

ARTICLE

The Business of Abortion: Referral Services, Cross-Border Consumption, and Canadian Women’s Access to Abortion in New York State, 1970–1972

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This article explores the growth of abortion-related businesses in New York State that emerged to encourage Canadian women to travel across the border to access care. Referral agencies and clinics advertised their services, publicized their fees, and competed with each other. Canadian women living near the border were used to crossing to access goods and services not available in their home market. Their practice of traveling to New York for abortions was shaped by their experiences as consumers. The media used the language of commerce to explain this phenomenon, describing those involved in referral agencies as entrepreneurs and businessmen, highlighting the profits being made and evaluating the services being offered.

Keywords: advertising; business and culture; women; consumption

Introduction

The 2022 U.S. Supreme Court ruling in *Dobbs v. Jackson Women’s Health Organization* rescinded women’s constitutional right to an abortion and is the latest phase in a decades-long struggle over women’s reproductive care in the United States. Canadian observers braced for the impact of the ruling, predicting that a lack of access to abortion in the United States would cause women to come north. Given the geographic proximity of the two nations, the practice of crossing borders has informed the historical understanding of abortion access.¹ A number of scholars have explored the phenomenon of “abortion travel,” notably Christabelle Sethna, who examines the experiences of women moving between the United States and

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1. Reagan, *When Abortion Was a Crime*; Reagan, “Abortion Travels;” Ackerman and Stettner, “The Public;” Johnstone and Macfarlane, “Public Policy;” Schoen, “Reconceiving Abortion;” Sethna, “All Aboard?”

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Canada to terminate pregnancies. Sethna and other scholars have explored how restrictive policies forced women in North America, Europe, and Australia to move across borders to access care.²

In both the United States and Canada, scholars of abortion have traced the role of activists in the fight for abortion rights, the state and federal legal battles in the years before *Roe v. Wade*, the dangers and deaths endured by women seeking both legal and illegal termination of pregnancies, and the networks that emerged to help women seeking abortions. Relatively less attention has been spent exploring how abortion became a site of entrepreneurial growth in the 1960s and 1970s because not only activists hoping to advance women's health but business and medical professionals also saw the potential for profit and got involved in the business of abortion. Thinking about providing abortions as a business can offer new insights into questions of access and the struggle for legalization in both Canada and the United States. The border between the two nations served not only as a separation between countries but also reflected the different legal jurisdictions regarding their treatment of abortion. Throughout the twentieth century, North Americans were well aware of the availability of abortion and differences in legal standing in other provinces, states, or countries.³

In the late 1960s and early 1970s, wide variations between states and provinces, between urban and rural areas, and between facilities meant that women seeking abortions had very different experiences depending on their location. Ancillary businesses related to the delivery of abortion emerged quickly in the summer of 1970 after legalization in New York. Referral services, along with private clinics, relied on advertising to reach those who sought abortions.⁴ Although pro-choice volunteers staffed some of these services, others were for-profit businesses. Referral agencies and abortion clinics advertised their services to potential clients, publicized their fees, and competed with each other.

This article will examine the growth of abortion-related businesses in New York State, including referral agencies, clinics, and transportation services that hoped to capitalize on the Canadian market for abortions. In mainstream media coverage, student newspapers, advertisements for referrals, and interviews from abortion providers, the language of commerce was mobilized to explain the phenomenon of Canadian women traveling to the United States for abortions. Entrepreneurs who opened abortion referral agencies spoke of charging what the market would bear; newspaper reporters covering the story of women going to New York compared prices and services offered in “package deals.” Meanwhile, critics used words like “kickbacks” to describe the lucrative trade, which capitalized on women who could not legally terminate pregnancies in Canada and paid to do so in another country. This study sheds light on the evolution of abortion rights in both nations but also fits firmly into larger explorations of the border as a place of movement and commercial activity, where individuals routinely sought out goods and services not available to them at home.⁵

2. Sethna and Davis, *Abortion across Borders*; Sethna et al., “Choice, Interrupted”; Sethna and Doull, “Accidental Tourists.”

3. Sethna, Palmer, et al., “Choice, Interrupted”; Sethna, “All Aboard?”

4. See Parkin, *Buying and Selling*.

5. Elvins. “Lady Smugglers”; Karibo, *Sin City North*; Conway and Pasch, *Beyond the Border*; Karibo and Diaz, *Border Policing*.

The characterization of these women as operating within a consumer framework did not mean that visits across the border to access reproductive care were somehow frivolous pursuits or that these trips were holidays. Sethna notes that the term “abortion tourism” seems to have “an anti-abortion connotation” that implies a flippant attitude toward abortion or that these trips were somehow pleasurable diversions rather than essential. She also makes clear that it was usually only women of means who could afford such costs in the 1960s and 1970s.⁶ Leslie Reagan argues further that these journeys were taken in haste, before pregnancies progressed further, and were often done furtively to avoid scrutiny from officials in both women’s home jurisdictions and the areas to which they traveled.⁷ Even though this type of travel was technically legal, it often caused great stress for women. As the counselor at Women’s Services in New York noted, “Most patients at our clinic are from out of town. For these women, coming to New York City for an abortion often involves secrecy and deception. It is an illegal abortion to them.”⁸

Alicia Gutierrez-Romine describes how, in the early twentieth century, Mexico became a desired destination for middle-class American tourists seeking illicit diversions. The border was characterized as an “arbitrary restriction” that impeded the flow of goods and people between the two nations. The nonwhite, “exotic” spaces of Tijuana and Ensenada emerged in the postwar period as sites of easily obtained illegal abortions for American visitors.⁹ In her work on race and abortion in the U.S.–Mexico borderlands, Lina-Maria Murillo emphasizes the racist discourses that framed trips to Mexico as inherently dangerous and unclean. Murillo argues that stereotypes about Mexico and Mexicans were mobilized by defenders of legal abortion within the United States and notes that abortion became a lucrative business in the Mexico–U.S. borderlands.¹⁰ In contrast, the narratives about abortion and the border between Canada and the United States presume a level of whiteness on the part of both women seeking abortions and those providing reproductive care.

Although some media accounts and abortion activists warned of the dangers facing women forced to go to back-alley practitioners, it is the language of the marketplace that stands out. Articles describing referral services for abortions in Canadian and American newspapers published the prices paid for plane tickets and medical services. Interviews with entrepreneurs setting up clinics framed them as businessmen hoping to exploit the legal differences between two jurisdictions. Student newspapers highlighted the prohibitive costs that made options like flying to London something available only to the rich. Price comparisons, profit margins, competition, volume, and scale were the kinds of terms that surfaced in local and national media, particularly in the wake of legalization in New York State. Far less common were any considerations of differences in medical care or the abilities of doctors in Canada versus the United States.

