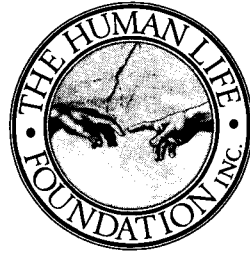


the HUMAN LIFE REVIEW



SPRING 1997

Featured in this issue:

William Murchison on Who's Lord and Master?

Ellen Wilson Fielding on Fear of Cloning

Faith Abbott on Law and Disorder

Mackubin T. Owens on Mothers in Combat Boots

Denis Murphy on Ireland Faces a "First"

Alexandra Colen on . . . Some Post-Christian Realities

Wesley J. Smith on . . . "Inevitable" Assisted Suicide?

Don't Bet Your Life

Hon. Henry J. Hyde on The Acceptable Time

Also in this issue:

Alice Thomas Ellis • James Le Fanu • John Leo • Mike Royko

Paul Greenberg • Jean Bethke Elshtain

Published by:

The Human Life Foundation, Inc.

New York, New York

ABOUT THIS ISSUE . . .

. . . this Spring finds us confronting a “new” life issue: in February, the world said “hello” to Dolly, the cloned sheep, and we join the debate over the morality of human cloning, should that indeed be (as expected) next. Contributing Editor William Murchison and Ellen Wilson Fielding (a former Contributing Editor) lead the issue with their views on the cloning controversy and how it relates to the other life issues—partial-birth abortion and assisted suicide among them.

Wesley Smith, whose article on assisted suicide is on p. 61 (“‘Inevitable’ Assisted Suicide? Don’t Bet Your Life”), has a new book just coming out: *Forced Exit: The Slippery Slope from Assisted Suicide to Legalized Murder*, published by Times Books/Random House. It should be at your local bookstore by early June. Another excellent source of information on assisted suicide and euthanasia is the International Anti-Euthanasia Task Force, directed by Rita Marker. They can be contacted at P.O. Box 760, Steubenville, OH 43952 (or at their Web site, www.iaetf.org).

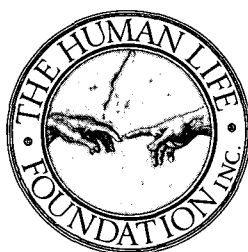
We welcome a new Irish correspondent to our pages: he is Denis Murphy, a young writer who reports (“Ireland Faces a ‘First,’” p. 45) on the current Irish pro-life scene.

We thank Alice Thomas Ellis for permission to reprint her poignant column from the London *Sunday Telegraph*, and the *Telegraph* for allowing us to reprint Dr. James Le Fanu’s companion column.

Many readers will recognize the continuing echoes of the *First Things* debate (see William Murchison’s “‘Consensus’ or Bust?” in our Winter, 1997 issue) in Jean Bethke Elshtain’s *New Republic* column. For a copy of the *First Things* symposium (*The End of Democracy? The Judicial Usurpation of Politics*, November ’96), contact *First Things*, A Monthly Journal of Religion and Public Life, 156 Fifth Avenue, Suite 400, New York, NY 10010.

As usual, we thank *The Spectator* for their devilishly amusing cartoons, and we wish all our readers a renewing Spring season.

MARIA McFADDEN
EXECUTIVE EDITOR



the HUMAN LIFE REVIEW

Spring 1997

Vol. XXIII, No. 2

Editor

J. P. McFadden

Contributing Editors

Faith Abbott

John Muggeridge

William Murchison

Consulting Editor, Europe

Mary Kenny, London

Executive Editor

Maria McFadden

Managing Editor

Anne Conlon

Contributors

Lynette Burrows

Ellen Wilson Fielding

Elena Muller Garcia

James Hitchcock

Erik von Kuehnelt-Leddihn

William McGurn

Mary Meehan

Wesley J. Smith

John Wauck

Articles Editor

Robert M. Patrick

Production Manager

Ray Lopez

Circulation Manager

Esther Burke

Publishing Consultant

Edward A. Capano

Introduction 2

J. P. McFadden

Who's Lord and Master? 7

William Murchison

Fear of Cloning. 15

Ellen Wilson Fielding

Law and Disorder 23

Faith Abbott

Mothers in Combat Boots 35

Mackubin T. Owens

Ireland Faces a "First" 45

Denis Murphy

Some Post-Christian Realities 53

Alexandra Colen

"Inevitable" Assisted Suicide?

Don't Bet Your Life 61

Wesley J. Smith

The Acceptable Time 75

Henry J. Hyde

Appendices 79

Alice Thomas Ellis

James Le Fanu

John Leo

Mike Royko

Paul Greenberg

Jean Bethke Elshtain

Published by THE HUMAN LIFE FOUNDATION, INC. Editorial Office, 215 Lexington Avenue, 4th Floor, New York, N.Y. 10016. The editors will consider all manuscripts submitted, but assume no responsibility for unsolicited material. Editorial and subscription inquiries, and requests for reprint permission, should be sent directly to the editorial office. Subscription price: \$20 per year; Canada and foreign \$25 (U.S. currency).

© 1997 by THE HUMAN LIFE FOUNDATION, INC., New York, N.Y. Printed in the U.S.A.

INTRODUCTION

THE ADVENT OF DOLLY, the cloned sheep, produced a rather unusual reaction: far from being hailed as another “scientific breakthrough” it was met mainly with puns and jokes that reflected a general uneasiness (e.g., “Clone, but no cigar”) about what this not-unexpected “development” would end up meaning for us humans. There seemed to be few doubts that the now-available “technology” *would* be applied to humans in due course, despite any efforts to prevent it—the *credo* of “Science” remains “If it *can* be done, it *will* be done.”

In our lead article, Mr. William Murchison sees the “swelling irony” of it all: “On the one hand,” he says, cloning is our impulse to “coax new life into being” while, on the *other*, with abortion “the impulse is to violently extinguish new life”—Which do we want, life or death? The dilemma is a predictable by-product of the Cult of Choice: *choosing*—just “choosing to choose”—has become the great *good*, never mind *what* is chosen. That mindset confers frightening powers on the chooser. As Murchison puts it, the dying Roman emperor who lamented “I fear I am becoming a god” has “soul mates aplenty” in our own time—he argues that cloning ought to make us ask the unavoidable question, “Which is to be master—God or man?” Because “that *is* the choice” (*amen*).

So Murchison thinks it fitting that, at the very time Dolly made headlines, her competition was the renewed uproar over “partial birth” abortions—“life questions” are now at the center of events, even of the “news”!

But of course the power to clone is not just another passing story: its rejection *or* use must be rationalized, and that process has hardly begun. We couldn’t resist asking our longtime colleague (and erstwhile contributing editor) Ellen Wilson Fielding what *her* first thoughts were—Ellen can always “cool” a vexed question (Malcolm Muggeridge once described her as “The Jane Austen of the Permissive Society”)—and as usual, she did not disappoint us.

As Ellen is quick to point out, human cloning is another obvious candidate for the Hard Case Syndrome—the same “reasoning” that brought us legalized abortion on demand, not in the few “hard cases” but by the millions—it was also applied to the whole complex of moral issues raised by *in vitro* fertilization: Who would deny “infertile couples” their one chance for parenthood? It is already being used to advance cloning, albeit *via* some grotesque notions, such as the possibility that a mother whose child was killed in an accident would be able to “bring her baby back again.” Then there is the “anti-abortion” argument:

cloning might well avoid producing a “fetus” with the kind of genetic “imperfections” that cause abortions! As Ellen says, “Hard cases don’t just make bad law; they make fuzzy thinking.”

Indeed, the bizarre possibilities for cloning will no doubt soon present “the law” with unimagined dilemmas—but then legalized abortion has *already* done that. Consider the “unthinkable” case that Faith Abbott came upon while leafing through a Canadian magazine: an Ontario woman, the mother of two born children, managed the feat of shooting her third child in the head while he was still in her womb. Two days later—alone at home—she delivered the baby, but later at the hospital doctors discovered the “lead pellet” lodged in his brain, and Mom was charged with attempted murder (even though Baby remained amazingly healthy).

Now consider this: the first judge to hear the case threw it out, on the solid ground that the woman didn’t break any law—in effect, she’d merely botched an abortion! And in Canada, the unborn have no rights, because they are not “persons”—as the Toronto *Globe and Mail* editorialized, “When it comes to the unborn, Canada is a lawless country.” Not surprisingly, the case soon became headline news across the country—it’s quite a story and, in her usual style, Faith takes you with her as she digs out the facts.

But she soon discovered that the Canadian case was not so unique as first supposed—there is a similar case down in Florida, involving a woman who also managed to shoot her baby in the womb. But there are big differences: her baby girl died two weeks after birth, and it seems that, despite *Roe v. Wade*, the U.S. may not be entirely lawless for the unborn; the mother has been charged with both murder and manslaughter, while “civil libertarians” demand that both charges be thrown out—the case may reach the Supreme Court—it’s all as confusing as it is fascinating. Then there’s the case of the “baby-faced” New Jersey teenagers who allegedly killed their newborn son, for which they could face the death penalty . . . but we’ll let Faith take you through it all herself, she’s dug out an awful lot that you’ve surely not read in your local newspaper.

Next we shift to a quite different bizarre situation—or *do* we: abortion has obviously disrupted the courts, has it done likewise to our military? Mr. Mackubin Owens sees just such a connection: the “choice” of unrestricted abortion was without question a primary goal of ideological Feminism, which continues to expand its demands. A current one is: Why shouldn’t women “be all they can be” in the military—why shouldn’t they play *combat* roles if they choose to do so? Our generals and admirals *know* why not, but it is politically incorrect to *say* what both history and common sense tell us. What bothers Mr. Owens is that, whereas Feminist myths may be relatively harmless in some *other* areas, they can *destroy* the unique “culture” of the military, where both “rights” and “choice” must be subordinated to the brutal realities of warfare. And so Owens doggedly piles up the facts, and explains what all the evidence clearly shows, in the hope

INTRODUCTION

that he can contribute to the victory of common sense before it's too late. The most amazing possibility is, it may *already* be too late for us, given the hen-pecked spinelessness of both our military brass *and* their political bosses—we may manage to lose some future war *now*.

But even if our glorious armed forces are surrendering to “change,” surely the Ould Sod will hold firm? Alas, Ireland seems off on a binge, downing draughts of modernity in big gulps: the old battle-cry “Up the Pope” has been replaced with “Out the Church”—drugs and sex are speeding towards “advanced nation” levels, divorce is *in*, can abortion be resisted much longer? In fact, Ireland’s “first” abortion has spawned turmoil in the once-tight little island’s politics, disrupting the parties and raising the fearsome prospect of another national referendum on legalization. Should that happen, the “politically-correct” position of Dublin’s dominant Establishment will of course be strongly *in favor*.

How do we know? Well, because we asked Mr. Denis Murphy, a young Dublin writer, to tell us all about it, and he has responded with an in-depth rundown of the current scene. Actually, he makes it sound as if Ireland has caught up with *us* on the politics of it all: its “leaders” want to duck the issue, the media shamelessly indulge the kind of pious bias (i.e., “personally opposed, but . . .”) we know so well—reading Mr. Murphy’s vivid account is rather like watching a TV re-run. But the similarities may end should there *be* a new referendum: it is by no means certain that a majority of the Irish can be talked into abandoning the unborn.

One media “talking point” is that Ireland must “catch up” to Europe on easy divorce, abortion, the lot. And in fact there *is* a lot going on in continental Europe that its off-shore relatives have so far been spared. At least we haven’t heard of any Irish horror comparable to the one that currently grips Belgium—shocking is much too mild a word to describe the tangled story our friend Sandra Colen (a.k.a., Mrs. Paul Belien) relates next.

You will note that the writer is not some muckraking journalist, but an elected member of Belgium’s parliament; thus, when she writes about involvement of “the authorities” in the perverse sex scandals, we must assume that she knows whereof she writes? Indeed, it would be virtually impossible to *invent* such atrocities—as Faith Abbott would agree, they would be too much for any “Law and Order” plot. So we won’t even attempt to summarize Sandra’s story, which she relates from the unusual perspectives of both mother (of five young children) and politician.

With some small relief, we move from devilish crimes to *avoidable* aberrations. If the opinion polls are right, the “assisted suicide” craze currently enjoys public support. But as Mr. Wesley Smith makes clear, such “popular” support can quickly whither when the facts become public. The problem is the same one Bill Murchison identifies: the ballyhooed notion that “choice” is good, no matter *what* is chosen—Why not let a suffering, terminally-ill person choose a “merciful”

demise? That bogus proposition has fueled the various state *referenda* to legalize “physician-assisted suicide”—it produced strong initial support in both Washington and California—but as Mr. Smith explains, opponents were able to win solid victories by focusing the debate on the dangers of legalizing euthanasia.

Yet the nationwide campaign for legalization goes on, with strong media support, not least a stream of “compassion” pieces in well-known magazines, from *The New Yorker* to the *Ladies Home Journal*. All this *despite* the “pioneering” example of Holland, where the *de facto* legalization of “mercy killing” has promoted a slaughter of the defenseless that rivals Nazi crimes. But it will be defeated, Smith argues, if opponents can convince their fellow citizens that “our own lives may *depend* on victory.”

We conclude our articles with what we trust you will agree is an unusual speech from a politician speaking on the floor of the U.S. Congress—it has been described as a “soaring sermon” on the sin of abortion, in particular the ghastly “partial birth” executions—but then the speaker is the Honorable Henry Hyde, for whom such an oration is not unusual. We admit that it isn’t really an article at all, but we just couldn’t treat as mere additional commentary what goes to the heart of the matter. It won’t take you long to read—it’s quite short—but it may be a long time before you forget it.

* * * * *

Our appendices to this issue are fewer than usual—only a half dozen—but you may find them both longer and heavier than the usual. *Appendix A* includes two articles that ran in Britain’s leading “quality” paper, *The Sunday Telegraph*; both are about cloning. The first, by Alice Thomas Ellis (a popular novelist), is a very personal view of what might be called the gloomy, even morbid aspect of cloning—the intimations of immortality it can conjure up in the best of us, for understandable reasons. Mrs. Ellis had a son who died young, and she can’t help thinking . . . thoughts she knows she must reject. Then Dr. James Le Fanu, a distinguished “expert” on medical affairs, puts the seemingly-sudden appearance of Dolly into the proper long-term perspective, which turns out to be not very revolutionary at all.

In *Appendix B*, Columnist John Leo puts the latest abortion uproar into perspective: the pro-abortion “leader” who publicly admitted lying about “partial birth” abortions in fact admitted nothing that hadn’t been known before; Mr. Leo calls it just another part of the “dishonest campaign aimed at keeping the truth from the American people.”

Appendix C is a double-barrelled blast from Mike Royko, the tough-as-Chicago columnist who is certainly not known as a “pro-life” propagandist. But like Mr. Leo, Royko too is incensed by the deceitful tactics of the “pro-choice” advocates *and* the fact that “the media have bought and resold” obvious lies not only on abortion but also AIDS and other politically-correct issues. Since he

INTRODUCTION

couldn't pack all his anger into one column, Royko did a second one—you get both of them here, uncut (we'd need the Fire Department to do that!).

We have another double-column commentary in *Appendix D*, this time by Paul Greenberg, who might be called President Bill Clinton's "Hometown Columnist"—he writes from the *Arkansas Democrat-Gazette* in Little Rock. Greenberg also zeros in on the partial-birth controversy, but you might say he does it with a high-powered rifle as compared to Mr. Royko's shotgun. What's most interesting is, Greenberg wrote the first column just a day or two *before* the pro-abortionist's lies made headlines, so you get a before-and-after view that shows how little difference the "confession" actually made in the *facts* of the case.

We conclude with what editors like to call a "think piece" (*Appendix E*), fittingly written by a University of Chicago philosophy professor, Jean Bethke Elshtain. Although she begins with the Oklahoma City bombing, and ranges widely over deep and weighty matters, her fundamental (if she'll pardon that word) point concerns what she considers unjust treatment of the anti-abortion movement by commentators who are supposed to be intellectually honest. If that sounds stuffy, it's not *her* fault, as you will see for yourself if you will give her argument the attention we think it deserves. And, considering that it first appeared in the strongly pro-abortion *New Republic*, we think you will agree it belongs in our continuing record of the greatest moral issue of our time, which has now run to 90 issues. Lord willing, the 91st will be along in due season.

J. P. MCFADDEN
EDITOR

Postscript; Wednesday, April 30: last evening was our deadline; we sent final copy to the printers, which is called "putting the book to bed." This morning we woke to find Mike Royko's obituary in all the papers. We never met him, nor, before this issue, had we ever published one of his columns—we had never thought him particularly associated with "our" abortion issue. So we were surprised to see the *two* columns we have reprinted here, which are among the very best we've seen on the "partial birth" abortion controversy. But then Royko loved controversy, and in this one his ire was provoked by (as he put it) "the willingness of the press to accept the lie and pass it along as fact"—he maintained the old newspaperman's romantic notion that a reporter's *trade* was writing facts. We honor him for that, in a manner we imagine would please him: we'll break our deadline to get his *R.I.P.* into this issue.

Who's Lord and Master?

William Murchison

"When I use a word," Humpty Dumpty said, in rather a scornful tone, "it means just what I choose it to mean—neither more nor less."

"The question is," said Alice, "whether you can make words mean so many different things."

"The question is," said Humpty Dumpty, "which is to be master—that's all."

—Lewis Carroll

The question underlying all controversies over human life is simple enough. It is the question of sovereignty: nothing more, nothing less than that.

In matters concerning life, who has the sovereign power to do this thing or that thing or something else entirely? Who desires such power? How is sovereignty being exercised at the present moment? Should it be enlarged, shrunk, rechanneled, redirected? If so, how, and by whom, and how quickly?

The thick, hazy atmosphere of political science overhangs the discussion. As to which there should not be the slightest surprise, politics having taken root at the center of all major human concerns, not excluding family and religion.

The headlines bear out all of this. Life questions are at the center of recent events. Watch how they play out—namely, as sovereignty questions.

Take the top two examples: cloning and partial-birth abortion.

Cloning popped into the news in February. One day the topic was as far off the table as the Samoan inflation rate. Next day it was everywhere. Dr. Ian Wilmut, an embryologist at the Roslin Institute in Edinburgh, had cloned an adult sheep named Dolly, thus achieving the supposedly unachievable. Imaginations caught fire. The sheep's woolly visage turned up on magazine covers around the world. "Hello, Dolly," said *Time*, with a hearty *heh-heh-heh*.

As a topic of conversation, sheep-cloning mainly interests sheep-fanciers. These see the possibility of genetic leaps forward. "Through genetic engineering," as the *New York Times* summarized the matter, "animals could be created to produce pharmacological proteins like the clotting factor that hemophiliacs need. It might also pave the way for widespread transplantation of animal organs into humans."

William Murchison, an author and a nationally-syndicated columnist from the *Dallas Morning News*, is also a popular speaker on a variety of current religious and cultural issues.

What happens to sheep is, of course, for most people, a secondary question. How about humans? What happens to them? With humans the question rates high in interest.

Could humans be cloned? (Conventional Answer: Yes, one of these days; by some means.)

Should humans be cloned? (Spontaneous Answer: Mmmmmmmmm . . .)

These same questions continue to titillate, and no wonder: they are sovereignty questions. Sovereignty questions address the premises that underlie existence; they invite our inspection of foundations in order to check architecture, general condition, and prospects for longevity.

Let me come back to these matters after mentioning partial-birth abortion, the operation in which an abortionist partly—mostly—delivers a fetus. No account of such a procedure is necessary, thanks to the exertions of pro-life advocates who have chosen the issue as a means of focusing public attention on the horror of taking unborn life. Had you visualized, or even conceived of, brain-suctioning before the issue of partial-birth abortion arose? That was the point. It is such a strong point that about three in every four Americans, according to the polls, believe partial-birth abortion should be outlawed by Act of Congress.

Partial-birth abortions returned to public consciousness about the same time that Dolly the sheep *baahhhhed* her way into the headlines. Ron Fitzsimmons, executive director of the National Coalition of Abortion Providers, cloned or in some other manner developed a conscience. The conscience whispered to him peremptorily. Confess, it said, how you lied by representing the number of partial-birth abortions in the United States as much smaller than it actually is—and by depicting the procedure as involving far fewer healthy mothers and healthy babies than is actually the case.

Fitzsimmons complied with this inner prompting. In *American Medical News*, he confessed to having “lied through my teeth.” The lie, tendered in conversation with a *Nightline* reporter, never actually made it on the air. That he said what he said nevertheless made Fitzsimmons “physically ill.” A great public furor erupted as the supreme sovereignty question of the past 25 years—abortion—churned into view once more, and in a particularly ghastly way. Editorials and columns spewed forth, and hands were wrung.

We have here two distinct matters, you would suppose—cloning and abortion. What common denominator links them? Sovereignty—what a federal jurist I was chatting with at lunch the other day calls “the question of who decides.” It is no wonder that cloning and abortion transfix and

absorb; that there is no turning away, even when we most want to turn away. We scrabble around the foundations of what we know as humanity—the thing to which we belong by birth and inheritance. We are no less transfixed than terrified. We would not have thought, 30 years ago, to see such sights—half-born babies, humanly engineered life forms. Here they are anyway.

Conventionally conceived, sovereignty pertains to the power of the state: who wields it, who wants to, who deserves to, and with what restrictions, what limitations. Such matters have occupied some of humanity's most distinguished thinkers. Sovereignty exists of course outside the political context: in churches, in schools, in the workplace, on the playground even. Humpty Dumpty's famous question—"Which is to be master?"—is grave and important, but it need not send chills of apprehension up the spine. The human race has a long experience of tackling the question, and not always with disagreeable effects.

The abortion and cloning questions are of another order—a more elemental one. Confronting them, in the silence, and to our sudden terror, we rub elbows with God. This was not what we had expected at all, and at a discreet moment we reach for the brandy bottle.

Abortion and cloning amount to conferring on particular humans a status that can be described in just one way: as quasi-divine. "I fear I am becoming a god," lamented the dying Roman emperor, who has soul mates aplenty in the 20th century.

Cloning and abortion are in one sense at polar extremes. While some assert the right to kill, others assert the right to create—or, at all events, the possibility of exercising that right, should science substantiate it (which—so the argument proceeds—we must allow science at least to attempt).

Consider the two together, and a great, swelling irony strikes us in the face. On the one hand—with cloning—the impulse is to coax new life into being. On the other hand—with abortion—the impulse is to violently extinguish new life. Which do our pseudo-sovereigns want, life or death?

Wrong question. What the pseudo-sovereigns want is more sovereignty—the sovereignty that makes their brains tingle and their hearts swell with desire. They would be master. For what purpose?

For the purpose of, well, ah—for the purpose of being master. For the purpose of—the popular phrase springs to mind automatically—*choosing*.

Choosing what? Choosing to choose. Choosing to choose to choose: on and on forever, like the mirror monarchs in Macbeth—Banquo's interminable

descendants. Never before in Western culture has a self-validating right been so widely and firmly established as the right to choose. To the many who hold by it, choice needs no proofs or external reference points. Choosing is good because choosing is good because . . .

Theoretically the right to choose deals smartly with such sovereignty questions as arise in the controversies over cloning and partial-birth abortion. "Controversies," indeed! Why, under any resolution of the controversy, let the individual choose. Shall I be cloned? Shall I clone others? Why not abortion through brain-suctioning and extraction if that is what mother and doctor judge to be in their best interest?

Both positions find forceful advocates.

Thus the New York *Times* editorial page on partial-birth abortion: "The great majority of [these] are done before 24 weeks of gestation—in other words, in the second trimester—before the fetus is viable outside the womb. Abortions performed in that time frame are legal and constitutionally protected from undue state intrusion, which would seem to preclude banning an accepted medical procedure."

Thus Sen. Tom Harkin of Iowa on human cloning: "What nonsense—what utter nonsense—to think that we can hold up our hands and say, 'Stop.' Human cloning will take place, and it will take place in my lifetime. I don't fear it at all. I welcome it."

Harkin and the *Times* have answered to their own satisfaction Humpty Dumpty's question—"Which is to be master?" The individual is to be master. Loudly the sovereignty question snaps shut. That's it! Here's the answer! The answer is, choose.

No need, under these circumstances, for further poking around the foundations of life, asking what responsibilities attach to life's acquisition and possession. Such questions, as Harkin and the *Times* imply, pertain to older, more uptight eras than this one. Dust and cobwebs adorn these questions. Cough, *wheeze*.

Just one trouble drapes itself menacingly around this line of reasoning: millions *resist* it. According to a *Time/CNN* poll, 93 percent of Americans oppose the cloning of humans. For that matter, two-thirds opposed the cloning of animals. A gut reaction, soluble by time and discussion? Maybe. And maybe not. As for partial-birth abortion, polls consistently show three-quarters of Americans opposed. When the U.S. House, in March, voted to ban partial-birth abortion outright, it did so by *more* than the two-thirds majority necessary to override a presidential veto.

Whom to blame—or credit? The Pope and Mother Teresa? G. Gordon Liddy? Rush Limbaugh? The dense ignorance of the unwashed masses?

Much more is surely involved here. The task which the pseudo-sovereigns have set us—addressing foundational questions like who's really in charge of this human-life business—may be having an educational effect. *We're* the sovereigns, beyond whom no appeal lies? Don't you believe it, millions mutter. There are limits, buried deep in human psychology and spiritual understanding. We may accidentally have stumbled on those limits.

Partial-birth abortion *seems* to us wrong. Why? Do the official explanations fail? They fail resoundingly, as it happens.

In partial-birth abortion a discernibly human form appears. There are legs, like our own. By these legs the doctor yanks and tugs this form from the protective womb, as if readying it for full existence. The form has a head, like our own heads. Into this head (while still in the womb) the doctor inserts a sharp and deadly surgical instrument.

