the HUMAN LIFE REVIEW



SUMMER 2005

Featured in this issue:

William Murchison on Becoming Justice Blackmun Mary Meehan on Churches Saving Lives (Part II) John Muggeridge on Hadley Arkes & Natural Rights

TERRI SCHIAVO: VOICES OF REASON

James Hitchcock • Nat Hentoff • Paul McHugh

Patrick J. Mullaney on . . . JPII & America's Laws on Life Thomas D. Williams on The Least of My Brethren

Also in this issue:

Hadley Arkes • Clarke D. Forsythe • Mary Ellen Synon Steven W. Mosher • Wesley J. Smith

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... it is now six months since the death of Mrs. Terri Schiavo but we suspect her case will continue to haunt the moral landscape of the United States for months if not years to come. Our special section, "Terri Schiavo: Voices of Reason," presents three articles written not in the day-to-day heat of Ms. Schiavo's family's battle to save her from a court-imposed death sentence, but after her mercilessly protracted execution finally came to an end. In "The Schiavo Case & the Culture Wars" (page 50), long-time contributor James Hitchcock examines how the press, especially Tom Roberts, editor of the National Catholic Reporter, depicted Ms. Schiavo's predicament as a fight between reasonable people—like him—and the "religious" hysterics who disagreed with them. Dr. Paul McHugh, in an essay originally published in Commentary ("Annihilating Terri Schiavo," page 67), writes from the perspective of a member of the medical profession, a profession, he reminds us, not much heard from during the searing debate. And Nat Hentoff, the Human Life Foundation's 2005 Great Defender of Life awardee, profiles disability-rights organizations that defended Mrs. Schiavo in an essay he wrote for Free Inquiry (page 61). The Review has reprinted Mr. Hentoff's pioneering investigative work for over 20 years; as part of our tribute to him we have gathered it together in a 176-page volume, entitled Insisting on Life, which is now available (\$10.95 postage and handling included. To order or for more information on bulk discounts, call or email us at 212 685-5210; humanlifereview@mindspring.com).

Last year's Great Defender of Life, Hadley Arkes, also makes an appearance in this issue. Our thanks to National Review Online for permission to reprint "Even Homer Nods" (page 99). And thanks to our long-time senior editor, John Muggeridge, for sending us his appreciation of Mr. Arkes' Natural Rights and the Right to Choose ("A Bright Light in Academe," page 45). Published by Cambridge and available in paperback, this "magisterial" book is important reading for anyone interested in defending the pro-life position from a non-religious perspective.

This issue also features senior editor William Murchison's "Becoming Justice Blackmun" (page 7), his "review" of New York *Times* reporter Linda Greenhouse's recent book by the same name. Senior editor Mary Meehan, who's also writing a book on Harry Blackmun, is here with Part II of "Saving Lives through the Churches" (page 15). Patrick Mullaney, a New Jersey lawyer who first wrote for us on the Alex Loces case (Spring, 2001), in which a father tried (unsuccessfully) to claim *his* right to choose in the matter of his unborn child, is back with a provocative article on the connections between Pope John Paul II's *Gospel of Life* and American law. Finally, we are happy to welcome Fr. Thomas Williams of the Legionaries of Christ, a professor of moral theology who makes a compelling case for embryo adoption ("The Least of Our Brethren," page 87), a position about which there is some dispute among Catholic theologians. There's no dispute, however, at least around here, about the compelling humor of Nick Downes' cartoons.



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INTRODUCTION

B_{ECOMING} Justice Blackmun is the title of a recent book by New York Times reporter Linda Greenhouse on the career of Harry Blackmun, author of the majority decision in Roe v. Wade. In our lead article, Senior Editor William Murchison discusses the book, and the "rationale for such an account, namely, Blackburn's paternity (as it were) in abortion jurisprudence."

The impetus for Greenhouse's book was Blackmun's donation of his personal and official papers to the Library of Congress. (Review readers will remember Mary Meehan's own study of these papers, resulting in her article "Justice Blackmun and the Little People," Winter, 2004.) In his adroit essay for the Review, Murchison reflects on the mystery of Harry Blackmun: how this by all accounts kind and generous man, who confessed "abhorrence to abortion," became a person whose career on the Court was defined by it. The transformation of this "mild mainstream Methodist" into "Mr. Roe v. Wade" is evidence of the powerful cultural forces of the time, forces which would result in the commencement of massive killing programs for the unborn. Of course, Blackmun was only one of seven justices who supported Roe, yet he came, in Greenhouse's words, to "personify" the opinion. As Murchison writes, "Whoda thunk it?"—history tells a strange story of a man by temperament ill-suited to the role he emphatically embraced.

Nevertheless, as Mary Meehan made clear in our previous issue ("Saving Lives Through the Churches") Blackmun's "evolving" views on abortion were actually right in step with his church. The Methodist church, as well as the Lutheran, Presbyterian, United Church of Christ and Episcopal churches, were caught up in the same cultural currents. In that article, Meehan focused on these churches, which became officially pro-choice; she also profiled the good people in these denominations who are working to defend life. In this issue, we bring you the second part of Meehan's article, which is about the lifesaving programs of churches which are officially "pro-life." While focusing primarily on the two largest denominations, the Roman Catholic Church and the Southern Baptist Convention, she also reports on other Baptists, the Orthodox, African American churches, Mormons and Quakers. Her section on the Catholic churches highlights vibrant religious communities founded in the last twenty-five years which are dedicated to life: The Sisters of Life, Priests for Life, the Franciscan Daughters of Mary, and the Franciscan Brothers of Peace. (Two brothers from the latter order were quite visible, courtesy of the media, in Florida last March, as they were constantly at the side of the Schindler family during Terri Schiavo's final ordeal.) The Southern Baptist Convention story on abortion is an inspiring one, as you'll see, and it is evidence of the

effectiveness of grass-roots movements in advocating for life.

Taken as a whole, Meehan's study of abortion and the churches is a tremendously valuable historical and sociological document. But it's not just a report: interspersed with the stories she tells are Meehan's own opinions and suggestions. For example, in her conclusion, she makes the observation that "it's counterproductive when Catholics emphasize distinctively Catholic symbols—rosaries, crucifixes, and statues—in pro-life marches and protests that are addressed to secular officials and the public at large. This reinforces the . . . impression of many that abortion is a religious issue only and a Catholic issue above all." Readers may or may not agree, but Meehan's preaching is from a well-deserved pulpit, one built on solid knowledge, understanding and hard-working experience in the pro-life movement.

Abortion is not "just" a religious issue, of course: The right to life is a basic tenet of natural law, the principles of which have united believers and nonbelievers. But natural law relies on objective standards: whereas, writes senior editor John Muggeridge, subjectivism has so infected both religious and secular thinking that "we've deified it. Choice is our god. It has replaced natural law as the standard for judging human behavior." The raison d'être of Muggeridge's essay is praise for a thinker who has written profoundly about the "judicial ramifications" of this worship of choice: Professor Hadley Arkes, a Review contributor (and the recipient of our 2004 Great Defender of Life Award). In "A Bright Light in Academe," Muggeridge describes Arkes' 2002 book, Natural Rights and the Right to Choose, as "magisterial" (we'd agree), and Arkes himself as a rare man: a successful academic who has remained untainted by the pervasive moral nihilism of academia. A thoughtful reading of Arkes' book, Muggeridge says, is a great opportunity for Americans to reeducate themselves about the truth of natural law and its role as the basis of our Constitution: "The need to reaffirm our nation's primal constitution is stronger today than perhaps at any time in our history."

We revisit next the tragic tale of a grown victim of "choice"—last March, Mrs. Terri Schiavo was starved to death, because of her husband's choice and the court's decision to uphold it. Media coverage of the story was abundant—however, as the trio of articles beginning on page 50 demonstrates, there was much about the plight of Terri Schiavo that was either distorted or simply ignored. In the first, "The Schiavo Case & the Culture Wars," Catholic historian James Hitchcock contributes a scathing indictment of the liberal press in its treatment of the Schiavo case. He writes specifically about the Catholic weekly, the National Catholic Reporter: its editor, Tom Roberts, in "instructing his readers how they should think about the case," had nothing but contempt for any view other than Michael Schiavo's, "scornfully" dismissing "the emotionalism, raw piety, and three-year-old sound bites" of Mrs. Schiavo's defenders. He also "sneered at the Franciscan friars"—the Brothers profiled

in Mary Meehan's article—dismissing them as "two monks [sic] who seemed to know more things absolutely than any team of physicians, theologians, or ethicists." Hitchcock's trenchant article also points out the hypocrisy of Catholics and secular liberals who continually decry the death penalty, but wouldn't even admit there were reasonable grounds to question whether the death sentence imposed on Mrs. Schiavo was just. Those who did question her court-ordered death were dismissed as the "religious right" and "extremists." (An oft-quoted "ethicist" in this vein, who crowed that Terri Schiavo's death was "clearly ethical," is the Jesuit priest John Paris. Your editor was a student at Holy Cross College in Worcester, some twenty years ago, when "Pull the Plug Paris," as he was known, taught a hugely popular medical ethics course.)

Hitchcock goes on to charge the secular media with changing its own rules on this case, "putting aside its inherent suspicion of entrenched power and high-sounding rationalizations of self interest." Instead, the public "was stampeded by the media to approve Terri's death on the grounds that modern medicine has created conditions under which people are forced to live 'meaningless lives' for years." Our next author, Nat Hentoff, would emphatically agree. Hentoff is himself an expert on civil liberties, life issues, and the Schiavo case—he was a tireless advocate for Terri's right to life. (We are pleased to add that he will receive our 2005 Great Defender of Life Award.) In his article, "The Legacy of Terri Schiavo for the Nonreligious," Hentoff emphasizes another aspect of the story ignored by the media: the "twenty-nine disability rights organizations that filed legal briefs and lobbied Congress to demonstrate that Terri Schiavo's was a disability-rights case, not a right to die case." Many of these groups are "determinedly secular," some pro-choice, but they saw that the story of Terri Schiavo was about a disabled person who couldn't communicate, and her lack of rights. These disabled activists "feel abandoned" by the ACLU, which sided with Michael Schiavo; they fear for their own lives, as they see our society returning to eugenics, and they remind us, as Henotff often does, that a story like Terri's Schiavo's could be about any one of us.

In the final article of our trio, Dr. Paul McHugh writes about another area shamelessly neglected in the endless hours of media discussion: "Conspicuously missing from the chorus of voices arguing over the meaning and implications . . . have been the views of a class of people with a uniquely relevant body of experience and insight: namely, the doctors and nurses who customarily provide care to patients like Terri Schiavo." McHugh is himself a doctor and professor of psychiatry, and he writes from his great experience caring for patients with neuro-psychiatric disorders. After discussing Terri's care, and the meaning of her being moved to a hospice, McHugh argues that once her case got to the court, it ceased being about her medical care and how best to help her. In a chillingly accurate passage, McHugh lays bare the real meaning of her death sentence: "Terri Schiavo's husband and his clinical and legal advisors, believing that hers was now a life unworthy of life sought, and

achieved, its annihilation."

As we remember, Mrs. Schiavo's death was followed only two days later by that of the beloved Pope John Paul II, who had been prayerfully mindful of, and spoken publicly against, her dehydration. There have been and will be countless words written and spoken about this great man's legacy. In our next article, "John Paul II and America's Laws on Life," lawyer Patrick Mullaney writes about "what may be John Paul II's least noticed yet most radical doctrine." Mullaney is referring to the late pontiff's views on the application of the principle of the right to life on the activities of the political community. John Paul argued that since the value of life exists prior to any political community, then the right to life does as well—thus, a "democracy" which puts the right to life up for a vote is already "contradicting its own principles," and "effectively moves towards a form of totalitarianism." Mullaney takes this premise and applies it to the debate between those who want to overturn *Roe* and return abortion to the states, and those who insist that the protections of the 14th Amendment Due Process Clause, properly applied, would include the unborn as persons. Mullaney makes the provocative charge that pro-life opponents of Roe actually "join Roe in ignoring the fact of pre-natal life and the Constitution's obligation to it," and would thus find themselves contradicting John Paul II's standards.

Our final article is about a subject that probably wasn't even imagined during the *Roe* v. *Wade* era: frozen embryos, and whether or not it is acceptable, in the morality of the Roman Catholic Church, for them to be "adopted"—that is, implanted in a woman's womb so that they might grow. These tiny humans are created and preserved through technology considered immoral by the Church. But, writes priest and theologian Thomas D. Williams in "The Least of My Brethren: The Ethics of Heterologous Embryo Transfer," their personhood must be considered separately from the morality of their conception, and independent of their size or age. In Catholic theology, there cannot be a partial person, so the question is "are human embryos things or persons?" We know they are not things—if they are persons, then how ought they be treated? Does embryo adoption violate Catholic moral principles involving procreation? This is a fascinating essay about a troubling moral issue, one on which Catholic theologians hold differing views. We welcome Father Williams to the *Review*'s pages with this thought-provoking and important essay.

* * * * *

Appendix A is a powerful column by Mr. Muggeridge's subject, Professor Hadley Arkes, also on the subject of embryonic stem cells, and why he, as a man who lost family members in the Holocaust, is not offended when critics of embryonic-stem-cell research invoke Nazi experimentation (David Gelernter was, and wrote about it in the Wall Street Journal). Appendix B is Clarke D.

Forsythe's tribute to the late Chief Justice William Rehnquist, who was the last surviving dissenter from *Roe*. He had, Forsythe writes, "the wisdom and foresight to see the mess that the Court has created by its abortion decisions"; he labeled the *Roe* decision "judicial legislation," which had usurped the people's authority to decide the abortion issue.

Appendix C is Wesley J. Smith's moving tribute to another person of honor—Dame Cicely Saunders, the founder of the modern hospice movement, who died in July at age 87. Smith explains how hospice care is based on the conviction that "dying isn't dead; it is living, and that means no one should be denied dignity, love, and inclusion as they pass through their final days."

Our final two appendices bring us overseas. In "Population Control Kills," Steven Mosher, president of the Population Research Institute, writes about the damage "Western-funded fertility reduction programs" have unleashed on the people of Africa. Not only have coercive "family planning" programs undermined Amercia's foreign policy goal of promoting democracy, but resources that should have been directed to building up a primary health care system went into "family-planning" programs instead. As we know too well, Africa is suffering a horrific AIDS epidemic, one which might have been less severe if medical personnel weren't so busy prescribing birth control pills and performing sterilizations. In our final appendix, reprinted from Ireland on Sunday, journalist Mary Ellen Synon reports that the Irish Family Planning Association has started a campaign to legalize abortion. Synon had called us before she wrote her column, and she said she thought that many in Ireland were unaware of what really happens in an abortion. As you'll read, she has done her part to change that. Her column closes this issue with a sad reminder of what the "celebrated" Roe decision of Mr. Blackmun and friends actually translates into for thousands of unborn children every day. We hope with Ms. Synon that Ireland will not join us in our barbarity.

We thank, as always, our brilliant friend Nick Downes, whose unique cartoons remind us that even the most burdened day can be lightened by a welcome gust of giggles. We hope you enjoy the issue.

Maria McFadden Editor

Becoming Justice Blackmun

William Murchison

66 Whoda thunk it?" is how most of us put the matter: often as not with rolling of eyes or hairline smiles of bemusement.

Life notoriously takes unexpected turnings and reroutings—a commonplace on which the late Edna Ferber based her considerable literary career. Or am I being quaint, calling up the ghost of one whose heyday (*Giant*, *Saratoga Trunk*, *Cimarron*, etc.) was half a century and more ago?

Maybe. Maybe not. Half a century and more ago, Dwight Eisenhower was president of the United States, and the moral environment, Elvis not-withstanding, seemed little worse than usual. Half a century later, the right to "terminate" a pregnancy—to destroy, intentionally and specifically, the specific gift of a specific life—is embedded not just in social practice but in American jurisprudence.

Whoda thunk it? I don't believe I would have. In fact, specific cultural memories make me sure of it. Between those years and these, something happened. What?

There is profit in occasional revisits to the cultural freeway linking the Eisenhower-Ferber era to, shall we say, the era of Harry Blackmun.

I call up my second ghost, the late Justice Blackmun, on account of 1) the recent publication of an account, by the New York *Times*' Linda Greenhouse, of his almost 34 years on the U.S. Supreme Court, and 2) the rationale for such an account, namely, Blackmun's paternity (as it were) in abortion jurisprudence.

Becoming Justice Blackmun (Times Books) grew from Greenhouse's study of half a million personal and official papers donated by Blackmun to the Library of Congress. Naturally such a book isn't just about Roe v. Wade. On the other hand, why would the world find Harry Blackmun more interesting than a benchful of other ex-justices—say, Wiley Rutledge or Tom Clark? For a simple, yet beguilingly complex, reason: Blackmun more than wrote the decisive opinion; he became, to the astonishment of many on both sides of the question, Mr. Roe v. Wade. He wore the decision like a tattoo. Hands off, dude! was his implied rebuke to any who might suggest rethinking the centrality that abortion was assuming in our lives and our politics.

A year after Blackmun's 1994 retirement from the Court, Gloria Steinem presented him the Reproductive Freedom Award from the Voters for Choice

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Education Fund. "The truth is," said she, "you have saved more American women's lives than anyone in our nation's history." She failed to account for such female babies as, under the *Roe* regime, women chose legally and constitutionally to discard; but you get the drift.

Seven justices—Chief Justice Warren Burger, among them—had voted for *Roe* in 1973. Majorities large and small had since then nurtured and protected the decision, turning back attempts to narrow its scope, or even overrule the whole enterprise as mistaken in the first place. Yet, as Greenhouse, the New York *Times*' longtime Supreme Court correspondent, writes, "The world attached [*Roe*] to Blackmun in a way that few Supreme Court decisions are ever linked to their authors. The popular attribution of *Roe* to Blackmun alone was a distortion of the Court's reality that baffled him at first, and he resisted the notion that he was *Roe*'s only creator. Eventually, though, he yielded; continued resistance would have been futile, in any event. In yielding, he locked *Roe* in a tight embrace and never let it go."

Tighter than tight, sometimes. In 1992, helping the boss ready a reaffirmation of *Roe*, one of Blackmun's clerks, Stephanie Dangel, drafted for him a cry from the heart. She proposed (as Greenhouse puts it) that Blackmun should "make a direct link between the upcoming election and the future of abortion." She wished him to say, and he assented, "I am 83 years old. I cannot remain on this court forever, and when I do step down, the confirmation process for my successor may well focus on the issue before us today. That, I regret, may be exactly where the choice between the two worlds may be made." *Après moi, le deluge*, he could have added.

It might have been rated a nearly unconscionable piece of personal vanity, but, then, Stephanie Dangel had cooed to her boss, "You are the person American women look to in order to find out what is really happening in this case." There is something deliciously pre-feminist in it: the fluttered eyelashes, the wheedling tone. Some women, it has been noted, and not always by women, can wrap some men around their little fingers. Mild, modest Harry Blackmun, during his latter years on the high court, comes off as one of these men. Whoda thunk it?

Not Richard M. Nixon, probably, when he elevated Blackmun to the high court after back-to-back failures to win confirmation of judges picked clean by senatorial birds of prey. "Old Number Three," Blackmun wryly called himself. He was a well-regarded federal appeals court judge in Minneapolis: straight, smart, conscientious. His face, except for a corona of brown hair toward the rear of the forehead, lacked strong characteristics. His height, to judge from photos in which he is standing, was middling at most. He drove perennially a blue Volkswagen Beetle—likelier a sign of frugality than

of cultural criticism. Then-assistant attorney general William H. Rehnquist, who vetted Blackmun's appeals record for the White House, wrote: "I think he can be fairly characterized as conservative-to-moderate in both criminal law and civil rights. His opinions are all carefully reasoned, and give no indication of a pre-conceived bias in one direction or the other." Not the least of Blackmun's qualifications was his nearly lifelong friendship with Warren E. Burger, whom Nixon had made chief justice the year before, succeeding the turbulent Earl Warren.

A judicial observation that might have escaped Rehnquist's notice came in an opinion Blackmun had written for the Eighth Circuit Court of Appeals, invalidating corporal punishment in Arkansas. "Constitutional standards," the court had said, speaking with Blackmun's voice, "are evolving and are not static. We must look at present-day concepts and opinions." Earl Warren himself could not have put the matter more tersely.

A pair of short sentences is not a judicial philosophy; here all the same Blackmun can be seen cutting slack for updated understandings of just the sort that came to inform *Roe* v. *Wade*. If the Court detected an injustice that previous courts had left unattended for constitutional reasons, well, it was time to see whether Americans still understood matters the way they once did. Perhaps we knew better now. Perhaps it was fine and all right and just good sense to read the constitutional text through modern, multi-focal contact lenses instead of the founding fathers' silver-framed Ben Franklins.

When Roe v. Wade, from Texas, and Doe v. Bolton, from Georgia, put abortion squarely before the Supreme Court, the justices already had confronted (U.S. v. Vuitch) a 68-year-old Washington, D.C., statute criminalizing abortion except as necessary for "the mother's life or health." The Court had repelled abortionist Milan Vuitch's plea that the law was unconstitutionally vague as to the meaning of "health." Yet, as Greenhouse summarizes the matter, "The decision treated abortion as a surgical option not fundamentally different from any other, and what seemed to matter most to the Court was that sufficient leeway be given to a doctor's professional judgment." Members of the growing movement to legalize abortion were thrilled.

Arguments in *Roe* and *Doe* took place Dec. 13, 1971. All seven justices (there were then two vacancies) decided—"for one reason or another," as Greenhouse puts it—against the Texas statute, which banned abortion except to save the mother's life. "The outcome in the Georgia case," Greenhouse writes, "was considerably less clear." Georgia had lately passed a "reform" statute allowing abortion in cases arising from rape, severe infant disability, and doubts about the mother's health. There were three votes to

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invalidate, but Blackmun himself thought the statute not half bad. Even Douglas had doubts. No unitive viewpoint shaped up: small wonder, perhaps, as the matter was so new to the Court.

Someone had to begin molding the fresh clay. The honor, if it was that, fell to Blackmun—for reasons he never fully understood, says Greenhouse. One factor might well have been Blackmun's medical experience as chief counsel for the Mayo Clinic. He had had at Mayo, it seems, a constructive career—from which he had been whisked off to the 8th Circuit appellate bench. Greenhouse thinks a likelier motive was that of securing a narrowly focused opinion.

Blackmun, in any case, on receiving the assignment, and weighing the ways of fulfilling it, took two steps that foreshadowed his course: he initiated ongoing consultation with the research staff at Mayo, and he asked his family's opinion. There was nothing essentially wrong with either step; it was just that neither came under the rubric of constitutional cogitation. Did Texas and Georgia have the right to enact such laws as were under challenge? Was that not the question? Was the matter between Mayo staff and the states of Texas and Georgia, or was it between the states and the constitutional corpus? More alarmingly, what did the opinions of Blackmun's wife and daughters have to do with anything—unless already he was beginning to view the questioned legislation as primarily a cultural expression?

Daughter Susan's account of the family council—with Harry as the lone male—is telling:

"What are your views on abortion?" he asked the four women at his table. Mom's answer was slightly to the right of center. She promoted choice but with some restrictions. Sally's reply was carefully thought out and middle of the road, the route she has taken all her life. Lucky girl. Nancy, a Radcliffe and Harvard graduate, sounded off with an intellectually leftish opinion. I had not yet emerged from my hippie phase and spouted out a far-to-the-left, shake-the-old-man-up response. Dad put down his fork mid-bite and pushed down his chair. "I think I'll go lie down," he said. "I'm getting a headache."

He might even have deserved it, one is tempted to observe.

Two new justices joined the Court meanwhile—William Rehnquist and Lewis Powell. Blackmun kept working on the decision, without finding the formula to bring the Court together. Back the cases came for re-argument in October, 1972. Consensus against the Texas law—which Powell wanted to make the lead case—was fast forming. Blackmun again fell to work. He would bring his colleagues together in some fashion.

