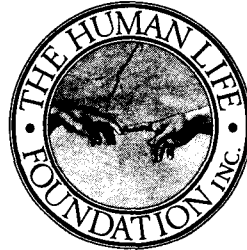


# the HUMAN LIFE REVIEW



FALL 1983

*Featured in this issue:*

- J. P. McFadden on ..... The New Future  
Prof. Francis Canavan on ..... Being Personally  
Opposed  
Prof. R. V. Young on ..... Literary Abortions  
Frank Zepezauer on ..... Illegitimacy Chic  
Donald DeMarco on ..... Human Experimentation  
Prof. Julian Simon on ..... The Rhetoric of  
Population Control

*Also in this issue:*

The *Pediatrics* 'Commentary' • Steven Baer • Dr. Norman Fost  
Dr. Frank Hyatt • Steven Mosher • Bob Greene

*Published by:*

**The Human Life Foundation, Inc.**

New York, N.Y.

Vol. IX, No. 4

\$4.00 a copy

... FROM THE PUBLISHER

This issue completes our ninth year of publication, during which we must have run perhaps 500 or so articles and other pieces, totalling . . . two million or so words? (It would be too painful to count them all again!) And yet our biggest problem has always been to choose what we hope has been the best stuff from the seemingly-endless supply of available material. We have tried to maintain a balance and to publish articles that are topical or relevant to those questions about which our readers are concerned. We have benefited from the experience and we hope you have too.

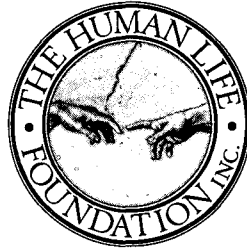
*Mea Culpa.* In our last issue we inadvertently described Prof. Francis Canavan's article "The Pluralist Game" as having been distributed by Public Research, Syndicated. In fact, the article first appeared in the Winter, 1981 issue of the *Duke Law Journal*, and was printed with permission (©1981 Duke University School of Law). What happened was, the computer retained the description of a previous Canavan article, and we failed to catch the transposition.

We now have available a special reprint edition of President Ronald Reagan's historic article "Abortion and the Conscience of the Nation" (which first appeared in our Spring issue). You can order copies at just \$1 each direct from the Foundation (bulk prices for 200 or more copies available on request). And we remind our readers that we still have available copies of Ellen Wilson's *An Even Dozen* (\$10.00), and Joseph Sobran's *Single Issues* (\$12.95). Both are collections of essays that first appeared in this review; both are original (and handsome) hardcover editions, and can be ordered direct from the Foundation. We also have copies of *A Private Choice* (\$11.95) by Prof. John T. Noonan, Jr. It is generally considered the best book yet written on abortion in America. Prof. Noonan is, of course, a frequent contributor to this review, and member of our editorial board. Please see the inside back cover for details on how to order the Reagan article or these important books.

*The Human Life Review* is available in microform from both University Microfilm International (300 N. Zeeb Road, Ann Arbor, Michigan 48106) and Bell & Howell (Micro-Photo Division, Old Mansfield Road, Wooster, Ohio 44691).

EDWARD A. CAPANO  
*Publisher*

# THE HUMAN LIFE REVIEW



FALL 1983

Introduction .....	2
Toward the New Future.....	<i>J. P. McFadden</i> 5
On Being Personally Opposed .....	<i>Francis Canavan</i> 21
Literary Abortions .....	<i>R. V. Young</i> 25
Illegitimacy Chic .....	<i>Frank Zepezauer</i> 41
On Human Experimentation.....	<i>Donald DeMarco</i> 48
The Rhetoric of Population Control: Does the End Justify the Means? .....	<i>Julian Simon</i> 61
Appendices.....	86

*Editor*

J. P. MCFADDEN

*Publisher*

EDWARD A. CAPANO

*Contributing Editors*

JOSEPH SOBRAN ELLEN WILSON

*Managing Editor*

KATHLEEN ANDERSON

*Production Manager*

ROBERT F. JENKINS

*Editors-at-Large*

FRANCIS CANAVAN, S. J.

MALCOLM MUGGERIDGE

JOHN T. NOONAN JR.

Published by THE HUMAN LIFE FOUNDATION, INC. Editorial Office, Room 840, 150 East 35th St., New York, N.Y. 10016. The editors will consider all manuscripts submitted, but assume no responsibility for unsolicited material. All editorial and subscription inquiries (and all requests for reprints and permission) should be sent directly to the editorial office. Subscription price: \$15 per year; single copy, \$4. Bulk prices on request.

Vol. IX, No. 4 © 1983 by THE HUMAN LIFE FOUNDATION, INC. Printed in the U.S.A.

## INTRODUCTION

**W**HEN WE DECIDED to publish this review almost a decade ago, we expected that the abortion issue would be our central one, but that we could and certainly would cover a great many other subjects as well. As the range of articles in this issue will, I trust, confirm, we have. But abortion has, willy-nilly, remained central, if only because *it* has “expanded”: in a most obvious instance, abortion’s rationale is now openly used to justify infanticide, about which you will find a great deal here. We have attempted, in the lead article, to record certain facts and opinions that we wish others had said (and said better) for us. And while it is unusual to begin by recommending supplementary material, we hope the reader will read *Appendix A* and *B* straight off. Both provide the background for the lead article.

Indeed, so does much previously published here—far too much to include, or even cite, in a single issue. But two articles are of special relevance: one, by Dr. Anne Bannon on the Bloomington Baby case itself, appeared in our Fall, 1982 issue; the other, Dr. C. Everett Koop’s address to his fellow “baby doctors,” ran in our Spring, 1983 issue (which also carried President Reagan’s article on abortion).

And we are reminded of Malcolm Muggeridge, who framed this answer when asked what kind of doctor he would want to make the life-or-death decision for him: “I would hope that I would be put in the charge of a Christian doctor, who would take account of my spiritual circumstances and my soul, as well as of my body.” Surely a near-perfect description of an “old ethic” physician? (It appeared in our Summer, 1979 issue.) And this richly apposite quote, which Joseph Sobran once used in a column titled “Baby Doe and Civilization” (Summer, 1982); it is by the great novelist Evelyn Waugh, writing, as Sobran noted, on the eve of the Nazi atrocities:

## THE HUMAN LIFE REVIEW

Civilization has no force of its own beyond what is given it from within. It is under constant assault, and it takes most of the energies of civilized man to keep going at all. There are criminal ideas and a criminal class in every nation, and the first action of every revolution, figuratively and literally, is to open the prisons. Barbarism is never finally defeated; given propitious circumstances, men and women who seem quite orderly will commit every conceivable atrocity. The danger does not come merely from habitual hooligans; we are all potential recruits for anarchy. Unremitting effort is needed to keep men living together in peace; there is only a margin of energy left over for experiment, however beneficent. Once the prisons of the mind have been opened, the orgy is on.

These prophetic words seem to us *the* perfect summary of our case. But of course there is always more to say, and other facets of our “ethical” (moral and spiritual, we say) dilemmas to explore. Nobody does it more expertly than our colleague Prof. Francis Canavan, who knows that the purpose of intellectual effort is to make distinctions. Here, he makes the definitive one *in re* what has to be the most bizarre “position” anyone can take on such issues as abortion—being “personally opposed” to acknowledged evil. You may want to send this gem to some politician or other (certainly Senator Edward M. Kennedy should see it?).

Next, Prof. R. V. Young reminds us that art reflects reality—otherwise it isn’t truly art. Thus we should expect that literature, as distinguished from “writing,” would reflect the truth about abortion. As he demonstrates impressively, it does precisely that. What struck us when we first read his article was the powerful dialogue quoted from Ernest Hemingway. Had anyone surprised us with the question, Do you think Hemingway, were he alive today, would be “pro-abortion”?—we’d have answered instinctively “probably so.” But whatever Hemingway as celebrity (we *do* allow our “public” personalities to propagate their opinions on virtually any subject, do we not?) might have said, as an artist he wrote the excruciating damnation you’ll read here.

But we’ve by no means run out of unusual stuff. Mr. Frank Zepezauer probes still another area of the New Future; he too produces some painful images of what it could be like. And he may make you wonder: What will those children we allow to survive think about us when, in maturity, they read all this? What might they say—or do?—when they discover that it was not a matter of knowing not what we did?

The sad fact is, no previous generation in history has known more about what it is about. Certainly none had a greater accumulation of facts. Our lead article touched on the matter of experimentation on living humans. Well, Prof. Donald DeMarco supplies us with a mass of facts

## INTRODUCTION

about that grisly subject. It makes more painful reading, yet it is fascinating too, conjuring up fantasies that really could become realities in the New Future, e.g., producing human life for the *purpose* of providing spare parts—which brings us thudding back to the slavery analogy. Then too they bred new human parts for the system, albeit whole parts (the state of the art was of course primitive). As Waugh reminded us, barbarism is never finally defeated, “every conceivable atrocity” remains possible.

The reader who has come this far will be forgiven for thinking that it may all be simply too awful to read. But we think you will find much here that is worth your attention. At worst, you will understand why, at such junctures, the editors contemplate instituting a humor column.

But at least we can provide some quite different fare, such as the selection from Prof. Julian Simon’s book *The Ultimate Resource* (meaning of course *people*). Prof. Simon—who, by the way, is *not* an anti-abortionist—writes with refreshing gusto; he is convinced that “doomsday” fears of world overpopulation just don’t fit the *facts*, which he lays out for you in impressive array. You’ll find plenty of good reading here no matter what you *think* you thought about the highly-complicated question he dissects—a big batch of those “fresh perspectives” we’re all supposed to seek endlessly. That Prof. Simon’s arguments are often the opposite of what you usually hear will, we think, make them all the more enjoyable. (He does quite a job on Planned Parenthood’s rhetoric!)

The following appendices are another mine of rich stuff. We noted that we hope you will read *A* and *B*, because both bear directly on the infanticide question—well, so does *Appendix C*; in fact, it flatly *confirms* the reality of the “charges” we make and the specific details thereof (including the *illegality* of it all). And *Appendix D* confirms that, although the “leadership” of the medical profession may support killing, many of its members emphatically do not.

*Appendix E* provides an all-too-graphic reminder that infanticide is neither new nor humane, but rather a trade-mark of the endless fight of civilization against barbarism (read again Waugh’s haunting words). Finally, *Appendix F* reminds us that, before the new ethic of “a woman and her doctor,” there was an old ethic of mothers and fathers, surrogates of a Father of life whose peculiar ethics were promulgated not in regulations but by commandments. We don’t claim that any of this is relaxing reading—the reader can easily find plenty of that elsewhere—but we do promise more of the same, in our next issue.

J. P. McFADDEN  
*Editor*

## Toward the New Future

*J. P. McFadden*

“**T**HIS IS NOT the first time our country has been divided by a Supreme Court decision that denied the value of certain human lives.”

That sentence appeared in the article by President Ronald Reagan in the Spring issue of this review. Mr. Reagan was of course linking the *Roe v. Wade* decision of 1973 to the *Dred Scott* decision of 1857, which held in effect that blacks could have no rights as citizens under the Constitution. The President is by no means the first to draw the obvious parallel between abortion and slavery: in both cases, a discrete class of human beings were denied not only the rights of citizens, but also the fundamental right to life itself. Just as, now, a woman holds life-and-death power over her unborn child, so, then, a Master held the same power over his human “property.”

As Mr. Reagan also noted, his predecessor (in the presidency, as well as in the championing of human rights) Abraham Lincoln struggled long and hard to find a peaceful solution to the slavery dilemma. Admitting that *Dred Scott* had affirmed it as “the law of the land,” Lincoln nonetheless vowed to work for slavery’s elimination. In the event, Lincoln triumphed, but not peacefully. Yet long before he was president, he had argued that the solution lay not in the Constitution—subject then, and infinitely more so now, to meaning what the Supreme Court says it means—but rather in the Declaration of Independence, the document that truly founded the American nation, and which holds unambiguously, indeed as a “self-evident” truth, that all men are *created* equal.

“Let us re-adopt the Declaration of Independence,” Lincoln said once in Illinois, and with it “the practices and policy which harmonize with it.” Do that, he said, and “we shall not only have saved

---

J. P. McFadden is the editor of this review, and the president of The Human Life Foundation.

the Union, but have so saved it, as to keep it forever worthy of saving.”

Certainly the slavery-abortion parallel is strongest at this point: that *human beings* possess “unalienable rights” that cannot be rightfully denied; that it is the fundamental duty of government to secure these rights. Thus the purpose of all the serious anti-abortion efforts of the past decade has been to achieve what would amount to citizenship for the unborn (indeed, in certain cases—inheritor, injuries and the like—the courts have long treated the unborn as citizens), because human rights begin at the *beginning* of life. This, Lincoln said, was the “majestic interpretation” the Founding Fathers wrote in to the Declaration, because “In their enlightened belief, nothing stamped with the divine image and likeness was sent into the world to be trodden on . . . ”

Yet these same noble fathers did not eliminate slavery. In fact, they actually wrote it into the original Constitution, albeit not by name, and only to prohibit *its* prohibition for several decades—their successors were left to deal as they might with this glaring violation of the Declaration’s principles. The final solution was, of course, the bloodiest war in our history, and even *that* failed to destroy the many lesser injustices that the “peculiar institution” had spawned, many of which remain with us still.

It is well to remember another parallel in the slavery-abortion equation. He who possesses the power of life and death over another feels compelled to justify that power. Just so, the Slave Power was not content to merely defend its practice as a justified evil. No, it must be declared *good*, even extended into new areas, and accepted by all. In short, slavery claimed its own *ethic*.

Those who now defend the peculiar institution of legalized abortion on demand also have their own ethic. This journal has reprinted several times (most recently in the Spring ’83 issue that carries the President’s article) an editorial—a Declaration, really—that first appeared in 1970 (in *California Medicine*, the official journal of the California medical association). The anonymous editor wrote that “The traditional Western ethic has always placed great emphasis on the intrinsic worth and equal value of every human life” and that this “sanctity of life” ethic—which has had



#### THE HUMAN LIFE REVIEW

“the blessing of the Judeo-Christian heritage”—has been “the basis for most of our laws and much of our social policy” as well as “the keystone of Western medicine”—all quite true. But, he went on, this “old” ethic was being eroded by a new *quality* of life one which would place only “relative rather than absolute values on *such things as human lives*” [*our emphasis*]. Like a moth around a flame, the editorialist instinctively hovered about abortion as the crucial issue: “Since the old ethic has not yet been fully displaced it has been necessary to separate the idea of abortion from the idea of killing, which continues to be socially abhorrent. The result has been a curious avoidance of the scientific fact, which everyone really knows, that human life begins at conception and is continuous whether intra- or extra-uterine until death.” (Just as curiously, the fact of the slave’s humanity was “avoided.”) Not doubting that the old ethic was doomed, he concluded with this counsel for his fellow-doctors: “It is not too early for our profession to examine this new ethic, recognize it for what it is, and will mean for human society, and prepare to apply it in a rational development for the fulfillment and betterment of mankind in what is almost certain to be a biologically-oriented society.”

All in all, a remarkable piece of prophecy. About the only thing *not* predicted was that, just three years later, the Supreme Court would rule that the new ethic had been right there in the Constitution all along (although just *where*, it couldn’t say). Without question, the Court’s *Abortion Cases* overruled the “enlightened belief” of the Declaration of Independence, and put the force of the nation’s fundamental law at the service of that “biologically-oriented” New Future.

Predictably, the promoters of that future were not satisfied even with so stunning (and unexpectedly quick and revolutionary) a victory. The Court had used the fatal words “meaningful life”—hardly precise constitutional terminology, but precisely descriptive of the *goal* of the New Future. Surely if a “mother” and her willing doctor-accomplice may legally kill her unborn child merely because they predict that it will not have a “meaningful life,” this useful principle can and should be extended to the already-living? If we can be certain about the meaningless life awaiting an unborn

child, surely we can be much more certain of “a life not worth living” in the case an already-born “imperfect” baby? Infanticide not only follows logically, it has followed in fact and, as everybody knows, is already a widespread practice.

Some are amazed that the leading segments of the medical profession have rushed headlong into the New Future. Doctors have long enjoyed great—indeed excessive—prestige in America. Generations have been raised to promptly open up, bend down, or roll over on command. Such power corrupts: whereas lawyers must argue, and journalists convince, “medical professionals” need merely issue orders and—worse—there is rarely a Superior Officer to countermand them. This reality was one thing when the profession adhered to its traditional first principle “Do no harm,” but it is quite another matter when doctors view themselves as high priests of the New Future cult.

That far too many doctors *have* embraced this new biological religion is beyond dispute, as vividly demonstrated by the response of the major medical associations to the so-called “Baby Doe” controversy. God only knows how widely infanticide has been practiced in recent years; those who read medical publications know that it has long been openly admitted—even recommended—in countless articles and “studies” by both American and foreign practitioners. And although it remains a *crime* to kill a born citizen, we hear nothing from our public prosecutors, nor from the “official” guardians of medical ethics. As far back as 1976, an internationally-renowned pediatric surgeon, in a public address to a meeting of the American Academy of Pediatrics, said “Well, you all know that infanticide is being practiced right *now* in this country and I guess the thing that saddens me most about *that* is that it is being practiced by that very segment of our profession which has always stood in the role of advocate for the lives of children.” (The occasion was the award of the Academy’s highest honor to the surgeon, C. Everett Koop, now Surgeon General of the United States.)

How long such “curious avoidance” of widespread, illegal infanticide would have continued is impossible to say. But it is altogether fitting that it was a “family” pediatrician (the kind of “old-

fashioned” doctor who *earned* the prestige the profession enjoys) who finally precipitated the current national controversy. The simple facts of the case are now generally known by all concerned, but a brief recapitulation (in laymen’s language) may be in order. On April 9, 1982 (Good Friday, as it happened), a baby boy was born in Bloomington, Indiana. The family pediatrician was summoned, and found that the baby evidently had Down’s Syndrome—i.e., he was an “imperfect” child—*and* that his esophagus was not connected to his stomach. If the latter condition were not corrected, he would certainly die. Few dispute the fact that it could have been easily corrected. The pediatrician, Dr. James Schaffer (he deserves an honorable mention here) expected that the operation would take place, but the mother’s obstetrician—whose job was already done—spoke to the parents, who “agreed” that their baby should die. And little Baby Doe, after six painful days of “treatment” by starvation, did die (he was not even given water; merciful death was hastened by pneumonia caused by corrosive stomach fluids he vomited into his lungs). Nobody disputes the central truth: Baby Doe was killed because he had Down’s Syndrome. Ironically, the hospital pathologist who performed the autopsy flatly stated the truth about *that*: “The potential for mental function and social integration of this child, as of all infants with Down’s Syndrome, is unknown.” Thus nobody knows how “imperfect” Doe would have been. But we must assume that his parents decided that his life would not be “meaningful,” at least to them.

Dr. Schaffer and others attempted by legal means to save Doe’s life, but were thwarted by a judge, who was, incredibly, supported by the Supreme Court of Indiana, which presumably has never read the Fourteenth Amendment to the U.S. Constitution. But the attempt produced a furor heard by Ronald Reagan and the self-same Dr. Koop; the President ordered enforcement of federal regulations protecting the handicapped, and Surgeon General Koop became a key man in seeing that these “Baby Doe regulations” were enforced.

This bare-bones description of the many-faceted Baby Doe case could of course be greatly expanded (this review has already printed many thousands of words on it), but our point here con-

cerns not the facts of the case but rather the medical profession's *reaction* to it.

Virtually all the major medical organizations and associations quickly and adamantly *opposed* enforcement of the Reagan Administration's "regs"—led by the same American Academy of Pediatrics (supposedly, as Dr. Koop said, the prime "advocate for the lives of children"), which went straight to court in a so-far successful attempt to halt enforcement.

Here again, the details would fill a large book, but they cannot obfuscate the reality: the New Future advocates who now clearly dominate the American medical profession have declared that the old "sanctity of life" ethic is as dead as Doe; that "good medical practice" now includes life-and-death power over patients, and that *nobody* should interfere with "medical judgments" even when they prescribe what used to be called murder.

Other realities should be stated as well. For instance, every state in the Union has homicide statutes on its books which prohibit infanticide. Even if they did not, the Fourteenth Amendment should provide legal protection to "All persons born" under the jurisdiction of the United States against deprivation of life "without due process of law" and also denial of "equal protection" under state or federal law? The reality is, that the laws are not being enforced, certainly not against those "medical professionals" who now believe themselves to be above the law, and entitled, literally, to get away with murder.

All this conjures up some grotesque ironies as well. Did not anti-abortionists predict that *Roe v. Wade* would produce just such lethal results? Have the pro-abortionists—most of whom publicly deplore the revival of Capital Punishment—noticed that the latest "humane" method of carrying out the execution of those judged guilty—just as in the execution of the innocent unborn—is by "medical professionals" thoroughly practiced in administering lethal injections? Yet again, *much* more could be said about such things, but let us keep to the main point of the argument.

The sad fact is that the Administration's Baby Doe regulations invoke only the *weakest* sanctions against infanticide. If the courts ever *do* allow enforcement (an unlikely event: as their myriad pro-

abortion decisions have demonstrated overwhelmingly, the great majority of our judges are also willing converts to the New Future religion), the “regs” would do more than threaten *possible* cut-offs of federal funds to a hospital or practitioner who denied treatment to an “otherwise qualified handicapped individual”—the entire wording is extremely vague, and could easily be circumvented by any reasonably clever “health care provider,” never mind a *determined* one. And that is the point: the cultists of the new ethic *are* determined to enforce *their* regulations as to who qualifies for a “meaningful life,” and their loud opposition to even ineffectual regulation merely demonstrates their total rejection of any interference whatever.

Too harsh? Well, consider the words of Dr. James E. Strain, the current president of the American Academy of Pediatrics (in the July issue of the Academy’s own newsletter). He writes: “It is clear that there are certain infants with handicaps who should have full treatment. There is another group whose handicaps are so severe that any treatment other than supportive care would be inhumane and only prolong pain and suffering. There is a third ‘in between’ group where [*sic*] indications for unusual medical or surgical care are uncertain. It is the management of the third group of infants which should be reviewed by an ethics committee at the local hospital level. A model for this type of review is the institutional review committee that protects the rights of research subjects.” Medical jargon aside (not that it isn’t worrisome: do you want your doctor to “manage” you in your hour of need?), Dr. Strain is plainly setting up his own *triage* situation, without bothering to mention that the prototype of *triage* was a horror justified (*if* it was justified) by emergency *battlefield* conditions, whereas most American babies are born in the best-equipped and lavishly-funded hospitals known to history.

He is doing a great deal more: he is announcing that “humane” people would condemn to death *severely* handicapped babies—just as, of course, they would save the category deserving “full treatment”—but that we must establish an “ethics committee” to handle a new category of “in-between” babies; all this will be done

without reference to a born citizen's *legal* right to life if he *can* be saved from death.

Now we are again brought face to face with the grim truth. Illegal infanticide is being widely practiced now, with little if any opposition from public prosecutors. Clearly the votaries of the "quality of life" ethic could go *on* with the killing, with little risk of prosecution. They could simply pay lip service to the Administration's attempt to enforce the weak regulations, while being a little more careful in "hard cases" like that of poor Baby Doe. Why don't they?

Well, President Reagan's intervention *has* of course focused public attention on infanticide, at least momentarily, thus raising the risk of prosecution *and* the terrible possibility of losing federal money. But the broad phalanx of "professional" medical opposition is also based on that indignant rejection of *any* attempt to retard the New Future. More, Dr. Strain, for one, evidently sees in the "regs" controversy an opportunity to take a giant step "forward," i.e., to vault the whole question right over any legal or governmental barriers and drop it entirely into the hands of extra-legal "professionals" who would dominate his proposed "ethics" committees.

Indeed, the AAP has already issued a proposal for the make-up of such "local" (a nice reassuring note) review boards; the suggested name is Infant Bioethical Review Committee. In typical authoritative language AAP states flatly: "The IBRC shall consist of at least 8 members and include the following"—it then mandates a "practicing physician," a hospital administrator, a "staff" member and a nurse, so that at *least* half the board can be right there in the hospital—plus representatives from the "legal profession," the "lay community," and a "disability group" and, most important of all, "an ethicist or a member of the clergy."

The inclusion of a "disability group" member is more than merely interesting: as the AAP well knows, it is the Association for Retarded Citizens and allied "disability" organizations that have joined the Administration in the court battles for enforcement of the Baby Doe regs. Needless to say, all "imperfect" Americans have a life-and-death stake in the whole controversy. If today the

“professionals” can kill them at birth, what awaits them in the looming New Future? Just as surely as the Supreme Court’s “meaningful life” rationale for abortion is now being applied to infanticide, it can and undoubtedly will be extended (Who would be surprised to discover that it is *already* happening?). Indeed, the AAP *qualifies* its description of the disability-group representative: he might also be a “developmental disability expert”—read another New Future professional—or a “parent of a disabled child.” In short, the prototype would allow for someone *not* disabled, such as Baby Doe’s father.