The form has brains, like our own brains. These the doctor removes by suctioning. The head collapses. Dead on Arrival, as planned, the form enters the world: entirely unlike the rest of us.

The dismemberment of human fetuses of varying ages, the majority quite small and relatively undeveloped, is part of the lore of the right-to-life movement. The public has in large measure been unmoved. Abortion was a constitutional right that had somehow to be sustained because it affirmed women's womanness. Qualms were choked down. The things were after all quite tiny, were they not? Not unlike tadpoles? Who would miss a tadpole?

The brilliance of homing in on partial birth is in the way it illuminates the life question. Half-way out of the womb, and alive, with feet and head and brains, the form is . . . is . . . is what? Not a tadpole surely? Not at that stage of advancement. And with brains! Brains and what else? Genes, certainly. What of—now voices fall—what of a *human soul*?

You ask these questions, and others, after an interval of poking around the circumstances of existence. You can submit that questions of this caliber could and should have been asked years ago. The operative point is that questions of this caliber are being asked *now*, with urgency.

And not simply because of partial-birth. Cloning—15 years ago it was a comedian's gag line, so extravagant was the notion of replicating human life—works the same effects. This is notwithstanding that cloning, as noted above, is about creation, whereas abortion is about destruction. What a great life-affirming thing cloning might be considered (and certainly is, by many). Yet at least as deep a form of unease surrounds it as surrounds partial-birth abortion. More Americans, as we say, oppose this form of

creation than the form of destruction called abortion.

Care to see how the wind really blows? Watch Bill Clinton, that frailest of political reeds. Hardly had Dr. Wilmut's experiment hit the headlines than Clinton moved to ban the use of federal money for cloning. The president went still further, urging Americans to resist voluntarily "the temptation to replicate ourselves" (*because*, he added, "Each human life is unique, born of a miracle that reaches beyond laboratory science"—this from the man who, to placate his clamorous and vote-rich feminist constituency, vetoed last year's congressional ban on partial-birth abortion).

Two Republicans, Sen. Kit Bond of Missouri and Rep. Vernon J. Ehlers of Michigan, have introduced bills that would ban human-cloning research outright.

Dr. Wilmut himself, resistant as a scientist to banning anything, told a senatorial committee he had "not heard a suggested application to clone a person that I am comfortable with."

Why such squeamishness, such reluctance to carry logic to its natural conclusion? Is more involved, perhaps, than mere squeamishness? Terror, perhaps? Terror and dread and awe and, with it all, a certain reverence?

In the attempt to shut down the very possibility of human cloning there are hints to this effect. The immediate assumption is that humans are ill-equipped to engineer human life—a thing for which more than ordinary respect is claimed. With partial-birth abortion the scandal proceeds from the word pictures that accompany the discussion: the suctioning of brains having peculiar power to startle and, just as often, to disgust. Were human brains designed for suctioning? What *was* the design? What respect does it, *should* it, enjoy?

In unsuctioned brains, questions like these revolve faster and faster, as perplexities multiply. Here our civilization and its pursuits have dragged us, to the core idea of life: what it is, what we do with it. At the very core of the core, like a diamond, gleams the sovereignty question. Which is to be master? At what cost?

Smoke issues from a nearby mountaintop as the questions reverberate; amid rumbling and shaking, a voice can be discerned: "I am the LORD thy God. Thou shalt have none other gods but me."

The question of human life is religious at bottom. The sovereignty question is religious. If there is God, God rules. No other possibility presents itself. What God has made requires respect. He has made life? Life, then, is to be lived and upheld and protected within the context of the Grand Alliance of God and man, expressed through biology. The sovereignty

question is as old as *Genesis*. This hardly makes it less formidable and provocative. It arises when the trustees of life, men and women, take in their hands the major decisions pertaining to life, then decide on the basis of self-interest. Or what *looks like* self-interest at a given moment.

Abortion is the decision to relativize life by farming out to individual humans, every human in fact who is also a woman, the power to destroy. Not to destroy in every context, because that would be lawless, but certainly in that most important of contexts, where life begins.

Cloning is the decision not to take life but to make it: and not just to make it, but to make it somehow better than it would be without human intervention. The implements for improvement seem normal enough—genes. Genes are a part of creation. What is the problem here? Could the problem be that, in this instance, a purely human dynamic, fueled by human hopes and skills, takes over a process regarded, even today, as divine in origin and operation? Cloning, like abortion, severs the link between God and life. The life is God's in only the most peripheral sense. Man has become God—the lord of life. And man worries. And frets.

It is a guess—a guess only. I state it anyway. My guess is that the closer we draw to the center of life—the womb and the gene pool—and all the great secrets hidden there, the more pronounced our recoil from what we see. Why? My guess is that we feel like trespassers skulking beside a mysterious, privately owned lake, fearing the landowner will turn up any minute and evict us from a place we have no right to be.

The power to make broken life well and strong, as doctors do, using God-given skills, is one thing. The power to destroy life, the power to create it—these are powers of a different sort, designed for a different order of being.

My guess is that this knowledge is imprinted, if sometimes in vague characters, on hearts and minds. That dread and awe of which I spoke earlier could be called consequences of the knowledge. There was a time when religious conviction informed our interpretations of whatever we observed in life. As that conviction wanes, we no longer see things as we formerly saw them—as marked off and bounded by the law of God. An aborted baby? The old religious understanding caused hands to be thrown up in horror. Creation itself had been violated. The new secular understanding has no words of horror to speak about abortion. Until . . .

Until human brains come whooshing through a tube? In *Roe v. Wade* there was no judicial discourse concerning human brains; the focus was on sovereignty—on deciding who decides. In partial-birth abortion, lofty theory

becomes gritty fact. Seeing what sovereignty means, many start to dislike its costs, and to wonder what other costs are in store, as, for instance, with human cloning.

The “mad scientist”—manipulator of life processes—is a traditional and well-hissed villain, less for imperiling blonde damsels than for claiming a sovereignty that clearly belongs elsewhere. Where? The question cries out more and more urgently for an answer.

The moment for traditional religion to reassert its claims is surely at hand. It may be that hunger for God and His sovereignty is greater than the bureaucrats of the Church Relevant, with their Washington lobbying apparatuses and sheaves of legislative testimony, have apprehended.

Which is to be master—God or man? Not even man, it seems, is wholly comfortable with the implications posed by the choice.

But that *is* the choice.



*'I wanna gal just like the gal that
married dear old Dad.'*

Fear of Cloning

Ellen Wilson Fielding

Dolly the cloned sheep led me to search back to see just how long it's been since Louise Brown's pudgy face hit the newsstands as the first test-tube baby. Eighteen years ago I sat before a typewriter summoning thoughts on the occasion of her first birthday. What has happened to her in the meantime? Has she gone to college? found work? married?

I have no idea. Because Louise Brown was quickly joined by hundreds and then thousands of other *in vitro* babies, as infertile couples stampeded to this new technology that offered many of them the chance to have a baby that was "really," genetically theirs.

The Vatican informed the world that *in vitro* fertilization was not approved by the Church. Anti-abortionists pointed out that several eggs at a time were fertilized and the extras were dumped—rendering them early abortions. Lots of people talked about "Brave New Worlds," but within a year almost every soap opera had an *in vitro* story line, and now it is a routine if expensive stop on the fertility-treatment circuit.

All this is to explain why I had to overcome something of a "why bother?" attitude when it came to arguing against the cloning of human beings. For barring an imminent Second Coming or the immediate conversion of the world to Moslem fundamentalism, it is hard to see how we will avoid the cloning of humans just as soon as the mechanics are worked out.

Sure, President Clinton immediately announced that the United States would not fund research on cloning humans, and recommended a voluntary moratorium on such research. But within a few days, the head of the National Institutes of Health opined that he could foresee legitimate motives for human cloning, such as the desire of infertile couples for a child genetically belonging to at least one of the "parents."

A few days later the *Washington Post* (Wednesday, March 12) ran an Op-Ed piece by an Alun M. Anderson, described as editor of *New Scientist*, a weekly international science magazine based in London. Mr. Anderson offered another "hard cases" justification for human cloning designed to pluck at the newspaper reader's heartstrings: "Imagine a situation in which a woman finds her husband and newborn baby fatally injured in an

Ellen Wilson Fielding, our sometime contributing editor and author of *An Even Dozen*, writes from Davidsonville, Maryland, where she currently lives with her husband and four children.

automobile accident. Cloning could offer the opportunity to bring her baby back again."

To bring her baby back again—you would think that chillingly inept way of offering consolation to a bereaved parent would be enough to kill forever the idea of human cloning, but Mr. Anderson is probably correct at least in his optimism about the likelihood of its acceptance. For he too notes the historical analogy: "Once, artificial insemination was seen as so deeply abhorrent that its use was banned even for cattle. But the widespread public acceptance of test-tube babies shows just how quickly new technologies win hearts and grass-roots ethical approval when it touches upon the right to have a healthy child."

Let's pass over for now the "right to have a healthy child" (is that located somewhere in the Magna Carta?). Mr. Anderson correctly spots the reason why human cloning, like its "Brave New World" predecessors, will soon gain acceptance: because it is the sympathetic solution to hard cases. A couple both test positive for recessive disease-carrying traits? Prevent agonizing and test-taking and a possible therapeutic abortion by cloning one of the parents. "See," proponents will argue to pro-lifers, "we'll be *preventing* some abortions by side-stepping the chances of producing a fetus burdened with sickle-cell anemia or Tay-Sachs or other genetic diseases." Hard cases don't just make bad law; they make fuzzy thinking.

When people argue about what if anything could be done to prevent science from pursuing discoveries that might have disastrous effects on mankind, they commonly conclude by agreeing that man's unquenchable desire to know and to achieve and to improve and pursue makes us helpless to put legal or social roadblocks in the way of scientific progress. And when people argue about whether mankind can retrace certain dangerous paths—such as that which led to nuclear weapons—all but the hopelessly naive realize that attempting to do so would only leave dangerous technologies in the hands of immoral and unscrupulous powers or individuals—terrorists and tyrants.

But in a democracy, at least in the last half of this century, scientific revolutions occur on behalf of "soft" motivations like compassion and convenience (though of course some will be profiting from such motivations). This is not to criticize compassion, but to point out its central position in this century, and remind us of how consistently it has gone astray when unhitched to considerations of truth and falsehood, good and evil. There is the example of Nazi eugenics, of population control exported by

the U.S. for Third World consumption, of the Thalidomide abortions which broke open the public resistance to legalized abortion, Dutch “compassion” which began with the few mercy killings and progressed to the physician-administered deaths of thousands who did not seek release. I am not asserting that good intentions fueled all these practices, solely or even primarily, but it is amazing how much evil beneficence is capable of when let loose from a restraining moral or religious tradition or a way of thinking that recognizes taboos.

Attempting to alleviate the troubles of those who find themselves in hard cases is certainly not always wrong: most religious and moral traditions encourage caring for the less fortunate. But how one does so—and the limits placed upon the charitable desire to eradicate pain, poverty, illness and unhappiness—are the crucial questions. Notice then that an argument that *rests on* the naming of hard cases—the Indicative Argument, the one that rests on the index finger pointing, saying “look at this case, what about it? How can we deny that person relief, *whatever* it takes”—any such argument assumes the end justifies the means. And that is the most common way of arguing today about moral questions.

Remember test-tube baby Louise Brown: her poor parents, unable to conceive naturally, driven like so many infertile couples from treatment to ineffective treatment. Look at her baby pictures— isn’t it better for her to be than not to be? Life is a good, the right to life is inalienable; how can pro-lifers—of all people—be against that? The good of her existence trumps all other goods, answers all arguments. The end justifies, perhaps not any means (but if not, why not?), but certainly *these* means, for the argument given is the pointing index finger, “Look at that. Deny that if you will.”

We face a similar form of argumentation when it comes to mercy killing and assisted suicide. Look at this person in intractable pain, or in a coma, or without hope of recovery, or horribly handicapped. Isn’t anything better than that? Isn’t any way out of it acceptable? This is not the only argument possible, or the only one used, or the most sophisticated, but it is the most powerful one, the clincher. It appeals to the senses (Look! Listen! Feel!).

We need just put ourselves in another’s place. We do not need to weigh complicated considerations, or arrange a hierarchy of rights, or submit ourselves to a moral authority. So this argument can appeal to people of different backgrounds, with or without ethical authorities, and with a variety of degrees of intellectual sophistication. It causes us to sympathize, to

empathize: What could be wrong with that?

A few things come to mind. First, our sympathies are directed in a single direction. The spotlight shines on the frightened pregnant teenager and not her unborn baby; on a trapped and frustrated husband and not the wife and children about to be abandoned; on the couple anxious to have a child, and not the society whose understanding of the roles of family and sex and marriage will be changed by separating sex from procreation through *in vitro* fertilization and cloning.

Second, pointing to what we can see and feel reinforces our identification of someone's good with his comfort and pleasure—that especially American pursuit-of-happiness heresy that so bothered Malcolm Muggeridge, who stressed how much we learn and grow and love through strain and even suffering.

We look at someone in pain, anxious, afraid, unhappy, and we wish to make him happy. That is an impulse both natural and good, but to know whether we are right to act on it in a given case, we must know more, and bring more to bear on the question. C.S. Lewis has written that those we truly love we do not wish to be happy in base or contemptible modes. That is, we would not wish a sister or child or friend to be happy at another's expense—as a drug dealer or white collar criminal or even someone whose invulnerable self-absorption protected her contentment from being pricked by the needs and disappointments of others.

This shows us the way to think about abortion. That heartbreaking pregnant teenager, that stalemated single parent—why not let them choose for themselves, even persuade them to put themselves first and give their lives a chance? One compelling argument against this is the unborn's moral claims as a human being. But another compelling reason is the pregnant woman herself, since she can only be morally disfigured and spiritually stunted by encouraging her in what is, however great the temptation, an act of solipsistic self-worship. Whether she deludes herself or not, the woman who aborts her child elects herself a goddess for whose sake human sacrifice is sanctioned.

Divorce for the sake of another shot at self-fulfillment presents a similar case, though the stakes are not quite so high. The spouse who falls in love with someone else or longs to shake free of the encumbrances that hold him back from greater achievement and success, may argue that those around him can't be happy if he is unhappy. That is not necessarily true (it is astounding how happy people around us can be, even when we are unhappy!). But more to the point, it subordinates everyone else's wants and desires to that of the "unhappy" spouse.

If we were to prove scientifically that the divorced spouse and children would be happier and better off, or even that the children would be better off, if no divorce took place, what would we do? Would we say that the divorcing spouse must nevertheless be free to choose and rechoose his destiny, even if he makes the wrong choice? Or would we try to work out a formula for the greatest good for the greatest number? Or would we say he cannot seek happiness at the expense of others? Or would we decide we must first consider the purpose of marriage and family and the significance of a vow?

We resist listening to generalizations about marriage and family and babies because we have fallen out of faith in generalizing as a road to truth, or a guide for conscience. That vows should be kept is a generalization. That children should have the benefit of two parents is a generalization. That a husband or wife may really, really, really want to take back that vow and take leave of an unhappy situation seems much more insistent a piece of reality. My pain, my need seems stronger, larger, “realer” than someone else’s. It has the force of the Indicative Argument: Look at it! What are you going to do about it?

So human cloning is a foregone conclusion. We do not, in our era, have the common, accepted philosophical framework for arguing against it. Though most of us still believe in God as individuals, we no longer publicly acknowledge His authority, His right to tell us what to do. (Contrast the public prayers of a president as recent as Franklin Delano Roosevelt, for example, on the occasion of D-Day, with our sparse public prayers today, and see the difference in the degree of humility—and FDR was not a humble man! But his religious rhetoric was mainstream: it recognized that God is in charge, that He knows what’s right, and that He will tell us what to do. Today’s public prayers are closer to petitions filed before the Divine Welfare Bureau.)

If we must do without a religious consensus on these modern questions, can we look to a united front informed by our recognition of our duties to a common good? But we do not really trust arguments about the common good unless they very specifically and directly include us: anti-crime measures or anti-drug campaigns, for example, can easily be brought down to the individual level. Anything like 18th-century French political philosopher Louis de Bonald’s social argument for intact families would strike most of us as coldblooded and impersonal (but can it easily be denied?):

The man, woman, and children are indissolubly united not because their hearts must take pleasure in this union—for then how would we answer those for whom

this union is a torment?—but because natural law makes it a duty for them, and because universal reason, from which this law emanates, has founded society on a base less fragile than the *affections* of men.

What does it matter, after all, if a few individuals suffer in the course of this transient life, as long as reason, nature, and society do not suffer? And if a man bears with regret a chain he cannot break, does he not suffer at all moments of his life, from his passions which he cannot subdue, from his inconstancy which he cannot settle. . . .

Even a modern traditionalist blanches a bit at the bracing and almost brutal frankness of this now-rejected approach. What, *we* sacrifice our right to pursue happiness because abandoning our family will somehow cause structural damage to the institution of the family nationwide? Why should that concern or sway people who have not been swayed by the unhappiness of those they once swore to love and honor, or the offspring whose abject baby dependency upon them once moved them to awe? Will a nebulous “America” or “Western Civilization” do more?

And human cloning, while it is still surrounded by something of the aura of Dr. Frankenstein’s laboratory, is actually an easier sell than abortion or divorce, or perhaps even euthanasia. Like *in vitro* fertilization, it masquerades as life-affirming and, if not quite selfless, at least not selfish. Weird it may seem—making mother and daughter twins, or obviating the need for two parents in any genetic sense—but so once did sperm banks and test-tube babies and 60-year-old women giving birth.

These imaginatively odd or off-putting practices are rendered normal by familiarity, if there is no accepted way of arguing about ethics that recognizes absolutes like nature. Surely it would be easier for an infertile couple to reconcile themselves to the fast fading “weirdness” of cloning than for an unhappily pregnant woman to choose abortion and live with that act? Yet millions of women, whether nonchalantly or in great distress, choose abortion.

There are arguments against human cloning—arguments of great potency. One recognizes the sacramental power of sexual intercourse to create life in the act of joining two other lives most elementally. The implications of St. Paul’s understanding of the meaning of marriage (“This is a great mystery—I mean, it signifies Christ and His Church”) is a dizzyingly exalted expression of this perception that has powerfully influenced the understanding of sex and marriage and procreation in the West. Yet pre-Christian cultures and those outside the Western tradition have all sensed the same seismic force of the union of sexual intercourse with procreation within marriage. By contrast, our contemporary reading of marriage as a

way of having fun, sharing feelings and playing mommy and daddy is more facile, and much thinner.

There are more mundane grounds for worry too. Some agriculturalists have raised scientific caveats about cloning in general, fearing the implications for livestock and other animals of further reducing genetic diversity and thus making these populations more vulnerable to blights and disease. But on the level of individual choice, this is another "common good" argument unlikely to convince those with driving motives to try human cloning. It is hard enough, after all, to move parents to resist pressing for unnecessary antibiotics for an ill child, even though overprescribing hastens the development of resistant strains of bacteria. This is an example of something in everyone's medium-to-long-term interest, but in the short term, one wants to be convinced one is doing everything for a sick child, and this gets in the way of global solidarity.

Slightly more compelling to the individual imagination is the more "psychological" argument that cloning would interfere with our capacity to value the individual as unrepeatable and irreplaceable, by confusing individuality with genetic uniqueness. On the other hand, we swallow identical twins easily enough. They are a curiosity, but they are considered no less human or valuable.

I am afraid that our willingness to assign value to life arbitrarily, to sacrifice some lives to others, will help blind us to the moral limits of human autonomy and ease us into human cloning. Surely this is a lesson taught us by, among other things, the use of fetal tissue to treat Parkinson's disease, as well as the glaring examples of abortion and euthanasia. We must wonder whether cloning would have much of an impact on our understanding of what it means to be human, precisely because we have already fallen so far and forgotten so much. We think ourselves more sophisticated about biology and sex than our forebears, but we are more like children giggling over glimpses of private body parts in magazines. Like Oscar Wilde's cynic, we know the price of everything and the value of nothing.

Though we are light years ahead of the ancient Romans in science and technology, our attitude towards bioengineering resembles those who frequented the vomitorium after dinner in order to make room for more feasting. We do not acknowledge the relationship between the nature of a thing and its use—that is, we do not recognize any limits that relationship may place on us. Food is for nourishment, but why stop there? Sex has produced babies since the dawn of the first man, but don't let that stop us from trying a different way.

ELLEN WILSON FIELDING

It is the attitude behind these aberrational tendencies that marks the problem of modern man. It is not that a cloned human being is likely to emerge as a horror like Rosemary's Baby or the Pod People. But the cavalier and desacralized attitude of modern tinkers with marriage, family, love and death is the true horror, and the many modern offspring of that attitude have already shown they should be feared very much indeed.



'George, how do you feel about trans-terrestrial adoption?'

THE SPECTATOR 15 March 1997

Law and Disorder

Faith Abbott

The headline stopped me: “Shoot your baby? In Canada It’s O.K.” I was leafing through the Canadian Catholic monthly, *Challenge*, and wondered what *that* was all about, so I read the article, which begins:

Two days before Christmas, Ontario Provincial Court Judge Inger Hansen ruled that a mother who attempted to murder her pre-born baby by shooting it in the head while it was still in her womb didn’t break any laws.

The story was sparse on details of this “bizarre and possibly landmark case”—its intent was to show how it “remains as a signpost of Canada’s moral decline”—but details weren’t necessary, since many Canadian papers had followed the case from the beginning. But I hadn’t seen anything in *our* papers, so I called some Canadian sources and before long had enough faxed material to put together a chronology of sorts.

Last May 28, pregnant 28-year-old Brenda Drummond—nearing her due-date—aimed a pellet rifle into her vagina and pulled the trigger, hoping (as she would later tell her psychiatrist) to kill herself by stopping her heart. She was so depressed that she didn’t know, or had forgotten, that she was pregnant.

Two days later Brenda gave birth, alone, in her bathroom, to a six-pound baby boy. She took him to the hospital, but “forgot” to tell the doctors about the pellet-gun shot. The doctors thought there was something wrong with the baby.

On June 1, the doctors did a brain scan, and found a lead pellet lodged in the baby’s brain; they rushed to do emergency surgery. A week later, mother Brenda was charged with attempted murder, and was remanded to an Ottawa psychiatric hospital. The baby boy—who somewhere along the way got named Jonathan—was apparently (and amazingly) healthy and “went home” to live with his two sisters and his father, Paul. Just before Christmas, Brenda was released into the care of her own parents.

The Drummond Case heated up in November, with such headlines as “Mother shot fetus but it’s no crime, her lawyer argues” (*Toronto Star*, November 28); “Shooting fetus not a crime, court told” (*Ottawa Sun*, same day) and “Court raises abortion issues” (*Toronto Globe and Mail*). Next

Faith Abbott, our senior contributing editor and author of *Acts of Faith: A Memoir* (Ignatius Press), is supposed to be working on a book of essays.

day the *Globe* had this headline: "Pellet shot nearly fatal, trial told: Fetus has identity, Crown argues" while the *Toronto Star* headlined "Fetus shooting not an abortion issue: Crown." On November 30 the *Globe* bannered "Court to rule in three weeks on charge facing mother: No law protecting fetus, lawyer argues." Provincial papers also covered the case.

The ruling came just before Christmas; on December 23, the judge threw out the "attempted murder" charge, ruling that the Criminal Code does not include the unborn. ("Charge against mother who shot fetus dropped"—*Star*, next day.)

On January 21 of this year, Brenda Drummond was back in court to face the charge of "criminal negligence"—causing bodily harm for failing to tell doctors why her baby was "mysteriously ill" at birth. On February 3 she pleaded guilty to the charge of failing to provide Jonathan (her third child) with the necessities of life because she didn't tell doctors about the lead pellet until two days after his birth. On February 6 Brenda was given a suspended sentence and 30 months probation. ("Sentence suspended in shooting of fetus: Mother hopes to raise baby, lawyer says"—*Globe*, February 7.)

As I tried to piece this story together in my mind, in a sort of pictorial sequence, I saw a lot of blank frames, and I was curious. We are told, for example, that Brenda Drummond's daughters, ages 3 and 7, were "playing elsewhere in the house" when the shooting occurred—but where was husband Paul? He must have known she was in her ninth month; had he known that she was severely depressed? Where was he when she gave birth in the bathroom? Did he go to the hospital with her? Did he know about the shooting? What condition was she in, when arriving at the hospital with her newborn son, and in what way did the baby appear "mysteriously ill"?

All such details would be relevant if, say, television's "Law and Order" were to fictionalize the case for one of its programs. At the beginning of each episode we hear a voice saying "In the criminal justice system, the people are represented by two separate yet equally important groups: the police who investigate the crime, and the district attorneys who prosecute the offenders. Here are their stories . . ." NBC's critically-acclaimed crime drama is gaining in popularity: the setting is New York City and the series is based on a simple formula: first the arrest, then the trial. The show's creator explains that "the first half is a murder mystery, the second half is a moral mystery." Cases don't always turn out the way you think they should, because of the intricacies of the law and the clever deviousness of

criminal lawyers. There are surprises, and sometimes the Bad Guys win, but no stone is left unturned; every small detail is important to the detectives, before they turn the case over to the district attorneys and the judges.

During the first half of a program based on the Drummond Case, we'd see the detectives digging into all the evidence to determine the nature of the crime. They'd be questioning friends, family, spouse and psychiatrist, relentlessly, and—being tough New York cops—they'd be skeptical about the mother being so depressed she didn't know she had "a bun in the oven" or so confused she forgot to tell the doctors she'd shot her baby in the head. The second half hour—with the lawyers and the judge—could show the "moral mystery" just as it happened in the real case, with dramatic scenes of the sobbing and shaking woman clutching her husband as she awaits the judge's ruling.

(In my own "visualization" of the case, the first frame—Drummond doing the actual shooting—is blank. How is it anatomically possible?)