The rest is unfinished history. Blackmun's, and the Court's, reasonings need no extensive rehearsal here. *Roe* v. *Wade*, handed down on January 22,

1973, constitutionalized the right to end a pregnancy. Some latitude remained to the states. The court's 7-2 majority found that during the second trimester of pregnancy, the Constitution allowed states "to regulate the abortion procedure in ways that are reasonably related to maternal health." During the third trimester, states could even "proscribe abortion," except where necessary to preserve the mother's "life or health." Blackmun earlier had written to his colleagues: "I have concluded that the end of the first trimester is critical."

"I have concluded . . ." "I . . ."

In that first person singular—enlarged to "we," as six other justices came aboard—can be seen the origin of abortion jurisprudence. The Supreme Court was here at last to correct the erroneous impression of state legislatures that the preservation of unborn life was an overwhelmingly vital consideration. "I," and "we," had seen to the bottom of the thing: abortion, much of the time, was a private transaction on which it was best to draw the veil. Little more needed to be said.

Though, as we know, infinitely more has been said since, and will be said—seemingly—to infinity. The justices, with no such intention at all, had pried open Pandora's Box and loosed into national discourse all manner of competing claims, impulses, ambitions, fears, hopes. Justice Powell's personal note to Mrs. Blackmun—"Harry has written an historic opinion which I was proud to join"—was all sunshine. Even then, the clouds were rolling in.

Complexities that the Court had not suspected initially began to pile up. Was it incumbent on states to pay for abortions? Blackmun thought so. The Court majority in three cases of the late '70s thought not. Justice Potter Stewart, who had assented to *Roe*, was having second thoughts, calling it "probably constitutionally permissible for the state to have a policy of preferring birth over abortion." Powell, acknowledging that the Court had "pushed the Constitution to the outer limit in Roe vs. Wade," said the state "had a substantial interest in trying to preserve life."

Blackmun sharply, even shrilly, found the Court's seeming indifference to the plight of poor and pregnant women "disingenuous and alarming, almost reminiscent of 'Let them eat cake."

For the author of *Roe* v. *Wade*, abortion was becoming a philosophical slough: the longer he waded through it, the deeper he sank. It was odd to see. Blackmun was no radical, certainly no feminist; and withal a kind and genial man. His *Roe* opinion, Greenhouse notes, "notably blunted the suggestion, earlier in his analysis, that the ruling was principally about women's rights. 'The decision vindicates the right of the physician to administer medical

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treatment according to his professional judgment up to the points where important state interests provide compelling justifications for intervention,' Blackmun, the former Mayo general counsel wrote. 'Up to those points, the abortion decision in all its aspects is inherently, and primarily, a medical decision, and basic responsibility for it must rest with the physician.'"

Oddly, or courageously—perhaps both—he preserved the angry, sometimes hateful, mail that poured in from the world he had undertaken to wise up. He had not, says Greenhouse, "imagined that he alone would come to personify an opinion in which he had spoken for a 7-2 majority and that was the product, after all, of a collaborative effort. Letters addressed to Blackmun poured into the Court by the tens of thousands, many invoking God's wrath and denouncing Blackmun as a baby killer." To a Catholic priest friend, he objected: "We did not adjudicate that abortion is right or wrong or moral or immoral. I share your abhorrence for abortion and am personally against it." (Emphasis supplied.)

It was an odd moment, perhaps, at which to confess "abhorrence for abortion." He had not suspected that many ordinary citizens might share that abhorrence? If not, why not? And were constitutional free passes to be allowed a thing that was widely abhorred? Evidently. But why?

In Blackmun's case, psychological factors were certainly present. "[A]s attacks on the decision mounted both outside the Court and within it," Greenhouse writes, "he would come to embrace Roe with a fierce attachment and a deep personal pride...he saw himself as Roe's primary defender." Deeper and deeper he dug his heels. By the time *Bowers* v. *Hardwick* came before the Court, the issue being Georgia's right to ban homosexual conduct, Blackmun was ready to proclaim a commitment to "the fundamental interest all individuals have in controlling the nature of their intimate associations with others." In dissent he foreshadowed the Court's conversion a decade and a half later to the same cause—at least when it came to criminalization of same-sex activities.

Blackmun's steadily growing faith in "choice" broadened his views of women's imputed rights. In *Roe*, he had nailed his own, and the Court's, colors to the mast of medical freedom and discretion. Yet, writes Greenhouse, "it was in the course of protecting Roe that he began to see himself as protecting the rights of women... The rights of women, rather than those of doctors, were moving toward the center of Blackmun's focus. He began to see abortion rights as women's rights." Precisely, you might say, as NARAL Pro-Choice America sees them.

By 1989, Blackmun had shaped to his own satisfaction what Greenhouse

calls "a unified jurisprudence of women's rights in which reproductive freedom was established as an essential aspect of women's equality." "By restricting the right to terminate pregnancies," he wrote in *Planned Parenthood* v. *Casey*, in 1992, "the State conscripts women to continue their pregnancies, suffer the pains of childbirth, and in most instances provide years of maternal care"—in violation of the 14th Amendment's equal protection clause. Ten years earlier he had failed to talk the Court into outlawing state-supported single-sex colleges. This time, as Greenhouse notes, he was proud to cite "his heartfelt dissent. The convergence was complete." Harry Blackmun was not as he once had been. Nor was the country supposedly served by the Court on which Blackmun sat—not the same at all, in customs and general understandings, in expectations, in measures and touchstones of worth. We had moved on, for better or (very often) worse: only occasionally aware of the scenery flashing past the window.

The Conversion of Harry Blackmun is a relatively minor theme in the process. As he noted with frequent exasperation, *Roe* enjoyed the support of seven justices, only one of whom wrote the opinion. Yet the transformation of this mild mainstream Methodist shows the power of the forces amid which he lived. There was that assumption, mentioned above, that "constitutional standards" were evolutionary in character. Just such loose assumptions floated about the intellectual atmosphere like clouds promising rain. It was as true in theological as in judicial circles: the Bible, as its expositors were beginning to teach, was ever renewing itself, ever opening itself to discovery. If the Bible, why not the Constitution also? And why not room, in general, for new understandings of the relationships between the sexes? Were women *just* helpmeets and bearers of life, or did their potential match that of the menfolk?

A point about Blackmun that stands out in Greenhouse's narrative is his, well, niceness. Here was no crank of the Willam O. Douglas stamp. He was a kind and generous man—with nothing against unborn babies—who proved susceptible, as did so many of his postwar generation, to the cries and whispers of the cultural unsettlers. Main Street America met the social and political disruptions of the 1960s with bewilderment and exasperation but also with some good will and attentiveness. What were these remarkable young people trying so vocally to tell us? Deans, politicians, journalists, clergymen raised the same question. The Blackmun daughters may have facilitated their father's transformation. What? Go against one's own children? Teach them a lesson, like some figure from the Book of Judges? That would have been to affront niceness and family values. Then there were Blackmun's law clerks, on whom he seems to have leaned with more-than-usual weight.

WILLIAM MURCHISON

Greenhouse relates detail after detail of clerks—from the best law schools, naturally—shaping Blackmun's thoughts; thoughts to which niceness had given original form, requiring now only some respectful kneading.

Blackmun toward the last drifted far apart from his old friend, the chief justice, who, despite their equivalent ages, was a man and jurist of the old-fashioned type, not dissimilar to the president who appointed him in the first place, Richard Nixon. The cautious Burger distrusted raw sentiment and viewed with skepticism all demands for massive change. He was unwilling to impose his own ideals on a society that had by no means demanded he do so.

Blackmun's temperament embodied just the opposite impulses. He had seemingly a sentimental, romantic streak. He dreamed and awoke refreshed. Then, on awaking, he sought to take us by the hand, opening to us—nicely, kindly—the truths and possibilities he had glimpsed; concerning which he would brook no denial.

Harry Blackmun. Whoda thunk it?



"I simply must have this recipe, Martha."

Saving Lives Through the Churches, Part III

Mary Meehan

The first part of this series quoted an activist's question that applies to the second part as well: "Can you imagine what our country would be like to-day if our churches did everything they could do?"

The first part described the pro-life teaching of the Christian churches through the Protestant Reformation and beyond. It noted the erosion of that teaching in major U.S. Protestant churches in the 1960s and 1970s, giving special attention to a network of ministers who made abortion referrals when abortion was illegal in most states. It focused on efforts of groups such as Lifewatch, NOEL, and Presbyterians Pro-Life to return the mainline churches to their pro-life tradition.

This second and final part describes pro-life programs of the country's two largest Christian denominations, the Roman Catholic Church and the Southern Baptist Convention. It also reports work among other Baptists, the Orthodox, African American churches, Mormons, and Quakers. While concluding that there's an impressive amount of pro-life work in many churches, it also suggests a need to arouse the inactive and to improve the ability of church people to speak to the wider culture.

Morning Has Broken

Just as the Quakers were first and strongest in the campaign against slavery in the United States, so the Catholics stood out in the difficult struggle against abortion that started in the 1960s. Although their opponents successfully painted the pro-life movement as a tool of the Catholic hierarchy and clergy, the lay pioneers knew they faced major problems with both groups: Some bishops were timid, and many clergy were lukewarm at best. So were some key Catholic theologians of the era, leaders of major Catholic colleges and universities, and some elements of the Catholic press.

There are still problems in all of these areas, though most are less formidable now than 20 years ago. Evangelical Protestants joined the pro-life movement in great numbers in the 1980s and 1990s and helped the Catholic activists in many ways—including psychologically, by showing them they were no longer alone. Within the Catholic community, pressure from lay activists on one side, and from the late Pope John Paul II on the other, strengthened

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the pro-life cause among the clergy and hierarchy. Lay involvement continues to be very strong, although by no means universal. Many people in the pews are political liberals who have sided with the Democratic party rather than their church; many are upper-middle-class people who have sided with their social class rather than their faith. And all of them face the temptations of the decadent culture that surrounds them.

Yet there seem to be more Catholic pro-life groups now than ever before. Some of the newer ones, such as the Sisters of Life and the Priests for Life, have brought great strength and competence to the pro-life movement. They have also helped counter the burnout that affects many Catholics who have been in the struggle for decades. The "gospel of life" and the "culture of life" preached by John Paul II continue to inspire all Catholics in the movement—and many activists of other faiths as well. They hope Pope Benedict XVI will be as outspoken in defense of life—early and late, in season and out of season—as John Paul was.

Catholics still stand out in the U.S. pro-life movement because of their sheer numbers. Their church, the largest by far in the United States, claims over 66 million members here. Many practice their faith sporadically, if at all, while many others are deeply influenced by it. Had most Catholics been actively pro-life through the years, the struggle against abortion might have been won long ago.

Here We Are, Lord

Gail Quinn heads the Catholic bishops' pro-life office, supervising eleven other staff members and a \$2.1 million budget. A longtime movement veteran, Quinn is cheerful and optimistic despite the difficulty of her job. People sometimes ask her if she's not discouraged that *Roe* v. *Wade* endures despite over 30 years of efforts to overturn it. "Well, in one way, sure," she remarked. "On the other hand, thirty years later, for an issue to be as important in the public debate, right across the board, is quite a feat."

The bishops and the Knights of Columbus provide most of the funding for her office. Its formal name is the Secretariat for Pro-Life Activities, and it's part of the U.S. Conference of Catholic Bishops (USCCB) in Washington, D.C. Quinn and her staff offer to Catholic dioceses and parishes around the country a Respect Life educational program that includes everything from articles and posters to liturgy guides, photos, and clip art. Their material is of high quality; but in an age of electronic bombardment and limited attention spans, there probably should be more pieces that are short and lively.

Quinn says her group has "a lot of good people out in the field," and there's much program evidence to support her claim. Large dioceses have

paid and full-time respect-life directors, often with support staff, while some smaller dioceses have volunteer directors. There are also many volunteers at the parish level. Key diocesan directors report much educational work and practical aid to women in need. The Boston archdiocese has its own pregnancy-aid center, and Boston parishes collect huge amounts of goods for the center's clients through baby showers. There's also a special archdiocesan fund to help pregnant women who have severe financial problems. (Many clients are immigrants who are "basically alone in the world," Boston director Marianne Luthin remarked.)²

In New York, the Catholic Home Bureau spends in the neighborhood of \$1 million a year on maternity services. Kathleen Dooley Polcha, who directs the program, estimated that about 60 percent of her clients are immigrants. They have, she said, extremely limited access to money and to employment (because many lack green cards), and they often live in very crowded housing; her program's services "have intensified" to meet these problems. The St. Louis archdiocese has the LifeLine Coalition—a network of Catholic hospitals and social-service agencies, plus Birthright counseling centers, which help pregnant women (both Catholics and others) with counseling, medical expenses, housing, and other needs. Lifeline says that each year it assists "more than 10,000 mothers and their children."

The Detroit archdiocese has Project Life, which offers practical aid to people tempted by either abortion or assisted suicide. When Cardinal Adam Maida announced the program in 1996, he urged the public: "Before you pick up the telephone to schedule an appointment with an abortion clinic or to schedule a consultation with Jack Kevorkian, call Project Life." The program, open to people regardless of religious belief or affiliation, involves assistance from pre-existing agencies—Catholic, private, and public. What Project Life adds to the mix is a hotline referral system so that people don't have to make a dozen calls before they reach the right agency, plus financial aid for emergency costs that other programs don't cover. There were many suicide-related calls to Project Life when Jack Kevorkian, Michigan's "Dr. Death," was still helping people commit suicide. In one case, Project Life put together an assistance package for a woman who had been severely disabled by a stroke. "We were at the end of our rope," her husband later told the Detroit Free Press, adding that Project Life "made us realize that we didn't have to call Jack Kevorkian, because there are people out there who are willing to help us." Another woman had a disease that made it difficult for her to breathe in the summer's heat and humidity. She was becoming quite weak and desperate—until Project Life bought an air-conditioning unit for her apartment.4

Most of the calls now are for pregnancy aid. Project Life director Paul Yasenak, a Redemptorist brother, described a recent case: A woman who was expecting twins needed financial aid so she could have the rest she needed to assure their health. Project Life provided the aid. In another case, it helped a woman who was subjected to domestic abuse—finding shelter for her and her children and helping with their food costs. Other agencies pitched in with additional aid.⁵

Be Not Afraid

Many diocesan directors encourage parish participation in the Gabriel Project. This is "big in the Baltimore area; it's big in Texas," Gail Quinn reported. "But it's growing in other places as well." In this program, local parishes post (on their own property) large signs that promise assistance to any woman who faces a crisis pregnancy. A team of volunteers helps each woman according to need: transportation to doctors' appointments, a place to live, a parish baby shower. It's a great way for churches to practice what they preach. Diocesan directors also promote Project Rachel, which helps women and men who have been involved in abortion to achieve forgiveness and spiritual peace. And they encourage a great deal of prayer for the prolife cause.

Some dioceses also support the work of Msgr. Philip Reilly, a Brooklyn priest who organizes large prayer vigils at abortion clinics. Often led by a bishop, or even a cardinal, the vigil starts with Mass at a church near the clinic. Praying the rosary and singing hymns, participants walk to the clinic and remain there for some time in prayer and song. They do not carry picket signs—just one image of Our Lady of Guadalupe, whom Catholics honor as the patroness of the pro-life movement. Participants are asked not to talk with one another—and certainly not to scream or shout at anyone else. Msgr. Reilly believes that people at the clinic "must see in us the love of Christ; they must see in us the face of Christ. . . . The only thing that will pull them out of the darkness is love—a love of a person. And no amount of argument, debating, will ultimately do it." Sidewalk counselors do speak, though, with women about to enter the clinic, and they achieve many "turnarounds." Catholic pro-lifers are using Msgr. Reilly's method in the U.S., Europe, Africa, New Zealand, and Australia.8

Many Catholic parishes work with the National Committee for a Human Life Amendment, a group established by the Catholic Bishops decades ago to lobby for pro-life legislation. The National Committee encourages letters, phone calls, and visits to members of Congress. Many parishes have telephone trees to spread its legislative alerts about crucial votes on Capitol Hill

and to request phone calls and e-mails to congressional offices. Besides working closely with the National Committee, the bishops' pro-life office is active in media debates over euthanasia, embryonic stem-cell research, and related issues. ("Science does not have to kill in order to cure," said one of its newspaper ads on stem-cell research last year.) More recently, the bishops' office and the National Committee cosponsored a postcard and e-mail campaign telling U.S. senators that support of *Roe* v. *Wade* shouldn't be a "litmus test" for judicial nominees. Gail Quinn urged Catholics: "Do not pass Go, do not collect 200 reasons for delaying. Make your voice heard." Later she estimated the postcard campaign alone had resulted in delivery of seven million cards to senators.

Sing a New Song

This is all very helpful to the pro-life movement. There is one problem, however, and it's a big one. In a 2004 interview, Gail Quinn estimated that "about a third" of Catholic parishes have active pro-life committees. One would think that three decades of hard work would have activated far more parishes. But Quinn's office has no authority over priests and bishops; it can suggest, recommend, or plead for action, but cannot give orders. With a larger budget and staff, however, it could send out organizers to do some diplomatic work with busy bishops and pastors. With even minimal support from clergy, the organizers could look for two or three people in each inactive parish who could organize a telephone tree; recruit volunteers for the local pregnancy-aid center; organize a respite-care program to help families overwhelmed with chronic illness; set up a Gabriel Project; and/or fill up buses for the March for Life. In short, there should be a drive to activate the two-thirds of parishes that are, so to speak, AWOL; a good model for this would be what anti-slavery leaders did when they "abolitionized" Ohio and other states in the 1830s.¹¹

Also needed is a major effort on Catholic college and university campuses. It could be patterned after a Lutherans for Life program, described in the first part of this series, that sends a team to Lutheran colleges to do intensive educational work on life issues over a short period. If accompanied by help in establishing more student pro-life groups and keeping them active, such a program could have a profound impact on Catholic campuses. So could wider participation in a Feminists for Life project, the College Outreach Program, which encourages campuses to be more child-friendly and more helpful to pregnant and parenting students. It has made a significant impact on Georgetown University, the Jesuits' flagship institution. Vanessa Clay, who helped launch the program at Georgetown, has encouraged

students elsewhere to challenge their campuses on this issue. After all, she noted, "Half of their students have the potential to be pregnant, and 100% of their students have the potential to be parents. This really is an issue that affects everyone on campus." ¹²

Efforts to jump-start inactive parishes and campuses would require a much larger budget than Quinn's office now has. Quinn would like to have more money for organizing inactive parishes, but she also senses that *Roe* v. *Wade* is enormously vulnerable right now—so if someone offered to double her budget, her first priority would be more and "louder" educational work against *Roe*. "We've *got* to get rid of it," she declared.

On Eagle's Wings

Meanwhile, other help is on the way; indeed, much of it has arrived already. In 1989 the late Cardinal John O'Connor of New York wrote a column for his archdiocesan paper titled "Help Wanted: Sisters of Life." He soon heard from women around the country who wanted to join his proposed religious community, which he planned as a mixed contemplative-active group. The first eight women joined in 1991. By late 1994 there were 24; and when they joined the Cardinal at a special event in New York City, he pointed to them and said, "My cathedral is here. . . . I am convinced their prayer will work miracles for the cause of human life at every level. . . . I couldn't be happier with any cathedral." 13

The order now has almost 50 members, including its postulants and novices. Most have attended college; their prior occupations include research science, graphic art, medicine, teaching, and engineering. Mother Agnes Mary Donovan, the order's superior, was previously a psychology professor at Columbia University. Some of her sisters have more offbeat backgrounds; the order's newsletter described one recent postulant as a "talented opera singer" whose family runs an organic farm in Canada and another as "an entertainer at Disney World for nine years." In addition to the traditional religious vows of poverty, chastity, and obedience, the sisters take a fourth vow to protect human life. Living in convents in Yonkers, the Bronx, and Manhattan, N.Y., and Stamford, Conn., the sisters:

- spend several hours each day in prayer—and all day on Fridays
- speak on life issues in churches and parochial schools
- give shelter and spiritual support to pregnant women
- give public witness against abortion, especially on feast days such as that of the Holy Innocents and at the annual March for Life
- offer day and weekend retreats to those who have been involved in abortion (both women and men), and to pro-life workers

- o operate the Dr. Joseph R. Stanton Human Life Issues Library
- run the family life/respect life office of the New York archdiocese.

All of this prayer and work doesn't leave much time for leisure. But in their recreation time, the sisters report, they "are often spotted en masse on the walking, rollerblading, and bike paths near our convents (quite a scene!)." They also play softball.

Working with the Knights of Columbus, the sisters have a convent and host pro-life retreats at Villa Maria Guadalupe, a property in Stamford, Conn., that the Knights bought last year. Mother Agnes described the Connecticut convent as "the first step" in expanding the order beyond New York. She hopes for additional expansion in the U.S., and possibly abroad, "in the next five or six years."¹⁴

Go, Tell It on the Mountain

Founded in 1990-91, Priests for Life is not a religious order, although it is starting one as a separate group. Working hard to activate parish clergy, Priests for Life has become one of the largest pro-life groups in the country. It relies primarily on direct-mail fundraising and expects to raise at least \$10 to \$12 million in 2005, according to press aide Jerry Horn. It has a 62-member staff (both clerical and lay), stationed in its headquarters in Amarillo, Tex., and in satellite offices in Staten Island, N.Y., Washington, D.C., Virginia, California, Pennsylvania, and Rome. Horn reported that Priests for Life does not have individual members, but includes most U.S. priests on its mailing list. He added: "We work very closely with parish pro-life coordinators from every diocese . . . We have an entire department devoted to that activity. We also stay in close communication with the USCCB, keeping them informed of our efforts. We also do a good job of distributing materials produced by the USCCB." 15

Father Frank Pavone, national director of Priests for Life, remarked that his group has found priests "to be very receptive and in fact eager" for suggestions on preaching. He said that "priests ordained in the last twenty years are particularly familiar with and responsive to the pro-life movement; many of them found their vocation through pro-life activities." Pavone often speaks in seminaries. (He's a powerful speaker; a Baptist minister who heard him offered the ultimate praise: "He could make a good Baptist preacher!") He places heavy emphasis on alternatives to abortion, urging pastors to include in their parish bulletins, "as a permanent item," a telephone number where women can find alternatives. He encourages pregnancy-aid centers "to invite the local pastors—of all the denominations—to come and visit personally and see the services that are offered."

Father Pavone also promotes marches, the Life Chain, pickets, sidewalk counseling, and street protest in general. One of his pamphlets is titled "Our Media Is the Streets"; in it he notes that "no major social movement has succeeded in bringing about change in our country, for better or for worse, without taking to the streets." There are many brochures, including "How to Encourage Your Priest to Be Actively Pro-Life" and "You Can Save Someone's Life Today!" They are on a huge website (www.priestsforlife.org) that also includes sample homilies, action alerts, personal testimonies, and much else. There are radio and TV programs as well. Priests for Life depends heavily on Father Pavone's commitment and dynamism. But the group's media efforts seem to depend on him too visibly. It would be wise to give more prominence to other priests in the group—and to its lay staff, also. An ancient philosopher said it well: "A ship should not ride on a single anchor, nor life on a single hope." ¹⁷

Priests for Life encourages strong pro-life involvement in politics. It ran a voter-registration campaign for the 2004 election, one that Pavone said "went very well . . . as we reassured pastors that they can in fact do this activity legally, as long as it is non-partisan." He is well aware of the criticism that "our overall emphasis on pro-life in the political arena helps Republicans." His response? "Sure it does, because the Republican party takes a pro-life position . . . If a Democratic candidate, or the party generally, decide to take a pro-life position, our work will help them. . . . To be truly non-partisan means that you don't care whether your message hurts or helps a particular party."

Churches cannot endorse political candidates unless they're willing to give up their tax exemption. But they can lobby on specific issues at both state and national levels, and many do so. USCCB lobbyists work on abortion and euthanasia as well as foreign policy, immigration, and social-welfare issues. State Catholic Conferences lobby on life issues at the state level, and Pavone encourages parish priests to do the same. While "many feel they do not have the time," he said, the ones who do lobby have "tremendous influence" because legislators understand that priests can affect many votes.