Clearly the AAP intends these extra-legal tribunals to hand down the final solutions to hard cases. Further, AAP-type professionals would control their *actual* make-up *and* have the power to enlarge the “at least 8 members” by additional “safe” members. The possibilities seem limitless, up to and including the kind of murderous “mercy killing” advocated by many German medical professionals *before* Hitler, and which they diligently practiced under the Nazi regime. I know: even to mention the Nazi experience is to invite “extremism” charges. Yet the historical record is clear (cf. the definitive study by Leo Alexander of “Medical Science Under Dictatorship,” which appeared in the July 14, 1949 issue of *New England Journal of Medicine*). And to say that “it can’t happen here” is fatuous: pre-Hitler Germany was ranked *very* high among civilized nations, and was also the veritable fount of the reigning scholarship and wisdom in many if not *most* sciences, not least medicine. It is indisputable fact that German medical “scholarship” of the 1920’s—*in re* euthanasia, genetics and more—laid the foundations for Nazi genocide. The Thousand Year Reich’s brief dozen years of power, however malignant in intention, could not have “succeeded” without the groundwork the medical professionals laid for it.

But weren’t Nazi atrocities (*including*, remember, forced abortions) condemned for all time at the Nuremburg war-crime trials? Yes indeed.

Malcolm Muggeridge has long contended (several times in the pages of this journal) that the only reason the “advanced” German doctrines on euthanasia and genetics did not spread throughout

J. P. MCFADDEN

the Western world is that Hitler “gave them a bad name” and thus inadvertently slowed down the process that the legalization of abortion has now re-accelerated. But charges of extremism will still be leveled at anybody who invokes the Nazi precedent, and understandably so.

The notion that such horrors *will* happen strains ordinary credibility. Who could seriously want to go *that far*? Surely our doctors are still humane, dedicated men? Surely they would agree. Here, alas, another of those not-to-be-mentioned Nazi precedents is germane. Dr. Karl Brandt was the highest-ranking doctor in Nazi Germany, a well-respected professional who joined the Nazi hierarchy literally by chance. He was tried and convicted for war crimes at Nuremburg, and duly executed. He of course readily admitted that the Nazis had gone too far—but that was his *only* defense. Both before and during Hitler’s regime, Brandt had in fact endorsed (indeed, helped formulate) the basic policies of euthanasia and experimentation on living humans (his argument—familiar?—was that animals were not “adequate subjects”). In his final statement, the condemned man said: “I am fully conscious that when I said ‘Yes’ to euthanasia I did so with the deepest conviction . . .” (His defense of the special category of “child euthanasia” is even more relevant here; he based it on the desire to avoid long-term difficulties for the *families*, saying “We wanted to kill and put an end to these deformities as soon as possible after they had been born.” The interested reader may want to read Prof. Gary Crum’s article on Dr. Brandt in the Summer ’82 issue of this review).

No, it is not necessarily the case that the new quality-of-life votaries fully understand or intend what they in fact advocate, or all the possible results thereof. After all, it *did* take a Hitler to “overdo” the humane intentions of German doctors. *That* could never happen here. Maybe not. But Hitler “happened” as a result of a disastrous social situation brought on by military defeat. Our nation is now spending far beyond its means on social welfare, much of it *medical* costs. Could we not face, perhaps soon, a disastrous situation that would force cut-backs now unthinkable? And



even now, isn't it sensible to "allocate" scarce monies to saving only "meaningful" lives?

Such "cost-benefit" arguments already appear regularly in the medical journals (just as, from the beginning, it has been argued that great "savings" result when the "poor" abort their children). Predictably, these arguments will grow with the cost-pressures—not least because the medical profession is the prime financial beneficiary of the multi-billions now being spent on "health-care," abortions, and the rest. Need we add that euthanasia (especially "pulling the plug" on anybody judged near death) is also openly advocated? As with infanticide, we must assume that such "adult" killing is already widely practiced.

But let us return to Dr. Strain's review boards, and focus on what will undoubtedly be the key member: "an ethicist or member of the clergy." Surely his will be the most prestigious, persuasive advice? Who will dare go against the sage counsel of the "professional" expert in ethics, especially when the board is already stacked with the hospital's own staff? The "lay community" member? The whole point is to determine whether it is moral to kill; the resident "ethicist" will be looked to for the "right" answer.

So the crucial point is this: What kind of ethicist is likely to sit on such boards? As it happens, we have a good idea of the type Dr. Strain favors. He is, as noted, current president of the American Academy of Pediatrics (AAP), and thus its official journal, *Pediatrics*, can be presumed to reflect his views (if it does *not*, he has not told us so). Well, in July—while the Reagan Administration was asking for public commentary on its proposed Baby Doe regs—*Pediatrics* did indeed publish an editorial statement (as the leader in its appropriately-titled "Commentaries" section) strongly attacking the Administration's proposals. Given both the timing and content of the statement, it must be assumed that it is endorsed by Dr. Strain and the AAP.

The content is simply incredible, and must be read to be believed. (For that reason, the reader will find the complete text published as *Appendix A* in this issue.) Suffice it to say here that it might be aptly described as the "Son of California Medicine"—it starkly repeats the sanctity-of-life v. quality-of-life conflict—with

abortion again the key issue—and calls upon us to “put aside the obsolete and erroneous notion of the sanctity of all human life” so that we can “look at human life as it really is: at the quality that each human being has or can achieve. Then it will be possible to approach these difficult questions of life and death with *the ethical sensitivity that each case demands*” [*emphasis added*]. To provide us with an idea of such sensitivity, the author writes: “If we compare a severely defective human infant with a nonhuman animal, a dog or a pig, for example, we will often find the nonhuman to have superior capacities . . .” (It is incredible, and there’s much more—read it all yourself in *Appendix A*.)

Who would write such stuff? *Pediatrics* describes the author as Peter Singer, MA, BPHIL, FAHA, of the Centre for Human Bioethics, Monash University, Victoria, Australia. Perhaps we should note in passing that it is odd (or clever?) for the official trade journal of America’s “baby doctors” to employ someone who is not a member of the AAP, not a doctor—not even an American—to promulgate what amounts to an official position of the Academy?

Who is this Professor Singer? Well, no doubt about it, he is a bright young (only 37) man, educated at Oxford, a visiting professor at elite universities, a prolific author of books and articles—plus countless letters-to-editors, and much more. Nor does he tout pigs and dogs by chance. His best-known book is *Animal Liberation*, written in 1975; its main point is that we are guilty of “speciesism,” which he describes as “the tyranny of human over nonhuman animals.”

True, the book contains some noble sentiments, e.g., that “We have to speak up on behalf of those who cannot speak for themselves” and “The less able a group is to stand up and organize against oppression, the more easily it is oppressed.” The description certainly fits the unborn and Baby Doe perfectly—but of course Singer means animals. (Unfortunately the thing is evidently out of print in this country—understandably, there is only a limited market for such bizarre stuff—but given Singer’s sudden prominence as a spokesperson for the AAP, it deserves wide attention.)

Singer also comes out vehemently against inflicting *pain*—on

#### THE HUMAN LIFE REVIEW

animals, of course. Yet in his attack on the regs, he says nothing about Baby Doe's six-day agony. But I think I have the answer to that seeming-contradiction: those who promote infanticide would gladly do the killing not only painlessly but *instantly*; however—as the *California Medicine* editorialist noted about the new ethic itself—they do not think the general public is quite ready for that kind of thing. (Besides, there is an important legal distinction involved: starving Doe was “merely” withholding treatment; giving him a lethal injection would have been another matter.)

The reader will recall that Dr. Strain's model for an “ethics committee” was the existing type that “protects the rights of research subjects.” As it happens, Prof. Singer got into that controversy too a few years back and, typically, he had some strong views to expound. The whole thing was and remains vastly complicated and, yet again, directly involves abortion, which obviously produces “ideal” living human subjects. Many “old ethicists” cannot condone experimentaion on living “fetuses” for *any* reason. Singer wrote a review of several volumes on the subject (for the *New York Review of Books*, August 5, 1976) and of course approved such research, and expected all sensible people would too “Once we accept that the only interest the aborted fetus has is in not suffering . . .” (As noted, Baby Doe's case does *not* fit that principle.)

Some, among them Princeton's noted medical-ethicist Professor Paul Ramsey, wrote letters strongly objecting to Singer's inhuman views. Singer answered even more strongly (see the *NYRB* of Nov. 11, 1976). Quoting an ethicist who had said “all of us would be horrified” at the idea of dissecting living fetuses, Singer replied that *once* (read here, in the days of the old ethic) “one could have sat” on various commissions and “spoken with equal confidence of the horror ‘all of us’ would feel at the thought of open homosexuality, teenagers using marijuana, complete racial integration, full frontal nudity on stage and screen, and abortion on demand. Now, when people oppose any of these, we demand reasons instead of an appeal to feelings of horror. In particular, we are likely to ask: ‘What harm does it do?’ In the absence of sound arguments to the contrary, many of us have come round to the view that these

things are not so terrible after all, and that some of them are positively good.” (He did not specify which ones.)

Obviously Mr. Singer has strong views on a wide variety of controversial questions, and is evidently still adding to the list: back home in Australia, he has recently argued “The case for Prostitution” (in *The Age* of Sept. 18, 1980); “We should recognize,” he writes, “that those who earn a living by selling sexual services are fulfilling a socially valuable function.” And, anyway, “Most fundamentally, they do not cease to be people entitled to our respect.”

The really fundamental question is: Why would an official medical journal choose anybody with Singer’s flabbergasting intellectual baggage to put its case against the Baby Doe regs? The obvious answer is—must be—that Dr. Strain and his associates agree with Singer. Oh, but only *in re* Baby Doe, surely not all the rest of it? Well then, let the AAP officially repudiate Singer. But we do not expect to see any such repudiation. Singer *does* represent the New Future, which is indeed committed to new ethics in *all* these matters. Consider: it is not enough to merely *have* the “freedom” to abort babies, you must make others agree that it is *good* to do so; leaving homosexuals alone isn’t enough, you must agree that theirs is merely an “alternative life style,” and so on, on and on. The arguments become almost identical in all cases—are we not asked to agree that infanticide is really done for the good of the child?—because all such “social issues” are part and parcel of the new ethic, which is why Singer sees nothing wrong with lumping them all together at every opportunity.

Lest the reader think we exaggerate his views, be sure that there is much more (and worse) available: Singer is on record on just about every “ethical” question known to man (and, of course, if animals could read, he’d hit the best-seller list). But our point here is that he is the *prototype* “ethicist” for those review boards; he holds just the “right” views, and we can expect to see him and his type much sought-after to answer the questions that are the heart of the matter, namely, Who shall live?, and Who shall decide?

The New Future is even more awful than it seems. Even if the majority of Americans *knew* about what is involved, they would find it impossible to transfer Singer’s inhuman notions to their

#### THE HUMAN LIFE REVIEW

family doctor. The grand strategic factor in the current War Between the Ethics is that the apostles of the New Future *know* precisely what they are doing—never mind what they may *say*—while the mass of Americans don't yet realize there *is* a war, and those who do can scarcely believe that the enemy could seriously intend the predictable results. To be sure, the "old ethic" will not die: it is indeed based on the Judeo-Christian ethic, and it has been with us for thousands of years because, God knows, it is a *human* ethic. But of course it can be temporarily defeated, as it has been, often enough in history, whenever a militant, determined enemy has caught its defenders unprepared. Communism of course shows the lengths to which New Futurites can go—indeed, how "completely" they can succeed in setting up truly diabolical "utopias" ruled by inhuman New Men. But then Poland reminds us that, in the end, real men will remain, to rebuild human society. The urgent need now is to prevent things going as far as they *can* go, while there is still time to do so.

But we stray again. Grand allusions will not do the job. We need practical solutions. Obviously the old ethic—the sanctity of all human life—must be defended, and restored. It is by no means a lost cause as, symbolically at least, President Reagan's stand *in re* Baby Doe should remind us. The immediate problem is to translate principles into results.

Here, we make a modest proposal which would undoubtedly sharpen not only the issues, but also the beliefs of the contending warriors. Let us ask our "medical professionals" to add a few more letters to their shingles: after John Jones, MD, let us see either SLE or QLE—sanctity or quality of life, each as he actually professes. It's only fair, surely, that "patients" know *in advance* what their doctor really thinks about their worth, here and hereafter? Without doubt such an honest owning-up to one's real "views" would become a prime tool in educating the masses to a problem that most certainly concerns them most personally. And of course doctors (all too many) who have been trying hard to straddle the two warring ethics would be forced to choose which side they are really on.

I have no doubt that the inspired reader can supply many more

J. P. MCFADDEN

and better reasons for so simple a solution to a problem the greatest evil of which is that it is so hard to *pin down*. We need to know who really believes what. And, since our very lives are at stake, we deserve to know, do we not?

We began here with abortion, and all the evils it has spawned—just as slavery did—how can we end with anything less than a call for a Great Crusade to restore the sanctity of all human life? I am for such a crusade, of course, but I don't know how to bring it about. Not now, even though the handwriting is on the wall, because the majority of our fellow-citizens simply do not read it, or believe it if they do. They are much more likely to do so when it directly affects *them* (as abortion and even infanticide do *not*—we are beyond both). Our modest proposal would at least remind them that they can and *will* be affected. Indeed, it may also remind the New Futurites that they too are at risk. When his hour comes, will our MD, QLE, choose one of his fellows to “manage” his travail? Knowing what he knows about his views? Or will he (or she, of course, sorry) opt for one of the other guys, old-fashioned as he may be? As Dr. Johnson noted, the prospect of execution wonderfully concentrates the mind.

# On Being Personally Opposed

*Francis Canavan*

LAST SPRING, if you can remember the headlines that far back, the name of Sister Agnes Mansour was very much in the news. A member of the Sisters of Mercy, she had been appointed by the Governor of Michigan to administer an important State agency. In May, confronted with an order from the Pope himself either to quit the State post or leave the Sisters of Mercy, she chose to give up membership in her religious community.

The New York *Sunday News*, on May 15, 1983, reported her reason for leaving the community in these words:

It was inevitable. Agnes Mansour, as she is known now, is head of the Michigan welfare and social services agency, which among other things paid \$5.7 million last year, through the Medicaid program, for 19,500 abortions for women too poor to afford them. Personally, Sister Agnes said, she opposed abortions. But, she also said, it was not fair to deny abortions to poor women as long as other women could afford them.

Since her sense of fairness triumphed over her personal opposition to abortion, Agnes Mansour departed from the Sisters of Mercy. There is no point in reviving discussion of her case now. But there is one sentence in the above report that is worth reflecting upon because so many other people have expressed the same sentiment as Miss Mansour. That is, she said she was personally opposed to abortions but thought it unfair to deny abortions to poor women when other women could afford them.

Now that is a very puzzling statement. At a first and rapid glance, it may seem to make sense. But when one pauses to think about it, the sense becomes obscure. What does “personally opposed” mean in this context? Does it and can it mean anything at all?

A few hypothetical questions may serve to illustrate the difficulty in rendering the statement intelligible. What would be

---

**Francis Canavan, S.J.**, a professor of political science at Fordham University, is a frequent contributor and a member of our editorial board.

FRANCIS CANAVAN

implied, for example, by saying that I am personally opposed to infanticide and suicide (or voluntary euthanasia), but if they are made legal, I consider it unfair to deny the poor the right to have these operations performed by professional medical staff in anti-septic and properly equipped facilities? To up the ante a bit, could one coherently say, I am personally opposed to torturing prisoners in jails, but if the law were to allow it, I would be willing to serve as warden of a prison in which this was done? Would it make any sense to say that I am personally opposed to genocide, but if it becomes public policy to achieve racial purity through the extermination of certain ethnic groups, I will not impose my conscience on the public and will therefore administer the extermination program?

One can answer these questions by calling them unfair, because genocide, torture, suicide, and infanticide are not morally the same thing as abortion. Precisely. One is saying that genocide, etc., are moral crimes even when the law allows them, and that no one with a conscience can approve of them or take part in them; abortion, however, is different. But what, then, does it mean to say, I am personally opposed to abortion, but will approve, vote money for, or administer an abortion program?

It could mean that because of family upbringing or the teaching of a church, one regards abortion as a personal no-no, but not as something wrong in itself. The Catholic Church once forbade its members to eat meat on Fridays, not because there was anything inherently wrong in eating meat, but as an obligatory act of penance on the day of the week on which Jesus Christ died. It was an external law which the Church had made and could unmake. A Catholic politician could therefore honestly have said, I personally do not eat meat on Fridays because my church, for religious reasons, tells me not to, but I certainly will not try to impose this prohibition on the rest of the population—after all, eating meat on Friday is not something wrong in itself. Similarly, when a public officeholder tells us that he is personally opposed to abortion but considers it his duty to make it readily available to the poor, he may mean that he sees nothing morally wrong with abortion.

Or perhaps he would agree that abortion is morally wrong



because, to his mind, morality is something idiosyncratic and subjective, a kind of hangup that some people have but others do not. (“Baptists are against the strangest things, but I am a Baptist, so I go along with them.”) In this view of the matter, genocide and torture are *really* wrong and we simply may not engage in them, but abortion is only *morally* wrong and we must not impose our morality on those who do not share it.

What about suicide and infanticide? Well, of course, they are morally wrong, too, or at least most churches say they are, but in this day and age one hesitates flatly to pronounce them really wrong. They pose a delicate question for the holder of or candidate for public office. Let us not, however, be unfair to him. He devoutly believes that some things are really and truly wrong—racial and sexual discrimination spring to mind—and should be banned by law. But in our pluralistic society, he is deeply concerned to keep merely moral issues out of politics and law.

This is a public stance that we can admire (though not without a little effort) for its courage and sincerity, but it does beg certain questions. For instance, how do we tell the difference between those actions, like genocide, that are really wrong and those, like abortion, that are only morally wrong? It is an important question and one that our society must ultimately answer. The issues that arise and will continue to arise in public policy will force us to decide what, if anything, we collectively judge to be really wrong. But I doubt if we can expect an answer, or even serious thought about an answer, from people whose chief concern is to keep “moral issues” out of politics.

To return, however, to where we began, what does it mean to say that one is personally opposed to abortion but feels that in fairness abortion must be equally available to rich and poor? Only the person who says that knows what it means, and perhaps even he or she doesn’t know for lack of having thought about it. The one thing of which we may be sure is this: the person who makes this statement does not see anything really wrong in abortion.

He does not consider abortion an evil thing to inflict on the unborn child who is killed or an evil for the persons who take part in killing him. Otherwise, he would be saying that it is unjust to

FRANCIS CANAVAN

deprive the poor of the equal opportunity to commit the real and genuine evils in which the well-to-do can afford to indulge. But that would be to lapse into incoherence and, while incoherence is a mode of speech that has certain obvious attractions for persons engaged in the difficult art of politics, we should be slow to attribute it to anyone as his internal state of mind. We must therefore take the man or woman who is “personally opposed to abortion, but . . .” as meaning “opposed, but not really.” Rightly understood, “personally opposed” is a code word and a signal to the elect among the electorate. Unless the sender of the signal is himself simply confused, it means, “I’m with you; I don’t see anything really wrong with abortion, either.”

## Literary Abortions

R. V. Young

**I**N ONE SENSE nothing is easier than to show that unborn human beings are still human beings, that abortion is simply a form of homicide, that killing the innocent within the womb is no different from murder outside the womb. One no longer need play the prophet and say that legalized abortion will lead to infanticide; one need only point to the present grisly reality. But in another sense nothing is more difficult than the task of the anti-abortionist: while it is easy to win debates, it is hard to win hearts and minds.

The fact is that most people, most of the time, do not listen to arguments about moral issues; they instinctively follow the collective wisdom of the community. But with the regard to abortion and related issues, the collective wisdom of the community seems to have evaporated with breathtaking speed. It is painful to remember that as recently as the mid-sixties “abortion” was an ugly word, a term to be whispered with averted gaze and a shake of the head. Now abortion is a “right,” and to question its propriety is to indulge in reactionary opposition to progress or display a fanatical “puritanism” and a lack of “compassion.” The moral resources of the American public have withered under a relentless campaign of cultural distortion carried out largely through the mass media. So ubiquitous is the influence of television, radio, and the popular press—so deeply do they penetrate the fiber of American society—that even the most clear-headed thinker is susceptible to the view of the world propounded by these organs of the *Zeitgeist*.<sup>1</sup>

Of course it is possible to argue with rational certainty that abortion is tantamount to murder, and to point out in painstaking detail the omissions and inaccuracies of the typical media portrayal of the abortion issue; but in a world governed by “telegenic images” and “charisma,” the pro-abortion chorus of “opinion

---

R. V. Young is a professor of English Literature at North Carolina State University and an editor of the *John Donne Journal*.

makers” and celebrities carries more weight than does argument. To anyone who has considered the matter objectively, abortion is so self-evidently heinous that the indifference or outright disdain which greet his arguments are a source of exceeding frustration. It might be conceded that abortion is a “misfortune,” but never that it is an evil. The discouraged anti-abortionist begins to wonder whether he is arguing a moral abstraction which has no real meaning for his fellow citizens. His arguments are rarely opposed; they are merely dismissed, as if today’s intellectuals and media personalities were possessed of an intuitive vision to which logic and tradition are irrelevant.

Such smug assumptions should be challenged. If the worldview of the abortionist were sound and whole in a way that defies the objections of logic, then it ought to be embodied in an artistic vision. In particular we ought to see a “responsible, loving abortion decision” successfully depicted in a work of literature. The proponents of abortion who refuse to engage in serious moral argument at least ought to rest their complacency on the serious efforts of the moral imagination. Genuine literary artists—whatever their expressed opinions—are true to a vision of reality that transcends their conscious, workaday assumptions. Literature seizes the fluid sweep of experience and holds it up for contemplation; it draws meaning and purpose out of the apparent chaos of the mutable realm inhabited by human beings. The moral value of literature is generated, therefore, not so much by the exposition of precepts as by the authentic representation of significant experience.

But we do not find any significant literary works which are compatible with the abortion mentality. In literature abortion is almost always a symbol of spiritual loss and failure, as well as a matter of physical death and destruction. It is the recourse of the desperate, the foolish, or the selfish. Even apparent exceptions—quasi-literary texts which treat abortion affirmatively—reinforce this judgement. They are bad as literature because they distort reality in a clumsy, vulgar fashion, and an important part of their falseness and triviality lies in inauthentic representations of abortion. Ironically, it is in heavy-handed, hack literature and its cinematic and television counterparts that the abortion ethos of con-

THE HUMAN LIFE REVIEW

temporary intellectuals and aesthetes finds its only “artistic” embodiment. Unfortunately, what is cheap and shallow is what seems perfectly suited for mass media production.

Among the earliest strictly literary treatments of abortion is Ovid’s account of Corinna’s destruction of her (and, the poetic persona thinks, his own) unborn child in the 13th and 14th elegies of *Amores*, II.<sup>2</sup> This collection of poems is essentially a celebration of adultery, and Ovid himself was banished from Rome during the Emperor Augustus’ campaign of moral reform.<sup>3</sup> He can hardly be regarded as a moralist, much less a prude; and these two elegies are essentially a plea to the gods that Corinna not die from the abortion.

Nonetheless, Elegy 13 conveys the uneasy sense that abortion is not merely dangerous, but wrong—a violation of the natural order of things. Elegy 14 explicitly condemns the practice in terms that suggest that it was common enough among Roman women to be the subject of general public reprobation. Although Ovid closes the poem with a prayer that the force of his words be deflected from Corinna, he still depicts the woman who dies in an abortion as the condign victim of the violence she has initiated against another.

The woman who first tore the tender offspring  
From her womb deserved to die in her own war.  
How can you tread the sands of tragic combat  
Just to spare your belly a few wrinkles?<sup>4</sup>

The imagery of these lines is grotesque and violent: the woman who procures abortion is depicted as a gladiator in the sands of the amphitheatre, but the victims of her warfare (*militia*) are “tender offspring” (*teneros . . . fetus*). Especially graphic is the verb *convellere* (to wrench, rip, or tear out; to pluck up or out) which is the root of the English word “convulsion.”

The theme of the unnaturalness of abortion is pursued relentlessly in subsequent lines:

Why cheat the heavy vine of swelling grapes,  
And pluck with cruel hand the unripe fruit?  
Let ripe fruit drop of its accord—allow  
What lives to grow; life is no slight reward  
For a small delay. Why gouge your womb with weapons  
Vile, and poison children not yet born?<sup>5</sup>

Abortion is literally the destruction of fruitfulness—a betrayal and a waste as well as an act of violence. The frequent use of the interrogative mood, here and throughout the poem, implies the poet's puzzled sense of the meaninglessness of the act. Finally, Ovid brutally indicates the general public opinion of abortion, even in Imperial Rome. Fierce beasts, the tigress and the lioness, do not destroy their own young,

Yet tender girls do it, but not unpunished;  
Often she who slays her own in her womb  
Dies herself, and is borne to the pyre with hair  
Unbound, to mocking cries, "It serves her right!"<sup>6</sup>

"Tender girls" (*tenerae . . . puellae*) echoes with grim irony the "tender offspring" of line five, and the poem comes full circle: she who "deserved to die" (l. 6) "often . . . dies herself." Abortion is thus a violent, unnatural act that turns a tender girl into a gladiator ripping her own entrails to destroy a tender unborn child. Like the stripping of the vines or the plucking of unripe fruit, it cheats life, often wasting the mother as well as the child. In the eyes of the public it is a vile deed—though not a crime in Roman law—for which a woman deserves the death that is frequently her lot.