When the Drummond Case hit the Canadian papers, there was outrage at first, and then confusion and controversy. Legal scholars wondered if this "bizarre incident" would re-ignite the abortion debate in Canada, despite repeated assertions by both John Waugh, prosecutor for the "Crown" (remember, this is Canada) and Brenda Drummond's lawyer, Lawrence Greenspon, that abortion was *not* the issue. Pro-abortionists worried that the case could turn back abortion rights if Drummond were found guilty of *anything*; "pro-lifers" hoped the case would help gain legal protection for the unborn.

Indeed, it was becoming increasingly clear that *that* was the issue. But one member of "Choose Life Canada" said Drummond should *not* be charged because women who abort their babies are not charged with murder (and women who have "failed abortions" are not charged with *attempted* murder). She said: "As a society we must either value and protect the lives of all the children or none at all. We can't have it both ways."

Canada's ardent-feminist National Action Committee on the Status of Women worried about the possible "whittling-away" of the country's abortion policy, which allows abortion up to the moment of birth (and even gives women who kill their kids *after* birth great leeway on the grounds of post-partum depression). Others worried that the judge's ruling would impinge on current domestic-abuse laws, which are primarily aimed at men, to protect pregnant women from violence directed at them or their child. The whole case was so confusing that *many* groups felt threatened.

At the November 29 pre-trial hearing, prosecutor Waugh argued that

Brenda Drummond should stand trial for attempted murder, because the baby would surely have died if he hadn't had the emergency surgery. Defense attorney Greenspon argued that his client broke no law, since Canadian law does not recognize the personhood of a fetus ("The problem is, there is no law," he said). Waugh countered with Section 223 of the Criminal Code, which provides that "Malice directed at a fetus is sufficient malice to constitute attempted murder"—he argued that the wording of the Code gives the unborn child a separate identity, and Section 223 also states that a homicide has been committed when someone "causes injury to a child before or during its birth as a result of which the child dies after becoming a human being."

There were three days of arguments before the case went to the judge: Greenspon (who went on for seven hours) argued that his client's case should be dropped because—and this was the crux of his argument—no crime had been committed, since attempted murder applies only where there are *human* victims, and "unborn fetuses" do not constitute human beings. Waugh's argument was that a fetus doesn't need to be "a person" in order for the state to protect it, as Section 223 shows. Greenspon acknowledged the section but said it didn't apply in his client's case because the baby survived the pellet wound. Waugh argued that the section was indeed central to the case because of the principle it represents: a person can be punished for injuring a fetus when it's inside the mother's body: "Parliament has mandated that an unborn child, under these circumstances, has an existence." (All this was reported in the *Globe*, November 29.)

Finally, two days before Christmas the judge, Inger Hansen, took just over half an hour to read her decision, which threw out the charge of attempted murder. Hansen acknowledged that this case, and abortion in general, "deeply trouble and divide Canadians." But, she said, "there is no law in Canada which prevents a woman from harming her unborn child" and if a change in the law is needed, "it is better left to Parliament."

I had read in an Ottawa *Citizen* story that the Canadian Supreme Court has suggested more than once that Parliament should address the issue, but "a weak Tory attempt to do so failed and the Liberals have chosen to ignore the situation." So even before Judge Hansen's ruling, Canadians were wondering if there should be a new law. Greenspon, of course, said no, it is not necessary to criminalize acts such as those of which Drummond stands accused, because "There's not some overwhelming need to be worried about mothers putting pellet rifles up their body parts and doing what Brenda Drummond is alleged to have done . . . it's not a problem

occurring every day, or year, or indeed ever before.” (He finished his seven hours of argument with a quotation about the meaning of liberty in a free and democratic society!)

And so Brenda Drummond is now on probation and living with her parents. She gets “unsupervised” visits with Jonathan and her daughters and husband; she hopes to come home soon and has “a wish to be reunited with her baby.”

What seems to have stunned many readers of the *Globe* was its editorial on New Year’s Eve, titled “Conceiving a law for the unborn,” which began:

We can find no reason to toast an Ontario court’s decision to acquit a woman who shot her full-term fetus—a baby about to be born—with a pellet gun. But given the current state of the law, the ruling is understandable. The law says nothing about a fetus becoming a “person” until it has fully emerged from its mother. And if the fetus is not a person, you cannot be accused of attempted murder when you try to harm one.

The same problem, noted the editorial, had confronted the Manitoba Court of Appeal when it threw out a lower court’s attempt to force a mother, who was “a chronic solvent abuser” (read “glue-sniffer”) to change her behavior so as not to damage her unborn child. “Judges,” said the editorial, “may be able to step in to protect children from abusive parents, but there is at present no law on the books allowing them to treat the unborn in the same way. Until there is, judges will properly decline to act.” But here is the most stunning paragraph:

Everyone from the extreme pro-choice to the staunchly anti-abortion to the vast majority of agnostics in between can at least agree on one thing: When it comes to the unborn, Canada is a lawless country.

Imagine that: “*When it comes to the unborn, Canada is a lawless country.*” A Toronto priest wrote the *Globe* that to see this point of view expressed in its paper “almost blew my mind.” Since the *Globe*’s first articles on the subject in 1963, he wrote, the paper “has unrelentingly pursued a woman’s ‘right’ to kill the ‘fetus’ in her womb. Now 33 years later, you seem to have reservations about the absolute nature of this ‘right.’ I am glad of it.”

(Imagine further if such an editorial had appeared in, say, the New York *Times*! But then it never would, would it?)

But The Law is a strange and often mystifying business (as those who watch “Law and Order” know). In the Toronto *Star* (February 4) under the headline “Son can sue over prenatal injury,” there was a story about a woman in her 27th week of pregnancy who was apparently guilty of negligent driving when her car collided with a truck. She and her unborn child

survived, but the baby was born with physical and mental disabilities. His maternal grandfather took him (he's now four years old) to court to win insurance money for his care, and a Court of Queen's Bench judge ruled that a child can seek damages from his mother for disabilities suffered when he was still *in utero*. The judge said there didn't appear to be any Canadian precedent about whether an infant could sue his or her mother for prenatal injuries, but rejected arguments by the mother's lawyer that the boy could not sue because he was unborn at the time of the accident. If, the judge said, legal action can be applied against a stranger for injuries suffered by a child before birth, "It seems to me a reasonable progression to allow an action by a child against his mother for prenatal injuries caused by her negligence." (Brenda Drummond must be hoping that Jonathan will stay well?)

* * * * *

We had a bizarre fetus-shooting incident here, too, in March 1994. Kawana Ashley, a St. Petersburg, Florida woman—then 19 years old, about 25 weeks pregnant with her second child—was turned away from an abortion clinic because she didn't have the money. What she *did* have was a .22-caliber pistol. So she went home and put a pillow over her stomach and pulled the trigger. Doctors did an emergency Caesarean section and delivered the premature baby girl: she lived for 15 days, then died of organ failure.

Because the baby—named Brittany—had been born alive, she became "a person under the law." Therefore, a prosecutor told an appeals court panel, Ashley should be charged with murder.

The police report said that, at first, Ashley said she'd been the victim of a drive-by shooting. Then she said she'd shot herself to hurt her baby. But she told a detective that she *didn't* want to kill the baby, and another of her statements indicated that she wanted to kill *herself*.

In early September of that year, the authorities—having struggled with the case for months—charged Ashley with third-degree murder and manslaughter in her baby's death. One columnist wrote that "More than in any case in memory, it will make us wonder when life really begins."

Almost from the start, civil-libertarian activists in New York and Washington "got interested" in the case—which they claimed resulted from the unavailability of public fundings for abortions! Even if the mother was attempting to perform an illegal abortion, they argued, that shouldn't be considered murder. Said one American Civil Liberties Union lobbyist: "If a nonphysician runs around saying 'I'm available for illegal, third-trimester

abortions,' that's one thing . . . but what a person does to her own body in these circumstances is probably a protected privacy right—as unpleasant as that sounds.”

Washington *Post* Columnist William Raspberry (reprinted in the *Miami Herald*, September 16, 1994) pointed out that if the woman had had an abortion in a clinic, it would have been no concern of the police. It might have made more sense in this case, he said, to charge Ashley with practicing medicine without a license!

The prosecutors had two theories for holding Ashley criminally responsible: one was that if she were attempting to abort, she was guilty of third-degree murder—a killing committed during a non-violent felony—in this case, “a killing committed during an unlicensed, third-trimester abortion.” The second was that, if Ashley had been trying to commit suicide, she was guilty of manslaughter. They explained manslaughter by comparing this scenario to someone who tries to commit suicide by driving into a telephone pole, but kills a pedestrian on the sidewalk instead.

At one point (as the case dragged on) the Pinellas County prosecutor said that advocates on both sides were making too much of the case: “All along, my contention is that this case has been blown out of proportion . . . I don’t believe that there are that many women out in America who are shooting themselves in the stomach to abort a child.” (Shades of what Brenda Drummond’s lawyer said!)

But the courts were to make even *more* of the case. In January 1995 a judge of the Pinellas circuit court abruptly dismissed the murder charge, but ruled that the case should still go forward on the manslaughter charge. His “split decision” pleased neither side: the state’s prosecutors appealed his dismissal of murder, while the defense appealed his “go forward” order on the grounds that the state had no case at *all* against Ashley. So the district court of appeals got the case: it unexpectedly upheld *both* decisions, agreeing with the Pinellas judge that Ashley couldn’t be prosecuted for murder—because she performed the abortion on herself—and finding “no error” in the manslaughter argument, it *also* found the whole case to be “of great public importance” and so sent it on up to Florida’s Supreme Court.

The Supreme Court got around to hearing the case last November 5, touching off a new round of press coverage (the day before, even the far-away Baltimore *Sun* headlined “Abortion, fetus rights on legal collision course; Protections for unborn head for test in Fla.”). But the Justices too seemed stumped: there was no precedent for the case, and they evidently

weren't in a hurry to set one, so a decision is still pending.

This year, on February 21, the Miami *Daily Business Review* ran a story summarizing the Ashley Case and stating that "Now the Florida Supreme Court is considering both sides' appeals in a case that has drawn the attention of abortion interest groups across the country." Lawyers for Kawana Ashley (who is represented by the public defender's office and the Center for Reproductive Law and Policy in New York) say that the state's case is "both illogical and an unprecedented intrusion into women's privacy rights." They are joined by (among other "advocacy groups") the American Civil Liberties Union Foundation (Florida and federal) and the National Organization for Women (Tampa chapter and national) and the Feminist Women's Health Center of Tallahassee.

As though things aren't confusing enough, an assistant public defender and an abortion-rights attorney argue, in their brief, that there are "two fatal flaws" running throughout every one of the state's arguments. The first is the *creative lawyering* [italics mine] by which the state asserts that the victim was both a fetus—under the abortion statute—and a "born alive person" as Florida law requires for a charge of murder or manslaughter. The second "flaw" is, they say, the state's failure to recognize the "interdependence of mother and fetus."

Prosecutors argue that there's no reason a mother shouldn't be "as guilty as anyone else" for a felony, or a culpably negligent act, that results in a child's death.

If and when Florida's highest court *does* render a decision, it will probably be appealed to the U.S. Supreme Court, so the case is far from over.

* * * * *

Another case *is* over: it would *have* to be, in the ninth month. A friend in Florida faxed me a Fort Lauderdale *Sun-Sentinel* story (March 4) headlined "Attorneys, judge argue mother's rights." In *this* saga, a West Palm Beach mother of ten—nearing due-date for her eleventh—had decided to have a "normal" delivery, against her doctors' advice. They told her that because the baby's placenta had dropped and was blocking the birth canal, a Caesarean section was necessary; otherwise, the fetus would have a 99 percent chance of non-survival, and her *own* risk of death during delivery was very high (up to 75 percent!). But the mother was adamant: her "private" religious beliefs were against surgery.

The Choice Gang had been on the case, as had attorneys for the Legal Aid Society, who wanted to represent the unborn child. A circuit judge ruled that only the state, through the State Attorney, can attempt to override a

patient's decision to refuse life-saving treatment—a fetus was not legally recognized as a person by state law and “didn’t have any rights.” So hospital officials went to the Palm Beach County State Attorney, who called in Legal Aid Society attorneys to represent the “fetus” and argue that the mother should be forced to undergo the surgery, because her right to privacy was outweighed by the state’s “compelling interest in protecting a viable life.”

But even as the attorneys for the “fetus” and the judge were gathering for an emergency hearing in a makeshift courtroom at St. Mary’s Medical Center, the mother was in labor. She talked with doctors, prayed silently with her midwife, and finally signed a surgical consent form. As the *Sun-Sentinel* reported the next day (March 5), “The result was 7 pound, 6 ounce, 21-inch Marrah Eunice.”

II had worried about ten motherless kids, and felt like sending flowers—it looked like “case closed,” and for once a happy ending. But the ACLU attorneys were not about to send flowers: they were “concerned” that the decision to appoint attorneys to represent the baby girl Marrah Eunice *in utero* could set a bad precedent: “The notion that a fetus should have independent counsel, which may be asserting adversarial claims against its mother, is deeply disturbing,” said the executive director of the Florida ACLU, adding that if the mother agrees “we still could appeal that portion of the judge’s decision, even though the case is moot.” (They don’t give up, do they?) The associate director of the ACLU’s Reproductive Freedom Project in New York said “the decision to appoint an attorney for a fetus is a first in Florida—it’s been done elsewhere in the nation [but] we would say that wherever it’s happened, it’s improper.”

One of the “elsewhere in the nation” places is New Jersey. It happened during a routine bail hearing for a pregnant drug suspect—which turned into an impassioned argument over abortion, and ended with the judge appointing a lawyer to speak for the fetus. (“Judge taps lawyer for fetus,” blared the New York *Daily News* January 31.) The woman, almost six months along, accused of selling \$200 worth of heroin to an undercover officer in a parking lot, asked the Superior Court judge to lower her bail so she could leave jail to have an abortion. After “a dramatic three-hour hearing” the judge freed the woman on her own recognizance but ruled she had to return after the abortion, which was set for February 7. The fetus’ lawyer, Richard Collier, vowed to find a legal way to stop the abortion, saying “I will vigorously represent my client . . . This baby has an inalienable right to life, and nobody can take that away.”

The *Daily News* reported: "The humdrum hearing took on national significance . . . when [the judge] abruptly ruled the fetus has the right to an attorney and appointed Collier, a prominent anti-abortion lawyer, for the second-trimester embryo. 'I have decided that this unborn child requires representation,' said the judge."

The ACLU wasted no time before stepping in to argue for the woman (who is 33 and has two other children, now being cared for by her mother). The legal director of the New Jersey ACLU said the judge had no right to appoint a lawyer for the fetus: "New Jersey courts have held over and over that a fetus is not a person with cognizable rights." After much this-ing and that-ing, the woman was released on February 1 by the judge, who cited her "absolute right to terminate this pregnancy." But he left standing his appointment of the lawyer as the pre-born child's legal representative.

Not surprisingly, the case prompted "a flurry of activity" by abortion supporters: they not only wanted the woman released but wanted also to have the date of the abortion moved up. But guess what? The woman decided to *have* her baby, and was under the care of a doctor who said he'd provide his services *gratis*.

The unborn baby's lawyer "ironically" did not oppose the woman's release: Richard Collier's group, the Morristown Legal Center for the Defense of Life, even tried to post her bail. Collier said "I thought she should be allowed to go home and make up her mind . . . I asked the judge to let her out of jail because she had indicated to her family she didn't want an abortion."

* * * * *

In all these cases, after you strip away the *legalese*—a foreign language to me—you see that what's at issue is the "personhood" of the unborn child. But when it comes to personhood, there's no confusion in the case of Amy Grossberg and Brian Peterson, the "baby-faced" New Jersey teenagers who killed their "6 pound, 2 ounce, 20-inch long baby boy" in a Delaware motel last November 12. Had the 18-year-old Young Lovers managed to kill him while he was on the way out—perhaps by suffocating him while one leg was still *in*?—they might be charged only with practicing medicine (a "partial-birth abortion") without a license. But since it is "allegedly" a clear case of infanticide, Amy and Brian will go on trial for murder in September. (If convicted, they *could* face the death penalty.)

The cases of Grossberg/Peterson, Brenda Drummond, and Kawana Ashley have one thing in common: the "How could they *do* it?" factor. But then

the excuses begin: the Canadian was depressed, the Florida woman was desperate, the teenagers panicked, and then—especially in the Amy/Brian case—“compassion” sets in. Amy and Brian’s “community” is very supportive. New York’s *Daily News* (Sunday, March 2) ran a story headlined “Caring for ‘The Kids’—Community embraces toy-loving teenagers accused of killing son.” Out on bail, “The Kids” live in posh suburban Wykoff, New Jersey with their families, wear tamper-proof electronic anklets and are confined to their homes except for most of the daylight hours when they can keep doctor and lawyer appointments, take classes, and do supervised volunteer or charity work. They are allowed three consecutive hours of “free time” for shopping, or whatever. But they must keep “time logs.”

Right across the street from Amy’s home there is a store called The Bear’s Den, “where stuffed teddy bears and other cuddly creatures nestle in a land of make-believe” and that’s where Brian bought a Beanie Baby—a bunny named “Ears”—for “his true love, Amy.”

I hadn’t heard about Beanie Babies, but soon after I’d read that piece in the *Daily News* the toys were featured in several papers. So now I know that they are colorful, plush-covered, fist-sized beanbags that come in 77 “coveted” animal shapes; that they’re “the hottest product that has ever appeared in retailing” and that—compared with them—“Tickle Me Elmo” is “an insignificant blip on the retail horizon.” Further: that Beanie Babies cross “gender lines”—that “Boys, as much as girls, go ‘beany’ for ‘babies.’”

Amy and Brian both love and collect Beanie Babies. Amy—with her mother—visits The Bear’s Den, and Brian comes in to buy Beanie Babies for Amy. Gushes a Bear’s Den saleswoman: “They are both such neat kids, so special. You should see his big smile, ear to ear, when he does something for her.” The *Daily News* reporter writes that “Upper-crust Bergen County, N.J., has closed ranks around its hometown sweethearts—‘the kids,’ they are often called—insisting the young lovers simply made a mistake.”

The “mistake” The Kids made was to inflict on a real baby, their own flesh-and-blood newborn son, death by multiple skull fractures from blunt trauma and shaking, after which Brian (by his own admission) put his son’s body in a plastic bag and tossed it in a dumpster. They might have got away with it, too, if Amy hadn’t collapsed from after-birth complications.

Baby Boy Grossberg-Peterson—the only name he was given—was buried in December in New Jersey by his grandparents, while Amy and Brian were in the Delaware jail. Since then, “sources” say, there have been no

entries in their time logs for visits to the grave. But their probation allows them time to visit The Bear's Den, to buy gifts that "show their love in little ways."

They could have shown their love in a big way, of course. Baby Boy Grossberg-Peterson wasn't just their *own* "property"—he was also a grandchild. And now the would-be grandparents see their kids' rooms filling up not with baby things but with cute little Beanie Babies.

What makes TV's "Law and Order" so believable is that the scriptwriters usually—and obviously—base the story-line on "real life" cases most viewers already know something about. There have been episodes on serial killers, drug and child-abuse deaths, homosexual murders, and of course abortion-clinic bombings. At first I wondered how they might handle the Amy/Brian case. But I decided that the Beanie Babies part would be a bit too *much* even for "Law and Order"—nobody who *didn't* already know the story would believe it could really happen.



'Apparently, if I'm pregnant, you turn white!'

THE SPECTATOR 15 February 1997

Mothers in Combat Boots

Mackubin T. Owens

If you are involved in the abortion controversy, you are no doubt familiar with the idea of the “seamless garment,” an approach to public policy that is popular among some Roman Catholics. Advocates of the seamless garment argue, *inter alia*, that opposition to abortion, capital punishment, and war are inextricably linked. While many are offended by the moral implications of connecting abortion’s destruction of innocent life with the legitimate taking of life associated with proportionately administered capital punishment and just war, there is at least a surface logic to the seamless garment and an accompanying affirmation of life that gives it a certain dignity, even in the eyes of its opponents.

Although it has no official name, there is a feminist version of the seamless garment—it links abortion on demand with other “feminist” goals, such as the push to expand the role of women in the military, to *include* assignment to combat. In contrast to the Catholic seamless garment, the feminist seamless garment is, in essence, an affirmation of death: having asserted the right to destroy the unborn, often for no more reason than inconvenience, the feminists and their ilk now wish to claim a new “killing field” no matter the cost to the military *ethos*, to normal concepts of womanhood, or to the health of society as a whole. Like abortion, the argument for women in combat claims to enhance the dignity of women, when in fact it denigrates them.

It’s no surprise that the same feminist suspects who brought you abortion on demand—personified by former Congress-person Patricia Schroeder—now want to give you women in combat. The fact is, today’s political feminism is characterized by a self-centered focus on the individual woman, with no consideration of the consequences beyond her demand for “choice.” Advocates of both abortion and women in combat contend that the only point to be considered is the “right” of a woman, or her need to be “empowered.”

Naomi Wolf, in her remarkable essay “Our Bodies, Our Souls” (reprinted in the *Winter* 1996 issue of this *Review*), provides several examples of this astounding self-centeredness in the case of abortion. She recounts

Mackubin Thomas Owens, a Marine veteran of Vietnam, is editor-in-chief of the quarterly *Strategic Review*, and a professor of national security affairs at the Naval War College (in Newport, Rhode Island) and of international relations at Boston University.

a particularly perverse example from a 1994 account in *Mother Jones* of a woman's decision to abort her unborn child who was conceived "through her partner's and her own failure to use a condom." The writer, despite a friend's desire to adopt the child, refuses to carry her pregnancy to term. Ignoring her friend's plea, she schedules a chemical abortion. "The procedure is experimental, and the author feels 'almost heroic,' thinking of how she is blazing a trail for other women." When the blood from the abortion first appears, "She exults at this: 'Our bodies, our lives, our right to decide. . . . My life feels luxuriant with possibility. For one precious moment, I believe that we have the power to dismantle this system. . . .'" Concerning the link between the so-called "empowerment" of women and abortion, she cites Laura Kaplan's description of what motivated a pre-*Roe* underground abortion service: "The activists felt exhilaration at learning to perform abortions themselves instead of relying on male doctors."

The reasoning of those advocating women in combat is similar: Using "Tailhook" and the Army's recent training-camp sex-scandals at Aberdeen and elsewhere as a wedge, they have argued that the "empowerment" and "rights" of women are all that matter, with no concern for military effectiveness. Sexual abuse of women at Aberdeen, say the feminists, is merely symptomatic of an institutionalized disrespect for women in the military at large, rendering them "second-class citizens." Women will not achieve the respect they deserve until they have the opportunity to serve in the combat specialties that constitute the core of the military. As Eric Schmitt of the *New York Times* put it (in a December, 1996 story), "Until women are treated as equals, those advocates say, men will continue to mistreat women, and the exclusions block women from advancing along the three main routes to senior leadership: armor, infantry, and field artillery." For example, a female Army colonel told Schmitt that "until you have women serving or having the potential to serve at the highest levels, you'll always have the appearances of a glass ceiling in the Army."

This reasoning is seconded by Senator Olympia Snowe, Republican of Maine: "Every time a woman is excluded from a position [in the military], she is devalued." The equal treatment of women in today's environment is unlikely because, in the words of Ms. Schroeder, the military "is a top down hierarchy, and all males at the top." Thus, according to Barbara Pope, the Assistant Secretary of the Navy for Reserves and Manpower during the Bush Administration, the culture must be changed: "We are in the process of weeding out the white male as the norm."

In the cases of both abortion and women in combat, feminists purport to speak for all women when in reality they represent only a small part of the

female population. In the first case, they make the “right to choose” abortion the defining aspect of womanhood while in fact most women are opposed to abortion except in cases where the mother’s health is threatened. In the second, they push their agenda despite the fact that most women in the military are opposed to opening combat roles to females.

It is those feminists interested in proving their theories of “gender equality”—and the small coterie of female officer careerists who wish to advance their *own* professional prospects—who are pushing their women-in-combat agenda at the expense of three other groups of women: 1) *the vast majority of military women*, especially *enlisted* women, who do not wish to serve in combat but who would bear the *brunt* of combat’s violence; 2) *military wives*, whose mental anguish at long separations and the danger to which their warrior husbands are constantly subjected can only be magnified by the uncertainty that arises as a result of their husbands’ deploying with women for extended periods away from home and family, and 3) *mothers*, whose sons (and daughters) will be placed at additional risk if the critics of women in combat are right about the impact of females on “unit cohesion,” the *sine qua non* of success in combat. The adjectives that Naomi Wolf uses to describe the abortion movement apply here as well. Feminists in pursuit of their agenda and military careerists in pursuit of their “professional goals” demonstrate a “callous, selfish and casually destructive” disregard of these other women.

Motives aside, the likely consequences of the expansion of the role of women in the military, to include combat, will be a U.S. military failure of some magnitude in the future. Thus such proposals must be examined in light of the impact that women have already had on the military and the military *ethos*.

Anatomy vs. Social Engineering

The problem of women in combat is traceable to the reality of bodies. As Stephanie Gutmann asks in her recent *New Republic* article, “Sex and the Soldier” (February 24, 1997), “What happens when you try to integrate into a cohesive whole two populations with radically different bodies?” What happens when we examine the female soldier “not in political terms, but in the real, inescapable terms of physical structure?” (This, of course, is not a new problem. Socrates treats this issue in Book V of *The Republic*. He seems to conclude that the sort of perfect justice associated with the best regime, “the city in speech,” is not possible in practice because of differences attributable to physical bodies. Socrates makes constant references to how “absurd” and “ridiculous” the demands of abstract

justice would appear if they were put into practice, e.g. if men and women were to train naked together in the gymnasium.)

