

*Fighting to Choose: The Abortion Rights Struggle in New Zealand.* By Alison McCulloch. Victoria University Press, Wellington, 2013. 339pp. NZ price: \$50.00. ISBN: 9780864738868.

This is a partisan and passionate account of abortion politics in New Zealand, but it is also a scholarly, extensively footnoted, well-researched and fascinating history of pro-choice struggles, anti-abortion politics and the ongoing anomalies in this country's abortion laws and regulatory processes. Acknowledgements start with McCulloch's account of her need to present herself as 'mentally unstable' in order to secure her access to an abortion in her twenties and her anger at having to run the gauntlet of anti-abortion protesters as she entered Wellington's Parkview Clinic for the procedure. Her research on the project was initiated in 2007 with a grant from the Women's National Abortion Action Campaign (WONAAC). The book is illustrated by a range of photos assembled from the archives of the Alexander Turnbull Library and various activist organizations.

McCulloch's pro-choice position is articulated in the opening pages of the introduction. The first question that the book addresses is why the women's movement in New Zealand failed to achieve control by women over their fertility – in particular, the right to abortion. Conservative thinking and the power of the Catholic Church, combined with what McCulloch identifies as the problematic reformist strategies of the Abortion Law Reform Association (ALRANZ), are identified as the reasons for New Zealand's relatively restrictive abortion legislation, which nevertheless provides the framework within which 15,000 abortions are approved each year.

Anyone interested in the complexities of feminist politics and the tensions between liberal/reformist strategies, radical and socialist feminisms in the 1970s and later will find this social history a rich source of information. Given its explicit commitment to advocacy of the arguments of WONAAC, it is best read alongside Margaret Sparrow's *Abortion Then and Now: New Zealand Abortion Stories from 1940 to 1980*, published in 2010, also by Victoria University Press, and supported by ALRANZ.

Both McCulloch's and Sparrow's books begin with personal stories about their own unplanned pregnancies and their decisions to end them. Rosemary McLeod's recent critical review in the *Listener* reveals that her mother nearly died after an illegal abortion. Control of one's fertility is an intensely personal and political issue for women and this reviewer is no exception. Few readers will be able to engage with this historical material without having to confront their own life choices, the circumstances in which they made those choices and the factors that shaped them.

McCulloch provides a detailed discussion of the events leading up to the Royal Commission of Inquiry into Contraception, Sterilisation and Abortion 1975–1977, the commission that foreshadowed the passing of the Contraception, Sterilisation and Abortion Act in 1977. This includes attention to the political influence of key figures in the Catholic Church, attempts by the Society for the Protection of the Unborn Child (SPUC) to both connect with parishioners and distance itself from Catholicism, and the links between trade union leadership, the Labour Party, the Catholic Church and anti-abortion activism. The potential power of a threatened well-organized anti-Labour pro-SPUC Catholic vote in 1975, which seems inconceivable in the twenty-

first century, is explored in some depth. Divisions within women's organizations that included a diversity of positions on abortion, such as the National Council of Women and the Labour Party Women's Council, are also canvassed.

A core chapter is devoted to the establishment in 1974 of the Auckland Medical Aid Centre (AMAC) – a not-for-profit trust that provided women who met the legal criteria with counselling and terminations. The clinic operated a specialist and streamlined abortion service and doctors in Auckland rapidly started to refer women to the facility. A key response to the operation of the clinic was Labour MP Gerald Wall's Hospital Amendment Bill in August 1974, directed at confining abortions to public hospitals and closing down the clinic. Action on this Bill was delayed due to Prime Minister Norman Kirk's death, but meanwhile the New Zealand Police used a search warrant (later declared to be illegal) to remove over 500 medical records from the clinic. These were later returned, but the action had a major effect on the operation of the clinic.