After years of planning and consulting Church experts on the subject, Father Pavone is starting a new religious society, the Missionaries of the Gospel of Life. This will be a "society of apostolic life," similar to a traditional religious order in many ways. But while the members will live in community, the community demands will be less rigorous than those of many traditional orders. This will enable members to travel frequently in pursuing the society's mission. In June 2005, 35 laymen attended a retreat in Amarillo to consider becoming priests in the new society. (The local Planned Parenthood

director was dismayed when they joined a protest at her clinic.)¹⁸ Ten already-ordained priests attended a similar retreat in July. The men who apply and are accepted will begin their formation and training period in October. Pavone noted that the formation time for the already-ordained "will be shorter than for seminarians, of course, but will vary according to each man's background." He said that "I will personally join the Society, out of the desire to do pro-life work permanently." Society members will include deacons as well as priests, and they will make special promises to defend human life. There will also be full-time lay missionaries.

The society will be based in Amarillo; as it grows, there are likely to be other centers around the country. The Missionaries will travel a great deal, preaching widely in Catholic churches and schools. They will do abortion and post-abortion counseling, give retreats, and present pro-life training seminars. They'll seek dialogues with their adversaries on the abortion side, and do media work, as well as encourage pro-life political activity.¹⁹

All of this makes an awesome agenda, but Father Pavone has not come this far by thinking small. In describing the new society to an Amarillo reporter, he commented: "Eventually it could become very big. Some of these societies have hundreds or thousands of members."²⁰

Do Not Pass Me By

Religious orders have arisen within the Catholic Church in response to many specific needs. The Benedictines are noted for their monastic life; the Dominicans for their preaching; the Sisters of Mercy for their care of the sick. The Franciscans, known for their spirit of poverty, now have two small communities whose mission includes pro-life work.

The Franciscan Brothers of Peace, a community of ten in St. Paul, Minn., was started in 1982 by two men who were deeply involved in pro-life work and who made it a key part of the new community's mission. The brothers, who include two novices, do sidewalk counseling at abortion clinics and give aid to single mothers in need. They also beg food for distribution to the poor. They have a mission house in a drug- and gang-plagued neighborhood in North Minneapolis. Brother Hilary McGee is a chaplain for "throw-away children" in a detention center, many of them abuse victims or from broken homes. Brother Hilary remarked, "I've had children hold on to my rosary and ask, 'Will Jesus forgive me for what I've done?' They just want Christ in their lives; they have no one else." The brothers also provide shelter to people who have survived torture in other countries and have sought refuge in America.²¹

Brother Paul O'Donnell, the order's superior and co-founder, and Brother

Hilary traveled to Florida and provided major support for Bob and Mary Schindler, parents of the late Terri Schindler Schiavo, during their unsuccessful struggle to prevent Mrs. Schiavo's death. The brothers had special reason for their involvement: The late Brother Michael Gaworski-O'Donnell's best friend, who was co-founder and first superior of the order—suffered brain damage similar to that of Terri Schiavo. The brothers took turns in caring for Brother Michael for over 12 years; he, like Terri Schiavo, had tube feeding. He died in 2003 after a bout with pneumonia. Brother Paul told the Associated Press that this experience led him to become "a self-taught medical advocate for brain-injured persons." In a story filed shortly before Mrs. Schiavo's death, the AP reported that Brother Paul and Brother Hilary "serve as much more than spiritual advisers to Bob and Mary Schindler—they prepare meals, chauffeur the family around the state, even pick up their mail and dry cleaning." Mary Schindler's brother told the AP that the brothers "are a tremendous comfort. . . . They'll do anything you ask. They're just a tremendous help."22

The Franciscan Daughters of Mary, an order of five women in Covington, Ky., was founded in 1996 to protect and defend life "in the spirit of Saint Francis." Like the brothers in St. Paul, the three professed sisters and two novices spend much time in community prayer. Originally based in Newark, N.J., they moved to Covington last year at the invitation of the bishop there. In Newark the sisters staffed the Rose Garden Home, which combined the work of pregnancy aid with outreach to the poor. Sister Mary Augustine, FDM, said the home helped "over 25,000 people" while the sisters were there. They also spent much time in sidewalk counseling at an abortion clinic in Englewood, N.J., which she described as "the nation's leading provider of partial-birth abortions." In a period of two years, she said, the sisters helped 265 women there choose "life for their children."

The sisters are still dedicated to sidewalk counseling, and they hope to have in Covington another outreach program similar to the Rose Garden Home. They're also planning a medical clinic that will offer prenatal and postnatal care—and probably pediatric services, too. One of the sisters is a nurse, and they expect to have help from Catholic doctors in the Covington area.

Sister Augustine said her group invites women who are entering abortion clinics, or who have already had abortions, to call them on their 24-hour hotline "if they need to talk," assuring them "that we will be there to help them even if they have the abortion." The sisters "will gladly share our techniques with anyone or any group who is seriously committed to saving lives. . . . Their interest is usually piqued by the fact that we have a higher than

average success rate." The sisters have given counseling seminars in at least five states. "We'll go wherever somebody wants us," Sister Augustine promised.²³

Fight the Good Fight with All Thy Might

"In Canada and in the United States, we've been incredibly involved" in the abortion and euthanasia debates, said Knights of Columbus spokesman Andrew Walther. The 1.7 million-member Catholic men's group is also involved in pro-life work in Latin America and the Philippines, where it has many members. It's the largest lay Catholic organization in the world; there are over a million Knights in the U.S. alone. They have been involved in the struggle against abortion since before the 1973 Roe v. Wade decision, and they're noted for putting their money where their convictions are. They have a great deal of money, too, from their huge insurance business, members' donations, and special endowment funds. In addition to their own pro-life programs, they help finance similar programs of the Catholic bishops and groups such as Americans United for Life, Birthright, the Human Life Foundation (publisher of this *Review*), Life Athletes, the March for Life, the Nurturing Network, and the Susan B. Anthony List. As noted earlier, they bought the property for the retreat center, Villa Maria Guadalupe, that the Sisters of Life are staffing in Stamford, Conn. Connecticut Knights volunteered much time to clean and paint the building there. Supreme Knight Carl Anderson believes the center will "play an increasingly important role in the worldwide pro-life movement for many years to come"—but the Knights also receive funding pleas from many other groups. The Vatican needs money for its TV broadcasting; seminaries need help with scholarships; and so on. Last year the Knights at all levels—local, state, and national—gave \$135.7 million to Church agencies and charities. Of that sum, according to the Supreme Knight's recent report, pro-life programs received about \$5.5 million. Some donations that were counted in other categories, though, such as support for the Vatican's mission at the United Nations, had a strong pro-life dimension.24

The Knights have 12,000 local councils around the country. Many of them support local pregnancy centers by financial donations, help with renovations, and "everything in between," Walther said. The Knights also have a long tradition of aiding programs to help people with mental retardation. Their state and local units donated \$17.5 million in that area last year; they also provided many volunteers for Special Olympics programs. Walther described these efforts as "trying to spread the message of Pope John Paul's gospel of life, that every life has meaning."

The Knights have been active on the legal front, funding briefs in key cases dealing with abortion and euthanasia. In 1998 they helped defeat an effort to legalize assisted suicide in Michigan. And this year, Walther said, Knights in California helped collect a huge number of signatures to place on the ballot a proposed constitutional amendment to require parental notification before an abortion can be done on a minor. The Knights' leader, Carl Anderson, has been involved in the pro-life movement for many years. An attorney, he served in the Reagan White House at the same time as a young lawyer named John Roberts; Anderson was delighted when President Bush nominated Roberts to the Supreme Court. In August the Knights' annual convention condemned any attempt to block Roberts's confirmation "based upon his position on whether Roe v. Wade should be reconsidered." In a separate resolution—just in case anyone doubted—the delegates made clear their view of Roe itself: "The Knights of Columbus will never consider Roe v. Wade to be settled constitutional law, and will always seek ways to restrict its application, limit its reach and eventually to overturn it."25

Needing a Friend to Help Me in the End

While abortion makes the greatest demands on their time, Catholic prolife groups are also deeply concerned about the threats of euthanasia and doctor-assisted suicide. With the exception of Oregon, they and their allies so far have out-organized and out-voted the euthanasia/suicide forces in state legislatures and referendums. Catholics' allies have included both secular groups and other religious groups—including Jewish ones, which have a strong tradition against euthanasia.

Greg Schleppenbach, who directs pro-life work for all three Catholic dioceses in Nebraska, has great experience in coalition-building. In the 1990s, worried by threats to legalize euthanasia in his state, he organized the non-denominational Nebraska Coalition for Compassionate Care to stress the alternatives of hospice and better pain control. An old cowboy might have called this, with respect to the bad guys, an effort to "head 'em off at the pass"—and it did just that. With an advisory board that includes the state's attorney general, two former governors, and both U.S. senators, the coalition has serious political clout. Many health-care agencies have given it strong support, and it has organized large and successful conferences. (More recently, Schleppenbach put together the Nebraska Coalition for Ethical Research, which opposes destructive embryonic research and human cloning.)²⁶

The National Council of Catholic Women (NCCW) has a program to meet another critical need in end-of-life issues—the problem of exhausted family care-givers. Some 1,000 NCCW volunteers offer such care-givers a break

by staying with their frail or disabled family members for about four hours a week. The respite volunteers serve mainly as companions, especially to the frail elderly: reading aloud to them, playing cards or board games with them, praying with them. Most of the volunteers are women, although some men accompany their wives on visits.²⁷

This is a project that many other groups could well copy. It would be hard to overstate the problems of isolation and exhaustion that family care-givers face, especially when confronted with severe and long-lasting disability. Respite programs give them a sense of hope and solidarity, as well as practical aid. And the programs introduce new friends and hope into the isolated lives of the patients.

Dioceses and other groups should also think about copying Detroit's Project Life (described earlier) to meet the practical needs of desperate people who are tempted by suicide or euthanasia. This need not involve huge extra sums of money, since existing Catholic hospitals and social-service agencies can provide much of the needed assistance. Many families have themselves been affected by severe and chronic illness, or know other families who have. So it shouldn't be hard to find donors for the added costs of a coordinator, hotline, and emergency fund.

Orthodox Christians for Life: Shout in Joy, O Zacharias

Valerie and John Protopapas were not involved in the abortion issue when their son John was born in 1970. But their baby had spina bifida; and the parents soon realized, in the words of Mrs. Protopapas, that "many doctors were not saving children with spina bifida . . . even though there was help available, they weren't helping them." Their son, though, apparently received the help he needed. Mrs. Protopapas reported that at age 11 he was doing very well intellectually and showing a special aptitude for foreign languages. He used a wheelchair most of the time but, as his mother remarked, "So did Franklin D. Roosevelt!" 28

By then his parents knew all about the use of prenatal testing and abortion to eliminate children like their son. In 1986 they joined an Orthodox priest in starting Orthodox Christians for Life.²⁹ The group is open to members of Orthodox churches or jurisdictions that, together, claim about four million members in the U.S. Valerie Protopapas said Orthodox Christians for Life has a number of chapters, including "quite an active chapter in Washington, D.C." The national group stands out at the annual March for Life in Washington, with bishops and priests in distinctive Orthodox garb, a colorful banner, and signs with icons. Orthodox Christians for Life is a small group, though, and it's run on a shoestring. Asked whether there are any paid staff,

Protopapas quipped, "If I ever got paid for anything, it would probably be the end of the world. Two days after I got paid, the trumpets would sound in the East, and it'd all be over. I wouldn't even have a chance to put it in the bank." There are monthly contributions from some churches, but she said that "we use our own money" when needed. Her husband John, a deacon in the Orthodox Church in America, is the national director; she is the educational director. Their website (www.oclife.org) includes a comprehensive prolife handbook.

The Orthodox have always opposed abortion, although they allow it in the rare case when a mother's life is at stake.³⁰ In their liturgy, they emphasize the Scriptural welcome for unborn children. Celebrating the conception of St. John the Baptist, for example, they sing to his father: "Shout in joy, O Zacharias . . ."³¹ Unlike the Roman Catholic Church, the Eastern churches have not been plagued by theories of delayed ensoulment. One of the Eastern Fathers, St. Basil of Cappadocia (St. Basil the Great), wrote that the "hair-splitting difference between formed and unformed makes no difference to us."³² One might say that the Orthodox were in harmony with the scientific facts of life long before modern embryology existed. Western theologians could have saved themselves—and most of today's Christian churches—a great deal of trouble had they listened to St. Basil.

Yet some Orthodox bishops and priests today, Protopapas suggested, do not say much about abortion because they are otherworldly, sometimes naive, and preoccupied with ancient doctrinal issues. "They're still fighting the Nestorian heresy, many of them," she remarked. Years ago, she asked a seminary dean—a "glorious Russian" who was "extremely intelligent" and "absolutely fantastic"—why the Orthodox church wasn't "speaking out on this issue really strongly." He responded, "But, my child, the church spoke out on this in the third century." To which she replied, "Father, they don't remember what you said yesterday. What makes you think they're going to remember what you said in the third century?"

Church doctrine against abortion is taught in Orthodox seminaries, she said, but "it's not enough to teach the doctrine. You have to teach the young men who will be priests how to deal with the situation. . . . They don't give them the necessary weapons to go in and deal with the culture. They just don't." Priests must know, especially, how to deal with hard cases; she has reminded them that "sometimes you have to say no." The clergy, she declared, must "stand there in that pulpit and say, 'Ladies and gentlemen, brothers and sisters in Christ: If you actually are in Christ, you can't do this."

Protopapas suggested two cultural factors in the Greek community that work against the pro-life Orthodox position. The Greek culture, she commented,

is "like many Mediterranean cultures; the men run everything. And many women get their feeling of liberation, if you will, by doing something like this" (having or supporting abortion). And to some Greeks, she added, being Orthodox is actually "a nationalistic thing"—just part of being Greek—so that the Orthodox *faith* "is a small thing, way off in the distance." She cited their support for the 1988 presidential campaign of former Governor Michael Dukakis of Massachusetts, an abortion supporter who had been excommunicated from the Greek Orthodox Church many years earlier because he had married outside it.

Among the Russians, there's a tendency to see abortion as a political issue. They fear involvement in politics, she said, because in their history that often led to long exile in very unpleasant places. Orthodox Christians for Life, though, focuses mainly on the religious aspects of abortion, as well as of euthanasia, infanticide, suicide, and child abuse.³³ It's one of the few prolife groups to mention child abuse in its list of horribles; others should follow its example.

The group emphasizes not only the lives of victims, but the souls of victimizers—and of those who stand by and do nothing. Protopapas remarked: "There's a prayer in the Orthodox litany: 'A Christian ending to my life—painless, blameless, and with a good defense before the dread judgment seat of Christ.' That is a very powerful prayer, and many people pray it without even thinking about it." She added that "we're not asked to win the war; we're only asked to fight the battle as much as we possibly can with what limited resources are at our disposal. But nobody is going to be able to say, 'I didn't know that the battle was going on at the time . . . I was totally unaware that it was happening.'"

There's a role for everyone, she suggested, including people who are elderly and house-bound. Noting that the "prayers of the faithful and the blessed move mountains," she declared: "The rest of us can be sitting out here and running and screaming and carrying on and jumping up and down—and one little old lady praying in her bedroom probably does more good than the whole group of us put together."

Southern Baptist Convention: I'm Using My Bible for a Road Map

Dr. Richard Land of the Southern Baptist Convention has so much influence in high places that *Time* magazine has called him "God's Lobbyist." As *Time* noted, "The men around his longtime friend George W. Bush don't sit around waiting for Land's call. They reach out to him."³⁴ His strength comes not only from his friendship with the president and his other credentials (including degrees from Princeton and Oxford), but also from the fact that

he represents the largest Protestant denomination in America. The Southern Baptists have more than 16 million members and, despite the "Southern" in their name, have churches around the country.

Land, a Southern Baptist minister who is deeply committed to the pro-life cause, heads the church's Ethics & Religious Liberty Commission. In addition to its heavy involvement in public policy, the commission offers to local churches a substantial educational program on life issues.

This was not always the case. In 1971, under the influence of "moderate" or "liberal" leaders, the church's annual convention passed a resolution that called for "a high view of the sanctity of human life, including fetal life"—yet also proposed legislation allowing abortion for hard cases and even when there was "carefully ascertained evidence of the likelihood of damage to the emotional, mental, and physical health of the mother." Emotional and mental health can provide a huge, all-purpose loophole. Coming two years before *Roe* v. *Wade*, the Southern Baptist resolution was one of many from Protestant churches that gave a green light to judges and politicians who wanted to reduce or remove legal restrictions on abortion. The Southern Baptists reaffirmed their 1971 position a year after *Roe*, but they made a radical change in 1980. Noting that all "medical evidence indicates that abortion ends the life of a developing human being," they called for a ban on abortion "except to save the life of the mother." "35

Dr. Timothy George, dean of a divinity school in Alabama, said the 1980 resolution showed "a widespread reaction of the grass-roots constituency against a denominational bureaucracy from which they felt deep alienation." He thought the church in the early 1970s had suffered from "the erosion of doctrinal substance and the failure to think through theologically the great issues of our time."

The 1980 resolution was an early salvo in conservatives' struggle to regain control of the church's bureaucracy and seminaries. This involved many issues besides abortion; the conservatives' belief in Biblical inerrancy appeared to be at the top of the list. In her *Baptist Battles*, Nancy Tatom Ammerman described how, at one convention, many conservative delegates had started home after winning one crucial vote, but before a second vote that was also important. Conservative leaders called their people back, and moderates joked "that 173 buses had been ticketed that afternoon for making U-turns on the freeway." The battle was both intense and personally difficult for many church members. Ammerman quoted an elderly delegate who said that conventions used to be "real spiritual, and I'd go home and feel like I'd been in heaven. But not these days. I wish it would go back to the way it was.³⁷

When the smoke of battle cleared, the conservatives were in full control. They passed a series of pro-life resolutions and focused much attention on alternatives to abortion. Today Dr. Land's commission offers to local churches literature for use on Sanctity of Human Life Sunday in January and also throughout the year. Pamphlets range from "What the Bible Teaches about Abortion" to "Alternatives to Abortion: Suggestions for Action." The commission also raises money to buy ultrasound machines for pregnancy-care centers, since experience shows that women are far less likely to have abortions if they see their unborn babies on ultrasound. This is called the "Psalm 139 Project" for the Scriptural verse that proclaims, "Truly you have formed my inmost being; you knit me in my mother's womb. I give you thanks that I am fearfully, wonderfully made . . ." A project brochure quotes a client who said, "Seeing that picture made my decision for me." Another remarked that her child "was tumbling! I didn't know it would be so developed. I couldn't have an abortion after what I have seen." 38

Another Southern Baptist agency, the North American Mission Board, helps local churches establish pregnancy-care centers. Elaine Ham, who directs the board's pregnancy-care ministries, said her work includes training volunteers for new centers. In an interview, she noted there are about 110 affiliated centers that "we correspond with and talk with on a regular basis." She added that the "three states that have the most are Florida, Texas, and Oklahoma. But our centers are located all across the country." A center usually has one paid staff member and relies heavily on volunteers for counseling and other work. The centers are open to women of all faiths or no faith.

Evangelism is "the primary purpose" of the centers, though, according to Ham. She remarked that "when a woman visits a pregnancy-care center, it's obviously because she has needs in her life. And those needs can ultimately be met through the hope that's found in Jesus Christ." But she said that if a woman does not want to talk about religion, "certainly, that is respected." Counselors are interested in the fathers of unborn children, as well as the mothers. They encourage a woman "to bring the young man in . . . because he has questions that need to be answered," Ham noted. "You know, he is often just as frightened as she is" and "not knowing where to turn."

When she was director of a center in South Carolina, Ham wrote about the experience of holding in her arms a baby who had come close to being aborted. At the time his mother first came to her center, "The decision had been made, the verdict had been rendered, and the execution date had been set." But the mother "allowed a volunteer counselor to share with her the love of Jesus Christ." The mother changed her mind and, in subsequent months, "we helped her find a place to live, provided maternity and baby

clothes, and offered unconditional love and acceptance." Emphasizing that there are many pregnancy-care centers around the country, Ham told her readers, "There's probably one in your town. If not, there should be."³⁹

Baptists for Life: Then Sings My Soul

Baptists for Life, based in Grand Rapids, Mich., works mainly with churches in conservative Baptist denominations outside of the Southern Baptist Convention. While national in scope, the Baptists for Life are strongest in the Midwest. They place a high priority on helping their neighbors—especially women with crisis pregnancies and people with chronic or terminal illness—and on evangelism. Executive Director Thomas Lothamer summed up their attitude when he declared, "We're change agents. We're ambassadors. And so let's go."

Established in 1984, the group has an annual budget in the range of \$350,000, three full-time staff and four part-timers. It offers high-quality literature—and literature with a punch. One of its "Life Matters" church-bulletin inserts, for example, deals with abortion of the handicapped by starting with one question, "Did you have the right to be born?" and ending with another, "How welcome are the disabled in your church?"

The group places much emphasis on medical ethics, offering literature, seminars, and free consulting. Fairly often, Lothamer said, there are calls or e-mails from pastors or families faced with difficult medical decisions, and "we try to guide them from a Biblical perspective." Rev. Mark Blocher, a medical ethicist and a Baptists for Life founder, handles many of these queries as well as ones from doctors.⁴⁰

Realizing that many families need assistance in dealing with chronic or terminal illness, Baptists for Life helps local churches provide the aid. It trains coordinators of volunteers—and sometimes the volunteers themselves—for respite programs that help families care for disabled or dying patients at home. Given "the aging of America," Lothamer remarked, "this is going to become a greater and greater ministry for local churches." His group also works with missionaries who are taking the ideas of respite and hospice care to Africa "in light of the AIDS situation" there.

Lothamer estimated that Baptists for Life has started about ten pregnancy-care centers. It encourages and assists as many as 200 centers a year through workshops at national conventions and by answering telephone queries. And it helps train pastors overseas in pregnancy care and post-abortion counseling. In dealing with a woman who has a crisis pregnancy, a major goal is "to help that woman spiritually, because we feel that's one of the underlying problems that she's going through," Lothamer commented. How about

women who don't want to hear about religion, but just want some help? "There is never, ever, ever, ever any pressure put on a woman," he replied, adding that "you can't shove religion down someone's throat." Such a woman, he said, receives "the same care and help that any other woman would receive."

Lothamer acknowledged that negative influences in American culture make his work harder, but suggested that "God does some of his greatest work" when things seem impossible. "And yes, if you looked at the big picture and you thought, 'Oh, man, we're getting bombarded; we're getting beat up'—all that—you might quit. But you don't quit because you know each day is a new opportunity."

