

Criminal Code

Also, I am in favor of the proposed amendment to the effect that hospitals and medical practitioners unwilling to procure a supposedly therapeutic abortion which, doctors say, no longer exists could at least be free not to abide by the provisions of this bill providing for the creation of an abortion committee in hospitals.

[English]

Hon. Marcel Lambert (Edmonton West): Mr. Speaker, this part of the debate on this bill is different from that part of the debate that dealt with gross indecency. This is not just, shall we say, a mere truism. The amendments before us come as a result of representations made by various organizations, organized groups, pressure groups and individuals. They have been discussed in the public press, on radio and on television, and there has been a good deal of public debate on this matter. Therefore, even though I may not agree with these amendments, I feel they are much more legitimate than the ones contained in clause 7, for which there was no call from the public. They were not debated by the public, there has been no public demand for relaxations on gross indecency and therefore they seem to be a gratuitous offering on the part of the original author of the bill to some factions in the public interested in that type of activity.

Representations made favouring the adoption of clauses in this bill dealing with abortion have been made first of all, I suppose, by a lot of social workers and well meaning people. Many of them were naïve do-gooders to the extent that they believed adoption of this provision would reduce illegitimacy as the result of conception by young unmarried women or by married women who participate in extramarital affairs. It is thought that if such a young woman can go along to a hospital very quietly and have an abortion, this would eliminate the number of illegitimate children. Mr. Speaker, I do not think for a moment that that will be the case. It will be known when a woman goes to hospital. Women resort to the back street quack or to what is known as the abortion butcher because of the moral stigma attached to a woman carrying a child as a result of an illicit sexual connection. This is the reason for resorting to the quack and no amount of, shall we say, making abortions easier will reduce the immorality of the initial act and the immoral stigma. We will have to change society and say that a woman can conceive a child from whomsoever she wishes, and bear

it. But society will not accept that. Society does not say that, nor does society pretend at any time to sanction illicit sexual connections which may result in a pregnancy. Therefore, I think the argument that adoption of this provision will reduce illegitimacy is sheer fantasy.

Furthermore, I doubt that it will reduce the number of so-called butchers. Why do I say that? I say it because there is that social stigma attached to an illicit pregnancy. Here again, I think there are naïve do-gooders who suggest that liberalizing the abortion provisions in our Criminal Code will reduce illegitimacy and drive the abortion butcher out of his back room.

On another occasion, I think I shall have the opportunity to speak on the principle of abortion at will or on request, or on proposals which would make abortion much more permissive than at present. At this time I should like to limit my remarks to the purpose of this amendment. I am pleased to see this amendment being put forward. Anything said to me by medical practitioners about the government proposals dealing with abortion has been said in an endeavour to protect practitioners who would refuse to perform an abortion on instruction from any therapeutic abortion committee. The medical practitioner might be either on the staff of the hospital or be connected with the hospital and be entitled to practice in that hospital. Also, many of those doctors who have had a great deal to say to me limit their practice to some of the hospitals within the city of Edmonton where abortions will not be carried out. There will not be an abortion committee in those hospitals as long as the directing staff and the doctors of those hospitals maintain the same view. It is their freedom of practice that we are attacking.

• (8:40 p.m.)

I say it is absolutely wrong. It will be failing morally. I trust the provinces will take some appropriate action to prohibit any undue pressure, either on a hospital or a doctor practising in a hospital, to carry out a therapeutic abortion against their will. Hospitals today have no freedom with regard to their financing. They are directly controlled by the provincial authorities. If it is the view of a provincial hospital authority that all hospitals, regardless of the persuasion by the board of management or directing staff, shall carry out therapeutic abortions under penalty of some financial or other type of restriction,