What are some of these physical realities? Ms. Gutmann offers a partial catalogue: the female soldier “is, on average, about five inches shorter than the male soldier, has half the upper body strength, lower aerobic capacity and 37 percent less muscle mass. She has a lighter skeleton, which may mean, for instance, that she won’t be able to ‘pull G forces’ as reliably in a fighter plane. She cannot pee standing up . . . She tends, particularly if she is under the age of 30 (as are 60 percent of military personnel) to get pregnant.”

As the *Strategic Review* (Spring, 1997) points out, these differences have had an adverse impact on the U.S. military at a time when continuing austerity in the defense budget is driving us toward a smaller and leaner force, one that will have to meet its obligations by increased emphasis on competence and readiness. For instance, women suffer a higher rate of attrition than men and, because of the turnover, are a more costly investment. And women are four times more likely to report ill—the percentage of women medically non-available at any time is twice that of men. Obviously, if you are ill, someone must care for you; if you can’t do your job, someone else must do it for you. More, only ten percent of the women can meet all of the minimum physical requirements for 75 percent of the jobs in the Army. Women may be able to drive five-ton trucks, but they need a man’s help if they must change the tires. Women can be assigned to a field artillery unit, but often can’t handle the heavy ammunition.

In the course of a year, at least ten percent (and up to 17 percent) of service women become pregnant. In certain locales, the figure is even higher. James Webb notes that when he was Secretary of the Navy in 1988, 51 percent of single Air Force women and 48 percent of single Navy women stationed in Iceland were pregnant. From the beginning of the U.S. deployment to Bosnia in December 1995 until July 1996, a woman had to be evacuated for pregnancy approximately every three days. As I write, a total of 118 have been evacuated from Bosnia.

During pregnancy (if she remains in the service at all), a woman must be exempted progressively from more routine duties like marching, field training, and so on. After the baby is born, there are *more* problems, exemplified by today’s 24,000 unmarried service mothers, none of whom could fairly be called a front-line soldier. And this is only part of the story: given that sex between military men and women is widespread, numerous pregnancies among military women end in abortion.

These anatomical realities have led the military into some experiences that would be laughable were they not so fraught with danger. As the

Washington *Times* has recently reported, the Army is now circulating a handbook to commanders that confirms the drag on readiness caused by the presence of women in deployed units. "Deployed female soldiers are more prone to injuries and fatigue than men, risk dehydration because of reluctance to use public latrines and should eat two thirds rations to avoid gaining weight. The . . . field guide on women's health also lists 'countermeasures' to prevent pregnancies, saying the condition 'disrupts unit cohesiveness . . .'"

In another example, *Inside the Navy* has reported that the designers of a new amphibious *assault* ship, the LPD-17, are examining appropriate "health criteria for pregnant sailors and Marines [!] . . . for shipboard spaces." Such nonsense illustrates the degree to which the nation's military leadership is forced to attend to the unique needs of women, rather than focus on the real mission of the military: to win in combat.

Fairness and the Military *Ethos*

How has the military responded to the problems created by large numbers of women in the service, now approaching an unprecedented 14 percent—a much higher percentage than any other nation in the world? By essentially discarding the very essence of the military *ethos*: fairness.

The glue of the military *ethos* is what the Greeks called *philia*—friendship, comradeship, or brotherly love. *Philia*, the bond among disparate individuals who have nothing in common but facing death and misery together, is the source of the unit cohesion that all research has shown to be critical to battlefield success. *Philia* is described by J. Glen Gray in *The Warriors: Reflections on Men in Battle*: "Numberless soldiers have died, more or less willingly, not for country or honor or religious faith or for any other abstract good, but because they realized that by fleeing their posts and rescuing themselves, they would expose their companions to greater danger. Such loyalty to the group is the essence of fighting morale. The commander who can preserve and strengthen it knows that all other physical and psychological factors are little in comparison. The feeling of loyalty, it is clear, is the result not the cause of comradeship. Comrades are loyal to each other spontaneously and without any need for reasons."

Philia depends on fairness and the absence of favoritism. The crux of the problem with women in the military is precisely the issue of fairness. As James Webb recently observed in "The War on the Military Culture" (*The Weekly Standard*, January 20, 1997), "In [the military] environment, fairness is not only crucial, *it is the coin of the realm* . . ." The military *ethos* is dependent on the understanding of all that the criteria for allocating danger and recognition, both positive (promotion, awards, etc.) and

negative (courts-martial, etc.), are essentially objective. Favoritism and double standards are deadly to *philia* and its associate phenomena: cohesion, morale, discipline—elements of the military *ethos* that are absolutely critical to the success of a military organization.

“Gender Norming” and Double Standards

The fact is that women in the military have generated a series of undeniable double standards which have caused resentment among the men. This in turn leads to cynicism about military women in general, including those who have *not* benefited from a double standard and are performing their duties with distinction.

There are two primary sources of the military’s double standards. The first is an obvious consequence of current American politics. The second—far more insidious—is the presence of women in the close confines of a ship or a combat unit, which unleashes *eros* at the expense of *philia*, corroding the very source of military excellence itself.

The political source of double standards arises from the fact that the desire for equal *opportunity* is, in practice, usually translated into the demand for equal *results*. The consequence has been the watering down of standards to accommodate the generally lower physical capabilities of women. In fact, *every* service has lower physical standards for women than for men—no one can deny that “gender norming” is widespread.

The most revealing example of just how far this gender norming has gone occurred during the original suit against the Virginia Military Institute’s policy of admitting only males. Called by the prosecution to bolster its claim that the admission of women to the U.S. Military Academy had not led to any adverse effects, Col. Patrick Toffler, Director of the USMA’s Office of Institutional Research, under oath and no doubt unintentionally, strengthened the claim by VMI’s counsel that West Point had created a double standard for men and women, and that this double standard had an adverse impact on morale and training. Col. Toffler admitted that the USMA had identified 120 physical differences between men and women, not to mention psychological ones, resulting in an overall program of physical training less rigorous in order to accommodate female cadets.

There is immense political pressure to prevent women from failing to meet even these watered-down standards. This dynamic was at work in the case of Navy Lieutenant Kara Hultgreen, who paid for the double standard with her life (her carrier-plane’s fatal plunge into the sea was ascribed to “pilot error”). It was at work in the case of Admiral Stan Arthur, whose career came to an untimely end because he rejected the claim of a washed-

out helicopter trainee that her unfavorable flight evaluations were in retaliation for her filing a sexual harassment complaint against one of her instructors. The latter case in particular has made it clear to flight instructors that there is a substantial career risk associated with holding female trainees to the same performance standards as men.

An internal Navy report by Rear Admiral Lyle G. Bien illustrates how the combination of double standards and political correctness has corrupted truth, honor and principle in the naval aviation community.

Admiral Bien's report, addressing whether the standards used to qualify women for assignment to F-14 squadrons (the plane flown by Lt. Hultgreen) were lower than for men was, in the words of the *Wall Street Journal*, "worded with tortured care." Admiral Bien found no one who would admit that special preferences had been accorded women aviators. "On the other hand, he concedes, after Tailhook (and the ensuing purges that cost so many careers) no officer wanted to appear to block the progress of integrating women into the Fleet. The Admiral noted that naval officers did seem to notice there were different physical standards for women, and special accolades and attention directed to them from officers, from Navy officials and via calls from Washington."

The experience of the U.S. military in successfully integrating blacks is instructive in its stark contrast to the far-less-successful attempt to integrate women. A major cause of successful racial integration was that the services abjured double standards. Charles C. Moskos and John Sibley Butler, in their recent book *All That We Can Be*, show that the Army was, from the beginning of integration in the 1950s, adamant that merit would not be subordinated to quotas achieved by lowering standards, thus "stigmatiz[ing] applicants by raising doubts about their true qualifications." By following this path, the Army eliminated the "paradigm of black failure"—the notion that blacks cannot succeed unless standards are adjusted for race.

Eros vs. Philia

As dangerous as "politically correct" double standards may be, more dangerous by far are those arising from the introduction of *eros* into the military environment. Unlike *philia*, *eros* is individual and exclusive. *Eros* manifests itself as sexual competition, male protectiveness, and favoritism. As James Webb observes, "there is no greater or more natural bias than that of an individual toward a beloved. And few emotions are more powerful, or more distracting, than those surrounding the pursuit of, competition for, or the breaking off of amorous relationships."

And as both Mr. Webb and Ms. Gutmann illustrate, "amorous" rela-

tions, both consensual and non-consensual, abound. Mr. Webb relates the case of a ship's captain concerned about the disruption caused by sexual activity aboard his sexually-integrated vessel. When he raises the issue with his master chief, the senior enlisted sailor aboard, the latter replies, "Captain, there's f---ing going on on this ship 24 hours a day, and there's nothing you can do about it." And Ms. Gutmann reports the unintentionally ironic statement of an Army spokesman to the newspaper *Stars and Stripes*: "The Army does not prohibit heterosexual relations among consenting single soldiers . . . but it does not provide facilities for sexual relations."

Eros undermines the bonding and resulting unit cohesion. Feminists of course contend that these manifestations of *eros* are only the result of a lack of education and insensitivity to women. They claim that the bonding argument was also employed by opponents of racial integration. But while racial attitudes are learned and can be changed, relations between the sexes are qualitatively different: the behavior of men around women is something that Socrates would have recognized as "human nature." As one commentator puts it, anyone who cannot distinguish between race discrimination and discrimination on the basis of sex probably doesn't understand the difference between segregating bathrooms by race and segregating them by sex.

All the social engineering in the world cannot change the fact that men treat women differently from other men. This is illustrated by the closest thing we have to a laboratory experiment testing the claims of those who would open combat specialties to women: the Israeli experience.

Women in Combat: the Israeli Case

During the period of the British Mandate in Palestine, an elite, semi-clandestine, volunteer Jewish youth organization called Palmach was formed. The ideology of Palmach was egalitarian socialism, and according to the Israeli historian Martin van Creveld, the organization "was sexually integrated to an extent rarely attained by any armed force before or since."

Palmach was essentially a guerrilla militia, designed for self-defense against local Arab attacks. Van Creveld writes that before Israeli independence, Palmach women accompanied men on missions, especially "undercover missions that involved obtaining intelligence, transmitting messages, smuggling arms, and the like." During Israel's War of Independence, Palmach served as the core of Haganah, the Israeli Defense Force (IDF).

Yet despite Palmach's ideological commitment to radical equality for women, the practical experience of the 1948 war, which involved coordinated offensive actions, convinced the leaders of Israel that the dangers of

women in combat outweighed the benefits—including commitment to an abstract concept of equality between the sexes. Former Israeli Defense Minister Moshe Dayan said women reduced the combat effectiveness of Haganah units because men took steps to protect them out of “fear of what the Arabs would do to [the] women if they captured them.”

What might an enemy do to captured women? We know that female soldiers captured during the Persian Gulf War were sexually abused despite initial denials by the Defense Department. A more harrowing answer is provided by Charles J. Dunlop in his futuristic “How We Lost the High-Tech War of 2007: A Warning from the Future.” As the “Holy Leader” tells the “Supreme War Council” during a secret address in late 2007:

As you know, this was the first major war in which America deployed large numbers of female combat soldiers. To carry out our plan, our fighters captured a few dozen.

The Americans believed that their nation could endure the sight of women as POWs. Perhaps they were right. Whatever the case, America was shocked by what we did next: We used our infamous Boys Brigade to rape the women, and then to amputate their limbs and burn their faces. Though we let them suffer terribly, we were careful not to kill them. . . . We then returned the POWs to the Americans—we said it was a “humanitarian” gesture. . . . However prepared the Americans thought they were to see their daughters come back in body bags, they were not ready to see them returned home strapped to wheelchairs, horribly mutilated, and shrieking in agony.

Traumatized relatives frantically demanded the removal of their wives and daughters from the combat zone, and those demands were swiftly met. But by 2007, women had become so incorporated into the structure of the U.S. military that their sudden withdrawal wrecked the effectiveness of the deployed forces.

The Military *Ethos* and Liberal Democracy

If the military were “just a job” involving a daily commute to the Pentagon—and if equal opportunity were all that was at stake—it would be hard to oppose opening combat to women. Women have demonstrated their competence in all other areas of society, from medicine and law to business and the academy. But they have done so because of capitalism and technology—lifting legal barriers against women in the workplace merely ratified the technological advances that have made physical strength less important than intellect—an area in which women are every bit the equal to men. But realities of war render the military different from the society it protects. Indeed, a liberal democracy faces a paradox when it comes to the relationship between the military and society at large: the military cannot govern itself in accordance with the democratic principles of that society. Behavior that is acceptable, indeed even protected, in civil

society is prohibited in the military. The military restricts the freedom of movement of its members, it restricts speech, and it prohibits certain relationships among members, such as fraternization. It values virtues that many civilians see as brutal and barbaric because, in the words of an anonymous Air Force major, the military "is one of the few jobs where you may have to tell someone, 'go die.'"

If the military fails, the society it protects may not survive. And long experience has taught us that certain kinds of behavior are destructive of good order, discipline, and morale, without which a military organization will certainly fail. The goal of military policy must be victory on the battlefield, a purpose that cannot be in competition with any other, including the provision of entitlements or "equal opportunity." Unfortunately, many of those in positions of responsibility seem to have forgotten this imperative: consider the comments of Secretary of the Army Togo West in 1994. There are, he said, two basic principles governing the Army: "One, that everyone in the country is entitled to serve and should be given it. And two, the Army exists to fight and win the nation's wars." The issue, he continued, is to determine how best "to utilize the available resources to do the latter with the least compromise of the former."

But in fact the *ethos* of the United States military has served the Republic well. The burden of proof is on those who would use such events as the alleged Army sex scandals as an excuse to expand the role of women. They must prove that the changes they advocate will not further undermine the very purpose of the military—victory on the battlefield. In the words of the military sociologist Richard A. Gabriel, "it will avail us little if the members of our defeated forces are all equal. History will treat us for what we were: a social curiosity that failed."

A final thought suggests itself, however: What kind of a society can seriously consider sending women into combat while men stay home? What sort of society is capable of displaying the depraved indifference to the lives of children evidenced by the desire of some women (and the willingness of some men) to send mothers and (maybe soon) pregnant women into harm's way? The answer, unfortunately, seems to be the same sort of society that permits one-and-a-half *million* abortions each year.

I am reminded of Abraham Lincoln's words at the time of the Kansas-Nebraska Act (to extend slavery into new territories): "Our republican robe is soiled and trailed in the dust. Let us turn and wash it white in the spirit, if not the blood, of the Revolution"—which of course began with the Declaration that God created us all with "certain unalienable rights," first among them the right to life.

Ireland Faces a “First”

Denis Murphy

A “first” is a milestone, remembered by everybody as a step forward—or backwards—for humanity. Neil Armstrong, the first man to walk on the moon, will never be forgotten. Nor will Louise Brown, the first test-tube baby, even though there are now thousands of babies who have been conceived in glass dishes.

Another “first” has re-ignited the abortion debate in Ireland. A banner headline in the *Irish Times* on February 28 read “Woman alleges Dublin abortion”—the opening paragraph tells the story: “A Dublin woman has made a complaint to the Gardai [police] against a clinic in which, she alleges, an abortion was carried out on her two years ago.”

The abortion, she said, was done in a “family planning” clinic in the middle of Dublin. The doctor involved is known as an old radical who for years has been pushing the law in such matters. Now, everybody wondered, had he gone the final step and actually done the unthinkable: Had he carried out the first abortion in Ireland?

The names of the clinic and the doctor were widely known, but not printed in the newspapers. In Ireland, the media does not name people who are under investigation, especially in a sensational case like this, lest they be accused of prejudicing any future trial. Already this year, a high-profile libel trial involving a senior Government minister and a national newspaper was called off after the newspaper’s coverage was found to be prejudicial to a fair outcome. To its chagrin, the newspaper had to pay costs. On this infinitely more explosive issue the newspapers were treading very carefully indeed.

Taking advantage of this, the doctor in question simply referred reporters to his lawyer, who refused to comment. Nor was the clinic forthcoming with any statement on the matter. However, dozens of competing reporters are difficult to fend off, and the net began to tighten. National radio invited the directors of the two major family planning agencies onto a phone-in show. Tony O’Brien of the Irish Family Planning Agency (supported by the International Planned Parenthood Federation) categorically denied any involvement in the case. That left Frank Crummy of Marie Stopes Reproductive Choices in a difficult position: Would he refuse to

Denis Murphy is a young (University College Dublin, '93) Irish writer now working in public relations, and as an advisor to Ireland’s Pro-Life Campaign.

deny it? Could he? The show host left the unasked question hanging in the silence, and Mr. Crummy's nerve seemed to fail. After an agonized pause, he said the magic words: I confirm that it is my clinic, Marie Stopes Reproductive Choices, that is under investigation.

It was a *coup* for the talk show, and a boon for the journalists. While the name of the doctor was still not printable, at least they had a free run on the clinic. The floodgates of information seemed to open once the name was out in the open, and dark rumors circulated that this was not an isolated case—no “first” at all—other abortions had surely taken place.

The issue dominated the weekend news, but still lacked a political edge. All political parties are united in the fear that abortion will become an issue in the upcoming elections (now expected in May or June). The print media—virtually united in favor of legalized abortion—warned the political parties that abortion should not become an election issue—that the correct approach is an all-party consensus in *favor* of legalization. Then John O'Donoghue, justice spokesperson of Fianna Fail, the largest political party (and presently in opposition), broke ranks and said on national radio that there should be another referendum held to give express constitutional protection to the unborn.

Liberals reacted as if they were heroic defenders of some noble cause that had been treacherously betrayed from within. Suddenly the referendum issue was right in the middle of the political agenda! Politicians and leader [editorial] writers were furious, and vented their anger on the unfortunate O'Donoghue and his party.

The controversy about a pro-life amendment has a very long pedigree in Irish politics. Readers of this journal may recall that, way back in 1983, the pro-life lobby was successful in getting a referendum to insert a specific prohibition on abortion into the constitution. Despite vigorous media hostility, and the opposition of the then-government, the referendum was passed with an overwhelming majority.

So it seemed that the matter was closed until, that is, 1992, when the Supreme Court ruled that a 14-year-old rape victim who was threatening suicide had the right to have an abortion. No time limit was placed on the stage of pregnancy at which the abortion might take place.

Two strong lobbies emerged. One was the Pro-Life Campaign, which argued that the Supreme Court decision was wrong, and that the issue should be referred back to the people by way of referendum. The other lobby—consisting of women's groups, left-wing political parties, the bulk of the media as well as many senior politicians who had opposed the 1983

amendment—saw the X case as an enlightened judgment, in that it opened the way for abortion in Ireland. They saw the 1983 referendum as a deplorable episode in Irish politics, in which lobby groups had successfully hijacked the political process and copperfastened the absolute prohibition of abortion. They rejoiced in the Supreme Court decision, and they were determined that never again would there be explicit constitutional protection for the unborn.

And there it has remained. A misguided effort to effect a compromise by way of an amendment which allowed for limited abortion pleased neither side and was comprehensively defeated, and since then there has been a legal stalemate. Abortion is, in theory, legal so long as it falls within the broad parameters of the X case, but is not available in Irish hospitals because the medical profession still regards it as unethical, and has threatened to strike off the list any doctor who performs one. For the past five years there has been skirmishing on the fringes of the issue, for instance over the introduction of non-therapeutic amniocentesis—and over the rights of British abortion clinics to advertise their services in Ireland—but the “substantive issue,” which is abortion itself, has not been touched.

Until the present controversy. John O'Donoghue is a senior politician in the biggest party in the State. He is widely expected to be a minister in the next Government. An election is impending. Was his commitment to a referendum on abortion a personal one, or was he speaking on behalf of his party?

For liberals, it was the nightmare scenario. They do not seriously believe that they can get abortion legislation through parliament, but as long as the X decision stands, at least they have the option. Attitudes change; dramatic test cases can lead to rushed laws. Now, if Fianna Fail committed itself to the referendum, the situation could return to that of pre-1992, with an absolute constitutional ban on abortion and no hope of reform without first consulting the electorate.

Hell hath no fury like a liberal scorned. John O'Donoghue, the media noted, is from a rural, deeply conservative constituency. Patently, they implied, he was being irresponsible in playing to his own electors rather than reflecting national party policy. What did Bertie Ahern, O'Donoghue's Dublin-based party leader, have to say on the matter? Did *he* think there should be a referendum?

Bertie Ahern is the great conciliator of Irish politics. If there is an intractable industrial dispute, or if party factions are at loggerheads, the call goes up: “Bertie will mediate.” Bertie arrives, sits the opposing parties

down, and somehow a consensus emerges. It was this talent which made him an attractive proposition for the Fianna Fail leadership, which has been riven by years of bitter in-fighting. The largest party in the state, Fianna Fail no longer has the ideological cohesion that saw it gain over 50 percent of the vote in the past. Now, at little over 40 percent in the polls, it needs the support of smaller parties to get into Government.

Two years ago, in power with the smaller but more ideologically-driven Labour Party, Fianna Fail was unceremoniously dumped from office after falling out with its coalition partners. Labour formed another Government with Fianna Fail's main opposition, and it has governed ever since.

Unless Bertie Ahern's party gets more than 50 percent of the popular vote in this year's election—an achievement which has eluded it since 1977—it will need to enter a coalition. If just short of a majority, the small free-market Progressive Democrats will suffice. If the party performs poorly, it will be back to horsetrading with the Labour Party.

And therein lies Bertie's dilemma. Both future coalition partners are implacably opposed to another abortion referendum. The leader of the Progressive Democrats, Mary Harney, said publicly that the "last thing the country needed was another abortion referendum" (the Pro-Life Campaign's retort was the obvious one: in fact, the last thing the country needs is legalized abortion). A senior Progressive Democrat party colleague, Des O'Malley, suggested that the way forward was through all-party agreement on post-election legislation rather than a new referendum. In other words, wait until after the election and *then* legalize abortion.

Nor was the Labour Party silent. One of its spokespersons called for "carefully worked-out legislation to prohibit abortion but allowing for any procedure necessary to save a woman's life," despite the clear stance from the Irish Medical Council that abortion is *never* needed to save a woman's life. The Labour spokesperson went on to attack Fianna Fail for John O'Donoghue's views on a referendum—every "forward-looking person" would have to think twice before voting for a "fundamentalist" Fianna Fail party that was eager to plunge the State into another futile abortion referendum.

The problem for Bertie Ahern is that within Fianna Fail there is overwhelming—but not 100 percent—support for a referendum, especially among the grass-roots activists. Every time Bertie visits a local constituency, somebody asks him why the party has not committed itself to an abortion referendum. How can the Great Pragmatist keep his own people happy while not closing the doors to future coalition partners?

It was not for nothing that Bertie's political patron, the legendary four-time-prime-minister Charles Haughey, once described his political protégé as "the most devious, the most cunning of them all." Abortion is, said Bertie, a difficult, complex issue. He is opposed to abortion. So is his party. A referendum could not be ruled out. Neither could legislation. Some months ago, he had established a committee of experts to advise on the best way to deal with this issue. Until they reported, Fianna Fail would have no official policy on the matter, save that they were against abortion.

It soon emerged that in fact this committee had been mooted months ago, but did not meet until the controversy broke. It had been kept in the wings to satisfy Fianna Fail members campaigning for a referendum ("There is a party committee sitting. You know that we are against abortion. Won't you wait until the committee reports? Aren't you loyal to the party?"). Now, in time of need, it was dusted off and employed as a means of avoiding a pre-election stance on a referendum that might damage relations with potential coalition partners.

But the Pro-Life Campaign has not been satisfied with this. It wants the political parties to spell out their position on abortion *before* the coming election. The majority of the electorate want abortion banned, and it will be difficult for politicians to ignore this during an election campaign. The challenge now is for the pro-life lobby to make sure that abortion *does* become an election issue.

Which is the last thing the "pro-change" forces want. Without the electorate on their side, they need at all costs to avoid a referendum. Conscious that this leaves them open to taunts that they fear a democratic resolution, they reply by a) hurling invective at pro-lifers, and b) attacking the notion that it is possible to prohibit abortion by constitutional amendment. Consider this piece of statesmanship from Garret FitzGerald, former prime minister and implacable opponent of an amendment:

The Fianna Fail Parliamentary Party—which seems to be the only group in the Dail [parliament] that still has fundamentalists in its ranks—should not have allowed [itself] to be dragged back into this quagmire. For neither it nor any other party has anything to gain by following any further the will o' the wisp of an all-purpose constitutional amendment that the Supreme Court can be certain of interpreting to the satisfaction of the fundamentalists—and at the same time in a manner acceptable to the Irish people.

Note the care with which Fitzgerald makes the distinction between "the fundamentalists" and "the Irish people"—and bear in mind that the former PM is determined that "the Irish people" *not* be consulted on the matter!

In response to the assertion that it is not possible to introduce a constitutional amendment that will prohibit abortion, the Pro-Life Campaign has put forward the following form of words for consideration:

No law shall be enacted, and no provision of this Constitution shall be interpreted, to render induced abortion lawful in the State.

This formula, the PLC says, aims to be as plain and as easily understood as possible. The term “induced abortion” has a clear meaning in medicine, and is clearly understood and recognized by clinicians. An induced abortion is in contrast to a spontaneous abortion, and refers to a procedure or intervention which is directed at, and has as its primary or predominant or sole object, the death of an unborn child.

If this wording became a constitutional amendment, the effect would be to prohibit abortion and maintain proper medical treatment for pregnant women by applying the natural law principle of “double effect.” Mothers would continue to receive all the medical treatment that they need during pregnancy, even when it might impact on the unborn as an injurious or even potentially fatal side effect. Abortions would not be carried out.

One newspaper columnist, regarding the publication of the Pro-Life Campaign’s wording in the context of political tactics, said that “the suggestion to write a total ban on ‘induced abortion’ into the Constitution has the instant appeal of being easily understood, so making it harder for those who are resisting a new referendum to oppose it on the perennial grounds that the issue requires yet more study and examination.”

