

## **Answers to Common Pro-Abortion Arguments**

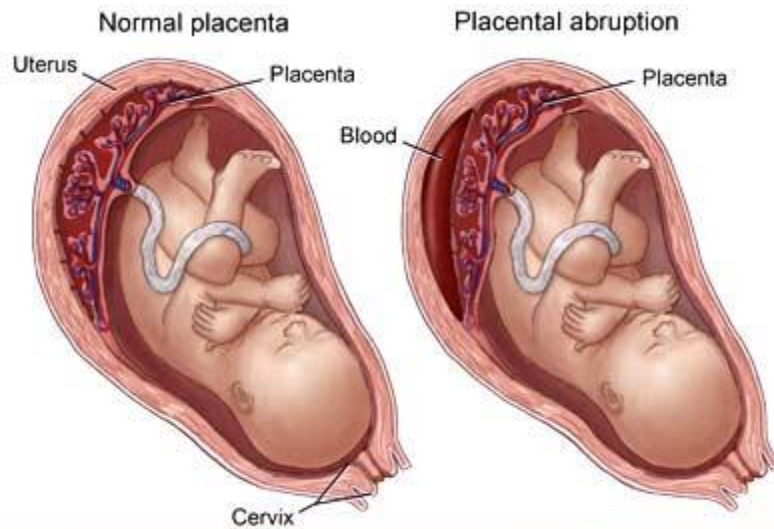
### **Dr. J. Alan Branch**

Tim Tebow was an All-American quarterback who played four years for the University of Florida. During his tenure with the Gators, Florida won two National Titles and Tebow won the Heisman Trophy. Especially painful to me personally is that Tebow led the Gators to defeat the Georgia Bulldogs three out four years, twice putting over 40 points on the Dawgs. Tebow's parents, Bob and Pam Tebow (both Florida graduates), started the Bob Tebow Evangelistic Association in 1985, an independent missionary organization with special emphasis on the Philippines.

Tim Tebow was born in 1987 in the Philippines. During Pam Tebow's pregnancy with Tim, she battled a terrible infection caused by a pathogenic amoeba. The drugs used to treat Pam's infection caused a placental abruption. A placental abruption is a separation of the placenta (the organ that nourishes the fetus) from the site of uterine implantation before delivery of the fetus.<sup>1</sup> It is a very serious pregnancy complication; it is dangerous to the baby and can be very dangerous to the mother as well. The following diagram from the Mayo Clinic shows the condition clearly.

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<sup>1</sup> Definition from Medline Plus. Electronic Resource available at <http://www.nlm.nih.gov/medlineplus>. Accessed January 27, 2010.



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Placental abruption can deprive the baby of oxygen and nutrients and cause heavy bleeding in the mother. Left untreated, placental abruption puts both mother and baby in jeopardy. Physicians encouraged Pam Tebow to abort her child, but she courageously chose to carry her baby to term. Both Pam and her baby, Tim, survived the pregnancy.

Because of their story, Pam and Tim Tebow produced a pro-life advertisement to be aired during the 2010 Superbowl. Paid for by Focus on the Family, the ad simply presented a positive message about choosing life. Pro-Choice groups were infuriated at Tebow and CBS (broadcaster of the Super Bowl) and attacked Tebow furiously. Tebow responded and said:

I know some people won't agree with it [the ad]. But I think they can at least respect that I stand up for what I believe. I've always been very convicted of [his views on abortion] because that's the reason I'm here, because my mom was a very courageous woman.<sup>2</sup>

<sup>2</sup> Brinda Adhikari, "Tim Tebow Super Bowl Ad: Anti-Abortion Commercial to Air." Electronic resource available at <http://abcnews.go.com>. Accessed January 27, 2010.

"This ad is frankly offensive," said Erin Matson, the Action Vice President of the National Organization for Women, speaking of the Tebow commercial. "It is hate masquerading as love. It sends a message that abortion is always a mistake."<sup>3</sup> Matson herself is one of the most noted young feminists in the United States.

One is perplexed that Matson would suggest that the Tebows secretly harbor hatred. The Bob Tebow Evangelistic Association operates an orphanage in the Philippines called "Uncle Dick's House" that is the home to fifty children. The Tebows' ministry has also assisted in rescuing young girls from slavery in Thailand. While Matson indicates that she finds the ad "offensive," what I find offensive is her apparent opposition to the freedom of speech protected by the First Amendment. Actually, what really angers NOW is that anyone would dare suggest that any abortion is morally wrong. The reason I bring up this story here is that Matson's comments reflect the sort of ad hominem arguments that one will often hear from abortion rights advocates, often betraying the fact that the deeper argument is really a worldview argument pitting secular ideas with faith-based ideas.

In what follows, I will attempt to summarize and respond to some common pro-abortion arguments. I encourage students to remember that often the debate will not be reasoned, but instead will involve name-calling.

## **I. Abortion Doesn't Really End a Human Life**

### **A. Argument Stated**

Some pro-abortion advocates actually claim abortion is not really ending a human life. For example, in their secular book on gender titled *Man & Woman / Boy Girl*, John Money and Anke

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<sup>3</sup> Brinda Adhikari, "Tim Tebow Super Bowl Ad: Anti-Abortion Commercial to Air."

Ehrhardt urge young girls to use contraception to explore sex as teenagers. They then add that if contraception fails, the girls should abort the babies and say, "A girl should prefer an early abortion by the very simply suction method, prior to the end of the second month of gestation. The procedure is then equivalent of inducing the period, and has none of the hormonal or sentimental accompaniments of terminating a new life."<sup>4</sup>

## **B. Response**

Money and Ehrhardt are lying: the baby may be tiny and early in development, but it is human life. Behind this misleading argument is actually the nebulous concept of "personhood." What Money and Ehrhardt really mean is that the baby at early gestation has not achieved the moral and legal status of a person. This is the same argument Blackmun made in *Roe*.

## **II. Back Alley Abortions**

### **A. Argument stated**

Argument stated: "If abortion is made illegal, "back-alley" abortions will multiply and will injure or kill many women." This argument is very common as is seen in the ubiquitous "coat-hanger" symbol present at many pro-choice rallies. Why is a wire coat hanger a symbol of back alley abortions? Because some people have used wire coat hangers to induce an abortion by inserting them via the vagina into the uterus to puncture the placenta and thus cause a miscarriage. Pro-abortion advocates thus argue that if abortion is made illegal, women use dangerous methods to attempt abortions, like using a coat hanger.

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<sup>4</sup> John Money and Anke A. Ehrhardt, *Man & Woman / Boy & Girl* (Baltimore: The Johns Hopkins University Press 1972, 194.

