

# Abortion Pioneer Making Impact In Other Areas

## Judy Widdicombe Shifts Sights, Remains Force For Social Change

By Martha Shirk  
Of the Post-Dispatch Staff

**F**OR MORE THAN two decades, the name of Judy Widdicombe was synonymous with the national struggle to make abortion legal and safe.

In the mid-1960s, when abortion was illegal in Missouri, Widdicombe counseled hundreds of desperate, pregnant women about their options, directing many of them to illegal abortionists in St. Louis and Chicago.

In 1973, after the Supreme Court's decision in the Roe vs. Wade case forced states to legalize abortion, Widdicombe founded Missouri's first abortion clinic, Reproductive Health Services, in St. Louis' Central West End. Over her 17-year association with the clinic, she helped shape challenges to Missouri's abortion laws that reached the U.S. Supreme Court four times.

In the late 1970s and early 1980s, Widdicombe extended her efforts internationally, traveling to Bangladesh and Colombia to help train "barefoot doctors" and midwives in safe abortion procedures.

She also became the first president of the National Abortion Federation, the interim executive director of the National Abortion Rights Action League, and the chief fundraiser for Voters for Choice, a national political action committee.

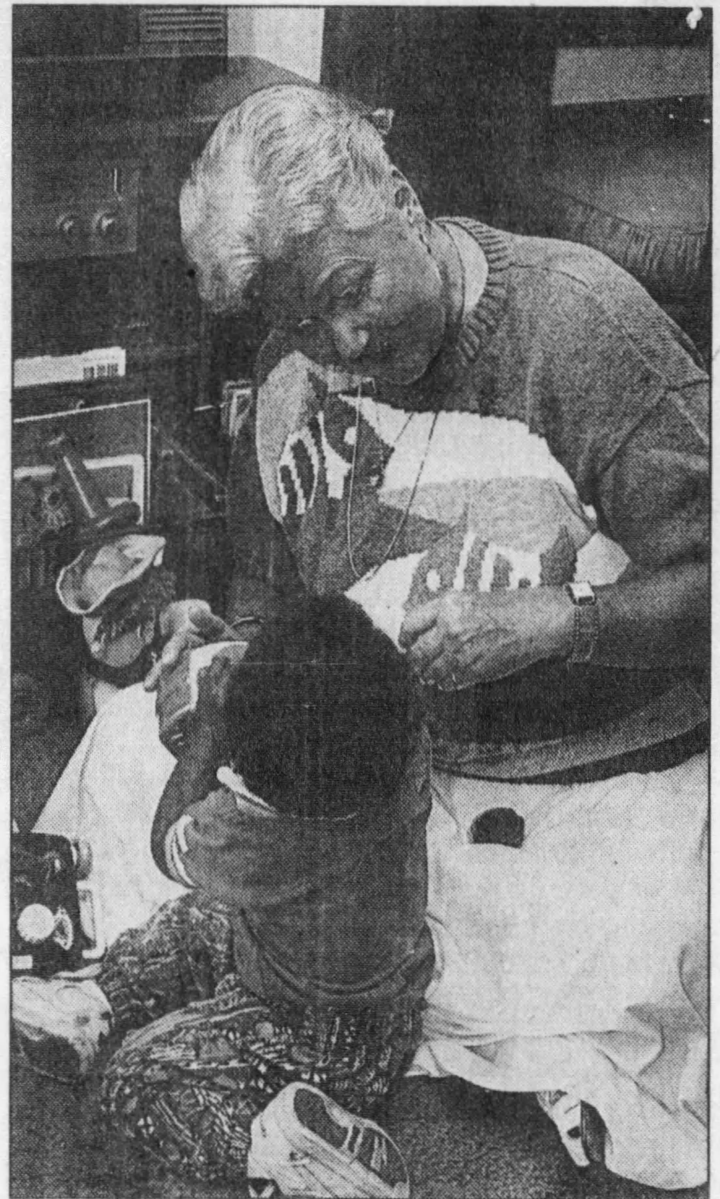
**Today, Widdicombe, 54, is estranged from the abortion rights movement as a result of differences over strategy. But she is no less of a force for social change.**

As president of the St. Louis-based Health Policy Institute, she devotes her considerable energy to other social issues besides abortion — adoption, foster care, child abuse, battered women, prenatal care and pregnancy prevention — which she believes the nationwide battle over abortion has kept in the background for too long.

"Because of all the crossfire in the abortion fight, many women's and children's issues have not been addressed," Widdicombe said in an interview last week at her kitchen table in University City. "I decided I didn't want to contribute to that crossfire any more."

The key to solving many other social problems, Widdicombe said, is reducing the number of unintended pregnancies. Nationally, surveys have found that 56 percent of all pregnancies are unintended, and that half of those end in abortion. Eighty-two percent of pregnancies to teens are unintentional.

"It's simply imperative that we reduce unintended pregnancies, because they are the cause of many other problems," she said. "Most of the kids who are being



Larry William/Post-Dispatch  
**Judy Widdicombe, who heads the St. Louis-based Health Policy Institute, with one of the foster children she has taken into her home.**

dumped into foster care are the product of unintended pregnancies. Many of the kids dying in their first year of life were unintended. Many families are living in poverty because of the financial burden of unintended children."

Other public health advocates say they are amazed at the speed with which Widdicombe has established her credibility on many public health issues.

"At the beginning, there was some mistrust from some people at the state level, because they didn't know what she was really trying to do," said Garland Land, director of the Missouri Center for Health Statistics.