Hence Ovid, even amidst a series of witty poems that treat adultery as a sophisticated game, testifies truthfully to the repugnant nature of abortion; and though the two elegies considered here are, in part, prayers that Corinna be spared, still he concedes that the typical Roman would leave her to her fate. Ovid's work has survived because he is a genuine literary artist: the light of reality shines through his poems. It is instructive to contrast the treatment of abortion in an effusion characteristic of the contemporary "culture" of sexual liberation.

*The Abortion* by Richard Brautigan is a piece of classic sixties cute, which lamely reveals the inherent fraudulence of whatever fey charm the San Francisco flower-child scene could claim. The feckless "hero" of this thin volume runs a "library" open twenty-four hours a day, seven days a week, for the purpose of collecting "books" from "authors" rather than lending them to readers. During the course of the novel this library receives (for example) a "book written in longhand with red, green and blue crayons"

entitled *Growing Flowers by Candlelight in Hotel Rooms* from an eighty-year-old woman, *My Trike* by Chuck (age five), and a book about masturbation by a sixteen-year-old boy.<sup>7</sup> Cute.

The “plot” involves an exceedingly voluptuous young woman who arrives at the library one night with a book describing how she is trapped in the wrong body. Having been over-developed since she was eleven, she has spent the last nine years afflicted with the leering gazes and obscene propositions of lecherous men; and she has wearied of being regarded merely as an object of masculine sexual delectation. Naturally, she does what any girl with such a problem would upon encountering a man who, like “Mr. Librarian,” listens to her complaints with gentle understanding; she promptly goes to bed with him that same night and then takes up permanent cohabitation in the library. Evidently her sexual traumatization had been somewhat exaggerated. During the next few months she learns to accept her body as it is: “She was still a little awkward, but now instead of treating it as a handicap, she treated it as a form of poetry and it was fantastically charming.”<sup>8</sup> Not surprisingly, this learning process results in a very unpoetic pregnancy.

Now it may seem pointless to bring the likes of Richard Brautigan into an invidious comparison with Ovid, but he certainly cannot be simply dismissed—not, that is, as an influence. His work is published by Simon & Schuster, and the edition of *The Abortion* in my possession lists three other novels and three volumes of verse in print. He made a celebrated appearance at Yale when I was a graduate student there around 1970, and he was generally regarded as rather clever camp. His books are still readily available in paperback in stores where Homer and Shakespeare are often in short supply. This sort of popularity affords an interesting view into the mentality of contemporary liberalism, because *The Abortion* is itself a literary miscarriage: a textbook demonstration of artistic badness. Most modern intellectuals will tell you that literature should not be moralistic or preachy, but Brautigan is so patently didactic that one might suspect him of writing Planned Parenthood leaflets on the side. “The decision to have the abortion,” he tells us, “was arrived at without bitterness and was calmly guided by gentle necessity.” The young woman then proceeds to

R. V. YOUNG

talk like a recording on the SIECUS hotline or a guest on the Donahue show:

“I’m not ready to have a child yet,” Vida said. “And neither are you, working in a kooky place like this. Maybe another time, perhaps for certain another time, but not now. I love children, but this isn’t the time. If you can’t give them the maximum of yourself, then it’s best to wait. There are too many children and not enough love. An abortion is the only answer.”<sup>9</sup>

Having decided to diminish the number of children instead of increasing the amount of love, and promising to use the pill from now on, Vida and the librarian call for help upon one Foster, a huge bearish man who never wears anything over his torso but tee-shirts; and who drinks his whiskey straight from the bottle. The obliging Foster is able to recommend a certain Dr. Garcia of Tijuana, whose services he has had occasion to employ in the past; but of course he is initially full of solemn concern. He looks seriously at Vida and insists that she be certain about wanting “a little abortion.” She replies once more in lines that could have been learned by rote in her high school sex education class:

“Yes,” she said, “We’re too immature right now to have a child. It would only confuse us and this confusion would not be good for a child. It’s hard enough being born into this world without having immature and confused parents. Yes, I want the abortion.”<sup>10</sup>

His conscience satisfied by this effusion of self-indulgent piousness, Foster assures Vida that Garcia is “a good doctor,” that he will not “hurt you and there will be no complications.” Indeed, notwithstanding a tendency to raise the price at the last minute and a poor command of English, Dr. Garcia is “very kind and very good.”<sup>11</sup> Just your typical self-sacrificing, hard-working, God-fearing Tijuana abortionist.

Even Brautigan cannot wholly dispel the ghastliness of a Tijuana abortion mill when he comes to the abortion itself. Several abortions occur in addition to Vida’s while she and the librarian are there, and the abortionist’s young helper is continually flushing fetuses down the toilet. All the customers are tense and some unpleasant, but even though Dr. Garcia tries to overcharge them, his portrayal is far from unsympathetic: “The doctor looked like an awfully tired man. God only knows how many abortions he had performed that day.”<sup>12</sup> It is evident that the whole affair is trying,



but certainly this is no reflection, in Brautigan's mind, on the thousands of people who procure abortions, people like Vida and the librarian, who love children so much that they will kill them rather than offer them anything less than a perfect life: "As we got into the van, I thought there should be a statue for the Saint of Abortion, whoever that was, somewhere in the parking lot for the thousands of women who had made the same trip Vida and I had just finished, flying into the Kingdom of Fire and Water, the waiting and counting hands of Dr. Garcia and his associates in Mexico."<sup>13</sup>

Obviously Richard Brautigan's *The Abortion* is a deliberate attempt to write an affirmative account of abortion—a plea, as it were, for "safe, legal abortions." Brautigan only succeeds in producing a puerile, counter-culture trivialization of his theme. His implicit message can be summarized in the antinomian clichés of the period: "If it feels good, do it." "Get rid of your hang-ups." "Do your own thing." "I'm okay, you're okay." And so on *ad nauseam*. The book never engages reality; its emotion is cheap, its vision superficial.

Brautigan cannot be exonerated on the grounds that "times change," and abortion is not now what it was in Ovid's day; and Ovid's example cannot be discounted by assuming that he was influenced in spite of himself by ancient moral traditions. In the work of a serious writer abortion seems as repellent today as 2,000 years ago. Ernest Hemingway can hardly be considered a traditional moralist, much less a religious fanatic; still, the abortion contemplated in his story, "The Hills like White Elephants," falls like a shadow between the man and woman who are the principle characters. As they sit at a railway bar by the Ebro River, awaiting a train from Barcelona which will take them to Madrid, the woman remarks that the hills resemble white elephants. Her companion is unamused by her whimsical observation. Only after two pages of aimless but hostile dialogue does the source of the tension between them emerge:

"It's really an awfully simple operation, Jig," the man said. "It's not really an operation at all."

The girl looked at the ground the table legs rested on.

"I know you wouldn't mind it Jig. It's not really anything. It's just to let the air in."

R. V. YOUNG

The girl did not say anything.

"I'll go with you and I'll stay with you all the time. They just let the air in and then it's all perfectly natural."

"Then what will we do afterward?"

"We'll be fine afterward. Just like we were before."

"What makes you think so?"

"That's the only thing that bothers us. It's the only thing that's made us unhappy."<sup>14</sup>

The situation is clear, although neither word is ever mentioned in the story: the man wants the woman to have an abortion—the "operation" which he will not name; "Jig" wants to have her baby.

The young woman has sufficient inarticulate wisdom to recognize the irrevocable destructiveness of her lover's demands; she knows intuitively that an abortion cannot restore their affair to its original, pre-pregnancy state:

"We can have everything."

"No, we can't."

"We can have the whole world."

"No, we can't."

"We can go everywhere."

"No, we can't. It isn't ours anymore."

"It's ours."

"No, it isn't. And once they take it away, you never get it back."<sup>15</sup>

Reality cannot be undone. Even "an awfully simple operation" cannot alter the fact that she has changed, in his eyes and in her own. Nor can the "termination of her pregnancy" mask her realization that her lover's rejection of her baby is a rejection of what she has become, and hence of her personal identity. He wants her to be always the same, an untouched virgin, pristine and inviolate, for each new act of intercourse. Jig knows that, for all his protestations to the contrary, the man is demanding this abortion, demanding that nature not take its course, that their affair not grow into something greater and more challenging:

"You've got to realize," he said, "that I don't want you to do it if you don't want to. I'm perfectly willing to go through with it if it means anything to you."

"Doesn't it mean anything to you? We could get along."

"Of course it does. But I don't want anybody but you. I don't want anyone else. And I know it's perfectly simple."

"Yes, you know it's perfectly simple."

THE HUMAN LIFE REVIEW

"It's all right for you to say that, but I do know it."

"Would you do something for me now?"

"I'd do anything for you."

"Would you please please please please please please stop talking?"<sup>16</sup>

She knows that she is being manipulated, used; that in not wanting "anybody but you" he does not want her completely, not as she might be. He is in love with *his* own idea of her, not with the contingent—the unpredictable and uncontrollable—reality that she is a human person. There is guilt of course even in him, apparent in his refusal to name the "operation"; but the story ends with what appears to be her crumpling under the pressure he exerts, with her telling him the lie he wishes to hear: "I feel fine", she said. "There's nothing wrong with me. I feel fine."<sup>17</sup>

What would have been Hemingway's opinion of legalized abortion? How would he have voted? Any answer, of course, could only be pure speculation. He might well have followed the modern "party line" and actively supported it. But his artistic conscience is another matter. In this story—in this vividly realized episode—abortion is none of the things its proponents claim for it, and making it "safe and legal" would not alter the case. It is not an instrument of women's liberation; it is a lever used by a man to pry a woman loose from the integrity of her own nature, to make her remain as he wants her to be—an uncomplicated object of unfettered sexual companionship—rather than a whole woman. She realizes that she is being violated but, having accepted life on his terms—"We can have the whole world"—she fears to resist. Thus in this story abortion, the destruction of the baby who should fulfill the love between the man and the woman—is a symbol of the incompleteness and selfishness of the man's love, of his refusal to surrender himself to her or to love.<sup>18</sup>

It is important to realize that revulsion at abortion is not confined to men. It afflicts women authors equally. Anne Sexton would seem to be an unlikely source for a negative view of abortion, if one were to accept the current "pro-choice" position as normal. Throughout her career as a poet until her suicide in 1974, she was associated with the "confessional" school of poetry most notably exemplified by the late Robert Lowell. Her life and work are touched, at least, with overtones of feminism. Still, "The Abor-

R. V. YOUNG

tion” is filled with sheer loathing for its subject. It begins with a refrain (twice repeated) that states starkly the violation of the natural order, the emptiness where fullness should have been, effected by abortion; then this statement is realized in concrete images of a brutally despoiled natural terrain:

*Somebody who should have been born is gone.*

Just as the earth puckered its mouth,  
each bud puffing out from its knot,  
I changed my shoes, and then drove south.

Up past the Blue Mountains, where  
Pennsylvania humps on endlessly,  
wearing, like a crayoned cat, its green hair,  
its roads sunken in like a gray washboard;  
where, in truth, the ground cracks evilly,  
a dark socket from which the coal has poured.<sup>19</sup>

These images reflect the woman’s state of mind: the abortion will leave her body like the earth around an abandoned coal mine where “the ground cracks evilly”; her womb will become a “dark socket,” empty and desolate as the Appalachian countryside.

“In Pennsylvania” she meets “a little man” who is part of no fairy tale (“not Rumpelstiltskin, at all, at all”), and she is no princess who will live happily ever: “he took the fullness that love began.” As she goes back home the natural world around her again mirrors her condition:

Returning north, even the sky grew thin  
like a high window looking nowhere.  
The road was as flat as a sheet of tin.

Her body is now “flat” and “thin” also, and by the logic of the images her life is “looking nowhere.” The speaker of Sexton’s poem tries to argue away the reality of the baby that has been killed, but to no avail:

*Somebody who should have been born is gone.*

Yes, woman; such logic will lead  
to loss without death. Or say what you meant,  
you coward . . . this baby that I bleed.

The woman’s rationalization has led her to regard the abortion in abstract terms as “loss without death,” but the actual experience—

expressed in broken, elliptical syntax and a macabre concrete image—belies her “logic.” Her own bleeding reminds her inexorably of the blood shed by her aborted baby, who was definitely “somebody.”

Of course women are quite as capable of suppressing their instinctive reverence for new life in literature as in their actions, and where there is a dearth of artistic ability there is little likelihood of artistic conscience. This combination of literary ineptitude and dishonesty provides a definitive embodiment of the view of abortion proffered by the quasi-respectable mainstream of secular liberalism. Where Richard Brautigan traded in factitious whimsy, Grace Metalious produced, in *Peyton Place*, what might be the tawdriest, most sensationalistic soap opera ever to masquerade as a novel, a book very different in style and tone, which appealed to the suburban middle class rather than to “turned-on” undergraduates. “The explosive best seller that lifts the lid off a respectable New England town,” reads the paperback edition’s cover blurb, and on the back there is a photograph of the unprepossessing Mrs. Metalious over a caption which proclaims her “the young housewife in blue jeans who created America’s most controversial novel.”<sup>20</sup> The book was remarkably successful in the late fifties and early sixties, and was made into a film and even, for a time, a television series. Although it would be difficult to find a credible literary critic to speak well of the novel, its characterization, thematic development, and general outlook are fairly typical of what today passes for serious television and cinema.

Grace Metalious was a woman of exceedingly slender literary gifts, but she possessed sufficient cunning to endow her vulgar story with a spurious air of moral earnestness and literary pretension, such that a citizen could enjoy the thrills of a smutty book and still tell himself that it was “significant” and “frank”; one is reminded of the man who buys *Playboy* for the interviews. In the world of *Peyton Place* anyone who appears conventionally virtuous and respectable must *ipso facto* be suspected of greed, envy, hypocrisy, and—above all—sexual repression. The characters generally fall into what have become contemporary media stereotypes: genuine enlightenment and benevolence are personified in a

physician, a newspaper editor, and the high school principal. Bigotry and avarice are embodied in the local mill owner who virtually runs the town. Clearly Metalious blazed the trail for the Norman Lear style of television. From time to time Metalious indulges in what she apparently regarded as “fine writing” lest the reader forget that *Peyton Place* is *Literature*, and not mere seamy sensationalism. The book’s opening sentences furnish a characteristic sample:

Indian summer is like a woman. Ripe, hotly passionate, but fickle, she comes and goes as she pleases so that one is never sure whether she will come at all, nor for how long she will stay.<sup>21</sup>

Evidently, even the weather of the little town cloaks a brooding strain of repressed eroticism.

An abortion figures prominently in one of the more important strands of the meandering plot of *Peyton Place*. The situation is a classic “hard case” of the sort so often invoked by the proponents of legalized abortion. Selena Cross is a poor girl from the “wrong side of the tracks.” But she is beautiful, kind, generous, mature, and industrious; moreover, she has a chance to escape her poverty. Over the objections of his parents, a local boy of the sort who makes good grades, wins athletic honors, heads student government, and is voted most likely to succeed, is passionately in love with Selena and promises to marry her as soon as he finishes school. Selena, however, lives in a shack with her moronic mother, her younger half-brother, and her violent, drunken stepfather who begins molesting her when she is a very young teenager. When she is sixteen she goes to the town physician, Matthew Swain, and begs for help—she is two months pregnant.

Swain is clearly the book’s model of nobility. He is, as one might have guessed, “a tall big-boned man with a head of thick and wavy silver hair.” He is, in addition, “a good and upright man, and a lover of humanity.” He is gruff and outspoken, but of course under his tough exterior is a warm, kindly heart. Although a wellspring of compassion and generosity, “There were three things which he hated in this world, he said often and angrily: death, venereal disease and organized religion.”<sup>22</sup> The entire book is designed to enshrine this physician’s judgments in a monument of clichés.

THE HUMAN LIFE REVIEW

When Selena begs him to help her, he is thrown into a crisis of conscience:

What are you doing Matthew Swain? he asked himself. Here you've been shooting off your mouth for years. What will you do now, when it is time to put your fancy theories to the test? Nothing dearer than life, eh, Matthew? What is this thing you are thinking of doing if it isn't the destruction of what you have always termed so dear?<sup>23</sup>

But the doctor resolves his dilemma within two pages when he faces the anguish of the pregnant girl:

"Oh, Doc," she said, staring at him with violet-circled eyes. "Oh, Doc. I wish I were dead."

"Come on, now," he said cheerfully. "We'll take care of everything and fix you up as good as new."

And to hell with you, he told the silent voice. I *am* protecting life, *this* life, the one already being lived by Selena Cross.<sup>24</sup>

By now, of course, this is a familiar argument.

Dr. Swain subsequently accosts Selena's stepfather, extracts from him a signed confession, and frightens him into leaving town by threatening to expose him to the rough justice of the mob. A few years later, during World War II, after he has enlisted in the Navy, the stepfather returns on leave. Selena by this time is living alone with her half-brother, their mother having committed suicide. The stepfather attempts to rape the girl, and she kills him with a set of fire tongs. She and her brother bury the body, but in due course the slaying comes to light. Selena tries to protect Dr. Swain by refusing to explain her motive, but he takes the stand as a surprise witness and explains what had happened three years before, and why the homicide was undoubtedly justifiable. This grand gesture is the book's climax: Selena is found not guilty and Dr. Swain is applauded by all, residents and visiting reporters alike, for his courage and for being a "magnificent old gentleman."<sup>25</sup> A local lawyer assures an out-of-towner that there is no question of the physician losing his license, even though abortion is illegal.

Obviously, this is a thoroughly contrived situation, but Metalious is not content until she has squeezed every available trigger of sensational emotion. The one trusted nurse chosen by Dr. Swain to aid him in the covert operation is Mary Kelley, an Irish Catholic.

She contemplates going to her parish priest, Fr. O'Brien, but her mental image of his "big, blue jowled face" and "narrow, black eyes which could pierce like knives" intimidates her. She fears that he will refuse her absolution unless she turns over to the law the physician whose "hands she had regarded as next to those of Christ in their gentleness." And finally, her participation in the abortion opens her eyes to reality in a new way, as she "wondered why she had always thought that it was only Catholics who were against abortion. It couldn't be so, for here was the Doc, a Protestant, with eyes full of pain as his hands expertly performed an alien task."<sup>26</sup> Thus the poor, priest-ridden woman learns that the man who is *really* against abortion is he who will *do* one; and though it burdens her conscience, her heart rightly chooses the compassionate, Christ-like "Doc" over the narrow-minded priest.

Apart from the tendentiousness of this account of abortion, there is the additional fact of its inaccuracy. The physician and the nurse give it out that they have performed an emergency appendectomy on Selena Cross, and, although the narrative of the abortion itself is rather vague, the impression is left that Selena's abdomen is being opened up and the fetus removed in the manner of a hysterotomy. In fact, we are told that the doctor actually does remove the girl's perfectly healthy appendix just to strengthen his story. But from what Selena tells the doctor, she is only eight or nine weeks pregnant. A "D. & C." would be the obvious method, but the author does not make this at all clear. What is more, when Dr. Swain later faces down Selena's stepfather, he recalls bitterly "the gelatinous red mass of Selena's unborn child."<sup>27</sup> It would appear that "the housewife in blue jeans" had no very clear idea of prenatal development or about the manner in which abortions are done. An eight-week fetus is a recognizable human being. Even a D. & C., the most probable method of abortion at this stage, would produce, not a "gelatinous red mass," but a great deal of blood and the baby's torso, limbs, and head in pieces. This may seem a trivial point, but it underscores the basic falseness of *Peyton Place* (and of poor literature generally): the book purports to be a tough-minded exposé, but it fails to represent reality even on a simple physical level. It is questionable whether the abortion performed



#### THE HUMAN LIFE REVIEW

by Matthew Swain would seem such a noble, heroic act if the reader were asked to envision not the “removal” of a “gelatinous red mass,” but instead the dismemberment of a living, squirming baby. And how would a real Mary Kelley have felt if forced to reassemble the pieces of the baby to be sure Selena’s womb was completely empty? Grace Metalious should have read Anne Sexton: “Or say what you meant, you coward . . . this baby that I bleed.”

The French philosopher, Maurice Merleau-Ponty, maintains that no given utterance is simply a transcription of an *a priori* thought, but rather that speech (*la parole*) is the realization of thought: “Thus speech, in the speaker, does not translate ready-made thought, but accomplishes it.”<sup>28</sup> This proposition is even more applicable to works of literature, which deal in image, metaphor, and symbol: meaning unfolds in the imaginative re-creation and ordering of experience and transcends the personal subjective intentions of the author. Hence we find that the intuition that deliberate abortion is ugly and repellent is corroborated by the unbiassed response of the literary imagination, whatever the explicit social and political opinions of most writers might be. Deliberate, factitious attempts to depict it as something more agreeable are devices of the vulgar sensationalism of *Peyton Place* or Richard Brautigan’s Age-of-Aquarius puerilities. The fashionable assumption that it is appropriate for a cultivated intellectual mind to favor legalized abortion can no more bear scrutiny than the logic of pro-abortion arguments. Only meretricious literature offers the anti-life advocate the comforting illusion that his position is in any way humane. In genuine literature abortion is depicted as ghastly as it truly is: thus the literary imagination accomplishes its most important task, to shatter our self-delusions and remind us of truths about ourselves that we might often wish to forget.

#### NOTES

1. For a superb assessment of the effect of the mass media—especially films, television, and popular music—on contemporary American culture, see James Hitchcock, *What is Secular Humanism? How Humanism Became Secular and How It Is Changing Our World* (Ann Arbor, Mich.: Servant Books, 1982), pp. 81-98. This crucial chapter was reprinted in the *Human Life Review* (Spring, 1983, pp. 39-52).

R. V. YOUNG

2. There are brief useful discussions of abortion in the ancient world by John T. Noonan, *Contraception: A History of its Treatment by the Catholic Theologians and Canonists* (Cambridge, Mass.: Harvard Univ. Press, 1966), pp. 9-55; and by Rev. John Connory, S.J., *Abortion: The Development of the Roman Catholic Perspective* (Chicago, Ill.: Loyola Univ. Press, 1977), pp. 7-32. The definitive treatment of the subject is Enzo Nardi, *Procurato aborto nel mondo greco romano* (Milano: Giuffrè editore, 1971). For a recent useful summary in English, see Richard Harrow Feen, "Classical Roots of the Personhood Debate," *Faith & Reason*, 9 (1983), pp. 120-27.
3. I have of course oversimplified Ovid's troubles with Augustus. For a thorough and subtle account see Gordon Williams, *Change and Decline: Roman Literature and the Early Empire* (Berkeley, Calif.: Univ. of California Press, 1978), pp. 52-101.
4. *Amores*, II, 14, 5-8: *Quae prima instituit teneros convellere fetus, / militia fuerat digna perire sua. / scilicet, ut careat rugarum crimine venter, / sternetur pugnae tristis arena tuae?* I have translated from the Latin text of the Loeb Library edition of the *Heroides and Amores*, trans. Grant Showerman, rev. G.P. Gooch (2nd ed., Cambridge, Mass.: Harvard Univ. Press, 1977).
5. *Ibid.*, 11, 23-28: *Quid plenam fraudas vitem crescentibus uvis, / pomaque crudeli vellis acerba manu? / sponte fluant matura sua—sine crescere nata; / est pretium parvae non leve vita morae. / vestra quid effoditis subiectis viscera telis, / et nondum natis dira venena datis?*
6. *Ibid.*, 11, 37-40: *at tenerae faciunt, sed non inpune, puellae: / saepe, suos utero quae necat, ipsa perit. / ipsa perit, ferturque rogo resoluta capillos, / et clamant "merito!" qui modo cumque vident.*
7. *The Abortion: An Historical Romance, 1966* (New York, NY: Simon & Schuster, 1971), pp. 14-15, 25, 82.
8. *Ibid.*, p. 86.
9. *Ibid.*, p. 71.
10. *Ibid.*, p. 89.
11. *Ibid.*, p. 90.
12. *Ibid.*, p. 190.
13. *Ibid.*, pp. 218-19.
14. *The Short Stories of Ernest Hemingway* (New York, NY: Charles Scribner's Sons, 1966), p. 275.
15. *Ibid.*, p. 276.
16. *Ibid.*, p. 277.
17. *Ibid.*, p. 278.
18. See the similar use of abortion as a symbol of horror and of a broken relation between a man and a woman at the close of John Cheever's story, "The Enormous Radio," in *The Enormous Radio and Other Stories* (N.P.: Funk & Wagnalls, 1953), p. 180.
19. "The Abortion" is quoted from *All My Pretty Ones* (Boston, Mass.: Houghton Mifflin, 1962). For another powerful poem on abortion by a woman see Gwendolyn Brooks, "The Mother," *Selected Poems* (New York, NY: Harper & Row, 1963). This poem first came to my attention as reprinted in the *Human Life Review* (Winter, 1981, pp. 143-144).
20. *Peyton Place* (1956—reprinted New York, NY: Dell, 1958). The dog-eared copy quoted in this essay represents the eighth paperback printing within two years of the novel's original publication.
21. *Ibid.*, p. 7.
22. *Ibid.*, pp. 63, 65, 9.
23. *Ibid.*, p. 203.
24. *Ibid.*, p. 205. Emphasis in original.
25. *Ibid.*, p. 481.
26. *Ibid.*, pp. 216, 217.
27. *Ibid.*, p. 223.
28. *Phenomenology of Perception*, translated by Colin Smith (London: Routledge & Kegan Paul, 1962), p. 178. Cf. Philip E. Lewis, "Merleau-Ponty and the Phenomenology of Language," in *Structuralism*, ed. Jacques Ehrmann (New York, NY: Doubleday, 1970) pp. 9-31.