## B. Response

### 1. Compassion

As Christians, we should feel compassion for women who are so desperate that they will attempt an unsafe procedure in order to end a pregnancy. The Church should offer monetary and spiritual support to such women. Christian Life homes sponsored by churches give pregnant women hope.

### 2. Bad Data

Prior to *Roe*, pro-choice advocates claimed that 5,000 – 10,000 women died every year in the United States. We now know this data was false. This argument is based on very questionable statistics about the number of women who actually died prior to 1973 in “back-alley” abortions. This is not to say *no women* died in botched abortions, but it is to say the numbers were vastly over-inflated.

### 3. Question Begging

The “back alley abortion” argument engages in “question-begging.” Question-Begging occurs when one assumes what one is trying to prove. In this case, the argument only works by assuming that the unborn are not fully human. If, in fact, the unborn are not human, then outlawing abortions is tantamount to outlawing appendectomies. But, if the unborn *are* fully human, “this abortion rights argument is tantamount to saying that because people die or are harmed while killing other people, the state should make it safe for them to do so.”<sup>5</sup>

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<sup>5</sup> Francis J. Beckwith, *Politically Correct Death: Answering Arguments for Abortion Rights* (Grand Rapids: Baker, 1993), 55.

### III. Abortion Prevents Abuse of Unwanted Children

#### A. Argument Stated

Argument stated: “If abortion is illegal, then the number of unwanted children will proliferate and result in more abused children.”

#### B. Response

First, much like the previous argument, this “prevention of abuse” argument begs the question by assuming that unborn children are not human. Only by so doing can it work. For, “If the unborn are fully human, like the abused born children that we readily admit are fully human, then to execute the unborn is the worst sort of child abuse imaginable.”<sup>6</sup>

Secondly, Beckwith says, “It is very difficult to demonstrate that the moral and metaphysical value of a human person is dependent on whether someone wants or cares for that human person.”<sup>7</sup>

Third, child abuse actually increased in statistical frequency in the years since *Roe*, though the data has leveled off some in subsequent years. The number of child maltreatment cases in the U.S. peaked between 1994 and 1996, reaching 1,032,000 reported cases in 1994. That number decreased to 674,000 reported cases in 2017 and 656,000 cases in 2019.<sup>8</sup>

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<sup>6</sup> Beckwith, *Politically Correct Death*, 63.

<sup>7</sup> *Ibid.*

<sup>8</sup> The U.S. Department for Health and Human Services, Administration for Children and Families, Administration on Children, Youth and Families Children’s Bureau, *Child Maltreatment 2019*, ii, <https://www.acf.hhs.gov/sites/default/files/documents/cb/cm2019.pdf>.

## **IV. Handicapped Children Will Face a Life of Misery**

### **A. Argument Stated**

Argument stated: “Legalized abortion keeps handicapped children from facing a life of misery.” This argument appears in various forms, usually appealing to the sadness the average person has for a child who is struggling with a birth defect or serious disease. Pro-abortion advocates use good human emotions, sadness and compassion for suffering infants, and arrive at an unexpected conclusion considering the emotions in play: end the child’s suffering by denying the child the opportunity to live! In this way, pro-abortionists play a kind of “bait and switch” game; they begin with the suffering of small children and then switch to moral justification of a very violent act, abortion. Peter Singer uses the suffering argument to justify both abortion and infanticide, saying, “If newborn infants were not regarded as having a right to life until, say, a week or month after birth it would allow us to choose on the basis of far greater knowledge of the infant’s condition than is possible before birth.”<sup>9</sup>

### **B. Response**

The “abortion saves a handicapped child from suffering” argument presumes that certain features are absolutely necessary for happiness. In fact, many handicapped people are more comfortable with their own weaknesses than their “normal” friends.

## **V. The Horror of Rape and Incest**

Rape and incest are two of the most horrible events one can experience in life. Because of the violent and exploitative nature of

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<sup>9</sup> Peter Singer, *Practical Ethics* (Cambridge: Cambridge University Press, 1979), 136 -137.

both acts, many people believe abortion should be legal in cases in which the pregnancy is the result of rape or incest.

### **A. Rape, Incest, and Pro-Choice Arguments**

Argument stated: “Legalized abortion keeps women from continuing to suffer the effects of rape or incest.” Arguments for abortion rights based on the hard cases of rape and incest are the most emotionally compelling in popular discourse. Since both cases present a pregnancy resulting from a sexual assault, the argument states that since a woman had sex against her will she should not be forced to carry a child to term against her will. Pro-life ethicist Scott Rae summarizes the key premise of this argument and says, “At the heart of this argument is the premise that a woman should not be held responsible for sex that is forced upon her, and thus should have the right to end a pregnancy that came about through rape or incest.”<sup>10</sup>

#### 1. Rape

The Federal Bureau of Investigation defines rape as follows: “The penetration, no matter how slight, of the vagina or anus with any body part or object, or oral penetration by a sex organ of another person, without the consent of the victim.”<sup>11</sup> Rape is an act of aggression and power combined with some form of sex. A person is forced into sexual contact through verbal coercion, threats, physical restraint, and/or physical violence. Consent is not given.

When one thinks of rape, typically the word brings to mind a stranger in a parking lot or an intruder in a home. In fact, the Center

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<sup>10</sup> Scott Rae, *Moral Choices: An Introduction to Ethics*, 2<sup>nd</sup> ed. (Grand Rapids: Zondervan, 2000), 136.

<sup>11</sup> U.S. Department of Justice, “Attorney General Eric Holder Announces Revisions to the Uniform Crime Report’s Definition of Rape,” January 6, 2012. <http://www.fbi.gov/news/pressrel/press-releases/attorney-general-eric-holder-announces-revisions-to-the-uniform-crime-reports-definition-of-rape>. (Accessed March 20, 2013).



for Disease Control says that in eight out of ten rape cases, the victim knows the perpetrator.<sup>12</sup> Furthermore, many young women are in more danger of rape at a fraternity party where large amounts of alcohol are present. According to the Center for Disease Control, approximately 36,000 pregnancies occur in the United States each year as a result of sexual assault. Rape is a violent and disgusting crime in which men exploit women as sexual targets of opportunity.

## 2. Incest

As one might imagine, the categories of rape and incest overlap to a degree because many perpetrators of incest rape their younger and more defenseless victims. The FBI defines incest as “nonforcible sexual intercourse between persons who are related to each other within the degrees wherein marriage is prohibited by law.”<sup>13</sup> A rape by force involving a female victim and a familial offender is counted as a forcible rape and not an act of incest. So, if someone in a family is forced into a sexual act, then that crime is recorded as rape. My point is that the categories overlap in reporting.

