

# The Guardian



## 'I can't think of a time when it was worse': US abortion doctors speak out

**Curtis and Glenna Boyd have worked in US abortion clinics ever since Roe v Wade made the practice legal in 1973. Forty years on, restricted rights mean they have to practise under FBI protection**

**Karen McVeigh**

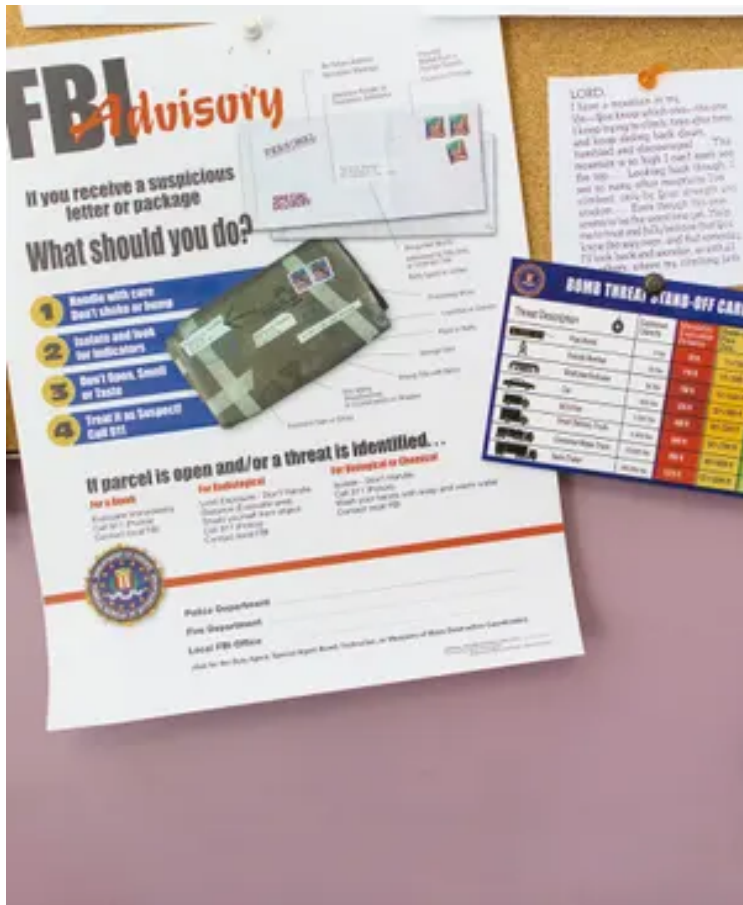
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A couple emerge from a silver Sedan into an empty parking lot in north-eastern Dallas, Texas. They are carrying multiple bags and an elegant, three-tiered white cage, temporary home to their West African parrot, Tutu. The pair, in their late-60s and 70s, share a courtly, gentle manner and a Southern drawl, although his is more pronounced.

It is a Sunday morning, and the smart brick and smoked-glass clinic they have parked outside is closed. There are none of the protesters who, in the US, have come to signal the type of healthcare provided here: from the religiously motivated to abuse-hurling zealots, who gather outside abortion providers, particularly in the Bible belt. It is difficult to imagine the couple, Curtis Boyd, a silver-haired preacher-turned-physician, or his wife, Glenna Halvorson-Boyd, a psychologist and counsellor, on an FBI watch list as potential domestic terrorism targets. But they are.

A pink flier, taped inside the staff door to the Southwestern Women's clinic, serves as a chilling reminder of the more extreme reaches of the anti-abortion movement. It is a notice of a memorial event for Dr George Tiller, an abortion provider from Wichita, Kansas, and a friend of the Boyds, who was assassinated by extremist Scott Roeder five years ago. Roeder is serving life for murder.

It is a time of heightened tension in Texas, following the passing of one of the most restrictive anti-abortion bills in the nation, made famous by Democrat Wendy Davis's 11-hour filibuster against it in 2013. The Boyds have been warned by the FBI not to give media interviews because of fears for their safety. Over the years, they have had two arson attacks at their clinics, one in the 1980s and one in 2007, as well as countless death threats. But they have chosen to ignore the agency's instructions, to highlight what they say is a roll back of women's hard-won reproductive rights.