## Illegitimacy Chic

*Frank Zepezauer*

**Y**OU SEE THEM clinging to mommy's hands, mostly one child, occasionally two, pumping tiny legs to keep up, or tumbling about in a corner beneath the chatter of the cocktail party. Sometimes they whine or cry or clown around looking for attention or affection, like your kids or mine, but eventually you notice a difference.

You don't see a father. Nor do you hear about him in all the talk the children generate. The fathers are gone, absent not only from the gathering but from the lives of their children. Some remain a blur in the child's mind. Some, increasingly, disappear altogether, ciphers their children never knew and will never come to know.

You may take this all in, but under the new etiquette you may show no curiosity about the father. No sense belaboring the obvious. The party is in California. You are drinking chablis. The child is with his mother. The father is not with them. That's all you need to know.

Such polite know-nothingism conceals even apparently innocent facts. To check out a statement, I called a newspaperman to ask whether a certain married woman in well-publicized trouble had any children. The journalist, who had spread the woman's felony drug problems all over page one, barked back at me, "Don't you think you're getting personal?"

"I'm only asking whether she has children," I said. "What's so personal about that?"

"That's her business." He hung up.

A call to the woman's lawyer provoked the same hostility. But after convincing a secretary I was only pursuing accurate journalism, I was finally privileged to learn that the lady had, in fact, no children.

So, when you see a toddler hopping around mommy's skirts, you pretend it was delivered by an up-to-date stork judiciously blind to the mother's marital status, sexual preference, and mode

---

*Frank Zepezauer* is a highschool teacher in California, and a frequent contributor to this and other American journals.

FRANK ZEPEZAUER

of living. Gossip circulates nevertheless, and you learn that many of the children survive severed relationships, a marriage or live-in arrangement gone sour, the woman in 90% of the cases exercising primary or total custody. You expect to find such situations during a period when half of all marriages break up and in an area—the rim of the ultra-progressive San Francisco Bay—where half the people over 15 are single.

But even during a great cultural leap forward you're still astonished to learn how some of the children end up without daddies. You hear about handy procreational services where single women become impregnated by compliant men—married or single, gay or straight—who relinquish all rights to the offspring. The trend adds a new dimension to the singles bar, the dating service, and the personal want ad. And it produces soap opera combinations. In one case a lesbian went to bed with her lover's brother to keep the genes in the family, so to speak. In another a gay gentleman with the proper physical and intellectual qualifications agreed to bite the bullet and mate with a lesbian. In both cases, the baby wound up with two parents, mommy and the nice auntie who sleeps with her.

The latest news thus arrived with its own inevitability. In November, 1982, we learned that San Francisco Bay Area feminists opened their own sperm bank. And again, no one asked embarrassing questions. If the woman applying for artificial insemination was married or single, straight or gay, that was her business. She'd get the sperm anyway. In fact, one third of the fifty daily inquiries come from lesbians so habituated to the practice that they have their own in-group name for it: turkey basting.

Although the Bay Area takes such developments in stride, the feminists who opened the sperm bank anticipated flack from traditionalists caught on the wrong side of the time warp. Thus in response to reporters asking about the bank's possible effects on the old-style family, the director had a "ready answer":

There is an image in our society that the way you raise children is with a mother and a father. About the only place that appears is on television. Hundreds of thousands of women are single now. To say to a single woman that she can't have a child is to say qualitatively to every single mother that her child's childhood is not good, which is just not true.

To those of us who still entertain the “image” that children should be raised by a mother and father married to each other, believe even that a child once conceived should be brought to birth, this feminist double-speak opens up more questions. At first glance, however, we would seem to have no objection to a sperm bank accomodating single women. After all, don’t these women *keep* their babies, offering them a home and an upbringing of sorts? Don’t they in their bizarre way opt for life and shouldn’t they expect applause from those who fight for the *right* to life?

Well, maybe. But, from an anti-abortion pro-family perspective, many questions still remain.

The first concerns the good society. Talking about an “abortion culture,” which we believe is forming before our eyes, forces us to ask about an “anti-abortion culture.” The decision to kill—or to protect—a fetus connects with deeply rooted assumptions. Tug at it and you tug at a complex rhizome system where every life breaking through to the surface remains part of the common life below ground.

Ask, therefore, whether the “product of conception” should be aborted and you must next ask about the relationship that brought it about, for if the decision is not to abort, you are then invited by indignant freedom fighters to consider the “quality of life” that will soon come to birth. Until recently such questions presupposed the family norm, a mother and father united by mutual commitment publicly declared. The norm structured our descriptions: a child was conceived in or out of wedlock, grew up with both parents, or with one or none, was a foundling, a stepchild, an orphan, a bastard, in accordance with a pattern that applied to everyone. The pattern remained even when disturbed, as if a departed mother or father had walked through a paper wall leaving their form behind in hollow silhouette. It could thus guide our efforts to repair or compensate. A sailor might not see his children for a year, a peasant might work abroad for a season, a father might fall in battle, a mother might succumb in childbirth. In each case the normative pattern, by showing the gap between “should” and “is,” also showed the way by which the loss or deviation could be dealt with. An absent father could still serve the family by giving his sons an ever-present, if blurred, image of male obligation, and he would

eventually take his place again in the household. A bereaved family could see the way—with the help of relatives or in-laws or new spouses—to make itself whole again or to adapt according to its memory of being whole. The pressure of the pattern allowed fall-back positions: illegitimacy rather than abortion, tardy marriage rather than illegitimacy, infidelity rather than divorce, imperfect accommodations to a contingent world that often forgave without denying the infraction. The man who broke his leg used his good leg as the model for recovery. The man who lost his leg still realized that two was the norm, admitting to an amputation rather than boasting an alternative leg style.

But single women who deliberately set up fatherless families assault the norm directly, by what they do and by the way they defend what they do. By reducing the traditional family to an “image” you can either hold or reject, they transform it into just another choice in the new supermarket of domestic arrangements. They drain the concept of its substance, for a norm must be universal and compel respect. It is what we adapt to, not the other way around. But at the cutting edge of change, we see a new pattern. As one self-styled pioneer put it:

My mother says we’re turning marriage inside out, but why not? What’s so wrong about first assessing your needs, then constructing something that fits?

Good questions. Why not? What’s so wrong about it? We’d better have some good answers or else Behavioral Science will have for us by the end of the year a new study, “The Myth of the Necessary Father.”

Another question raised by a feminist sperm bank concerns feminists themselves, who more often than not seem to gather on the opposing side on those issues the anti-abortion and pro-family movement is fighting over. Some feminists oppose abortion, more than a few respect traditional family and religious values (and balk at cultural revolutions), but their leaders have earned a reputation as militant defenders of abortion rights, alternative families, and secularist religions based on radical individualism. Their ideology has released enormous reformist energy and abrasive contradictions: feminists preach pacifism while praising the combat ferocity of female soldiers; push the social-causation theory of sex difference while proclaiming the in-born superiority of women; fight to

expand options for women while savaging the option of homemaking; proclaim the individuality of women while treating all women like feminists; exercise power by claiming they lack it; seek liberation by enlarging the centralized state, and strive to erase the tyranny of the past by imposing the tyranny of the future.

Their new sperm bank adds to the list. Examine, for example, their frequently expressed demand for emancipation from the marital and “natalist” imperative. We learned the horrors of the population explosion, saw sterility raised to a virtue, even saw celibacy championed in the midst of a sexual revolution. In response, the rest of us granted more psychological space to an increasing number of singles, adapting to their growing affluence and power. In our backward way we nevertheless assumed that the choice to remain unmarried carried with it the obligation to remain childless. Under the old rules you couldn’t have it all. You could choose one road, and thereafter do no more than speculate on the road not taken. But with a sperm bank that caters to single women, you can now have it both ways. Maternity is back in vogue and the only emancipation is from bothersome fathers.

When it comes to contradictions, we can also ask about the most precious of modern values, equality between the sexes—as might occur, let’s say, between a mother and father. In the progressive sperm-bank family you will achieve equality by eliminating one of the partners. The biological father abdicates all responsibility although he may (the mother willing) visit the family when the child reaches 18 to see how things turned out. The surrogate fathers—the *ad hoc* support system the mother will recruit—exercise no legal rights over the child and can approach him only on the mother’s terms.

What about equality of the sexes between a son and daughter in a sperm bank family? During an age profoundly appalled at male domination, the sperm bank boy will grow up in a female-dominated household where all love and power and value comes from the woman who controls his life. Nor will he have equal opportunity with his sister for achieving sexual identity. The girl will see daily a woman, a “role model”—or two—at the center of the family, defining for her what a family is. The boy will only see those men his mother allows into the family, steadily, or off and

FRANK ZEPEZAUER

on, close or distant, one at a time or in groups, as she chooses. He will in addition most likely be subject to an ideology that reduces masculinity itself to an obsolete "role" which should be discarded. Thus for all the talk about freedom, the boy will be raised as a social experiment, an angelic little androgyne feeding mommy's feminist fantasies. And for all the talk about positive role models and about men sharing in the nurturing of the young, the boy will have for a biological father a faceless functionary whose sole contribution to the family was to ejaculate into a test tube.

The feminist sperm bank thus provokes a final question: Does any consistency unite these apparently endless inconsistencies? I think so. Like paradox itself, the paradox-ridden feminist crusade resolves its contradictions at a fundamental level. First of all, there is the pursuit of power. Feminists believe men have too much of it, abuse what they have, and should be forced to share it. When half the power, or—what seems to be more to the purpose—when most of the power belongs to women, we will have a better society because we will be controlled by nicer people.

Connected with the drive for power is an almost Nietzschean celebration of the individual will, a never-ending expansion of tolerated "private" behavior. After all the talk, what we finally come down to in the pro-abortion appeal is that the mother does not *want* the child and should be allowed to destroy it. In the case of premeditated illegitimacy, all that matters is that the mother *does* want the child, and should be allowed to set up for it any domestic arrangement she chooses.

Notice another underlying consistency in feminism's war against nature, against any stress on genetic influence, or against whatever has evolved into a tradition. Their most radical ideologues project a mathematical vision of an egalitarian society where technology solves human problems, the syringe of the sperm bank or the abortion clinic taking precedence over tiresome inter-personal dialectics. The new biological technology that has provided these marvels, along with artificial insemination and *in vitro* fertilization and the growing impatience with traditional family obligations, thus brings us closer to the prophetic nightmare of Huxley's *Brave New World*. There we will achieve a society in which sex is totally liberated from procreation, and procreation from marriage; mar-



#### THE HUMAN LIFE REVIEW

riage itself will give way to a state-controlled mass of atomized singles conceived in laboratories, brought to birth in factories, and raised in government orphanages.

Notice, finally, that even though an abortion clinic which snuffs out a life and a sperm bank which brings a life into being seem to define polar opposites, one concept unites them. Call it the expansion of property rights. The child in the womb, we hear endlessly, is not only *in* the woman's body, but has become an integral part *of* her body, part of her individuality, the last remaining sanctuary. No prior claim can thus exist to the child's body, not from society, nor from the father, nor from the child itself. The child a woman carries is therefore her property, hers exclusively, hers to keep or to kill.

#### THE HUMAN LIFE REVIEW

wife would get pregnant and, after five or six months, have an abortion. The kidneys from their own pre-born child would then be transplanted to the husband. Here again, the point is that the fetus, being human, offers real hope (sometimes the only hope) for other humans who suffer from some physiological dysfunction. But it raises the prospect of using the uterus as an organ farm, and the fetus as an organ bank. While based on the recognition that the fetus is human, it denies the right of unborn children not to be exploited as a means for some other human's end.

In Australia, serious consideration is being given to deliberately growing human embryos to provide organs for transplantation in children. Mr. Justice Kirby, chairman of Australia's Law Reform Commission, has expressed his belief that a majority of the populace might see this as better than simply burying the aborted fetuses.<sup>3</sup> The inequity of allowing some fetuses to live and consigning others to an arbitrary and premature death does not disturb some people as much as the "waste" involved in not using aborted human fetuses to improve the health of other human beings. As a spokesman for the medical faculty at Adelaide University puts it: "In Adelaide alone there are over 4,000 foetuses a year. It seems a waste if they are not going to be used."

In 1980, the U.S. Food and Drug Administration announced its approval of the use of fetal lung tissues in a vaccine against human rabies. Even people who find this to be an acceptable use of parts of aborted fetuses may not be so accepting toward less medically-justifiable cosmetic uses. Two years ago a reputable French legal journal, *Gazette du Palais*, reported the interception by customs officials of a truck loaded with frozen human fetuses at the Swiss-French border. The fetuses were destined for French cosmetic laboratories, where they could become ingredients for "beauty products used in rejuvenating the skin," a high-price item in France.<sup>4</sup> One seller, Madame Renée Ibry's, advertises the claim that her beauty products are "absolutely natural"—a rather grotesque compliment to the unborn human fetus. The commercial trafficking in human fetuses is precisely what inaugurated the public debate on fetal research and experimentation in Great Britain in 1970, when Norman St. John-Stevas, M.P., shocked the English-

DONALD DEMARCO

speaking world by reporting to Parliament the commercial sale in England of human fetuses for research purposes. His report caused the appointment of an advisory committee, under the chairmanship of Sir John Peel, to draft regulations. In May, 1972, The Peel Report on “The Use of Fetuses and Fetal Material for Research” was issued.<sup>5</sup>

The British guidelines were drawn not only to end the scandal of commercial sale of fetuses to researchers, but also to end what virtually everyone agreed was the the worst abuse—keeping them *alive* for up to three or four days.<sup>6</sup> Another central concern of the Peel commission was to offer equal protection for wanted fetuses and those scheduled for abortion. The Report states:

In our view it is unethical for a medical practitioner to administer drugs or carry out any procedures on the mother with the deliberate intent of ascertaining the harm that these might do to the fetus, notwithstanding that arrangements may have been made to terminate the pregnancy and even if the mother is willing to consent to such an experiment.

A parallel situation soon followed in the United States. The *New England Journal of Medicine* reported (May 18, 1972) a study to determine whether or not rubella-vaccine viruses administered to the mother are capable of causing infection of the fetus. In this study, “most of the samples, obtained by hysterotomy, were delivered to the laboratory still surrounded by intact membranes.”<sup>7</sup> In March of that same year, Wilhamine Dick, testifying at Pennsylvania’s Shapp Abortion Law Commission Hearing, said that Pittsburgh’s Magee Women’s Hospital packed aborted fetuses in ice while they still showed signs of movement and shipped them to experimental laboratories. On the same date in the following year, Connecticut’s Attorney General presented an affidavit to the U. S. Supreme Court regarding a Yale-New Haven experiment in which a baby boy was dissected without anesthesia before he died. The next month (April 15, 1973), the *Washington Post* reported that Dr. Gerald Gaull, chief of pediatrics at New York State Institute for Basic Research in Mental Retardation, “injects radioactive chemicals into umbilical cords of fetuses . . . While the heart is still beating he removes their brains, lungs, liver and kidneys for study.”<sup>8</sup> Also in 1973, a medical journal reported experiments car-

ried out on live-born fetuses who were decapitated in order that their heads could be perfused to study carbohydrate metabolism.<sup>9</sup>

In 1974 the Federal Drug Administration approved a prostaglandin known as Prostin F2 Alpha for use in second trimester abortions. The important feature of this abortion-inducing substance is that it often results in the delivery of a live, intact baby—a highly suitable subject for research purposes. Dr. Kurt Hirschhorn of New York's Mt. Sinai Hospital has stated that “with prostaglandins, you can arrange the whole abortion . . . so [the fetus] comes out viable in the sense that it can survive hours, or a day.”<sup>10</sup> According to Hirschhorn, since “it is not possible to make this fetus into a child, therefore we can consider it as nothing more than a piece of tissue.” Of course, if the “fetus” were *not* aborted, it *could* be “made” into a child. But the thinking here seems to be that prospective viability is the only characteristic which could warrant protecting the “abortus,” while the lack of prospect for viability is sufficient to justify experimentation. The late Dr. André Hellegers (then director of the Kennedy Institute for the Study of Human Reproduction and Bioethics) opposed this in the strongest terms: “[that means] If it's going to die, you might as well use it.” If that is not “the British approach,” said Hellegers, “it was certainly that of the Nazi doctors.”<sup>12</sup>

Because of the abuses going on in fetal research and experimentation, and the conspicuous absence of ethical thinking on the matter, some concerned Americans expressed indignation which evoked an immediate response from the National Institutes of Health (NIH) in 1973 in the form of a “status” position indicating its strong opposition to work on *live* aborted fetuses.<sup>13</sup> Later that year the NIH published its proposed guidelines, titled “Protection of Human Subjects: Policies and Procedures,” a document which Paul Ramsey has called “the finest product to date—whatever its defects—to come from our medical bureaucracies.”<sup>14</sup> However, in 1974—after very little public dialogue—NIH published revised guidelines which offered the “abortus” much less protection, particularly from harmful experimentation.

In the interim between NIH's proposed and revised guidelines, an important congressional action took place which cut across the

DONALD DEMARCO

rule-making by the health departments. In July of 1974, Congress passed the National Research Act establishing the National Commission for the Protection of Human Subjects of Biomedical and Behavioral Research. The Commission was charged to investigate the extent of research involving the human fetus, and to recommend to the secretary of HEW (then the Dept. of Health, Education, and Welfare, now HHS—Health and Human Services) the circumstances, if any, under which research should be conducted and supported by that department.

The eleven-man commission completed its report on May 21, 1975.<sup>15</sup> It made 16 recommendations, ten of them non-controversial, which were passed unanimously. (They concerned such things as therapeutic research directed toward the mother, non-therapeutic research directed toward the fetus *in utero* or the possibly viable infant, informed consent, a “conscience clause,” etc.)

The Commission’s most controversial conclusion (and the main area of controversy in the field of fetal research in general)<sup>16</sup> involved *non-therapeutic* research on a pre-viable abortus. This issue is not only controversial, but highly complex, involving six distinct levels of significant ethical analysis: 1) the nature of the research subject; 2) the notion of pre-viability; 3) the principle of equality; 4) the problem of consent; 5) the principle of “do no harm”; 6) the relevance of abortion to fetal research. In fact, careful assessment of this one issue provides an understanding of the ethics of fetal research and experimentation in general. Therefore, we will discuss each of these six levels separately.

**1) The Nature of the Research Subject.**

The National Commission refers to the human embryo and fetus, in or outside the uterus, developing or aborted, in the specific context of “human subjects” which it seeks to protect. This expression has the merit of being neutral, but the disadvantage of being too broad and consequently vague. The expressions “abortus” and “fetus *ex-utero*” are problematic. “Abortus” does not describe what the subject is, but merely what happened to it, namely that it was aborted. “Fetus *ex-utero*” may be contradictory. Pediatrician Eugene Diamond maintains that a fetus *ex-utero* is an infant.<sup>17</sup> The late David Louisell, then a professor of law at the

#### THE HUMAN LIFE REVIEW

University of California at Berkeley, stated that the non-viable fetus *ex-utero* has been known up to then by law and by society in general as an *infant*, however premature.<sup>18</sup> But HEW restricted the term “premature infant” to the viable fetus *ex-utero*.<sup>19</sup> “Embryonic human being,” “fetal human being,” “abortus human being,” “infant human being,” “neonatal or newborn human being” represent reasonably well the nature of the research subjects. According to these terms, the stage of development is properly placed in an adjectival, not substantive, position.<sup>20</sup> Moreover, the subjects are given an intrinsic denomination, rather than a merely extrinsic one. These are more accurate terms, and consequently, since we are dealing with human beings, more *just* than other frequently-used terms such as “fetal material” or “product of abortion.” Therefore, when we speak of a non-viable fetus *ex-utero*, we are speaking of a premature infant human being, though “fetal human being” may be acceptable for some people.

#### 2) The Notion of Pre-Viability

The distinction between viable and pre-viable (non-viable) is a somewhat artificial one. The fetus, of course, is viable at all stages unless it is removed from its natural environment. Pre-viable, then, often describes a natural response to a lethal situation. In this sense, we could all be rendered “pre-viable” easily and quickly. Thus pre-viability is usually an induced condition. In addition, the development of artificial wombs could make the distinction between viable and pre-viable obsolete.

Dr. Hirschhorn, as we have seen, describes a fetus outside the womb as “viable” in the even more artificial sense of promising to live long enough for it to be a useful subject for experimentation. But critics point out that a pre-viable fetus is *not* one that has already died; it deserves to be respected like any other living fetal or infant human being.<sup>21</sup> Since *Roe v. Wade*, viability has been functioning as a legal standard of personhood—a very arbitrary and vague standard which has led to the erroneous (if understandable) belief that a fetus which is “not viable” according to the Supreme Court is either not living or not deserving of any protection.

It is also important to recognize that a fetus is judged pre-viable

by *prognosis*. In a given case of a fetus who is on the borderline of “legal” viability, this judgement could quite often be inaccurate. Surely ethics demands that efforts should be made to save the lives of fetuses (or infants or neonates) in such borderline cases. In this way—by trying to save the lives of some—“salvage” techniques will be developed that will enable physicians to save the lives of many others. In short, ethics and progress in fetal life-saving techniques are not incompatible.

### 3) The Principle of Equality.

The National Commission recommended different standards of care for the non-viable fetus *ex-utero* (or abortus) who is the subject of non-therapeutic research, compared with his counterpart who is judged viable. The former receives but a single protection: that research and experimentation not alter the duration of his life.<sup>22</sup> But the viable fetus receives a much broader protection. In his interest, the Commission recommends that “No additional risk to the well-being of the infant be imposed by the research.”<sup>23</sup> This unequal protection for two artificially-distinguished classes of fetuses exposes the non-viable fetus to any kind and degree of harm that does not alter the duration of his life. Only one of the Commission members, David Louisell, strongly dissented from this recommendation, appealing to “the essential equality of all human beings,” and expressing the fear that American society is at risk of “losing its dedication ‘to the proposition that all men are created equal.’”<sup>24</sup> He stated:

Although the Commission uses adroit language to minimize the appearance of violating standard norms, no facile verbal formula can avoid the reality that under these Recommendations the fetus and non-viable infant will be subjected to non-therapeutic research from which other humans are protected.<sup>25</sup>

Louisell went on to complain that the unequal protection given to the non-viable fetus *ex-utero* as well as the fetus *in-utero* gives the researcher a vested interest in the actual effectuation of a particular abortion, and society a vested interest in permissive abortion in general.

More recently (in late 1982) the U.S. House of Representatives renewed its dedication to the proposition that all men are created

#### THE HUMAN LIFE REVIEW

equal when it voted 260-140 to ban the National Institutes of Health from funding experimentation on unborn or aborted fetal or infant human beings. The pertinent passage in the bill, introduced by Cong. William Dannemeyer (R., Calif.), states that:

[NIH] shall not conduct or support research or experimentation in the United States or abroad on a living human fetus or infant, whether before or after induced abortion, unless such research or experimentation is done for the purpose of insuring the survival of that fetus or infant.<sup>26</sup>

However, subsequent legislative processes reflected a less noble proposition. Cong. Henry Waxman (D., Calif.) opposed Dannemeyer's amendment as an "ideological statement" which would imperil important research, even though earlier, Waxman supported an amendment to protect laboratory animals (the amendment prohibits "more than momentary minor pain or discomfort, or any procedure except where the animal is anesthetized throughout the entire course of that procedure.")<sup>27</sup> Which would clearly provide better treatment for laboratory animals than aborted human fetuses, a point Cong. Mark Siljander (R., Mich.) noted when he protested that "The fetus was not injected with an anesthetic when doctors sliced open his stomach."<sup>28</sup>

After Sen. Robert Packwood (R., Ore.) successfully blocked a Senate vote on the Dannemeyer amendment, a House subcommittee voted for a much weaker restriction prepared by its chairman, the same Henry Waxman, which would permit experimentation posing "minimal risk" to the fetus intended for abortion and authorizes the Secretary of HHS to wave any restrictions under certain circumstances.<sup>29</sup> In May, the full House Energy and Commerce Committee also rejected the Dannemeyer amendment in favor of Waxman's. Thus, at this writing, the prospect of applying a uniform principle of research and experimentation to all human fetuses is not encouraging.

#### 4) The Problem of Consent.

Consent is required for non-therapeutic experimentation on a fetus *ex-utero*. The Commission initially recommended the mother's consent, the father not objecting, and later modified its position to request paternal consent as well (this was the Commission's only major modification.) The immediate problem that arises in



DONALD DEMARCO

the case of an aborted human being is the moral validity of its mother's consent. Can a mother who has already consented to abort her own baby be the appropriate person to grant consent for fetal experimentation on the same child?<sup>30</sup> (Some have suggested that a guardian be appointed who might better represent the interest of the fetal subject of experimentation.<sup>31</sup>)

Another problem involves the effect that consent has upon the woman who might change her mind about going through with an abortion. If she consents to possible harmful fetal experimentation prior to abortion, her liberty to change her mind about abortion is impaired. "Even if she had an arbitrary liberty to abort," as Paul Ramsey points out, "we would not say she has an arbitrary liberty to injure and then to change her mind about abortion."<sup>32</sup> Few people (if any) would argue that a woman has a right to expose the child she is going to bring into the world to medically-unwarranted experimentation she knows may seriously injure him. Consent to non-therapeutic experimentation here would seem highly unethical and clearly contrary to established and respected norms concerning proxy consent.