Closer scrutiny of the business of abortion on the Canada–U.S. border reveals how women’s access to information about abortion was shaped by business owners. Entrepreneurs saw a market for abortion access that was not available within Canada and charged money to

6. Reagan, “Abortion Travels”; Sethna and Doull, “Accidental Tourists.”

7. Reagan, “Abortion Travels,” 337.

8. Moore, “Staff Proposal.”

9. Gutierrez-Romine, *From Back Alley*, 163.

10. Murillo, “Espanta Cigüeñas,” 814.

facilitate it. Most of these business owners did not have medical backgrounds but saw the potential profit in organizing travel and making connections to clinics and women seeking care. The voluminous scholarship on the business history of medicine has explored the story of pharmaceutical companies, hospital administration, health insurance, and private practitioners. In her work exploring modern medicine and advertising, historian Nancy Tomes traces the ways in which individuals “started to adapt skills learned in making choices among other goods (food, clothing, appliances) and apply them to medical care.” Although doctors and drugs “constituted unique kinds of commodity,” the lessons of the marketplace irrevocably shaped interactions between doctors and patients in the twentieth century.¹¹ Similarly, women in North America made choices about abortion that reflected their experiences as consumers: If something they needed was not available at home, they traveled to get it and were willing to pay referral agencies to expedite this process. Providers of abortion access also used strategies in advertising and marketing that they had honed running other businesses, not necessarily even in medical fields.

From London to New York

In 1969, Canadian Prime Minister Pierre Elliot Trudeau reformed the Criminal Code to decriminalize abortion, yet women required a referral from a doctor and faced scrutiny of a panel at her local hospital to determine whether the mother’s life or health was threatened by the pregnancy. It would not be until 1988 that the Supreme Court of Canada would rule that the Criminal Code provision on abortion was a violation of a woman’s right to “life, liberty and security of the person.” During the 1970s, abortion access in Canada remained highly controlled. The number of approvals varied widely depending on the hospital and whether the woman had a connection, like a sympathetic family doctor, to plead her case. In some communities, Catholic hospitals would not perform the procedure at all and the remaining hospitals had quotas of a few abortions a month, so a woman who managed to get approval from a hospital committee might still find that she was not able to schedule an abortion quickly and the delays would effectively deny her the abortion. Moreover, legal prohibitions against advertising abortifacients remained part of the Criminal Code of Canada throughout this period.

In comparison, British and American abortion laws were far less stringent. However, the financial cost limited Canadian women’s access in other countries. In addition to paying for the procedure, procuring the necessary travel also required considerable financial resources. An article in the University of Toronto *Varsity* argued that “abortion is now a fact of life ... if you’re rich,” while cash-strapped students and the working poor had fewer options available to them.¹² The same paper in the fall of 1970 published a mock Monopoly game for college students that featured a Community Chest card reading, “You find yourself pregnant.” A player drawing this card had three options: “If upper class, fly to England for an abortion.

11. Tomes, *Remaking the American Patient*, 5.

12. Harriet Kideckel, “Abortion Is Now a Fact of Life ... If You’re Rich,” *Varsity* (University of Toronto) 2 October 1970, 2.

Pay \$500. If middle class go to Buffalo and pay \$300. If lower class have the baby. Pay \$500 medical fees, sell your property and drop out.”¹³ It is notable that price is framed as the major point of comparison for these experiences—no mention of other risks is made, only the cost involved for a student facing an unwanted pregnancy.

London figured heavily in the historical imagination of the Canadian experience, given Canada’s status as part of the British Commonwealth. After England’s adoption of legal abortion in 1968, American entrepreneurs imagined ways to make money from Canadian and American women seeking abortions, facilitating their travel abroad. Businesspeople with backgrounds in travel, real estate, and marketing saw the demand for reproductive care and stepped in to provide services for an often-considerable fee. The Canadian women’s magazine *Chatelaine* ran a column in the June 1970 issue that effectively advertised the “Jet-Service Abortion” that “Mrs. Kelly Stroup of Washington, D.C.” created. Initially operating out of her living room until her neighbors objected, Stroup incorporated British Services, Ltd. to arrange “jet passages to England for women who seek legal abortions.” Stroup made all arrangements with London clinics and gynecologists, arranged for a passport, inoculations, and a preliminary doctor’s examination in Washington.¹⁴ British Services, Ltd. offered a package that included “inoculation, photos, passport, air fare, limousine service to and from airports, medical examinations, private clinic accommodations and the cost of the operation.” It even provided financing, with one half of the fee paid as a down payment and the other half payable in installments over the next 24 months; Stroup promised that, if they paid half, “working girls” could pay back the “rest on time payments.”¹⁵ The mention of jets and limousines implied a certain level of luxury, and the type of care offered in London was assumed to be on par with, if not superior to, that offered in North America. Another company, the British Referral Service and Travel Agency, Inc., operated out of New York City. It was backed by lawyer Roy Lucas and John A. Settle and Ellen L. Glascock, both editorial assistants at a Manhattan publishing company. The agency charged an exorbitant \$1,175 for their services.¹⁶ Joseph Stothert, director and treasurer of the London Agency, Inc. in Springfield Massachusetts, stated, “We are acting only as a kind of travel agency which expedites trips and makes the passenger as comfortable as possible.”¹⁷ In contrast to the specter of “Tijuana butchery” invoked in accounts of abortions across the Mexico border, the common language, whiteness, and cosmopolitan status of London rendered it an abortion destination where comfort, not safety, was framed as the main concern for well-heeled potential clients.¹⁸

13. Monopoly game, *Varsity*, 25 September 1970, 2, 7–10, 15. In the academic year 1970–1971 when the critique appeared the numbers of women traveling to England dropped precipitously, with legalization in New York much closer and as safe. The *Lane Report* noted that when the law was implemented, “the numbers from the U.S.A., and also from Canada, fell sharply” (139). That 1970 \$500 fee in Canadian dollars would be the equivalent of roughly \$3,900 in 2023 (all dollar conversions done using MeasuringWorth.com).

14. “Jet-Service Abortion,” *Chatelaine*, June 1970, 4; “Abortion Service in U.S. Runs Into Problem,” *Gazette*, 19 March 1970, 40; Linda Greenhouse, “New Abortion Agency Here Arranges Travel, Housing, and Care in Clinics in London,” *New York Times*, 20 January 1972, 4.

15. Suzanne Zwarun, “Around the Town,” *Calgary Herald*, 17 April 1970, 39.

16. \$1,200 in 1970 was roughly \$9,486 in 2023 dollars.

17. “Ads for London,” *New York Times*, 26 January 1970, 20.