### **B. Christian Response**

We must begin by affirming the horrible nature of both rape and incest. Furthermore, sexual assault against women is in fact far too common. We live in a culture that fosters sexual assault by promoting images that objectify women. As an act of violence, rape stands under the uncompromising condemnation of God. Psalm 11:5 says, “The LORD tests the righteous, but his soul hates the wicked and the one who loves violence.”

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<sup>12</sup> Sexual Violence Fact Sheet. Electronic resource available from the Center For Disease Control at <http://www.cdc.gov/ncipc/factsheets/svfacts.htm>. (Accessed November 21, 2007).

<sup>13</sup> U.S. Department of Justice, “Incest.” [http://www.fbi.gov/about-us/cjis/ucr/sex-offense-report/incest.pdf/at\\_download/file](http://www.fbi.gov/about-us/cjis/ucr/sex-offense-report/incest.pdf/at_download/file). (Accessed March 20, 2013).

Yet, one must demonstrate that the rape/incest argument really is relevant to abortion on demand as it is practiced in the United States. Proving this exception (rape and incest) does not prove the general rule (abortion on demand). Instances where a woman seeks an abortion because of rape are an extremely small percentage of abortions performed in the United States each year. Furthermore, the tragic instance of rape does not nullify the fact that the pre-born human is in fact a human.

Children conceived via rape are still humans made in the image of God. They are not less valuable because of how they were conceived. Deuteronomy 24:16 (NASB) says, "Fathers shall not be put to death for their sons, nor shall sons be put to death for their fathers; everyone shall be put to death for his own sin." Based on Deuteronomy 24:16, a case can be made that the unborn child conceived via a violent act of rape should not be put to death because of his or her father's sin.

Ethel Waters (1896 – 1977), one of the greatest vocalists in the history of America, was conceived via rape. Late in life, she rededicated her life to Christ and often sang at Billy Graham crusades, with her signature song being *His Eye Is On The Sparrow*.

Layne Beachley, seven-time world champion surfer, was conceived via rape. Her mom gave her up for adoption and her new family lived near the ocean! The rest is history.

### **C. Rape, Incest and Bad Information from Pro-Life Advocates**

In the Christian Ethics book *Ethics for a Brave New World*, John and Paul Feinberg say, "The emotional trauma of the act may prevent ovulation, the offender may experience impotence, or the woman

may use contraceptives or be in the infertile period of the month.”<sup>14</sup> The claim that the emotional trauma of rape may prevent ovulation is one that has been repeated by some elements of the pro-life community for many years. The apparent origin of this argument is an article written by Dr. Fred Mecklenburg in a 1972 pro-life book titled *Abortion and Social Justice*, a book composed of various articles by different authors critiquing various aspects of the pro-abortion position. At that time Mecklenburg was an assistant professor of obstetrics and gynecology at the University of Minnesota Medical School. Mecklenburg’s article was titled “Indications for Induced Abortion.” Commenting on the potential for a woman to become pregnant via sexual assault, he said, “The probability of pregnancy resulting from rape is considerably lower than what would be expected from a single unprotected act of coitus.”<sup>15</sup> Mecklenburg mentioned four reasons why pregnancy was less likely during rape: First, a completed act of intercourse does not occur in every rape; second, it is improbable that a woman will be raped on one of the few days a month when a woman is fertile; third, emotional trauma will cause a woman not ovulate; fourth, men who rape are frequently infertile.

Of Mecklenburg’s four points of argumentation, his third point is the most controversial. Mecklenburg explained his reasoning and said:

Medical research indicates that a woman exposed to emotional trauma (such as rape) will not ovulate even if she is “scheduled” to. In Germany, during World War II, the Nazis tested this hypothesis by selecting women who were about to

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<sup>14</sup> John Feinberg and Paul Feinberg, *Ethics for a Brave New World*, 2<sup>nd</sup> ed. (Wheaton, IL: Crossway Books, 2010), 127. While not as explicit as the Feinbergs, Geisler apparently makes mention of the same wrong-headed idea when he says, “Furthermore, due to understandable physical and psychological circumstances, few pregnancies ever occur from rape.” Norm Geisler, *Christian Ethics*, 2<sup>nd</sup> ed. (Grand Rapids: Baker Academic, 2010), 140.

<sup>15</sup> Fred E. Mecklenburg, “The Indications for Induced Abortion: A Physician’s Perspective,” in *Abortion and Social Justice*, Hilgers and Horan, eds. (New York: Sheed & Ward, 1972), 49.

ovulate and sending them to the gas chambers, only to bring them back after their realistic mock-killing, to see what effects this had on their ovulatory patterns. An extremely high percentage of these women did not ovulate.<sup>16</sup>

Mecklenburg reemphasizes his argument in the paragraph immediately following the quote cited above. He argues that rape is difficult to prove and that not every woman who claims she was raped actually was raped: "How does one define or prove rape when the allegation is made many weeks or months later? In all too many cases, the rape victim is in fact not a victim at all, but very much a rationale participant."<sup>17</sup> All the contours of Mecklenburg's argument are not clear at this point, but what he seems to be driving at is this: In cases of *real* trauma, a woman will not ovulate. If the woman does ovulate and get pregnant, then the encounter she claims was "rape" must not have been that traumatic and was likely consensual.

Mecklenburg's comments from 1972 became of great interest during 2012 because of comments made by Rep. Todd Akin of Missouri during his campaign for the United States Senate. While being interviewed by St. Louis TV station KTVI, Akin was asked what he thought about abortion in cases of rape. Akin answered:

First of all, from what I understand from doctors, that's really rare. If it's a legitimate rape, the female body has ways to try to shut that whole thing down. But let's assume that maybe that didn't work or something. I think there should be some punishment, but the punishment ought to be on the rapist and not attacking the child.

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<sup>16</sup> Mecklenburg, "The Indications for Induced Abortion," 49. Mecklenburg's citation for his information is A. Hellegers, U.S.C.C. Abortion Conference, Washington, D.C., October 1967.

<sup>17</sup> *Ibid.*, 49.

When Akin refers to “doctors,” he apparently has Mecklenburg’s arguments in mind.

What do we make of the comments by Mecklenburg as amplified by Akin? I know of no modern research that supports Mecklenburg’s claim and personally I find it absurd. Furthermore, Mecklenburg’s argumentation misses the fact that a woman may have ovulated *prior to a rape!* Even if Mecklenburg’s claim is true that the trauma of rape will shut down ovulation – and I am convinced it is not – he misses the obvious fact that the timing of ovulation is not connected to sexual intercourse. Once an egg is released and is ready for fertilization, it will continue to be a viable egg for 12 – 48 hours. So, a woman could ovulate on Monday and be raped on Tuesday and thus get pregnant. It is frustrating that an OBGYN physician and clinical instructor overlooks this flaw in his own argument. Furthermore, it is unfortunate that the Feinbergs allude to the idea. Women can and do get pregnant when they are raped. When Christians carelessly repeat faulty arguments, it distracts public discourse away from the violent and tragic nature of abortion.