**5) The Principle of "Do No Harm."**

The fundamental problem with non-therapeutic experimentation involving any risk whatsoever to the subject is that it violates the minimal "do no harm" principle. With this in mind, Rabbi Seymour Siegal, Professor of Theology and Ethics at the Jewish Theological Seminary in New York, writes:

Research and experimentation on fetuses should be limited to procedures which will present no harm or which have as their aim the enhancement of the life systems of the subjects.<sup>33</sup>

Some moralists have suggested that all members of society owe certain minimal debts to society, and these debts may include children, as well as fetal subjects, taking part in low-risk biomedical and behavioral research. They see this involvement in the perspective of social justice.<sup>34</sup> At the same time, it is important to understand clearly what is meant by minimal risk to a fetal subject. In the case of the "pre-viable" human, some argue that minimal risk loses much of its relevance since as such the subject cannot be "injured for life." In addition, one must distinguish between the

statistical chance of injury and the nature of an injury. A small chance of great harm may be unacceptable, whereas even a great chance of a small harm might not. A one-to-two percent chance of contracting Down's Syndrome is too high a risk, but a much greater chance of contracting a minor infection may be regarded as a low risk.<sup>35</sup>

Wilfred Gaylin and Marc Lappé have argued the case for non-therapeutic experimentation on the pre-viable fetus *ex-utero* in the context of *philanthropic* experimentation.<sup>36</sup> Since the aborted fetus is going to die anyhow, they would like to see its death ennobled by serving those more fortunate. They regard a pre-viable infant's exposure to the rubella vaccine to determine its effect, for example, a small indignity compared with what happens to it during an abortion. "The medical ethic 'do no harm' would, of course, be violated," they admit, "but we already violated that principle when we accepted the concept of abortion."<sup>37</sup>

But Gaylin and Lappé mount their case on the untenable premise that an established *great* harm justifies the introduction of a *lesser* harm, something Paul Ramsey has termed a "slip-back-up-the-moral-slope" argument.<sup>38</sup> Quite aside from the morality of abortion, this is a premise that has no logical or moral validity. Nor does their contention that a subject "going to die anyway" should suffer non-therapeutic experimentation in the interest of the good of others (besides, it argues for too much—we are all going to die anyway). The class of humans who are "going to die anyway," and soon, also includes those who are terminally ill. Accepted ethical norms do not permit harmful research on these subjects.

What Hans Jonas says against "using" the unconscious, terminally ill patient applies with equal force to the fetus:

Drafting him for non-therapeutic experiments is simply and unqualifiedly not permissible; progress or not, he must never be used, on the inflexible principle that utter helplessness demands utter protection.<sup>39</sup>

#### 6) The Relevance of Abortion to Fetal Research

The U.S. Supreme Court's 1973 abortion decisions granted a woman the right to abort on the basis of what it said was her "right to privacy." Once the mother and her baby are separated,

DONALD DEMARCO

however, the “right to privacy” ruling is no longer pertinent. As Eugene Diamond points out, “Surely the infant cannot be construed as part of the mother, with its rights in conflict with hers, if the mother is in a recovery room and the infant is in an incubator in the nursery.”<sup>40</sup> David Louisell said much the same thing when he wrote: “If an infant survives the abortion, there is hardly an additional right of privacy to then have him or her killed or harmed in any way, including harm by experimentation impermissible under standard norms.”<sup>41</sup>

In fact, the principles that bear upon abortion and fetal experimentation are largely different. This is a fact that is often overlooked. The Society for Developmental Biology, for example, unanimously passed a resolution supporting the “continued use of human tissues at all stages of development, embryonic and fetal, within the framework of the *Doe v. Bolton* ruling of the U.S. Supreme Court.”<sup>42</sup>

The attempt to reason from the legal “is” to the moral “ought” represents the fallacy of legal positivism. The legal “is” may very well be a moral wrong. An attitude of legal positivism, therefore, promotes the vice of removing the initiative to redress the legalized moral wrong. It represents an unconscionable moral complacency. Rather than assume that the abortion rulings have settled the ethics of fetal research, it may be that the ethics of fetal research will unsettle the ethical thinking behind the abortion rulings.

Marc Lappé has remarked that “once we have incurred the costs of doing abortion, the moral universe in which we have to operate is *in fact* changed, and we acquire new moral duties.”<sup>43</sup> Lappé makes the assumption that it is the “moral universe” that we have changed. What we have changed is law, policy, and practice. The “moral universe” is safely beyond our meagre powers to change. In fact, our ethical obligation is to understand and serve the “moral universe,” rather than try to collapse it into law, policy, or practice which may reflect the very antithesis of morality.

The following statement by American Citizens for Life, Inc. (presented before the Senate sub-committee on constitutional amendments in 1974) provides a concise summary of many of the main ethical issues of fetal research and experimentation:

## THE HUMAN LIFE REVIEW

Proper concern for the rights of the unborn child need not bring medical research to a halt. New therapeutic techniques can be used with the hope of improving them superior to traditional methods of treatment, after adequate theoretical work and animal experimentation has been carried out. Parents can give consent for experimental therapeutic treatment of the unborn if there is valid reason to believe that such treatment is in the best interests of the child. In addition, organs may be transplanted from the dead fetus, and tissue may be developed from fetuses which are clinically judged to be dead according to the same criteria which would be used for a born child or adult. We recommend careful retrospective clinical and statistical study of defective babies for identification for teratogenic drugs. However, this is not the same thing as purposefully introducing known or suspected harmful substances for research purposes into the live child or his mother which could cross the placental barrier. Systematic benefit should not be derived from systematic induced abortion. We do not approve of experiments which would be judged "cruel" or "senseless" by the average sensitive layman. And parents cannot consent to non-therapeutic research on unborn children who are being purposefully aborted.

Such a statement is grounded in established medical ethics and recognizes the role of the intelligent layman in the formulation of ethical public policy. While it may be improvable, it is a good place to begin. It has two outstanding merits that deserve special mention: it provides equal protection to all human fetuses, whether intended for birth or abortion, a protection that current legislation does not provide; it reflects a consistent recognition of the dignity and humanity of the unborn, in striking contrast with the semantic acrobatics that have been used to de-humanize, re-humanize, and then de-humanize again, the defenseless child in the womb.

## NOTES

1. Nick Thimmesch, "Strange Tales of Fetal Life and Death," *Human Life Issues*, Jan. 1983, Vol. 9, No. 1, p. 4.
2. "Can the Fetus be an Organ Farm?," *The Hastings Center Report*, Oct. 1975, Vol. 8, No. 5, pp. 23-25.
3. Quoted from the *Australian* in *The Human*, April 1982, p. 4.
4. Claude Jacquinet, *Gazette du Palais*, Nos. 98, 99; Wednesday 8th, Thursday 9th, April 1981.
5. "The Uses of Fetuses and Fetal Material for Research," Department of Health and Social Security, Scottish Home and Health Department, Welsh Office. London: Her Majesty's Stationery Office, 1972.
6. *The Washington Post*, April 10, 1973.
7. Vaheri, Anttis; Vesikari, Timo *et al.*, "Isolation of Attenuated Rubella-Vaccine Virus From Human Products of Conception and Uterine Cervix," *New England Journal of Medicine*, May 18, 1972, Vol. 286, No. 20, pp. 1071-1074.
8. Joan Wester Anderson, "Beyond Abortion—Fetal Experimentation, New Upjohn Drug Delivers Perfect Fetus For Laboratory Use," *Our Sunday Visitor*, April 13, 1975, p. 1.
9. Adam PAJ, Ratha N., Rohiala E., *et al.*; "Cerebral oxidation of glucose and D-beta hydroxy, butyrate in the isolated perfused human head." *Trans Am Pediatr Soc.* 309:81, 1973.

DONALD DEMARCO

10. *National Observer*, April 21, 1973.
11. *The Washington Post*; 10th, 13th, and 15th of April, 1973.
12. André Hellegers, "Issues in Draft Policy Debated in Council," *Ob-Gyn News*, April 15, 1973.
13. "Fetal Research," *Scientists for Life Newsletter*, October 1, 1975, p. 3.
14. Paul Ramsey, *The Ethics of Fetal Research* (New Haven and London: Yale University Press, 1975), p. 11.
15. *The Federal Register*, August 8, 1975.
16. See Tabitha Powledge, "Fetal Experimentation: Trying to Sort Out the Issues," *Hastings Center Report*, April 1975.
17. Eugene Diamond, "Redefining the Issues in Fetal Experimentation," *Linacre*, May 1977.
18. David Louisell, "Fetal Research: Response to the Recommendations," *Hastings Center Report*, October 1975, p. 10.
19. "The HEW Regulations," *Scientists for Life Newsletter*, October 1, 1975, p. 9.
20. Ramsey, *op. cit.*, p. xx.
21. Seymour Siegal, "A Bias for Life," *Hastings Center Report*, June 1975.
22. "Deliberations and Recommendations of the National Commission for the Protection of Human Subjects," *Hastings Center Report*, June 1975.
23. *Ibid.*
24. Louisell, *op. cit.*, pp. 9 and 11.
25. *Ibid.* p. 9
26. "House Votes to Ban Funds for Fetal Experimentation," *Lifegram*, Romeoville, Illinois, Fall 1982. The amendment is attached to HR 6457, a bill authorizing research on cancer and other diseases and was introduced on the floor by Rep. Bill Dannemeyer (R-CA).
27. Quoted by Paul Fisher, "House Bans Fetal Experimentation," *The Wanderer*, Oct. 14, 1982, p. 1.
28. *Ibid.*, p. 6.
29. Douglas Johnson, "Waxman Subcommittee Rejects Ban on Fetal Experimentation Funding," *NRL News*, March 24, 1983, p. 1.
30. Diamond, *op. cit.*
31. Ramsey, *op. cit.*, p. 97.
32. *Ibid.*, p. 57
33. Seymour Siegal, *op. cit.*, p. 25.
34. Richard McCormick, "Fetal Research, Morality, and Public Policy," *Hastings Center Report*, June 1975, p. 27.
35. Karen Lebacqz, "Fetal Research: Response to Recommendations," *Hastings Center Report*, October 1975, p. 11.
36. Wilfred Gaylin and Marc Lappé, "Fetal Politics: The debate on experimenting with the unborn," *Atlantic*, May 1975, pp. 66-71.
37. *Ibid.*, p. 70.
38. Ramsey, *op. cit.*, p. 41.
39. Hans Jonas, *Philosophical Essays: From Ancient Creed to Technological Man* (Englewood Cliffs, N.J.: 1974), p. 126.
40. Diamond, *op. cit.*, p. 151.
41. Louisell, *op. cit.*, p. 10.
42. *Pediatric News*, September 1975, p. 5.
43. Marc Lappé, "Abortion and Research," *Hastings Center Report*, June 1975.

# On Human Experimentation

*Donald DeMarco*

**T**O RATIONALIZE abortion as something other than the killing of unborn humans, its advocates have regularly employed sub-human terms to describe the “fetus” (itself a word far less human than, say, “preborn child”). “It” was mere “gametic materials” (Joseph Fletcher), or “protoplasmic rubbish” (Philip Wylie), or even likened to “marmalade” (William Baird). But now that abortion is legally secured, many of the same people have made a rhetorical about-face. Now, the purpose is to justify research and experimentation on the unborn. So the *humanness* of the “fetus” is again stressed: new scientific knowledge of human subjects will have unique and beneficial application to the needs of other humans, inside or outside the womb.

A few years ago, Reuters News Agency reported the story of a Lebanese man who was impotent, and had a testicle transplant from a fetus aborted at six months.<sup>1</sup> Clearly, the transplanted organ was deemed not only a human part of a human being, but one capable of infusing the impotent beneficiary with a masculine power that his own human physiology had failed to provide. Wordsworth, who viewed the child as “the father of the man,” could not have known that the child in the womb could provide the manhood of the father. Whether the operation proved successful is beside the point. What is pertinent here is the belief demonstrated by the patient and the surgical team that the human fetus is indeed human and in fact can supply human parts for its homologue who lacks them.

Another case, reported in the *Hastings Center Report*, concerns a 28-year-old engineer who found life on a dialysis machine intolerably restricting. Since he had been adopted as an infant and did not know his natural family, an ordinary kidney transplant had been ruled out. The novel solution was agreed upon: the man’s

---

**Donald DeMarco** is an associate professor of philosophy at Canada’s St. Jerome College, University of Waterloo, and the author of several books and numerous articles.

# The Rhetoric of Population Control: Does the End Justify the Means?

*Julian Simon*

The ranking black lawmaker in the Illinois House and the Republican sponsor of a bill which would offer poor persons a chance for a free sterilization with a \$100 bonus thrown in . . . squared off and traded verbal blasts Wednesday in the House Human Resources Committee where Rep. Webber Borchers was presenting his free vasectomy bill.

Though observers said Borchers may have won the battle of insults, Rep. Corneal Davis, an aging and rotund black preacher who has spent 30 of his 70-some years in the House, relished the satisfaction of having the bill defeated. . . .

Davis set the tone for the hearing on the bill soon after the committee sat down.

"Where is Borchers?" the Democratic assistant minority leader said, waving an arm at the ceiling. "He ought to take his bill and go back to Nazi Germany."

Thirty minutes later Borchers, a Decatur landowner who boasts of his ultraconservatism, arrived to explain his bill.

"This bill would allow persons who have an income of \$3,000 or less to get a free vasectomy and a \$100 bonus . . . ," Borchers began.

But Davis had sprung to his feet.

"Are you sincere about this?" the Chicago Democrat asked sarcastically.

"Sit down," Borchers yelled back.

"I am a preacher and I didn't want to lose my cool with you," Davis said.

"Why don't you listen? Sit down," Borchers said as both men's words began to get lost in the uproar.

Rep. Louis Capuzi, R-Chicago, Chairman of the Human Resources Committee, pounded the gavel but it took several minutes for the two men to become silent.

Davis sat down and Borchers continued speaking.

"This bill was suggested to me by a black woman in Chicago," Borchers said.

Davis's eyes flared with rage but he remained silent.

Borchers said the bill was similar to one passed in Tennessee.

He estimated that more than 19,000 children are born to families receiv-

---

**Julian Simon** is a professor of Economics at the University of Illinois. This article is adapted from a chapter of his recent book *The Ultimate Resource* (published by Princeton University Press, 1981) and is reprinted here with permission (©1981, Princeton University Press).

JULIAN SIMON

ing public aid each year and that the state would stand to save \$20 million in welfare payments under the voluntary sterilization plan.<sup>1</sup>

The Davis-Borchers interchange illustrates the subject of this chapter, the passions and the rhetoric found in discussions of resources and population.

It is a truism by now that resources are getting more scarce, and that population growth exacerbates the problem. You have read numerous examples of such statements . . . by persons who are supposedly experts. So well accepted have these ideas become that eminent people in other fields treat them as assumptions in their own work, on an “everyone knows” basis—the way everyone knows that without sunshine the flowers will not grow. Just a few examples of persons publicly decrying population growth that I have stumbled across in casual reading: psychologist O.H. Mowrer; Nobel agronomist Norman Borlaug; sociobiologist Edward Wilson; author Issac Asimov; English professor Richard P. Adams; columnist Jack Anderson; Nobel physicist Murray Gell-Mann; basketball player Wilt Chamberlain; columnist Ann Landers; her sister, columnist “Dear Abby”; physician and head of the Rockefeller Foundation John W. Knowles; John D. Rockefeller III; former Secretary of HEW Robert Finch; and a bucket more including newspaper editorial writers, U.S. senators, and plain citizens who write letters to the newspaper saying that a “world without population curbs . . . would be a sickening, violent, depressing, congested hell, with the complete destruction of the human race, all animals, and the world’s natural environment.”<sup>2</sup>

These pessimistic propositions about resources and growth are so generally accepted that eminent people in the other fields will sign petitions to the President and endorse full-page advertisements that run in the nation’s most-read national newspapers. Even Nobel prize winners such as John Northrop, Linus Pauling, and William Shockley were willing to lend their prestige to anti-natal efforts . . . .

The weight of doomsday opinion is indicated by the long list of such books found in any library; books by Beckerman and Kahn and Maddox are the rare exceptions of opposing voices.<sup>3</sup> And so deeply has the notion of a “population explosion” sunk into the



popular consciousness that the term appears in *The Living Bible*, a widely read paraphrase of the Old and New Testaments. In that version, the story of Noah begins in this manner: “Noah was 500 years old and had three sons, Shem, Ham, and Japheth. Now a population explosion took place upon the earth” (Genesis 6). And of course the flood followed.

Proof that the “population movement” has succeeded in convincing people that population growth is bad is seen in the discrepancy between people’s beliefs about their own local situation and the situation of their nation as a whole. Polls in the U.S. and in Great Britain find that people do not think that their own neighborhoods—about which they have direct information from their own observations—are overpopulated. But they do say that their country as a whole—which they know mostly from reports in the media—is overpopulated.<sup>4</sup> What else can account for people’s reaching this conclusion other than successful rhetoric?

Test this for yourself. Ask yourself, and your children, whether the country is overpopulated, or whether population is growing too fast. Then ask about your block and your neighborhood. There is a curious inconsistency here: You say your house is fine but mine is overpopulated, and I say mine is fine but yours is overpopulated. What would an impartial observer learn from this about the condition of each house?

Let’s consider the rhetoric used to engender a fear of population growth and afterward speculate why this rhetoric has been so effective.

**Inflammatory Terminology and Persuasion by Epithet**

Fear of population growth has been inflamed by extravagant language. Examples are the terms “population explosion,” “people pollution,” and “population bomb.” These terms are not just the catchwords of popular wordsmiths, whose rhetoric one is accustomed to discount. Rather, they have been coined and circulated by distinguished scientists and professors. One example comes from the justly famous demographer Kingsley Davis, who began a recent article in a professional journal: “In subsequent history the Twentieth Century may be called either the century of world wars or the century of the population plague.”<sup>5</sup> Davis also has said that “Over-

JULIAN SIMON

reproduction—that is, the bearing of more than four children—is a worse crime than most and should be outlawed.”<sup>6</sup> Or Paul Ehrlich: “We can no longer afford merely to treat the symptoms of the cancer of population growth; the cancer itself must be cut out.”<sup>7</sup> And it was in his Nobel Peace Prize speech, of all places, that Norman Borlaug spoke of “the population monster” and the “population octopus.”

Such language is loaded, pejorative, and unscientific. It also reveals something about the feelings of contemporary anti-natalist writers. Psychiatrist Frederick Wertham pointed out that many of these terms have overtones of violence, for example, “bomb” and “explosion,” and many show contempt for other human beings, such as “people pollution.” Referring to expressions such as “these days of the population explosion and the hydrogen bomb” and “both nuclear weapons and population growth endanger mankind,” he says: “The atomic bomb is the symbol, the incarnation, of modern mass violence. Are we justified in even speaking in the same vein of violent death and birthrate? And is it not a perverse idea to view population destruction and population growth as twin evils?”<sup>8</sup>

There is no campaign of counter-epithets to allay the fear of population growth, perhaps because of a Gresham’s law of language: Bad terms drive out good. Reasoning by epithet may well be part of the cause of the fear of population growth in the U.S.

Not only epithets but also value-smuggling neologisms have been used against fertility. The term “childfree” is a neologism coined by NON—the National Organization for Non-Parents—as a replacement for “childless.” Their intention is to substitute a positive word, “free,” for a negative word, “less.” The neologism is an interesting example of skillful propaganda. Whereas the term “less” is only slightly pejorative—you can have less of something good (love) *or* of something bad (acne)—the term “free” *always* seems better than “unfree,” and one can only be free of something bad. If not having children makes you “free,” then this clearly implies that children are bad. In a similar vein, environmentalists now speak of “wetlands lost,” a phenomenon earlier referred to as “swamps drained.”

**Phony Arguments, Crude and Subtle**

Some of the anti-natalist propaganda is quite subtle. While seeming to be only straightforward birth-control information, in reality it is a persuasive appeal for having fewer children. Planned Parenthood was responsible for such a campaign on television and radio a few years ago. There would be no complaint about such a persuasive message except that it was indirectly paid for by taxpayers. The campaign was produced by the Advertising Council as a “public service” and shown on television during time given free by the broadcasters as part of their quid pro quo to the public in return for their licenses. The following is drawn from a letter written in complaint to the Advertising Council decision-makers—the only letter they said that they had ever received.

You may have seen an advertising campaign staged by Planned Parenthood that ran on radio, television, and in many national magazines. There were a number of specific ads in the campaign including one that was headlined “How Many Children Should You Have? Three? Two? One”; another that adduced “Ten Reasons for Not Having Children”; and, finally, the most offensive one was called the “Family Game”: the game was staged on a great monopoly board and every time the dice of life were thrown and a child was born—rather like going to jail without passing “go”—the background audio announced the disasters that came in the wake of children—“there goes the vacation,” or “there goes the family room . . . .”

One of the ads enjoins young people to “enjoy your freedom” before, by having children, you let some of that freedom go. Such a theme . . . continues the view that the contribution children make to persons and to society is a purely negative one. In this view children are a loss: they take space, constrict freedom, use income that can be invested in vacations, family rooms, and automobiles. We find no consideration here of how children enhance freedom, and of how the advantages of freedom itself are realized when shared rather than prized as a purely personal possession. Finally, one of the ads encapsulates the spirit of the entire campaign: “How many children should a couple have? Three? Two? One? None?” Such an ad belies the claim that the advertising avoids the designa-

tion of any specific number of children as “preferred.” Why not 12? 11? 10? or six? five? four? In the same ad, in order to lead audience thinking, it is noted that the decision to have children “could depend on their concern for the effect population growth can have on society.” The direction of the effect on society is implied, but nowhere is the effect analyzed, or even clearly stated.

In summary, the ads not only teach family planning but recommend population control. Moreover, they do this by defining the range of acceptable family size as between zero and three, by placing children as negative objects alongside the positive goods supplied by industry, by equating the bringing up of children with merely equipping them with these same goods, by viewing children as an essential constriction of human freedom, and by suppressing a view of life and children that might lead people to think that having more children is a positive and rewarding act. There are values, not just techniques embodied in those ads.<sup>9</sup>

Not all anti-natality rhetoric is that subtle. Some of it is crude name-calling, especially the attacks on the Catholic church and on people with Catholic connections. An example is the bold black headline on the full-page ad that was run in the national magazines by the Campaign to Check the Population Explosion: “Pope denounces birth control as millions starve.” Another example is the dismissal of opposing views by referring to the happenstance that the opponent is Catholic. Consider, for example, the religion-baiting of Colin Clark—a world-respected economist who presented data showing the positive effects of population growth—by sociologists Lincoln and Alice Day: “Colin Clark, an internationally known Roman Catholic economist and leading advocate of unchecked population growth.” And Jack Parsons writes, “Colin Clark, the distinguished Roman Catholic apologist . . . refrains from discussing optimization of population at all . . . an extraordinary omission.” Gunnar Myrdal is not a Catholic and is a Nobel prize winner, and yet *he* called the concept of an optimum population level “one of the most sterile ideas that ever grew out of our science.” But Parsons feels free to attribute religious motives to Clark’s choice of technical concepts and vocabulary when Clark does not mention this “optimization” concept. And in the widely

read text of Paul Ehrlich and others, *Population, Resources, and Environment*, we find a reference to Clark as an “elderly Catholic economist,” an innovation in the name-calling by referring to Clark’s age as well as to his religion.<sup>10</sup>

As a firsthand example in the same vein, my own views—which had already become those of this book—were described by Paul Silverman, a biologist, before a packed auditorium on the first and greatest Earth Day, in 1970, as “inspired by Professor Simon’s contact with the Bible. . . . Indeed, a new religious doctrine has been enunciated in which murder and abstinence from sex are not distinguishable.”<sup>11</sup>

#### **Grabbing Virtue, Daubing with Sin**

A rhetorical device of the anti-natalists (as of all rhetoricians, I suppose) is to attribute to themselves the most virtuous and humanitarian of motives, while attributing to their opponents motives that are self-serving or worse. Biologist Silverman again: “. . . people such as Paul Ehrlich and Alan Guttmacher and presumably myself . . . out of our great concern for the future of the world and the threat to the quality of life . . . have urged that voluntary means be adopted for bringing about restraints on the overburdening of our environment by overpopulation. . . . We must, we can, and we will achieve a fine and beautiful world for ourselves and our children to inherit. . . . We can realize a new quality of life, free from avarice which characterizes our current society.”<sup>12</sup> (A few minutes before, the same speaker had said, “If voluntary restraints on population growth are not forthcoming, we will be faced with a need to consider coercive measures”—not very different from Ehrlich’s “by compulsion if voluntary methods fail.”)

#### **Why is Population Rhetoric So Appealing?**

Let us consider some of the reasons that anti-natality rhetoric has won the minds of so many people.

*Short-run costs are inevitable, whereas long-run benefits are hard to foresee.* In the very short run, the effects of increased births are negative, on the average. If your neighbor has another child your

JULIAN SIMON

school taxes will go up, and there will be more noise in your neighborhood. And when the additional child first goes to work, per-worker income will be lower than otherwise, at least for awhile.