18. Murillo, “Espanta Cigüeñas,” 795.

Even with the possibility of loans or payment plans, the high price involved in arranging a trip to London was an insurmountable hurdle for most. The statistical evidence reveals that only about 900 Canadians made their way to England between 1968 and 1972.¹⁹ After the 1970 New York State abortion law passed without any residency requirements for women seeking the procedure, most Canadian women seeking abortions traveled to the United States, not Europe. Although western and midwestern Canadians found their way to cities like Seattle and Detroit, for the vast majority living closer to the east coast, New York proved to be the favored destination.²⁰ On the first day of legalization, a reported 250 Canadian women were on a waitlist seeking an abortion. A few months later, one Canadian newspaper reported, “Dozens of women who can’t get past hospital abortion committees in Ontario and Quebec are hiking to New York State, where abortion is available upon request.”²¹ Hospitals in western New York State were inundated with inquiries from Canadian women. Rochester, New York, reported an abortion boom where “‘mommas-to-be flock[ed] to town’ to take advantage of a lack of residency requirements for patients in area hospitals” in June of 1970, anticipating the new legalization. One Rochester obstetrician said that he and his associates received an average of seven calls a day from doctors in other states and from Canada.²² Unable to deal with the overwhelming demand, he referred some of them as far away as Baltimore. Although New York municipal hospitals advertised abortions for as little as \$100, the lowest estimate in Rochester was \$250–\$300—and for someone more than three months pregnant, the cost was \$750.²³

For Canadian women seeking abortions from 1970 to 1972, travel to New York State became a widely known and utilized option. This period was a pivotal one in the history of legal abortion in the two nations. Access to birth control was not guaranteed to Canadian women in the late 1960 and early 1970s. Sethna demonstrates that, even on university campuses, prescribing the pill to single women was considered controversial, and only married women were able to get prescriptions regularly. The Criminal Code of Canada also prohibited the sale, advertisement, and dissemination of contraception.²⁴ Canadian women of means traveled not only to London but as far as Japan or Sweden to reach jurisdictions where abortion was legal and available. Before 1969, abortion was not legal in Canada, but no one faced prosecution for acts that occurred outside of the country.²⁵

Without ready access to birth control, sexually active university students were a prime market for abortion referral agencies. The classified section of student newspapers across Canada proved to be one of the major sources for advertisements of abortion services. Many specifically referred to the cost: Ads contained phrases like “Abortion can be less costly than

19. The breakdown of Canadians who had an abortion in England (Table N1): 27 April–31 December 1968 (105), 1969 (376), 1970 (297), 1971 (67), 1972 (52), for a recorded total of 897 (Lane Report, 139).

20. Zwarun, “Around the Town,” 39; Pelrine, *Abortion in Canada*, 118.

21. Gerald McNeil, “Inequities Abound,” *Albertan*, 22 October 1970, 6; “New York Counts 500 Abortions,” *Sault Star*, 2 July 1970, 1.

22. Kathy O’Toole, “Abortion Boom,” *Democrat & Chronicle*, 28 June 1970, 1-2A.

23. One hundred dollars in 1970 had the purchasing power of nearly \$800 in 2023; a \$750 fee was thus equivalent of close to \$6,000.

24. Sethna, “University of Toronto,” 276.

25. *Ibid.*, 284.

you may think ...”; “safe, legal & inexpensive”; or “low cost, safe legal.” Abortion referral advertisements began to appear in the fall of 1970 in Canadian student papers from coast to coast and featured 212, 215, 201, and 508 telephone area codes, reflecting locations in New York City, upstate New York, northern New Jersey, and Philadelphia. Ads assured readers that New York State residency was not required and listed costs for travel and medical procedures.²⁶ Headlined with the bold, capitalized word **ABORTION**, the small blocks of text offered the essentials: phone numbers, hours available, services and information, and cost. Paid ads in student newspapers at St. Mary’s University and Dalhousie University (both in Halifax, Nova Scotia), in the personal column of local newspapers in Winnipeg, and quiet referrals to clinics in California, Michigan, New York, and Washington State, all served to bring thousands of Canadians across the border.²⁷

The mainstream Canadian media frequently covered the phenomenon of abortion travel, delivering detailed information to their readers. One month after legalization took effect, a Calgary newspaper reported “Canadians Pouring over the Border to New York with One Thing in Mind: Legal Abortions.”²⁸ A Montreal couple, Suzanne and Jacques, described their experience; Suzanne said after discovering her pregnancy that she “didn’t know what to do. One day, however, she picked up a French language paper and spotted an advertisement saying: ‘Pregnancy information—we seek to help you.’”²⁹ After making a phone call, getting a pregnancy test, flying to New York City, and taking a taxi to Wickersham Hospital, Suzanne had an abortion. The couple recalled the fifteen people in the waiting room: “There were couples there from Arkansas, Newfoundland, another couple from Montreal, a couple from Michigan, and couples from around the New York area.” “New York Abortion Flight Now Boarding,” proclaimed the headline in the *Vancouver Sun*.³⁰ A few months later, the *Montreal Gazette* ran a similar feature, headlined: “Young Montreal Couple Gets \$450 Abortion in New York.”³¹ The featured couples appeared young, respectable, and presumably white. In the stories in both the *Vancouver Sun* and *Montreal Gazette*, the couples were in committed relationships and made the trip to New York together.

In the first six months of legalization, from July to December 1970, 1,649 Canadian women traveled to New York State to get abortions—44 percent of them from Quebec.³² The predominantly Roman Catholic province, the second most populous after Ontario, only allowed 541 of the 11,000 therapeutic abortions legally performed in Canada in 1970. The *Vancouver Sun* marveled at the nearly 3,000 abortions performed in British Columbia and over 1,000

26. Abortion referral ads: *Varsity*, 26 March 1971, 14; *Pro Tem*, 29 September 1971, 2; *Journal* (St. Mary’s), 16 February 1972, 5; *Dalhousie Gazette*, 5 March 1971, 2.

27. Esther Tennenhouse, “100 Referred for Abortion,” *Winnipeg Free Press* 14 December 1970, 3; Abortion ads: *Journal*, (St. Mary’s) 16 February 1972, 5; *The Cord Weekly*, 15 September 1971, 18; *The Chevron*, (University of Waterloo), 24 September 1971, 11; *Pro Tem*, 29 September 1971, 2; *Dalhousie Gazette*, 3 March 1972, 2.