## **VI. Abortion, Murder, Death Penalty for Women Who Abort**

### **A. Pro-Abortion Argument Stated**

Pro-Abortion advocates use the issue of the death penalty and the language of murder in an attempt to place pro-life advocates on the horns of a dilemma, saying, “If abortion is murder, then pro-life advocates must logically demand the prosecution and imprisonment of women who have an abortion or people who perform the abortion. If you are a Christian who supports the death penalty for murder, then logically you should argue for capital punishment for abortive women and abortionists.” This argument is rather ingenious and usually follows a format similar to the following:

1. You pro-life advocates say, "Abortion is murder!"
2. Most of you pro-life advocates claim murder is a capital offense and should be prosecuted as such.
3. If you pro-life advocates are consistent in your views, you should want to prosecute women who have had an abortion with a capital offense.
4. Most of you pro-life people say you *do not* want to prosecute women who have had an abortion with a capital offense.
5. Therefore, if you don't believe abortion should be prosecuted as a capital offense, then you really don't mean it when you say abortion is "murder."
6. Thus, your arguments against abortion based on the purported of the sanctity of life are inconsistent.

This argument's strength lies in the fact that the person making this argument knows that most pro-life advocates do not want to see women who abort prosecuted for murder. Since this is so, the pro-choice advocate then says, "Aha! See, you don't even consider the pre-born child to be a human or you would want to prosecute these women for murder!"

The pro-abortion advocate at this point is trying to push the pro-life person to an uncomfortable position of saying, "Consistency in using "murder" to describe abortion means we should demand punishment for a woman who aborts." She should be treated much like a wife who hires a hit-man to execute her husband. In both cases, a third-party is contracted to "do the deed."

Does the pro-life reluctance to press for stern punishment show our hard rhetoric to be hollow? This is a good challenge to our stance and argumentation.

## B. Response

Allow me cautiously to venture a response. In many (most?) cases here in the U.S., the people aborting do not consider the child to be human. As pro-life Christians, we know this fundamental assumption is false, but it is central to their moral reasoning. It is a wrong-headed moral assumption taught to the average person by informed societal elites. Because “authorities” have told people abortion is acceptable, the average person may act on such bad information. In this way, our primary response to the person who aborts is pity and compassion because they have believed lies. I strongly suspect this underlies a great deal of the pro-life reluctance to suggest stern punishment for parents who have an abortion.<sup>18</sup> This pro-life tendency is itself a reflection of the tension between moral rigor and mercy often seen in Scripture itself.

One reason why many Christians want to extend mercy to abortive mothers is our awareness that many pregnant women are placed in duress and experience a degree of coercion to abort. An irresponsible boyfriend may say, “I will pay for an abortion, but I will not help you support this child.” In other cases, a teenage girl still living at home may be threatened with expulsion from home if she does not abort. Threatened with being homeless and pregnant, she feels she has no other options.

Gerard V. Bradley, professor of law at Notre Dame responds to the “capital punishment for abortion” argument and says:

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<sup>18</sup> Mark Coppenger suggested this form of response to parents who abort their children: “One big consideration is that the ones involved, both the child-bearer and the child-killer, typically don’t believe that the child is fully human at this point. Maybe they’re like a fellow who shoots a man knocking on his door, a man suffering from both dwarfism and neurofibromatosis type I/ Proteus syndrome (cf. Elephant Man), thinking the visitor is a Martian. The homeowner intended to do the shooting, but he didn’t really know what he was doing -- a mitigating factor if not an extenuating one.” Personal email correspondence, December 5, 2015.

First, not all abortions are culpable homicides, even when the unborn are recognized as “persons.” Some (perhaps most) “abortions” for the sake of the mother’s life do not intend fetal death as either an end or a chosen means. These procedures are not “abortions,” or at least not “direct” abortions. They are certainly not murders. Many, if not most, are justifiable acts of self-defense. . . . The specific wrongness of abortion, on this view, is the patent unfairness to unborn persons of killing them for reasons less than a mortal danger to the pregnant woman.<sup>19</sup>

Bradley separates himself from the position of someone like Andrew Lester who claimed a concept of “self-defense” to substantiate abortion on demand. In contrast, Bradley correctly notes self-defense is indeed somewhat applicable to situations where a mother’s life is in imminent danger. In these cases, no right-thinking person would advocate a charge of murder when the child is aborted to save the mother’s life. Bradley goes on to point out that prior to *Roe*, abortion was indeed treated as a lesser form of homicide. Instead of prosecuting the women who abort for convenience, Bradley suggests that the abortion providers would be the ones prosecuted. I concur: It is not the abortive women and men (though morally culpable) as much as the abortionists who are guilty of the act itself.

## **VII. Judith Jarvis Thomson and the “Plugged in Violinist”**

### **A. Thomson’s Argument**

Perhaps the most well-known defense of abortion rights is Judith Jarvis Thomson’s “Plugged in Violinist” argument. Thomson was a professor at M.I.T. beginning in 1964 and taught there for many years. She published a famous article in 1971 in the journal

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<sup>19</sup> Gerard V. Bradley, Prepared Testimony before the Subcommittee on the Constitution, Federalism, and Property Rights on the Committee on the Judiciary United States Senate: Examining the Status of the Supreme Court Decision *Roe v. Wade* 25 Years Later (Washington, D. C.: GPO, 1998), 11.



*Philosophy and Public Affairs* titled, "A Defense of Abortion."<sup>20</sup> In this article, Thomson contends that even if one grants the pro-life position that the fetus is a person, granting this premise in itself does not entail the right to life of the fetus. Instead, being a person only guarantees that one's life is not taken in an unjust manner. In one of the most often quoted paragraphs in the abortion debate, she offers the following hypothetical situation to prove her point:

But now let me ask you to imagine this. You wake up in the morning and find yourself back to back in bed with an unconscious violinist. A famous unconscious violinist. He has been found to have a fatal kidney ailment, and the Society of Music Lovers has canvassed all the available medical records and found that you alone have the right blood type to help. They have therefore kidnapped you, and last night the violinist's circulatory system was plugged into yours, so that your kidneys can be used to extract poisons from his blood as well as your own. . . . To unplug you would be to kill him. But never mind, it's only for nine months. By then he will have recovered from his ailment, and can safely be unplugged from you.<sup>21</sup>

Thomson asks if one is morally obligated in such a case to keep the violinist alive. Her answer is, "No." Thomson then applies this analogy to a pregnancy and asks if a mother is obligated to keep a pre-born child alive and once again answers, "No." I will offer four brief responses to Thomson's case.