African American Churches: Michael, Row the Boat Ashore

Although African Americans make up only about 13 percent of the U.S. population, they account for 30 percent or more of abortions each year. It's estimated that they have lost 14 million of their children to abortion since 1973.⁴¹ Rev. Dr. Johnny Hunter once said that "we just can't keep taking that kind of hit. . . . Just give us a generation or two and we'll be on the endangered-species list." Dr. Hunter, an ordained minister and longtime pro-life activist, heads a group called LEARN (Life Education and Resource Network). He and his LEARN colleagues use prayer, education, and demonstrations in their struggle against abortion. He believes that "the majority of the black community is more pro-life than anything else." He declared: "Blacks were never taught to destroy their children; even in slavery they tried to hold onto their children."⁴²

Where are the key black churches on the issue? Eight major denominations—four Baptist, three Methodist, and the Church of God in Christ—together claim over 23 million members. Most of them apparently have no recent statements on abortion. But the African Methodist Episcopal (AME) Church has issued pro-life statements, and its social-action committee recently established a task force on abortion. Denominational pro-lifers hope this will, as one said, "put some feet" on the official position. Writing in the AME Church's *Christian Recorder* newspaper two years ago, Tennessee pastor Joseph Parker declared that many "battles for right and justice are far from over," including the one "to abolish abortion in our nation." He urged his readers: "Let's get moving—in prayer, in crying out and in opposition to abortion on every front. Let's, by God's power, grace, and mercy, bring this terrible thing to a halt."⁴³

But many black pastors, like many white ones, avoid the issue in their sermons. Dr. Hunter, in a 1996 newspaper interview, noted that there are

"inner-city pastors who are dealing with members of the congregation being gunned down in the streets, or trying to get someone off of drugs—they have so many other battles already, that they feel like they have their hands full." But some pastors, he added, are "scairdy cats" and "not really pastors" when it comes to abortion. He recalled one "who was honest enough to tell me, 'Brother, I love you, but if I get involved in this thing, tithes would go down; people would stop paying tithes in my church. But I'll be praying for you."44 Some pastors are clearly on the other side. Rev. Clenard Childress, a New Jersey minister and a major LEARN leader, noted that "many a pastor supports Planned Parenthood, which is the leading abortion provider in the country," and/or the Religious Coalition for Reproductive Choice. Childress added that "we have our work cut out for us." They don't have much money for that work; Hunter said the LEARN budget "is always tiny," usually in the range of \$30,000 to \$70,000. But he added that "God has a way of just helping us out, anyway." He also remarked that the "thing that has blessed me the most" is that young people are involved.45

Day Gardner heads Black Americans for Life, an outreach group of the National Right to Life Committee. Gardner, who has a background in business and entertainment, describes herself as a "born-again Christian." While black pastors know that some women in their churches are having abortions, she remarked, "I think a lot of them don't know the rate at which we are aborting our children." Still, she said, it "baffles me" that pastors can "skip around such an important issue." She doesn't think the answer is to organize pro-life groups within the major denominations but, rather, to work across church boundary lines. Black pro-life leaders understand, she said, "that there's no one church or group" that by itself can stop "the horror of killing these beautiful children." The leaders, she declared, are "out there stomping ... and we're speaking and we're traveling ... we're just doing everything that we can." She often speaks to church congregations and believes that she's "an easier messenger for black women." When a man speaks on the issue, she said, "a woman tends to think, 'Well, you haven't walked in my shoes. You don't know what it is to go through childbirth" or to be a single mother.

A few years ago, Gardner got together with seven other African American women, including both professionals and stay-at-home mothers. They decided that "we are not going to be quiet" about abortion anymore, but will "talk about it to our families, to our children, to our churches, to our friends, our co-workers." They call their group the Coalition of Women; Gardner lost track of the number of members after it reached 250. There are no dues

or by-laws, and news of the group spreads mainly by word-of-mouth. Gardner's office sends a "Welcome aboard" letter to black women who want to join and also sends them information or a speaker as needed.

Progress is being made at the personal level. But when it comes to larger-scale politics, said Pastor Childress, most African Americans don't vote for pro-life candidates. Instead, they vote for ones they believe "can do us immediate economic good." He suggested that "we're not looking at our destiny and our inheritance that we have in our children." Black voters' strong allegiance to the Democratic party is a concern he shares with Dr. Hunter and Day Gardner. They realize that the Democratic party's embrace of the civil-rights movement in recent decades explains much of black voters' loyalty, but they want to see their community become more independent in politics. "I've always said that the pro-life movement is the true civil-rights movement of this present day," Childress remarked. Gardner said she votes not for the party, but for "the pro-life candidate."

Pastor Childress hopes to reach many fellow pastors through relatively inexpensive programs on black radio, "because preachers listen to black radio to get a barometer on what other preachers are doing." A pastor "is concerned, because of our competitive nature, about what the church down the street is doing," Childress commented. "He's concerned about the big shots in his area. So he always goes to black gospel radio."

Childress does not hesitate to use the word "genocide" in speaking of abortion's effects on the black community; in fact, his website's address is www.blackgenocide.org. He said that in a recent month there were "over half a million hits" on the site. Dr. Hunter's site, www.learninc.org, includes material on eugenics.

LEARN already has some deeply committed pastors involved. If they can enlist many more, they will make a huge difference. The church is central to the lives of many African Americans. It's their historic refuge—a place of warmth and welcome, glorious singing and powerful preaching. Their tradition of dialogue between pastor and congregation helps ensure that people won't be nodding off at key moments. "Black preachers demand participation from their congregations," the authors of *Spoken Soul* explain. "If they so much as sense a lull, they will not hesitate to ask, 'I'm not boring y'all, am I?' or 'How much time I got left?' To which the only proper response, of course, is a hearty 'No sir!' or 'Take your time, Preach!'" A good preacher can introduce a difficult topic with skill and humor. Thus the Rev. Dr. Jeremiah Wright, a Chicago pastor, once told his congregation to "turn to your neighbor and tell them, 'He's going there." Then he told them to "turn to the other side and say, 'I wish he wouldn't."

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Sister, Help to Trim the Sails

Rev. Janine Simpson, an African American, has in-depth experience in trying to develop pregnancy-care centers in urban neighborhoods around the country. Until recently, she directed urban-center development for Care Net, a huge network of pregnancy centers with an evangelical orientation. There's "a disproportionate number of pregnancy centers located in suburban and rural areas," Simpson wrote in a recent article, "compared to urban areas where abortion rates are the highest." While she, like LEARN leaders, criticized Planned Parenthood for targeting minority neighborhoods, she acknowledged that "many urban communities view Planned Parenthood as a trusted friend that wants to help, not harm them. . . . Some people question the validity of any voice that speaks against Planned Parenthood." (Also, she said, "The Right to Life movement is seen as a Republican issue.") Simpson said Care Net is working with 16 programs around the country to develop urban pregnancy-care centers. (Some of the centers have opened already.) She believes that the "optimum mix of services for an urban center must be more comprehensive than for suburban centers" because poverty and other problems are so much greater in the cities.⁴⁷

In Louisiana, Barbara and Charles Thomas have developed such a comprehensive program in their North Baton Rouge Women's Help Center. The couple, who are now on the LEARN board, opened the center in their own home in the early 1990s. By 1995, with help from many volunteers, they opened a newly renovated building for the center. In addition to pregnancy counseling and free baby and maternity items, the center offers prenatal and parent-education classes for parents—men as well as women. In a recent interview, Mrs. Thomas, the executive director, said that "we use one of those sessions" for spiritual issues, to "mature them once they give their lives to the Lord." The center also offers a GED and literacy program so young mothers and fathers can obtain high-school-equivalency diplomas, or at least upgrade their reading and language skills. The local public school system provides the teachers for this program, Thomas said, "and we provide the space and the students."

Thomas is trying to raise funds to "deal with actual job training" in fields such as computers, cosmetology, carpentry, and masonry. She has a donated warehouse for the space, and she hopes a local community college will provide the teachers. (Partnerships, she remarked, are "the key to getting a whole lot of this accomplished.") The students probably will pay sliding-scale fees rather than full tuition.

The Women's Help Center has a medical director for general supervision,

plus a staff doctor who comes in on a regular basis. While the center points clients toward eventual self-sufficiency, right now many clients need Medicaid assistance for prenatal care; so the center also serves as a Medicaid application center. Thomas wants to take this "a step farther" and have her staff doctor "see them throughout" pregnancy. Medicaid will reimburse the center for that service; the extra income will not be "a whole lot," she commented, but "it'll add up." The center has financial support from individuals, businesses, and several churches, and Thomas hopes to obtain more. She already has opened a second center in Baton Rouge.

The Latter-day Saints Do Not Quite Go Marching In, Yet ...

The Church of Jesus Christ of Latter-day Saints has over five million members in the U.S.; they are called Latter-day Saints or, more frequently, Mormons. Their Church opposes abortion, but allows some exceptions. Church spokeswoman Kim Farah quoted the following from a handbook used in counseling members: "The Church opposes elective abortion for personal or social convenience. Members must not submit to, perform, encourage, pay for, or arrange for an abortion. The only possible exceptions are when: 1. Pregnancy resulted from rape or incest. 2. A competent physician determines that the life or health of the mother is in serious jeopardy. 3. A competent physician determines that the fetus has severe defects that will not allow the baby to survive beyond birth." A church website emphasizes that a child "is a gift from our Creator" and that human life "is sacred and should be treated with reverence from its beginning to its end." The Mormons are also noted for their strong emphasis on family life. 50

The Church does not, however, have a respect-life educational program. Farah said that it's "not affiliated with any pro-life movement" and that pro-life talks "are not given from the pulpit." She emphasized, though, that "the Church's position on abortion is quite clear to those of the faith."⁵¹

Mormon members of the U.S. Senate are supporting embryonic-stem-cell research. Senator Orrin Hatch (R-Utah), although generally a strong opponent of abortion, has become a leader in the effort to gain more federal funding for such research. Some observers have attributed the position of Mormon senators to the Church's theology, which they say is ambivalent on when human life begins. Farah reported that the Church "does not have a current position on stem-cell research." But she also said: "We have no position on when the spirit enters the body." Senator Hatch has said he believes "that human life begins in the womb, not a petri dish or refrigerator." Embryologists, however, say it begins at fertilization, 52 and fertilization now occurs either the old-fashioned way or in a petri dish during a laboratory

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process—so destroying an embryo to obtain its stem cells for research is an early form of abortion. By ignoring scientific evidence on when each human life begins, Hatch and others are following the bad example set by the late Justice Harry Blackmun and his colleagues in *Roe* v. *Wade*; but this problem is by no means unique to Mormons.

The Latter-day Saints have an agency called LDS Family Services that offers pregnancy counseling and other assistance to women in need. The service is free and available to women outside the Church as well as to Mormons. An LDS Family Services brochure speaks of helping "make plans for you and your baby." The only explicit reference to abortion that I found, on one of the agency's videos, is negative. The video shows a boyfriend's parents, who clearly want their son to avoid his responsibility, treating the girlfriend in a hostile way and suggesting an abortion to her. "I've always thought abortion was wrong," the young woman recalls later, "but it was hard for me." She says that she listened to her heart and "knew that wasn't the right thing to do." Another video shows a young woman who goes back and forth between "keeping my baby or adoption"; that video does not seem biased on the question one way or the other. But the first video leans strongly to the adoption side and is, in this writer's view, too negative about single motherhood. It's not the ideal, but many women—unmarried, divorced, or widowed have brought up children by themselves and done it very well. Overall, though, the brochures and videos are professionally done, attractive, sympathetic to the young women, and clearly pro-baby.⁵³

Pro-life Quakers: Let Your Life Speak

The Religious Coalition for Reproductive Choice, in a collection of denominational statements friendly to its point of view, includes one from the American Friends Service Committee. Quakers (Friends) started the committee for relief work in the early 1900s; but many people involved in it today are not Friends. The committee speaks for itself alone; it has no authority over the Friends or their yearly meetings around the country.⁵⁴ (The term "yearly meetings" does not refer only to those annual events, but to the groups, usually regionally based, that sponsor the annual meetings and provide a base for activity between meetings.)

There is far more diversity among the approximately 200,000 Quakers in this country than outsiders realize. They have no national policy group to speak for everyone; their yearly meetings are autonomous. There's a substantial group of evangelicals among the Friends, and they tend to oppose abortion. Many others, of a more "liberal" theological view, do not believe abortion is wrong and/or believe it should be legal. But there are exceptions

among the liberals; the traditional Quaker witness for peace leads them to oppose abortion, and they identify with the consistent ethic of life.⁵⁵

One of them, Missouri psychologist and writer Rachel MacNair, is a past president of Feminists for Life of America and the author of several books. In a 1999 article for *Quaker Life*, MacNair stressed the violence of abortion, calling it "a brutality forced upon fetal children by sharp instruments or chemical poisons." She also appealed to the Quaker belief in human equality. "If we take an entire class of human beings and put them outside the protection of the human community," she wrote, "we've not only ignored the equality of human beings, but sabotaged all other claims to such equality." MacNair has a Ph.D. in psychology, and her speciality is the horrific effects that killing often has on those who do it. She emphasizes this with respect to abortion-clinic staff as well as executioners and soldiers.⁵⁶

Marylander Bill Samuel, Webservant of QuakerInfo.com, was active in a Quaker peace vigil at the White House during the Vietnam War. One day, two other vigilers were late returning from an errand. They had happened on a demonstration against the Catholic Church's pro-life position. "My friends felt compelled to counter-demonstrate," Samuel wrote years later. He added that their "deep conviction that abortion was contrary to the will of God brought me to seriously consider the issue for the first time." The "consistency" position of these and other vigilers made sense to Samuel, who is currently president of Consistent Life and a board member of Democrats for Life of Maryland. He also volunteers at a pregnancy-aid center. He has found that: "My pro-choice friends basically seem to accept the world's assumptions about 'unwanted' children and women's options. My pro-life friends reject these assumptions, assuming that God can redeem any situation." 57

Peace in the Valley?

There is so much splendid pro-life work in the Christian churches—and more now than ever before—that one hesitates to offer criticisms. Yet evading some real problems will not make them go away. Confronting and dealing with them should enhance the pro-life work of religious groups.

The political struggle against abortion and euthanasia has lasted so long, and has been so difficult and bitter, that even many deeply religious prolifers have come to think of their adversaries as permanent enemies rather than people who can be won over. Some "Religious Right" groups and leaders have encouraged this attitude, especially by shrill language in fundraising appeals and press releases. This is not true of most groups covered in this series, but the public tends to assume that the loudest and shrillest speak for everyone. Now that overturn of *Roe* v. *Wade* may be in sight, it is time—

actually, long past time—for the ultra-shrill to moderate their language so they won't, as the saying goes, "snatch defeat from the jaws of victory."

There are other language and symbolism problems besides shrillness. The tendency of some evangelicals to divide nearly everything into the "godly" and the "ungodly" is annoying to many outside their community. The emotional style of charismatics and Pentecostals, when evident in public demonstrations, bewilders and sometimes frightens people from more reserved traditions. And it's counterproductive when Catholics emphasize distinctively Catholic symbols—rosaries, crucifixes, and statues—in pro-life marches and protests that are addressed to secular officials and the public at large. This reinforces the sincere, though mistaken, impression of many that abortion is a religious issue only—and a Catholic issue above all. Pro-life leaders, scholars, and attorneys can make an eloquent human-rights case one that appeals to people of all faiths or no faith—until they are blue in the face; but when the symbolism of demonstrators is overwhelmingly sectarian, that overrides all the eloquent statements. There's a similar problem with letters to public officials, if one can judge by the protest mail that Justice Blackmun received about Roe v. Wade and other abortion decisions. A large portion of that mail protested on religious grounds alone; the writers seemed to forget they were addressing a secular judge who was supposed to rule on the law and the Constitution.58

A practical start in dealing with this problem would be to convince people that, for every banner, sign, or statement that's religious in nature, there should be at least one or two that are not. "Life, Liberty, and the Pursuit of Happiness," for example, would be a good start. Law professor Helen Alvaré, who used to be the spokeswoman for the Catholic bishops on life issues, was outstanding in that role partly because she understood the importance of "the language of the American experiment," including the Declaration of Independence and "other great documents in our tradition." In political settings, she said, "I make sure that they understand that our tradition of respect for life—our Catholic tradition—is beautifully consonant with what America hopes for itself." Alvaré remarked that "in a Republican setting I do it one way, and then in a Democratic setting I do it another way." Either tradition, she added, "has within it enough to support that pro-life case." 59

It's important, also, to be sensitive to the concerns that millions of Americans have about separation of church and state. Many ardent pro-lifers are also ardent in wanting to keep the Ten Commandments on the courthouse lawn, the Christmas crèche in front of city hall, and government money for the good works of faith-based groups. They assume that opposition to such practices comes mainly from atheists. In fact, much of it comes from fellow

believers who are keenly aware of the misery caused by church-state combinations throughout history. Jews, Huguenots, Quakers, Irish Catholics, and many other groups—remembering terrible persecution of their ancestors can testify to that misery. Some people also fear that government subsidy of religious groups means a buy-out of religious leadership (a realistic fear, in this writer's view).⁶⁰ Much historical evidence suggests that a clear separation between church and state is best for both institutions. When Christians keep pressing for government endorsement of religious views and symbols, they feed the fears of theocracy that many Americans have. Those fears are genuine; they grow stronger as religious conservatives gain more political power, both here and around the world; and they could produce a backlash that will drag the pro-life cause down. Asking special favors from government also creates a priorities problem that need not exist, making it easier for politicians to buy off religious leaders with subsidies or symbolic gestures instead of delivering on issues that have a high political cost—such as opposing embryonic stem-cell research.

It's time to put away the lures of triumphalism, while staying focused on the crucial work of saving lives. It is also time to think about olive branches for adversaries, who really need not be permanent enemies. Courage remains essential to winning the victory, but humility and restraint are needed to achieve true peace in the valley.

NOTES

Where quotations are not cited to notes, they are from one of the following interviews by the author (telephone interviews unless otherwise indicated):

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Day Gardner, Black Americans for Life, National Right to Life Committee, 1 Aug. 2005
Elaine Ham, North American Mission Board, Southern Baptist Convention, 1 Oct. 2004
Thomas Lothamer, Baptists for Life, 29 Sept. & 1 Oct. 2004 & 10 June 2005
Frank Pavone, Priests for Life, 7 Dec. 2004 & 28 July 2005, e-mail replies to queries
Valerie Protopapas, Orthodox Christians for Life, 29 Sept. 2004 & 8 June 2005
Gail Quinn, Secretariat for Pro-Life Activities, U.S. Conference of Catholic Bishops,
28 Sept. 2004 & 27 July 2005

Barbara Thomas, North Baton Rouge Women's Help Center, 9 & 15 Aug. 2005 Andrew Walther, Knights of Columbus, 1 & 9 Aug. 2005

- 1. Membership figures for the Catholic Church, and for other churches referred to later, are from "inclusive membership" figures in Eileen W. Lindner, ed. Yearbook of American & Canadian Churches, 2004 (Nashville, Abingdon Press, 2004). The figures are not strictly comparable, however, since some churches count infants and young children, while others do not. And the Yearbook, 357, warns that some churches make "very careful counts" of members while others simply "make estimates."
- 2. Marianne Luthin, interviews by author, 24 & 25 May 2005.

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- 3. Kathleen Dooley Polcha, interview by author, 1 Aug. 2005; and "Lifeline," www.stlprolife.org, accessed 14 June 2005.
- 4. "Hot Line Targets Suicide, Abortion," Washington *Times*, 7 Aug. 1996, A-2; David Crumm, "Church Line Brings Help to Desperate Individuals," Detroit *Free Press*, 27 Aug. 1997, 1-A & 8-A; and Angela Nooe (of Project Life), interview by author, 4 Oct. 1999.
- 5. Paul Yasenak, C.SS.R., interview by author, 8 June 2005.
- 6. Pennsylvania's Gabriel Project website offers much information; see www.gabrielproject.com.
- 7. See www.hopeafterabortion.com.
- 8. Philip Reilly, interview by author, 18 Jan. 1999 & 8 Aug. 2005; and www.members.aol.com/infants1 (website of Msgr. Reilly's group, the Helpers of God's Precious Infants).
- 9. See www.nchla.org.
- USCCB, "Catholic Bishops Launch Stem Cell Ads Nationwide," 20 Oct. 2004, www.usccb.org/ prolife/stemcellads.htm, accessed 23 May 2005; "Catholics Send Millions of Postcards...," 14 April 2005; and Gail Quinn, "Use Today's Powerful Tools to Spread the Word," 6 May 2005, 2.
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- 12. Nicole M. Callahan, "Seeds of Change at Georgetown," *American Feminist* 11, nos. 2-3 (Summer/Fall 2004), 12-14, 14. See, also, Callahan's "Revolution on Campus" in the same issue, 3-8. More information is available at www.feministsforlife.org.
- 13. "History," www.sistersoflife.org; and John Burger, "My Cathedral Is Here," Catholic New York, 24 Nov. 1994, 3.
- 14. Agnes Mary Donovan, interviews by author, 19 Oct. 1996 & 8 June 2005; and "New Postulants," Sisters of Life newsletter, no. 19 (Christmas 2004), 3-4; "Community Life," www.sistersoflife.org, accessed 8 Aug. 2005; and Sisters of Life newsletter, no. 20 (June 2005), [6].
- 15. Jerry Horn, 16 Nov. 2004, 31 May 2005, & 2 June 2005, e-mail replies to queries from author; and www.priestsforlife.org.
- Unnamed minister, quoted by Ernest Ohlhoff (of the National Right to Life Committee), interview by author, 17 Dec. 2004.
- 17. Attributed to Epictetus, *Fragments* (abridged version), in Charles W. Eliot, ed., *The Harvard Classics* (New York: P. F. Collier, 1937), vol. 2, 184.
- 18. Brandi Dean, "Pro-Life Group Begins First Discernment Retreat," Amarillo *Globe-News*, 25 June 2005; and Brandi Dean, "Potential Priests Try Out the Pro-Life Life," ibid., 26 June 2005, both accessed through www.priestsforlife.org.
- 19. See "Frequently-Asked Questions about the Missionaries of the Gospel of Life" and "The Missionaries of the Gospel of Life: Activities and Spirituality," www.priestsforlife.org, accessed 29 July 2005.
- 20. Brandi Dean (n. 18, first article).
- 21. "Information," "Letter from Brother Paul" and "Vocation Stories/Br. Hilary," www.brothersofpeace.org, accessed 3 Aug. 2005; and Paul O'Donnell, fbp, 1 & 2 Aug. 2005, e-mail replies to queries from author.
- 22. Jacki Ragan, "The Passing of a Much Beloved Man," National Right to Life News, Sept. 2003, accessed through www.nrlc.org/news; and Associated Press, "Loyal Monks Help Schiavo's Parents," 30 March 2005, accessed on www.msnbc.msn.com. Brother Paul and Brother Michael cofounded the Pro-Life Action Ministries, St. Paul, Minn., in 1981; that group is still active, especially in sidewalk counseling, and Brother Paul serves on its board of directors. O'Donnell (n. 21, 1 Aug. 2005).
- 23. "The Franciscan Daughters of Mary," "Our Prayer Life," and "Our Apostolate," www.franciscandaughtersofmary.org.; Sister Mary Augustine, FDM, 3 Aug. 2005, e-mail reply to queries from author; and Sister Mary Augustine, FDM, interview by author, 4 Aug. 2005.
- 24. "Milestones in the Crusade for Life" and "Pro-Life Programs & Initiatives," www.kofc.org, accessed 14 June 2005; and [Carl Anderson], Report of the Supreme Knight, 2 Aug. 2005, Chicago, Ill., printed version, 3-12, 25-28, & 32-40, accessed through www.kofc.org. The figure for donations to pro-life programs is based on the total reported for state and local councils (p. 11 of the Supreme Knight's report) and the national group's total (p. 34).
- 25. Ibid., 26; "Nomination of Judge John G. Roberts to the U.S. Supreme Court" and "Resolution on Roe v. Wade," 4 Aug. 2005, www.kofc.org.
- 26. Greg Schleppenbach, interviews by author, 23 Dec. 1998 & 10 June 2005; and www.nebrccc.org

- and www.ethicalresearch.net, accessed 13 Aug. 2005.
- 27. National Council of Catholic Women, *Respite Manual* (Washington: NCCW, 2nd ed., rev., [1999]; Annette Kane, interview by author, 29 Sept. 1999; and Annette Perry, interview by author, 8 Aug. 2005. Unfortunately, though, the current number of volunteers apparently is about half the number in 1999. Perhaps the program needs higher priority or a jump-start. (The program manual, video, and brochure may be ordered through www.nccw.org/publications.)
- 28. Valerie H. Protopapas, letter quoted in J. P. McFadden, "Introduction," *Human Life Review* 8, no. 3 (Summer 1982), 5-7. In her letter, Mrs. Protopapas referred to President Ronald Reagan; he responded to her, and this led to a Reagan essay in a subsequent issue of the *Review*. See vol. 30, no. 3 (Summer 2004), 56-65, for background and a reprint of the Reagan essay.
- 29. "Orthodox Christians for Life" brochure, 1991, rev. On the diversity within Orthodoxy, see Peter W. Williams, *America's Religions* (Urbana, Ill.: University of Illinois Press, 2002), 302-308.
- 30. The Orthodox Christians for Life ProLife Handbook (Melville, N.Y.: Orthodox Christians for Life, 2002), 3, accessed on www.oclife.org, names "ectopic pregnancy or a hysterectomy for a cancerous uterus" as examples, saying that "there is really no choice as both mother and the child will die unless medical intervention takes place."
- 31. Ibid., 7.
- 32. Quoted in John T. Noonan, Jr., "An Almost Absolute Value in History," in John T. Noonan, Jr., ed., *The Morality of Abortion: Legal and Historical Perspectives* (Cambridge: Harvard University Press, 1970), 17.
- 33. Orthodox Christians for Life ProLife Handbook (n. 30), 48.
- 34. "God's Lobbyist," Time, 7 Feb. 2005, 42-43.
- 35. "Southern Baptist Convention," in J. Gordon Melton and Gary L. Ward, ed., *The Churches Speak On: Abortion* (Detroit: Gale Research, 1989), 153-154.
- 36. Timothy George, "Southern Baptist Heritage of Life" (Nashville: Christian Life Commission, Southern Baptist Convention, 1993), 4 & 14. The SBC's old Christian Life Commission is now the Ethics & Religious Liberty Commission.
- 37. Nancy Tatom Ammerman, Baptist Battles: Social Change and Religious Conflict in the Southern Baptist Convention (New Brunswick, N.J.: Rutgers University Press, 1990), 10-11 & 169.
- 38. Psalm 139:13-14 (New American Bible); and "He Knew Me from the Very Beginning: Psalm 139 Project" brochure, n.d., received from the SBC's Ethics & Religious Liberty Commission in July 2005. For other information on life issues, see: www.erlc/issues.
- 39. Elaine Ham, "First Hand Account from a PCC Director," www.namb.net, accessed 15 Aug. 2005. (On this site, search for "Pregnancy Care Ministries.")
- 40. For more information on this and other programs, see www.bfl.org.
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- 42. Johnny Hunter, "African Americans for Life," interview with Gulf Coast Christian Newspaper, Feb. & March 1996, www.siteone.com/religion.
- 43. Author's checks with denominational headquarters, Jan., Feb. & Aug., 2005; Joseph Parker, interview by author, 15 Aug. 2005; Luke Robinson (an AME pastor in Maryland), interview by author, 16 Aug. 2005; and Joseph Parker, "Taking a Stand for Justice," Christian Recorder, 17 Feb. 2003.
- 44. Hunter (n. 42).
- 45. Johnny Hunter, interview by author, 8 Aug. 2005.
- 46. John Russell Rickford and Russell John Rickford, Spoken Soul: The Story of Black English (New York: John Wiley, 2000), 51-52.
- 47. Janine Simpson, "The Urban Initiative," Center of Tomorrow, Spring 2005, 5-20, 8-9, 18, 19, & 11-12, accessed through www.care-net.org. See, also, Sheryl Blunt, "Saving Black Babies," Christianity Today, Feb. 2003, accessed through www.christianitytoday.com.
- 48. See www.nbrwhc.org.