It is more difficult to foresee and understand the possible long-run benefits. Increased population can stimulate increases in knowledge, pressures for beneficial changes, a youthful spirit, and the “economies of scale” . . . . The last means that more people constitute bigger markets, which can often be served by more efficient production facilities. And increased population density can make economical the building of transportation, communication, educational systems, other kinds of “infrastructure” that are uneconomical for a less-dense population. But the connection between population growth and these beneficial changes is indirect and inobvious, and hence these possible benefits do not strike people’s minds with the same force as do the short-run disadvantages.

The increase in knowledge created by more people is especially non-material and thus easy to overlook. Writers about population growth mention a greater number of mouths coming into the world and more pairs of hands, but never more brains arriving. This emphasis on physical consumption and production may be responsible for much unsound thinking and fear about population growth.

Even if there are long-run benefits, the benefits are less immediate than are the short-run costs of population growth. Additional public medical care is needed even before the birth of an additional child. But if the child grows up to discover a theory that will lead to a large body of scientific literature, the economic or social benefits may not be felt for 100 years. All of us tend to put less weight on events in the future compared with those in the present, just as a dollar that you will receive twenty years from now is worth less to you than is a dollar in your hand now.

The above paragraphs do not imply that, on balance, the effect of increased population will surely be positive in any longer-run period. The fact is that we do not know for sure what the effects will be, on balance, in 50 or 100 or 200 years. Rather, I am arguing that the positive effects tend to be overlooked, causing people to think—without sound basis—that the long-run effects of popula-

tion growth *surely* are negative, when in fact a good argument can be made that the net effect *may* be positive.

Now let's consider some of the rhetorical devices themselves.

*Apparent consensus of expert judgment.* Anti-natalists make it seem that all the experts agree that population is growing too fast in the U.S. and, therefore, that it is a *fact* that population is growing too fast. An example from Lester Brown: "There are few if any informed people who any longer deny the need to stabilize world population." Other examples come from Paul Ehrlich: "Everyone agrees that at least half of the people of the world are undernourished (have too little food) or malnourished (have serious imbalances in their diet)." And, "I have yet to meet anyone familiar with the situation who thinks India will be self-sufficient in food by 1971, if ever." And from a *Newsweek* columnist and former high State Department official: "Informed men in every nation now know that, next to population growth and avoidance of nuclear war, the despoiling of nature is the biggest world problem of the next 30 years."<sup>13</sup>

These "everyone agrees" statements are just plain wrong. Many eminent experts do not agree with them. But such assertions that "everyone agrees" may well be effective in manipulating public opinion. Which non-specialist is likely to pit his or her own opinion against that of all the "informed people"?

*Population as a cause of pollution.* Fear of population growth is surely heightened by the linking of population and pollution issues. It has come to seem as if one must be against population growth if one is to be for pollution control. And pollution control in itself appeals to everyone, for very substantial reasons.

To understand why the link-up of population control and pollution control has occurred with such force, we must understand the nature of the rhetoric on both sides of the argument. One can directly demonstrate that more people increase the flow of a pollutant—for example, that more people make more trash. The argument that more people may reduce pollution is less direct and not so obvious. For example, as more people make a bigger pollution problem, forces of reaction arise that may make the situation better than ever before. Furthermore, the ill effects of people and

JULIAN SIMON

pollution can be understood deductively. More people *must* create more trash. But whether the endpoint after a sequence of social steps will be an even cleaner environment can only be shown by an empirical survey of experiences in various places. Are city streets in the U. S. cleaner now than they were 100 years ago? Such empirical arguments are usually less compelling to the imagination than are the simplistic deductive arguments.

*Population, natural resources, and common sense.* With respect to natural resources, the population-control argument apparently makes perfect “common sense.” If there are more people, natural resources will inevitably get used up and become more scarce. And the idealistic, generous side of young people responds to the fear that future generations will be disadvantaged by a heavy use of resources in this generation.

Perhaps such a doomsday view of natural resources is partly accounted for by the ease of demonstrating that more people will cause some particular negative effects—for example, if there are more Americans there will be less wilderness. The logic of the rebuttal must be global and much more encompassing than the logic of the charge. To show that the loss of wilderness to be enjoyed in solitude is not an argument against more people, one must show that an increase in people may ultimately lead to a general expansion of the “unspoiled” space available to each person—through easier transportation to the wilderness, high-rise buildings, trips to the moon, plus many other partial responses that would not now be possible if population had been stationary 100 years ago. It is obviously harder to show how good is the sum effect of these population-caused improvements than it is to show how bad is the partial effect of a decrease in this or that wilderness area that one may enjoy in solitude. Hence the result is a belief in the ill effects of population growth.

*Judgments about people’s rationality.* At the bottom of people’s concern about population growth often lies the belief that other people will not act rationally in the face of environmental and resource needs. Arguments about the need to stop population growth now often contain the implicit premise that individuals and



societies cannot be trusted to make rational, timely decisions about fertility rates.

One of the themes that runs through much of the population movement is that the experts and the population enthusiasts understand population economics better than other persons do. As [the late] John D. Rockefeller III put it, “The average citizen doesn’t appreciate the social and economic implications of population growth.”<sup>14</sup> It is not all clear why a politician or businessman—even though a very rich one—should have a clearer understanding of the costs of bearing children than “an average citizen.” But Rockefeller [was] in a position to do much to turn his opinion into national action.

*Media exposure.* Anti-natality views get enormously more exposure than pro-natality or neutralist views. Paul Ehrlich has repeatedly been on the Johnny Carson show, and for an unprecedented hour, but no one who holds contrary views gets such media exposure. This is also clear from a casual analysis of the titles of articles listed in the *Reader’s Guide to Periodical Literature*.

*Money.* The leaders of population agencies that have vast sums of money at their disposal—UNFPA and USAID\*—clearly see as their goal the reduction of population growth in the poorer countries. Scientists who work in population studies and who have a reasonable degree of career prudence are not likely to go out of their way to offend such powerful potential patrons. Rather, individuals and organizations hitch all kinds of research projects to this money-star. Furthermore, various agencies such as UNFAO\*\* realize that their own budgets will be larger if the public and government officials believe that there are fearsome impending dangers from population growth, environmental disasters, and starvation. Therefore, their publicity organs play up these threats.

*Standards of proof and of rhetoric.* The standard of proof demanded of those who oppose the popular view is much more exacting than is the standard of proof demanded of those who share the popular view. One example: The scientific procedure

---

\*U.N. Fund for Population Activities and U.S. Agency for International Development

\*\*U.N. Food and Agriculture Organization

of the *Limits to Growth* study has been condemned by every economist who has reviewed it, to my knowledge. Yet its findings are acclaimed and retailed by the “population community.” But if I say that the world food situation has been improving year by year, you will either say “Prove it,” or “I won’t believe it.” . . .

Furthermore, anti-doomsday people are in a double bind rhetorically: The doomsdayers speak in excited, angry, high-pitched voices, using language such as “Famine 1975!” They say that such tactics are acceptable because “we are faced with a crisis . . . the seriousness of which cannot be exaggerated.”<sup>15</sup> The fears they inspire generate lots of support money—from the UN, AID, and popular fund-raising campaigns in full-page advertisements.

Many anti-doomsday people, on the other hand, speak in quiet voices—as reassurance usually sounds. They tend to be careful people. And they are totally ignored. The great geologist Kirtley F. Mather wrote a book called *Enough and To Spare* in 1944; it was withdrawn from the University of Illinois library just twice—in 1945 and 1952—prior to my 1977 withdrawal of it. But there are literally armfuls of books such as Fairfield Osborn’s 1953 *Limits of the Earth* that have been read vastly more frequently. Even a book published by a vanity press and written by a retired army colonel who has Malthus’s first name as “Richard” and who believes that *Overpopulation* (the title of the book) is a plot of the “Kremlin gangsters” has been withdrawn ten times since 1971, and untold more times between its 1958 publication and 1971, when the charge slip was changed.<sup>16</sup>

#### A Rhetorical Analogy

An analogy may help explain the power inherent in the anti-growth rhetoric. Think how much easier it would be to argue that the automobile is detrimental to life and health than it is beneficial. To show how terrible cars are for people, all you need are the statistics of the people killed and maimed each year, plus a few gory pictures of smash-ups. That’s strong stuff. To argue that the auto is beneficial to health you would need to show a lot of relatively small, indirect benefits—the ability to get to a doctor or hospital by car, which could not be done otherwise; the therapeutic results of being able to take a trip into the country-side, the

improved transportation know-how that eventually saves lives . . . . My point here is not to prove that cars are, in fact, beneficial on balance, but only to illustrate how much easier rhetorically it is to show their maleficence than their beneficence. Just so it is with arguments about population growth.

**What Are the Underlying Reasons for Doomsday Fears and Rhetoric?**

Earlier chapters have suggested some reasons for doomsday fears about minerals, food, and energy—especially the seductively simple twin notions of a fixed stock of resources and the “law” of diminishing returns from that stock. Therefore, this section will focus on reasons for doomsday fears about population growth, though all doomsday fears have much in common.

The most obvious reason that doomsday fears get disproportionate attention is that bad news is newsworthy, and frightening forecasts cause people to sit up and take notice. But why are frightening forecasts, out of kilter with the evidence, made by the forecasters in the first place? And what explains the related activist movements? Here I shall do no more than present a list of possibilities. Certainly Thomas Littlewood is right when he says that “humanitarian and bigot can find room under the same tent.”<sup>17</sup> There is also lots of space for many fellow-traveling motives, both generous and selfish.

*Simple world-saving humanitarianism.* Many people who give time and money to population activities are unmistakably humanitarian, motivated by sincere good will; the givers wish that poor people at home and abroad should have a better life. This motive gets less space in the list than do some less-pretty motives, but this does not mean it is less important in the overall picture.

*Taxation fears.* The haves naturally worry that there will be an increase in the number of have-nots to be supported at public expense, both domestically and internationally. The theme is found in Malthus and is an underlying motive in much population activity. Where the have-nots differ racially from the haves, it is difficult to separate this motive from racism.

*Supposed economic and political national self-interest.* The pull-up-the-ladder “lifeboat ethics” of Garrett Hardin—we are fighting

JULIAN SIMON

for places in a small lifeboat that is the earth, and so “every life saved this year in a poor country diminishes the quality of life for subsequent generations”—is a dramatic elaboration of the self-interest motive.<sup>18</sup>

*Fear of communism.* The belief that communism will win out in the poor countries causes some people in rich countries to want to reduce population growth in the poor countries.

. . . In the cold war between the Communist bloc and the free world, in every area where the Red penetration is most successful—the Middle East, Indonesia, Japan, Guatemala, British Guiana and North Africa—population pressure is severe and increasing . . . one of the most potent factors in the success of the Reds in their campaign for world domination. . . .<sup>19</sup>

*Dislike of business.* Some people dislike business because of the self-interest profit motive. And they see among businessmen a desire for population growth because of the larger markets it brings. In reaction, they favor population reduction.

Others, Thomas Mayer suggests, charge business with polluting and wasting resources because they want to transfer control of economic activity to the government. He further suggests that this desire is a sequel to the attempt to shift control to government “experts” on the grounds of greater efficiency, the latter being an argument that few in the U.S. now find persuasive.<sup>20</sup>

*Belief in the superiority of “natural” processes.* Some people feel that the use of resources by humans is a disturbance of the natural ecological order, and that each such disturbance is likely to be damaging in the long run. For some, this reflects an assumption that natural systems are so complex that man’s interference—even just his increased numbers—is bound to result in unexpected destruction. For others, a mystical or religious faith underlies this belief.

*Religious antagonisms.* One religious group worries that some other group’s higher birthrate will make it more powerful. In the past, for example, U.S. Protestants have feared the population growth of U.S. Catholics, and Hindus in India fear the high birthrate of Moslems.

*Racism.* There is plenty of anecdotal evidence that racism has been a key motivation in domestic and international population activi-

ties. Some solid evidence of this is found in data showing that the opening of state-supported birth-control clinics is closely related to the concentrations of poor black people in various states.<sup>21</sup> As of 1965, 79 percent of the state-supported clinics in the U.S. were in the ten states of Alabama, Arkansas, Florida, Georgia, Kentucky, Mississippi, North Carolina, South Carolina, Tennessee, and Virginia, which have only 19 percent of the country's population. Analysis that holds per capita income constant shows that the proportion of blacks in a local population is closely related to the density of family-planning clinics.<sup>22</sup> It seems reasonable to conclude that southern society's birth-control policies are motivated, at least in part, by the desire to reduce the fertility of blacks. The motivation may be racial, or it may be that southern whites believe blacks make welfare demands upon the state in excess of their contributions, or both together.<sup>23</sup>

*The belief of the more educated that they know what is best for the less educated.* Even the most unselfish well-off persons think they know better than do poor people what is good for them and for the world. Most of us secretly harbor the notion that we know how some others should live their lives better than they themselves know. But the thought is only a matter of concern when it is hitched up with sufficient arrogance and willfulness that we are willing to compel them to do what we think they ought to do.

*Lack of historical perspective.* Clearly this is an important cause of doomsday fears. A bad turn in some index—say, the 1973 oil price rise, or the early 1970's bad harvests—leads people to draw graphs of a few years' experience prior to the bad turns of events, and then to extrapolate a negative trend. If one draws long-run graphs instead—the sort shown in earlier chapters on mineral resources, food, and energy—the bad turn of events usually is seen as only a blip on the line, and the overall trend may be seen to be positive rather than negative.

*Fitness of the human race.* Improvement of the human race—or of the genetic quality of one's own countrymen—has in the past been one of the important motives of population activists, especially with respect to immigration and sterilization policies. The roots of

JULIAN SIMON

this motive are some compound of unproven genetic ideas about intelligence and physical health, unselfish devotion to mankind, and narrow in-group preferences.

The proponents of eugenics (which should not be confused with the scientific discipline of genetics) have been sufficiently successful over the decades so that tax moneys are being used to involuntarily sterilize poor people (often black) without medical or other justification. As a result of the eugenics movement, which has been an intertwined partner with the population-control movement for decades, there are now laws on the books of thirty states providing for the involuntary sterilization of the mentally defective.<sup>24</sup>

In recent famous exemplary cases, a perfectly normal young black woman was sterilized under the guise of being given a birth-control shot,<sup>25</sup> and a childless married woman who went to have a small uterine tumor removed was sterilized without her knowledge or consent.<sup>26</sup> At just one institution in Virginia—the Lynchburg Training School and Hospital—4,000 “patients” were sterilized between 1922 and 1972 as “misfits” in order to avoid “racial degeneracy.” The superintendent of the Lynchburg institution was a eugenics enthusiast who aimed to produce genetic purity.<sup>27</sup> The law sanctioning this practice was upheld by the U.S. Supreme Court and is still Virginia law. And in 1976, a North Carolina law was upheld in state and federal courts that permits the sterilization of “mentally retarded” or “mentally ill” persons. Sterilization may be authorized if, “because of a physical, mental, or nervous disease or deficiency which is not likely to materially improve, the person would probably be unable to care for a child or children; or, because the person would be likely, unless sterilized, to procreate a child or children which probably would have serious physical, mental or nervous deficiencies.” Furthermore, it is a “duty” of certain health officers to start the process if

- 1) . . . sterilization is in the best interest of the mental, moral or physical improvement of the retarded person,
- 2) . . . sterilization is in the best interest of the public at large,
- 3) . . . [the retarded person] would be likely, unless sterilized, to procreate a child or children who would have a tendency to serious physical, mental, or nervous disease or deficiency; or, because of a physical, mental or nervous disease or deficiency, which is not likely to materially improve, the person would be unable to care for a child or children.

#### THE HUMAN LIFE REVIEW

The U.S. Federal District Court said that “evidence that is clear, strong and convincing that the subject is likely to engage in sexual activity without using contraceptive devices and that either a defective child is likely to be born or a child born that cannot be cared for by its parent” is grounds for sterilization. Perhaps most frightening, the Supreme Court of North Carolina stated that the state may sterilize because “the people of North Carolina also have a right to prevent the procreation of children who will become a burden to the State.” In other words, if you do poorly on an IQ test, or if an M.D. says that you are mentally ill—both of which could happen to any of us under certain circumstances, as is happening today to some anti-government activists in the USSR—then you could be forcibly sterilized.<sup>28</sup>

A recent resurgence of the eugenics movement: The California firm of Robert Klark Graham has obtained the sperm of five Nobel laureates, the first volunteer being William Shockley, who has argued that whites are inherently smarter than blacks.<sup>29</sup> Graham hopes to improve the intelligence of Americans by disseminating this sperm.

#### **Finally—The Piper**

Many of those in favor of population control are frank to admit the use of emotional language, exaggerated arguments, and political manipulation. They defend these practices by saying that the situation is very serious. The worst that might happen, they say, is that people will become concerned about the dangers of “overpopulation.”

But exaggeration and untruth run up debts with the piper, who eventually gets paid. Philip Handler, president of the National Academy of Sciences, is a strong supporter of environmental and population control programs. But even he worries about the piper.

It is imperative that we recognize that we know little and badly require scientific understanding of the nature and magnitude of our actual environmental difficulties. The current wave of public concern has been aroused in large measure by scientists who have occasionally exaggerated the all-too-genuine deterioration of the environment or have overenthusiastically made demands which, unnecessarily, exceed realistically realizable—or even desirable—expectations. . . . *The nations of the world may yet pay a dreadful price for*

JULIAN SIMON

*the public behavior of scientists who depart from . . . fact to indulge . . . in hyperbole.*<sup>30</sup>

This leads to an open question: To what extent is the current public belief that the U.S. economy and society are on the skids related to false doomsday fears that we are running out of minerals, food, and energy, and to the unfounded belief that the U.S. is an unfair plunderer of the world's resources, the latter an "exploitation" that people must eventually cease, with grave consequences for the U.S.?

### **Conclusions**

Two propositions constitute the "bottom lines" of this chapter. 1) U.S. tax money is being used to implement the aim of population-activist individuals and organizations, that is, to reduce fertility among the poorer peoples of the world, and among U.S. citizens, too, by means both fair and foul, the latter including various types of propaganda and forced sterilization. Some of this tax money is being spent to convince us that we should share the beliefs of the moving spirits of these groups, and support them. 2) Though an important motivation of many of these people surely is the simple good-will desire to help poor people get ahead, now and in the future,<sup>31</sup> not absent from this movement are the beliefs that a) poor people, and especially poor non-white, non-Anglo Saxon non-Protestants, are inherently inferior; and b) the present and future well-being of all U.S. Taxpayers will be best served by reducing the birth-rate among these peoples. Only such beliefs can explain the anti-immigration policies of these organizations. These latter ideas are not only dangerous but are, in the main, scientifically unfounded. And these beliefs have led to shocking prescriptions. Do not lower the death rate of poor people, and get the poor not to reproduce, even if the means used are economic pressure or physical coercion.

Having our government put pressure on others—domestically with sterilization laws and policies, and internationally by tying food aid to fertility reduction—would be bad enough even if all the scientific propositions upon which these policies are founded were objectively supported. But these policies are *not* scientifically warranted. Even less noble, some part of the motivation in population



campaigns is pure selfishness, the desire to keep for ourselves what we can, against the supposed (but non-existent) drains of our resources by the children of the poor and non-whites, and by the “yellow (and brown) peril” of immigration. This is the witch’s brew at its nastiest.

To the extent that the U.S. has actually had any effect in developing countries, it has increased people’s family-size options—which I view as a good thing. I don’t worry very much about brainwashing, because I believe that, on important matters such as these, most people—educated or not—are basically levelheaded and too wise to pay much attention to other people’s views about their fertility behavior. Of course, the fertility-reduction propaganda can affect some people, and I feel badly for them. I consider it a moral outrage. But as an ex-practitioner and teacher of advertising and marketing, I doubt that the U.S. AID campaign has had much success in brainwashing. Nevertheless, this happy failure of U.S. attempts leaves me feeling uncomfortable.

### **Afternote:**

#### **Planned Parenthood’s Rhetoric**

Just a few examples of Planned Parenthood’s rhetoric are given here, to document the assertions [that] PP/WP has changed its course over the years. This material is far less lurid than that of the Campaign to Check the Population Explosion. But PP/WP is a very large and important organization, and many people still identify it only with its older aims and find it hard to believe that it is responsible for such activities.

I’ll start with some material from 1980, to show that the practices I describe continue to the present. The only message in the donor’s card is, “Yes, I will help contain runaway population growth by supporting the crucial work of Planned Parenthood,” plus this assertion by Robert McNamara: “Excessive population growth is the greatest single obstacle to the economic and social advancement of most societies in the developing world.”<sup>32</sup> Some of the statements in a 1980 fund-raising letter are,

Thai women and millions of other woman like them in India, China, Africa and throughout the developing nations control our destiny. *Their decisions—decisions of hundreds of millions of young women—about their family’s*

JULIAN SIMON

*size—control your future more surely, more relentlessly than the oil crisis or the nuclear arms race.*

*. . . unless population growth is harnessed and slowed to meet the limited resources and human services of these nations, development of nations will be shattered. Chaos, mass famine and war will continue to increase. We will be affected for better or worse.*

The great tinderbox for revolution and international anarchy is rising expectations of the world's masses *coupled with* unrestrained population growth. *Starvation, revolution and violent repression will fill our headlines unless human fertility is reduced to meet the finite limits of available resources and services.*

International Assistance. In developing countries of the world, the population "time bomb" ticks on, putting ever-increasing strains on the scarce resources of our planet, locking large areas of the globe into self-perpetuating poverty and setting the stage for famine and war.<sup>33</sup>

Now let's consider a few of the more striking examples from the last decade. One of the fund-raising letters by Margaret Mead is shown [see box]. Other letters by celebrities such as Mead, Mrs. Edward R. Murrow, and Cass Canfield mention famine, drought, flood, "the crush of visitors [that] forced the National Park Service to close one entrance to Yosemite National Park last summer," packed campgrounds, despoliation of fragile ecology, cars and trucks clogging expressways, people dying in the streets of starvation, and the following:

In India entire families commit suicide to escape a lingering death from starvation. In Bangladesh famished infants are thrown into rivers to drown. Hungry hordes of abandoned children roam the cities of Latin America looting, terrorizing and scavenging for food. By conservative estimates 400 million people—a tenth of humanity—live on the ragged edge of starvation: 12,000 a day die of hunger as food-short nations sink deeper into crisis and anguish. Regional crop failures this year will almost certainly mean mass famine. For 10 to 30 million, the Malthusian nightmare may become reality. . . .

A family of thirteen is found living in a basement flooded with water and smelling of sewer gas. The children are cold and hungry. This is "the other America"—a land of limited opportunity, of corrosive poverty. Sixty percent of our poor live in urban centers, in enclaves of misery stretched like scars across the nation.

Last spring eleven mayors met to warn of the collapse of U.S. cities, rapidly becoming "repositories for the poor." In Boston one in five gets public assistance; in N.Y.C. one in seven; in Los Angeles one in eight. These agonizing statistics underscore today's welfare crisis. Agonizing because for each person getting aid, someone eligible is not; agonizing because welfare benefits guarantee only a life of grinding poverty, physical survival and little else . . . .

## THE HUMAN LIFE REVIEW

MARGARET MEAD  
515 MADISON AVENUE  
NEW YORK, N. Y. 10022

Dear Friend:

Within today's crowded world there is a tremendous increase in suffering and brutality. Growing numbers of children are beaten or neglected. In New York City child abuse cases have risen 30% and similar increases are reported throughout this country and in other parts of the world. Children are the main victims of overpopulation. Due to the population explosion 500 million of them are chronically hungry -- living in misery and degradation. It is their generation and those still unborn who will pay the frightful penalties for our unbridled growth and for our reckless abuse of the environment.

Each day world population is increased by 190,000 and our earth is scarred by our efforts to provide for them. Mass famines have been temporarily averted but 12,000 a day still die of starvation. Irreplaceable resources are being wantonly depleted and in some countries water is sold by the glass. Our land, air and water are so toxic with chemicals and wastes that the Secretary General of the United Nations has warned that "if current trends continue, the future of life on earth could be endangered." This is not the world we want to bequeath to our children.

In America, our population is expected to climb to nearly 300 million by the end of the century and three out of four of us will be living in extremely congested cities. We are beginning to feel the congestion now -- in our crowded schools and clogged highways; in the destruction of our environment; in the erosion of the quality of life.

One of the grimmest aspects of the population explosion is the poverty it perpetuates and intensifies. In America 14,400 are hungry and 39 million are classified poor or near-poor. Half of our impoverished children come from families of five or more. Stunted by hunger, lacking in schooling and skills, they rarely break free from poverty's grip. What is true for these deprived Americans is tragically also true in many other nations.

Planned Parenthood/World Population is the only private organization through which you as an individual can work to curb population growth abroad in 101 countries and in our own. PP/WP programs of direct service, technical assistance, public education, research and training are cutting birth rates in selected areas around the globe. Most national family planning programs in other countries began as PP activities and are carried on with our continuing help. And 650 U.S. clinics run by Affiliates provide contraceptive help to almost half a million.

War, famine and plague are both unthinkable solutions and untenable ones. In World War II twenty-two million died: it takes less than four months to add that number to the world's population. Birth control is the only humane and rational answer to our population dilemma. PP/WP programs here and abroad will cost \$40 million in 1971. Please send your tax-deductible gift today to help assure a worthwhile life for future generations.