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<sup>20</sup> Judith Jarvis Thomson, "A Defense of Abortion," *Philosophy and Public Affairs* 1.1 (1971): 47-66. This article has been reprinted in many places and on the web. I am citing from Judith Jarvis Thomson, "A Defense of Abortion," in *Ethics in Medicine: Historical Perspectives and Contemporary Concerns*, Reiser, Dyck, and Curran, eds. (Cambridge, MA: MIT Press, 1977), 425-432.

<sup>21</sup> *Ibid.*, 425.

## B. Response to Thomson

First, because Thomson implies that moral obligations must be voluntarily accepted in order to have moral force, Thomson “mistakenly infers that all true moral obligations to one’s offspring are voluntary.”<sup>22</sup>

Secondly, Thomson’s analogy is flawed at several points. First, unlike the violinist, an unborn child is by her very nature dependent on her mother. The womb *is the natural environment* for a pre-born human, unlike Thomson’s example which posits a contrived environment. Furthermore, a newly born infant is still dependent on her parents, much as a pre-born. One is left to wonder why Thomson makes a moral difference between the intrusion on one’s life caused by a pre-born as opposed to the intrusion to one’s life caused by a newborn. In fact, laws against child abuse signify society’s agreement that children deserve protection.

Third, at best Thomson’s argument can be used in favor of abortion for cases of rape or incest. The Feinbergs clearly state my point and say:

The violinist’s use of the body was without that person’s consent. The mother’s pregnancy is usually with her implied or explicit consent through engaging in intercourse. That is, whenever a woman consents to sexual intercourse, she must understand that she is consenting, explicitly or implicitly, to becoming pregnant if that should eventuate. Adult privileges and pleasures include adult responsibilities!<sup>23</sup>

The vast majority of abortions in the United States are simply for convenience and thus not relevant to Thomson’s argument.

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<sup>22</sup> Beckwith, *Politically Correct Death*, 129.

<sup>23</sup> John Feinberg and Paul Feinberg, *Ethics for a Brave New World*, 2<sup>nd</sup> ed., 114.

Finally, Thomson describes pregnancy as unduly burdensome and places it in the worst possible light in order to add moral force to her argument. Essentially, she calls pregnancy a nine-month involuntary imprisonment in bed.

## **VIII. Twinning and Embryonic Recombination As Arguments Against the Pro-Life Position**

### **A. Argument Stated**

Twinning Argument stated: “Since the possibility of twinning is real until around day fourteen, then we cannot know if an individual life really begins at conception. If you pro-life people say an individual begins at conception, how do you explain the fact that two unique individuals emerge later when twinning occurs?” The Twinning Argument has some force for pro-choice advocates because it seems to mitigate against the individuality of the early embryo. In the influential *Encyclopedia of Bioethics*, Alexandre Mauron makes this very argument and says:

Until about 12 days after fertilization, twinning can occur. In other words, until that stage, a single embryo still has the potential to divide in two embryos, ultimately developing into two separate persons. Therefore there is no intrinsic one-to-one relationship between the zygote and the late embryo, as there is between the late embryo, the fetus, and the born human.<sup>24</sup>

Pro-abortion advocates assert that the potential for division indicates the embryo does not, while it still can divide, possess the intrinsic unity characteristic of a whole distinct organism. Something which can potentially be two cannot really be one. As long as twinning is

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<sup>24</sup> Alexandre Mauron, “Embryo and Fetus: Development from Fertilization to Birth,” *The Encyclopedia of Bioethics*, 3rd ed., vol. 2, Stephen Post, ed. (New York: Thomson and Gale, 2004), 710.

still possible, what exists is not a unitary human being, but only a mass of cells, each one at first totipotent, and then pluripotent, but each cell allegedly independent of the others.<sup>25</sup> Thus, destroying the early embryo via abortion or for research purposes is not akin to taking a human life.

## B. Response

How does one respond to the argument that the potential for twinning indicates a human individual does not exist at the earliest stages of development? First, while there may not be a one-to-one connection between the embryos after twinning and the embryo before twinning, there is in fact a direct connection. Second, Mauron distracts from the deeper issue which is this: What is the early embryo? It is in fact human life and not some other form of life. I agree with the Feinbergs that the most the [twinning] argument shows is that until after the blastocyst, we do not know *how many* persons are present, but that is clearly a different question than whether personhood is present. The Feinbergs say, “If either twinning or mosaics occurs, the change is one of *quantity*, not *quality*.”<sup>26</sup>

A similar problem is presented with Embryonic Recombination. On rare occasions, twin embryos may actually merge and only one person is born. The Feinbergs call these embryos “Mosaics,” but I prefer the term Embryonic Recombination. Chromosomal mosaicism is defined as the presence of two or more different chromosomal complements in a cell and develops in some pre-implantation embryos. A number of genetic diseases are related to this irregularity. Edwin C. Hui points out that the recombination of embryos has only been observed in laboratory conditions, suggesting that early

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<sup>25</sup> This summary derived from Robert P. George and Christopher Tollefsen, *Embryo: A Defense of Human Life* (New York: Doubleday, 2008), 149 – 150.

<sup>26</sup> Feinbergs, *Ethics for a Brave New World*, 95. Emphasis in original.

embryos possess a certain regulatory capacity and ability to repair themselves in the event that a substantial part of the organism has been removed or damaged. Hui goes on to say that this more likely points to the ability of early embryos have the power to “heal,” “transplant,” or “graft.”<sup>27</sup> Again, all this goes to say that the embryo recombination argument does not in fact prove that what is developing inside the mother is anything less than human.

## **IX. The Large Number of Miscarriages / Natural Embryo Loss**

A common pro-abortion argument is that a large number of embryos fail to implant, thus even from a natural law or theistic stance, one should not argue for the protection of early embryonic human life.

### **A. Argument Stated**

Although the statistics on the failure rate of human fertilization are not entirely robust, given the biological and ethical delicacy of conducting research in this area, the data so far consistently suggests that, at minimum, two-thirds of all human eggs fertilized during normal conception either fail to implant at the end of the first week or later spontaneously abort. Moreover, an estimated 31 percent of implanted embryos later miscarry, according to a 1988 *New England Journal of Medicine* study headed by Allen Wilcox of the National Institute of Environmental Health Sciences.<sup>28</sup>

Secular people take the data regarding the large number of miscarriages and argue as follows:

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<sup>27</sup> Edwin C. Hui, *At the Beginning of Life: Dilemmas in Theological Bioethics* (Downers Grove: InterVarsity, 2002), 70.