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- 49. Kim Farah, 29 July 2005, e-mail reply to queries from author. Farah described the source as "a general handbook of instructions which is not published but is made available to Church leaders" for use in counseling Church members. Yet an official Church website presents a 1973 statement—which it says "is still applicable today"—that does not include exceptions for incest or lethal fetal handicaps. (See "Frequently Asked Questions/Social Issues," www.mormon.org, accessed 2 Aug. 2005.) On the other hand, the language quoted by Farah is firmer than the 1973 statement when it says members may not "encourage, pay for, or arrange for an abortion" outside of the exceptions. Farah said the two statements were "intended for different audiences" and that www.mormon.org "is a missionary site," while the handbook "is much more detailed" and gives "context and clarity." (Kim Farah, 9 Aug. 2005, e-mail reply to queries from author.) 50. "Frequently Asked Questions," "Children Are a Gift from God," and "God's Plan for Families,"
- www.mormon.org, accessed 2 Aug. 2005.
- 51. Farah (n. 49, 29 July 2005).
- 52. Drew Clark, "The Mormon Stem-Cell Choir," 3 Aug. 2001, www.slate.msn.com; Lawrence Wright, "Lives of the Saints," New Yorker, 21 Jan. 2002, 40-57, 57; Farah (n. 49, both e-mail replies); "Statement of Senator Orrin G. Hatch on Stem Cell Research," 17 July 2001, www.hatch.senate.gov; Keith L. Moore and others, Color Atlas of Clinical Embryology (Philadelphia: W. B. Saunders, 1994), 1; and T. W. Sadler, Langman's Medical Embryology (Baltimore; Williams & Wilkins, 7th ed., 1995), 3.
- 53. "Single and Pregnant: Help for Birth Mothers" (LDS Family Services/Intellectual Reserve, 2001), brochure; "Single & Pregnant: Considering Your Options" (LDS Family Services/Intellectual Reserve, 2000), video; and "Where There's Help, There's Hope" (LDS Family Services/ Intellectual Reserve, 2002), video. (Many thanks to the Church's Michael von Rosen, who provided the brochure and videos.)
- 54. Religious Coalition for Reproductive Choice, "We Affirm: Religious Organizations Support Reproductive Choice" (Washington: RCRC, n.d.), [3]; and Bill Samuel, 17 Jan. 2005, e-mail reply to queries from author.
- 55. Bill Samuel, in a 19 Jan. 2005 e-mail response to queries from the author, was helpful on diversity among the Friends. He noted, for example, that "in the U.S., Guatemala and Bolivia there are often more than one yearly meeting operating in the same geographic area" and that this is "due mostly to schisms." Williams (n. 29), 128-134, also gives useful background on the
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- 57. Bill Samuel, "Reflections on Personal Discernment: The Abortion Issue," Dec. 1994, www.seamless-garment.org, accessed 6 Jan. 2005.
- 58. Based on the writer's research in the Harry A. Blackmun Papers, Manuscript Reading Room, Library of Congress, Washington, D.C. But there was such a huge volume of unanswered abortion mail in his papers that the Library of Congress didn't keep most of it. "Following a systematic sample taken by Library staff of the unanswered abortion mail, ten percent of that correspondence was retained." Connie L. Cartledge and others, Harry A. Blackmun: A Register of His Papers in the Library of Congress (Washington: Library of Congress, 2003), 5.
- 59. Helen Alvaré, "Communicating the Culture of Life to a Secular Culture," address at a conference in Washington, D.C., 24 March 2000, transcript, 6-7, author's files.
- 60. For excellent comments on the temptations of political power for religious leaders, see Cal Thomas and Ed Dobson, Blinded By Might (Grand Rapids, Mich.: Zondervan/HarperCollins, 1999).

A Bright Light in Academe

John Muggeridge

 $^{66} ext{\^A}$ Christianity," warned C.S. Lewis in the summer of 1943, "which does not see moral and religious experience converging to meet. . . . in the positive infinity of the living yet supernatural God, has nothing in the long run to divide it from devil worship." Lewis' "long run" turns out to have lasted just over fifty-one years. For it was in October, 2004, that Chris Cranmer, a technician serving on the Royal Navy Type 22 Frigate, Cumberland, made history when he obtained permission from his captain to practise satanism. Thenceforth, he was free to perform satanic rites on board and could expect to be buried according to the rituals of the so-called church of satan, should he be killed in action. And here one has to remember that traditionally Royal Navy captains exercise spiritual as well as secular jurisdiction over their crews. The Church of England authorizes them to marry as well as to bury, and at least until a hundred years ago, they would have been punished for failing to conduct Sunday services at sea. Nor is it as if Cranmer's captain had acted out of turn. His decision to sanction devil worship received unqualified support not only from H.M.S. Cumberland's chaplain, but also from Britain's Ministry of Defence. An MoD spokesman pointed out that his department, being an equal-opportunities employer, "did not stop anyone from having their own religious values."

The naval P.R. man has a point. In these multiculturalism-worshipping times, who could argue with not stopping anyone from having their own religious values? Nor need we worry about the adverse effect that Cranmer's spell-casting might have on his shipmates. Now that wicca has gone legitimate, its supernatural claims have as little credibility among our reigning secularists as those of any other organized religion. Hollywood laughs at witchcraft almost as often as it sneers at Catholicism. We don't drown witches any more; we invite them to ecumenical conferences. So what could possibly be wrong with a little bit of innocent ship-board necromancy?

Nothing; but there is everything wrong with a society whose leaders refuse to make a qualitative distinction between the pentagram and the Cross. Ours is the age of believe-it-yourself religion. Already progressive-minded Christian missionaries have begun to talk scathingly of "conversionism," their task as they see it being not to wean pagans from error and superstition, but

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to make them feel better about their paganism. In a fallen world, such a subjectivist approach to creedal differences spells disaster. One thinks of a line from the *Adoro Te Devote* as translated by Gerard Manley Hopkins: "Truth Himself speaks truly, or there's nothing true." If there is no Truth, there can be no truth. We're back to where the Children of Israel were under the rule of judges when "every man did that which was right in his own eyes." Such ideological anarchy proved intolerable. No wonder the Israelites besought God for a king. They could not live without a universally recognized moral arbiter.

Neither can we. But instead of looking for an acceptable alternative to subjectivism, we've deified it. Choice is our god. It has replaced natural law as the standard for judging human behaviour. What is validly chosen is right. What obstructs valid choosing is wrong. And as with natural law, choice's outcomes are immutable. A man may choose to be a woman, a woman a man, two members of the same sex husband and wife, and after birth certificates and marriage lines have been rewritten accordingly, they are so. Some day no doubt the courts will decide that a lunatic who has chosen to believe he is a poached egg is a poached egg. Already, as Hadley Arkes has observed, judge after judge, in disallowing state laws prohibiting partial-birth abortions, has insisted that an unborn baby can't go on being an unborn baby once its mother has chosen to turn it into an abortion. To Their Honours, the evidence supplied by ultra-sound, which makes murderous nonsense of their logic, is irrelevant. Ideology trumps reason. And this perhaps is the most dangerous aspect of institutionalized subjectivism. It kills rationality. You cannot debate justice with someone who bases his argument on the premise that justice consists in him getting what he wants.

The judicial ramifications of such worship form the subject matter of Professor Arkes' magisterial Natural Rights and the Right to Choose. Arkes is a Straussian, always a black mark in liberal academe, which in his case, however, has not prevented him from becoming the Edward Ney Professor of American Institutions at Amherst College, and getting five scholarly tomes published by Princeton University Press. Moreover, and this is mortal sin to our reigning progressivists, he reads history forwards, in accordance with the view of Pope Leo XIII, who in Rerum Novarum, his 1891 encyclical on the condition of the working classes, advised would-be reformers of their society to recall its members "to the principles from which it sprang." For, argues Leo, "the purpose and perfection of an association is to aim at and attain that for which it is formed, and its efforts should be put in motion and inspired by the end and object which originally gave it being. Hence to fall

away from its primal constitution implies disease, to go back to it recovery." For Arkes, the primal constitution of the United States is—its Constitution. That collection of documents enshrines the notion of government as the handmaid of natural law. And, since natural law is written in all our hearts—none of us are surprised to learn that killing and stealing are wrong natural law government can only be popular government. Marxists, of course, claim that "We, the People" is a hoax. What's really meant is "We, the special interests," and the War of so-called Independence was in fact nothing more than a struggle over markets between British and American capitalists. Arkes, however, a true disciple of Leo Strauss, takes the Founding Fathers at their word. He assumes, for example, that James Wilson, a member of the first U.S. Supreme Court, had no hidden agenda when he argued that, whereas in Britain the authority to govern came from above, in the United States "laws derived from the pure source of equality and justice must be founded on the consent of those, whose obedience they require." Supreme authority, according to Wilson, belongs only to "Him Who is supreme." Among His creatures there could be neither superiority nor dependence.

Arkes uses Abraham Lincoln to exemplify the statesman committed to reforming his society by recalling its members to the principles from which it sprang. Clearly by 1850 those principles had already begun to appear old and irrelevant in certain influential U.S. circles. Why else would Lincoln in 1854 have referred to "the teaching of my ancient faith that all men are created equal?" (italics added). He wanted to make the point, of course, that if we really are all created equal, then slavery, which was the all-absorbing issue of his day, is not only inhuman; it's un-American. An originalist approach to the Declaration of Independence rules out ownership of one man by another. The only question, which for Lincoln wasn't a question, was whether the negro was a man. Americans may trade cattle but not people. To establish beyond cavil the truth of that aphorism, Lincoln fought and won a civil war.

But for Arkes Lincoln is more than just a faithful intellectual son of his nation's founding fathers. He is an example for succeeding generations of U.S. national leaders. The need to reaffirm our nation's primal constitution is stronger today than perhaps at any time in our history. Slavery took away the liberty of an important section of U.S. society. Abortion goes beyond shackling. It takes away life. And without life, there can be no liberty to enjoy or happiness to pursue. Proponents of abortion talk about choice. But that concept is not mentioned in the Constitution. The Founding Fathers didn't choose to dissolve the political bands which had connected the American people with Great Britain. It had in their opinion become necessary to

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do so. Nor do non-psychopathic mothers choose to murder their unborn children. They come to believe that aborting them is their only recourse. And they are encouraged in this belief by abortion counsellors, whose job, after all, is to counsel abortion. But also by the death-ward tendency of current social legislation. Every step taken by the yankers-out of Mrs. Schiavo's feeding tube was, as *First Things* explained, strictly in accordance with the letter of the law. Her benighted parents were the ones who sought to save their daughter's life by appealing to Congress and the President.

So how did our nation's guardians of constitutional orthodoxy get this way? Arkes blames higher education. "The Laws of Nature and of Nature's God" still carry weight in non-academic circles. Visit a neighbourhood bar, and sooner or later you are likely to overhear someone say that such and such untoward behaviour on the part of a boss, a colleague, or an ex-wife "just isn't ——ing right." In a faculty lounge, however, talk of this sort would be meaningless. The notion that ideas of right and wrong derive from anything more exalted than the conjunction of certain chemicals in the human brain would seem too ludicrous to merit consideration. To be a lawyer is to have gone to university, and lawyers become judges. No wonder, then, that their decisions reflect the moral nihilism that they had imbibed as undergraduates. No wonder too that they put such store by Roe v. Wade. For them that decision is the sexual equivalent of Lincoln's emancipation proclamation. In arguing that a woman's right to an abortion falls within the right to privacy protected by the Fourteenth Amendment, its authors have given the apostles of unfettered sexual expressionism some powerful legal weaponry. And there is not even a Geneva Convention to restrict its use. If the right to privacy protects abortion, why not bestiality? In our choice-drunk universe, a constitutional amendment originally designed to protect the rights of one minority has ended by being invoked to justify the indiscriminate culling of another. As for those members of that second minority who are lucky enough to have emerged from their mothers' birth canals in one piece: They face a world in which sexual preference, like taste, is something about which there can be no disputing.

The obvious cure for miseducation is reeducation. Those died-in-the-ny-lon subjectivists that populate our arts faculties are not open to reason. Having, after all, renounced its use, they are unlikely to respond to the most brilliantly constructed pro-life syllogisms. But what about the hordes of many-childrened Christian fanatics who last year gave George Bush the White House? Anti-choice logic should surely make an impression on them. Except that they too have been infected by subjectivitis. How could they not be

when the gospel of self-realization is preached on every hoarding, in every shopping mall, in every soap opera, in every popular song and in almost every movie? We had a student at our college who, poor fellow, was afflicted with one of the acutest stutters I have ever encountered. He chose to enroll in the radio broadcasting programme with a view to finding employment as a news reader. Nobody counselled him not to.

And even our most stalwartly anti-abortion president, as Arkes points out, fights shy of giving public expression to the natural-law argument against pre-natal killing. Three years ago he signed the Born-Alive Infants Protection Act. Arkes, as its author, was invited to witness him doing so. In private conversation, President Bush, Arkes remembers, having made some strong statements about the need to change American culture, and restore belief in the promises contained in the Declaration of Independence, concluded by asserting that the Born-Alive Infants Protection Act "establishes a principle in American law and American conscience: there is no right to destroy a child who has been born alive. A child who is born has intrinsic worth and must have the full protection of our laws." Certainly. But what about a child threatened with destruction before he is born? Does he or does he not have intrinsic worth and full protection of our laws? The President wouldn't say. His silence on this question, Arkes suggests, puts him in the same boat as those House Democrats who agreed to vote for the Born-Alive Infants Protection Act as long as the preamble and findings, its only overtly anti-abortion sections, were omitted. And so they were. And so the bill sailed through both Houses of Congress. Even Senator Edward Kennedy could hardly object to legislation protecting the lives of neonates.

Thus Arkes' hope that his bill would at last touch off an unfettered national conversation on the constitutional implications of legalized abortion came to nothing. We continue protesting; our opponents continue sneering or, as in the case of Naomi Wolf, who famously pleaded in the *New Republic* for a kinder and a gentler feticide, condescending; while our political allies confine themselves to nodding sympathetically at our horror stories. But there is hope. There always is. It lies precisely with scholars such as Hadley Arkes, who have managed to keep their places in liberaldom without sacrificing their principles. They are western civilization's left-behind-men, who continue to resist the dictatorship of the libertariat from within its power base. *Natural Rights and the Right to Choose* was published by Cambridge University Press. Rarely can the pro-life argument have received such a prestigious endorsement. Who knows? Thanks to Arkes and his fellow members of the anti-choice *maquis*, we may yet attain that for which the United States was formed without having to fight another civil war.

The Schiavo Case & the Culture Wars

James Hitchcock

In reporting on the Terri Schiavo case, the *National Catholic Reporter*, the chief organ of liberal Catholicism in the United States, offered a balanced survey of the issues and a sympathetic profile of two Franciscan brothers from Minnesota who had gone to Florida to be with Terri's parents and siblings. But in instructing his readers on how they should think about the case, *NCR* editor Tom Roberts ignored the accounts that appeared in his own newspaper and scornfully dismissed the "emotionalism, raw piety, and three-year-old sound bites" of Terri's defenders. Although the *NCR* prides itself on reporting the activities of "ordinary Christians" demonstrating "faith in action," Roberts sneered at the Franciscan friars "as two monks [sic] who seemed always to know more things more absolutely than any team of physicians, theologians, or ethicists."

Roberts' condescending dismissal of the Franciscans was revealing, because, as he undoubtedly knew, Franciscans are not monks, in that their vocation is evangelical activity in the world, and calling them "monks" had the effect of discrediting them as religious dogmatists out of touch with reality. But over the years the *NCR* has passionately praised the moral acumen of an actual monk, Thomas Merton, who from his hermitage pronounced definitive opinions on every kind of public issue. Roberts' novel implication that "monks" have nothing to tell the world was an instance of a pattern in the Schiavo case whereby many liberals made up a new set of rules that negated positions they had previously espoused.

For decades one of the staples of the NCR has been bringing to public attention what it considers unacknowledged atrocities, including, for example, graphic descriptions of how criminals are put to death. But Roberts now saw the Schiavo case as showing that the print media were more "responsible" than television, because the latter gave viewers misleadingly graphic views of Terri instead of providing the emotional distance that newspaper "background detail" made possible. In effect NCR readers were told to prescind from what they saw of Terri's condition from pictures or first-hand accounts and to rely on dispassionate opinions rendered from a clinical distance. Despite his disdain for the two unprofessional "monks," Roberts was able himself to diagnose the case from press reports, finding that

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Terri had "failed" various medical tests over the years.

For decades the *NCR* has published many reverent accounts of people mounting dramatic confrontations against United States military policy, such as pouring blood on draft cards or taking a hammer to a cruise missile. However sensationalistic such gestures may seem, self-consciously "prophetic" liberal Catholics applaud them as necessary in order to break through the crust of public apathy and force people to confront disturbing realities they would prefer not to acknowledge. But now Roberts dismissed such tactics as mere "emotionalism," thereby justifying liberals' ignoring the fact that people were arrested in Florida for such offenses as trying to bring Terri a bottle of water.

The title of Roberts' commentary—"Complexity vs. Emotionalism"—incorporated words religious liberals employ when they do not wish to be "prophetic," and was on its face a denial of the spirit of "compassion" the NCR has always insisted must be paramount, urging instead that readers remain emotionally detached from a troubling situation and rely merely on the opinions of certain "experts." Roberts' implied argument—that "emotionalism" was not appropriate in a case where a woman's life was at stake—could only be made by innuendo, since to state it explicitly would discredit much of what liberal Catholicism has represented for forty years. (Readers of the *NCR*, judging from their letters to the editor, are people for whom shrill outrage is the normal state of mind.)

There were theologians, ethicists, and physicians on both sides of the case, but, except for one brief quote, the NCR gave space in its pages only to a theologian named Edward W. Sunshine, who condescendingly lectured readers on the way in which the Catholic moral tradition was more "complex" and "nuanced" than the bishops realized. Sunshine claimed that the bishops of Florida took a strong public stand on the Schiavo case only after they were rebuked by some of Terri's supporters for having remained largely silent about her plight, even as they pled for the life of a convicted murderer. Implying that the bishops had been pressured into taking their stand in support of Terri, Sunshine concluded that their "increasingly strident rejection of arguments contrary to theirs is not helpful in this case."

Like Roberts, Sunshine implied that those who justified Terri's death were engaged in careful reasoning, in contrast to the emotionalism of her supporters, and that, as her life ebbed away from lack of food and water, "strident" interventions were out of order. Terri's legacy, he proposed, should be "vigorous, rational discussion of various courses of action," a conclusion that evaded both the fact that she was in the process of being killed and the fact that her death was being mandated by a cold and clinical attitude that

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deliberately excluded the human dimension of the case.

Acknowledging the obvious fact that the ultimate issue was who should decide what was best for Terri, Sunshine accused the bishops of making themselves into "proxies" for medical decisions that ought to be based on "conscience" alone. But he found only some people—Terri's husband, judges, certain doctors, certain ethicians—competent to act as proxies for her conscience, while, for unexplained reasons, her parents, the bishops, some legislators, and certain other physicians and ethicists were not.

Roberts urged NCR readers to make up their own minds about the case, using Sunshine's essay as their guide, which meant that the "complexity" of the issue turned out to be susceptible of only one conclusion. Sunshine's own position seemed to be one of complacent agnosticism—the ethical implications of the case were simply not clear but letting Terri starve to death was the proper course of action, opposed only by people whose thinking was insufficiently "nuanced." (An example of what liberal Catholics meant by "rational discussion" was the Jesuit ethician John Paris, who pronounced that "the ethics is clear" and dismissed a statement on the issue by John Paul II as due to "some radical right-to-lifers. they got that statement out.")

For all his talk about "complexity," the point of Sunshine's essay was not to agonize over a deep moral conundrum but precisely to end the debate. If, after a period of "reasoned discussion," it should be decided that Terri should indeed be kept on a feeding tube, the "discussion" would be moot, because she would be already dead. Her defenders were accused of shutting off debate by their words, but their opponents managed to shut off the debate definitively, by killing her. For Sunshine and others, "reasoned discussion" was in fact irrelevant, in that the question was already closed, the decision made by Michael Schiavo was self-evidently the correct one, and no valid argument could even be made on the other side.

Significantly, while alluding to the Florida bishops' opposition to capital punishment, Sunshine did not mention the "complexity" of Catholic teaching on the subject—the fact that until very recently the consensus of such teaching justified the practice. Strident, naïve, and uninformed though the bishops may have been in their defense of Terri Schiavo, they apparently overcame those deficiencies when they addressed the subject of the death penalty.

Liberal Catholic reactions to the Schiavo case also reversed another fundamental tenet of liberal Christianity—that faith must be "this-worldly"—oriented more towards the improvement of society than towards the life to come.

Catholic News Service, an official agency of the American bishops, went

about as far as it dared go in supporting Michael Schiavo, quoting Sister Elizabeth Anne Worley, director of a hospice in Miami, as piously proclaiming that "Death is not the worst thing that happens to us" and recalling an elderly patient who asked, "How can I ever get to heaven if you don't let me die?" Worley also lamented that the "bitter disagreement among her survivors. . . . took a sacred time in the life's journey of this woman and ripped it apart."

Karlynn BrintzenhofeSzoc, of the Catholic University of America, decried that the case had become a "family battle" and claimed that "People tend to forget that the person who is dying, and our role in accompanying them on their journey, should be the focus of our attention, not the feelings of the survivors," that remark and those of Sister Worley conveniently ignoring the fact that Terri was dying only because her husband wanted her to die and that she would not have "survivors" if his intentions were thwarted.