This last point acknowledges the reluctance of referendum opponents to promote their real point of view—that abortion should be easily available. It remains the great strength of the Pro-Life Campaign that the majority of the electorate is opposed to abortion. This is probably reflected in the political parties, but unfortunately *not* in the media. Thus politicians against a referendum are hailed as courageous and progressive—even when they are purposefully vague about their actual views—while politicians holding the anti-abortion viewpoint are craven and fundamentalist. Politicians being politicians, the media pressure has been a major factor in preventing another amendment.

Why this almost-unanimous media stance? Why so few conservative journalists, and not one leader-writer to articulate the need for a referendum on abortion? It is a never-ending debate, and answers are as numerous as they are inconclusive. Perhaps a main reason for the prime media’s one-sidedness is the lack of diversity in the ownership of Irish newspapers.

The large majority of Irish newspapers are owned by Tony O'Reilly (Chief Executive of the Heinz Corporation). The entire O'Reilly stable of papers is firmly in favor of legislating to allow abortion. Add to this the daily *Irish Times*, also, as it happens, against a referendum, and there is little print space left for those advocating legal protection for the unborn.

Nor are these newspapers united only in their opposition to a referendum. They also mistrust Fianna Fail and the Catholic church, support more state control of schools, are all in favor of divorce (which was accepted by the narrowest margin possible by the electorate, despite this media consensus), and last but not least, are suspicious of nationalism in the context of the Northern Ireland dispute.

This leaves a gap in the market for a newspaper proprietor who is prepared to take a more conservative stance. Since the free market abhors a vacuum, someday this may happen, and the print media will balance itself out. The sooner it happens, the better for the pro-life movement!

The other side of the media coin is the broadcast media. The State broadcast service, RTE (*Radio Telefis Eiream*), follows the example of the print media, but in a more subtle manner. For example, the day the Pro-Life Campaign held a news conference to publish its proposed wording for an amendment, RTE's morning radio news program carried a feature from its U.S. correspondent about anti-abortion protesters in the United States and the violent tactics that some employ. The feature was carried again, with appropriate footage of explosions outside abortion clinics, on the various TV bulletins.

Much more *topical* coverage of the U.S. abortion debate would have been a report about Ron Fitzsimmons of the National Coalition of Abortion Providers. Mr. Fitzsimmons' admission that he lied about the numbers of partial-birth abortions being carried out in America each year to give President Clinton an excuse to veto a ban against this dreadful procedure was *not* seen as suitable matter for a report on the American abortion debate. Amazingly, the entire controversy over partial-birth abortions in the U.S. has been *ignored* by the Irish media.

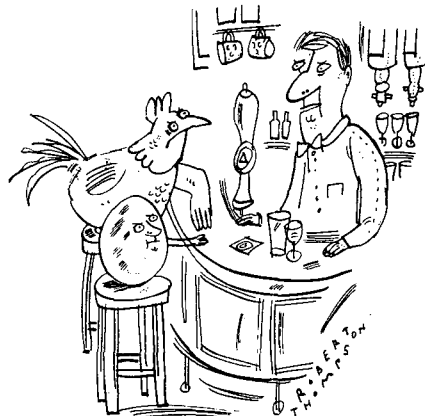
Despite all this, the Pro-Life Campaign continues to make its presence felt. As one journalist wrote, "The thought of [politicians] yet again being targets, in the middle of a general election campaign, of the most sophisticated, persistent, dedicated and organized lobbyists this country has probably ever seen [fills the politicians] with apprehension."

That at least introduces a note of equality into the situation—even if only equality of apprehension. Politicians are worried because their two

DENIS MURPHY

options—legislation to allow abortion or a referendum to prohibit it—are both contentious, yet they must choose one side or the other. Liberals fear that the authorities will prosecute the clinic at the center of the abortion allegation, and thus focus the argument on the rights and wrongs of killing babies, a debate which they can only lose. Pro-lifers wonder if they can mobilize enough support to overcome both the hostility of the media and the caution of the politicians.

It is a tautly balanced situation. The status quo is untenable, but there is not enough *political* support for a referendum and not enough *public* support for legislation. Thus all sides are digging in for a showdown. The politicians are burrowing deep, hoping that the center will hold—if not, they fear, anarchy will be loosed upon them. The pro-choicers are pushing hard to win back the ground they have obviously lost in recent months. And the Pro-Life Campaign is working for that extra nudge of momentum to bring on the referendum—theirs is a case of keeping one's nerve and fighting with skill and tenacity to tip the outcome the right way. The Chinese curse, "May you live in interesting times," has been visited upon Ireland.



'OK, who came first?'

THE SPECTATOR 17 June 1995

Some Post-Christian Realities

Alexandra Colen

In March of this year, yet another body of a cruelly murdered child was found in Belgium. It was the corpse of nine-year-old Loubna, who was abducted, sexually abused, tortured, and murdered five years ago. Loubna is victim number five, after Julie, Melissa, An and Eefje. About a dozen other children (mostly girls but also a few boys) are still missing. Some of them disappeared as long as twenty years ago.

A colleague of mine is a member of the Parliamentary Commission set up to investigate what went wrong in the judicial inquiry into the child-abuse cases. He says that the Belgian authorities expect to find more corpses in the near future. Thus, by the time you read this, Belgium will possibly have attended yet another funeral for a child who was sadistically abused and murdered.

Let me introduce myself: I am a politician, a member of the Belgian Parliament, and a mother of five, three girls and two boys. My eldest child is thirteen, my youngest five. When Loubna was found and the details of her death emerged, it made me physically ill. Many parents in Belgium feel sick these days and, unfortunately, it seems that our predicament has not yet ended.

The sewers of Belgium started opening last August when police officers succeeded in rescuing Sabine and Laetitia, two young girls of twelve and fourteen, who had been kidnapped during the preceding months. The girls were liberated from a dungeon where they had been kept as living sexual toys for perverts. Soon after the discovery of Sabine and Laetitia, they found the bodies of Julie and Melissa, two eight-year-old girls who had been abducted in June 1995. They had been locked up, then violently raped and tortured for months before they were finally starved to death (evidently in February, 1996).

In September 1996, a month after the gruesome discovery of Julie and Melissa, the bodies of An and Eefje were found. These young women, seventeen and nineteen years old, had also been abducted in August of the previous year. The police never disclosed the terrible things that happened to them, nor in what circumstances they died. Possibly the authorities think that Belgians will not be able to stomach the horror?

Alexandra Colen, a member of the Belgian Parliament, is the mother of five young children, and a former lecturer (in Linguistics) at the universities of Ghent and Antwerp.

The only thing we know is that An and Eefje had been kidnapped, abused and finally murdered by the same gang that abducted Julie, Melissa, Sabine and Laetitia.

This gang was led by a man called Marc Dutroux, who had a record of sexual abuse. He had been convicted and sentenced (in April 1989) to a 13-year prison term for the rape of five children and the sexual torture of an elderly woman. In view of his “good conduct” in jail (no potential victims *there*), his term was shortened. This was compounded by an amnesty granted by the King of Belgium, which led to his being released in April 1992. Americans may find it hard to believe what happened next—but then you do not live in a welfare state.

What happened was that after leaving prison, Marc Dutroux applied for and received official invalid status, which entitled him to generous welfare benefits. Dutroux claimed that his imprisonment had led to psychological damage, which meant that he, a former electrician, would never be able to work for a living again. As a consequence, together with Michelle Martin, his wife and accomplice (in kidnapping children and locking them up, though not in sexually abusing them), he received a monthly check of 80,000 Belgian francs (\$2,700!) from the Belgian welfare system.

Part of this money was used by Dutroux to build cells in some of the cellars of the eight (!) houses he owned. He needed the cells to imprison girls. This was common knowledge to some of his friends, one of whom duly informed the police authorities in October 1993. However, the police did not react. After the first girls had been abducted, it took more than one full year before the police started to consider Marc Dutroux as a serious suspect. He was arrested rather coincidentally because a nun, whose hobby it was to learn license plates by heart, remembered having seen his car near the place where Laetitia had been abducted. As a result, police were able to release Sabine (kidnapped on May 28, 1996) and Laetitia (kidnapped on August 9) alive from Dutroux’s dungeons last August 15th.

Shortly after the arrest of Dutroux and his wife, a Brussels businessman, Michel Nihoul, was arrested. It is not clear whether Dutroux kidnapped the children on the orders of Nihoul or whether Nihoul was just a “customer” who rented or bought girls from Dutroux. Nihoul was involved in organising sex parties for all kinds of perverts in high places, such as the army, the police, the judiciary, and political and media circles.

Rumours about sex parties, the so-called “Pink Ballets” (*les Ballets Roses*), have been rampant in Belgium for about two decades. The names of prominent politicians and even the present Belgian King, Albert (who

succeeded his brother in 1993 and used to have a reputation for being a playboy), had been mentioned in this connection, but nobody had ever been able to prove anything. Rumours about the "Pink Ballets" persisted, but many journalists denounced them as being the Belgian political equivalent of the Loch Ness monster. Though some claim to have seen its shadow, serious people do not believe it exists.

Victim number five, Loubna, was kidnapped by a car mechanic, Patrick Derochette, on a sunny afternoon in August, 1992, when the nine-year-old girl was on her way to a grocery shop and walked past Derochette's garage, one street away from where she lived. Like Dutroux, Derochette also had a criminal record for sexual perversities involving children. He had previously raped four boys and had spent seven weeks (yes, not even a full two months!) in prison for these crimes because doctors claimed he was some kind of a lunatic who could not help his behaviour. He raped Loubna but claims that her death was an accident because she fell and hit her head against an iron trunk. He then hid her body in the trunk and kept it in the basement of his garage for five years. One witness, however, a school friend of Loubna, claims that she saw the girl two weeks after her disappearance in Derochette's car. The police never took this witness seriously and did not bother Derochette until the whole inquiry into Loubna's disappearance was done over again early this year. Her body was found in Derochette's iron trunk on March 5.

If the witness is right, Loubna was probably also used as a child prostitute for some time. The police have discovered that Derochette knew Michel Nihoul. They both visited the same sex bars and Nihoul got his petrol at Derochette's garage.

The Belgian police are currently also investigating satanic sects. It is possible that Nihoul was involved in satanic ceremonies, and it is certain that some of the members of the Dutroux gang had "business contacts" with satanic groups. It is not clear whether the participants in satanic orgies took their satanism as a serious religion or whether some of the sex parties were just dressed up as satanic rituals in order to give the perverts an added kick.

The Belgian authorities started an investigation into satanic sects after the police found a letter from a satanic high priest to Bernard Weinstein, one of Dutroux's two accomplices in the kidnapping of children (Mrs. Dutroux being the other). The letter asked for a "delivery" in order to be able to perform the rituals of Walpurgis Night. The delivery is believed to refer to young children needed as sacrifices in a black mass.

There are many rumours concerning the satanic sects. Some claim that female sect members were deliberately impregnated so that their newly-born children could be killed on satanic altars. To me as a mother, this sounds so fantastically horrible that I pray it isn't true. If it *is* true, however, I doubt whether Belgians would be very much surprised after the *other* truths they have been forced to face (Perhaps that Loch Ness monster really exists!). For instance, some of the police officers questioned by the Parliamentary Commission confirmed that there have indeed been "Pink Ballets." Now, by taking the rumours about the sex orgies seriously, the authorities are on the brink of a breakthrough in the investigation concerning the so-called "Crazy Brabant Killers," a murderous gang that killed 29 people in Brabant, the province surrounding the Belgian capital of Brussels, in the early and mid-1980s.

The Crazy Brabant Killers got their name because, at the time, nobody had a clue as to what their motives could be. The gang specialised in robbing supermarkets in broad daylight. The booty was always very poor, but that did not seem to bother them. The reason why they committed their crimes, apparently, was the thrill they got from slaughtering every supermarket shopper in sight. They shot everyone, children included, sometimes killing up to eight innocent shoppers or passers-by in one go. It started with the murder of twelve people at various occasions in late 1982 and early 1983. Then the wave of terror subsided, only to be followed by a new wave in the Fall of 1985, resulting in the death of 17 victims. Then it stopped.

The investigation into the Crazy Brabant Killers got nowhere. Strange things happened. Officers who were making progress in the case were taken off it, and substantial evidence disappeared from the files, never to be found again. Today, almost twelve years later, the key to the mystery seems to have been found. A scrutiny of the gang's victims could be linked to the "Pink Ballets." The apparently random killings of the Crazy Brabant Killers had been a cover-up for eliminating dangerous witnesses of sex parties (probably with minors—orgies among consenting adults are not illegal under Belgian law).

This discovery has prompted the authorities to investigate the whole dossier again, but whether this will lead anywhere is doubtful, because many sensitive documents have been lost. "There used to be a photo in the judicial files of an army general, stark naked during one of the Pink Ballets," one investigator told the parliamentary committee last February. "I know it because I have seen the picture. But now it is gone. We cannot find it anywhere." Tapes, too, and typed-out transcripts of police inter-

views have gone missing, as well as a list of people who had allegedly attended sessions of the Pink Ballets.

Now that the sewers have opened and the stench is there for all to smell, it is no wonder that ordinary Belgians have lost confidence in their judicial and political authorities. It is generally assumed that the incompetence of the authorities to solve the mystery of the Crazy Brabant Killers, the Pink Ballets, the satanic orgies—and the reason why it took years to arrest Dutroux, Nihoul and Derochette—has to do with the fact that these criminals were protected by very high circles. On October 20 last year, over 250,000 of Belgium's ten million inhabitants took to the streets of Brussels for a silent march, carrying white flowers and white balloons, and demanding that justice be done, morality restored, and children protected. The "White March" was one of the most impressive demonstrations that Belgium, and possibly the whole of Europe, had ever seen. Not one slogan was shouted, but the silence of the demonstrators resounded louder and more clearly than a million words or cries.

Some people did, however, carry banners in the White March, and there were some incidents at the beginning. Banners of political parties were objected to and had to be put away. But also banners demanding protection for all children, including the unborn, had to be put away. Not all the protesters demanding protection for Belgium's children were willing to demand protection for unborn children as well—some even took it as an insult to dare to suggest such a thing!

In November, shortly after the White March, it was revealed that the second-highest politician in the country, Vice Premier Elio Di Rupo, is a promiscuous homosexual with a preference for adolescent boys. Di Rupo, a prominent leader of the Belgian Socialist Party, did not deny that his sex life consists of a series of one-night stands with young men, often prostitutes that he or his chauffeur pick up from the streets. But he was able to shift the debate to the question of whether he had had sex with boys of under or *over* sixteen years (the former being illegal, the latter legal under Belgian law). No one could prove the former and the (aptly titled?) Vice Premier got away with it when his Socialist Party threatened to bring down the government if Di Rupo were forced to resign—the Christian Democrats of Premier Jean-Luc Dehaene gave in. More, a few weeks later the government declared its intention to lower the age of sexual consent from sixteen to *fourteen*. And the people, who had given such a powerful cry for moral rectitude during the White March, did not really seem to care!

I mentioned above that I was physically sick on the evening that poor Loubna's body was found and the details emerged of how she had died and lain dead for years only two streets away from her home in a building that her agonised parents passed nearly every day. Earlier that same day, I had given a press conference to condemn a 16-week abortion (illegal in Belgium, where abortion is only permitted up to twelve weeks). It had been subsidised by the Belgian welfare authorities because the mother claimed that having a child would make it difficult for her to complete an occupational training course. The welfare authorities considered this to be a good reason for an abortion—never mind that it was illegal—and, as the woman could not pay for it herself, they decided to pay for it with taxpayers' money.

As a Belgian taxpayer, I felt cheated. We pay our taxes to the welfare state to enable it to *defend* our children, which it does not do. Instead it uses the money to kill other children. But, again, the public did not seem to bother. Although an unborn child was killed and although the abortion was illegal under Belgian law, the press and the authorities defended the decision to "help" the woman, and most people seemed to accept it.

The contrast between the outcry over the deaths of the pedophiles' victims and the acceptance of abortion, even beyond the limits of the law, calls for some reflection. Julie, Melissa, An, Eefje, Loubna and the other children whose bodies are still missing, died because they had fallen into the hands of evil men who did not respect them as unique human beings, but regarded them merely as objects for the satisfaction of their perverted sexual lust (perverted, because sexual lust for children is abnormal).

In an abortion, the child is not the object needed to satisfy (normal) sexual desire, however lustful, but it is the object that can result from the satisfaction of it. And though one may argue that murdering a living child in order to fulfill a perverted sexual lust is definitely worse than killing the unborn child resulting from normal heterosexual intercourse, it remains true that the unborn child is also killed and discarded as if it were merely an object.

Indeed, the unborn child *is* regarded as no more than an unwanted side-effect of intercourse, the intercourse being seen as an end in itself—even to the extent that it stands above the life of the child resulting from it. In this sense such sexual acts are also perverted in that the act and the pleasure it provides are elevated to something noble and worth pursuing, while the child is reduced to a discardable nothing.

The fact that ordinary people no longer seem to be appalled by abortion—and their ready acceptance of the concept of the "unwanted child"—

illustrates a terrible truth: the notion that there can be a discardable side-effect of sexual intercourse that is nothing more than a “problem” to the woman has become embedded in the collective subconscious of our society.

It is only a small step to the idea that the sexual act in itself is infinitely more valuable than the life of the child, or any sign of respect for the child, or for life itself. This idea underlies the statements of a vociferous group in our society, including not only militant feminists but also “educators” who propagate such thinking among our children.

There is also a second aspect which calls for some reflection. The children in Belgium were murdered by others than their parents and against the will of these parents. But unwanted unborn children are killed at the *demand* of their own parents. When we object to the latter, we are confronted with the question of what entitles us to do so. In ancient Rome, abortion was legal if the father (the *paterfamilias*) agreed to it. However, he was also entitled to kill the members of his household, such as his slaves and even his children. People were not regarded as unique human beings, but as part of the patrimony of the *paterfamilias*. They were objects and as such could be discarded.

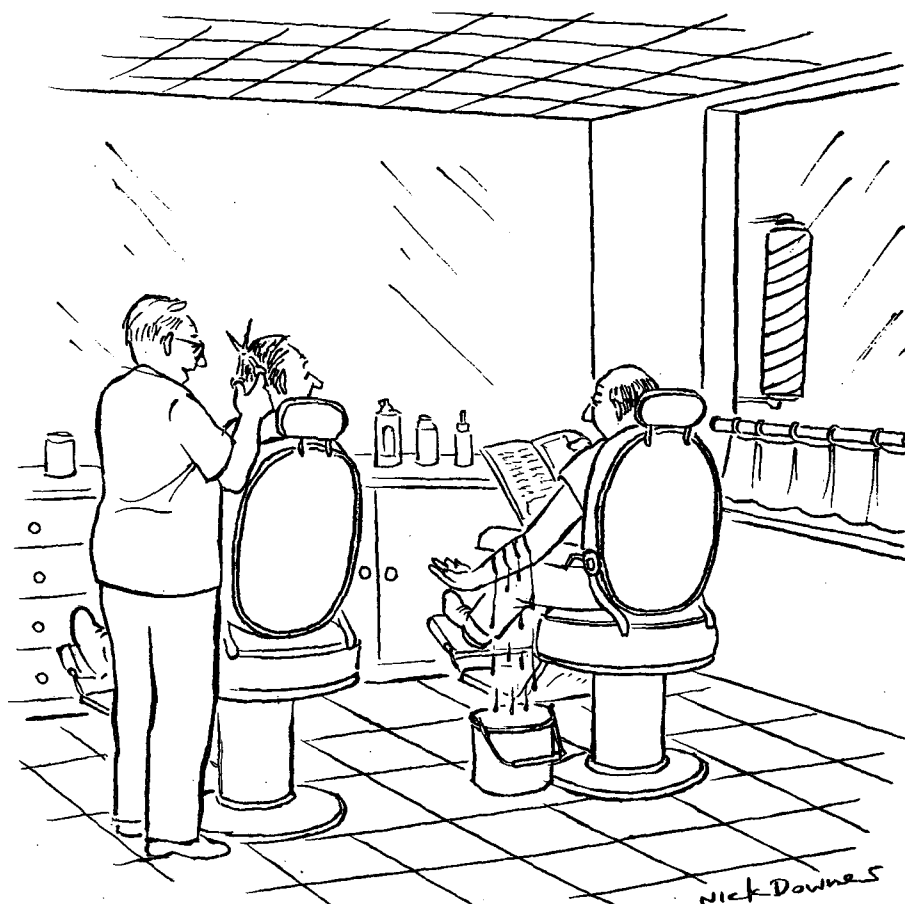
It was Christianity that brought a fundamentally different view of humanity. A human being no longer belonged to his master, but to God. Our society is gradually becoming a post-Christian society in which there is a return to the pre-Christian vision of man. The process is under way but has not yet fully completed itself. Hence, we object not only to the murder of Julie, Melissa, An, Eefje and Loubna, but also to the way in which they were raped and abused as objects for the satisfaction of sexual lust. But we do not object to using people as such objects when they consent to it. And we do not object to aborting unborn human beings. If this process continues, the day may well come when we will consider the crimes committed on the Belgian children as only infringements of their parents’ property rights!

The idea that children are the property of the parents also underlies the notion of the “right to have children” which is used to justify *in vitro* fertilization and surrogate motherhood. As in the case of abortion, the argument is twisted. If it is true that unwanted childlessness is a terrible affliction, it is true precisely because of the “outdated” paradigm of a child as a unique human being—the “old-fashioned” belief that it is a child which makes a couple’s love tangible and gives meaning to their unique “two in one flesh” relationship. Whereas the now-available reproductive

ALEXANDRA COLEN

technology reduces the child to a commodity which can be ordered, bought, "farmed" as it were, to fulfill the demand of the customers and owners, its parents.

I mentioned the rumours that Belgian women may have been impregnated only for the purpose of producing children to be killed as ritual sacrifices during black masses. I said that I pray this is not true—it seems too horrible—but also that I could no longer be surprised if it *were* true. Not only because in the past months Belgians have had to face all kinds of horrible truths which were unthinkable only a year ago, but also because such things would be totally consistent with the post-Christian horrors which are increasingly being accepted in our society.



'We're a very traditional barber shop.'

THE SPECTATOR 5 April 1997

60/SPRING 1997

“Inevitable” Assisted Suicide?

Don't Bet Your Life

Wesley J. Smith

Without question, the campaign to legalize “physician-assisted suicide” has been on a roll. Last year two U.S. courts of appeals ruled that laws prohibiting assisted suicide are unconstitutional.¹ As I write, both cases are on appeal to the Supreme Court, but several current opinion polls indicate that support for legalizing assisted suicide ranges as high as 70 percent.

Meanwhile, in Michigan, Jack “Doctor Death” Kevorkian has been acquitted of the crime of assisted suicide in three separate trials, despite his own insistence that he is guilty as charged.

Does all this mean that legalization is inevitable, just a matter of time? Not on your life. History shows that the more people dig beneath the surface and learn the *truth* about assisted suicide and euthanasia, the less they like it. Indeed, the few popular referendums on the issue that have been held in this country have all followed this pattern.

In 1991, Initiative 119, which would have legalized active euthanasia, was voted on in the state of Washington. Early polls showed popular support for the measure in excess of 70 percent. Yet, once opponents were able to focus the debate and present the in-depth reasons to oppose legalization, the initiative lost by 54-46, a precipitous drop of approximately 25 percent in popularity in just a few months.

Similarly, in 1992, California’s Proposition 161—a measure virtually identical to Initiative 119—began with more than 70 percent support. Once again, when the disturbing facts about euthanasia were presented in detail, voters saw the light and the proposal lost by the identical 54-46 margin. Even the 1994 passage of Measure 16 in Oregon, which legalized physician-assisted suicide (PAS) in that state, only passed with a bare 51% of the vote after initial polling again showed support of nearly 70 percent—the decline occurring despite what was generally considered an ineffective opposition campaign that many observers believe would have been successful had it been more aggressively run. Moreover, although it has been little noted in the media, four states—Virginia, Rhode Island, Iowa, and Louisiana—have passed laws outlawing assisted suicide after the passage

Wesley J. Smith, a California attorney, is the author of *Forced Exit: The Slippery Slope from Assisted Suicide to Legalized Murder* (Times Books/Random House).

of Measure 16. (For more, see my "Unnecessary Tragedy: Assisted Suicide Comes to Oregon," in the *Spring* 1995 issue of this journal.)

This general pattern should not make us sanguine, however. Measure 16 tragically proved the truth of the old *cliché* that close only counts in horse-shoes. If the law goes into effect, which as of this writing appears likely (a federal judge had ruled that Measure 16 was unconstitutional,² but a court of appeals recently overturned the verdict, stating that those opposed to the measure did not have the standing to sue³), it will not matter whether Measure 16 passed by one vote or one million votes; the state will cease to protect the lives of the weakest and most vulnerable Oregonians, permitting doctors to participate in the intentional ending of human lives.

Why the appeal?

Why does legalizing PAS apparently have broad, albeit shallow and changeable, popular appeal? Many streams have come together at this particular time to form the cultural river that nourishes what I call the "death culture." First and foremost, perhaps, is the elevation of personal autonomy as society's overriding value. It used to be that individualism, certainly a venerable American trait, was kept in perspective as one important value among several—such as our obligation to watch out for each other (communitarianism) and support in particular circumstances for policies that curtail individual behavior to benefit the common good (for example, laws prohibiting heroin use)—that traditionally formed the dynamic system of responsible American freedom that our founding fathers called "ordered liberty."

Today however, for many Americans, personal autonomy has become *the* overriding value, rather than one value among many. Knowing this, pro-euthanasia activists pepper their advocacy with the lexicon of individualism. This is planting seed in fertile ground: for many people, say the magic word "choice" and nothing more need be said; the argument is over.