<sup>28</sup> Stephen S. Hall, “The Good Egg: Determining When Life Begins Is Complicated By A Process That Unfolds Months Before a Sperm Meets An Egg,” *Discover*, May 29, 2004, accessed January 18, 2017, <http://discovermagazine.com/2004/may/cover>. Hall’s title is incorrect: We know when life begins for all of us. He is blurring the distinction between human *life* and human *personhood*, a common mistake among secular thinkers.

1. You Christians claim life is endowed with special value by God at conception. Because of this, you claim abortion is wrong.
2. The majority of conceptions miscarry and do not come to term.
3. If God is in control of everything like you claim, then *God* must not be so very pro-life since the majority of conceptions don't ever make it!
4. If God lets that many babies miscarry, why is it so morally offensive to allow abortion on demand?

## **B. Response**

1. Indeed, there are a great many miscarriages. This fact seems to be part of living in a fallen world where things have been disrupted by sin.
2. A number of these naturally occurring unsuccessful pregnancies are actually due to severe chromosomal defects. George and Tollefsen say, "It seems plausible to infer that in some cases, these defects are so significant that a human embryo probably failed to form. As a result, what is lost in many cases may not be a human embryo."<sup>29</sup> An example of such problems is aneuploidy, the presence of an abnormal number of chromosomes in a cell. Aneuploidy occurs in 5-10% of all pregnancies and is a common reproductive problem. Most aneuploid conceptuses die in utero, resulting in early pregnancy loss.<sup>30</sup>
3. Indeed, God is sovereign and in control. He has the authority to end a life, just as each of us will one day face natural death should

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<sup>29</sup> Robert P. George and Christopher Tollefsen, *Embryo: A Defense of Human Life* (New York: Doubleday, 2008), 137.

<sup>30</sup> M. Suzumori and M Sugiura-Ogasawara, "Genetic Factors as a Cause of Miscarriage," *Current Medical Chemistry* 17.29 (2010): 3431 – 3437.

Jesus Christ tarry his coming. God keeps His own counsel concerning why He ends life when He does, but He is infinitely wise. We humans are not and never will be as wise as God.

4. God has not granted to humans the right to destroy children that are viable.

5. In a miscarriage, a child is at least being given a chance to live. But in an abortion, a child is intentionally being killed. Thus, there seems to be a moral difference between the two cases. What is the difference? It is the issue of intent. To a degree, if one followed the logic of the pro-abortion argument here, then God could be called a “murderer” merely because everyone dies eventually. And yet, murder is still a crime! Likewise, it is wrong intentionally to end a pre-born human life as opposed to experiencing a miscarriage as an aspect of living in a fallen world.

6. By the time in gestation when the vast majority of surgical abortions are performed, the risk of missed implantations has largely passed. The risk of miscarriage decreases as a child continues to grow in gestation.

## **X. Severely Deformed Infants Should Be Aborted**

The issue of what to do when a couple discovers in utero that a child has a severe deformity like anencephaly is one filled with grief, tragedy, and painful decisions. In fact, there is no decision related to such a pregnancy which is free from pain and grief. At this point in my notes, I want to remind my students that I am a preacher and a pastor first, and there may be some of you who have faced such a heartrending circumstance. You have my mercy and compassion as we examine this issue. I hope we can all agree, regardless of our stance, that the issue of anencephalic babies is far more complicated than debates about elective abortions for other reasons.

## **A. Argument Stated**

When severe fetal defects are detected in utero, it is better to abort the child instead of bringing a child into the world who will not live very long, will suffer immeasurably if he or she does live, will cause the mother to go through the pain of delivery for a child doomed to die, and the child will cost an inordinate amount of money in medical expenses.

## **B. Examples**

### 1. Trisomy 13

Trisomy 13, also called Patau syndrome, is a chromosomal condition associated with severe intellectual disability and life-threatening physical abnormalities in many parts of the body. In Trisomy 13, people have three copies of chromosome 13 instead of the usual two copies. Individuals with trisomy 13 often have heart defects, brain or spinal cord abnormalities, very small or poorly developed eyes (microphthalmia), extra fingers or toes, an opening in the lip (a cleft lip) with or without an opening in the roof of the mouth (a cleft palate), and weak muscle tone (hypotonia). Due to the presence of several life-threatening medical problems, many infants with trisomy 13 die within their first days or weeks of life. Children Trisomy 13 living past the first year are rare: Only five percent to 10 percent of children with this condition live past their first year.<sup>31</sup> Trisomy 13 is often detectable during pregnancy by ultrasound scanning and maternal serum screening tests. It occurs in about 1 in 16,000 babies.

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<sup>31</sup> U.S. Department of Health and Human Services, National Institutes of Health, U.S. National Library of Medicine, "Trisomy 13," August 6, 2019, <https://ghr.nlm.nih.gov/condition/trisomy-13#definition>.



## 2. Trisomy 21 / Down Syndrome

Trisomy 21, Down syndrome, occurs when people have three copies of chromosome 21 instead of the normal two copies. Down Syndrome is associated with intellectual disability, a characteristic facial appearance, and weak muscle tone (hypotonia) in infancy. All affected individuals experience cognitive delays, but the intellectual disability is usually mild to moderate. People with Down syndrome may have a variety of birth defects. About half of all affected children are born with a heart defect. Perhaps 1 in 800 newborns.<sup>32</sup>

## 3. Anencephalic Babies

Anencephaly is a medical condition that is one type of what embryologists and medical doctors call a neural tube defect, in which the neural tube of the developing fetus fails to close properly. In anencephaly, when the neural tube fails to close on the cranial endodermal neurotube, the result is either complete (holoencephaly) or partial (meroencephaly) absence of the brain.<sup>33</sup>

Typically, when anencephalic babies are born, the standard of care is supportive care and comfort measures only.<sup>34</sup> In terms of disease progression, 65% of anencephalic fetuses die in utero and almost 100% die by the end of the first postnatal week.<sup>35</sup> According to

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<sup>32</sup> U.S. Department of Health and Human Services, National Institutes of Health, U.S. National Library of Medicine, "Down Syndrome," August 6, 2019, <https://ghr.nlm.nih.gov/condition/down-syndrome#>.

<sup>33</sup> Thor Swanson, "A Traditionalist Protestant Response To Roman Catholic Rules About the Induction of Unborn Anencephalic Babies," *Ethics and Medicine* (January 1, 2015): 7; citing Robert D. Creasy, Robert Resnik, Jay D. Iams, Charles Lockwood and Thomas R. Moore, Creasy and Resnik's *Maternal-Fetal Medicine: Principles and Practice*, 6th ed., (Philadelphia: Saunders Vol. 31:1 Spring 2015 Guest Commentary 15 Elsevier, 2009), p. 281 and Roger Stevenson and Judith G. Hall, *Human Malformations and Related Anomalies*, 2nd ed., (New York: Oxford University Press, 2006), p. 715.

