Planned Parenthood takes aim at some pregnancy-counselling centres

The Planned Parenthood Federation of Canada says some pregnancy-counselling centres that advertise their services in Canada are actually promoting an agenda against abortion. "We're worried that doctors are innocently referring people to these clinics, thinking that they provide the full range of information when they do not," says Bonnie Johnson, Planned Parenthood's executive director.

The issue arose last year when a media report claimed a Calgary counselling centre affiliated with the US-based prolife organization Care Net deliberately misled and intimidated women. "In reality those clinics are antichoice and their main purpose is to coerce a woman into carrying her pregnancy to full term, regardless of what the woman may want

during the counselling sessions," says Johnson, who contends that the centres subject women to "moral and religious judgement, false medical information and strong-arm tactics."

A Care Net spokesperson denied the charges. "Our desire is to serve people in a way that honours the Lord," said Vice-President Lynn Bisbee. The Winter 2000 newsletter from the Richmond, BC, right-to-life group states that Care Net is currently rewriting its guidelines and will require all member centres to submit *Yellow Pages* listings for approval.

Last November the Society of Obstetricians and Gynaecologists of Canada (SOGC) issued a statement condemning counselling centres that provide "misinformation about contraception and sexual and reproductive health issues to Canadian women." It added: "The SOGC believes that pregnant Canadian women should be provided with the information on all health care options available in Canada with integrity and compassion, thereby allowing them to make informed health care decisions."

Johnson said there is nothing her group can do to stop the counselling centres from providing whatever information they see fit. "We're trying to look at this from a purely medical and health-promotion point of view," Johnson said. "We are trying to set aside ethical or religious beliefs and ensure that women receive accurate and complete information about their pregnancy options." — Steven Wharry, CMAJ

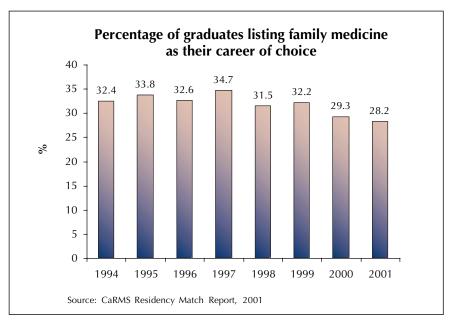
PULSE

Anesthesia the sleeper in 2001 residency match

The Canadian Resident Matching Service matched the vast majority of graduating medical students (94%) with residency training programs in this year's match. Well over half of graduates (59%) got their first choice of both discipline and training program, while 86% matched to their first-choice discipline. Of the 42 Canadian students who went unmatched in the first round, 40 were matched in the second iteration, with 78% matching to their first-choice discipline.

The University of Ottawa, followed by McMaster University and the University of Saskatchewan, had the highest proportion of graduates matching to their first-choice specialty, with all 3 surpassing 90%. Memorial and McGill universities and the University of Toronto had the highest proportion of graduates remaining for postgraduate training, but overall more than half of graduating students (55%) ended up moving to a new faculty of medicine.

Women were more likely to match to their first-choice discipline (85%) than men (78%). This year's match saw a 23% decrease in the number of men choosing internal medicine, although the decline was offset somewhat by a



17% increase in the number of women selecting this discipline.

The trend away from the selection of family medicine as a first-choice discipline (see *CMAJ* 2001;164[8]:1194) continued, with 91 of the 476 family medicine positions (19%) left unmatched after the first round. Anesthesia was a very popular choice in the 2001 match and

was oversubscribed, a marked change from the results just 5 years ago. There was a 40% increase in the number of men ranking anesthesia as their first choice. However, orthopedic surgery, which traditionally has been a popular choice, did not fill all of its positions during the first iteration of the 2001 match. — *Lynda Buske*, lynda.buske@cma.ca