Another driving force behind the euthanasia movement is the issue of "control." At the same time that "hastened death" is hoisted high as a banner of liberty, proponents exploit people's fear of death and the suffering that can accompany serious illness, promising that by choosing the time and manner of death the grim reaper will be somehow tamed. In this atmosphere, dying naturally, if it involves discomfort or time, is increasingly promoted as a "bad" death. On the other hand, hastened death is presented as empowering, courageous, and noble.

The increase in the popularity of euthanasia is also a vote of no confidence in the medical profession. Many supporters are afraid, nay terrified, at the prospect of being victimized at the hands of an out-of-control doctor, who

they fear will “hook them up to machines” and force them to suffer as cash cows lingering in an agonizing limbo until they die—or their health insurance runs out—whichever comes first. This is not irrational. Too many people have seen their loved ones allowed to writhe in pain that could have been relieved, too many have had their own suffering ignored, and too many have been treated impersonally and dismissively in their time of greatest need by “health care professionals.”

Then there is the issue of compassion, a virtue on which some euthanasia advocates claim a monopoly. By exaggerating the travails of disability and dying, proponents of legalized killing claim that all they seek to do is eliminate suffering, ignoring or downplaying the many dignified, compassionate and effective means that exist today to reduce or eliminate pain and suffering *without* eliminating the patient.

A less visible but especially dangerous force driving the euthanasia juggernaut is simply money. Our health-care system is quickly transforming from what is called “fee for service” in which medical professionals earn money by treating people, to a system dominated by for-profit health maintenance organizations (HMOs), in which money is made by health-insurance companies primarily by reducing costs. In an HMO, a penny saved is literally a penny earned. That is why legalized euthanasia would be especially profitable to the fast-growing for-profit HMO industry. Thus, it may not be coincidental that many nonprofit health-care foundations with ties to for-profit health care corporations finance behind-the-scenes propagandizing of the medical professions in favor of legalizing PAS.

The reporting is shallow

Underlying it all is a sense of despair and nihilism arising from the disintegrating communities and loss of common values we find all around us. Canadian newspaper columnist Andrew Coyne, reacting to the widespread public support of Robert Latimer (who killed his 12-year-old daughter because she was disabled by cerebral palsy), said it most eloquently and succinctly when he wrote: “A society that believes in nothing can offer no argument even against death. A culture that has lost its faith in life cannot comprehend why it should be endured.”⁴

All of these themes can be accurately and effectively rebutted, given the time, space, and audience attention that such an effort requires, a process perhaps best summarized by the word “depth.” Unfortunately, with people increasingly attracted to sensationalism, scandal, gossip, and the news as entertainment, depth has a low priority in our national discourse. Today, most people receive their information through the prism of media and

popular culture grown increasingly tabloid in nature and sensationalistic in tone, long on emotionalism and woefully short on detail, often lacking both the substance and context required for informed decision-making.

This has certainly been true of the euthanasia issue. News reports, entertainment programs, and articles which deal with euthanasia almost always present it in a sympathetic light as the “only” choice available to alleviate a desperate patient’s suffering. Popular television programs such as *ER*, *Homicide*, *Chicago Hope*, *Star Trek: Deep Space Nine*, *Star Trek Voyager* (in which we learn that Vulcans like Mr. Spock practice ritual suicide in old age) and *Law and Order*, just to name a few, have all aired programs with a euthanasia-sympathetic point of view.

Articles in popular magazines simultaneously present the same message, typified by an article in *The New Yorker* in which the writer extols his mother’s assisted suicide, concluding, “Having seen the simple logic of euthanasia in action and witnessed the comfort of that control, what astonishes me is how many people die by other means.”⁵ Meanwhile, the popular “family values” magazine *Ladies Home Journal* recently carried what it called a “roundtable” discussion of assisted suicide—but *nobody* around the table was *against* legalization!⁶

The news media is generally no better at plumbing the depths of the issue. Increasingly driven by ratings and circulation concerns, to an increasing degree a “good story” is seen as one that is short on depth and long on emotionalism. If a sick person is assisted in suicide by a doctor or family member, that’s *news*! Coverage focuses intently on the reasons the person wanted to die. Friends speak of his or her great suffering and courage in choosing suicide. At the same time, there is little (if *any*) investigation to discover whether the victim was receiving adequate medical care, proper pain control, or treatment for depression.

Most of the stories written about Jack Kevorkian’s “assisted” killings are cases in point. Take the reporting of the September 3, 1996 death of Jack Leatherman, 73, who had pancreatic cancer. Newspaper reports, such as the one in the *Boston Globe*, not only reported the death and the nature of Leatherman’s illness, but also printed the allegation by one of Kevorkian’s henchmen that “No amount of pain relief could control the pain that he was suffering,”⁷ a bogus claim that was *not* questioned or investigated. Had it been, reporters would have discovered that it was flat-out *wrong*: morphine pills are very effective in controlling the pain associated with pancreatic cancer, and in the rare event that opioids are insufficient to the task, a medical procedure can be performed to numb the nerve that transmits pain stimuli from the abdomen to the brain, thus eliminating all pain

caused by the cancer.⁸

Stories that highlight the reasons to oppose legalization, with a few exceptions, generally do not receive equivalent coverage. Nor, again with a few exceptions, are these stories presented with the same levels of emotional intensity of drama. Indeed, if hospice care helps someone die a dignified, natural death in comfort and surrounded by a loving family, unless the person is famous it won't make the news at all. If a cancer patient is no longer suicidal because he received effective pain control, that too is not news—it's the proverbial dog-bites-man story, it's "normal." More, if a patient is somehow coerced into an "early death," it rarely becomes a public matter, since the abuser will not be anxious for public exposure.

All this is like the "death of a thousand cuts" to the traditional sanctity-of-life ethic. With the media and the various organs of popular culture generally playing the same tune—and with opposition voices generally limited to reactions to a Kevorkian killing or otherwise muted to a discordant note in the deep background—the awesome power of repetition, like ocean waves breaking against a rock, contributes individually and collectively to the gradual erosion of the belief in the sanctity of human life and toward an accepting and sympathetic attitude among the general public toward euthanasia. In such a *milieu*, it is little wonder that many public opinion polls indicate support for legalization.

The battle over euthanasia and assisted suicide is too important to be left to such shallow public discourse. Legalized killing has gone from a theoretical possibility to a genuine and realistic probability, with Oregon's law permitting assisted suicide likely to go into effect. That being so, as the New York *Times* columnist Peter Steinfels put it, the time has come for a deeper debate that "would focus on a different set of questions," bringing with it a "more realistic" tone.⁹

What are some of the issues that would be presented in such a deeper national discourse? Here is a sampling:

Assisted suicide would not be limited to the terminally ill: One of the more glaring misconceptions about the campaign to legalize euthanasia is that it would be "limited" to the "terminally ill" after all other options for relieving suffering have been attempted. Despite the fact that only some—one in five—victims would have died naturally within a few months, Jack Kevorkian is often described in the media as a doctor who helps terminally-ill people to commit assisted suicide.

Similarly, the media described the Ninth Circuit Court of Appeals *Compassion in Dying v. Washington* decision, mentioned earlier, which declared assisted suicide a fundamental liberty interest, as applying "only" to

people who are “mentally competent” and “terminally ill.” Yet to read the Court’s opinion is to see that it explicitly opened the door to assisted suicide *for people with disabilities*, stating “. . . seriously impaired individuals will, along with non-impaired individuals, be the beneficiaries of the liberty interest asserted here.” According to the decision, killing could also be based on *financial* considerations—the Court was “reluctant to say that, in a society in which the costs of protracted health care can be so exorbitant, it is improper for competent, terminally ill adults to take the economic welfare of their families and loved ones into consideration.” The Court even opened the door for the killing of patients who are *incompetent* to make their own medical decisions (perhaps including *children*), stating in a footnote that “We should make it clear that a decision of a duly appointed surrogate decision maker, is for all legal purposes the decision of the patient himself.”¹⁰

Political advocacy in favor of legalization is pushing this same agenda. Look closely at the more recent pro-euthanasia articles and the terms “hopelessly ill,” “desperately ill,” or “incurably ill” are frequently being used in place of “terminally ill.” For example, Dr. Timothy Quill, one of the nation’s preeminent euthanasia advocates, has advocated that assisted suicide be permitted for patients with “incurable” and “debilitating” conditions associated with “severe, unrelenting suffering”—in other words, allegedly-hopeless illness. It is also important to note that as used by Quill, the term “suffering” is not synonymous with “pain.” Suffering can include such difficulties as the fear of future suffering, loss of dignity, and other such completely subjective criteria.¹¹

Likewise, when the *New York Times* editorialized in favor of legalizing assisted suicide in the wake of the facilitated killing of Myrna Lebov (a Manhattan woman who had multiple sclerosis) by her husband, George Delury, the *Times* stated that the Delury matter “strengthens the case for allowing qualified medical professionals to assist *desperately ill patients* with no hope of recovery to die with dignity.”¹² [*My emphasis.*] It is important to note that Myrna Lebov was indisputably *not* terminally ill.

So, who are the “hopelessly ill”? One common definition was published in the Summer 1995 issue of the journal *Suicide and Life Threatening Behavior*, based on a survey of psychiatrists who support the concept of rational suicide. By this definition, hopeless conditions “include but are not necessarily limited to, terminal illnesses, [maladies causing] severe physical and/or psychological pain, physically or mentally debilitating and/or deteriorating conditions [and circumstances where the quality of life is] no longer acceptable to the individual.”¹³ In other words, nearly every person

experiencing a serious malady, from arthritis, diabetes, and chronic migraine to chronic depression, schizophrenia, HIV, and Alzheimer's disease—you name it—would be entitled to euthanasia under the “hopeless illness” category.

If the American people knew the breadth and scope of the euthanasia movement's true agenda, support for legalizing killing would likely drop like a stone thrown from a bridge.

Legalized assisted suicide would be especially dangerous in the money-driven United States health care system: Ask people what they fear about end-of-life medical care, and most will say that they fear being kept alive involuntarily on machines long after the time had come to give up the ghost. Little noted in the debate over euthanasia is that the danger of such abuse is quickly *fading*. Why? Because, as I have already emphasized, our health care system is being transformed from the traditional “fee for service”—in which medical professionals earn money by treating people—to a system dominated by for-profit health maintenance organizations (HMOs), in which money is made primarily by *reducing* costs.

If killing seriously ill or disabled patients becomes a legitimate method of “treatment,” anyone who requires depth of care will be significantly endangered. Remember, for HMOs profits come from limiting costs, which means reducing services if possible. Imagine the money that could be saved by not treating cancer patients because they choose instead to be killed, or AIDS patients, or quadriplegics—this disturbing paradigm is one reason why managed care is now called “managed death” by those worried about legalized euthanasia in a health care system dominated by HMOs.¹⁴

To gauge the accuracy of this concern, we need only focus on the vise-like cost-cutting pressure already being placed on doctors at the clinical level. One of the hallmarks of HMO care is the dual role of the plan member's “primary-care physician” (PCP). The PCP (or for children, a pediatrician) is the plan member's personal doctor, in charge of preventive care, managing chronic conditions, providing inoculations, and the like. But the PCP also serves a function on behalf of the HMO as the “gatekeeper” in charge of controlling the cost of each patient's care.

It is the gatekeeper function that has so many physicians and consumer advocates worried about financial conflicts-of-interest between doctors and their patients. Here's why: doctors in many HMOs are paid individually (or as part of a small group) on a “capitation” basis—the PCP (or the group) receives a flat monthly fee for each patient, regardless of the frequency of care the patient requires. Some capitation payments are extremely low, as little as \$8 per month.¹⁵ So if a patient required four visits per month, the doctor would be paid only \$2 per consultation, a figure so low

that it could discourage depth-of-care. Some companies go even farther, imposing a compensation system in which the PCP is *personally* held financially responsible by the HMO for any referrals made outside his group, to specialists, or for tests. In such contracts, the PCP receives a higher-than-usual capitation payment, perhaps \$40 per month or so, but in return must *personally* pay for each patient's lab tests, consultations with specialists, and emergency care, up to a maximum per patient which may be as high as \$5,000 (after which the HMO pays).¹⁶ In a system where doctors lose money every time they refer a patient "out-of-house," they may be reluctant to allow their patients to consult specialists, including pain-control experts or psychiatrists—e.g., those crucial to the proper care of many dying or chronically-ill patients who, *without* such treatment, might indeed turn in despair to a "hastened" end.

Not coincidentally, Wall Street investors and for-profit HMO executives are getting rich from money made from draconian compensation controls that can be dangerous to their members' health. When Pacificare Health Systems, Inc., purchased FHP International, it paid \$2.07 billion¹⁷ for a company that had been valued at only \$32 *million* when it converted to for-profit in 1985.¹⁸ When U.S. Healthcare merged with Aetna Life & Casualty to form a huge HMO conglomerate, Healthcare's founder and chief executive officer, Leonard Abramson, gained a \$1 *billion* bonus! The average health-care CEO earned \$2.9 million in 1995. Several earned between \$8.8 and \$15.5 million per year,¹⁹ and that doesn't take into account stock dividends paid to investors.

With so much money at stake, people need to think about euthanasia in the HMO context. They should be asked to imagine what it would be like knowing that the doctor who is licensed to kill them also benefits financially from doing it! They should consider how they would feel if an HMO doctor recommended assisted suicide for their spouse or child knowing that the doctor could lose money by referring them instead to prolonged specialized care that is far more expensive than euthanasia.

With HMOs becoming the norm, the built-in danger to patients should doctors ever be "licensed to kill" is likely to significantly mute euthanasia's current siren song—indeed, it may be the most effective argument against giving doctors a right to "assist" suicides in a culture that is losing its belief in an objective concept of right and wrong.

Protective guidelines do not work: When faced with these and other concerns, euthanasia advocates have a ready response: "We will have protective guidelines to prevent abuse."

An in-depth discussion about guidelines would prove that they do *not*

protect. The experience of the Netherlands proves the point. Euthanasia is still *technically* illegal, but if “protective guidelines” are followed, doctors who kill patients are not prosecuted. These guidelines include:

- The request must be made entirely of the patient’s own free will and not under pressure from others.
- The patient must have a lasting longing for death. In other words, the request must be made repeatedly over a period of time.
- The patient must be experiencing unbearable suffering.
- The patient must be given alternatives to euthanasia and time to consider these alternatives.
- There must be no reasonable alternatives to relieve suffering than euthanasia.
- Doctors must consult with at least one colleague who has faced the question of euthanasia before.
- The patient’s death cannot inflict unnecessary suffering on others.
- Only a doctor can euthanize a patient.
- The euthanasia must be reported to the coroner, with a case history and a statement that the guidelines have been followed.²⁰

They may *sound* protective, but studies prove that the guidelines are completely ineffective. For example, a Dutch-sponsored study, generally known as the *Rommelink Report*, published statistics proving that physician-induced death accounts for nearly nine percent of the 130,000 annual deaths in the Netherlands. According to these statistics, in 1990:

- 2,300 people died as the result of doctors killing them upon request (euthanasia).²¹
- 400 people died as a result of doctors providing them with the means to kill themselves (physician-assisted suicide).²²
- 1,040 people (an average of approximately 3 per day), died from involuntary euthanasia, meaning that doctors euthanized them without their knowledge or consent.²³ Of these, 14 percent were fully competent,²⁴ 72 percent had never given any indication that they would want their lives terminated,²⁵ and in eight percent of the cases, doctors performed involuntary euthanasia despite the fact that they believed alternative options were still possible.²⁶ Moreover, in 45 percent of cases involving hospitalized patients who were involuntarily euthanized, the patients’ families had no knowledge that their loved ones’ lives were deliberately terminated by doctors.²⁷
- Another 8,100 patients died as a result of doctors deliberately giving them overdoses of pain medication, not for the primary purpose of controlling pain, but with the specific intent to cause death.²⁸ In 61 percent of these cases (4,941 patients), the intentional overdose was given without the patient’s consent.²⁹

The above statistics indicate that Dutch physicians deliberately and intentionally ended the lives of 11,840 people by lethal overdoses or injections in one year. The figures also indicate that the *majority* of all doctor-induced deaths in the Netherlands are involuntary—so much for “protective guidelines”!

And these statistics are most likely *conservative*: Dutch guidelines *do* require doctors to report all euthanasia and assisted-suicide deaths to local prosecutors, but in the great number of cases—to avoid duplicate paperwork and the scrutiny of authorities—doctors deliberately falsify patients’ death certificates, stating that the deaths are from natural causes.³⁰

The *Rommelink Report* generated so much criticism that the Dutch conducted another study in 1995. Most of the statistics cited above were consistent with the new finding. However, the new study indicated that 55 percent of all physicians interviewed indicated they *had* “ended a patient’s life without his or her explicit request” or that they “had never done so but that they could conceive of a situation in which they would.” While more doctors reported their euthanasia activities than had in 1990, a whopping 59 percent of all Dutch doctors violate the guidelines by failing to comply with this “strict” requirement.³¹ (This means, of course, that there is no true count of Dutch euthanasia-caused deaths.) Perhaps that is why the Dutch government is seriously considering weakening the reporting requirements!

Another reason why guidelines are irrelevant is that they are continually expanded over time. For example, in the 24 years that euthanasia has been a legitimate medical practice in the Netherlands, the guidelines have expanded to permit the killing of terminally-ill people, chronically-ill people, depressed people without organic diseases, and most recently babies born with birth defects based on “quality of life” considerations.³²

Here in the United States, Jack Kevorkian has also stated that he operates using strict “guidelines.” He and a small group of doctors have formed a group they call the “Physicians for Mercy” which published “protective guidelines” under which they claim to operate; requiring, for example, that people who wish to die because of a specified disease consult with a specialist in that condition prior to their life destruction, and that if pain is an issue, the person must be directed to a pain-control specialist. Yet, proving that guidelines are meant to be ignored, when Rebecca Badger wanted to kill herself because her purported multiple sclerosis (MS) pain was so severe, not only did Kevorkian *not* refer her to a pain specialist, there wasn’t even a referral to a specialist who treats the neurological disease. Moreover, the autopsy showed that Badger did not have MS or any other determinable disease. Similarly, Kevorkian’s guidelines promise that witnesses to his

assisted killings will not have a financial interest in the person's demise. Yet the woman who accompanied Lisa Lansing to her February, 1997 death in Michigan, widely believed to have been Kevorkian facilitated, was reportedly the sole beneficiary of Ms. Lansing's will, inheriting \$500,000 from her dead friend.³³

Protective guidelines give only the *appearance* of protection while offering no actual shelter from abuse. Worse, they act subversively to hide the truth about the victims of euthanasia. In short, guidelines serve no useful purpose other than to provide false assurances to the public. If that truth can be made to sink into the collective consciousness of the American public, the euthanasia movement should fade into obscurity.

Assisted suicide is a new form of oppression: At its core, all oppression is based on a division of human beings into different categories, some of whom receive special rights or greater protection than others because of a false belief that some humans are somehow better than other humans.

Oppression is especially insidious when formalized into law. The Jim Crow statutes in the Old South, which legalized discrimination based on race, are illustrative. They not only gave African-Americans short legal shrift, but they actively promoted a racist and oppressive culture by giving the states' *imprimatur* to bigotry, thereby encouraging and legitimizing the overt, extra-legal racism then common in Southern society. Thus the very laws that required segregated schools were essential ingredients in creating the oppressive climate that permitted and even encouraged lynching, even though technically such vigilante murders were against the law.

So too would it be if the state created a legal right to "rational suicide." While the laws' wording would be couched in terms of compassion and liberty, language does not always mean what it *says* ("separate but equal" was *not* equal). By making "rational suicide" a legally-recognized and enforceable right, the underlying message would be that all human lives are not of equal inherent worth, that some of us (the healthy, able-bodied, and relatively happy) are worth protecting, even from self-destruction, while others of us (the "hopelessly ill") are people whose lives are of such little use that their deaths are best for all concerned. The impact of this legalized *healthism* would be no different from the consequences that flowed from institutionalizing racism in the law—it would create a new rationale for culling humans into privileged and oppressed classes, thereby influencing cultural outlook as well as impacting upon the state's legal obligations towards its citizens. The "right to die" would become a duty to die. In other words, "rational suicides" would not only be permitted but actively encouraged—just as the societal message behind Jim Crow laws promoted

overt and covert racism.

Assisted suicide is unnecessary to alleviate suffering: It is not enough to be a naysayer about euthanasia; any in-depth discussion of assisted suicide must present positive alternatives. Happily, they exist in abundance.

First, unbeknownst to most people, almost all pain can be effectively controlled, including pain associated with arthritis, cancer, AIDS and multiple sclerosis. Indeed, regardless of the cause of pain, severity of condition, or type of disease, with proper medical treatment nearly every patient can have the pain eliminated or significantly reduced, adding tremendously to the quality of his or her life, and even its length.

The bad news is that doctors are notorious under-achievers when it comes to pain control. Many receive inadequate education in school and in continuing education about the subject. Doctors, like the lay public, also harbor excessive worries about addicting patients to drugs, or other side effects. Moreover, studies indicate that many doctors believe that only the severest pain requires treatment, thereby abandoning many chronic pain sufferers to their misery. Some doctors are insensitive to suffering, some do not take the time or effort to reevaluate their patients' pain on a regular and continuing basis, or indeed bother to *ask* their patients about their pain.³⁴ This being so, why should we trust doctors to kill us when many are doing a (generally) poor job of providing palliative relief?

Another point often overlooked in discussions about euthanasia is that dying people can remain "in control" by opting to die a peaceful and natural death with the assistance of hospice care. The goal of hospice is to provide whatever care patients need to enable them to die naturally (no efforts are made to prolong life), in peace, and with dignity. A typical hospice team includes a physician, nurses, social workers, psychological therapists and bereavement counselors, and volunteers. Since most hospice care occurs in the home (although there are hospice facilities), once a patient enters hospice, usually when the prognosis is life expectancy of 6 months or less, he or she can say good-bye to the impersonal hospitals and being "hooked up to machines" that so many of us fear during the dying process. Indeed, Dr. Carlos Gomez, a University of Virginia medical school professor and hospice doctor of international repute, says "We now have it well within our technical means to alleviate, to palliate and comfort and control the worst symptoms of those of our fellow citizens who are terminally ill."³⁵

The message of hospice is that each patient is valuable and important, that dying is an important stage of life that is worth living through and growing from—until death comes through natural processes. The euthanasia philosophy is just the opposite. By definition, euthanasia is a statement

that life is *not* worth living, that the answer to dying, disability, or other “hopeless illness” is to artificially induce death and “get it over with.” It is interesting to note a recent poll which showed that once people learned about the beneficence of hospice, support for legalizing assisted suicide fell some 20 points from the 70 percent range.³⁶

Disabled people also have resources to help them lead interesting and productive lives, for example, there are independent living centers all around the country. Take Mark O’Brien, the Berkeley, California journalist/poet who was the subject of an Oscar-winning documentary. Mark had polio at the age of six. He has been a complete quadriplegic for 42 years. The polio so profoundly disabled his musculature that Mark is dependent on an iron lung, rarely leaving the machine other than for a few hours a month when he is able to survive in a supine position on a ventilator, which allows him to be wheeled outside for an hour or so and to make personal appearances at lectures near his home. But almost his entire life is spent inside his yellow iron lung which dominates the small living room/kitchen of his one-bedroom loft apartment.

While Mark faces such considerable challenges, he enjoys life and lives it to the fullest—he is a published poet and journalist, and is writing his autobiography—in large part because of the independent-living movement: “Before I lived on my own,” O’Brien told me, “I was afraid my life wouldn’t amount to anything, that I couldn’t do anything, that I would never be able to contribute to society. But because of independent living, I now have my own career, work at it, and live my own life. Because of independent living, I paid income taxes for the first time in my life last year. Most disabled people could achieve at least partial self-sufficiency with the appropriate services made available to them.”³⁷

The drive to legalize assisted suicide and euthanasia is the most important public-policy issue facing the country. In a very real sense, how we decide the euthanasia controversy will determine the kind of society we live in—and the one we will leave to our children. Seen in this light, the issue transcends what may or may not be good or bad, right or wrong, for individuals. It literally defines who and what we are as a society and a culture. That is why it is imperative that those of us who believe that legitimizing and legalizing the killing of the most weak and vulnerable among us would be an immoral, dangerous and oppressive policy should work overtime to create the kind of in-depth public dialogue that can and will defeat this pernicious social agenda. After all, our own lives may *depend* on victory.