FBI advice on what to do if you receive suspicious packages.

Photograph: Troy Stains/Guardian

Four decades after the 1973 supreme court ruling *Roe v Wade* gave women a constitutional right to abortion, the Boyds say they are “deeply disturbed” by the march of anti-abortion laws. They believe the procedure has been hijacked as a political rather than a medical issue, causing women to feel more shame than ever before.

During a tour of the building, a bright, airy place, walls dotted with photos of flowers and water lilies painted by Curtis, he points out the absurdities imposed by state law. He is legally bound to provide “state-mandated information” to clients, including a purported link between breast cancer and abortion that has been exhaustively and repeatedly disproved by medical studies.

"I have to give it," Curtis says, chuckling incredulously, before adding, "They can't stop me giving my opinion that I don't believe it." His situation has led to a kind of black humour and Curtis, a slight figure, is given to bouts of nervous laughter. Talking about the first attempt on Tiller's life, before Roeder, he laughingly refers to perpetrator Shelley Shannon as a terrible shot, because she shot him in both arms, when presumably aiming for his chest. Shannon, a member of the Christian anti-abortion group Army of God, was sentenced to 11 years for attempted murder in 1993. She was later sentenced to an additional 20 years for crimes against abortion clinics and practitioners, including arson and acid attacks. Tiller's Wichita clinic, one of the few in the country to perform late-term abortions, was for years one of the most prominent battlegrounds over abortion.

"They tried everything they could to put George Tiller out of business," Curtis says. "Kept him tied up in court, constant complaints to the board of medicine."

After Tiller's death, the Boyds took on two of his staff at their Albuquerque clinic in New Mexico and expanded the practice to accept patients in the third trimester of pregnancy. Their decision to carry out abortions so close to term brought with it fresh scrutiny from anti-abortion groups, including the Kansas-based Operation Rescue. The Boyds use lawyers to deal with complaints and lawsuits. As for the risks to their personal safety, they put them "to one side".

"They [the FBI] are more concerned about that than I am," Curtis says. "It's unfortunate. It's domestic terrorism, and the FBI and the justice department know that. There are just these crazy people in our country. I ignore them as much as I can."

Texas state law HB2, passed last year, banned abortions after 20 weeks post-fertilisation. It also ushered in a number of requirements: that physicians follow outdated regimes regarding medicated abortion, requiring up to four visits to the same doctor; that they secure admitting privileges in local hospitals (an agreement that they can admit patients if necessary); that they operate as "ambulatory surgical centres", requiring expensive refits; and that they introduce 24-hour waiting periods. The requirements, most of which have no medical advantage, according to clinics, are opposed by the American Congress of Obstetricians and Gynecologists.

Curtis believes that some of the restrictions, for instance the 24-hour waiting period, send a clear message to women. It is there in order for her to "go away and think", he says. "As if she hasn't thought about it before. It is clearly a message that she must not do this bad thing."

If, as the clinics claim, the regulations are simply a ruse designed to put them out of business, they have certainly worked. The number of abortion providers in Texas has halved, from 41 in 2013 to about 20 today. This number would be even lower had the supreme court not stepped into the legal fray in October this year, placing a hold on the requirement for ambulatory surgical centre refits, which would have closed all but seven facilities in the state, while legal challenges continue.



Protesters outside the Boyds' Southwestern Women's clinic in Texas.  
Photograph: Justin Clemons/Guardian

At a table set with salads, strawberries and sweet iced tea, five members of the Boyds' 35-strong all-female staff speak with fervour about their work. Tenesha Duncan, an administrator who recently returned to the clinic after a period of study in London, says, "Once you've done this work, it becomes a major part of your morality, your conscience." The newest member of staff, a young doctor, has just arrived from New York after becoming concerned over the many restrictions introduced by HB2.