<sup>34</sup> Amir Halevy, "Medical Futility, Patient Autonomy, and Professional Integrity: Finding the Appropriate Balance," *Health Matrix: Journal of Law and Medicine* 18 (June 1, 2008): 275.

<sup>35</sup> Thor Swanson, "A Traditionalist Protestant Response To Roman Catholic Rules About the Induction of Unborn Anencephalic Babies," 8.

the CDC, about 3 pregnancies in every 10,000 have anencephaly, or about 1,206 pregnancies each year in the United States.<sup>36</sup>

### C. Response

When discussing the topic of severe fetal defects, robust moral reflection demands that one give some parameters for what qualifies as a *severe* defect. Often, children with Down syndrome are lumped together with anencephalic babies. The prognosis for such children is very different. So we must be very careful in how the term *severe defects* is used. Down syndrome children are often presented in the most negative light possible in order to justify killing them in utero.

Anencephalic babies also intersect with the issue of how to define *death*.

While the Bible does not specifically address defects as severe as anencephaly, Scripture is aware of stillborn children. In Ecclesiastes 6:3 – 6, Solomon talks about a man who has material wealth which he is not able to enjoy, and makes a comparison to a stillborn child:

<sup>3</sup> If a man fathers a hundred children and lives many years, so that the days of his years are many, but his soul is not satisfied with life's good things, and he also has no burial, I say that a stillborn child is better off than he. <sup>4</sup> For it comes in vanity and goes in darkness, and in darkness its name is covered. <sup>5</sup> Moreover, it has not seen the sun or known anything, yet it finds rest rather than he. <sup>6</sup> Even though he should live a thousand years twice over, yet enjoy no good—do not all go to the one place?

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<sup>36</sup> The Centers for Disease Control and Prevention, “Facts About Anencephaly,” November 21, 2017, <https://www.cdc.gov/ncbddd/birthdefects/anencephaly.html>.

That Solomon says a stillborn child “comes in vanity and goes in darkness” can sound a bit uncaring to modern ears. But remember, this discussion is in context of his quest for life’s purpose and meaning. The recurring refrain in Ecclesiastes is “vanity of vanities,” a term emphasizing the transitory and fleeting nature of life. In Ecclesiastes 6, Solomon is making a comparison between stark contrasts: A wealthy man who doesn’t get to enjoy his wealth and a stillborn child. To drive home the meaninglessness of wealth, Solomon says the stillborn child is better off. While the OT is not as clear as the NT is about Heaven, Hell, and what happens when we die, there is a word of hope in Ecclesiastes 6:5 which says the stillborn “finds rest.”

In context, Ecclesiastes also tells us there is a time for everything, including “a time to be born, and a time to die.” (Ecclesiastes 3:2). For some children with severe birth defects, the time to die is in utero or soon after birth.

Psalm 58:8 makes another startling reference to stillborn children and, in a prayer of judgment on the wicked, the Psalmist prays, “Let them [the wicked] be like the snail that dissolves into slime, like the stillborn child who never sees the sun.” This is not to imply that stillborn child is under God’s curse, but a stillborn is a great tragedy. The psalmist is merely praying for God’s providential judgment to be exercised in such a manner on wicked people, that they would experience a tragedy. In neither Ecclesiastes 6 nor Psalm 58 is the stillborn considered anything less than a human, but the stillborn is a human who has suffered the most disheartening turn of events in that it never gets to see life or enjoy the good things of God’s earth.

The book of Job records Job’s struggle with suffering and his search for why God had allowed the loss of property, family, and health. In context, we must remember that at the end of Job when

God speaks, God never explains *why* such things occurred in Job's life. Instead, God declares his might and wisdom, and Job responds in humble worship. But in the middle of his grief, Job at one point exclaims, "In his hand is the life of every living thing and the breath of all mankind." (Job 12:10) Indeed, when we face the grief a child with a serious birth defect who dies, we declare with Job that the child's life is in the hand of God. Like Job, we may likely never know in this life why a dearly wanted child died at birth or had a severe birth defect, but we can affirm God's might, wisdom, and trust by faith that His plan is good.

The death of a child with a birth defect also very painfully reminds us that the world in which we live is distorted by sin's effects at very deep levels we only barely grasp. If Genesis 3 is true, then we should expect life will sometimes have very painful turns. Romans 5:12 says, "Therefore, just as sin came into the world through one man, and death through sin, and so death spread to all men because all sinned." The death of a child reminds all of us life is fleeting, and that because of sin and death we need a redeemer, pointing us to God's promise of the day when "no longer will there be in it an infant who lives but a few days." (Isaiah 65:20)

In antiquity, deformed children were abandoned or killed. In the ancient Roman Twelve Tables of Law, Table Four said, "A dreadfully deformed child shall be killed."<sup>37</sup> Christians treated these children differently and demonstrated mercy. Respect for human life has always been at the heart of Christian ethics. For example, the *Letter to Diognetus* (100-150 A.D.) says, "[Christians] marry like the rest of men and beget children, but they do not abandon their babies that are born."<sup>38</sup> Another Second Century Christian document known as *The Didache* contrasts the way of life with the way of death.

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<sup>37</sup> "The Twelve Tables," <https://www.csun.edu/~hcfl1004/12tables.html>.

<sup>38</sup> *The Letter to Diognetus*, in *Christian Ethics: Sources of the Living Tradition*, Beach and Niebuhr, eds. (New York: Ronald Press, 1955), 68.

One aspect of the way of life is that Christians do not “abort a child or commit infanticide.”<sup>39</sup>

Discovering that a baby has serious deformities is a devastating event in a couple’s life. All of us have dreams for a child, hopes of days full of playful laughter, running outdoors, learning to swim, and swinging happily in the summer sun. Discovering that these dreams will not be fulfilled and the baby will die is terribly sad and carries its own kind of grief related to lost hopes. Furthermore, none of us wants a child to suffer pain or extreme discomfort if it can be avoided. Megan Best says, “We do well to hesitate in judging the motives of those who choose abortion [for fetal deformities]. Aborting a previously desired child because of birth defects is rarely done easily or happily, and for many it is a difficult decision full of regret and pain. However, as in all scenarios where abortion is considered, it is important that in this situation the parents are informed that they *can* choose to *keep* the baby.”<sup>40</sup> If a fetus has the life-limiting diagnosis of anencephaly and the expected death shortly after birth, families should be presented with the potential benefits of medical care and, accepting that such care might only prolong an inevitable death, be offered perinatal hospice.

Another issue raised here is whether or not a couple should even have prenatal diagnosis done. How will the information be used? What information do we hope to gain from the diagnosis?

