George Emery concludes his critique of our 1984-85 *BC Studies* article by conceding that it is “flawed but important.” Curiously, he does not say why it is important. Readers who rely on his commentary and do not refer to the original essay can only have a vague idea of what we attempted. To recapitulate briefly, we were concerned that few people today realize that countless women faced death in previous decades when abortion was illegal. In seeking to give some rough idea of the numbers involved, we demonstrated the ways in which maternal mortality rates had hidden in them references to abortion-related deaths. But in using such material we pointed out that methodological problems were inevitable; there were good reasons why doctors, coroners, and relatives might want to cover up a bungled abortion. An attempt such as ours to determine more accurately the extent of abortion, we stated, would always be a “hazardous” undertaking. We had little faith in any of the statistics produced on the subject and concluded that because of concealment and under-reporting the full extent of abortion deaths would never be known. But what was clear to us, and was the main point of our essay, was that in years past British Columbians needlessly died “because women were forced to act illegally” (p. 14).

George Emery has produced a painstakingly thorough analysis of the collection of vital statistics in British Columbia. What he has not done is provide evidence that undermines in any serious way the conclusions we drew. What we find disturbing in his approach is that he appears more interested in statistics than in the human tragedies that they represent. A glance at his notes makes it clear that he is not concerned by the history of abortion, but by the history of numbers.

But even Emery’s numbers are not quite as firm as he wants them to appear. He compares our figures with what he calls “actual totals.” Only when one turns to his appendix is it made clear that Emery’s “actual totals” are in fact based on his own estimates. To counter the argument of a high rate of criminal abortion in British Columbia in the 1930s he advances figures drawn from England and Wales in the 1960s. What he does not
tell the reader is that Goodhart's estimation that England and Wales had 15,000 abortions a year is ludicrously low. Emery carefully avoids citing W. H. James' argument that the figure was closer to 60,000 and the 1937 Interdepartmental Committee on Abortion report that during the Depression the number was between 110,000 and 150,000.¹

For those who have investigated the history of abortion, a reading of Emery's article induces a distinct sense of déjà vu. Opponents of the liberalization of the abortion laws in the 1930s always argued that inducement of miscarriage was very rare and extremely dangerous. Emery ends his critique with the same argument and concludes that we are wrong to suggest that abortion was a traditional method of birth control. This is not the opinion of experts working in the history of fertility control. Recent studies have noted the prevalence of abortion in all countries that reduced their fertility in the twentieth century. In Germany the number of abortions per annum was estimated to have climbed from 300,000 prior to World War I to over half a million in the 1920s, with an accompanying 5,000 to 8,000 abortion-related deaths. Even the Nazis, who were ferociously opposed to abortion, had to concede that something like 400,000 illegal operations were carried out each year.² In France similar figures were advanced.³ In England Dr. Janet Campbell shocked the public with reports that not only were abortion deaths numerous but also they were driving up the maternal mortality rate from 3.91 per thousand births in 1921 to 4.41 per thousand in 1934. Abortion-related deaths were conservatively estimated to have increased from 10.5 per cent to 20 per cent of all maternal deaths between 1930 and 1934.⁴ Marie Stopes, the English birth control advocate, informed the Times in 1931 that in a three-month period she received 20,000 requests for abortions.⁵ In New Zealand abor-

tion deaths accounted for 22 per cent to 24 per cent of all maternal deaths between 1930 and 1933. In the United States Frederick J. Taussig reported that something like a fifth of all pregnancies ended in abortion. The New York Academy of Medicine determined that 17.8 per cent of all maternal mortality cases were due to induction of miscarriage. Kinsey's subsequent investigations revealed that at least one out of every five married American women admitted to having had an abortion.

 Turning to Canada, we find that in a 1922 random investigation of 281 women at the Toronto General Hospital it was discovered that 527 of 1,207 pregnancies had been terminated by abortion. In 1933, Dr. W. D. Cornwall wrote:

I think most general practitioners can testify to the increasing frequency with which they are approached to terminate undesired pregnancies. Pregnancy is looked upon as an economic and social disaster. I note that England has recorded the lowest birth rate in 1932 for many decades. If it were possible to compile statistics it would be shown that abortion among the intelligent has increased tremendously.

A Special Committee of the Division of Maternal and Child Hygiene estimated that during the Depression between one in five and one in seven of all Canadian pregnancies were being terminated. In Manitoba between 1928 and 1932, 17.1 per cent of maternal deaths were attributed to abortion; in Ontario the rate was put at 14 per cent. In Canada as elsewhere the fact that the maternal death rates of unmarried women were twice that of the married was taken as yet another indicator of the impact of abortion deaths.


7 Frederick J. Taussig, Abortion: Spontaneous and Induced: Medical and Social Aspects (St. Louis: Mosby, 1936), 368.


If our 1984-85 article was “important” it was because it pointed out that in Canada as elsewhere the criminalization of abortion resulted in numerous deaths. We would hope that this finding not be lost in a cloud of obfuscation. The nineteenth-century supporters of the quantitative approach “expected statistics to preserve social harmony by providing a basis for ameliorative policies, and by disproving ‘misinformation’ which, they believed, was the principal source of class tension.” One catches a whiff of this dutiful Victorian desire to downplay the unpleasant in Emery’s critique. Enormous significance is attributed to the changing categories employed by vital statistics while the importance of abortion in general is slighted. One can’t see the forest for the trees.