Glenna, 67, waits until her staff have had their say, before placing her hand gently on the arm of her husband. "Shall you say it, or shall I?" she asks; the two often finish each other's sentences. "The story in the US is about bad clinics doing awful things, of violence against providers, and of women who are ignorant, thoughtless and irresponsible."

Recruited as part of the first batch of legal abortion counsellors in Texas, Glenna joined Curtis at his first clinic, the Fairmount Center in Dallas, in 1974. Since then, she says, things have changed for the worse. "Women express more shame. I can't think of a time when it was worse than it is now. I used to ask women how they first heard the word abortion, how they learned about it. There were always very personal stories about someone they knew, or found out had had one. Now, the first time they saw it was on some ugly billboard. It has been legal throughout their lifespan, not to mention their reproductive lifespan. But it has been completely politicised."

Curtis, 76, agrees: "Patients never came in talking about all this shame. They felt it was an OK thing to do, if they could just find somebody to do it for them."

They say they are alarmed by the loss of reproductive rights in Texas and other southern states, such as neighbouring Louisiana and Oklahoma, where similar laws have been passed.

"What we are seeing in this country is when women become pregnant, they are less autonomous, from the point of conception," Curtis says. "You are asking a woman, if she becomes pregnant, to give up the decisions in her life to the foetus. That's disturbing to me."

A study by the American National Advocates for Pregnant Women last year found a number of cases where pregnant women were arrested and detained not only for ending a pregnancy, or even expressing an intention to end one, but also after suffering unintentional miscarriage.



The Boyds say that myths are pervasive, even among those who say they support abortion. Patients are thought of as “thoughtless teenagers” who do not take precautions, even though 61% of their clients have one or more children. Often, Glenna says, “they feel responsibility to the children they already have”. Half are married and 46% have used birth control in the month they got pregnant.



Protesters' placards. Photograph: Justin Clemons/Guardian

“All these false beliefs,” Curtis says, “and the reasoning that women should be punished. It is not being able to accept women as fully responsible citizens.”

Successive polls have found that a slight majority of Americans support abortion, with some restrictions, but the issue remains deeply divisive. The latest Gallup poll, conducted in May 2014, shows 47% of people identifying as pro-choice, compared with 46% who identified as pro-life.

In the UK, support for abortion is on the increase. A YouGov poll found that the percentage of British people who wanted a ban on abortion dropped from 12% in 2005 to 7% in 2013. However, in the US the opposite is true; and it is an issue that fractures along political lines.

The Republican party takes a much more conservative view than the American public: it supports a constitutional amendment that would end abortion entirely; and, in recent years, the rise of the Tea Party has seen a further hardening of anti-abortion rhetoric. Democrats are pro-choice. But support for abortion, even among those who are pro-choice, drops off sharply later in pregnancy, when the procedure also carries more medical risks.

The Boyds are reluctant to talk in detail about this aspect of their work, because they are concerned anything they say will be seized upon by anti-abortion campaigners. “It distorts the issue,” Curtis says. He took on later-term abortion in 2010 because he wanted it to be available,

but says that it amounts to a “tiny proportion” of his work. In the US, 89% of all abortions are done before 12 weeks, with only 1.2% occurring after 21 weeks, according to the Guttmacher Institute for reproductive health.

“If I do one in a million, that’s what they want to talk about,” Curtis says. “And they don’t want to talk about why it was done. It might be to save the life of a woman: the woman dies or the foetus dies. I’ve had those choices to make. “Very few of these are done in the world, and in this country,” he says, stressing every word carefully. “And when they are done, they are always done - always - for very compelling reasons.”

Curtis is very wary of what he calls “hot-button issues” amid the highly charged abortion debate. He found himself in the spotlight the last time he agreed to an interview, for an ABC affiliate television news channel in Texas, in 2009. In a video clip that has been picked up and replayed on anti-abortion websites, he is heard saying: “Am I killing? Yes. I know that.”

He was ambushed, he says, by an interviewer’s question about murder, and his remarks were taken out of context. “They said murder. Murder is a legal definition. I said yes, it’s killing, but it is not murder.”