Sincerely,

P.S. If you have already contributed to your local PP/WP Affiliate, please share this appeal with a friend. We are grateful for your interest and support.

JULIAN SIMON

On an afternoon in N.Y. not too long ago four boys were playing in the streets when suddenly from a second story window a shot rang out and a 13-year old fell to the ground dead. The man who killed him said he couldn't bear the noise, that he was a night worker and had to get his sleep. In Paris three recent murders were attributed to noise and now studies in England and America suggest it is a cause of serious mental disorder provoking many to acts of violence.

The city dweller is constantly assailed by noise, doubling in volume every 15 years and now approaching levels which can cause permanent damage. Three out of five American men have lost some hearing and growing evidence links noise to heart disease. And still our cities swell until finally 80 per cent of us will live in crowded and festering sinks and pollution will be a personal hazard and affront. We are hastening to what Archibald MacLeish has called "the diminishment of man. . . ."

Along with one of the Mead letters came a reprint of Paul Ehrlich's "Eco-Catastrophe," a dramatically frightening doomsday document. It predicted—for the 1970's!—"the end of the ocean," falling agricultural yields, smog disasters for New York and Los Angeles ("nearly 200,000 corpses"), "birth of the Midwestern desert"; and "both worldwide plague and thermonuclear war are made more probable as population growth continues"; . . . "population control was the only possible salvation suggested."<sup>34</sup>

Perhaps most astonishing is Planned Parenthood's prodigal use of money—some of it public money—and phony emotional appeals in a twenty-eight page supplement in the *New York Times* . . . sponsored by PPFA together with the Population Crisis Committee. PP/WP also was a main sponsor of the anti-natal television campaign discussed in this chapter. All these activities make it very clear that Planned Parenthood's goal is fewer births.

As to the rhetorical tactics used in pursuit of this goal: The arguments used and the issues raised in connection with population growth—parking problems, famine, crime in the streets, mental disorder, and so on—are at best simply speculations subject to the kind of counter-evidence given elsewhere in this book, for example, with respect to famine. Or worse, they are plain untruths that fly in the face of well-established scientific evidence, for example, that population growth increases mental disorder. The best that can be said of these Planned Parenthood activities is that they are mindless actions, taken just for the sake of action by people who are motivated by the public spirit but who have never given attention to the

## THE HUMAN LIFE REVIEW

facts or thought through to the consequences, and who simply assume that “everyone knows” that the rhetoric is true. That’s the most favorable construction I can give to activities such as Planned Parenthood’s bumper-sticker campaign. Example:

POPULATION NO PROBLEM?  
HOW DENSE CAN YOU GET?  
Support Planned Parenthood

Some Planned Parenthood people say privately that these sorts of appeals do not reflect a change in Planned Parenthood’s mission from the original “children by choice—not chance,” but are only used because they are effective in fund raising. If that is so, then what is the moral basis of such behavior? Either PP/WP is getting money under false pretenses, or it is simply altering its behavior to produce maximum contributions.

## NOTES

1. H.F. Wollenberg IV, “Davis, Borchers Clash over Vasectomies,” *Champaign-Urbana News Gazette*, May 10, 1973, p. 2.
2. Hobart O. Mowrer, *The Crisis in Psychiatry and Religion*. (New York: D. Van Nostrand, 1961), p. 6. Norman E. Borlaug, “We Must Expand Population Research Now to Slow World Population Growth,” In Population Crisis Committee, *Mankind’s Greatest Needs: Population Research*. (Washington, D.C.: Population Crisis Committee), pp. 8-9: “the frightening power of human reproduction must also be curbed; otherwise, the success of the green revolution will be ephemeral only.” Wilson quoted in *Time*, August 1, 1977, p. 58: “It would be foolish, he says, to rear as many healthy children as possible in today’s crowded world.” Asimov in *Jewish News*, September 23, 1975, p. 32: “natural resources are being haphazardly drained and the population is allowed to grow unchecked . . . the population is increasing faster than the capacity to provide material and food for the growing numbers of people.” Adams, 1974, p. 25. Anderson, Newark *Star Ledger*, August 27, 1977: “The final Armageddon will likely come, in the opinion of intelligence analysts, not from a nuclear holocaust but from the simple crush of people . . . U.S. embassies predict rising unemployment and underemployment, with countless millions unable to eke out a living in rural areas, jamming into already overcrowded cities, where living conditions for many are appalling. This can only spawn social unrest with serious political and even potential strategic ‘implications,’ the study stresses.” Gell-Mann, “The Population Crisis: Rising Concern at Home,” *Science*, November 7, 1969, p. 723: “We are all of us appalled at man’s ravaging of his environment. The problem comes about as a product of three factors: population, the propensity for each individual to destroy the environment, and his capacity to do so through being armed with technology. All of these are increasing; all must be worked on in an effort to find some way to control the trend and ultimately make it level off or reverse.” Wilt Chamberlain and David Shaw, 1973, *Wilt* (New York: Warner Paperback): “I was especially hoping I would convince Richard [Nixon!] to take the lead in trying to solve the overpopulation problem—probably the biggest problem in the world today, the way I see it. I figured that if he would throw the prestige of his office and the power of this country behind some sweeping birth-control programs in the more backward countries, we might make some real progress in that area.” Landers, Chicago *Sun-Times*, June 23, 1970, p. 40: “Dear Ann Landers: It is now abundantly clear to even the most empty-headed fools that something drastic must be done within the next decade to limit the size of families or we are all doomed.” The writer then called for sterilization as a remedy. Landers replied, “Yes, I’m with you.” “Dear Abby,” *Champaign-Urbana News Gazette*, May 9, 1974, p. 34: “When the writers of the Good Book implored us to go forth and multiply, the world needed more people. Not so today. Quite the contrary.” Knowles in New York *Times*, December 30, 1969, p. 26. Rockefeller in *Newsweek*, March 30, 1970, p. 87. Finch in an AP Story in

## JULIAN SIMON

- Champaign-Urbana Courier*, February 19, 1970, p. 10. Letter to a newspaper on a "world without population curbs" in *Des Moines Register*, July 12, 1972, p. 8.
3. Wilfred Beckerman, *In Defense of Economic Growth*. (London: Jonathan Cape, 1974); Herman Kahn, William Brown and Leon Martel, with the assistance of the staff of the Hudson Institute, *The Next 200 Years: a Scenario for America and the World*. (New York: Morrow, 1976); John Maddox, *The Domsday Syndrome*. (London: Macmillan, 1972).
  4. Carole Musson, "Local Attitudes to Population Control in South Buckinghamshire," In H. B. Parry, ed., *Population and Its Problems: a Plain Man's Guide*. (Oxford: Clarendon Pr., 1974).
  5. Kingsley Davis, "The Climax of Population Growth: Past and Future Perspective," *California Medicine*, vol. 113, no. 5, p. 33.
  6. Davis, 1968, quoted in Robert Elliott, Lynn C. Landman, Richard Lincoln and Theodore Tsu-ruoka, "U.S. Population Growth and Family Planning: a Review of the Literature." *Family Planning Perspectives*, vol 2, reprinted in Daniel Callahan, ed., *The American Population Debate* (New York: Anchor Books, 1971).
  7. Paul R. Ehrlich, *The Population Bomb*. (New York: Balantine, 1968), p. xi.
  8. Frederick Wertham, *A Sign for Cain: an Exploration of Human Violence*. (New York: Warner Paperbacks Lib., 1969), chapter 6.
  9. Carey, in James W. Carey and Julian L. Simon, "The Church's Responsibility to Teach the Value of Life: a Surprising Dialogue Between Catholic and Jew." Mimeo. Dept. of Economics, University of Illinois, Urbana.
  10. Lincoln H. Day and Alice Day, *Too Many Americans* (New York: Houghton Mifflin, 1964) p. 134; Jack Parsons, *Population versus Liberty*. (London: Pemberton, 1971), p. 298; Paul R. Ehrlich, Anne H. Erlich, and John P. Holden, *Ecoscience Population, Resources, Environment*. 2nd ed. (San Francisco: W. H. Freeman, 1977), p. 807.
  11. Paul Silverman, Speech delivered at the Univ. of Illinois, at Champaign-Urbana, Earthday, 1970.
  12. *Ibid.*
  13. Lester Brown, *In the Human Interest: a Strategy to Stabilize World Population*. (New York: Norton, 1974), p. 148; Ehrlich, *op. cit.*, p. 36; *idem*, p. 41; William P. Bundy, "Learning to Walk," *Newsweek*, February 25, 1972, p. 35.
  14. *Newsweek*, March 30, 1970, p. 87.
  15. Silverman, *op. cit.*
  16. I mention these facts about Stuart's publication (1958) not to dismiss the book—I think we should try to look beyond the cover of the book to evaluate it—but to show that *despite* its inauspicious start in life the book could obtain so much more interest than could Mather's and the well-known Harpers publishing firm.
  17. Thomas Littlewood, *The Politics of Population Control*. (South Bend: Univ. of Notre Dame Press, 1977), p. 6.
  18. Garrett Hardin, "Living in a Lifeboat," *Bioscience*, 1974, 24: 561-67.
  19. Alexander Stuart, *Overpopulation: Twentieth Century Nemesis*. (New York: Exposition Press, 1958, p. 9.
  20. Mayer, personal communication, 1980.
  21. Douglas Love, and Lincoln Pashute [Julian L. Simon], "The Effect of Population Size and Concentration Upon Scientific Productivity." In Julian L. Simon, 1978c. This study was originally published under a pseudonym. My purpose was not to hide these views behind the pen name, and in fact the study originally but unsuccessfully sought publication under my real name. It was published under a pseudonym to avoid the impression that the volume in which it was published, which I edited, contained too much of my own material.
  22. This is similar to the finding of Kammeyer, Yetman, and McClendon, 1972 ["Family Planning Services and Redistribution of Black Americans." Reprinted in Kenneth C. W. Kammeyer, ed., *Population Studies: Selected Essays* (Chicago: Rand McNeilly, 1975)], using county data.
  23. I do not mean to suggest that southern family-planning clinics are bad. Rather, I think that such clinics are good because, like all aids to contraception, they help the individual achieve the kind of family and way of life that he or she wishes. Nevertheless, it seems to me that we should try to understand the motivations that lie behind such clinics, in order that we may meet truthfully and successfully with political objections to the extension of such clinics in the U.S. and elsewhere. The dedication of my 1977 technical book on population is as follows: "For my grandmother, Fanny Goodstein, who never went to school, but whose life made her family and community richer, economically and spiritually." Since I wrote that dedication I have learned [See Allen Chase, *The Legacy of Malthus*. (New York: Knopf, 1977).] that predecessors of the leaders of today's population

## THE HUMAN LIFE REVIEW

organizations (going back through Guy Burch, director of the Population Reference Bureau, and key intellectual advisor to the environmental movement's early best-selling writer's such as Vogt and Osborn) considered people like my grandmother to be mentally incompetent; like other Jewish immigrants from eastern Europe at the turn of the century, she would have scored abysmally low on the IQ test they considered a valid measure of her mental competence; eight out of ten of her sort of immigrant were rated as "feeble-minded defectives" (Chase, *op. cit.*, p. xix). Had the eugenicists had their way about immigration policy, my grandmother could not have entered the U.S., and she and her descendants would have perished in Europe during World War II, as did her relatives who remained. Had Burch, Vogt, and Osborn had their way—which is what Zero Population Growth wants.

24. If such laws had been on the books in the past, they would have been used against the immigrant ancestors of many of us. If an IQ test indicates a score of 70 or lower the person is designated "feeble-minded or mentally retarded." Administration of the IQ test "to steerage immigrants at Ellis Island [New York] in 1912 showed that, according to the scores they made on these tests, more than 80 percent of all Jewish, Italian, Hungarian, Russian, Polish and other non-Nordic people tested were feeble-minded defectives" (Chase, *op. cit.*, pp. xix, 16). The results of such IQ tests were brought before Congress by the eugenics movement when lobbying to achieve the restrictive U.S. Immigration Act of 1924. Now—my grandmother would not have procreated, and (present company aside) her very productive and socially useful offspring would not have been born to make their contribution to their society and that of their descendants. The present leaders of the population movement have cleaned up their act to a considerable extent, and eugenics seldom comes into the discussion now. But the same old restrictive-immigration and sterilization policies are still being advocated, or are already enacted into laws. As this book and my earlier technical book (1977) argue, the economic rationale for such restrictive policies does not exist. And so we have a miserable irony: Policies created for selfish economic purposes turn out not to serve the economic ends of those who advocate the policies. And the policies damage the rest of us, too; so there is not even the bittersweet taste of poetic justice.

25. Littlewood, *op. cit.*, pp. 107-8.

26. *Ibid.*, p. 80.

27. AP, *Daily Illini*, February 23, 1980, p. 3.

28. *Annual Review of Population Law*, 1976, pp. 38-39.

29. *Newsweek*, March 10, 1980; AP, *Champaign-Urbana News Gazette*, March 1, 1980, p. 1.

30. Testimony before Congressional Subcommittee on Science, Research, and Development, July 21, 1970, quoted by Wolman, 1971, p. 97 (italics added).

31. Let me go further. Some of the people involved with these organizations are among the most unselfish and dedicated people that I have ever met. Take, for example, P, who set up a population-related private enterprise partly to diffuse contraception and partly to create a dependable source of funding for innovative fertility-reduction programs. He is almost saintly in turning over to non-profit ventures almost all the profits from the private business that, in the highest conscience, he could have divided among himself and the other stockholders.

32. Donor card accompanying a PP/WP brochure.

33. Faye Wattleton in fund-raising letter and leaflet accompanying brochure.

34. Paul Ehrlich, "Eco-Catastrophe," *Ramparts* 7: 24-28 (1969).

## APPENDIX A

*[What follows was first published as the lead article in the “Commentaries” section of the July, 1983, issue of Pediatrics, the official journal of the American Academy of Pediatrics. Peter Singer is an Australian professor who is currently with the Monash University Centre for Human Bioethics. He has written articles on a wide range of issues, and is the author of the book Animal Liberation. This article is reprinted with permission (©1983, American Academy of Pediatrics).]*

### **Sanctity of Life or Quality of Life?**

*Peter Singer*

The ethical outlook that holds human life to be sacrosanct—I shall call it the “sanctity-of-life view”—is under attack. The first major blow to the sanctity of life view was the spreading acceptance of abortion throughout the Western world. Supporters of the sanctity-of-life view have pointed out that some premature babies are less developed than some of the fetuses that are killed in late abortions. They add, very plausibly, that the location of the fetus/infant—inside or outside the womb—cannot make a crucial difference to its moral status. Allowing abortions, especially these late abortions, therefore does seem to breach our defense of the allegedly universal sanctity of innocent human life.

A second blow to the sanctity-of-life view has been the revelation that it is standard practice in many major public hospitals to refrain from providing necessary life-saving treatment to certain patients. Although this practice applies to geriatric patients and those suffering from terminal illness, the most publicized and also the potentially most significant cases have been severely defective newborns. In Britain, Dr. John Lorber<sup>1</sup> has quite candidly described his method of selecting which babies suffering from spina bifida should be given active treatment, and he has indicated, with equal candor, that in his view the best possible outcome for those not selected is an early death.

The decision not to treat an infant with Down’s syndrome has also been publicized. In April 1982, in Bloomington, Indiana, the parents of an infant with Down’s syndrome and in need of corrective surgery refused permission for the surgery to be performed. Few details are available because the court ordered the records sealed, but the court refused to intervene or to take the child out of his parents’ custody.<sup>2</sup>

Although many doctors would sharply distinguish the active termina-



tion of life from a decision not to treat a patient for whom the forseen outcome of this decision is the death of the patient, the distinction is a tenuous one, and the claim that it carries moral weight has been rejected by several academic philosophers. Hence, the acceptance of nontreatment in these situations is rightly perceived as a further threat to the sanctity-of-life view.

Some respond to this situation with a sense of alarm at the erosion of our traditional ethical standards. We already have, these people tell us, one foot on the slippery slope that will lead to active euthanasia, then to the elimination of the mentally feeble and of the socially undesirable, and finally to all the atrocities of the Nazi era. To pull back from this abyss, we must renew our commitment to the most scrupulous respect for all human life, irrespective of its quality.

It is in keeping with this response that shortly after the verdict was handed down in the Bloomington case, the Reagan administration issued, through the Department of Health and Human Services, a "Notice to Health Care Providers" stating that it is unlawful for a recipient of federal financial assistance to withhold from a handicapped infant any medical treatment required to correct a life-threatening condition, when the treatment is not medically contraindicated and would be given to an infant who was not handicapped.

Seen from a distance, this notice appears to put doctors in the absurd situation of having to keep alive the most grossly defective infants, for whom life is either quite valueless—because the infant is forever incapable of any conscious experience whatsoever—or else a positive burden, because it is a life of pain and discomfort without the redeeming value of a rational awareness of self or others. Even Lord Justice Templeman, who in a recent English case concerning an infant with Down's syndrome ordered that surgery be performed, did not wish to go so far. He allowed that in a case in which the life of the infant would be "demonstrably awful" there would have been grounds for allowing a child to die. The Reagan administration, it would seem, wishes infants to be kept alive even when their life will be "demonstrably awful."<sup>3</sup>

Is the erosion of the sanctity-of-life view really so alarming? Change is often, in itself, alarming, especially change in something that for centuries has been spoken of in such hushed tones that to question it is automatically to commit sacrilege. There is little evidence, however, to support the application of the slippery slope argument in this context. Cultures have practiced forms of infanticide or euthanasia—Ancient Greece, the Eskimos—have been able to hold the line around those cate-

## APPENDIX A

gories of beings that could be killed, so that the lives of other members of these societies were at least as well protected as the lives of citizens of the United States, where the culture officially accepts no limits to the sanctity of human life.

Whatever the future holds, it is likely to prove impossible to restore in full the sanctity-of-life view. The philosophical foundations of this view have been knocked asunder. We can no longer base our ethics on the idea that human beings are a special form of creation, made in the image of God, singled out from all other animals, and alone possessing an immortal soul. Our better understanding of our own nature has bridged the gulf that was once thought to lie between ourselves and other species, so why should we believe that the mere fact that a being is a member of the species *Homo sapiens* endows its life with some unique, almost infinite, value?

Once the religious mumbo-jumbo surrounding the term “human” has been stripped away, we may continue to see normal members of our species as possessing greater capacities of rationality, self-consciousness, communication, and so on, than members of any other species; but we will not regard as sacrosanct the life of each and every member of our species, no matter how limited its capacity for intelligent or even conscious life may be. If we compare a severely defective human infant with a nonhuman animal, a dog or a pig, for example, we will often find the nonhuman to have superior capacities, both actual and potential, for rationality, self-consciousness, communication, and anything else that can plausibly be considered morally significant. Only the fact that the defective infant is a member of the species *Homo sapiens* leads it to be treated differently from the dog or pig. Species membership alone, however, is not morally relevant. Humans who bestow superior value on the lives of all human beings, solely because they are members of our own species, are judging along lines strikingly similar to those used by white racists who bestow superior value on the lives of other whites, merely because they are members of their own race.

Ironically, the sanctity with which we endow all human life often works to the detriment of those unfortunate humans whose lives hold no prospect except suffering. A dog or a pig, dying slowly and painfully, will be mercifully released from its misery. A human being with inferior mental capacities in similarly painful circumstances will have to endure its hopeless condition until the end—and may even have that end postponed by the latest advances in medicine.

One difference between humans and other animals that is relevant

## THE HUMAN LIFE REVIEW

irrespective of any defect is that humans have families who can intelligently take part in decisions about their offspring. This does not affect the intrinsic value of human life, but it often should affect our treatment of humans who are incapable of expressing their own wishes about their future. Any such effect will not, however, always be in the direction of prolonging life—as the wishes of the parents in the Bloomington case, and in several other recent court cases, illustrate.

If we can put aside the obsolete and erroneous notion of the sanctity of all human life, we may start to look at human life as it really is: at the quality of life that each human being has or can achieve. Then it will be possible to approach these difficult questions of life and death with the ethical sensitivity that each case demands, rather than with the blindness to individual differences that is embodied in the Department of Health and Human Services' rigid instruction to disregard all handicaps when deciding whether to keep a child *alove* [*sic*\*].

---

\*The word "*alove*" appeared in the original in *Pediatrics*.

## NOTES

1. Lorber J.: "Ethical problems in the management of myelomeningocele and hydrocephalus." *J. R. Coll Physicians Lond* 1975; 10:1.
2. *Deciding About Foregoing Life-Sustaining Therapy*, discussion paper prepared by staff of President's Commission for the Study of Ethical Problems in Medicine and Biomedical and Behavioral Research. Washington, D.C., August 1982, chapter 7.
3. See "Re B (a Minor)" *Times Law Report*, Aug. 8, 1981, p. 15.

## APPENDIX B

*[The following article first appeared in the September 2, 1983 issue of National Review magazine, and is reprinted here with permission (©1983 by National Review, Inc.). Steven Baer is director of education for the Chicago-based Americans United for Life Legal Defense Fund, which acted as counsel in the appeal of the original Infant Doe ruling.]*

### **Should Imperfect Infants Survive?**

*Steven Baer*

Real life finds the principle that justice is blind embodied—all too often—in all-too-human custodians, black-robed and fraught with biases, inherently prone to err. One such mortal is Gerhard Gesell, federal judge for the District of Columbia.

The son of the famous child psychologist and pediatrician Arnold Gesell, Gerhard Gesell studied law at Yale University, the same prestigious institution with which his father was associated. No one would have seemed better qualified to consider the suit that the American Academy of Pediatrics brought to challenge a new federal regulation that required the posting of warning signs in hospital nurseries. “DISCRIMINATORY FAILURE TO FEED AND CARE FOR HANDICAPPED INFANTS IN THIS FACILITY,” the signs said, “IS PROHIBITED BY FEDERAL LAW.” Violations of that civil-rights law—the Rehabilitation Act of 1973, Section 504—were to be reported via an emergency number listed on the signs.

The regulation had been promulgated by the Department of Health and Human Services (HHS) after the death of “Infant Doe,” a newborn who last year was starved to death in an Indiana hospital. The child had received a tentative diagnosis of Down’s syndrome, a normally mild form of mental deficiency, and his parents, physician, and the Indiana courts had decided that all parties, including Infant Doe, would be better off if he was dead.

But disability-rights groups disagreed, finding nothing just (nor merciful) in the child’s suffering and death. The Association for Retarded Citizens, the Down’s Syndrome Congress, the Spina Bifida Association of America, and the American Coalition of Citizens with Disabilities joined together and filed a brief supporting the regulation. Judge Gesell, however, sided with the doctors.

#### THE HUMAN LIFE REVIEW

The regulation, he ruled, “fails to satisfy the test of rationality . . . Any anonymous tipster” could unleash federal “‘Baby Doe’ squads on the scene, monopolizing physician and nurse time and making hospital charts and records unavailable during treatment.” Such a circumstance “can hardly be presumed to produce higher-quality care for the infant.”

Hardly. Unless, of course, the disruption brought about by this imaginative caricature of a federal civil-rights investigation was also to disrupt the intentional starvation of a disabled child. A “Baby Doe squad” would certainly have heightened the quality of care of Baby Doe in Indiana.

Not only would the “arbitrary and capricious” regulation upset nurseries and filing systems, Gesell wrote, it would force children to be removed from hospitals and create unfair new malpractice standards. He asserted, further, that the notices, stating the duly established law of the land, would cause “economic, emotional, and marital” hardships for the families.

The real problem is this: Judge Gesell, responsible for dispensing justice to the people, seems to doubt that handicapped children *are* people.

The Rehabilitation Act, “on its face, is open to a broad and all-inclusive interpretation,” Judge Gesell wrote, acknowledging that the handicapped individuals protected by Section 504 are defined as “any person” with a substantially limiting mental or physical impairment. But with a chilling ambivalence, Gesell states that (emphasis added) “*some* infants born with physical and mental defects *may* well fit within the broad definition” of “person.” A “mildly handicapped child whose parents *want him* to benefit from those services” might indeed be a person, but the judge refuses even to commit himself to this much.

Since when does the degree of handicap and the beneficence of his or her guardians affect a newborn child’s status as a person, protected by the Constitution and Section 504? Historians of ethics may point to 1973. That year, as Congress affirmed the rights and humanity of its disabled citizens with the Rehabilitation Act, the country’s most respected medical journal, the *New England Journal of Medicine*, lent legitimacy to an opposite affirmation, in the article “Moral and Ethical Dilemmas in the Special-Care Nursery.”

The article described “death as a management option” for newborns with such conditions as Down’s syndrome or spina bifida. Although neither of these necessarily produces serious physical disability or even certain mental retardation, the authors, Dr. Raymond S. Duff and A. G. M. Campbell, urged that physicians, through parents, be freely allowed

## APPENDIX B

the formerly unthinkable “option” of allowing their disabled neonatal patients to die. “If working out these dilemmas in ways such as those we suggest is in violation of the law,” they wrote, “we believe the law should be changed.”

But such law, on the federal level anyway, was barely a month old when the article ran. The Rehabilitation Act was the product of more than a century of Western humanitarian idealism, enlightened institutional reform, and recent civil-rights consciousness; it was a rather sudden shift for intellectual leaders to be repudiating an achievement so suddenly. But they were, and the medical profession was quick to follow. By 1975 a national poll of pediatric surgeons (*Pediatrics*, October 2, 1977) showed that 77 percent favored the Infant Doe option for infants with Down’s syndrome.