28. Paul Kidd, “Canadians Pouring over the Border to New York,” *Calgary Herald* 13 July 1970, 14.

29. Iain Barrie, “New York Abortion Flight Now Boarding,” *Vancouver Sun*, 12 May 1971, 44; McNeil, “Inequities Abound.”

30. Barrie, “New York Abortion Flight.”

31. Sheila Thomas, “Young Montreal Couple Gets \$450 Abortion in New York,” *Gazette*, 19 November 1971, 11.

32. “Abortion Is ‘Right,’” *Daily Colonist*, December 7, 1971, 15.

done in Alberta, given their relatively smaller populations, and concluded by critiquing Quebec for its stingy application of the law. The difficulty in attaining a legal therapeutic abortion in Canada persisted, with efforts to achieve reforms predicted to be years away. Feminists tried in vain to push for easier access to legal abortions in Canada. In the spring of 1970, hundreds traveled across Canada from Vancouver to Ottawa in an “abortion caravan” to confront Prime Minister Pierre Elliott Trudeau and the other ministers. When the women challenged the prime minister with the fact that if someone he knew needed an abortion, she would get one because wealthy women always had access, he replied, “So?” The *Montreal Star's* headline “‘Caravan’ from Canada” anticipated that hundreds of women, dissatisfied with Canada’s efforts, would “take the law into their own hands and slip across the U.S. border for an abortion in a New York hospital or clinic.”³³ By the end of 1971, the *Windsor Star* reported that women were “swarming to places like New York where abortion is legal and there is no residency requirement.” In 1972, at least 6,000 women went to New York State to have abortions performed.³⁴ What initially required a lengthy approval process was soon achieved in a day across the border. Bus travel, markedly less expensive, also helped to bring down travel costs and, the entrepreneurs hoped, increased volume.³⁵

Desperate to find an easier, more time-sensitive path than navigating bureaucratic hoops and traveling within Canada for a therapeutic abortion, Canadian women found American businesses eagerly anticipating their arrival. The economic and business practices of abortion referral services reveal savvy entrepreneurs who saw tremendous unmet demand and strategized for ways to connect that need with services. Referral agencies used traditional methods to reach women, including targeting communications to college students (especially women’s groups and newspapers) and placing ads in mainstream papers, on the radio, and in other public forums.³⁶

Profits, Prices, and Publicity

These businesses were not without controversy. The Association for the Repeal of Canadian Abortion Laws (ARCAL) felt that the service provided by referral agencies was valuable, but the fees exacerbated women’s vulnerable position. Lore Perron, the Ottawa-based president of ARCAL, worried that these agencies prioritized profits at the expense of desperate women. She argued “Abortions are expensive enough without having their price jacked up by an extra \$10–20.” The Toronto Transit Commission (TTC) debated whether to allow abortion referral ads on subway stations, eventually allowing them in 1974.³⁷ The state public health

33. Wells, *The Abortion Caravan*; “‘Caravan’ from Canada?,” *Montreal Star*, 29 June 1970, 15.

34. *Canadian News Facts*, 1973, 1113.

35. Wadhera, “Trends in Legal,” 89–94; Sandra Precop, “Women’s Role,” *Windsor Star* 30 December 1971, 12; Peter Calamai, “MD Group Sees,” *North Bay Nugget* 14 June 1971, 4.

36. “New York Counts,” *The Sault Star*; Ze’ev, “New York Abortions,” *McGill Daily Caller* 3 March 1971, 1; Abortion advertising: *Ottawa Journal*, 22 August 1970, 44; *McGill Daily Caller*, 16 February 1971, 4; *Dalhousie Gazette*, 5 March 1971, 2.

37. “Abortion Ads Approved,” *Gazette*, 5 September 1974, 2.

director of Michigan criticized the practices of abortion clinics and referral agencies in Detroit and Windsor, Ontario, specifically referring to their advertising practices: “This goes way back to the Hippocratic Oath, which says you don’t [practice medicine] only for money. If we condone [advertising] here it opens the door for advertising of other medical procedures, like appendectomies \$199 and up.”³⁸ The official clearly saw a conflict between the traditional oath of ethics for physicians and the sense that medical services could be marketed like other types of goods.

Harriet Kideckel, active with the Women’s Liberal Abortion Collective (first known as the Toronto Women’s Liberation Birth Control Information Center) recalled that her group balked at an early solicitation from an upstate abortion clinic. The feminist students rejected the promise “of doing an occasional free abortion” in exchange for referrals; opposed to “kickbacks” and the “corporate approach,” the women preferred to send abortion seekers to Dr. Henry Morgentaler, an early abortion activist in Montreal. Ultimately, Kideckel notes, “Most women went to NY or to Morgentaler—he was busy, so they weren’t always timely ... He was much more affordable.”³⁹ Feminist groups took on broader goals of societal support for abortion, birth control, and child care. Volunteer organizations and women’s groups prioritized securing women’s rights and services in Canada and keeping costs low to women who needed these services.⁴⁰ Yet charging money allowed referral services the ability to advertise abortion information to millions of people who would otherwise not have been easily able to find providers. Moreover, profit motivated doctors who would not otherwise have offered this much-needed service. These businesses played a key role in raising awareness of abortion services and the fees that could be charged encouraged practitioners, who were desperately sought out by women in need.

Some feminist groups recognized that costs and the practical details of travel were primary concerns for women seeking abortions. The Vancouver Women’s Caucus, which was involved in a larger campaign to remove abortion from the Canadian Criminal Code, published a pamphlet about abortion and women’s liberation, and outlined the current law in Canada in comparison to other nations around the world. They provided details for women including how to avoid dangerous methods of pregnancy termination. One pamphlet advised women to “ask your friendly doctor for the name of a *good* abortionist ... Watch out for hack abortionists using soap or catheter methods.” In a section listing community resources, it advised contacting a local women’s clinic, their local (non-Catholic) hospital, Unitarian churches, and women’s liberation groups. In addition, it promised, “Travel agencies in most cities have package deals for Britain or Japan, including arranging your abortion. If you can afford it fly now & pay later.” Although the pamphlet itself was printed using volunteer labor from the Women’s Caucus, they clearly outlined the for-profit businesses that might also help women who were seeking care.⁴¹

38. Dolores Katz, “Abortion Referral Agencies Are a Lucrative Business,” *Detroit Free Press*, 9 September 1974, 3–4A.

39. Harriet Kideckel interview with Katherine Parkin, 18 February 2021.

40. Donny Taymen, “Idealism Down the Drain,” *Varsity*, 2 December 1970, 13; “Abortions,” *Dalhousie Gazette*, 12 February 1971, 2; “Abortions,” *Gazette*, 21 October 1972, 40.

