Andrea. *Devices and Desires: A History of Contraceptives in America*. New York: Hill & Wang, 2001.
- Torpy, Sally J. "Native American Women and Coerced Sterilization: On the Trail of Tears in the 1970s." *American Indian Culture and Research Journal* Vol. 24 No. 2 (2000), 1-22.
- Valk, Anne. "Fight for Abortion as a 'Health Right' in Washington, D.C." In *Feminist Coalitions: Historical Perspectives on Second Wave Feminism in the United States*, edited by Stephanie Gilmore and Sara Evans, 135-162. Urbana: University of Illinois Press, 2008.

- Van Herk, Aritha. *Mavericks: An Incurable History of Alberta*. Toronto: Penguin Canada, 2001.
- Warner, Thomas E. *Never Going Back: A History of Queer Activism in Canada*. Toronto: University of Toronto, 2002.
- Watkins, Elizabeth Siegle. *On the Pill: A Social History of Oral Contraceptives, 1950-1970*. Baltimore: Johns Hopkins University Press, 1998.
- Weiss, Eve and Kristen Moore. "An assessment of the Quality of Information Available on the Internet About the IUD and the Potential Impact on Contraceptive Choices." *Contraception*, Vol. 68, No. 5 (November 2005), 359-364.
- Williams, Carol, Katelyn Mitchell, and Carly Giles. *Political Challenges and Digital Frontiers: Reproductive Health and Services in Southern Alberta*. Edmonton: Parkland Institute, 2019.
- Williams, Daniel K. "Parental Rights: Conservative Evangelicals' Approach to Protecting Children in the 1970s." *Fides et Historia* Vol. 45 No. 2 (Summer/Fall 2013), 69-72.
- Yang, Le, and Hongman Wang. "Medical Education: What About the Barefoot Doctors?" *The Lancet* Vol. 390 No.10104 (October 2017), 777-780.