What angers him, he says, is the idea that women have to be protected from abortion providers, that they are not making their own decisions. “These women who come to us are not idiots. They know what they are doing. People can’t get that. Women take this seriously. They think about it. They don’t wake up and say, ‘I’ll brush my teeth and go have an abortion.’”



A nurse and patient in the counselling room at the Boyds' clinic.  
Photograph: Justin Clemons/Guardian

Courtney Wallace, 31, a mother of one who runs her husband's medical practice in Oklahoma City, is a recent patient of the Boyds. "I hated every minute of it, but it was what I needed to do," she says of her late-term abortion.

At 22 weeks pregnant, Wallace and her husband, a podiatrist, were told the baby boy she was carrying had a lethal neurological condition and would not survive outside the womb. He had anencephaly, a serious birth defect that left him with part of his brain and skull missing. The condition develops at four weeks, when the neural tube closes, but is sometimes not picked up until a baby is born.

"I will live my whole life never wanting to hear anything like it ever again," Wallace says. "The doctor told us, 'He is missing the entire top of his head. Without a brain, he will struggle to breathe, so, when they cut the umbilical cord, he will die.'"

Wallace, who has an 18-month-old son she describes as "perfect", says, "They don't do any sort of resuscitation. They know there is no chance of life. They give them food, water and you can either hold the baby or the nurse can hold the baby until he dies.

"I know what it's like to deliver a baby and I kept picturing my son, but with the top of his head missing. I felt him kick, he could kick. But he would be born blind, deaf and unconscious."

She knew immediately that she would not carry her second baby to full term, but wrestled with the decision over the next few days, and "in her darkest hours" could only think about how difficult it would be to go through a termination.

Wallace said the doctor did not advise her, but told them, "Either way, you are going to walk out of hospital empty-handed." Her husband told her: "You have an awful choice to make and you are the only one who can make it. Either option is unthinkable."

"I began to think about carrying him for longer and what emotionally that would mean," she says. "I have still got to be a good mother to the son I have, and I thought about the best thing to do for my sanity."

After making a decision to terminate her pregnancy, Wallace was then faced with a further dilemma. The gestational limit on abortion in Oklahoma is 20 weeks post-fertilisation, as it is in neighbouring Texas. With her pregnancy now past 22 weeks, she could not have the procedure in either state.

"My doctor 100% supported my decision in getting this procedure, but legally they could not do it in Oklahoma." She found out about the Boyds' second clinic in Albuquerque, New Mexico, where later-term abortion is still legal. "So we had to get my son looked after, get a hotel for four nights and fly to Albuquerque."

Once at the clinic, Wallace and her husband had to pass a crowd of protesters. "They yelled at me. They said, 'We'll help you find somebody to adopt your baby.' They had signs and pictures up at that gestational age. It was pretty nasty. "They have their right to freedom of speech, but those people have never been in this position. Both of my options were truly awful."

Wallace says she has always believed abortion should be legally available, which helped in making her decision. "I'm now six weeks into the grieving process, but I'm thankful that I have that

belief. I've known women who are strongly against abortion. They struggled with their decisions because of that.

"It's a topic that you can't really speak on until you are faced with it. It was a heartbreaking scenario. I'm lucky that I have surrounded myself by good people and, honestly, I didn't give a damn what others felt. I was not going to make it worse by being shamed. I was honest and open about it. Within my own social circle, I thought this story needed to be not hidden."

In the three years between 2011 and 2013, state lawmakers enacted more abortion restrictions than they had in the previous decade. The battle continues: according to the Guttmacher Institute, 56% of American women of reproductive age in 2013 were living in 27 states considered hostile to the procedure; just over a decade earlier, in 2000, 31% lived in 13 such states.

The new state regulations have triggered a raft of lawsuits and led to protracted legal battles, many centred around the requirement that practitioners have admitting privileges at local hospitals.