41. Vancouver Women’s Caucus, *Abortion* (pamphlet), 21–22.

The mainstream press also served as a source of information about referral agencies and the availability of abortion in New York. It is striking just how well publicized these agencies were and how broadly understood it was that Canadian women sought abortions, were not able to get them within Canada, and so turned to the United States. Although individual women might have felt the need to hide their trips and conceal their identities, the practice of women traveling to seek reproductive care was widely discussed in newspapers and other mass media. *Chatelaine*, the nation's most popular women's periodical with a combined circulation of more than 1,225,000 in French and English editions in 1970, routinely ran editorials outlining the lack of access to abortion within different regions of Canada. It compared the liberal laws in New York state, Scandinavia, Britain, and Japan with the "cumbersome and humiliating experience" that women seeking legal abortion within Canada faced.⁴² One *Chatelaine* advice column addressed the challenges for Canadian women in accessing abortion, noting, "You can quite likely run into all kinds of nonsense if you try to get a legal abortion in Canada ... New York State is much more humane to women and they will accept Canadians unquestioningly."⁴³ The column provided the number for the Abortion Rights Association of New York, reported that the usual fee for an abortion was \$150 to \$200, and noted that the clinic had experienced counselors who were sympathetic and nonjudgmental. Women could thus rely on popular periodicals for information about safe access to abortions and could avoid more illicit and backstreet practitioners.

Numerous Canadian city newspapers ran articles that described the process of making an appointment, the fees involved, and the experiences of women who traveled across the border to use these services. Sometimes, these were abortion stories picked up from U.S. wire services but also included a multitude of Canadian voices and experiences. The *Ottawa Citizen* ran a series in 1971 about the experiences of an unmarried 30-year-old Montreal woman named Margaret and her boyfriend Malcolm, who traveled to New York and went to a referral agency. The reporter concealed the identities of the couple by not publishing their full names but provided intimate details about their relationship and decision to terminate a pregnancy. Within a week of the discovery of her pregnancy, Margaret and Malcolm made the trip to New York. She remarked that she met another couple from Montreal in the waiting room who were there for the same reason. Margaret paid \$175 and traveled to the East Side Medical Group's clinic. She underwent a physical exam and then was brought into an office for a vacuum aspiration, which took five minutes and was relatively painless. A receptionist took her to the clinic's waiting room two blocks away. She reported that plane fare for her and her boyfriend cost \$120, and taxis and general expenses in the city were another \$10. After her procedure, they went to lunch and walked around the city, determined to see as much as they could of Manhattan before they had to leave. They took a flight back to Montreal at nine that night. Margaret noted, "The expense wasn't crippling, and since nothing else went wrong I can't say any of it was an ordeal. But I constantly realize how lucky I was" to be able to access a simple and safe procedure.⁴⁴

42. Doris Anderson, "Change the Abortion Law Now," *Chatelaine*, September 1970, 1.

43. Bonnie Kreps, "Hotline on Women," *Chatelaine*, April 1972, 2.

44. Sheila McCook, "Abortion by Vacuum Aspiration," *Ottawa Citizen*, 27 August 1971, 27.

Upstate New York and the Canadian Market

Referral agencies used traditional marketing strategies to reach potential clients for abortion services. Betty Farhood, along with her husband Edward ran a legal referral service in Canada, sending women to New York. They appear to have officially started in March 1971, and the company name on the letterhead, Centres Betty Farhood Center, reflected its dual appeal to French- and English-speaking women in eastern Canada. They had three offices in different parts of Montreal, Quebec City, and one in Ottawa. Their typewritten flyers assured women in both French and English that they could secure an abortion in New York from a Canadian company, traveling down and back in one day. French-speaking Quebec women complained vociferously that they were dramatically underserved, with only 10 of the 869 abortions performed in Quebec between January and June 1971 done in French hospitals. One woman, agitating for change, decried, “we are forced to get abortions in English, or much more often, to suffer in French.” In Quebec alone, there were an estimated 10,000–25,000 illegal abortions each year.⁴⁵

The entrepreneurial Farhoods strived to capture the money that Quebec women were pouring into American companies and planned to open their own clinic in New York State but faced opposition. Quebec’s traditional Catholicism and the discouragement of birth control within the French community helped create a situation where many women seeking an abortion looked outside the province for care. According to a New York doctor in 1971, “Eighty percent of our patients who come to get abortions in Champlain Valley Medical Center in Plattsburgh are Quebec girls.” Edward explained, of their envisioned clinic near Plattsburgh to serve Canadian women, “The clinic itself would have operated with a referral service here in Montreal run by my wife, who is a social worker.” The Farhoods aligned themselves with a local doctor, David Gorman, a gynecologist and director of the Obstetrics Department of the Alice Hyde Hospital in Malone. He affirmed the assessment that Canadians from Quebec and Ontario comprised most of his patients, but also reported, “I receive them from all over, even from Europe, mainly from foreign countries and from states other than New York and immediate vicinity.”

Yet despite the clear demand by Quebec women for abortion, the negative reaction of the political and medical leadership within New York left the Farhoods with no way forward. The head of the local hospital’s department of obstetrics and gynecology made a series of arguments, including a slippery slope of only intending to do abortions before the twelfth week, opposition to “a profit motive intervening in this very private matter,” and disbelief that a for-profit clinic could provide “the kind of sympathy and counseling” required. The planned clinic was never built.⁴⁶

Upstate clinics, like the one proposed by the Farhoods, not only struggled to get approvals in local communities, but they also struggled to find doctors. For a doctor like Gorman,

45. Betty Farhood Center File; “Referral Service,” *Daily Colonist*, 30 October 1971, 22; “Abortions,” *McGill Daily Caller*, 12 November 1971; Marsha Fine, “More French Abortions Demanded,” *McGill Daily Caller*, 22 November 1971, 1; “Abortion,” *Montreal Gazette*, 22 September 1971, 25 and 21 October 1972, 38.