One of the co-authors of the 1973 article, Dr. Duff, professor of Pediatrics at Yale University, runs the pediatrics ward of the Yale-New Haven Medical Center just across town from the late elder Gesell’s Institute of Child Development.

And he practices what he preaches. A Boston TV news unit reported in early spring on several of Dr. Duff’s “unsolicited recommendation[s]” for denying treatment to a disabled newborn. The reporters found his selective social policy to be extremely imprecise. One boy, for example, whose indignant parents refused Dr. Duff’s prescription when he was born, is now an A student. Dr. Duff had said the child would be a “vegetable.”

Tapes of the Boston WNEV-TV series were later played privately to shocked Washington, D.C. audiences at the White House, HHS, and the Department of Justice. Prompted in part by the documentary, HHS is currently pressing an investigation of Connecticut hospitals—with special attention to Yale-New Haven—for violations of the nondiscrimination provisions of the Rehabilitation Act.

One Washington viewer was definitely unimpressed by the TV documentary: Judge Gerhard Gesell. Neither the videotape nor any other evidence presented by the Justice Department and the disability groups swayed him from killing the sign regulation—and, more crucially, questioning the humanity of the children it was designed to protect. Judge Gesell’s ruling against the Baby Doe regulations and Dr. Duff’s eugenics are a reflection of a modernistic intellectual heritage, one that assigns only relative value to innocent human life.

The fundamental tenet of law and medicine—of all society for that matter—is that which estimates the individual as of primary, sacred worth. But that political and moral foundation is crumbling.

#### THE HUMAN LIFE REVIEW

The critical moment came for Judge Gesell in 1969, when his became the first federal court to overrule prohibitions on abortion. While that particular ruling did not stand, it pioneered the way for the U.S. Supreme Court to establish exactly the same private right of the woman to kill her fetus in *Roe v. Wade* less than four years later. Now Gerhard Gesell is once again pioneering his way down the slippery slopes of constitutional jurisprudence: In the last lines of the latest opinion, he cites *Roe* and hints that handicapped newborns may be in the same danger in the future as unwanted fetuses were ten years ago. Since then 15 million of them have been aborted in the United States.

Gerhard Gesell's father was a pioneer of another sort. Arnold Gesell spent his professional life clinically observing the early stages of human growth. "Birth marks the arrival but not the true commencement of an individual," Dr. Gesell wrote in *Child Development: An Introduction to the Study of Human Growth*, in 1949. "The life career of an individual begins with conception, when the genes of the father and mother unite to initiate a cycle of growth." Later in the same book, reflecting on the recent totalitarian horrors in Europe, Arnold Gesell asserted, "A democratic culture . . . affirms the dignity of the individual person."

Or so he thought. Only a quarter of a century later, his son, along with many others, has repudiated that fundamental premise. An individual's value is not inherent, but contingent upon the will of his or her caretakers. As with the statist and medical atrocities of World War II, personhood and rights are increasingly determined by an individual's "wantedness" rather than by his genetic humanity.

The latest symptom of this trend is the institutionalized destruction of unwanted handicapped newborns, like so many factory seconds.

## APPENDIX C

[The following article originally appeared in the December, 1982 issue of Archives of Internal Medicine (Vol 142, p. 2295), and is reprinted here with permission. Dr. Norman Fost is a professor in the department of pediatrics and in the program of medical ethics at the University of Wisconsin School of Medicine (©1982, American Medical Association).]

### **Passive Euthanasia of Patients With Down's Syndrome**

*Norman Fost, MD*

It is common in the United States to withhold routine surgery and medical care from infants with Down's syndrome for the explicit purpose of hastening death. About two thirds of pediatricians say they would accede to a parental request to withhold treatment of duodenal atresia in such a child.<sup>1</sup> It is not surprising, therefore, that a newborn with Down's syndrome and a tracheoesophageal fistula was allowed to die without surgery earlier this year, despite appeals to the Indiana and the United States Supreme Courts (as reported in the *Washington Post*, April 17, 1982, p. A1). What has been unusual is the response to the "Bloomington baby." The US Department of Health and Human Services issued a notice informing hospitals that they could lose federal funds if "nutritional sustenance or medical or surgical treatment required to correct a life-threatening condition were withheld from a handicapped infant."<sup>2,3</sup> House of Representatives bill 6492 entitled "Handicapped Infants Protection Act of 1982," introduced by John N. Erlenborn (R-Ill), on May 26, 1982, would explicitly include such cases under child abuse and child neglect statutes.

Those who oppose passive euthanasia of these children point out that Down's syndrome does not usually interfere with the experiences and social relationships that make life worth living. Affected children do not experience unusual pain or suffering, unless they are abandoned or neglected. They have an unusually pleasant disposition, are less likely than normal children to be aggressive or have tantrums, and the majority achieve independence in feeding, dressing, and toilet training. Why, then, do parents and physicians do what they would not do with an otherwise normal child, namely, withhold routine lifesaving treatment?

The most common reason for tolerating these deaths seems to be a belief that parental interests should be paramount when these interests conflict with those of a retarded child. It is understandable that a physi-



#### THE HUMAN LIFE REVIEW

cian would want to support parents who believe their well-being is threatened by the continued existence of a handicapped child. These attitudes, however common in practice, may not be supported by our laws<sup>4</sup> and may be influenced by an insufficient knowledge of the facts. They rest, in part, on the false assumption that a family that accepts a child with Down's syndrome is likely to be adversely affected in the long run. The majority actually do well.<sup>5</sup> It also results from a failure to explore or offer the family alternatives, such as adoption, which is often available for children with Down's syndrome. There is an objection that, at its most fundamental level, such a policy implies a belief that a retarded child's life may be subject to his parents' needs or desires.<sup>6</sup> Even if it were true that parents unavoidably suffered greatly because of a child, it would not follow that they could bring about the child's death as a solution to their problems, particularly if other alternatives exist.

The controversy surrounding these cases is part of the larger debate about withholding or withdrawing treatment from other incompetent patients. It is important not to conflate Down's syndrome with conditions of profound retardation, incompatible with social experiences. Parental discretion may be more appropriate in such cases.

If the behavior of physicians regarding infants with Down's syndrome deviates from public opinion or clear constitutional principles, these complex decisions will inevitably come under tighter and more burdensome regulation. As Cardozo said, "Laws are not written until they are first broken."

#### NOTES

1. Shaw, A. , Randolph, J.G., and B. Manard, "Ethical Issues in Pediatric Surgery: A Nationwide Survey of Pediatricians and Pediatric Surgeons." *Pediatrics*, 1977, 60: 588-599.
2. Dotson, B.L., *Notice to Health Care Providers*. Office for civil rights, U.S. Dept. of Health and Human Services, May 19, 1982.
3. Fost, N., "Legislating Morality: The Bloomington Baby and Section 504." *Hastings Center Report*, August, 1982.
4. Robertson, J.A. and N. Fost, "Passive Euthanasia of Defective Newborns: Legal Considerations." *Journal of Pediatrics*, 1976, 88: 883-889.
5. Carr, J., *Young Children With Down's Syndrome*. Butterworth, Inc., Washington, D.C., 1975.
6. Gustafson, J.M., "Mongolism, Parental Desires, and the Right to Life." *Perspectives on Biological Medicine*, 1973, 16: 529-557.

## APPENDIX D

*[What follows first appeared (in slightly edited form) in the San Jose August/September 1982 Bulletin (an official publication of the Santa Clara Medical Society) under the title "Abortion as Birth Control." We reprint here the full original version, with permission of the Society, and of the author. Dr. Frank Hyatt is in family practice in San Jose, California; he is a member of the California Pro-Life Medical Association.]*

### Medicine and Abortion

*Frank Hyatt, M.D.*

The idea of the sanctity of the individual human life has been a cornerstone of Western civilization and the Judeo-Christian tradition for centuries. Yet every decade or so, for reasons of expediency, this concept is challenged, as in Nazi Germany, the Soviet Union, the slave-owning South, and we re-learn the lesson of Pandora's Box: A little judicious elimination—for the good of society—of unimportant, possibly defective people, aside from its intrinsic evil, leads to a slave state or a totalitarian holocaust. Though our culture still officially pays lip service to this concept, it is again being questioned, at least unconsciously, by many people. Because of ever-present TV violence, the numbing effect of two world wars, and the apparent population explosion, the individual human life is again being thought of as expendable, to be sacrificed if need be to a greater good such as the avoidance of suffering or the conservation of society's limited resources.

Nevertheless, as doctors, not social engineers, we're pledged by our Hippocratic Oath and our contracts with individual people to honor the first concept; and so, in our sometimes lethal actions towards living things—microbes, cancer, fetuses—we must be *extremely careful* what it is that we're killing.

The nature of the human fetus has obviously been quite controversial in medicine for at least the past 15 years, but this much, as doctors, we know:

1. Metabolizing, growing, moving, reproducing its cells, the fetus is by textbook definition alive, at least in the sense that an amoeba or a tree is alive.
2. By virtue of its cells' 46 chromosomes and other specific characteristics, the fetus belongs to the human species.
3. It is complicated. Unlike some lay counselors, we don't describe the

#### THE HUMAN LIFE REVIEW

fetus as “a clump of cells” or “a blob of protoplasm,” but remember from our embryology that the fetus has a sex at conception, a heartbeat by 18 to 25 days, brain-wave activity by as early as 40 days, arms and legs, fingers and toes, by 49 days.

Alive and human then, this fetus, but still in the minds of many of us a fair object for the suction bottle or curette. Compared to us it seems so small, so unintelligent, almost grotesque. Yet incredibly, just as we didn't come from children but once were children, so each of us didn't come from a fetus but once *was* such a fetus. And even the most ardent pro-choice doctor would disagree with the Supreme Court and admit that at some time in his or her nine-month gestation *before* birth the fetus becomes one of us—a full-fledged, non-killable human being. And therein lies his dilemma—the aborting doctor, if he will be true to the Western ethic, must devise a rule whereby not one single precious “legitimate” human life will be lost by his procedure. He must find that exact week, day, and hour when each fetus becomes a person. It does no good to “cop out” and say that we live in a pluralistic society, and “I wouldn't want to impose my values,” etc.—there's an objective reality out there, not dependent on the mind of the mother or doctor, which must be defined. Fetus Jones, whose mother wants him, becomes a person at the same moment in his life as fetus Smith, whose mother doesn't.

Faced with this dilemma, most pro-choice people settle for the criterion of “viability,” currently listed at about 24 weeks, give or take a few thousand deaths. Yet “viability,” the ability to live outside the uterus, is artificial and arbitrary, more a measure of the sophistication of the medical resources around the fetus than of his humanity. You're more viable in Stanford than in Gilroy, 1980 than 1900.

It is apparent, then, that the human lifespan is a *continuum*, beginning at conception (or at the latest, implantation), and that at no magic point in this continuum can one logically say, “Before this it's protoplasm; after this it's a person.”

Even some of our pro-choice colleagues in their better moments would admit this, but would justify an abortion on the grounds that the destruction of the fetus, while regrettable, results in a greater good or lesser evil than if he or she were allowed to survive.

For example, it is said that if unwanted pregnancies were not aborted, there would be tremendous increase in child abuse. Yet in a study of over 600 battered children, Dr. E. Lenoski of U.S.C. found that ninety percent of them were *wanted* during pregnancy. Another study done before abortion was legalized, comparing women initially most ecstatic about their pregnancies with those most rejecting, found almost no difference

#### APPENDIX D

between them after delivery. There are many unwanted pregnancies, but almost no unwanted newborns.

Proponents of abortion say that with our modern techniques we can identify and eliminate defective (and even “wrong-sex”) fetuses before they are born, thus sparing them considerable misery as children and adults. This, like argument #1, belongs in the “We’re-doing-the-fetus-a-favor-by-killing-him” category, and is not borne out by psychological studies which show no difference in happiness and outlook between normal and “defective” people.

It is said that if abortions were again made illegal the number of maternal deaths from illegal abortions would skyrocket. Yet according to the pro-abortion statistician Dr. Willard Cates, in 1972 (the year before the Supreme Court legalization) there were only 39 such deaths nationwide. Granted, each case was a tragedy; but are we justified in killing 1.5 million unborn humans a year in order to save 39 adults, not one of whom is “forced” to go to any abortionist, back-alley or otherwise? As to morbidity, although the percentages may be better, according to a Wisconsin hospital survey, there have been more hospital admissions for abortion complications since the floodgates were opened than there were before legalization.

Does a woman have a right to her own body? Certainly, but obviously the fetus is not her body. All its cells are genetically unique and physically distinct from hers, and so different is the fetus that early in pregnancy her body mounts an immune reaction against the perceived invader. The fetus is enclosed in his mother’s body, takes nourishment from her body, but it is *not* her body.

Pregnancy from rape and incest, the pro-abortion party’s Trojan horse? The number is miniscule, for practical purposes not worth arguing about *ad infinitum*.

It appears to me that legalized abortion has resulted in the deaths of additional millions of immature, unintelligent, but fellow-human beings, for reasons based mainly on ignorance and self-indulgence, and I would suggest at least two possible remedies for the future:

1. Pro-life doctors might stop accepting a lost battle as a permanent defeat, and band together in an effective organization like the California Pro-Life Medical Association. We should continue to educate our pregnant patients considering an abortion, not only as to its nature, but also as to alternate help and resources. Dr. Jack Willke’s “Handbook on Abortion” is a gem, and has saved at least three lives that I know of.

2. Aborting doctors? Well, you might at least tell it as it is, be consis-

#### THE HUMAN LIFE REVIEW

tent, and stop calling it “the baby” when it’s wanted, and “the product of conception” when it isn’t.

Two hunters in the woods—one sees movement in the bushes and raises his gun to shoot, when his friend says “Wait! I think it might be another hunter.” The first hunter lowers his gun and investigates, obeying a corollary of a law as old as Western civilization: You don’t kill what might be a fellow human. Would that our healing profession might show a similar restraint, and abandon its new role of executioner for society’s unwanted.

## APPENDIX E

[*This article first appeared in the July 25, 1983 Wall Street Journal. Author Steven Mosher is the young Ph.D. candidate expelled from Stanford University after his published disclosure of government-coerced abortions in China. He is the author of the newly-published book Broken Earth: The Rural Chinese (Macmillan: The Free Press). This article is reprinted with permission (©1983, Dow Jones & Company, Inc.; all rights reserved).*]

### **Why Are Baby Girls Being Killed in China?**

*Steven Mosher*

In 1980, when I was living with the 8,000 members of Sandhead Brigade in China's Guangdong Province, I asked village friends whether female infanticide ever occurred locally. The answer, which came with rather more heat than I had expected, was an emphatic no. "Ours is a land of fish and rice," one wrinkled old midwife told me in explanation. "All of the people here have always been able to raise their daughters." She and others insisted that even under the old imperial regime girl babies had never been put to death.

Yet less than two years later Chinese friends in Hong Kong who had recently been back to the village began to tell of girl infants dying soon after birth in suspicious circumstances. One young woman was even more candid, admitting to me that when her mainland sister-in-law had recently given birth to a girl, the baby had been murdered immediately. A bucket of water had been prepared beside the bed. When the newborn turned out to be a girl, she was drowned.

Female infanticide isn't just an anomaly of the village I lived in. Premier Zhao Ziyang thought the problem widespread enough to condemn it in his report to the National People's Congress in December 1982. "We must protect in particular infant girls and their mothers," he said. "The whole society must resolutely condemn the criminal activities of female infanticide and maltreatment of mothers. The judicial apparatus should resolutely punish the offenders according to law."

In recent months provincial newspapers throughout China have reported grisly tales of the murder of female infants. On March 3, the *People's Daily* admitted that "the butchering, drowning, and leaving to die of female infants and the maltreating of women who have given birth to girls has become a grave social problem."

#### THE HUMAN LIFE REVIEW

Peking claims that these crimes are committed by “backward” villagers in the name of “feudal” attitudes that “boys are precious, girls are worthless.” Male villagers, said to desire sons to “carry on the ancestral line and extend the generations,” have been especially singled out for censure. “In their keen desire to have sons,” the English-language *Peking Review* said last January, “some men still torment their wives who bear daughters and worse still, they kill the baby girls through neglect or outright murder.” If Peking is to be believed, many peasant men are ignorant and misguided monsters who willingly sacrifice their infant daughters on the altar of some feudal belief.

Nothing could be further from the truth. Infanticide does have a long and tragic history in many parts of China. But by the middle decades of this century, it looked as though this barbarism was on its way to extinction. In Chinese villages today, where ancestral land has long since been expropriated by the state and ancestor worship is on the decline, traditional notions of clan and family continuity no longer exert much influence. These attenuated ideas could not possibly account for the sudden reoccurrence of female infanticide.

The wave of infanticide sweeping China is a direct consequence of a population-control policy of unprecedented severity. It restricts families to one child, ignores the realities of old-age economics in the countryside and systematically denigrates the value of human life.

Parents are permitted to have only one child, and then only after a “birth quota” has been issued by the authorities. Each population unit, such as a rural collective, is limited to a certain number of births per year, which it allots to couples who have yet to have children.

Women pregnant with “over-quota” babies are forced to attend round-the-clock “study courses” until they submit to an abortion. Families who actually have a second child must pay heavy fines of up to \$2,000—several years wages in mainland China—and run the risk of demotion or assignment to less desirable work as well.

This draconian policy makes no provision for the long-term economic concerns of peasant parents, especially their anxieties about financial security in old age. Sons are the only social-security system known to villagers, for there are no pension programs in the Chinese countryside. Neither can daughters give long-term assistance, for rural custom decrees that they take up residence with their husband’s family upon marriage and sever all economic ties with their natal family. Even if they were to keep a daughter at home, peasants say, it would be impossible to find her a husband in a population of only sons.

## APPENDIX E

Those who are without sons must toil in the fields throughout their twilight years. As their strength declines to the point where they cannot keep up, they are assigned lighter work that pays scarcely enough for their rice ration. Old age is a downward spiral of flagging vigor, worsening diet and weakening health.

While the birth of a son has always been a more important event than the arrival of a daughter, Peking's policy of one child per family has raised the stakes. For the peasantry birth has become a kind of Russian roulette: The arrival of a son heralds a relaxed and secure old age; the coming of a daughter portends poverty and slow starvation during one's declining years. It is not "feudal nonsense" but brutal economic reality that moves the parents to hope for a man-child.

If the child isn't male, then the choice is a stark one: Either kill or abandon the newborn female infant, reserving your one-child quota for the birth of a boy, or face a harrowing old age. It is no surprise that many peasants decide in favor of their own security, and trade the infant's life for their own.

It is also an act in which the Chinese state is a silent accomplice. The English-language *China Daily* printed in Peking may publish editorials lamenting the resurgence of infanticide, but the implementation of the birth control policy at the grass roots encourages cadres to overlook the willful murder of female infants.

County, commune and production brigade cadres are told how many births their unit is to be allowed each year and are promoted and otherwise rewarded on the basis of whether they succeed in meeting the quota. It isn't in their interest to prevent female infanticide. Each girl who dies at birth or disappears soon after is one less head they will be held to account for in the annual birth control report.

Front-line cadres take their cues from their superiors, and these have made clear that population growth is to be held down at all costs, even that of the lives of millions of infants.

Not only are forced abortions being performed up to the time of birth, there are even cases of officially sanctioned infanticide. In one incident shortly after I left Guangdong Province, a young woman pregnant for the first time gave birth to twin boys. What should have been an occasion for rejoicing quickly turned tragic as the cadres present asked her which one she wanted. Both of them, she replied, but to no avail. One of the babies—she could not and would not choose which—was taken from her and put to death.



## APPENDIX F

*[The following article by Bob Greene, a nationally syndicated columnist, was released on June 19, 1983. It is reprinted with permission (©1983, Tribune Company Syndicate, Inc.).]*

### Men Carry Abortion Scars, Too

*Bob Greene*

It has been almost 10 years since my friend paid for his girlfriend's abortion. I was talking with him about it the other night; I was surprised that it was still on his mind.

He recalled the most minute details of the day the abortion took place; talking with him about it, it was almost as if he thought it was happening again right now. When I asked him why he still dwelled on it, his answer was simple:

"I've never had a child. That may be the closest I ever come to having a child."

This was not the first time I had encountered this phenomenon: the young male thinking long and hard about an abortion that is part of his past. It seems to go against the grain of the conventional wisdom about men and abortions—the conventional wisdom that says when a man hears his girlfriend is pregnant, all he wants to do is end the pregnancy and never think about it again.

So I sought out a man who I had heard was an expert on the subject of males and abortion. He is Arthur Shostak, professor of sociology at Drexel University in Philadelphia. He has interviewed hundreds of men whose wives or girlfriends have had abortions—and what he has discovered is worth taking note of.

"Most of the men I talk to think about the abortion years after it is over," Shostak said. "They feel sad, they feel curious, they feel a lot of things; but usually they have talked to no one about it. It's a taboo. It's not accepted for them to talk about it.

"With the female, the stress is so well-known—what it will do to her reputation, what her family's reaction will be, etc. Men are so used to providing support for females during the time of an abortion that no one ever thinks about what the men are going through."

And what are they going through?

"Well, they don't think of it as just an operation that their wives or girlfriends are having," Shostak said. "They think of it—even if they don't always describe it this way—as a loss of fatherhood.

"I have had men break down and cry when I was interviewing them. They've never spoken about it before. There's been no catharsis for them. They speculate; they say, 'What would have happened if I had told her that I wanted this child?'"

In the great majority of cases, Shostak said, men are not truly asked their opinion about whether an abortion should take place. Instead, a woman will

## APPENDIX F

inform a man that she is pregnant—and, at the same time, announce with sadness that she is going to have an abortion.

“It’s an incredible message a man gets when that happens,” Shostak said. “Finding out that his girlfriend is pregnant is often the first real evidence he has of his virility. And what the woman is telling him is: ‘You can be a father. You can be a father *with me*. We are expecting a daughter or a son. But by the way, we’re not going to have that daughter or son. We’re going to have a \$180 termination.’”

Shostak said that over the years women have become used to the emotionally correct ways to behave when they believe an abortion is necessary:

“The woman knows that, regardless of how sad she is about the abortion, she must go on with ‘business as usual’ after it is over. Often she gets support from friends and family members; there is counseling available.

“With the man, though, if he wants to shed a tear, he had better do it privately. If he feels that the abortion has denied him his child, he had better work it through himself. So he seals it up inside himself. He does not share his pain with a clergyman, a minister; he does not share it with a close male friend while they’re hunting in a duck blind. It just stays with him. And it stays for a long time.”

The feeling among many people that men just don’t have any part in the emotional anguish of an abortion is “a profoundly erroneous and anti-male assumption,” Shostak said.

He said that the soap-opera stereotype of the man who learns his girlfriend is pregnant, then runs away without providing any financial or emotional support is not often accurate—at least in the cases of the men he has spoken with.

“Of course, the men I talk with are by definition more involved than some other men,” Shostak said. “By the very fact that they are willing to talk to me, that’s clear. I am not really dealing with guys who are immature, sleazy types.

“But the overwhelming message I get is that these men support their women in whatever the women want to do. The men don’t even think about wielding any ‘veto power’ over the abortion, even when they are opposed to it. Once the women have decided that the abortion is what they want, the men do whatever they can to make it as easy as possible. They don’t discuss whatever pain they might be feeling.”

Shostak said that one of the most telling examples of how men feel about abortions came when he was interviewing a man who had supported his girlfriend at the time she had the operation. Shostak was questioning the man, and during the questioning he mentioned the word “fetus.”

“The man’s eyes filled up with tears,” Shostak said. “He said to me, ‘It’s not a fetus we’re talking about. It’s my son. He would be three years old now.’”

## IMPORTANT NOTICE

THE HUMAN LIFE REVIEW accepts regular subscriptions at the rate of \$15 for a full year (four issues). Canadian subscribers and all other foreign please add \$4 (total: \$19 U.S. currency). Please address all subscription orders to the address below and enclose payment with order. You may enter gift subscriptions for friends, libraries, or schools at \$15 each.

### How to order previous issues:

This issue—No. 4, Volume 9—is the 36th issue published to date. You may order additional copies at the regular \$4 rate (10 or more copies at \$2 each). We also have a limited supply of back issues (#1 through #35) available at \$4 per copy: we will pay all postage and handling.

**Bound Volumes:** we now have available Bound Volumes (in permanent, library-style hard-cover editions, with gold lettering, etc.) of the first eight years (1975-1982) of this review. *All volumes are completely indexed*, and are available postpaid at \$30 per volume, or all eight volumes for \$200.

**Special Notice:** The following publications are available from the Foundation: the reprint of President Ronald Reagan's article "Abortion and the Conscience of the Nation" (\$1.00 each, bulk prices for 200 or more copies on request); Joseph Sobran's *Single Issues* (\$12.95 each); Ellen Wilson's *An Even Dozen* (\$10.00 each); and John Noonan's *A Private Choice* (\$11.95 each). Order direct from the Foundation at the address below. Please include payment-in-full with order; we will pay all postage and handling.

*Address all orders to:*

**The Human Life Foundation, Inc.  
150 East 35th Street  
New York, New York 10016**