Jerry Mazenko of Garden Grove (Ca.) hurled "for shame!" at Terri's parents, because "for 15 years they have kept her in limbo and deprived her of her eternal reward in heaven."

Charles Bouchard, a Dominican theologian, quoted the pre-Vatican II catechism (a document liberal Catholics declared obsolete four decades ago) to remind Catholics that their purpose in life is "to know God, love him, and serve him in this life and to be happy with him in the next," implying that Terri's supporters were overlooking those simple truths of faith and thereby thwarting God's will. Bouchard conceded that the removal of Terri's feeding tube might constitute euthanasia but thought it more likely that it was "a legitimate withdrawal of medical intervention that no longer serves her medical or spiritual good" and that, while Terri, if she were able, might say that she wished to live, it was more likely that she would not. Rebuking their weakness of faith, Bouchard urged her family and friends to "feel the pain of human existence, indulge the hope of consolation, and dare to believe there is something more."

Linda S. Simpson of St. Charles (Mo.) judged Terri's mother to be "a grieving mother, but she asks too much." Inexplicably turning the facts of the case upside down, Simpson exclaimed, "Would that we always outlive our children, but that isn't always what God has planned for our lives." Having discerned that Terri was dying not from starvation but by "God's will," Simpson was able to make, on behalf of the Schindler family, the decision that "it's time to let Terri go."

Daisy Swadesh of Farmington (N.M.) expressed bewilderment at Christians who believe in "absolute pro-life on earth" and thereby prevent souls from going to a "better place." The death of Jesus, she explained, was the

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fulfillment of a "death sentence that had been hanging over him from the time he was conceived," since according to Jewish law Mary would have been stoned to death for conceiving a child out of wedlock. Jesus' eventual death on the cross took place because "he could do no more on earth." Swadesh concluded by urging that "We need to stop letting absolute prolifers silence the debate," as though pro-lifers had actually been able to prevent Terri's death.

Cathey Break of Imperial (Mo.) excoriated pro-lifers for not realizing that "sometimes [sic] life in heaven is better than hell on earth." Break acknowledged that she and her husband had made a decision to remove life support from their fourteen-month-old son, and she wondered if pro-lifers would pay the medical bills, "change the smelly diapers," and otherwise be attentive to people in Terri's state, missing a key point in the Schiavo case, which was precisely the eagerness of Terri's parents (and many of her supporters) to relieve Michael Schiavo of the burden of caring for his wife. To a Christian, life in heaven is always better than life on earth and, given her profession of belief, it was odd that Break seemed to think that this is only "sometimes" true.

Break condemned the use of medical technology to prolong life as "playing God," a condemnation that implied that the practice of medicine is itself an act of disobedience to the divine will. The same argument was made even more directly by an ultra-conservative priest, Anthony Cekada of West Chester (Ohio), who charged that, in defending Terri, Catholics had been duped by "neoconservatives," because the technology that was keeping her alive was an innovation that should be rejected by true Catholics.

Mazenko, Simpson, Swadesh, Break, and others made a theological argument that is ordinarily considered to be both false and pernicious—that Christians should seek to escape this life as quickly as possible, so as to enjoy the happiness of heaven.

Liberal Catholics have made capital punishment their favorite moral issue, where they consider themselves to be prophetic witnesses against a callous and vindictive society, and transferring liberal Catholic arguments in the Schiavo case to capital punishment—decrying the "emotionalism" of its opponents, emphasizing the "complexity" of the issue, rejoicing that executed criminals are after all going to a better place, insisting that sustaining human life is not an absolute, and triumphantly announcing that the deceased's life has meaning in serving as a stimulus to rational debate about the death penalty while executions continue—immediately demonstrated their fallaciousness. (Following assurances from various doctors that starvation was a peaceful, virtually painless way to die, someone speculated about the liberal

reaction if the state of Florida mandated starvation as its method of executing convicted murderers.)

The secular media also changed its rules in the case, putting aside its inherent suspicion of entrenched power and high-sounding rationalizations of self-interest. For the most part the major media either ignored or treated perfunctorily certain obvious questions—the circumstances under which Terri became brain-damaged, her relationship with the husband who had fathered two children by another woman, the use to which he put the money he received from a malpractice suit against doctors who had treated her—the kinds of questions that "hard-hitting" media routinely raise. Certain "facts" were also commonly misstated—that Terri suffered from a bulimia that might have caused her condition, that she was dying, that she had clearly stated her wish not to be kept alive "artificially."

Often because they were asked misleading questions ("should a dying person be kept alive artificially?") the public was stampeded by the media to approve Terri's death on the grounds that modern medicine has created conditions under which people are forced to live "meaningless lives" for years. Moral revolutions are always proposed for the sake of disinterested humanitarianism but usually succeed by appeals to self-interest, and in the Schiavo case this was achieved by deliberately provoking the panicky reaction that, unless stopped, fanatics would force terminally ill people, against their wills, to remain alive on machines for many years.

Most blatant was the way in which the media treated Terri's parents and siblings. While their deep personal interest could not be ignored, on the whole the efforts to save her were treated as the self-serving crusade of fanatical ideologues. Media that love to tell poignant tales of ordinary people enduring great suffering treated the Schindler family as irrationally vindictive towards Terri's husband or at best as emotionally overwrought pawns of malign forces.

Although the case raised new kinds of questions that may require decades to sort out, and although liberals ordinarily insist that many traditional arrangements no longer serve modern needs, Michael Schiavo's supporters had to rely on the only substantial thing they had on their side—the fact that in law he apparently had the sole right to determine his wife's fate. Treating that legal rule as a moral absolute, liberals then denounced as "extremists" those who tried to intervene on what many people considered to be the side of justice.

Ignoring forty years of feminist railing against "patriarchy," liberals expressed shock that anyone would question Terri's unfaithful husband's holy

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right to determine her fate. Here again extremes met, as the most candid statement of that position was made by Father Cekada, who criticized his fellow Catholics for not respecting Michael Schiavo's "headship" over his wife, something that had been granted to him by God and that, no matter how wicked Schiavo might be, had not been withdrawn. (Cekada did not explain how it could be determined when "headship" was in fact withdrawn, if it ever could be.)

Terri's own bishop, Robert Lynch of St. Petersburg, for a long time said nothing about the matter and finally issued several statements that implied both that her husband rightly had the authority to remove her feeding tubes and that this was a morally correct decision, a position that was directly at odds with that of the American hierarchy in general and of his fellow Florida bishops.

Focusing on the narrow legal issue, one commentator warned that the state of Florida's intervention in the case—an issue about which the Constitution gives no guidance other than that the government has the duty to protect the lives of its citizens—had "turned the Constitution inside out," and Lord Acton's famous claim that "power corrupts, absolute power corrupts absolutely" was invoked not against those who would starve Terri to death but against those who would save her. Possibly because the case was unfolding in Florida, where liberals charge that the presidential election of 2000 was stolen, every legal or judicial effort to save Terri's life was proclaimed a constitutional crisis, usually without even bothering to explain how that was the case. While calling for reasoned dialogue, supporters of Michael Schiavo often descended into a sputtering indignation so incoherent that it was difficult even to understand the precise cause of their anger. Terms like "radical" and "extremist" were hurled about without even an attempt to explain them, other than the implication that it was self-evidently wicked to thwart Schiavo's attempt to terminate his wife's life.

The most remarkable fact about liberal reactions to the Schiavo case was that, with a few honorable exceptions (Nat Hentoff, Jesse Jackson), liberals did not even furrow their brows, did not even acknowledge a genuine and agonizing moral dilemma. The fact that a woman was being slowly starved to death was all but ignored, except for the novel and incredible claim that starving to death is not painful, and the entire issue was translated into one more instance of "the religious right" having enlisted cynical politicians in their cause. "Reasoned discussion" could not admit that there was a genuine moral question at all, and the usual tactic was simply to denounce Republicans for making the case a political issue, a claim that logically cut the ground

out from liberalism itself, which precisely seeks to use political power to correct injustices.

Thus to Father Paris the entire issue merely had to do with the power of the "Christian Right. . . . They elected [Bush], and now he dances," and Father Bouchard told the press that Terri had become "a pawn in a political struggle," exploited by the Republicans, and that the real issue was abortion. It was possible, he conceded, that Congressmen who tried to save her life were acting out of humanitarian motives but more likely that they were "just trying to get reelected." As it had earlier done with regard to abortion, the *National Catholic Reporter* approached the Schiavo case primarily in terms of the Bush administration's allegedly exploiting it for political purposes.

The claim that the Schiavo case was a kind of proxy for the abortion issue was true in that pro-lifers are appalled at the general devaluation of human life throughout the society, but it was also true on the opposite side—those who support abortion have a vested interest in the devaluation of life and were appalled by the Schiavo case because it revealed strong popular resistance to the "pro-choice" agenda. (Once again, ironically, a "woman's right to choose" became, in the Schiavo case, the right of an unfaithful husband to make a life-and-death decision on his wife's behalf.)

Every aware person understood that the Schiavo case was indeed a water-shed in the history of American morality, a point on a slippery slope where, once the society began to descend, it would find it almost impossible to arrest the slide. Liberals who shrilly accused Terri's defenders of having their own agenda understood quite well that the case was being used to break down public resistance to euthanasia, assisted suicide, cloning, stem-cell research, and numerous other things. Few of the people who justified Terri's death bothered to deny a connection with those other issues, and the few who did could offer no persuasive argument as to how to halt the moral slide at the precise point of her death. (If Catholic moralists like Fathers Paris and Bouchard made such arguments in a vigorous way, they would be dropped from the media's list of favorite theologians.)

Liberals supported Terri's alleged "right to die" because the modernist mindset finds it almost impossible to oppose anything that presents itself as progress, so long as it involves the shattering of traditional "taboos." Liberals subscribe to a kind of cosmic "whig" theory of history as a series of repeated moral and social "breakthroughs" effected by far-seeing and courageous iconoclasts and resisted by benighted troglodytes, mostly for religious reasons.

Since environmentalism has become a major liberal cause, technology has taken on a morally ambiguous character for liberals and is essentially

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judged as good or bad depending on the degree that it undermines traditional beliefs. Thus abortion, contraception, cloning, stem-cell research, and the creation of life in test tubes are applauded, while the technology that was keeping Terri Schiavo alive was condemned as inhuman.

Modern liberalism is caught in a trap of its own making. At the culmination of almost three centuries of Western intellectual history, liberalism espouses a morality in which there can be no certain conclusions and absolutists are considered dangerous and irrational. But in practice, especially as liberal philosophy undergirds politics, liberalism has itself become a creed with infallible teachings, among which are the self-evident "rights" to abortion and to die. Roberts and others had to claim that there were no reasonable voices in defense of Terri's life in order to justify ignoring people who disagreed with them, a standard tactic by which liberals rationalize their own dogmatism. (Of course we want dialogue, they say, but there are simply no reasonable people who disagree with us. The *NCR* habitually treats Pope John Paul II and Pope Benedict XVI as dogmatists incapable of real thought.)

Every morally sensitive person had to find the Schiavo case troubling, even if in the end they sided with her husband, and the refusal of so many liberals even to see a dilemma stemmed from their irrational, even hysterical fear of the "religious right" and its alliance with the Bush administration. For them the real issue was not whether Terri lived or died but the fact that religious belief had once again shown that it is a powerful influence in American life. Terri had to be sentenced to death because the alternative was to acknowledge the validity, or at least the continued relevance, of traditional moral claims. It was crucial to the liberal mind that those who wanted to save Terri not even be credited with sincere if misguided compassion but should be condemned as either dangerous fanatics or political opportunists.

Liberal rhetoric contained an inherent contradiction, in that Republicans were alternatively accused of exploiting the issue for political gain and warned that they would suffer at the polls because of it. Republicans were said to have won the election of 2004 by sinister manipulation of the voters, yet also to be blindly stupid in espousing a position most voters condemned. The "religious right" was alternately presented as a powerful force imposing its will on the country through the Republican Party and as an albatross around the Republican neck.

The case was a surrogate not only for the life issues but for all aspects of the "culture wars," including things that had little or nothing to do with Terri Schiavo, so that one liberal pundit raised the alarm because the kind of people who were defending Terri's right to life were the kind who would ban not only abortion but contraception and sex education as well. Liberal screeds

against "the religious right," which continually blare out from the media at a high pitch, reached a record level of shrillness as the fight to save Terri continued, sounding the alarm that, if "religious fanatics" succeeded in saving her life, it would potentially be a severe blow against homosexual marriage, secularized education, and many other things. Advanced liberal thought denies that religious believers have any legitimate role to play in public life and even questions whether believers have the right to "indoctrinate" their own children.

The NCR reaction to the Schiavo case was a distinctively Catholic version of the culture wars, in that the paper caters to Catholics who find it impossible to take moral positions different from those of the secular liberal consensus. For four decades, one of the NCR's primary functions has been precisely to castigate the Catholic hierarchy for resisting that consensus as it unfolds. Thus in the Schiavo case, since both the Bush administration and the Catholic bishops defended Terri's right to live, truth had to be on the other side. Although during a different week the paper might have canonized two obscure friars for bravely opposing capital punishment in the spirit of St. Francis, in the Schiavo case the Franciscans could only be regarded as publicity-seeking simpletons. In disdainfully dismissing the "emotionalism" of Terri's supporters, Roberts was fulfilling another function the NCR has served over the years—assuring liberal Catholics that, in contrast to orthodox believers, they are "thinking people," their thoughtfulness manifest precisely by their dissent from church teaching.

Roberts boasted of his own role in the liberal network when he related with obvious satisfaction that he had been asked by a "reporter for a paper in the Northeast" for an evaluation of the way in which the Schiavo case was being presented to the public. Roberts obligingly clucked his tongue over the irresponsibility of Terri's supporters and praised the print media, playing the expected role of an "enlightened" Catholic decrying the "extremism" of his own church.

Thus the NCR's position in the Schiavo case had less to do with the case itself than with its cultural significance. Liberal Catholics tolerate exercises of religious authority only when that authority supports liberal causes and are alarmed at the possibility that religion might exercise an independent moral influence in opposition to the liberal consensus. The purpose of the polemic against the bishops was to ensure that the Church plays no independent moral role in society. For forty years the NCR has in effect insisted that the Catholic Church has no wisdom of its own and that, wherever it goes against the secular consensus, it must be in error. If the bishops were seen as

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speaking truth about starving people to death, it might be necessary to respect their judgments about abortion, divorce, homosexuality, and other things that liberal opinion condemns.

Given the realities of the Schiavo case, high emotions and moral passions were appropriate, and, given the uncertainties of the case, keeping Terri alive was the only proper course. Calls for "reasoned discussion" were neither timely nor helpful in what was an emergency situation. The only moral lesson that Bishop Lynch took from Terri's death—"a necessity to have a formal conversation with . . . family members about their personal desires regarding health care in the event that they become incapacitated"—was comparable to finding a spiritual lesson in a terrible auto accident by urging that it lead to a renewed commitment to wearing seat belts. In the end those who approved allowing Terri to die could find a meaning for her life only by turning her into a stimulus for philosophical discussion, a mere textbook exercise in philosophical reasoning.

Everyone recognizes that the world is now on the mere threshold of profound and extremely far-reaching issues concerning human life at both ends—how it is to begin and how it is to end. The Schiavo case brought those issues into the most dramatic possible focus, and for that reason it was decided that it was expedient that one woman should die for the sake of progress.

The Legacy of Terri Schiavo for the Nonreligious

Nat Hentoff

During the prolonged, extensive media coverage of the fierce battle this past spring over whether Terri Schiavo should live or die, almost entirely ignored was the insistent presence of individuals and organizations who were most personally concerned with both the outcome of the conflict and its legacy. Attention was continually focused on the Christian Right, who rallied for Schiavo's right to live—traditional Catholics, Protestant evangelicals, and religious prolifers. (Not all prolifers are religious, to which I can attest.) Overlooked, however, were the twenty-nine national disability-rights organizations that filed legal briefs and lobbied Congress to demonstrate that Terri Schiavo's was a disability-rights case, not a right-to-die case. They included the National Spinal Cord Injury Association; the National Down Syndrome Congress; the World Association of Persons with Disabilities: and the largest American assembly of disability-rights activists, the American Association of People with Disabilities. I have been reporting on disability rights for more than thirty years, and I have learned that many of these groups are determinedly secular and take care to not be linked with religious partisans or prolifers. Many disability-rights activists are pro-choice.

One such advocate is Mary Johnson, who runs an influential Web site (www.raggededgemagazine.com) linking many of these disability-rights groups. She stated the concerns of the disabled brought to the fore by the Schiavo case: This isn't about Terri Schiavo anymore. . . . The danger faced by "incapacitated" or non-communicative persons—people who have been declared "incompetent" and their legal rights assigned to a "guardian"—has been worrying disability rights activists for years. It is not about the "right to life"—it is about equal protection of the law. Over a dozen national disability groups have repeatedly urged Constitutional review of cases like Schiavo's.

Another writer who has drawn attention to the issue is Laura Hershey, who uses a ventilator. She wrote (www.thenation.com, April 14, "Killed by Prejudice") that when she is hospitalized, she makes sure to write "Do resuscitate!" on all her medical charts because, the last time she was hospitalized, three hospital staffers assumed that, since she was disabled, her chart had to include a do-not-resuscitate order. In addition to "my disability identity,"

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she writes, "I'm a lesbian feminist. I'm a secular thinker. . . . I abhor the fundamentalist religious movement's selective advocacy of some rights for some people." Tellingly, she adds:

Yet many of my usual allies, people who support civil rights for other minority groups, have trouble embracing the rights of people with severe disabilities. . . . To my knowledge, no progressive or feminist group has tried to understand or address the injustices involved in this case of spousal and medical violence against a disabled woman (Terri Schiavo).

Many disability-rights advocates feel abandoned by the American Civil Liberties Union (ACLU). Despite the egregious conflicts of interest of Terri Schiavo's husband and guardian, Michael Schiavo (see my article, "Terri Schiavo: Judicial Murder," *Village Voice*, March 29, 2005), the ACLU was co-counsel in some of Michael Schiavo's court actions to remove the feeding tube of this forty-one-year-old woman who was not brain dead or comatose and breathed naturally on her own. Nor, according to neurologists I interviewed, was she in a persistent vegetative state.

Last November, Andrew J. Imparato, head of the American Association of People with Disabilities (on the opposite side of the ACLU in this case), testified before the Senate Subcommittee on Science, Technology, and Space on the rising dangers to the disabled of prenatal genetic testing technology. He spoke of the fear of many disabled about the return of eugenics:

When we start devaluing the lives of people with disabilities, we don't know where that's going to stop. You also need to take into account the financial implications of all of this. We have an economy that is not doing well as it once was and . . . one way to save money is to make it easier for people with disabilities to die.

Since the death of Terri Schiavo, disability-rights organizations have accelerated working with members of Congress to formulate legislation that will protect the Fourteenth Amendment rights of the disabled to due process and equal protection of the laws. One of the most liberal members of the Senate, Tom Harkin (D-Iowa), insists that "Where someone is incapacitated and their life support can be taken away . . . it is appropriate—where there is a dispute—that a federal court come in, outside of the state's jurisdiction, like we do in habeas corpus situations—and review it."

Having reported on the Terri Schiavo case for the past two and a half years—and having read all of the transcripts of court hearings—I am certain of one dimension of this case: Terri Schiavo was fatally denied due process because all the appellate courts, state and federal, relied wholly on the rigid misunderstanding of the central facts of the case by one Florida Circuit judge, George Greer. If this had been a case of a prisoner on death row with an

execution date, the ACLU and a good many liberals would have demanded *habeas* review, from the beginning, of all the facts in the case.

Speaking with the disabled over the years, I have been told, "It's worth keeping in mind that you are only temporarily able. You could unexpectedly, suddenly, become one of us." Also heeding that warning was Dick Rogers of the San Francisco Chronicle, whose March 29, 2005, column was headed: "Schiavo's Story Is about Us All." Pat Anderson, a former lawyer for Terri Schiavo's parents in their daughter's case, has resoundingly made clear why Terri Schiavo's story is about us all: "Euthanasia in America now has a name—and a face."

Adding resonance to her point is the increasing refusal of intensive care by hospitals whose physicians and bioethics committees decide that it is "futile" to continue to treat those patients whose "quality of life" is so tenuous, they say, no further treatment is required. In "The Culture of Death: Who Will Decide When You Should Die?" (Village Voice, December 1, 2003), I quoted Nancy Valko, a nurse whose specialties include oncology, kidney machines, trauma, cardiac and cancer care, and patients who may or may not be in a persistent vegetative state (that diagnosis has a considerable error rate). Valko, who works in an intensive care unit in a St. Louis county hospital, also gives workshops on medical ethics and writes extensively on disability rights. One of her articles, "Futility Policies and the Duty to Die," reported:

This theory that [some lives are no longer worth living] has now evolved into "futile care" policies at hospitals in Houston, Des Moines, California and many other areas. Even Catholic hospitals are becoming involved.... Thus, the "right to die" becomes "the duty to die," with futile care policies offering death as the only "choice." ... A poor prognosis, which can be erroneous and is seldom precise, will become a death sentence.

Two years ago, Terri Schiavo's father, Bob Schindler, aware of the increasing odds against his daughter, said: "We pay great lip service in this country to disability rights, but as the degree of a person's disability increases, the level of legal protection that person receives decreases."

Agreeing, I turn, as I often do, to Wesley Smith, author of *Culture of Death: The Assault on Medical Ethics in America* (Encounter Books) for a start on increasing the legal levels of protection for the voiceless and the otherwise acutely vulnerable of the 56 million American children and adults with disabilities. In the April 11, 2005, *Weekly Standard*, Smith advised that

States need to review their laws of informed consent and refusal of medical treatment to ensure that casual conversations—the basis for Terri's death order [according to her husband and disputed, under oath, by one of her close friends]—are never again deemed to be the legal equivalent of a well-thought-out, written advance

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directive [preferably a durable power of attorney]. We don't permit the property of the deceased to be distributed on their oral statements. Surely human lives deserve as much protection.

He adds:

If people don't want feeding tubes if they become profoundly incapacitated, the law permits them to refuse such care [and other treatment]. That isn't going to change. But if that is their desire, they have the responsibility to make sure that such wishes are put in a legally binding document.

Absent that, the law should require the courts in contested cases to give every reasonable benefit of the doubt to sustaining life and not causing death by dehydration.

As for the rising doctrine of futility noncare in American hospitals, Smith warns that "unless people object strongly to this duty to die . . . and unless [federal] legislatures take active steps to intervene, this new and deadly game of 'Doctor Knows Best' will be coming soon to a hospital near you."

You may have noticed that God has not appeared in this article. Many who have leaped into faith do work against the culture of death as it envelops the disabled, but this is far from their exclusive crusade. Secularists are a permanent, vital force in this battle—in part out of our own self-interest. For example, I take seriously Tom Harkins's warning about "guardians" of the incapacitated who feel "that their ward is as good as dead, better off dead—or that the guardian himself or herself would be better off without the ward." I hereby state on this public record that I will not consent to my "duty to die."

The disability-rights community, like all activist groups, is not monolithic. But the one phrase that all of their members dread hearing is "quality of life." Some have told me of their parents telling them how, when their disabled child was born, or soon after, physicians counseled them to "let the child die" because his or her "quality of life" would not make that life worth living. From some of these disability rightists, I first learned of Dr. Leo Alexander. An Austrian-born professor of psychiatric medicine at Tufts Medical School, he had served as an expert at the Nuremberg trials, having interviewed the German physicians who implemented Hitler's pre-Holocaust euthanasia program. Dr. Alexander's subsequent article in the July 14, 1949, issue of the *New England Journal of Medicine*, "Medical Science Under Dictatorship," is central to understanding the historical root of the "quality of life" debate in this country that has quickened since the judicial death by dehydration of Terri Schiavo.