46. “Malone and Plattsburgh cited: ‘Paradise for Quebec,’” *North Country Catholic*, 21 March 1971, 3; “Area Abortion Clinic,” *Press-Republican*, 18 January 1972, 3; Denise Raymo, “Dr. David Gorman Dies,” *Press-Republican*, 13 August 2007, pressrepublican.com; Katsi Cook interviewed by Joyce Follet, Sophia Smith Collection; “Right to Life,” *North Countryman*, 15 February 1973, 1.

abortion only comprised 13 percent of his work, with the rest of his time devoted to providing obstetric and gynecological care. Alienating patients as both an individual provider and an institution was risky financially, and the limited willingness to do abortions forced many clinics to fly doctors up from New York City to do contract work daily. The clinic administrator for Erie Medical Center in Buffalo, which did twenty-six abortions a day, six days a week claimed that “Finding doctors is one of the biggest problems of the clinic. Doctors generally have their own practices and precious little time.” As a satellite of the Pelham Medical Group in New York City, the center had the advantage of experience in the business of operating a clinic and a stable of doctors they could draw on to staff its clinics.⁴⁷

Upstate clinics did not struggle to find patients, however. Out-of-state patients made up 90 percent of the population they served initially, but in March 1972, the Buffalo Planned Parenthood started sending them referrals and the number from outside New York dropped to about half. Those patients traveling to Buffalo came from “the surrounding region of Michigan, Ohio, Pennsylvania, Indiana and Canada.”⁴⁸ Analyses of abortions performed in New York State and New York City consistently found that Canadians were some of the largest out-of-state consumers of abortions. One 1971 study assessing the first four months after abortion became legal in New York State calculated that the 307 abortions acquired by Canadians made up 13.7 percent of the total reported in the state. Although the neighboring states of Pennsylvania (11.6 percent), Massachusetts (9.6 percent), and Connecticut (9.4 percent) sent considerable numbers, Canada ranked first in sending women to clinics in located in New York State (excluding New York City). During the same period from July 1 to October 31, 1970, the numbers of abortions purchased by Canadians specifically in New York City also ranked in the top ten acquired there. Canadians comprised 5.5 percent of women seeking abortions, with the other most common states ranging from 2.7 to 19 percent. Ultimately, thousands of Canadians crossed the border into New York to acquire abortions, with many more perhaps giving a false name and U.S. address.⁴⁹

Crossing the border into Washington State, Oregon, and California also enabled western Canadian women to access abortions. For those in the middle of the country, the costs and travel times complicated their access. In Winnipeg, funding from the United Way and provincial government allowed the Mt. Carmel medical clinic to send women to New York for abortions. The student union at the University of Manitoba sponsored the information and counseling center, which had “arrangements with New York.”⁵⁰ In 1982, the *Abbotsford News* in British Columbia reported on the “clandestine trip south” of Canadians who continued to seek “abortion on demand” in the United States. Even a decade after the passage of *Roe v. Wade*, the circumstances for Canadian women remained largely the same. Abortion was illegal and difficult to obtain for most, and with “hundreds of dollars tucked in a purse or a pocket” to be paid in advance, an abortion was available in an office by a doctor in the United States with no questions.⁵¹

47. Howie Kurtz, “Erie Medical: Modern Abortion Clinic,” *The Spectrum*, 18 October 1972, 8.

48. *Ibid.*; Kurtz, “Continuing Dilemma,” *The Spectrum*, 18 October 1972, 8-9.

49. Ingraham, “Abortion in New York,” 16-21.

50. Reagan, “Abortion Travels,” 350; “Winnipeg Clinic,” *Daily Colonist*, 19 August 1971, 30.

51. Leslie McIntosh, “Abortion on Demand,” *Abbotsford News*, 24 February 1982, 23.

Consumption, Abortion, and the Border

In many ways, the practice of Canadian women traveling to New York for abortions was shaped by their experiences as consumers and their familiarity with cross-border shopping as a way to secure goods or services not available to them at home. Canadian women watched developments south of the border with interest. Those living near the border were used to crossing into another nation to get access to goods and services that were either unavailable in their home country or prohibitively expensive.⁵² Considering abortion services in the context of consumer capitalism is thus essential. Communities located near border crossing points had a long history of creating businesses that catered to Canadians and were disproportionate in size to the local market. Communities like Niagara Falls, New York; Fargo, North Dakota; and Plattsburgh, New York, were home to outlet malls, duty-free shops, motels, and restaurants that specifically served Canadian visitors. It was thus not an accident that abortion referral services in New York State and in other states near the border quickly seized the opportunity to advertise to Canadians. Alicia Gutierrez-Romine has described the emergence of “an illegal abortion industry just across the border” in Mexico in the 1950s and 1960s.⁵³ The businesses that emerged in upstate New York were a legal industry, and Canadian women flocked to them.

Residents of the small town of Windsor, Ontario, for example, were used to taking the short drive to Detroit, Michigan, for work or recreation. Their proximity to the border allowed them to access a range of goods and services not available at home.⁵⁴ It is therefore not surprising to learn that abortion referral agencies in Detroit were well known to Windsor women. The *Windsor Star* reported that Canadian women seeking abortions could arrange a doctor's appointment with an agency just across the river in Detroit and be in a hospital in New York within four days. John Alden Settle of the Family Planning Information Agency said, “We're getting 10 to 15 referrals a day from Canadians ... most of them are from cities like yours, just across the border, particularly along the New York border, where some Canadian doctors know of our service.”⁵⁵ After the passage of *Roe v. Wade*, the manager of Windsor's CJOM radio station reported that an abortion referral agency in Detroit began buying five or six 15-second radio spots per day to advertise their services, repeating the message “Legal abortions now available in Detroit—just call 884-7777.”⁵⁶ The manager of the agency reported that the number of women coming from Canada was not that large, “But now that we are beginning to publicize, we expect an increase.” The use of radio ads and securing of an easy-to-remember phone number shows that the agency was comfortable using traditional marketing methods to increase its clientele. This was not a secret or illicit service: The ads ran on a commercial FM station that played progressive rock and reached an audience covering all of Essex County in Ontario (including Windsor and Sarnia) as well as Metro Detroit, Flint, and Ann Arbor in Michigan.

52. On cross-border shopping, see Elvins, “A River of Money.”

53. Gutierrez-Romine, *From Back Alley*, 170.

54. Elvins, “Lady Smugglers.”

55. Dick Spicer, “It's 5 Days from Here to Abortion,” *Windsor Star* 9 July 1970, 2.

56. Blackadar, “Michigan Abortion Referrals,” *Windsor Star*, 12 February 1973, 23.

Clinics emerged in other communities located near the border to capitalize on the proximity to the Canadian market. The Centre Inter Provincial routinely referred women to a facility in Schuyler Falls, New York (near Plattsburgh, about an hour's drive south of Montreal), where a converted farmhouse advertised itself as the Plattsburgh Clinic. It seems likely that the clinic was located specifically to take advantage of the number of Montreal women seeking abortions. For Montreal residents, the small city of Plattsburgh was a popular destination for cross-border shopping. The community had a population of roughly 18,500 people in 1970, compared to Montreal's population of well over 2.5 million. Schuyler Falls itself was even smaller, a rural crossroads outside of the Plattsburgh town limits. The clinic was criticized because it did not have a license and was operating in violation of a section of the New York State Hospital Code. There were charges that it had inadequate septic and sewage facilities and that patients brought to the facility were often forced to wait on the lawn outside before being brought in for surgery. It was operated by former podiatrist Milton Walkes and Dr. Michael Levi. Given that Walkes had no background in gynecology and the facilities appeared less than pristine, it seems likely that profit was a major motivation for the operators of the Plattsburgh clinic, rather than any larger commitment to women's health. The Plattsburgh Clinic eventually opened its own referral agency in Montreal, Services Consultatifs, with offices on Sherbrooke West.⁵⁷ Later in the decade, when Dr. Robin Badgley chaired a committee to investigate Canadian abortion law from 1975 to 1977, their investigation revealed that at least six of the forty American clinics committee members visited had been established primarily to serve Canadian patients. One clinic owner invested \$200,000 in his facility and said it would be a disaster if the Canadian law on abortion became more liberal because it would force him out of business.⁵⁸

