

# The Woman and Abortion

ANNA LOU HALL

37

A harried Seventh-day Adventist college student called his pastor and asked in desperation, "What is the church's position on abortion?"

"It is illegal in this state," the minister replied, "and the church's position is that we should abide by the laws of the state in such matters."

"What if a person goes where abortion isn't illegal?"

The conversation continued, and the boy admitted that his fiancée was pregnant. Because he had long years of education ahead of him, they felt they simply could not be married and support a child at the time. With the advice and help of the girl's physician father, they decided to abort the child by means of drugs. However, the drug did not have its usual effect; and since the pregnancy was not terminated by this means, the drug had almost surely done irreparable harm to the embryo. The expectation was that the girl would give birth to a hopelessly deformed, mentally deficient child if the pregnancy were to continue. The abortion was finally performed in another country.

Some persons who take the law into their own hands are not so fortunate. No one knows how many illegal abortions are performed annually in the United States, but estimates range from 200,000 to 1,500,000. Some say that in urban areas at least one in five pregnancies ends in induced or criminal abortion. In these cases the incidence of infection is high, and deaths resulting from infected abortions constitute 30 to 35 percent of maternal deaths from all causes. If these figures are correct, surely many Seventh-day Adventist physicians, and not a few ministers and guidance counselors, have had to deal with the moral problems involved in abortion — and will have to deal with these problems more often in the future.

A few years ago even the mention of abortion was taboo, but a recent

National Opinion Research poll shows that the majority of Americans, including Catholics, now favor liberal abortion laws. In 1967 an American Medical Association survey of 40,000 American doctors found that 86.9 percent favored liberalization, and the AMA House of Delegates backed the change of existing laws. This was the first policy change on the subject since 1871, when the organization stated that it was the duty of every physician in the United States to resort to every means in his power to rid society of this practice. In June 1970 the AMA voted for the first time in its 123-year history to allow doctors to perform abortions for social and economic reasons as well as for medical reasons. The House of Delegates voted 103 to 73 to consider performing abortions ethical, provided that accredited physicians perform the operation in an accredited public health facility and that two other physicians be consulted.

Since 1967 at least a dozen states and the District of Columbia have altered their abortion laws to make it possible for a woman to obtain a legal abortion on grounds other than rape, incest, or probability of bearing a deformed child.

Why should existing abortion laws be reformed? What significance will these changes have for a Seventh-day Adventist? What ethical principles do Seventh-day Adventist professional counselors use in making decisions about abortion? What can be done about the suffering, and often death, that result from the traffic in illegal abortions? Surely these questions merit attention from conscientious Adventist physicians and counselors.

# I

I decided to interview or correspond with as many qualified counselors as I could, in order to bring out their views so that others might be provoked to think about the abortion question. The following discussion is the result of fourteen productive interviews. Seventeen Adventist counselors were interviewed; six of these were ministers, nine were physicians, and two were guidance counselors with specialized training in psychology. Only one stated that he had had no experience with the abortion problem. Each person based his views on considerable experience, and almost all agreed that a discussion of the problem would be useful and desirable. The average frequency with which each counselor was approached about abortion was estimated to be six times per year, and some of the women desiring abortion (an unstated percentage) were Adventists. Two of the ministers stated that they knew of other Adventist women who had obtained abortions for non-medical reasons, but these were cases on which they had not been consulted.

Although the number of legal abortions has risen in states with liberalized laws, the illegal traffic continues, probably because of the high cost of a legal abortion in an accredited hospital. The doctor's fee, fees to obtain the confirmation of specialists, the cost of the surgery, and hospitalization can run the total bill up to two thousand dollars. If a woman can afford such fees, she is likely to go to other states or countries where safe abortion is more easily arranged.

When the poor learn that abortions are legally permitted and begin to apply for them, what then? When poor people with sound reasons for applying for abortion confront an Adventist doctor, will he help them by lowering fees? One Adventist physician, asked what he would do in such a situation, shrugged and said, "Well, I believe in charging all that the traffic will bear — period." If he did charity work for such people, he reasoned, he would make himself an easy mark for those who wished free care.

Among the counselors questioned it was a common opinion that a better solution would be to accept as many patients as possible who have a legitimate need, regardless of their ability to pay. If a physician's family were to suffer because of his charitable practices, that might be going too far; but nonmedical persons make the observation that this does not often happen, especially in America. When Christ healed the ten lepers, nine may have been unworthy, one might observe, but they were cleansed along with the one who was worthy.

As for the poor — what can be done about the obstacle of high hospital costs? "There are county hospitals to serve a large number of these people," said one physician. "If such people could be cared for in outpatient clinics, it would cut costs," suggested a counselor. "Do everything possible to make effective contraception more widely available," said another. "An ounce of birth control practice is worth the proverbial pound paid for the hospital costs of an abortion." The latter solution, of course, was aimed at reducing the need for abortion, but it cannot be taken lightly.