Dr Willie Parker is one of the plaintiffs in a case involving the Jackson Women's Health Organization in Mississippi - the state's sole abortion provider. The clinic has been under threat of closure since a state law in 2012 required its practitioners to be board-certified obstetrician-gynaecologists, with admitting privileges in a local hospital. It is a catch-22 situation.

In a southern Bible belt state such as Mississippi, the local hospitals, many linked to churches, will not grant admitting privileges and do not want to be associated with doctors who perform abortions. There is another dilemma: many hospitals will grant such privileges only to doctors who can admit a minimum number of patients, and abortion providers cannot meet this number because, they say, so few of their patients need hospital care. Supporters of this say it is about safety and that it prevents abortion doctors from abdicating a duty of care, should any complication arise. Clinics and pro-choice advocates say it is about restricting abortion. They point out that a tiny proportion of US abortion patients (0.3%) experience a complication needing hospital treatment, and that facilities performing riskier procedures, such as colonoscopies, which carry a mortality rate 40 times that of abortion, do not face similar requirements.

Parker, from Birmingham, Alabama, is one of two doctors from out of state providing health care at the clinic. He also works at clinics in Georgia and Alabama. He believes the onward march of anti-abortion laws in the US is "rooted in theology".

"We pride ourselves in the separation of church and state, but these laws are being framed by individuals who are trying to impose their own morality and religious views on others," he says. "That is wrong. It presupposes that everyone in America is a Christian, or religious at all."





Dr Willie Parker, Atlanta Women's Medical Centre: 'The use of politics and power has created this atmosphere of stigma and shame.'

Photograph: Troy Stains/Guardian

Parker, a member of Physicians for Reproductive Health, is also frustrated that the issue has been hijacked by politicians. "People seeking abortions are making the decision based on healthcare. The people who are making the laws are talking about religion and American values," he says. "It's the use of politics and power that has created this atmosphere of stigma and shame."

"In Mississippi, we have seen some of the most fundamental attitudes. There are protesters and pickets every day the clinic is open. They are shouting at women who are exercising their right to decide healthcare. It is worsening, and that's a result of anti-abortion legislation that is sweeping the country."

Parker, who describes himself as a "follower of Christ", says the patients he sees find their choice very difficult, particularly when they are religious. "Good and moral women have abortions every day," he says, "but when patients come in and are very conflicted, I try to address it. I say there are good people who are serious about religion who understand the sacredness of a woman's right to choose about whether or not to continue a pregnancy. You can respect that other people disagree with you, but you have to listen to your own heart, and there are people who understand."

Like Parker, Curtis has a religious background: he was an ordained Baptist minister before turning to medicine. He was raised on a farm outside the small town of Athens, rural Texas, where a school friend was forced to carry an unwanted baby to term against her will, something he later realised had a profound effect on him.

But the real turning point for him came in the 1960s, during the civil rights and women's movement, when he was recruited by an underground network of ministers and rabbis. The group, the Clergy Consultation Service on Problem Pregnancies, provided safe abortion advice at a time when women were risking injury and death visiting disreputable practitioners. His role was initially advisory, but eventually he began performing safe, but then illegal, abortions.

"It's basically about a woman's place in society," Curtis says. "If you cannot control your reproduction and you are fertile, it's extremely difficult to control anything else. I was hesitant because I know what it meant," he says, meaning the threat of arrest, prison and, with it, the end of his medical career, "but I knew I had to accept the risk."

When *Roe v Wade* made abortion legal, he was jubilant. "We thought we had won, it was over. At that time, the media mocked these crazy anti-abortion groups. They were not taken seriously."

The Boyds never believed they would still be in the abortion business 43 years later. "We thought [by now] it would be available in every family practice, that there would be no resistance. Every medical school would be teaching it." Now, Curtis says, "We wake up and think, 'My God what has happened?'"

## **A woman's right to choose...**

... is under serious threat for the first time in generations. On the heels of an unprecedented wave of anti-abortion laws passed last year, the Supreme Court will consider a case this year that could dramatically curtail reproductive freedom. Meanwhile, the current administration continues to fill federal courts with judges likely to undermine *Roe v Wade*, the landmark 1973 decision securing the right to abortion.