Individuals, usually male, from a variety of business backgrounds saw the profit-making potential of abortion referral services. Although some had altruistic motives, others clearly were solely entrepreneurs. A two-part series on abortion referral services that ran in the *Windsor Star* described the emergence of the Family Planning Service in Windsor, a private referral service founded by Detroit insurance engineer Fred Hayes. Hayes also operated a service in Detroit and worked to negotiate cheap plane tickets and competitive rates at New York clinics. Hayes claimed to be doing this work to "help girls in trouble." The owner of the Madison Clinic in Harlem, which received referrals from the Family Planning Service, was much more forthcoming about his desire to profit from these transactions. Sy Schorr worked in real estate and construction and owned the clinic, as well as several blocks of surrounding tenement apartments. The paper noted, "Schorr is a businessman. He is in the abortion business to make money and he admits it frankly. He alternates calling the women who come to Madison patients and customers." Schorr quoted a price of \$225 for women traveling from Detroit and reported that he had charged up to \$350 and would not hesitate to charge whatever the market would bear.⁵⁹ The *Detroit Free Press* reported that anyone with a telephone line and an agreement with a doctor or clinic director could set up a referral agency, usually making kickbacks of \$75 per patient referred. Agencies operated out of private homes

57. Helen Hennessey, "Abortion Clinics," *The Journal*, 20 January 1972, 4.

58. Lane, *Report of the Committee on the Operation of the Abortion Law*, 76.

59. Sandra Precop, "Abortion," *Windsor Star* 23 July 1971, 17.

and apartments and even out of a local radiator and heater repair service. Detroit agencies used billboards, matchbooks, the *Yellow Pages*, *TV Guide*, and the radio to sell abortion information.⁶⁰

Individuals from a range of business backgrounds saw the potential in getting into the referral game. Len Sands, a Detroit advertising executive, claimed he entered the abortion referral service business after being urged by some doctor friends.⁶¹ Sands seems to have found an entrepreneurial niche providing travel to other legal jurisdictions. With his ex-wife Jean, Sands operated Overnight Caribbean Divorce, which offered customers roundtrip transportation to the Dominican Republic to obtain a “three-minute divorce” in a Santo Domingo courthouse, legal representation, and filing fees, combined with a night in a luxury motel and some sightseeing tours.⁶² Oak Park, Michigan, manufacturer Martin Mitchell had no background in medicine but saw an opportunity to profit from providing chartered air flights to clinics and hospitals in New York for women seeking abortions. Former insurance salesman Ken Oliver had a chartered limousine service that took clients from Detroit to New York clinics—he noted, “of course I’m in this business for the money. And business is almost too good.”⁶³

We can speculate about the decision-making process of women who used these referral services—did they think of themselves as “shopping for a better deal”? It seems evident that the referral services in markets like Montreal were competitive, but that did not mean women were able to compare the rates quoted. According to sociologist Nancy Howell Lee, most women struggled to find any information. Referral agencies publicized a range of enticing details to differentiate their service from other offers. Some asserted a competitive edge with the quality of their providers, services, and cost. Others assured women that their offices were “only 10 minutes from the airport,” saving both time and money for travelers.⁶⁴

Although some appeals were ads directed to women, one 1971 article reported that New York State abortion agencies inundated hundreds of Ontario doctors with pamphlets and advertising. The head of the Canadian Medical Association revealed that the “outfits advertise just like travel agencies—hotels, meals and other things can be included in the package deals.” Faced with almost no information for a daunting journey, many women welcomed the logistical support and promise of prompt, good service. Phone lines were often open 12 hours a day (longer than typical business hours) to provide information and make appointments.⁶⁵ Women choosing to use these services were able to quickly arrange a needed service and were willing to pay for it. Another possibility is that women sought abortions in communities far away from home to preserve their anonymity, perhaps to avoid the possibility that a friend or neighbor might encounter them at the hospital. But in many cases, Canadian women were aware that abortion was much more readily available in New York State and that by traveling they would have easier and less complicated access to a medical service they required.

60. Katz, “Abortion Referral,” 2.

61. “Abortion a Going Business,” *Times Herald*, 30 March 1971, 22.

62. “Firm Couples Quickie Divorce with Holiday,” *Arizona Republic*, 17 October 1971, 7.

63. “Abortion a Going Business.”

64. Norman Campbell, “Abortion ‘Deals,’” *Ottawa Citizen*, 5 March 1971, 2.

65. *Ibid.*

Women were also motivated by a desire for safety, not simply the lowest possible cost. At Carleton University in the United States, a staff of ten volunteers ran the birth control and abortion referral service—volunteer Deidre McKeane noted that cheaper, illegal abortions were available in Montreal, but the Carleton service arranged for legal abortions in New York State. “The girls don’t seem to have any problem paying for the operation. Even those from poor families can use their student loans.” It was also worth it to ensure they received good care; McKeane noted that “We have heard of girls getting pretty badly hacked up in Montreal.”⁶⁶ The increased availability of safe abortion in New York also meant an increase in demand: A story from the Rochester *Democrat and Chronicle* directly linked the improved availability and knowledge of abortion to an increase in demand. One doctor argued, “These aren’t just the girls who went to illegal abortionists before ... People who five years ago would have delivered are now asking for abortions.”⁶⁷

The media coverage of women traveling to get abortions highlighted the transactional nature of the exchange. A newspaper series from the *Times-Post News* service entitled “Abortion Is Big Business in New York” appeared across Canada in 1971, including in the *Calgary Herald*, the *Winnipeg Free Press*, and *The Ottawa Citizen*. The *Winnipeg Free Press* editor noted before the first article that “The casual, in-and-out clinic has become a thriving business.” The articles emphasized the profit-oriented nature of the referral agency: “It is a cash-on-the-barrel operation. As soon as the agency gets the money it will schedule an abortion ... the agency advertises heavily, especially in college newspapers and in the underground press.”⁶⁸ Jeff Slade of Planned Parenthood in an interview with the *Windsor Star* noted, “Let’s admit it, abortion in New York is a grab-the-money-and-run operation for many of these clinics. It’s a bureaucratic mess; these clinics can make a pile of money before they are forced to close up.” Slade hoped that new state legislation would make it possible for clinics to be more closely regulated and would close those who failed to meet standards of cleanliness and safety.⁶⁹ “To some, abortions mean just money,” the article headline admonished.