Would most Adventist physicians favor abortion based on the statistical probability of abnormality of the fetus? "No," stated one physician. "To destroy normal fetuses for the sake of eradicating the abnormal suggests an inversion of value priority, and I would object to this as unethical." "Yes," said another. "At least I'd consider it carefully, especially if the statistical probability were high enough. I worked for six months in a state school for mental defectives, and that experience changed my mind about a number of things."

What will happen to a physician's reputation if he performs abortions?

One doctor said that he had not accepted such patients and would continue to discourage them even if laws were considerably liberalized in his state, because he felt that it would tarnish his reputation as a Christian physician to perform abortions. I asked him if he felt that an embryo or fetus could be considered a person or if an abortion could be considered murder, and he replied, "That is a question for the theologians to decide. I have no opinion on that." Yet the specter of the large number of maternal deaths from infected criminal abortions seems to indicate that, at least for some physicians and counselors, immediate decisions do have to be made, without benefit of guidance by church authorities.

Another doctor brought up a question that might be pondered by those who feel that abortion, except in extreme cases, is immoral. The intrauterine device, prescribed by many physicians to prevent pregnancy, can also be considered an abortifacient, since it prevents the already fertilized ovum (a potential person) from being implanted in the uterine wall so that it will grow to maturity. Is this less immoral than ending the life of the embryo or fetus a few weeks later for women who simply do not want the child but have no other reason for an abortion?

All the persons interviewed felt that abortion laws would continue to be liberalized and that more patients would obtain medically safe abortions if such were permitted for reasons of mental health. The states in which new liberal laws have been in effect for more than a year have shown this to be true; the majority of abortions were performed to preserve the woman's mental health.

Each interviewee was asked what he would do (if he were given legal freedom) if he were faced with a distraught patient seeking to obtain an abortion. No position evolved that most counselors could agree with. Some felt that there are very few good reasons for abortion, and that the idea of "abortion on demand" is completely indefensible. Said one physician, "In the vast majority of cases, women who ask for an immediate abortion are not emotionally capable of making such long-range decisions. If I performed abortions on these women, most of them, and especially the Adventists, would have tremendous feelings of guilt afterward, so that 'the end' of those women would be worse than 'their beginning.' "

A counselor of much experience in one Adventist college said that he had indeed found this to be true — many women who had abortions did have misgivings and guilt feelings later. One Adventist woman who had come to him for counseling and had gone ahead with the abortion said later, "I'm now married to a fine man; but I feel that even if God has for-

given me I am in many ways still paying the price for the murder of my unborn child. . . . For I still cannot help but feel that that is what it was — murder.”

Other clients of the same counselor, however, felt no real guilt and seemed to be able to forget “those things which are behind.” When deciding whether to advise abortion, this counselor felt that he would have to investigate thoroughly the person’s psychological background to determine as far as possible the aftereffects that might be expected. “I would not say to the patient, ‘You have done a wicked thing; now you must pay the price of bearing the child.’ This, I feel, is not the solution. One must look for the common good of all, and not be vengeful,” he said thoughtfully.

41

One person suggested that perhaps we should look at the abortion problem from a different viewpoint. We ought to consider the positive arguments for abortion, as well as to decide whether the absence of moral reasons against it can be demonstrated.

An Adventist pastor in a large church felt that, theologically, he could condone abortion for mental, economic, and social reasons. “You have to ask yourself, ‘What chance will this child have?’ Ellen White felt that it was a sin to bring children into the world if they could not be provided for properly.” And although evil is not transmitted directly through the genes and chromosomes, it is true that “many children have received as a birth-right almost unconquerable tendencies to evil” (*The Adventist Home*, p. 256).

## II

To many Adventists, the term *situation ethics* seems like a serpent in sheep’s clothing, and such people might feel that the sixth commandment would outlaw all abortion except when the mother’s actual physical life is threatened. Although the law of God is unchanging and unchangeable in principle, many people fail to see that each of us at some time in his life is compelled to choose the lesser of two evils (the above exception is itself an example). Often the decision about which is the lesser evil must be made after considering more than one factor.

In the case of abortion, the principle of the preservation of life and personhood is absolute. But the preservation of personhood must take precedence over the preservation of life. An unborn child may or may not be considered a person, but the members of his family have already achieved this status and can be considered a higher form of life. This question is therefore relevant: Should concern for the fetus be balanced by concern for the happiness and welfare of other family members? Perhaps the way of the

transgressor (or the careless) ought not to be easy. But should innocent children suffer the results of their parents' transgression?

To sum up, in the words of a prominent Adventist educator: "If a fetus, or even an older unborn child, were to threaten the personal existence of its mother (or family), actions designed to preserve the existence of the one higher on the scale of value would be appropriate. Her personal existence means more than actual physical life. It also includes her capacity to function as a human being."