Having a child with a serious or fatal birth defect immediately raises questions about God’s control of the universe, His goodness,

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<sup>39</sup> Michael W. Holmes, ed. and trans., *The Didache*, in *The Apostolic Fathers: Greek Texts and English Translations*, 3<sup>rd</sup> ed. (Grand Rapids: Baker Academic, 2007), 347.

<sup>40</sup> Megan Best, *Fearfully and Wonderfully Made: Ethics and the Beginning of Human Life* (Kingsford, NSW: Matthias Media, 2012), 254. Italics in original.

<sup>41</sup> Donna Harrison, Michelle Cretella, John Schirger, David Stephens, and Jane Orient, “It Is Never Necessary to Intentionally Kill a Fetal Human Being to Save a Woman’s Life: In Support of the Born-Alive Abortion Survivors Protection Act,” *Public Discourse*, February 17, 2019, <https://www.thepublicdiscourse.com/2019/02/49619/>. All the authors are physicians.

and His care for us or our child. If God is good, why does He allow a tiny baby to suffer in such a way?

1. Some argue the deformed child should be aborted.

Many people immediately consider aborting a child with severe fetal deformities. Three factors that influence women's decisions about whether to undertake prenatal diagnosis, as well as the way to use the information, include: The level of care a child will require, the level of care a woman feels confident and capable to provide, and the level of care available for children with genetic conditions.<sup>42</sup>

The Christian Medical and Dental Association opposes aborting anencephalic children. They say:

[T]he necessary and sufficient criterion of death is the irreversible cessation of all clinical functions of the entire brain (whole-brain concept). Although both a higher brain (cortical) and brain stem criteria are necessary for death, neither alone is sufficient for death. Patients in permanent vegetative state or irreversible coma, and anencephalic infants do not meet the necessary criterion for this definition of death and are therefore to be considered and treated as living human beings.<sup>43</sup>

Some data indicates parents who abort malformed children experience higher levels of grief. The death of an infant through stillbirth, miscarriage, or neonatal death is one of the most traumatic life events one can ever endure. Factors affecting the level of grief include the level of social support the couple has, whether or not there were pre-existing relationship difficulties, and whether or not

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<sup>42</sup> Megan Best, *Fearfully and Wonderfully Made: Ethics and the Beginning of Human Life* (Kingsford, NSW: Matthias Media, 2012), 254; citing Alison Brookes, "Women's Voices: Prenatal Diagnosis and Care for the Disabled," *Health Care Analysis* 9.2 (2001): 133 – 150.

<sup>43</sup> Christian Medical and Dental Association, *CMDA Position Statements*, 29, <https://cmda.org/wp-content/uploads/2018/05/CMDA-Position-Statementsworeferences18.pdf>.

the couple has any other children. Again, research indicates grief is far more complicated when a pregnancy is aborted due to fetal abnormality.<sup>44</sup> Other research has suggested that there may be a psychological benefit to women who continue a pregnancy with a lethal diagnosis as opposed to those who terminate via abortion.<sup>45</sup>

## 2. Carry the Baby Full Term

Carrying the anencephalic baby to full term means the mother will give birth to a child who will die soon after birth. Since so many anencephalic babies die in utero, the longer the pregnancy progresses, the more likely is the child will die in utero.

## 3. Carry the Baby to the point of viability, and then induce.

Some Protestants argue it is morally acceptable to induce an anencephalic baby earlier in pregnancy but only after normally accepted dates for viability in current Western medicine (28 weeks or so). The moral reasoning here is that the normal dangers associated with inducing early in pregnancy are not applicable since the child is certain to die soon thereafter. Some argue that early induction of an anencephalic baby does not dramatically affect the child's life expectancy. Also, since so many anencephalic babies die in utero as pregnancy progresses, early induction may increase the chance of actually holding the baby before he or she dies. Along these lines, for Protestants who baptize infants (not an issue for Baptists), there is a greater chance of actually baptizing a small child.

## 4. Do not induce anencephalic babies prior to viability; allow the pregnancy to go as far as it can.

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<sup>44</sup> Anette Kersting and Birgit Wagner, "Complicated Grief After Perinatal Loss," *Dialogues in Clinical Neuroscience* 14.2 (2012): 187 – 194.

<sup>45</sup> Heidi Cope, Melanie E. Garrett, Simon Gregory, and Allison Ashley-Koch, "Pregnancy Continuation and Organizational Religious Activity Following Prenatal Diagnosis of a Lethal Defect Are Associated with Improved Psychological Outcome," *Prenatal Diagnosis* 35.8 (August 2015): 761 – 768.

Other Christians favor letting the anencephalic child go to full term if possible. In these cases, the parents have the deep grief of giving birth to a child certain to die. Yet, there is some comfort in that the parents did not do anything to hasten the child's death, but things are left in God's hands and, though often we wonder about His works and ways, there is a sense that the death is part of His providence. As the years pass and the couple processes the grief, the many questions they have about the child's brief life will not be complicated by second guessing their actions regarding a post-viability induction or an abortion.

At the same time, I do not think that an early induction of an anencephalic baby who has passed the age of viability is necessarily wrong. The effects of anencephaly are so profoundly severe that it is unlikely that an early induction within normal windows of viability will dramatically affect life expectancy. Perhaps my main concern is the extremely rare chance of a misdiagnosis. In which case, a healthy baby would then be faced with several weeks in a NICU. But I want my students to understand that the process of diagnosing anencephaly with modern medical technology is extremely accurate. The scenario I am describing of a wrong diagnosis would be a very, very rare case indeed.

Inducing an anencephalic baby prior to the normally accepted standards of viability is not morally acceptable. Instead, this act is far too close to abortion. Even though the child is severely disabled, the sanctity of human life demands it still be treated with respect. Aborting an anencephalic baby is wrong.

#### **D. Pastoral Care in Cases of Anencephaly**

1. Be very slow and reluctant to judge the couple's motives.



2. Acknowledge the ethical difficulty of the case.
3. It is important to remind the parents they can choose to keep the baby, knowing he or she will not live very long.
4. I think something like this is helpful to say: “Regardless of the direction you choose to go in this tragedy of having an anencephalic baby, I love you and I’m going to be your friend.”

As a summary statement in response to all of these pro-abortion arguments, I like what a Canadian Christian named Doug Webster said, “Children are not problems to be fixed but opportunities to show God’s love. The bottom line is this: children are needy. They are fully dependent on others, and that is why Jesus made them his priority.”<sup>46</sup>

*Last updated March 18, 2021*

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<sup>46</sup> As cited in Todd Chipman, *Until Every Child Is Home: Why The Church Can and Must Care for Orphans* (Chicago: Moody Publishers, 2019), 55.