Gail Edwin of the Pregnancy Control Centre, interviewed for an article entitled “Abortions Mean Business” in the *Ottawa Citizen*, admitted that it was essentially a business operation but protested, “We are not in this to become millionaires.” She contrasted her service as “an alternative to some of the big commercial ones that reaping outrageous profits” and described one that arranged 100 abortions a day at \$100 each.⁷⁰ Susan McConnell, who ran a referral service and provided free abortions to women who needed them, also decried an abortion referral service that grossed at least \$150,000 in five months. “Abortions are big business,” she noted. “There’s profiteering going on. It should not be done that way.” Fairly quickly the

66. Stan Josey, “Student Birth Control Business Is (Blush) Good,” *Ottawa Journal* 11 February 1971, 3.

67. O’Toole, “Abortion Boom.”

68. Stuart Auerbach, “In-and-Out Abortion Clinic Big Business,” *Winnipeg Free Press*, 16 January 1971, 22; Auerbach, “In New York Abortion Is Big Business,” *Ottawa Citizen*, 16 January 1971, 43; Auerbach, “Abortion Is Big Business,” *Calgary Herald* 20 January 1971, 66.

69. Sandra Precop, “To Some, Abortions Mean Just Money,” *Windsor Star* 24 July 1971, 12; Stuart Auerbach, “In New York, Abortion Is Big Business,” *Ottawa Citizen*, 16 January 1971, 43; Auerbach, “Abortion Is Big Business,” *Calgary Herald*, 20 January 1971, 66; Auerbach, “In-and-Out Abortion Clinic Big Business,” *Winnipeg Free Press*, 16 January 1971, 22.

70. “Abortions Mean Business,” *Ottawa Citizen*, 20 Feb. 1971, 5.

New York State Attorney General opened investigations into the business practices of those who sought to exploit the situation.⁷¹

This conceptualization of women specifically as consumers of abortion services (rather than as patients of medical clinics) was underscored by media discussions of referral agencies as businesses and warnings to women as “buyers” who needed to be wary of deceptive advertising or other problematic practices. Advertising-executive-turned-referral-agency-owner Len Sands appeared on Detroit TV as part of a “Consumer Hot Line” live call-in program, offering viewers the chance to “meet the men behind the businesses and talk with them person-to-person.”⁷² *Consumer Reports*, the leading American periodical devoted to protecting consumer interests, had a feature about abortion clinics in July of 1972. “Legal abortions: How safe? How available? How costly?” ran the tagline on the cover of the issue.⁷³

The *Montreal Gazette* reported on the lack of regulation of clinics and the fact that patients who had bad experiences were reluctant to speak out because they did not want to attract attention. They noted that several Canadian women who had been referred to New York clinics by Montreal agencies found that, once they arrived in the city, they were pressured to pay higher fees than what had been advertised.⁷⁴ The paper noted that staff at the Centre Betty Farhood were promised a \$5 commission for every contact registered on their books and that New York doctors paid as much as \$20 per patient in return for referrals. The Canadian government’s official inquiry into abortion (known informally as the Badgley Report) criticized profit-making agencies that exaggerated their services or routinely told women that obtaining an abortion in Canada was illegal.⁷⁵ The committee noted that provincial colleges of physicians and surgeons felt that they had no direct authority to monitor the practices of commercial abortion referral agencies. Few women complained directly to authorities when misled or overcharged by these services, given the stigma associated with abortion. The committee noted, “These commercial abortion referral agencies existed opportunistically, at a stiff price for their clients. There was reasonable doubt about the propriety of their work. They existed because there was a demand for their services which was not otherwise being met.”⁷⁶

Conclusion

Reconsidering abortion in the context of the consumer marketplace helps to call into question many current assumptions about how women understood abortion and the narratives put forward by both pro-choice and anti-abortion activists. In the period from 1970–1972, abortion referral services played a major role in providing information for Canadian women and helped to shape their experiences traveling across the border. The existence of these referral services was a source of controversy among not only opponents of abortion but also universities, municipal governments, and local medical authorities. There were debates about whether

71. Campbell, “Abortion ‘Deals,’” 15; Auerbach, “In-and-Out.”

72. TV listings, *Windsor Star*, 22 June 1972, 31.

73. *Consumer Reports*, July 1972, cover.

74. “Abortion,” *Montreal Gazette*, 14 October 1975, 3.

75. Lane, *Report of the Committee on the Operation of the Abortion Law*, 383.

76. *Ibid.*, 386.

referral services could advertise in public spaces, newspapers, or student publications. Provincial politicians proposed outright bans on abortion referral businesses and limits on their operation. Yet it is clear that Canadian women sought out these services and were willing to pay for referrals to doctors, for travel, and for the termination of pregnancy itself.

Thinking of abortion as a business also helps to recast the gender dynamics of this history. By imagining abortions as singularly a woman's secretive, underground experience, we have lost sight of the visible, lucrative business aspects of abortion, as well as the men who shaped the industry. A male businessperson might put up the billboard with the phone number to call, a man might answer the phone to schedule the abortion, a man might own the practice or clinic, and a man might perform the procedure. Even at the point of inquiry, it is clear that a lot of men made phone calls to learn what getting an abortion entailed and to schedule the appointments. Men also sometimes secured money to pay for abortions, including fathers, husbands, and sexual partners. They regularly accompanied their partners on trips across the border to access abortion care.

The majority of attention of scholars and in the Canadian public memory has focused on Henry Morgentaler and the fight for legal access to abortion.⁷⁷ Within the United States, the sense of the struggle over abortion rights culminating in *Roe v. Wade* has been upended by the 2022 *Dobbs v. Jackson* Supreme Court decision, which eliminated nearly fifty years of constitutional protection of abortion rights. Navigating a post-*Roe* world, the frequency of women traveling across jurisdictions is no surprise. History has taught us that making abortion illegal does not eliminate abortions. Within the United States, travel between states or even the emergence of mobile clinics sponsored by groups like Planned Parenthood demonstrates that women will be resourceful in seeking out reproductive care. Canadian access to abortion for the moment seems more secure, so it is within the realm of possibility that new types of referral businesses may emerge to facilitate movement across borders, perhaps northward. The internet may allow wide dissemination of information and facilitate the mail-order sales of drugs in some jurisdictions. But there will be no change in the market for abortions: There will always be demand, and it is likely that there will always be individuals hoping to profit from that demand.

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