Notes

1. *Compassion in Dying v. Washington*, 79 F.3d 790; *Quill v. Vacco*, 80 F.3d 716.
2. *Lee v. State of Oregon*, 891 F.Supp. 1421.
3. *Lee v. State of Oregon*, United States Court of Appeals for the Ninth Circuit, No 95-35804, official cite not yet available.
4. *Toronto Globe and Mail*, "The Slippery Slope That Leads to Death," by Andrew Coyne, November 21, 1994.
5. *The New Yorker*, "A Death of One's Own," by Andrew Solomon, May 22, 1995.
6. *Ladies Home Journal*, "A Matter of Life or Death," January 1997.
7. *Boston Globe*, "Kevorkian Aid Ruled Homicide," (Reuters) September 4, 1996.
8. Board certified pain control specialist, Eric Chevlen, M.D., interview with author, September 6, 1996.
9. *New York Times*, "Beliefs" by Peter Steinfelds, February 8, 1997.
10. *Compassion in Dying v. Washington*, supra.
11. *New England Journal of Medicine*, "Care of the Hopelessly Ill: Proposed Clinical Criteria for Physician-Assisted Suicide," by Timothy Quill, Vol 327, November 3, 1992. See also Quill's book, *Death With Dignity: Making Choices and Taking Charge*, (W.W. Norton and Co., New York, NY, 1993), in which he urges that assisted suicide be made available for nonterminally ill people.
12. *The New York Times*, "Countdown to a Suicide," December 20, 1995.
13. *Suicide and Life Threatening Behavior*, "Empirically Based Criteria for Rational Suicide: A Survey of Psychotherapists," by James L. Werth, Jr., BS and Debra C. Cobia, Ed.D, Vol. 25(2), Summer 1995.
14. *Archives of Internal Medicine*, "Managed Care and Managed Death," by Daniel P. Sulmasy, OFM, MD, Vol. 155, January 23, 1995, p. 134.
15. *USA Today*, "When Doctors Become Sub-Contractors of Medical Care," January 22, 1996.
16. *Id.*
17. *Wall Street Journal*, "PacifiCare Health Agrees to Buy FHP International," by Rhonda L. Rundle, August 6, 1996.
18. Based on documents on file with the office of the California Attorney General.
19. *New York Times*, "Health Chief's Big Paychecks For Chopping Costs," by Milt Freudenheim, April 11, 1995.
20. *Regulating Death*, by Carlos F. Gomez, M.D., (New York Free Press, NY, 1991).
21. *Medical Decisions About the End of Life*, "Vol. 1: Report of the Committee to Study the Medical Practice Concerning Euthanasia." "Vol. II: The Study for the Committee on Medical Practice Concerning Euthanasia," the Hague, September 10, 1991. Known popularly as the *Rommelink Report*.
22. *Id.*
23. *Id.*, p. 15.
24. *Rommelink Report*, Vol. 2, P. 49, table 6.4.
25. *Id.*, p. 50, table 6.6.
26. *Id.*, table 6.5.
27. *Id.*, table 6.8.
28. *Id.* at 58, Table 7.2.
29. *Id.* at 72.
30. *L.Q. Review*, "The Law and Practice of Euthanasia in the Netherlands," by I.J. Keown, Vol. 108, pp. 67-68, note 16, 1992.
31. *New England Journal of Medicine*, 11/28/96.
32. For a detailed account of the degrading state of Dutch medical ethics, see *Seduced by Death*, by Herbert Hendin, M.D. (W.W. Norton & Co., New York, NY, 1996).
33. *Detroit Free Press*, "Officials Drop Suicide Probe," by Ariana E. Cha, February 12, 1997.
34. *The Journal of Oncology Management*, "Lessons From the First Year of a State Cancer Pain Initiative," by Judith S. Blanchard and Debra D. Seale, November/December 1993.
35. Testimony of Carlos F. Gomez, M.D., before the U.S. House of Representatives Subcommittee on the Constitution, April 29, 1996.
36. Gallup Poll, sponsored by the National Hospice Organization, October 1994.
37. Mark O'Brien, interview with author, August 5, 1996.

The Acceptable Time

Henry J. Hyde

When you have a theme as large and profound as ours is today, you need the help of great literature to describe the magnitude of the horror of partial birth abortion.

I suppose Edgar Allen Poe could describe it, but it's startling how the words of the ghost of Hamlet's father seem to anticipate our debate today:

*I could a tale unfold whose lightest word
Would harrow up thy soul, freeze thy young blood,
Make thy two eyes, like stars, start from their spheres,
Thy knotted and combined locks to part,
And each particular hair to stand on end,
Like quills upon the fretful porcupine . . .*

There is no member of this House who doesn't know, in excruciating detail, what is done to a human being in a partial birth abortion. A living human creature is brought to the threshold of birth; she is 4/5ths born, her tiny arms and legs squirming and struggling to live; her skull is punctured, and the wound deliberately widened; her brains are sucked out; the remains of the deceased are extracted. In the words of the abortion lobby, the baby "undergoes demise." What a creative addition to the lexicon of dehumanization.

If calling this infant a fetus helps you, if calling this obscene act an intact dilation and evacuation assuages your conscience, by all means do so—anything is better than a troubling conscience. But you must know that the only thing intact in this procedure is the baby—before, of course, the abortionist plunges his scissors into her tiny neck—then she's not very intact.

Something was "rotten in the state of Denmark," in Shakespeare's great drama. Something is rotten in the United States when this barbarity is not only legally sanctioned, but declared a fundamental constitutional right.

And while we are on *Hamlet*, who can forget the most famous question in all literature, "To be or not to be?" Every abortion asks that question, but forbids an answer from the tiny defenseless victim, struggling to live.

Henry J. Hyde of Illinois is the foremost opponent of abortion in the U.S. House of Representatives. This article is the text of his oration on the floor of the House on March 20, 1997, during the debate on the Partial Birth Abortion Ban Act of 1997. The measure passed by a vote of 295 to 136, which is the highest "pro-life" total ever recorded in the House.

When this issue was debated in the last Congress, the President and the defenders of partial birth abortion claimed that the procedure was, in the President's now-familiar euphemism, "rare," and that it was used only in times of grave medical necessity.

All of us know now—as many of us knew then—that those claims were lies. *They were lies.* The executive director of the National Coalition of Abortion Providers admitted on national television that he and others in the pro-abortion camp simply, flatly lied about the incidence of partial birth abortion.

It is not the case that these abortions are rare. It is not the case that this procedure is only used reluctantly, and in extremis. It is not the case that this procedure is used only in instances of medical emergency.

Partial birth abortion—infanticide, in plain English—is business-as-usual in the abortion industry. *That* is what the executive director of the National Coalition of Abortion Providers has told us.

Is this House prepared to defend the proposition that infanticide is a fundamental constitutional right?

Partial birth abortion is not about saving life. Partial birth abortion is about killing. Killing is an old story in the human drama; fratricide scarred the first human family, according to *Genesis*. But the moral prohibition on killing is as old as the temptation to kill. Most of the familiar translations of the Bible render the commandment, "Thou shalt not kill." A more accurate translation of the Hebrew text would read, "Thou shalt not do murder."

Which is to say—thou shalt not take life wantonly, for purposes of convenience, or "problem-solving," or economic benefit, nor trade a human life for any lesser value.

The commandment in the Decalogue against "doing murder" is not sectarian dogma. Its parallel is found in every moral code in human history. Why? Because it has been understood for millennia that the prohibition against wanton killing is the foundation of civilization.

There can be no civilized life in a society that sanctions wanton killing.

There can be no civil society when the law makes the weak and the defenseless and the inconvenient expendable.

There can be no real democracy if the law denies the sanctity of every human life.

The Founders of our Republic knew this. That is why they pledged their lives, their fortunes, and their sacred honor to the proposition that every human being has an inalienable right to life.

Our Constitution promises equal protection under the law; our daily pledge is for liberty and justice for all; where is the protection, where the justice in partial birth infanticide?

Over more than two centuries of our national history, we Americans have been a people who have struggled to widen the circle of those for whom we acknowledge a common responsibility. Slaves were freed, women were enfranchised, civil rights and voting rights acts passed, our public spaces made accessible to the handicapped, social security mandated for the elderly—all in the name of widening the circle of inclusion and protection.

This great trajectory in our national experience—that of inclusion—has been shattered by *Roe v. Wade* and its progeny. By denying an entire class of human beings the protection of the laws, we have betrayed the best in our tradition. We have also put at risk every life which someone, someday, somehow, might find inconvenient. “No man is an island,” preached the Dean of St. Paul’s in Elizabethan times. He also said “Every man’s death diminishes me, for I am involved in mankind.”

We cannot, today, repair all the damage done to the fabric of our culture by *Roe v. Wade* and its progeny. We cannot undo the injustice that has been done to 35 million tiny members of the human family who have been summarily killed since the Supreme Court, strip-mining the Constitution, discovered therein a fundamental “right to abortion.” But *we can stop the barbarity of partial birth abortion*. We *can* stop it, we *must* stop it, and we diminish our own humanity if we fail.

Historians say that we live in the bloodiest century of human history: Lenin, Stalin, Hitler, Mao, Pol Pot—the mountain of corpses reaches to the heavens, and hundreds of millions of innocents cry out for justice. We can’t undo the horrors inflicted on the human spirit—we can’t repair the wounds already sustained by civilization—We can only say, “Never again.”

But in saying “Never again,” we commit ourselves to defend the sanctity of life. In saying “No” to the horrors of the twentieth century slaughter, we solemnly pledge not to “do murder.” Because the honoring of that pledge is all that stands between us and the moral jungle.

Mr. Speaker, distinguished colleagues of the Congress:

We have had enough of the killing . . .

The constitutional fabric has been shredded by an unenumerated abortion license, which, sad to say, includes the vicious cruelty of partial birth abortion.

The moral culture of our country is eroding when we tolerate a cruelty

HENRY J. HYDE

so great that its proponents don't even wish us to learn the truth about this "procedure."

The Congress has been blatantly, willfully, maliciously lied to by proponents of the abortion license.

Enough. Enough of lies. Enough of the cruelty. Enough of the distortion of the Constitution. *There is no Constitutional right to commit this barbarity.* That's what we are being asked to affirm.

In the name of humanity, let us do so, and in the words of Saint Paul: NOW is the acceptable time!

APPENDIX A

[Both of the following columns were first published in The Sunday Telegraph of London on March 2, 1997. The writers are well-known in Britain: Mrs. Ellis as a popular novelist and commentator on social and religious affairs, and Dr. Le Fanu as an expert on a wide range of medical and scientific matters. The first is reprinted with the kind permission of Mrs. Ellis, the second with permission of the newspaper (© Dr. James Le Fanu, 1997)].

Why I do not want a clone of my dead son

Alice Thomas Ellis

When I read last week that it might become possible to clone human beings, for a fantastic moment I saw myself, in great detail, in the graveyard with the diggers and the man from the Home Office, who I believe must be present on these occasions, disinterring my child in order to salvage that morsel of his remains that could be used to remake him. I remembered once standing in the graveyard with a friend who said I must not grieve, for my son was in glory, and I said I didn't want him in glory, I wanted him *back*. Many other bereaved parents must have felt the same way; and many, this past week, will no doubt have thought about the possibility of cloning.

But most would have pulled themselves together, as I did. I knew that a being created from those arcane fragments in the graveyard would not be my son; not the child I gave birth to, and nursed and loved and watched die. I hope with all my heart and soul, and sometimes I believe (for faith is not a constant attribute like seeing or hearing), that I will be reunited with him, but a mere copy would be of no use to me and I do not know what use it would be to itself.

I would have died for him, but would not seek to replace him. Such an attempt, apart from being futile, would be an act of disobedience, worse than the sin of Adam: on a par perhaps with the sin of Lucifer who, we should bear in mind, hated humanity. My son died 20 years ago. He was 19. My 10-year-old grandson is named after him and is so like him that he sometimes wonders whether he might be his reincarnation. The idea is perhaps understandable in my family, where the likenesses from generation to generation are uncanny.

But there is no such thing as reincarnation. I have told my grandson that he is not a reincarnation of my dead son. I have told him that each of us is unique, freshly minted and not a recycling medium, a vessel for the spirit of another.

When we die we die. Those who remain must live without those who have gone. In the past, religious faith provided comfort to the bereaved; but now that faith and its consolations have been abandoned, people are looking for any sign that they can cheat death, or bring the dead back to life. "COULD WE NOW RAISE THE DEAD?" the *Daily Mail* asked on Friday over a story that spoke of replicated babies and cloned life after death.

Death is something of an obsession in my family, although I hope we are not

APPENDIX A

unduly morbid. Despite my religious convictions—Roman Catholic—I hate death, “the last enemy.” I hate it because it separates us and thereafter is utterly silent, and the person you loved more than your own life is no longer there.

I have heard various scientists and humanists—and to be fair the former sound on the whole rather more sensible than the latter—railing against the mean old god of Genesis who excluded us from Paradise, subjecting us to disease and death, and claiming, quaintly, since they are avowed non-believers, that man (and woman, of course) can restore Paradise to earth by his own endeavor and cunning. Curiosity, they say (which as all children know is what killed the cat), is humanity’s most valuable characteristic and will lead us on—but to what?

Cloning a sheep is not itself a matter of any great significance. All sheep are pretty much the same, and you can’t tell what they’re thinking. Dolly, the cloned sheep, doesn’t look any more disturbed than any other sheep. She is only a sheep, after all. The scientists try to reassure us that what happened to Dolly couldn’t happen to a human being. “Don’t worry,” they say, “cloning human beings is illegal.” “So is bank robbery,” say the rest of us.

If there is money to be made or power to be gained by any means or any discovery, then somebody somewhere will sooner or later use it to his own ends. Everyone knows this and it is tiresome to deny it. Progress consists of one step forward followed by a lot of falling over on the slippery slope, and as often as not undoing the consequences of what seemed like a good idea at the time: the internal combustion engine, nuclear fission, the construction of dams, the importation of apparently useful animals, the feeding of animal protein to herbivores. The compiling of lists would make an interesting, though depressing, party game.

Deny it as they may, the geneticists have now opened up the possibility of asexual reproduction, and the likely consequences should at the very least give us furiously to think. Already in the developed world sex is perceived as a means of recreation rather than of reproduction. Many couples want a “designer baby” with the minimum of inconvenience, pain or mess; such people would no doubt be quite happy to have a cloned child to replace any baby designed for them and then lost in an accident.

Meanwhile, the more self-satisfied might leap at the chance of acquiring a perfect copy of themselves produced from a rented womb, or—who knows?—a laboratory receptacle. No, no, say the scientists, such a nightmare could never come about . . . but they would say that, wouldn’t they?

It has been suggested, only theoretically, of course, that a clone might prove a useful source of transplant material for the original. Considering this possibility leads to some interesting questions. Presumably the clone would not be a mindless, robotic creature and might well have ideas of its own about this. What if the clone’s kidneys failed? Might it expect its “parent” to donate one or would it be in no position to make such a demand? What would its legal status be? A number of people have protested that there is no question of creating a subject, slave race, under the control of “real” humans, but the mere fact that such a

proposition has to be denied indicates that the notion has at least been toyed with.

We have always been fascinated by the idea of “making” people, as the unfading interest in Frankenstein’s monster proves. But it is not for us to make people. A family likeness is a gratifying bonus from nature and, usually, a pleasant surprise. If we start trying to arrange it for ourselves, however, then the element of surprise is gone and life will slither further down its current course to boredom, spiritual lifelessness and irritable speculations about what to do next.

I would cheerfully have died in the place of my son, in part to save myself the anguish of living on without him. But whether they intend it or not, the scientists who tinker with life may end up by denying us both our death and our anguish. In their world of virtual reality drug-induced ecstasy would probably be all that was left as consolation.

But of course it will never come to that—will it?

The outlook for Dolly is far from jolly

James Le Fanu

There is an inescapable impression that the momentum of genetic research is now unstoppable. To quote Sir Walter Bodmer, “one of Britain’s most distinguished geneticists,” in this paper last week: “There simply is no other field of medical research which has anything like the same promise . . . there can be no doubt of its enormous benefit to mankind.”

We might not like the sound of what they are up to, but in a week that has featured Dolly, the first cloned sheep, and warnings from insurance companies that anyone with “dud” genes can expect only limited coverage, it looks as if we are just going to have to adapt to this Brave New World.

But it’s all eyewash. Despite the billions of pounds that have been spent over the past decade, genetics is stuck up the proverbial gumtree. Indeed, it is precisely because genetic research has failed to deliver the goods that the hype surrounding it is so intense. The bubble of inflated claims is ready to burst.

Let us start with Dolly. In the science journal *Nature* this week, Dr. Ron James, managing director of a commercial company, BPL Therapeutics, describes how he inserted the nucleus (which contains the genetic material) of a cell taken from the mammary gland of sheep A into an unfertilised egg (whose nucleus had been removed) of sheep B and then implanted it in the womb of a foster mother, sheep C, to produce Dolly, a clone with the same genetic make-up as sheep A.

This experiment, says Dr. James, “opens up the possibilities of new treatment for cancer [of course] and inflammation . . . it will enable us to study genetic diseases for which there is presently no cure.”

This certainly sounds impressive, even if it is not at all clear how cloning a sheep will produce a treatment for cancer, but Dr. James’s experiment rang a few bells from my time as a medical student in Cambridge. I headed off to the library and within a few minutes found what I was looking for: a report of

APPENDIX A

precisely the same experiment performed on frogs by two doctors from the department of Zoology in Oxford, in a copy in *Nature* from December 1970.

Now when scientists claim as a major breakthrough the results of an experiment that has already been performed more than a quarter of century ago—albeit in a different species—one can only presume that genetic research is going nowhere fast. Indeed, Dr. James's experiment merely confirms what we already know: the multiple potential of the genes in each of the billion billion cells in a sheep's (or, indeed, a human's) body. But it is one thing to know that our genes have this potential, quite another to understand *how* they achieve it—and that, not surprisingly, has turned out to be rather elusive.

What has changed in the past 25 years is that scientists now know the chemical code of some of these genes, but the practical application of this knowledge is very limited. The simplest option would be to do something about the 4,000, mostly extremely rare, diseases due to a defect in a single gene—such as Huntington's chorea or cystic fibrosis.

It was hoped at one time that the dud gene could be readily identified, allowing the unfortunate victim to be “electively aborted,” but it has not turned out like that. There may be up to 250 abnormalities in the one gene that can all give rise to the same disease and, as logistically it has proved impossible to test for each and every one of these, the aspiration to identify and eliminate the less-than-perfect has proved something of a mirage.

The alternative option is “gene therapy”—removing the abnormal gene from a cell and replacing it with a normal one. The genetic code, when fully spelt out, will run to over 2,000 volumes, so for gene therapy to work, it will be necessary, as it were, to find the one page with the genetic misprint, tear it out, and replace it with a corrected page.

It can't be done. Two hundred trials of gene therapy over the past decade have, according to a report from the National Institute of Health in 1995, which has sponsored them to the tune of hundreds of millions of pounds a year, resulted in “no evidence of therapeutic benefit to patients—or even animal models.”

If this is the situation with the rare single gene defects, what is the hope of influencing much commoner diseases such as schizophrenia or arthritis? Certainly, many of these illnesses do have a genetic component, but the subtle interaction of many separate genes is involved. The notion that those at risk can be readily identified and aborted, or treated with gene therapy, is a fantasy.

This false portrayal of the possibilities of genetic research adversely influences society's moral tone, as scientists send out the message that traditional moral perspectives are outdated because we have moved into a new era in which man can control his destiny. But like the tale of the Emperor's clothes, the proposed benefits of genetics are illusory. The sooner this is realised, the better, as it will re-allocate moral arguments back to their appropriate place—not the sterile world of scientific determinism, but within the broad, rich stream of our common cultural heritage.

APPENDIX B

[The following first appeared as an On Society column in U.S. News & World Report (March 10, 1997) and is reprinted here with the author's permission. Mr. Leo is a contributing editor of U.S. News, and a nationally-syndicated newspaper columnist.]

The first crack in the wall

John Leo

So Ron Fitzsimmons can't stand it anymore. He wants us to know that he can't live with the untruths he told for the abortion cause. He's the executive director of the National Coalition of Abortion Providers, now saying he "lied through my teeth" on *Nightline* in November '95, when he "just went out there and spouted the party line" about how partial-birth abortions are rare and confined to serious threats to mother and fetus.

Oddly, Fitzsimmons is expressing moral anguish over quotes that hadn't reached the American people—his *Nightline* lies wound up on the cutting-room floor. But his statement makes it clear that he is really troubled by his participation in the broader campaign of untruths by defenders of partial-birth abortion.

"When . . . the leaders of your movement appear before Congress and go on network news and say these procedures are done in only the most tragic of circumstances, how do you think it makes you feel?" he asks, then answers: "Like a dirty little abortionist with a dirty little secret."

Along the way, Fitzsimmons paid tribute to my good friend Richard Cohen, the Washington Post columnist who retracted a column broadly defending partial-birth abortion, writing that he was wrong to take at face value the misinformation supplied by abortion groups. This is an example of how one honest man, an abortion-rights supporter, encouraged honesty in another, thus providing the first crack in the stone wall of movement propaganda.

Brutal candor. Astonishingly, most of the misinformation was an attempt to deny facts already put on the record by the two doctors best known for performing partial-birth abortions: Dr. Martin Haskell, owner of two Ohio abortion clinics, and the late Dr. James McMahon of Los Angeles.

In the early days of the controversy, both spoke with almost brutal candor about what they were doing. Haskell provided a vivid and detailed description of the operation, which became the basis of the now famous drawings of a baby half-way down the birth canal being stabbed in the skull with surgical scissors. Haskell said these drawings were accurate "from a technical point of view." But they were later repeatedly attacked by abortion activists as misleading.

McMahon said he had moral compunctions about the operation and considered the fetus to be a child at 20 weeks. In papers given to Congress, he made clear that he performed partial-birth procedures during all 40 weeks of pregnancy for a long litany of reasons, including cleft lip, maternal depression, and what he called "pediatric indications," which, he explained to a congressional

APPENDIX B

aide, meant that the mother-to-be was very young. Haskell, too, acknowledged that most of his partial-birth abortions were elective and that he stopped doing them at about 25 weeks. In a taped interview, Haskell told the *American Medical News* that the fetus was usually alive when the stabbing and brain suction took place. (Q: Let's talk first about whether or not the fetus is dead beforehand. Haskell: No, it's not. No, it's really not.)

Then, McMahon died, Haskell went into seclusion, and the abortion activists circled the wagons. Though the McMahon-Haskell testimony showed a great many procedures done on healthy mothers with healthy fetuses, the chorus of activists said otherwise. "It's not only a myth, it's a lie" that these abortions were done for minor defects such as cleft palates, said Kate Michelman of the National Abortion and Reproductive Rights Action League. Planned Parenthood said the procedure "is extremely rare and done only in cases when the woman's life is in danger or in cases of extreme fetal abnormality." Michelman made similar statements over and over, and much of the media fell into line. National Public Radio announced, for instance, that "Doctors resort to this rare procedure only for late-term abortions if the fetuses have severe abnormalities and no chance of survival." All untrue and well known inside the movement.

Activists began to insist that the fetus can't feel pain because anesthesia kills it peacefully. (Anesthesia "causes fetal demise," said Michelman. "The fetus dies of an overdose of anesthesia given to the mother intravenously," said Planned Parenthood.) But the American Society of Anesthesiologists debunked this claim as "entirely inaccurate."

Standards dipped so low that doctors started to deny quotes that reporters had on tape. Dr. Warren Hern, a Colorado specialist in late abortions, told Diane Gianelli of *American Medical News* that he "would dispute that [partial-birth abortion] is the safest procedure to use." Then, he went on *60 Minutes* and vehemently denied the quote, though Gianelli has a tape. Another Gianelli article quoted Haskell saying that 80 percent of his partial-birth abortions are elective. He wrote a letter strongly implying he was misquoted, but again Gianelli had a tape showing that he wasn't.

Fitzsimmons is right to separate himself from all this. It's a dishonest campaign aimed at keeping the truth from the American people.

APPENDIX C

[The following syndicated columns were issued on Thursday and Friday, February 27-28, 1997; Mr. Royko, who is based at the Chicago Tribune, is among the most widely-read nationally-syndicated commentators. (© 1997 Tribune Media Services. All Rights Reserved. Reprinted with permission.)]

News Media, Others Swallowed Abortion Lie

Hook, Line and Sinker

Mike Royko

When I started this job a few decades ago, a veteran columnist at the next desk offered advice. One rule was: "Never write about a subject when you're mad. Wait until you calm down."

Sensible words, and I usually try to follow them.

But on this day, there weren't nearly enough hours left until my deadline for me to calm down about a whopper of a lie that a public figure named Ron Fitzsimmons has finally admitted telling.

Fitzsimmons runs the National Coalition of Abortion Providers. And he says his conscience has nagged him into admitting "lying through my teeth" when he made public statements in 1995 that the controversial "partial birth abortion" was rarely used. And that it was used only when a woman's life was in danger or the fetus was already severely damaged. You probably remember the big debate on this issue. Those against this late-term procedure wanted it outlawed because they said it killed healthy, normal fetuses that were well into full development.

And the procedure is barbaric, they said. The fetus is partially delivered feet first, then a device is used to suck its brain out to collapse the head.

Fitzsimmons now admits that most such abortions are done on women who are healthy and fetuses that are healthy, but not because the woman is in danger or the fetus is unhealthy.

The abortion is performed for the same reason as other abortions: The woman wants it.

Fitzsimmons says he and others lied because the truth might have hurt the cause of abortion rights. They were right. If it hadn't been for those lies, eagerly accepted and passed along as gospel by the printed press and broadcast news, President Clinton would not have dared veto a bill that outlawed the procedure. And Congress wouldn't have buckled and failed to override his veto.

That's what is so infuriating: the silence of those in the medical field who know it was a lie but failed thunderously to refute it. And the willingness of the press to accept the lie and pass it along as fact. If more sheep are cloned, don't be surprised if some come out looking like modern journalists.

A few physicians spoke up. Two wrote a piece for the op-ed page of The Wall Street Journal that shredded the line peddled by people like Fitzsimmons. But they were ignored, probably because the Journal's opinion sections are viewed

APPENDIX C

by the rest of journalism as hopelessly conservative.

The press swallowed the lies like worms by a bass because the lies fit so neatly into what is sometimes referred to as a “world view” that is shared by those in the mainstream news media.

Part of that view seems to be that anyone who questions the need for the vast number of abortions performed each year is some kind of right-wing, bomb-tossing, gun-toting religious nut. So when those who present themselves as social progressives say that only women who face death and fetuses who face life as vegetables are involved in partial birth abortions, the press is comforted and lets it go at that. Heaven forbid that the newsroom should offend any of the “don’t tell me what to do with my body” crowd.

It isn’t the first big lie that the media have bought and resold.

Some years ago, gay organizations and public health people launched an intense “We’re All at Risk” campaign. This meant that we were all equally vulnerable to the threat of AIDS.

Common sense and existing evidence said otherwise: If you didn’t have anal intercourse with a man or borrow a needle from a dopehead, what put you at risk? But those who launched the propaganda campaign later admitted that they believed the fear would create sympathy for gays and spur increased spending on AIDS research.