"I think this past legislative session she indeed showed that she was effective. She has an untiring energy and drive to get the job done. There was no doubt that she had the ear of key legislators."

Said Sister Jeanne Meurer, an administrator for the Franciscan Sisters of Mary Congregation and a certified nurse-midwife: "We're working together on collaborative practice issues — how to increase the collaboration of physicians with nurses, nurse-practitioners and nurse-midwives, and on those issues, she really has vision. I just admire her so.

"Her heart is in the right place. She really cares about

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# Activist

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women."

**Widdicombe dates** her activism on the abortion issue to the time she was working as a nurse's aide and watched a woman die in the emergency room at St. Luke's Hospital as a consequence of an illegal abortion. "I was only 16, but I still remember wondering what could have made that woman so desperate," Widdicombe said.

She became a registered nurse, and for the next 12 years worked on the obstetrical and gynecological floors of several local hospitals. She also served as a volunteer for Life Crisis Services, which operates a suicide prevention hot line, and through that experience became aware that unintended pregnancies were driving many women to consider suicide.

In 1969, she helped form a Missouri chapter of Clergy Consultation Services, which provided counseling here and in four other Missouri cities to women with unintended pregnancies. The group referred women to illegal abortionists in St. Louis or Chicago or made arrangements for them to travel to states where abortion was legal. Widdicombe herself traveled to Chicago in 1969 to have an illegal abortion.

Even as she was helping to arrange illegal abortions and later running the state's largest abortion clinic, Widdicombe said her goal always was to be involved in an effort to shape policy on broader public health issues.

**Her original** vision for Reproductive Health Services included adoption counseling and placement along with abortion counseling; that dream was finally realized three years ago when the clinic started Adoption Associates. Another part of her vision for the clinic — to provide post-abortion contraception assistance — has yet to be realized.

"The energy expended on fighting to keep abortion legal has interfered with a lot of other things," Widdicombe said.

Widdicombe fell into disfavor with abortion rights groups in early 1990, when she spearheaded a campaign to require a public vote on a citizen-initiated constitutional amendment that would have protected the right to abortion and contraception and barred any further abortion restrictions. She defined the proposal as a "middle-ground position" that recognized that most Missourians want abortion to be legal, but regulated.

Most abortion rights groups opposed her effort because her proposed amendment would also have left in place existing restrictions on abortion, such as a requirement that teen-agers obtain their parents consent and a ban on state financing. They also argued that the initiative was unlikely to succeed and that a defeat would be interpreted as a repudiation of legal abortion.

**Widdicombe ended** the campaign prematurely when an adverse court ruling made it unlikely that her group, StopPAC, could garner enough signatures to put the proposal on the ballot.

A few months after disbanding the campaign, Widdicombe and Allison Gee, a former colleague at Voters for Choice, formed the Health Policy Institute to serve as an advocacy, educational and lobbying organization on public health issues, particularly those that affect women and children.

A related organization, the Health Policy Institute Foundation, does research, develops educational materials, and serves as a clearinghouse for public health information. Widdicombe is director; Gee is director of research.

Shortly after Reproductive Health Services opened its adoption agency, Widdicombe and Gee, who live together, became licensed foster parents for

newborns awaiting adoptive homes. The first child they took in had been born to a woman who used crack cocaine during her pregnancy; he stayed 11 weeks before an adoptive home was found. The sixth child had also been exposed to crack cocaine and alcohol, and it was feared that he would have physical and mental problems. Now 13 months old, he still lives with Widdicombe and Gee, and appears to be developing normally. His adoption awaits the termination of his mother's parental rights.

**Widdicombe became** a foster parent mainly because Adoption Associates needed help coping with an unexpected influx of infants, but she has since an ardent activist on foster care and drug abuse prevention issues. She serves on the state's Foster Parent

Advisory Board and its Alternative Care Review Board and on the St. Louis Juvenile Court's adoption task force, and helping the St. Louis Foster Care Coalition in its effort to recruit more foster families. She is

also helping the Division of Family Services devise a five-year plan for improving children's services in St. Louis.

From last November until late May, Widdicombe was deeply immersed in the problems of pregnant drug users when she served as director of the Women and Infants Safe Escape from Drugs program at St. Louis Regional Medical Center. "It gave me a wonderful window on the problems and helped my thinking about health-care reform evolve," she said.

The hospital experience confirmed her perception that health-care services in the state, for the most part, aren't client-centered.

"They don't start out by asking the right question, which is, 'What does the consumer need?'" she said. "Instead, they organize services to serve the needs of the institution. It takes women three and usually four visits to get Norplant inserted at Regional Hospital. Women who are begging to have their tubes tied can't because of institutional barriers. And there's an anti-poor attitude throughout our health-care system, a lack of tolerance, a

lack of compassion."

**In the last** legislative session, Widdicombe helped shape and lobby for bills that would have provided state liability coverage for doctors who treat Medicaid patients and required that counseling by state-trained "caregivers" be offered to women contemplating abortion. The liability insurance bill was passed by the Legislature but vetoed by the governor; the caregiver bill failed on the House floor.

Widdicombe was also involved with

other less-publicized public health bills on data-reporting by hospitals, the testing of babies for mental retardation and regulation of mammography, as well as ensuring appropriations for a law that provides help to pregnant women.

"I'd call her up with a problem on a bill, and she'd call me back an hour later and it was taken care of," said Land. "She's turned out to be a friend on all sorts of public health issues. She's basically an advocate for good public policy."

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JUDY WIDDICOMBE

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