The police raid on AMAC was followed by the arrest of Dr Jim Woolnough, one of the clinic's doctors, for unlawfully procuring a miscarriage. Some pro-choice organizations lobbied for the withdrawal of charges against him. Others who favoured access to terminations considered that the trial could be a test case that would improve access to abortion in New Zealand. At the first trial, the jury could not reach a verdict. At the second trial, Dr Herbert Green, of National Women's Hospital, testified that there were no mental health grounds to justify abortion – the grounds most frequently used then, and now, for terminating a pregnancy. Clearly the jury did not agree with his position, since they found Woolnough not guilty on all counts. However, the Crown appealed the verdict and it was not until July 1996 that the appeal was dismissed. By that time, the Hospital Amendment Act 1975 had passed, confining abortion to public and licensed private hospitals. AMAC bought new premises and turned itself into a private hospital. However, its existence was to be challenged again by the findings of the Royal Commission 1975–1977 and the passing of the Contraception, Sterilisation and Abortion Act in 1977.

The Royal Commission was set up by a Labour government keen to defuse debates about abortion on the eve of an election. The outcome was a fundamentally conservative document. It recommended that 'approved' persons should be able to give contraceptive advice to under-16-year-olds, but came out strongly against premarital sex and free contraception. The commission accorded to the fetus 'a status from implantation', and for that reason argued that pregnant women's rights to end a pregnancy could never be 'absolute', but were always balanced against the rights of the 'unborn child'. This meant that women could not have the right to choose (the WONAAC position). It also meant that decisions about abortion could not be left to a woman and her doctor (the ALRANZ position).

The Royal Commission argued that the core grounds for abortion were fetal abnormality, incest, mental handicap on the part of the mother, or threats to the physical and mental health of the mother. Rape and socio-economic factors were rejected as grounds for termination. The Commission recommended that an Abortion Supervisory Committee be appointed to manage decision-making by certified panels.

While the fetus was to be protected, abortion could be legal, but only in selected circumstances and subject to the approval of particular people. The recommendations of the Royal Commission were translated into law by the end of the year. Five months after it was introduced to Parliament on 19 August 1977, and after many late-night amendments, the Contraception, Sterilisation and Abortion (CSA) Act was passed. Fetal abnormality was initially removed as grounds for abortion, but was included in later amendments to the act. Abortions were to be approved by two certifying consultants, selected by a government-appointed Abortion Supervisory Committee.

AMAC had to close its doors soon after the legislation was passed. The number of women going to Australia for legal abortions soared and the number of legal abortions in New Zealand dropped by more than 50%. The Abortion Supervisory Committee declined AMAC a license to perform abortions in 1978, and it did not reopen until late 1979. By that time, amendments to the Act had diminished some of the restrictions on the interpretation of dangers to the physical or mental health of the mother. McCulloch argues that the Royal Commission and the Contraception, Sterilisation and Abortion Act were triumphs for SPUC as a well-organized, well-funded and determined organization. Reformist and radical pro-choice groups, like ALRANZ and WONAAC, did not have equivalent coherence and financial resources, nor were they as effectively connected with key political figures.

McCulloch explores the implications of these developments in the 1970s in the second part of her book. This section provides fascinating insights into WONAAC's distribution of its 'Right to Know' safe sex education pamphlets to 11 and 12-year-olds in the early 1980s, counter to the law relating to approved distributors of sex education in the CSA Act. It also offers a lively account of some WONAAC members' involvement in the 'Double Standard' poster campaign, which highlighted the inconsistencies between some politicians' support for 'upholding moral standards' and their extramarital relationships. WONAAC is no longer active as an organization – it produced its last newsletter in 1992 – and only a small group of long-term activists remain. ALRANZ survives, but has fewer active members than in the heady years of the 1970s.

McCulloch documents interventions by anti-abortion activists outside abortion clinics and arson attacks on these clinics in the 1980s, as well as attempts by WONAAC in the 1980s to put pressure on female MPs to address changes to abortion law. The book concludes with the history of unsuccessful attempts by MPs Laila Harre and Steve Chadwick to reform abortion laws. Chadwick comments that it is only when the Law Commission takes up the issue of New Zealand's inadequate legislation that there is likely to be a change in the law. It appears that in the twenty-first century it is lawyers rather than political actors (whether MPs, reformist or radical political activists) who are most likely to prompt changes in abortion law. While McCulloch is convinced that it is women who should decide, the book does not inspire confidence that this is likely, even in the medium term.

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