Dr. Alexander emphasized that

whatever proportions the [Nazis'] crimes finally assumed, it became evident to all who investigated them that they had started from small beginnings. At first, there

was merely a subtle shift in emphasis in the basic attitude of physicians. It started with the acceptance, basic in the euthanasia movement, that there is such a thing as life not worthy to be lived.

This shift in emphasis began before Hitler came to power. In 1920 Karl Binding, a prominent German lawyer, and Alfred Hoche, a distinguished forensic psychiatrist, wrote a brief but influential book, *The Permission to Destroy Life Unworthy of Life*. In *The Coming of the Third Reich*, Richard Evans notes that "They emphasized that the incurable ill and the mentally retarded were costing millions of marks and taking up thousands of much-needed hospital beds. So doctors should be allowed to put them to death."

When Hitler came to power, many German doctors were ready to obey Hitler's directive to rid the nation of costly, unproductive "useless eaters." Before the Holocaust, "worthless" Germans were summarily eliminated by the Nazis. As an October 1, 2003, Associated Press story reported:

A new study reveals Nazi Germany killed at least 200,000 people because of their disabilities—people deemed physically inferior—said a report compiled by Germany's Federal Archive. Researchers found evidence that doctors and hospital staff used gas, drugs and starvation to kill disabled men, women and children at medical facilities in Germany, Austria, Poland, and the Czech Republic.

Concluding his 1949 New England Journal of Medicine article, Dr. Alexander emphasized, "It is important to realize that the infinitely small wedged-in lever from which this entire trend of mind received an impetus was the attitude toward the non-rehabilitable sick." (Emphasis added.)

Shortly before he died, Dr. Alexander read an article in the April 12, 1984, New England Journal of Medicine signed by ten doctors from such prestigious institutions as Harvard Medical School, Johns Hopkins University School of Medicine, and the University of Virginia Medical Center titled "The Physicians' Responsibility Toward Hopelessly Ill Patients." These healers advocated the withdrawal of artificially administered nutritional support—including fluids—from various kinds of patients, including those in "a persistent vegetative state," without mentioning how problematic the diagnosis of that state was and continues to be.

These distinguished physicians claimed it was "morally justifiable" when a patient is in a persistent vegetative state, or is otherwise nonrehabilitative, to withhold antibiotics, feeding tubes, and hydration, "as well as other forms of life-sustaining treatment, allowing the patient to die." A less Orwellian newspeak way of putting that would have been: "allowing the caregiver to kill the patient." After he'd finished reading the article, Dr. Alexander, depressed, told a friend, "It is much like Germany in the '20s and '30s. The barriers against killing are coming down." And indeed they have been coming

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down, as indicated by the continually growing doctrine of "futility" noncare in American hospitals, hospices, and bioethics committees.

As disability-rights activists mobilize to alert legislators and the rest of us to the legitimizing of euthanasia in this country for those whose "quality of life" makes them useless eaters, some of them point to a widely publicized letter that has long resonated within the disability-rights community. The letter was written in reaction to the increasing euthanizing of infants with Down Syndrome and other signs of inferior "quality of life." The letter by Sondra Diamond appeared in the December 3, 1973, Newsweek.

Due to severe brain damage incurred at birth, I am unable to dress myself, toilet myself, or write; my secretary is typing this letter. Many thousands of dollars had to be spent on my rehabilitation and education in order for me to reach my present professional status as Counseling Psychologist.

My parents were . . . told 35 years ago that there was little or no hope of achieving meaningful "humanhood" for their daughter. . . . Instead of changing the laws to make it legal to weed out us "vegetables," let us change the laws so that we may receive quality in medical care, education, and freedom to live as full and productive lives as our potentials allow.

On the other hand, in the July 1983 issue of *Pediatrics*, the official journal of the American Academy of Pediatrics, Professor Peter Singer—in an article entitled "Sanctity of Life or Quality of Life"—wrote:

If we compare a severely defective human infant with a nonhuman animal, a dog, a pig, for example, we will often find the nonhuman to have superior capacities, both actual and potential, for rationality, self-consciousness, communication, and anything else that can plausibly be considered morally significant. Only the fact that the defective infant is a member of the species *homo sapiens*, leads it to be treated differently from the dog or pig.

At the time Professor Singer's article was published, and increasingly since, infants whose "quality of life" is deemed not worth preserving have been euthanized, without, of course, their having had the opportunity to provide a living will or a durable power of attorney stating their wishes.

The questions before us, as part of the legacy of Terri Schiavo, are the crucial definitions of "quality of life," "futility," and "morally justifiable" with regard to the future of the disabled, from birth on. How this debate is resolved should be of more than passing interest to those of us who are only temporarily able.

Annihilating Terri Schiavo

Paul McHugh

During the tumultuous final weeks in the life of Terri Schiavo, the young woman who died in a Florida hospice in April, press reports in the nation's media typically focused on the bitter conflicts among members of her family over her treatment, disagreements among consultants over her state of consciousness, and the increasingly intense arguments in legislatures and the courts over her guardianship. Since her death, the case and the story of her death and dying have been mined for their bearing on our ongoing culture wars and for the debate over the place of "values" in our politics. In particular, the seeming failure of the Republican leadership to rally legislative support in favor of keeping her alive has been seized upon as evidence of the Right's overreaching, and as a lesson in the ironies of ideology. In the words of a writer in the *New York Times Magazine*, "the heirs to Goldwater and Reagan seemed to forget how they came to control the values debate in America in the first place: not by interfering in the moral choices of families but by promising to *stop* government from doing exactly that."

Many a hidden assumption lurks in that statement, not least concerning the (assumed) wishes of the dying woman herself. It is worth reminding ourselves, moreover, that she succumbed in the end by being deprived of food and water by order of the courts—which is to say, by order of government. But in what follows I want to concentrate on another, neglected aspect of this entire dismal episode.

Conspicuously missing from the chorus of voices arguing over the meaning and implications of the Schiavo case have been the views of a class of people with a uniquely relevant body of experience and insight: namely, the doctors and nurses who customarily provide care to patients like Terri Schiavo. As a result, few people appear to have grasped that the way she died was most unusual. That, instead, it has been widely understood to be not only a proper but also a perfectly commonsensical way to die, a way approved of by most doctors and nurses, can only be explained by a deep change that has taken place over the last decades in our thinking about how to care for the helpless and the disabled among us.

Let us begin with the published facts. In 1990, when Terri Schiavo was in

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her mid-twenties, she suffered a cardiac arrest that produced a severe cerebral anoxic injury—anoxia being an abnormally low amount of oxygen in the body's tissues—and coma. From this coma she emerged gradually, settling for the next fifteen years into an impaired state of consciousness. She could swallow, breathe, sleep, and awaken without assistance, and could react to sudden sounds with a glance, or to pain by grimacing or groaning. But she was apathetic to inner needs and external events. She was mute, mostly immobile, incontinent, psychologically blank.

For the last several years, Terri Schiavo was being treated in a hospice for terminally ill people. There she received basic nursing care for her bodily needs—she was bathed and turned on schedule—while nutritious fluids were supplied through a tube that had been inserted through her abdomen into her stomach during her earlier treatment for injury. Because of her immobility and apathy, she gradually developed muscle contractions that twisted her limbs and body into a fixed contorted posture. She suffered frequent bedsores, and, with poor oral hygiene, her teeth rotted. In this state she was sustained by the regular attention of a devoted staff and family, being financially supported by money her husband Michael had gained for her through a malpractice suit.

And so she would have remained—alive and physically stable, giving off a few signals that were possibly reflexive but were believed by some members of the hospice staff and her family to represent modest signs of awareness of her surroundings—until, within a period of years, an infection, a blood clot, or a cardio-respiratory difficulty would bring her life to an end. What changed in this situation was not her physical condition but her husband's mind.

He, her legal guardian, had at first battled for her care and support, but had gradually lost hope of her further recovery. He first signaled his new attitude when he balked at permitting antibiotic treatment for a recurring bladder infection. Although dissuaded on that occasion by the nursing staff, he eventually began to demand that they stop all sustaining treatments, including the gastric tube that provided nutritious fluids or any feeding of his wife by spoon or cup.

The other parties, however, were not won over to Michael Schiavo's view that Terri was beyond hope of recovery. Instead, her parents launched what became a long legal fight with him for her guardianship. Their own intention was to continue her care in the hospice. At the very least, they wanted to feed her by mouth as one would any helpless person.

Through a series of court battles, legislative enactments, and executive mandates, the husband's right of guardianship was upheld, the gastric tube

was removed, and all—hospice staff, parents, siblings, onlookers—were forbidden by court order to give her food or drink orally. Even a chip of ice to relieve the pain of a parched mouth and throat was judicially prohibited, and local sheriffs were alerted to prevent it. Within thirteen distress-filled days, she died of dehydration.

hat other factors are relevant here—laboratory data, clinical diagnostic opinions, expressed views to the extent we have been informed of them?

Terri Schiavo's initial cardiac arrest, so rare in a young person, had been provoked by a morbidly low level of potassium in her blood—an unusual metabolic event unless the person has been losing potassium through persistent vomiting, diarrhea, or diuresis (increased discharge of urine). The plausible diagnostic explanation was that she was suffering from bulimia nervosa, and had been voluntarily and regularly vomiting to control her body weight.

The injury to her brain was demonstrably extensive. The electroencephalogram (EEG) was grossly abnormal, and typical of a patient with severely impaired consciousness. In 2002, a computer-activated tomogram (CAT scan) of her brain showed extensive cavities of dead tissue in both cerebral hemispheres, and spotty islands of loss in the band of cerebral cortex remaining around the cavities. But no functional assessment of her surviving cerebral tissue was performed by means of magnetic-resonance imaging (MRI) or positron-emission tomography (PET). The absence of such assessments is surprising. Especially if done serially, they would have demonstrated whether any neural activity persisted in the band of cortex around the cavities and whether any of this tissue was recovering over time.

Terri Schiavo was examined by qualified neurologists. Most of them concluded that she fit into the rather amorphous group of severely brain-injured patients defined as being in a "persistent vegetative state" (PVS). This diagnostic category encompasses individuals with cerebral diseases of various kinds who, though only dimly wakeful, retain the life-sustaining functions of respiration, blood circulation, and metabolic integrity.

It is perhaps because such patients display so lowered a state of vigilance that, in striving to define their condition, neurologists lighted upon a metaphor contrasting vegetation with animation. I remember teasing the admirable clinician who first coined this term that I had seen many patients but few carrots sleeping, waking, grunting, or flinching from pain. Although the term "vegetative" does distinguish what is lost from what remains in such a patient's capacities, it can also have the unfortunate effect of suggesting that there is something less worthy about those in this condition.

As for the adjective "persistent," it is perfectly precise, and makes no

prognostic claim (as would, say, the term "permanent"). It simply describes the patient's history. What we know from experience is that, as with most neurological impairments, patients "persisting" in this state of blunted consciousness for more than eighteen months are generally unlikely to recover.

The neurologists who coined the diagnostic category PVS did so out of the best of clinical motives. In particular, they wanted to distinguish it from the "brain-dead" state, where no functional capacities—to breathe, to swallow, or to respond—remain. With "brain death," a patient evinces no response to any stimulus. Brain monitors show no activity. Heart and viscera can carry on their automatic activity only with the aid of mechanical, ventilator-driven respiration, and will cease when it is discontinued.

By definition, then, PVS is not death hidden by machinery. It is human life under altered neurological circumstances. And this distinction makes all the difference in how doctors and nurses think about it and treat its sufferers.

The phrase "life under altered circumstances" encompasses every human sickness and disability. It also speaks to what is entailed in the professional art of medicine—the art, that is, of identifying, differentiating, curing, rehabilitating, defending, and, in the words of the Hippocratic oath, "benefiting" the sick. Given that doctors and nurses naturally align themselves with life, and are trained to care for whatever life brings, including "life under altered neurological circumstances," it is only to be expected that they would reject and shrink from actions that aim to kill. Exactly how they come to that civilizing point of view in their training to become doctors and nurses is a story unto itself.

The education of doctors and nurses is an interweaving of related but essentially distinct pathways of experience. One pathway comprises accumulated scientific and technical knowledge of the laws of nature. The other pathway is made up of extended, one-on-one experience with patients. This begins early as, with guidance from the masters of their craft, students and interns encounter clinical cases in the form of intensely personal dramas, events shared with many concerned parties: patients, relatives, fellow professionals. In these encounters, all the powers of science and technology that identify the characteristics of "life under altered circumstances" are enriched and elucidated.

As it happens, I have had many years of experience as both student and teacher in caring for patients like Terri Schiavo with neuro-psychiatric disorders. My patients have included individuals with dementia, confusion, apathy, and stupor, produced by diseases like Alzheimer's, Huntington's, stroke, infection, trauma, malnutrition, poisoning, and asphyxia. As is true

of most doctors, the clinical cases I remember most vividly—right down to the location within a hospital of the bed where the patient lay—were those I saw early in my training.

Such cases help form the assumptions and attitudes that we doctors and nurses bring toward the responsibilities that we have elected to take on. We can always be persuaded to talk about these war stories, as we call them, because they were so important to us in learning our craft and in how we act thereafter toward the people in our care. Here is one such story.

In the late 1950's, I was the resident neurologist on a team responsible for the care of some 25 chronically ill, permanently disabled, and bed-bound patients suffering from advanced neuro-psychiatric disorders. Each morning I would travel from bed to bed in the company of several junior interns, pushing a cart with the patients' records and checking up on them while simultaneously discoursing on what I knew about their condition. Because patients in such a chronic setting change little from day to day, finding something new to say about them becomes a challenge.

This was especially true of one patient—a man in his late fifties who, after a botched brain operation, had been left in an apathetic state not too different from Terri Schiavo's. Like her, he gave little evidence of awareness, responding mostly with groans and grimaces and moving little if at all. He had been in that state for several years when I took over on the ward; ultimately, he would live thirteen years in this condition.

The nurses, who were feeding him with spoon and cup, thought he had some awareness—as did some relatives who visited him—and even claimed to have heard him utter a few words. But evidently their testimony was not taken seriously. A biographical sketch written about him after his death—for in his active career he had been very well known—would state that, once having suffered his brain injury, "he never spoke again."

We young physicians felt honored to be caring for this man, who was of our fraternity. Prior to his injury, indeed, he had been quite simply the foremost clinical scientist in America. Among his many achievements, he had illuminated the functions of the parathyroid glands and so enlarged scientific knowledge of calcium metabolism, the dynamics of bone construction, and diseases of the bone like osteoporosis and osteomalacia. From his specific studies, he had discerned general principles (including "end-organ resistance to hormonal action," a concept prefiguring the receptor revolution in endocrinology), and he made leaders of his students by teaching them how to employ biological science in investigating the pathogenesis of human diseases. In a relatively brief academic career, he had changed the face of American academic medicine and pointed the way to the future.

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So we were pleased to care for him. But this did not ease the task before me upon visiting his bedside each morning as I searched for something interesting to say to my jaded interns. Soon enough they began to grumble that I was repeating myself as I would note dutifully that, although Dr. A's apathetic state was profound and unchanging, occasionally such a patient might, if startled, give out a coherent response revealing some human consciousness. Looking at the man lying before them, they thought they had ample reason to doubt the applicability of my ideas to this case. A particularly bold intern challenged me one morning: "Enough of that, show us that he can respond."

I knew perfectly well that I was being baited over a matter where I was unsure of my ground, but I moved briskly from the records cart to the bed, shook the patient by the shoulder, and asked in a sharp voice: "Dr. A, what's the serum calcium in pseudopseudohypoparathyroidism?" For the first time in my experience with him, he glanced up at me and, loudly enough for all the interns to hear, said: "It's just about normal."

A full and complete sentence had emerged from a man whom none of us had ever heard speak before. His answer was correct—as he should know, having discovered and named the condition I asked him about. Subsequently, in all the months we cared for him, he would never utter another word. But what a difference that moment had made to all of us. We matured that day not only in matters of the mind but in matters of the heart. Somehow, deep inside that body and damaged brain, he was there—and our job was to help him. If we had ever had misgivings before, we would never again doubt the value of caring for people like him. And we didn't give a fig that his EEG was grossly abnormal.

To apply these observations to Terri Schiavo's case, we might imagine her as the subject of a medical analysis known as a morbidity-and-mortality (M&M) conference. Such conferences, reviewing how a patient has been treated, are a standard method by which medical and surgical services maintain standards of excellence.

In the Schiavo case, such an M&M assessment, considering all the factors at play in her treatment, would probably conclude that in the early years after her injury she had received first-rate care. She was carried through the acute phase, when she could easily have died. Having settled into a state of partial recovery, she was then taken to rehabilitative and physiotherapeutic centers for further assessment and treatment. There she was seen by several expert clinicians, started on intragastric feedings, and protected from infections of her pulmonary and urinary tract—all with the purpose of observing her

neurological and psychological condition and hoping for further recovery.

When her trajectory of recovery leveled off, she was brought back to her neighborhood for care. Here, one phase gave way to another as what might be thought of as the rescue mission changed gradually into a sustaining mission, based on the realization that she was living with a brain injury unlikely to improve further and that what remained of her life would be spent in bed, in a limitedly responsive state. Bringing her into a hospice for the performance of this sustaining mission was another excellent clinical decision.

Hospice teams are made up of doctors, nurses, social workers, and physiotherapists who together develop a plan to care for someone in an incurable and usually terminal phase of life. In contrast to hospital services, hospice teams do not see time as being "of the essence." Of the essence now is, instead, the development of mutual understanding among all the parties—patient, family, and care-givers—concerning aims and actions suitable to helping the one who suffers. Achieving those goods usually *takes* time, for everything depends on gaining and retaining the family's confidence that the team really cares about the patient—is committed to doing its best to sustain what can be sustained, to alleviate suffering while at the same time not demanding heroic sacrifices from anyone.

This last point is very important. In a hospice, the staff does not provide a ventilator or cardiac monitoring at a patient's bedside—because there is no plan to transfer the patient to an acute treatment center for respiratory or cardiac support. But neither does the staff believe that, for patients with longstanding and incurable conditions, one can or should ignore the possibility of helping them live a less painful life, even if that might mean a less long one. Thus, a hospice will treat the symptoms of certain potentially deadly conditions like bowel obstructions, cardiac arrhythmias, blood clots, and some infections, but will not treat the conditions themselves.

In hospice care, no one is deprived of the simple amenities of being kept clean and receiving food and water. In Terri Schiavo's case, just as the team did not withdraw her bladder catheter, which helped keep her clean, so it did not withdraw the gastric tube, which had similarly been put in place during the rescue phase in order to ease the burden of nursing her. If for some reason the gastric tube had to be removed, the team would surely have tried to sustain nutrition by feeding her with spoon and cup.

In a hospice, decisions to limit medical services are made easier by everyone's knowledge of how the patient's condition emerged. Team attention, emphasizing as it does all relevant perspectives, strives to support all relevant interests. Terri Schiavo received good care and treatment, and would not have been permitted to suffer unnecessarily. At the same time, she would

not have been carried repeatedly through processes of treatment that ultimately did nothing to advance the quality of her life. Reasoning in a similar way and in full consciousness, Pope John Paul II elected not to return to a hospital for the third time in a month for treatment of his fatal condition. Instead, and despite the increased risks, he accepted the treatments available in his home.

The overarching principle that hospice doctors and nurses strive to represent and exemplify is never to betray a patient to death, or act directly to kill. They may help a patient *surrender* to death, by forgoing active medical procedures when these provide nothing but empty time and extend the period of suffering. And their particular judgments in this regard may well be challenged as ambiguous—or even arbitrary—by those with a legal mind or an axe to grind. But those judgments are usually clear to everyone working in a hospice, just as the distinction between betrayal and surrender is clear in other situations in life.

It was in this phase of caring for Terri Schiavo that things went badly wrong. As we have seen, her husband had begun to despair for her and for his own future. As far as the public record shows, he seems to have been given little reason to rekindle his hopes. In particular, no functional studies (like an MRI) were done to determine whether her cerebral cortex, the brain region most responsible for coherent behavior, showed any evidence of recovering. Nor did the testimony of bedside observers help. While some thought they saw evidence of slow but tiny steps toward consciousness, others thought that she displayed only reflex reactions.

He was told her diagnosis was "persistent vegetative state." Predictably, this label complicated rather than aided the situation, encouraging those who thought that she no longer existed as an animate being and infuriating those who believed it labeled her a vegetable. That is precisely why most neuropsychiatrists who work in hospices, even though they acknowledge the term's diagnostic accuracy, are reluctant to use it. Instead, they describe patients like Terri Schiavo in the language of neuropathology. Thus, they might have spoken of her as being in a "decorticate" condition, a term that not only indicates the problem but helps everyone—doctors, nurses, family members—think more dispassionately about how to evaluate it.

As these events unfolded, the plan of sustaining her in a hospice fell apart. Her guardian husband could no longer be persuaded to allow her to be fed, and under Florida law he had the right to demand that her nutrition be stopped. The courts were called in, and in the end judges and policemen removed the hospice team from her care, starving her until she died. No one was satisfied

with the outcome. It came too slowly to suit her husband, and it came too brutally to comfort her parents. As for the hospice staff, so deeply biased in favor of sustaining life, one can only imagine their anguish.

So what, our imagined M&M conference leaders might ask, can one learn from this story? When I first considered this question along with several other doctors and nurses experienced in hospice care, we were nonplussed. Although we had treated hundreds of patients like Terri Schiavo, none of us had experienced a failure like this one. Our first thought was that other matters must have been at work—old resentments, unacknowledged jealousies, envy, bitter conflicts over money—to generate the kind of abuse of a patient so visible here. Only gradually, with publication of the reports, decisions, and interviews, did the explanation become clear.

As soon as Terri Schiavo's case moved into the law courts of Florida, the concept of "life under altered circumstances" went by the boards—and so, necessarily, did any consideration of how to serve such life. Both had been trumped by the concept of "life unworthy of life," and how to end it.

I use the term "life unworthy of life" advisedly. The phrase first appeared a long time ago—as the title of a book published in Germany in 1920, co-authored by a lawyer and a psychiatrist. Die Freigabe der Vernichtung lebensunwertes Leben translates as "Lifting Constraint from the Annihilation of Life Unworthy of Life." Terri Schiavo's husband and his clinical and legal advisers, believing that hers was now a life unworthy of life, sought, and achieved, its annihilation. Claiming to respect her undocumented wish not to live dependently, they were willing to have her suffer pain and, by specific force of law, to block her caregivers from offering her oral feedings of the kind provided to all terminal patients in a hospice—even to the point of prohibiting mouth-soothing ice chips. Everything else flowed from there.

How could such a thing happen? This, after all, is not Nazi Germany, where the culture of death foreshadowed in the awful title of that book would reach such horrendous public proportions. But we in this country have our own, homegrown culture of death, whose face is legal and moral and benignly individualistic rather than authoritarian and pseudo-scientific. It has many roots, which would require a long historical treatise to unravel, with obligatory chapters considering such factors as the growth of life-sustaining and life-extending technologies and the dilemmas they bring, the increasingly assertive deprecation of medical expertise and understanding in favor of patients' "autonomous" decision-making, the explosion in rights-related personal law and the associated explosion in medical-malpractice suits, and much else besides.

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All this has resulted in a steady diminution in the bonds of implicit trust between patients and their doctors and its replacement, in some cases by suspicion or outright hostility, in many other cases by an almost reflexive unwillingness on the part of doctors to impose their own considered, prudential judgments—including their ethical judgments—on the course of treatment. In the meantime, a new discipline has stepped into the breach; its avowed purpose is to help doctors and patients alike reach decisions in difficult situations, and it is now a mandatory subject of study in medical and nursing schools.

I am speaking of course about bioethics, which came into being roughly contemporaneously with the other developments I have been describing. To the early leaders of this discipline, it was plain that doctors and nurses, hitherto guided by professional codes of conduct and ancient ideals of virtue embedded in the Hippocratic oath or in the career and writings of Florence Nightingale, were in need of better and more up-to-date instruction. But, being theorists rather than medical practitioners, most bioethicists proved to be uninterested in developing the characters of doctors and nurses. Rather, they were preoccupied with identifying perceived conflicts between the "aims" of doctors and the "rights" of patients, and with prescribing remedies for those conflicts.