Eventually, a few skeptical reporters shot holes in the campaign. But not until others who questioned it had been labeled bigots and homophobes. One journalist who wrote a book on the subject lost his newspaper job, and his book, despite impressive hardcover sales, couldn’t attract a paperback publisher. It was politically correct censorship.

More recently, there was the media hysteria over the burning of the black churches. Remember? Night riders were thought to be galloping all over the country, burning black churches. A massive racist conspiracy, possibly inspired by the oratory of political conservatives like Pat Buchanan. Clinton, concerned frown and all, visited churches and recalled similar evil arsons in Arkansas when he was a youth—memories that turned out to be pure fiction.

Proposals were made to use federal funds to rebuild churches. Rich do-gooders kicked in money to organizations that made the most victimization noise.

Turned out it was more smoke than fire. After the nation’s press spread the arson story, calmer heads took a closer look. Most of the fires weren’t arson. No conspiracy. Black arsonists as well as white arsonists were arrested, proving that a nut is a nut, regardless of color. It was as if no one in an American newsroom knew that an old wooden rural church can actually have bad wiring. Not when Jesse Jackson is dishing out hot quotes about the second coming of the Ku Klux Klan.

Now we have Fitzsimmons blowing the whistle on himself. His conscience? Or was it that the truth was going to come out anyway?

Maybe from people such as the anti-abortion physician who will be the subject of Friday’s column.

Doctors See Lies Behind Reasons for Late-Term Abortions

Leading abortion advocates are circling their wagons, and poor Ron Fitzsimmons, once one of them, seems to have been shoved outside the tight circle. Fitzsimmons is the conscience-stricken head of the National Coalition of Abortion Providers who now admits that he took part in telling Americans the big lie about so-called partial-birth abortions.

During the national debate on the late-term brain-sucking procedure, Fitzsimmons was one of many pro-abortion spokespersons and media dupes who assured the nation that almost all late-term abortions were done to preserve the health of the mother or because the fetus had serious abnormalities.

Now, Fitzsimmons said, "I lied through my teeth." And that most late-term abortions were done for the same reason as early abortions—because women wanted to end pregnancies.

Fitzsimmons' confession was barely out of his mouth when he was whopped by fellow abortion advocates, who held a news conference to say, in effect, that he was being truthful when, he now says, he was lying. But now he is lying when he says he is finally being truthful.

Typical was Kate Michelman, president of the National Abortion and Reproductive Rights Action League. She said: "If he thinks he lied, that's his problem to deal with. We have not lied."

Gloria Feldt, president of Planned Parenthood Federation of America, said Fitzsimmons had been "mixing up gestation with procedure."

Whatever the heck that means.

While they squabble about who did or didn't lie, let's listen to someone else for once—genuine physicians, rather than the pro-abortion lobbyists and other non-medical spin experts who seem to get all the invitations to yap on TV.

One is Dr. Pamela Smith, former director of medical education in obstetrics and gynecology at Mt. Sinai Hospital. She recently resigned that post to do anti-abortion public-health work in the community and practice medicine at the Lawndale Health Center.

The only thing that surprised her about Fitzsimmons' confession was that he made it.

"Most of the time, there is nothing wrong with the baby or the mother (when late-term abortions are performed)," she said. "People have known about this for a decade.

"There is a clinic in New Jersey that said of the 3,000 abortions it did last year, 1,500 were late-term.

"So we went from being told that only 200 a year were being done in the entire country to one clinic saying it does 1,500 a year. Obviously, the actual number (of late-term abortions) is in the thousands.

"The media believe what they want to believe. And because a lot of doctors

APPENDIX C

who have testified in support of the partial-birth ban have been pro-life, the knee-jerk response is that it is a pro-life/pro-choice thing.

"There's been all this propaganda that it is done only because women need it. So people said: 'If my wife needs to have this to save her life, she should have it.' The problem is that it is not this procedure versus your wife's life. It's really infuriating to me to hear that women medically need this."

One of the arguments for the late-term procedure is that it helps a woman preserve her fertility. Smith describes that as "fantasy."

The future-fertility risk was one of the excuses offered by President Clinton when he vetoed the bill that would have outlawed the procedure.

Clinton said: "There are a few hundred women every year who have personally agonizing situations where their children are born or are about to be born with terrible deformities which will cause them to die either just before, during or just after childbirth.

"And these women, among other things, cannot preserve the ability to have further children unless the enormous size of the baby's head is reduced before being extracted from their bodies."

Which is bunk, according to Dr. Nancy Romer, chairman of obstetrics at Miami Valley Hospital in Dayton and a clinical professor at Wright State University.

"I don't understand that argument about fertility at all," she said. "We have no idea what happens to women who have this procedure down the road. We don't have a clue. There is no scientific evidence that shows that procedure would be preferable over existing techniques. I question why it is not being taught or performed by the majority of people who specialize in these pregnancies."

As for the propaganda campaign that led Clinton to veto the bill outlawing the procedure, Romer believes she understands it:

"Those who opposed the legislation have a much broader agenda, and that is to have totally unrestricted access to abortion. They will defend abortion rights blindly, regardless of the facts of the matter. Any legislation, if it's anti-abortion, they are against it.

"They don't think 'Is this procedure appropriate, who is doing it and why are they doing it?' They don't care about the details. They won't acknowledge the truth of what we are saying because it defeats their larger agenda."

So the whole battle is going to be fought in Congress one more time. And if a bill passes and gets to Clinton's desk, maybe he can ask the CIA or the FBI to find out who is telling the truth before he makes any more somber pronouncements.

APPENDIX D

[The following columns ran in the Washington Times, the first on February 27 and the second on March 21. Mr. Greenberg is the editorial page editor of the Arkansas Democrat-Gazette in Little Rock. (Copyright, 1997, Los Angeles Times Syndicate. Reprinted by permission.)]

Partial truth abortions

Paul Greenberg

This year's session of the Arkansas legislature is still young, but it won't be easy for even legislators to produce a statement more striking than one state senator's explanation for his vote to keep partial-birth abortions legal. He said he'd reached the conclusion that "we had no business putting any threat to obstetricians . . . of a felony hanging over your head when you are trying to perform a lifesaving procedure to save the baby."

Why, sure. In a world in which life is death, why can't abortion be a lifesaving procedure to save the baby? George Orwell could explain it. What we have here is just one more entry in the annals of that newest and most advanced of the medical sciences, therapeutic killing.

It is hard to recall any story in the news that has been so replete with partial truths as partial-birth abortion. Maybe because, when ideology runs headlong into fact, it's the fact that must be explained away. But facts, as crusty old John Adams once noted, are stubborn things. It may take a while, but they have a way of intruding on even the most devoutly held orthodoxies. And what could be a more central article of the gliberal faith in the morally numb '90s than the unrestricted practice of abortion—any kind, any time, at home or abroad? Including the semi-abortion, semi-infanticide that's called partial birth.

But how could anyone, even a politician, think a partial-birth abortion might be confused with a medical procedure to save the life of, yes, *the baby*? For that matter, how could anyone, despite our president's rote recitation of the abortionist's creed, believe that partial-birth abortions could save the life or health of the mother?

Listen to the testimony of some professionals who ought to know—Dr. Nancy Romer, clinical professor of obstetrics and gynecology at Wright State University; Pamela Smith, director of medical education in obstetrics and gynecology at Mount Sinai in Chicago; and Dr. Joseph Cook, a specialist in fetal medicine at Michigan State:

"The latest baseless statement [in the abortion debate] was made by President Clinton himself when he said that if the mothers who opted for partial-birth abortions had delivered their children naturally, the women's bodies would have been 'eviscerated' or 'ripped to shreds' and they 'could never have another baby.'

"That claim is totally and completely false. Contrary to what abortion activists would have us believe, partial-birth abortion is never medically indicated to pro-

APPENDIX D

tect a woman's health or fertility. In fact, the opposite is true: The procedure can pose a significant and immediate threat to both the pregnant woman's health and her fertility. It seems to have escaped everyone's attention that one of the five women who appeared at Mr. Clinton's veto ceremony had five miscarriages after her partial-birth abortion.

"None of this risk is ever necessary for any reason. We and many other doctors across the U.S. regularly treat women whose unborn children suffer the same conditions as those cited by the women who appeared at Mr. Clinton's veto ceremony. Never is the partial-birth procedure necessary. . . . Sometimes, as in the case of hydrocephaly, it is first necessary to drain some of the fluid from the baby's head. And in some cases, when vaginal delivery is not possible, a doctor performs a Caesarean section. But in no case is it necessary to partially deliver an infant through the vagina and then kill the infant."

Dr. Clinton says he knows better, but some of us would prefer a second opinion. His rationalizations are but the latest for this particularly barbaric form of modern society's most unquestionable form of barbarism. (An allegiance to abortion became a litmus test for Supreme Court appointments circa 1993, the first year of the Age of Clinton.)

Why are there so many rationalizations for partial-birth abortions? Because every time one is exploded, another has to be invented. And ideology is nothing if not inventive.

In the early stages of this debate, we were all supposed to believe there was no such thing as partial-birth abortion; it was just another fantasy made up by anti-abortion fanatics. The National Abortion Federation said so. Later, when that line was seen through, the country was assured that such abortions are performed only on abnormal babies. In this age of eugenics, that was supposed to make it all right.

Joycelyn Elders, the former surgeon general, once testified that abortion "has had an important, and positive, public-health effect" because it had cut the number of Down syndrome babies born in Washington state by 64 percent. Abortion eliminated the syndrome by, of course, eliminating the babies.

Not that partial-birth abortions are used only to kill off the abnormal. That's just another myth, along with the one about the anesthesia killing the fetus/baby in a partial-birth abortion, not the scissors through the skull. The American Society of Anesthesiologists quickly put an end to that story, but not before it had needlessly terrified any number of pregnant mothers who were refusing epidurals during labor, or anesthesia during surgery, lest they kill their babies.

Then there was the widely circulated story that partial-birth abortions were strictly a late-term procedure used only in a handful of cases. Would you believe that in this instance the Public Broadcasting System actually performed a public service? Yes, a program called "Media Matters" on PBS found that partial-birth abortions numbered in the thousands, not hundreds, a year; that most were being done mid-pregnancy, not late-term; and that they were being done on healthy

mothers and their babies.

The essential purpose of partial-birth abortion is no different from that of the vast majority of the million and more abortions performed in this country every year: To kill the baby. And not all the mindless, meaningless euphemisms being used to justify partial-birth abortions—Reproductive Choice!—can disguise that one stubborn fact.

What, one wonders, will be the next highly imaginative rationale for this gruesome procedure to issue from the White House and other points on the cutting edge of medical science? There will surely be another because partial-birth abortion long since ceased to be a medical question; it's now an ideological one, and what ideology was ever deterred by mere fact?

Abortion debate fundamentals

It may have seemed that last week's debate over abortion was over a lie on the part of one of its ardent advocates. It wasn't. The debate really had little to do with information, no matter how new or old, true or false, revealing or condemning. The whole debate over abortion, which may be the crystallizing moral issue of our time, has little to do with medicine or statistics, and everything to do with attitudes and beliefs and the spirit of the times.

There was never any chance that this president would change his mind and support a ban on partial-birth abortions—no matter what new information had got to the public. This isn't about information.

For this administration, abortion isn't an issue; it's a test of allegiance. It's a principle, a belief, a dogma. It may be the linchpin of the culture of the '90s, which celebrates self-fulfillment, not duty to posterity; transient sentiment, not enduring principle; the promise of the present rather than faith in the future.

It's the Culture of Death. And if you haven't noticed it, just look around. ("When a Healer Is Asked, 'Help Me Die.'"—Page 1, Thursday's New York Times.) Ours is a culture that holds we can erase or avoid the moral issues—finesse them—rather than meet them, that we can escape the trials of life rather than grow stronger and wiser and more life-affirming for having passed through them.

Abortion is not just one more issue among many, somewhere between free trade and school uniforms. It is the central, connecting, defining issue of our time, just as slavery and civil rights once were. Abortion may be argued as long and ferociously as Americans once debated the nature of our response to the forces of fascism and communism, which in their time were also hailed as the wave of the future.

The first aspect of the old culture that must go is language. Verbiage always precedes homicide. As surely as Abortion became Choice. Soon the facts behind the words go, too. Doubtless the president had read about the revelations of one

APPENDIX D

Ron Fitzsimmons, a prominent advocate of abortion who admitted he lied through his teeth (his words) about the number of partial-birth abortions performed each year in this country. Thousands, he acknowledged. And not just in the last days of pregnancy. Or as one headline summed it up: "Abortion lie admitted: It's not so rare."

But that couldn't have been news to this president. He has always been well informed. He surely knew the board of the American College of Obstetricians and Gynecologists has found "no circumstances" under which a partial-birth abortion represents "the only option to save the life of the woman or preserve the health of the woman." No matter. He's sticking with the party line.

His rationale is simple, and familiar by now: The exceptions make the rule. If abortion is permissible in a few exceptional cases, it must be kept permissible in all.

It's been more than a year since the legislative council of the American Medical Association, in September 1995, voted—unanimously—to endorse a nationwide ban against partial-birth abortions. No matter. Our president is still for it, volubly. At his press conference, he explained that partial-birth abortion was a pro-life procedure. There are no verbal lengths to which Bill Clinton will not go on this issue.

On this subject, our most flexible of presidents is adamant, unyielding, a True Believer. This is a central, connecting, defining issue. You can tell because each side has its own, incompatible vocabulary—just as each side did during the Cold War. To be swayed by mere reason would be treason.

Abortion long since ceased to be a medical question. It's a political question. It's about competing values. It's about whether we should be able to destroy human life in order to shape ours in a way we would prefer. It's about what we hold sacred. It's about the culture.

The president knows his numbers. He has to have seen statistics like these: About one-third of women having late abortions attribute the delay not to health concerns but "to their reluctance to reveal that they were pregnant." More than 60 percent of these women/children under the age of 18 gave the same reason. That information was reported in a 1988 issue of *Family Planning Perspectives*, scarcely a pro-life source. The title of that article: "Why Do Women Have Abortions?" The answer: "Most of those who had delayed said the chief reason was that they had not recognized that they were pregnant early enough."

Family Planning Perspectives can make for disheartening reading. But surely no one is surprised by now to learn abortion has become a method of birth control in this country.

Note a typical survey of women who have had abortions. This one was conducted by the Alan Guttmacher Institute. Its namesake was one of the pioneers of Planned Parenthood, scarcely a pro-life outfit. And this is what it found:

Only 13 percent of the women surveyed said they had an abortion because they believed the fetus—a k a the baby—was unhealthy. Of those 13 percent,

THE HUMAN LIFE REVIEW

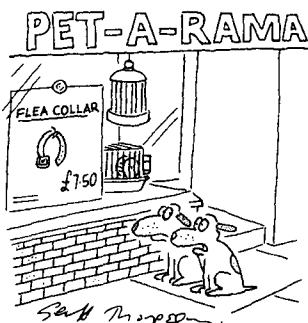
only 8 percent said they had been told by a doctor that the fetus had a defect or was abnormal. One percent of the women said they had an abortion because they had been raped.

The overwhelming percentage of women who responded to the survey cited these reasons for their abortions:

- Concerned about how having a baby could change her life.
- Can't afford baby now.
- Has problems with relationship or wants to avoid single parenthood.
- Doesn't want others to know she has had sex or is pregnant.
- Is not mature enough or is too young to have a child.
- Has all the children she wanted, or has all grown-up children.
- Husband or partner wants woman to have abortion.

Robert Bork drew the unavoidable conclusion in an article he wrote not long ago for the magazine, *First Things*: "The reasons more women give for having an abortion are 'social': a baby would affect their educations, jobs, lives, or they felt unable to handle it economically, their partners did not want babies, etc."

In almost all cases, abortion is a socioeconomic policy, not a medical decision. If it were still an operation to save the life of the mother, or even to avoid terrible consequences to her health, there would be little debate. Certain principles have been recognized in Western law, secular and religious, for centuries. But in the end this debate is not about medical procedures; it's about life and death, and which we will choose.



'Boy, imagine having fleas that size!'

THE SPECTATOR 20 April 1996

SPRING 1997/93

APPENDIX E

[The following column first appeared in *The New Republic* (February 24, 1997), and is reprinted here with permission (© 1997, *The New Republic, Inc.*). Professor Elshtain, who teaches philosophy at the University of Chicago, is the author of *Democracy on Trial*.]

The Hard Questions: Civil Rites

Jean Bethke Elshtain

What does Oklahoma City signify? Increasingly, we are asked to connect the horrible crime committed in that city with America's "culture wars"—a characterization to be resisted because war is what one does with opponents. This is not to say democratic politics will not be rowdy. Frederick Douglass proclaimed that those who want their politics polite "want rain without thunder and lightning." And there are difficult distinctions to be made. For instance, is peaceful lawbreaking in the name of a higher law a legitimate form of democratic conversation? Regardless of one's view of militant argument and nonviolent disobedience, though, they in no way lead to Oklahoma City.

But there are pundits who think otherwise. When criminals bomb a clinic, nonviolent pro-life protesters who operate well within the bounds of tough political debate find themselves under pressure to explain why their advocacy isn't a goad to bomb-making. Indeed, Richard Cohen, writing in *The Washington Post* last month under the headline: "WHEN MORALITY BEGETS VIOLENCE," asks us to collapse the distinction between advocacy and violence, and he does so, in part, by wildly exaggerating the threat to clinics. He writes: "Wherever there is a connection to abortion, there is always the possibility of violence."

But if you look at the thousands of family planning and abortion clinics in America and then at the incidence of violence, you readily discern that the possibility is remote and, according to the most recent available figures, actually declining. Any violence, of course, is unacceptable. But why up the ante? Why distort the dangers? I suspect it is to stymie or silence the other side. I'm old enough to remember the early days of the civil rights movement, and the canard that civil rights protesters were inciting people to riot, promoting chaos, justifying violence. Civil rights protesters were told that their rhetoric itself constituted violence because it cast fear into the hearts of defenders of segregation. It set neighbor against neighbor and roiled the once-smooth waters.

So it became necessary to tar everyone with the same brush. Consider Cohen: "The language of the anti-abortion movement, a piece of it anyway, is just plain ugly in its implications." I agree that a *piece*—the notion that killing an abortionist is justified—is ugly. But that isn't how he starts. He starts with "The language of the anti-abortion movement . . ." and that is what lingers in the mind. The caveat follows; it does not lead.

Cohen is also agitated by the recent First Things contretemps and the call, on

the part of some contributors to the symposium, for a bare-knuckles “church-state” debate leading to possible civil disobedience. For others, debate had not yet been exhausted. A sturdy democratic society accommodates such contestations; indeed, given the undeniable moral basis of democracy, it virtually guarantees that such conflicts will emerge. The urgent call for a more decisive church-state showdown on constitutional and ethical grounds is not, as Cohen insists, a “chilling” prospect. To label it as such is to desire political speech itself chilled, so long as those put in the political deep freeze are not those whose views one shares.

Cohen fails to appreciate that central to church-state debate from the inception of those two categories was the question of obedience. This is not some sinister concept newly invented by warped radicals convinced that the judiciary has usurped the traditional and appropriate role of the legislative branches of government. No, the somewhat misnamed church-state debate has from the beginning involved certain perduring political and ethical questions: Who is one obliged to obey and why? What if the dictates of a government and the dictates of a faith conflict? Indeed, Jean-Jacques Rousseau opined that Christianity was a terrible religion because it put the people in conflict with themselves. But that is what a religion seriously professed should do: it wouldn’t be much of a religion if it didn’t. Religious people ought to be torn. Should I fight in this war or not? Am I obliged to obey a law I consider unjust or not?

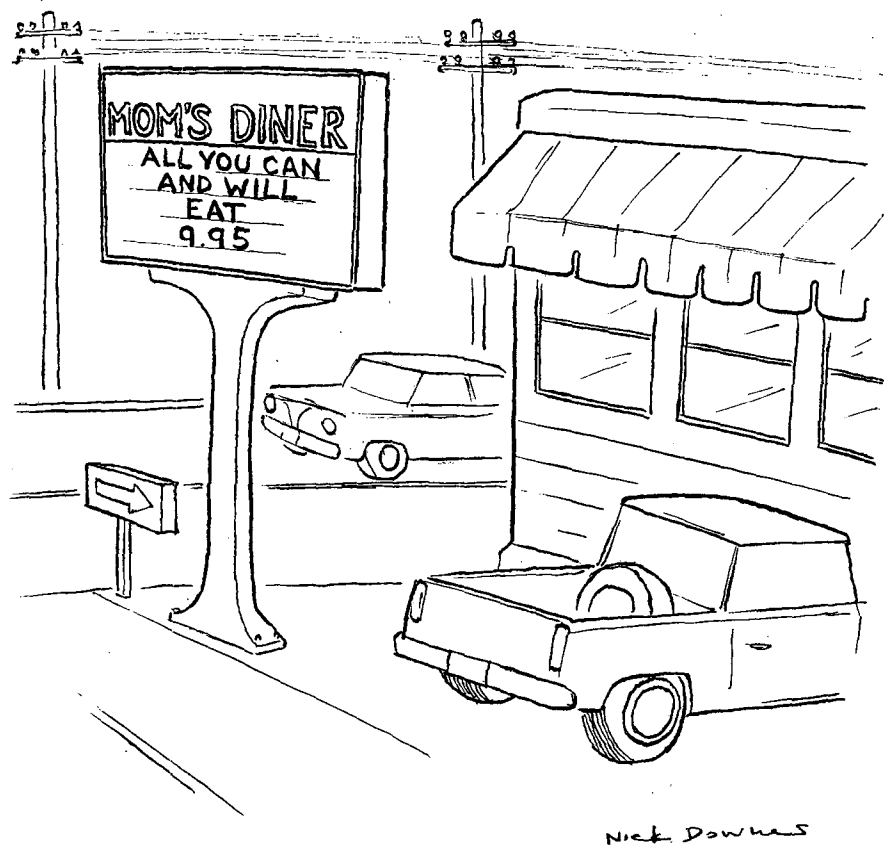
To declaim that fundamental public disaffection from the current juridical order is an open invitation—“in between the lines or in boldface”—to illegal acts that include violent assaults on persons or property or both, is unfair. “Bombs go off, people die, and zealots set the terms of debate,” Cohen writes. But zealots have *not* been setting the terms of debate in recent years. Zealots have been repudiated publicly by the overwhelming majority of pro-life advocates over and over and over again. Does one tell Frederick Douglass to shut up because John Brown is a zealot? Many did. They were wrong then just as Cohen is wrong now.

When we frighten ourselves about the outcomes of tough democratic debate, we lose a sense of balance and proportion. We think that the extreme articulation of a position is the truth of the position unadorned. And the unadorned truth is a bomb. It is Oklahoma City. In the current debate about civility, Oklahoma City recurs again and again as a leitmotif. But you cannot put civility at one end of the spectrum and incivility at the other and then replay the federal building blowing up as the inescapable culmination of that incivility. Blowing up a building and killing men, women and children—one’s fellow citizens—is not an act of incivility. It is an act of criminality. It is not an extreme form of political argument. It is an anti-political act that kills argument.

Decades ago, Hannah Arendt tried to distinguish between violence and power. Arendt criticized thinkers of the left and right who held that “violence is nothing more than the most flagrant manifestation of power.” This, she insisted, is a

APPENDIX E

fundamental error. For violence is a crude instrumentality. Power, by contrast, speaks to our human ability to act in concert, to begin anew, to keep hope and action alive. Only if we bear this distinction in mind can we resist the reduction of politics to who has the bigger bombs; to who has the means to coerce and terrorize whom. To be “uncivil” is to refuse to engage; to walk away. Criminals are not uncivil. Citizens—those who are civil—clash and contest within a public space that every participant in the debate has a stake in upholding. When someone argues for civil disobedience both words must be kept in mind. It is disobedience. But it is civil; it helps to uphold and to challenge civic life. Oklahoma City isn’t about incivility. It is about killing. The best way to honor the victims of that terrible crime is to cease and desist the facile deployment of “Oklahoma City” as an all-purpose club to discredit one’s opponents as terrorists or the coddlers of terrorists.



SUBSCRIPTIONS AND BOUND VOLUMES

Subscriptions: the *Human Life Review* accepts regular subscriptions at the rate of \$20 for a full year (four issues). Canadian and all other foreign subscriptions please add \$5 (total: \$25 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 the same rates.

Additional Copies: this issue—No. 2, Volume XXIII—is available while the supply lasts at \$5 per copy; 10 copies or more \$3 each. A limited number of back issues from 1994 through 1996 are also available at the same prices. We will pay all postage and handling.

Bound Volumes: Volumes XVII (1991), XVIII (1992), and XIX (1993), and Volume XX (1994) are available at \$50 the copy, postpaid. Volume XXI (1995) is also available now at the same \$50 price, postpaid. Send all orders, along with payment in full, to the address below.

Earlier Volumes: while several volumes are now in very short supply, we can still offer a complete set of volumes for the first 16 years (1975-1990) of this review for \$700 the set. The volumes are indexed, and bound in permanent library-style hardcovers, complete with gold lettering, etc. (they will make handsome additions to your personal library). Individual volumes are available while our supply lasts, at \$50 the volume. Please send payment with order; we pay all postage and handling.

The *Human Life Review* is available from **University Microfilms, Inc.** (300 N. Zeeb Road, Ann Arbor, Michigan 48106-1346) as follows: in 35 mm microfilm from Volume V; on microfiche from Volume VII; and indexed and abstracted as part of a general reference database from Volume XVII, available on CD-ROM, magnetic tape, and on-line.

The *Human Life Review Index* is also available as part of a CD-ROM database from **Information Access Company** (362 Lakeside Drive, Foster City, California 94404).

Address all orders to:

**The Human Life Foundation, Inc.
215 Lexington Avenue, 4th Floor
New York, New York 10016**

