

**2021 Visiting Speaker Series** presented by the History of Medicine Program at Schulich Medicine  
**“Challenging Choices: Canada's Population Control in the 1970s”**  
**5 p.m. Wed Nov 10, 2021**

A virtual talk --- [Register here](#) for zoom session information  
or visit [www.schulich.uwo.ca/historymedicine](http://www.schulich.uwo.ca/historymedicine)

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## Five Questions

with

**Prof Erika Dyck, PhD**

Canada Research Chair in the History of Medicine  
University of Saskatchewan

&

**Prof Maureen Lux, PhD**

Professor of History  
Brock University

by

**Dr Shauna Devine, PhD**

History of Medicine Program  
Schulich School of Medicine & Dentistry



1. **Can you tell us about the work you will present in your lecture for this year's Visiting Speaker Series in the History of Medicine, Schulich School of Medicine and Dentistry?**

Our presentation is based on our book, *Challenging Choices*, which looks at birth control activism and the concept of choice in the 1970s. We found that despite images of reproductive liberty that are more often associated with the triumphs of second-wave feminism, and the legal changes that allowed for access to birth control and abortions, that for some Canadians the 1970s represented a period of reproductive constraints. We look at experiences of family planning for Indigenous women, men, and women with disabilities and/or mental disorders, teenagers, and contrast some of those experiences with men seeking vasectomies to show how the state continued to play a role in family planning in some cases.

2. **How did each of you first become interested in this topic? And what prompted your collaboration on this book?**

Maureen had recently finished a book, *Separate Beds*, which looked at Canada's segregated health care system of Indian Hospitals. Erika had finished a book on eugenics and sexual sterilization in Alberta, both of which ended their histories in the 1970s. We compared notes and agreed that these histories intersected in interesting ways, and that ideas of segregation and eugenics persisted into the 1970s. So, we decided to tackle that topic by joining forces.

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- 3. Was there anything that surprised you about this project once you got deeper into your research? Or rather, made a discovery in your work that made you say “wow!”?**

Erika insisted on contrasting the experiences of women with men in this book, but it turned out that finding men’s perspectives on vasectomy at this time was really challenging. Maureen astutely asked on several occasions, whether these upper and middle-class men deserved to be part of a story about women whose choices were constrained. We had to be creative in seeking sources to uncover this part of the history, and in the end, we think it helped to emphasize another one of the contradictions in this history. That the 1970s were not necessarily an era of liberation and choice for everyone, but that language of choice and family planning embraced a new vocabulary of responsibility that had undertones of global struggles, environmentalism, and reproductive rights within a welfare state. These features didn’t all last, but they shaped discussions about who was responsible for family planning, what was a responsible choice when it came to reproduction, and how Canadians should behave in a neo-Malthusian moment.

- 4. While official apologies have been issued in recent years about Canada’s reproductive policies and politics, among the four groups of Canadians that you examine in your study—(1) indigenous women and their communities, (2) those with intellectual and physical disabilities, (3) teenage girls, and (4) men--do you believe that reconciliation efforts have been successful? Why or why not?**

This is a good question and unfortunately, we think that the answer is not quite. While some of the reconciliation efforts have drawn attention to the uneven application of choice when it comes to family planning, the compensation and public apologies have done more to silence people than to engage in meaningful changes at a political or institutional level. We continue to see dramatic power imbalances in how people access reproductive services across regions and categories.

- 5. How did you originally become interested in the History of Medicine? And, why is the history of medicine important today? Do you think history of medicine is important for medical students and/ or practicing physicians?**

Such a difficult question! For me (Erika), I can say that I was fortunate enough to have great people like Shauna and Shelley around when I started my doctoral work at McMaster University, which was my first taste of history of medicine. I have always loved learning about scientific and medical theories, but from history I learned that these explanations are only as good as our mechanisms for communicating them. **Stories matter: how we learn and how we explain ideas about how bodies and minds work depend a lot on generating trust between patients and physicians.** I think that appreciating history of medicine reminds us of the delicate balance between evidence and communication that makes for good health, and healthy choices.

I (Maureen) first became interested in the history of medicine when I studied the 1918-19 influenza pandemic for my Masters’ thesis. Since COVID I am reminded how in both pandemics those with the least suffered the most. Now I study the history of colonialism and its impact on the health of Indigenous peoples in Canada. Racially segregated healthcare for Indigenous people in state-run “Indian hospitals” throughout much of the twentieth century made it seem normal and natural that community hospitals would be reserved for settler Canadians. That Indigenous people are still not quite welcome in some hospitals has recently been made horribly clear. **Knowing our past helps us understand our present.**

**Thank-you very much for your time! We look forward to your presentation on November 10th!**

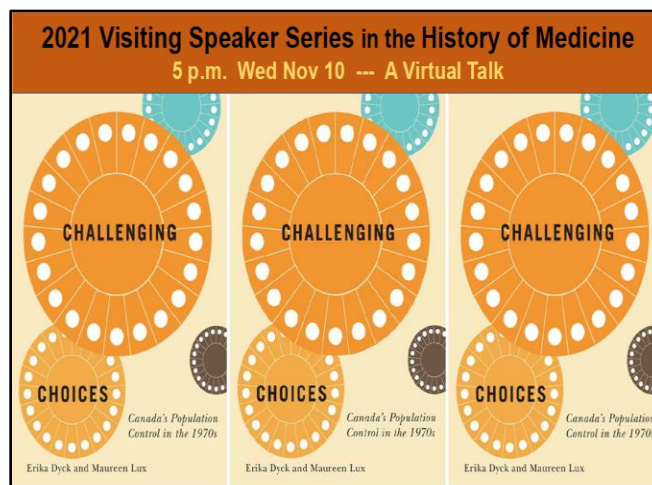
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**“Challenging Choices:  
Canada's Population  
Control in the 1970s”**

The challenges of global reproductive health are complex and multifaceted, and the issue of population control touches upon the sensitive areas of contraception, abortion, reproductive politics, personal autonomy, and more. By the 1970s, Canadians enjoyed greater sexual freedoms, legal access to birth control, and the decriminalization of homosexuality ... against the shadow of eugenics. Erika Dyck and Maureen Lux explore who had access to reproductive choices and who remained under the state's watchful eye in a new era of family planning.



Read their book—*Challenging Choices*—recently published by McGill-Queen’s University Press ([book details here](#)).