Unlike in medicine itself, these remedies are untested and untestable. They have multiplied nevertheless, to the point where they have become fixtures in the lives of all of us, an unquestioned part of our vocabulary, subtly influencing our most basic attitudes toward sickness and health and, above all, our assumptions about how to prepare ourselves for death. The monuments to the bioethicists' principles include Do Not Resuscitate (DNR) orders, the euphemistically named Living Wills, and the legalization of physician-assisted suicide in the state of Oregon. These are not all the same thing, to be sure, and sophisticated arguments can be advanced for each of them; cumulatively, however, they are signposts of our own culture of death.

Hospital administrators are generally pleased with bioethicists and the rationalizations they provide for ceasing care of the helpless and the disabled. By the same token, their presence is generally shunned by doctors and nurses, whose medical and moral vocabulary draws from different sources, and whose training and experience have disposed them in a different direction. To most doctors and nurses, in any case, the idea that one can control the manner and pace of one's dying is largely a fantasy. They have seen what they have seen, and what they know is that at the crucial moments in this process, no document on earth can substitute for the one-on-one judgment, fallible as it may ultimately be, of a sensible, humane, and experienced physician.

Contemporary bioethics has become a natural ally of the culture of death, but the culture of death itself is a perennial human temptation; for onlookers in particular, it offers a reassuring answer ("this is how X would have wanted it") to otherwise excruciating dilemmas, and it can be rationalized every which way till Sunday. In Terri Schiavo's case, it is what won out over the hospice's culture of life, overwhelming by legal means, and by the force of advanced social opinion, the moral and medical command to choose life, to comfort the afflicted, and to teach others how to do the same. The more this culture continues to influence our thinking, the deeper are likely to become the divisions within our society and within our families, the more hardened our hatreds, and the more manifold our fears. More of us will die prematurely; some of us will even be persuaded that we want to.



"You spend a lifetime learning to live in the world, and then it changes on you."

John Paul II and America's Laws on Life

Patrick J. Mullaney

At the time of his passing in April 2005, John Paul II was probably the most beloved person in the world. Certainly, the eyes of billions were upon him; what had so impressed the world about this man?

The one aspect of his character that stood above all others—and accounts most strongly for the immense outpouring of sadness at his death—was his commitment to human life. At the very beginning of his pontificate, John Paul II had declared that "I am the Pope of life and of responsible parents, and everyone must know this." History certainly presented him with many opportunities to be the Pope of Life. In 1978, the year he was elected pope, in vitro reproductive techniques had just succeeded in creating the first test-tube baby; that success set the stage for many of the battles to follow, over the 26 years of John Paul II's pontificate.

And these technologically driven phenomena were not the only crucial life issues that confronted John Paul II. The traditional concerns about abortion and euthanasia remained; it was the age of RU-486 and partial-birth procedures, of Dr. Kevorkian and Terri Schiavo.

Yes, John Paul II was certainly given the opportunity to be the Pope of Life. And true to his word, he spoke unwaveringly in its defense, making known always the comprehensive moral duty to respect and defend life and never, under any circumstance, to subordinate it at any stage to other interests, regardless of their perceived utility.²

All this is well known. Not so well known, however, are the late Pope's thoughts on an important related topic, the application of this duty to the activities of the political community. As inevitable technological advances will only expand the law's involvement in life issues, now is an appropriate time to examine John Paul II's thoughts on the standards properly imposed on both the political process and the law in regard to life. That will be the focus of this article: to investigate what may be John Paul II's least noticed yet most radical doctrine.

The Gospel of Life

John Paul II covers the topic of politics, law, and life in just two notes, n. 2 and n. 20, to his 1995 encyclical, *Evangelium Vitae*. He covers the topic in

Patrick J. Mullaney, an attorney practicing in New Jersey, has advocated that the Constitution protects unborn life without need for amendment or legislative act. He was the attorney for *State of New Jersey v. Alexander Loce*, which included the efforts of Mother Teresa, Jerome LeJeune and John Cardinal O'Connor (see "A Father's Trial and the Case for Personhood," *HLR*, Spring 2001).

three stages: first, he declares both the existence and the essential characteristics of a right to life; next, he establishes the obligation of the political community in regard to that right; finally, he states how the political community properly discharges that obligation.

Note 2 begins as follows:

Even in the midst of difficulties and uncertainties, every person sincerely open to truth and goodness can, by the light of reason and the hidden action of faith, come to recognize in the natural law written in the heart the sacred value of human life from its very beginning until its end, and can affirm the *right* of every human being to have this primary good respected to the highest degree. (Emphasis supplied.)

Thus, the Pope argues, there is a right to life: It is a natural respect for life's sacred value and is afforded to and possessed by every human being out of respect for that value. Further, as the *value* of life exists prior to any political community, the *right* to life does as well. It is not conferred by legal process, but exists prior to it and independent of it.

In Note 20, the Pope considers the obligation of a subsequent political community:

Upon recognition of this right, every human community and the political community itself are founded.

The relationship of life to law is clearly established here: Nations do not grant or establish the right to live; rather, they are formed and exist for the very purpose of recognizing it.

The Pope then states how the right is properly recognized. He approaches the topic first in the negative, considering the consequences of its being questioned or denied, for example, by the democratic process:

[If] the original and inalienable right to life is questioned or denied on the basis of a parliamentary vote or will of the people—even if it is the majority . . . the right ceases to be such, because it is no longer founded in the inviolable dignity of the person, but is made subject to the will of the stronger part. In this way democracy, contradicting its own principles, effectively moves towards a form of totalitarianism . . . when this happens the process leading to the breakdown of a genuinely human co-existence and a disintegration of the State itself has already begun. The State is no longer the common home where all can live together on the basis of fundamental equality, but is transformed into a tyrant state, which arrogates to itself the right to dispose of the life of the weakest and most defenceless members, from the unborn child to the elderly, in the name of a public interest which is really nothing but the interest of one part. The appearance of the strict respect for legality is maintained, at least when the laws permitting abortion and euthanasia are the result of a ballot in accordance with what are generally seen as the rules of democracy. (Emphasis supplied.)

In sum, questioning or denying the right to life by subjecting it to a vote—such as whether or not abortion should be legal—is a political claim of

authority that recasts the essential character of this right. Rather than being possessed by every human being prior to and irrespective of the legal process (inalienably), the right is now a contingency, existing only if granted by a majority. This political alienation of a class of humanity from its preceding natural right is, according to John Paul II, a violation of human dignity so fundamental that such a political community cannot survive. That community will disintegrate.

Having examined how a democratic State might fail in regard to the right to life, the Pope then set forth how it might succeed. Note 20 continues:

Really, what we have here is only the tragic caricature of legality; the democratic ideal, which is only true when it *safeguards* the dignity of every human person, is betrayed in its very foundations: how is it possible to speak of the dignity of every human person when the killing of the weakest and most innocent is permitted? (Emphasis supplied.)

Thus, the democratic obligation—and, indeed, that of any other form of government—is met if, through its processes, the dignity of the human person is safeguarded. The right to life is essential to man; protection of this right is essential to the State. A definition emerges: A State is true to its legitimate purposes if its laws safeguard the inalienable character of the right to life.

In very few words, we have been given a reasoned structure of political purpose and obligation that binds any political community. Thus informed, we can now turn to the United States, asking whether we as a political community have in our laws adopted John Paul II's rationale and whether these laws properly recognize and safeguard life's sacred value.

America's Laws of Life

Inquiry into America's laws on life issues properly begins with the Fourteenth Amendment's Due Process Clause: "nor shall any state deprive any person of life, liberty or property without due process of law."³

The nature and scope of the Due Process right to life was addressed by the Supreme Court in its landmark 1973 decision, *Roe* v. *Wade*. Having first held that the decision to have an abortion is a protected Due Process liberty, the Court then addressed a conflicting claim: Does the Due Process right to life protect unborn life? In answering the question, the Court undertook to determine whether the unborn child was a Due Process "person." The "personhood" determination was made not by asking whether the unborn child possesses the substantive interest of life, but rather by reviewing 14 uses of the word "person" in unrelated constitutional contexts, for example the requirement that a "person" be 35 years of age to be elected president.

Finding relevance in the fact that "person" had no pre-natal application elsewhere in the Constitution, the Court held that the word "person" has no pre-natal Due Process application either. The unborn child was thus, with the stroke of a pen, both denied recognition of and affirmatively alienated from its preceding right to life.

Let's apply John Paul II's standards to *Roe*. As the Court first found constitutional status in a liberty directly at odds with life, and thereafter emasculated the enumerated right to life in support of that newly discovered liberty, it clearly failed to safeguard its inalienable character. Owing to this decision, America, according to John Paul II, has failed at the constitutional level.

Of course, no one would have expected the Pope and the *Roe* Court to share the same moral logic. So we can now proceed to a related American position on life, a position we'll call the "pro-life" opposition to *Roe*. Advocated by prominent conservative politicians and strict-constructionist jurists, this position—which we'd expect to be more in line with John Paul II's thoughts—begins by disagreeing with *Roe* that abortion is a Due Process liberty. But it then goes on to declare that the decision on whether or not abortion should be allowed is properly made by the states through "democratic determination." Each state, by direct vote or legislative act, should effect its own resolution. And any state's decision to allow abortion would be final—there could be no appeal to the Constitution—because *Roe*'s "prolife" opposition agrees with *Roe* on the point that the unborn child has no Due Process right to life.6

This opposition is, so to speak, really only half anti-Roe. Its reasoning in denying the right to life is different from Roe's "person" theory: It starts with the premise that any constitutional right must have been contemplated by its framers, and, as the framers of the Due Process Clause in 1868 did not intend to resolve the issue of abortion, there is properly no Due Process right to abortion.⁷ It then extrapolates from that conclusion the subsequent conclusion that because abortion is not a Due Process right neither is the pre-natal life right. These opponents of Roe, therefore, join Roe in ignoring the fact of pre-natal life and the Constitution's obligation to it. They present a position whose internal logic is hard to follow—there is no right to life because there is no right to abortion—but the result is clear: The Due Process Clause as interpreted by these Roe opponents, in deference to their own interpretivist theory of constitutional obligation, also denies rather than safeguards the inalienable character of the right to life. These pro-life Roe opponents, therefore, also find themselves directly opposite to John Paul II's standards.

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It's Not Up to the Voters

We're left to consider whether the *Roe* opposition, though fatally flawed at the constitutional level, can be salvaged through its proposal of a "democratic determination" on abortion. This is a particularly important topic, as "democratic determination" is seen as the solution not only to abortion, but to all the life issues. 8 It is simply how we do things in America: We vote.

But although Americans are very fond of democracy, it is in the end only a process, one with no internal moral component. It offers a choice between competing interests in the form of a vote. On life issues as on all others, a choice between competing interests is presented: outlawing abortion vs. personal autonomy; outlawing therapeutic cloning vs. possible medical advances; and so on. In each instance life, if it does not prevail in the political process, will be destroyed in favor of its competing interest.

As we've seen, John Paul II raised in *Evangelium Vitae*, Note 20, the question of whether a law may properly be enacted furthering an interest destructive of life. He stated that denying the right to life democratically in favor of such an interest was a recasting of the right's inalienable character as if it no longer existed independently, but only became real as a result of electoral victory. He went on to explain that this proscribed recasting arises from a political arrogation, a presumption of authority to ignore and render irrelevant life's inherent value, and concluded that that *arrogation* carried as its ultimate consequence "the disintegration of the State itself." Being unequivocally clear as to the enactment of laws adverse to life, John Paul II's logic just as clearly extends beyond their actual enactment to their simply being put to a vote. In subjecting life to a binding and enforceable vote, the democratic process necessarily legitimizes the particular interest competing with and adverse to life. At the outset of the process, then, we see the same presumption, the same denial, the same arrogation.

Here we are faced with the truly radical nature of John Paul II's political teachings. The democratic process, if used as a vehicle to deny the value of life by affirming adverse interests, is not only improper but fatal to any political community. If America were to follow John Paul II's thoughts, "democratic determination" would be rejected as a means to resolve contemporary life issues.

But if democracy is rejected, what legal forum would be appropriate? It's clear that John Paul II's standards can be met only by appeal to the Constitution itself. First of all, the Constitution is a component of the American political community; like any other part of a political community, it

exists—according to John Paul II's first point—for the purpose of recognizing the right to life. Consistent with that purpose it has enumerated the right to life twice, once in the Due Process Clause of the Fifth Amendment and once in the Due Process Clause of the Fourteenth Amendment. Life being a constitutional right, the various life issues are thus properly evaluated under either Due Process Clause. In any such evaluation, according to John Paul II, each Due Process Clause must be construed according to both the affirmative and negative aspects of his teachings. Each life issue must be resolved so that (in the affirmative) the inalienable character of the right to life is safeguarded and (in the negative) that character is not questioned or denied.

It might be objected that in *Evangelium Vitae* John Paul II comments only on the democratic process, and that his conclusions do not apply to other mechanisms such as constitutional adjudications of rights. However, upon inspection, the prohibition against questioning or denying life and the affirmative obligation to safeguard it that are imposed upon the democratic process arise from a core issue that is equally at play in constitutional decisions: Does the right to life prevail over other concerns? And there is no reason to think that John Paul II would condone life's being subordinated to a constitutional theory any more than to a competing interest through the mechanism of a vote.

Recall that both *Roe* and the *Roe* opponents interpreted the Fourteenth Amendment's Due Process Clause as denying the unborn their right to life. Each grounded its exclusion in a separate constitutional theory. The exclusion resulting from each theory, however, is nothing more than a presumption of authority to render irrelevant life's inherent value in favor of a theory—a presumption identical to that seen and condemned by John Paul II in the democratic process.

In applying John Paul II's logic to the Constitution, one can't help but conclude that the right to life must *always* be protected by the Due Process Clauses—including from the democratic process itself. To the best of my knowledge, no political or judicial figure has suggested protecting frozen embryos to be discarded or cloned embryos destined to become stem-cell lines with either Due Process Clause. No one, it seems, except John Paul II, who not only suggests it, but raises the possibility that the nation will fail if we don't do exactly that.

Of course, the political thoughts of a clergyman, especially those of a Roman Pope, can be generally dismissed as having no relevance to or basis in American law. Or do they? Is there any support in American law for the proposition that the Constitution must protect all human life?

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John Paul II and the Heart of America's Constitutional Order

Let's briefly explore the history of the life right within the Constitution. ¹⁰ Life was originally included as an individual right in the Fifth Amendment's Due Process Clause at the time of the adoption of the Bill of Rights in 1791. However, its scope was, like that of all individual rights, extremely limited by two Supreme Court decisions. First, Chief Justice Marshall wrote in *Barron* v. *Baltimore* (1823) that the entire Bill of Rights offered protection only against acts of the federal government, and not against actions by the states. Next, *Dred Scott* v. *Sandford* (1857) further limited the first eight Amendments by holding that their protections against federal acts were only for "citizens," defined as descendants of original citizens at the time the Constitution was adopted in 1789.

As the Bill of Rights was extremely limited, violations of basic human dignities were common, in particular the pro-slavery laws of Southern states. Aware that this constitutional structure had contributed to the conditions leading to the Civil War, the 39th Congress in 1868 set about the task of expanding individual liberties, in particular against state governments. Its objective was achieved in Section One of the new Fourteenth Amendment:

All persons born or naturalized in the United States, and subject to the jurisdiction thereof, are *citizens* of the United States and the state wherein they reside. No state shall make or enforce any law which shall abridge the privileges or immunities of *citizens* of the United States; nor shall any state deprive any person of *life*, liberty or property without due process of law; nor deny to any person within its jurisdiction the equal protection of the laws. [Emphasis supplied.]

The first clause of Section One's second sentence, the Privileges or Immunities Clause, was intended to incorporate against the states the individual rights delineated in the Bill of Rights. ¹¹ Still, in legislative deference to *Dred Scott*, this incorporation of rights was, again, limited to "citizens" (although *Dred Scott*'s definition was significantly expanded). ¹² However, because the Fifth Amendment's Due Process Clause, so incorporated, would also protect the lives, liberty, and property only of "citizens," Congress drafted the second Due Process Clause, whereby Section One directly safeguards life, liberty, and property rights on a broader basis than all other rights.

That the expanded protection of Due Process rights was the purpose of the Fourteenth Amendment's Due Process Clause was made clear by Congressman John Bingham of Ohio, Section One's drafter and principal proponent:

Natural or inherent rights, which belong to all men irrespective of all conventional regulations, are by this constitution *guarantied* by the broad and comprehensive word "person," as contradistinguished from the limited term citizen—as in the fifth article of amendments . . . that "no person shall be deprived of life, liberty

or property but by due process of law."13 [Emphasis supplied.]

With this as background, we must stop to consider the striking similarity between the underlying reasons for life's expanded Due Process protection and John Paul II's teachings. Bingham states, as does John Paul II, that Due Process rights, including life, are natural, being possessed by all men prior to and in spite of any action of the political community (they "belong to all men irrespective of all conventional regulations"). He then sets forth that the Constitution guarantees them as pre-existing rights broadly and comprehensively, the guarantee provided by the word "person." Thus, it can be said—contemporary interpretations notwithstanding—that the new Due Process Clause as a matter of purpose first recognizes the right to life by enumerating it (as John Paul II demands of all political communities) and. next, guarantees it unconditionally wherever life is found. One can't help but notice that the law can no better safeguard life—John Paul II's ultimate requirement—than by guaranteeing it. Nor can one help but notice an affirmative constitutional guarantee that prohibits our laws, at any level, from questioning or denying either life or the life right. Could it be that our Constitution and John Paul II are saying the same thing?

John Paul II's understanding of these issues—like that at the heart of America's legitimate constitutional order—is based on an obligation to human dignity, arising from the sacred value of human life. This truth, moreover, defines the legitimate scope of human freedom, including any freedom offered as justification for the taking of human life. In fact, John Paul II puts us on notice of the paradox we face should we ever seek to subject this truth to any such freedom. As he wrote in the encyclical *Fides et Ratio*: "Nihilism is a denial of the humanity and of the very identity of the human being. It should never be forgotten that the neglect of being inevitably leads to losing touch with objective truth and therefore with the very ground of human dignity. . . . Once the truth is denied to human beings, it is pure illusion to try to set them free. Truth and freedom either go hand in hand or together they perish in misery." ¹⁵

NOTES

- 1. A. Laun, John Paul II: Pope of Life and Pope of Responsible Procreation, Proceedings of the Sixth Assembly of the Pontifical Academy for Life, at 398 (Liberia Editrice Vaticana, 2001).
- 2. Evangelium Vitae, n. 62.
- 3. As will be discussed, the right to life is also enumerated in the Fifth Amendment's Due Process Clause. For historical reasons as well as its place in the abortion matrix under Roe v. Wade, the Fourteenth Amendment has been the focal point of consideration of constitutional obligation to the right. Hence, it will be our focus. See, Akhil Reed Amar, The Bill of Rights (Yale, 1991). See also "Unborn Life's Protection: Exactly What Does Constitute Us?" Human Life Review (Summer 2004).

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- 4. Of course, the entire premise of the law having an obligation to life depends upon there being life. The issue of when life begins has been developed both in science and in law in recent years. Scientifically, it is universally agreed that at conception there exists a fully integrated, selfcontained member of the human species. Several judges-including Judge Young in the Tennessee Frozen Embryo Case, Davis v. Davis, and Judge Noonan in State of New Jersey v. Alex Loce—have made findings of fact, based upon the testimony of the late French geneticist Jérôme Lejeune, that life begins at conception. Legally, Roe v. Wade considered the issue of when life begins within the abortion context. There Texas—whose criminal abortion statute was at issue—sought to continue to prohibit abortion under its statute, even in the face of the new Due Process abortion liberty, based upon its proffered compelling interest in unborn life. The Roe Court held that in order for a state to have such a *compelling interest* there must be unborn life. Further, when life begins was held to be a "difficult and sensitive" issue which the Court declined to resolve. Texas was, therefore, denied the ability to enforce its statute, the logic being no life, no state interest in life. In subsequent cases, most notably Akron v. Akron Center for Reproductive Services (1983), Thornburgh v. American College of Obstetricians and Gynecologists (1986), Webster v. Missouri Reproductive Services (1989), and Planned Parenthood of SE PA v. Casey (1992), a majority of Justices have upheld compelling state interests in unborn life from conception. By the demands of Roe's own logic, of course, those interests could only have been upheld from conception if life, for constitutional purposes, begins at conception. Thus, the Supreme Court has held sub silentio that, for constitutional purposes, life begins at conception. It must be noted that both Roe and its progeny have often used the term "potential life" in this context of state regulatory interests. The term is illusory, however, as a state interest ... in "potential life" can only be derivative—that is, a protective authority of the "potential" being's own actual interest in life, an interest of sufficient magnitude and moral authority to significantly restrict the abortion liberty. The point is that a "potential being" cannot have an actual interest in anything, in particular its own life. If the state's regulatory authority is actual from conception on behalf of unborn life, the life it protects is actual from conception as well. See, Rubenfeld, "On the legal status of the proposition that life begins at conception," Stanford Law Journal (1992).
- Bork and Schlueter, "Constitutional Persons: An Exchange on Abortion," First Things (January 2003); see also "Unborn Life's Protection: Exactly What Does Constitute Us?" Human Life Review, at 44 (Summer 2004).
- 6. Ibid
- 7. Ibid.
- 8. By "life issue" is meant any contemporary issue where life is proposed to be subjected to a competing interest. Life issues include the discarding of unused in vitro embryos, pre-implantation embryonic genetic diagnosis, the use of all forms of embryonic-stem-cell lines and research, as well as therapeutic cloning.
- 9. Evangelium Vitae, n. 20.
- 10. For a more detailed discussion see Amar, The Bill of Rights, supra. at 163-211; see also Mullaney, "State of New Jersey v. Alex Loce, et. al., A Father's Trial and The Case For Personhood," Human Life Review (Spring 2001); see also Mullaney, "Unborn Life's Protection: Exactly What Does Constitute Us," Human Life Review (Summer 2004).
- 11. Amar, The Bill of Rights, supra. at 163-211.
- 12. Note the expanded definition of "citizens" in Section One's first sentence.
- 13. Cong. Globe 35th Cong., 2nd Sess., 982 (1859).
- 14. Note the distinction between the Roe Court's construction of "person" and its original function.
- 15. Fides et Ratio, n. 90.

The Least of My Brethren:

The Ethics of Heterologous Embryo Transfer

Thomas D. Williams, L.C.

Many good people experience a natural repugnance toward the idea of surgically implanting cryogenically preserved embryos into the wombs of women who are not their mothers. This process, called heterologous embryo transfer (HET), strikes men and women of good will as an aberration far removed from right reason and God's plan for human procreation. Taken as a whole, the proposal of creating human embryos, freezing them, and later implanting them in the wombs of sterile women merits total and unconditional condemnation from moral theologians and ethicists.

The manipulation of the human reproductive process, made possible by advances in medical and genetic sciences, has created situations that ought never to have existed. Hundreds of thousands of human embryos have been "manufactured" through the artificial union of the male and female gametes, and subsequently preserved cryogenically with the intention of storing them for possible implantation in the future. Moralists now find themselves in the unpleasant position of having to offer a separate ethical judgment regarding the final step of this morally censurable project once the first steps have been carried out. From a moral perspective, this act must be evaluated in isolation from the acts that preceded it since it bears no inherent relation to them. What can and should be done with these embryos? I would argue that while the implantation of these embryos in their genetic mothers may be morally obligatory, their implantation in women other than their genetic mothers may at times be morally permissible and even praiseworthy.

The ontological status of cryogenically preserved embryos

The first essential question to be posed when confronting the possibility of embryo adoption concerns the ontological status of cryogenically preserved embryos. What sort of being are we dealing with? Catholic moral theology is personalistic, in that moral criteria always bear a relationship to personal being. All beings are either persons or non-persons, to be treated as ends or means. Moreover, personhood is a binary function, meaning that a given being either is or is not a person. From a Catholic perspective, there is no such thing as partial persons, part something and part someone. