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Abortion rights: history offers a blueprint for how pro-choice campaigners might usefully respond

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In October 1971, the *New York Times* reported a decline in maternal death rate.¹ Just 15 months earlier, the state had liberalised its abortion law. David Harris, New York's deputy commissioner of health, speaking to the annual meeting of the American Public Health Association, attributed the decline—by more than half—to the replacement of criminal abortions with safe, legal ones. Previously, abortion had been the single leading cause of maternity related deaths, accounting for around a third. A doctor in the audience who said he was from a state “where the abortion law is still archaic,” thanked New York for its “remarkable job” and expressed his gratitude that there was a place he could send his patients and know they would receive “safe, excellent care.” Harris urged other states to follow the example set by New York and liberalise their abortion laws.

Just two years later, in 1973, the US Supreme Court intervened. In the landmark decision, *Roe v. Wade*, the Court ruled that the constitution protected a woman's liberty to choose to have an abortion, and in doing so, struck down the “archaic” abortion laws that still existed in many states.

As surely everyone knows by now, *Roe v. Wade* was repealed on 24 June 2022, setting off a wave of fear, uncertainty, rage, and apprehension among those committed to the right to choose. Thirteen states with “trigger bans,” designed to take effect automatically if the ruling was ever struck down, are due to prohibit abortion within 30 days.² At least eight states banned the procedure the day the ruling was released. Several others are expected to act, with lawmakers moving to reactivate their dormant legislation. But as the 1971 *New York Times* article indicates, banning abortion only bans *safe* abortion.

In November 1955, Jacqueline Smith found out she was about six weeks pregnant. Historian Gillian Frank describes what happened next.³ Unmarried and anxious about the social consequences for mothers and babies born out of wedlock, Jacqueline and her boyfriend Daniel started looking for methods to end the pregnancy. On the 24 December 1955, Daniel paid a hospital attendant, \$50 to perform an illegal abortion in the living room of the boyfriend's Manhattan apartment. Just a few hours later, Jacqueline was dead. Before abortion was legalised in Great Britain in 1967, the situation on this side of the Atlantic was similar.

As the *New York Times* article suggests, these names were just some of thousands of women who lost their lives to backstreet abortions or forced birth, and of many more who had their lives irreparably altered by being made to carry babies to term that they were not able to care for or that they simply did not want. But if history foreshadows a terrifying history for

women in America, it also offers a blueprint for how pro-choice campaigners might usefully respond.

Roe v. Wade was a landmark legal decision, but it came only after decades of grassroots feminist activism. In early 1960s California, radical activist Pat Maginnis taught women how to fake the symptoms that would get them a “therapeutic abortion” (then the only legal kind).⁴ She founded a group called the Society for Humane Abortion that demanded the repeal of abortion laws and ran an underground network focused on helping women obtain safe abortions, compiling lists of abortion providers outside the US, and providing women with tips on how to evade suspicion at the Mexican border. While some doctors and others were advocating reformed abortion laws in the first half of the twentieth century, it was feminists like Maginnis who were the first to publicly insist that abortion should be completely decriminalised. In 1969, the radical feminist group Redstockings organised an “abortion speakout” in New York City, where women talked about their experiences with illegal terminations. This history shows that women have always been at the forefront of pro-choice activism, and sadly will have to be once again.

But abortion rights also need to be protected closer to home. While abortion is legal in Northern Ireland, millions of women, girls, and people remain without access and must travel to England to receive appropriate reproductive care. Similarly, due to the legacy of nineteenth-century legislation, abortion remains a criminal offence in England—and doctors must lend their substantial social and political capital to the campaign to overturn the 1861 Offences Against the Person Act.⁵

The world is radically different to how it was in the 1960s. But two things remain constant. Reproductive rights are fundamental to women's health, safety, and autonomy. And if access to abortion is to be reinstated or expanded in both the United Kingdom and the United States, then healthcare professionals need to be led by, and work in collaboration with, feminist activists.

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1 The New York Times. Decline in Maternal Death Rate Linked to Liberalized Abortion. <https://www.nytimes.com/1971/10/13/archives/decline-in-maternal-death-rate-linked-to-liberalized-abortion.html?searchResultPosition=1>

2 NPR. 'Trigger laws' have been taking effect now that *Roe v. Wade* has been overturned. <https://www.npr.org/2022/06/24/1107531644/trigger-laws-have-been-taking-effect-now-that-roe-v-wade-has-been-overturned>

3 Slate. The Death of Jacqueline Smith. <https://slate.com/human-interest/2015/12/jacqueline-smiths-1955-death-and-the-lessons-we-havent-yet-learned-from-it.html>

- 4 NPR. Inside Pat Maginnis' radical (and underground) tactics on abortion rights in the '60s. <https://www.npr.org/2021/10/29/1047068724/pat-was-an-early-radical-abortion-rights-activist-her-positions-are-now-common>
- 5 Freeman H. The Guardian. Abortion should be a medical matter, not a criminal one. The law needs to change. <https://www.theguardian.com/commentisfree/2019/dec/01/uk-abortion-criminal-of-fence-24-week-time-limit>