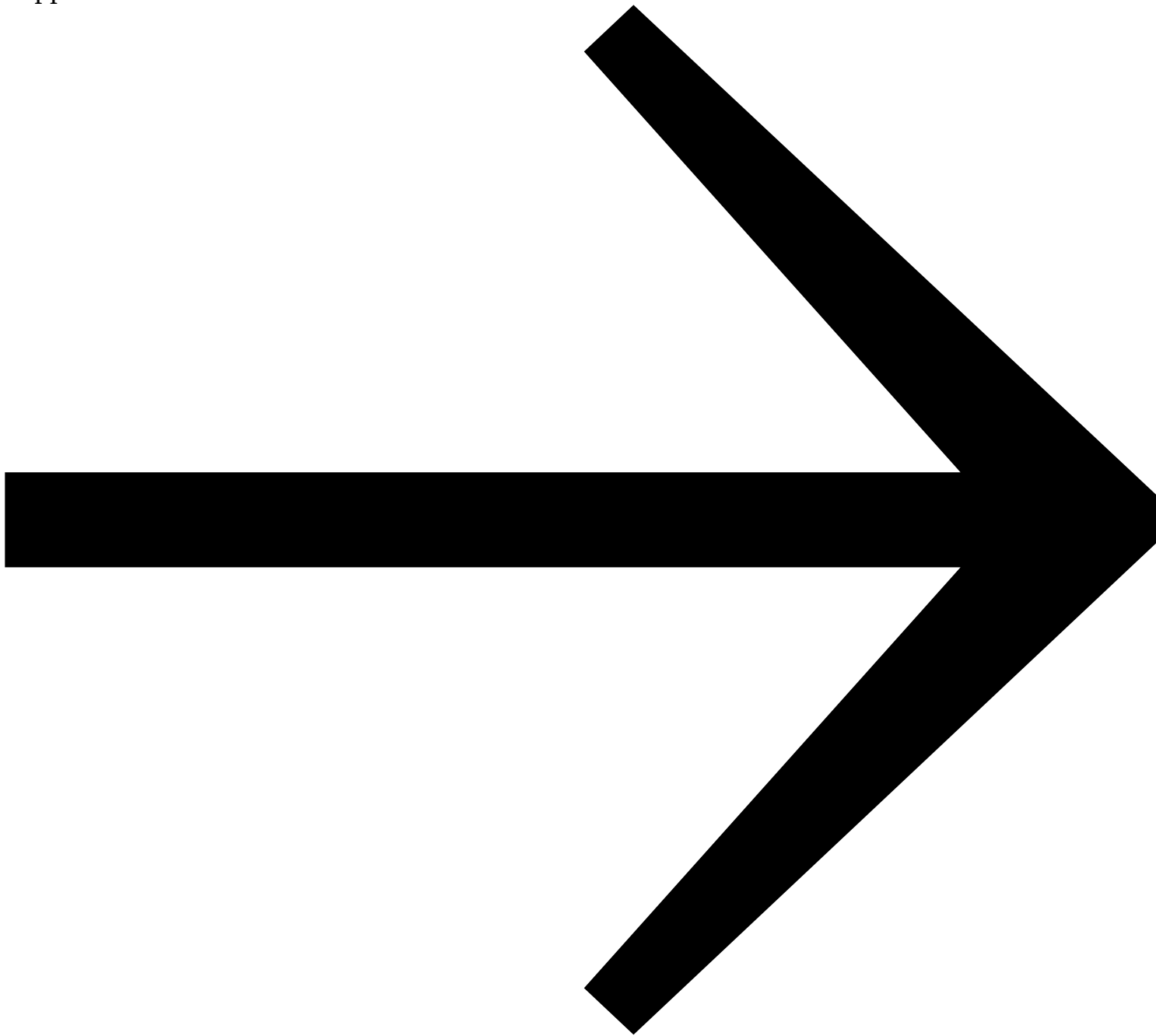
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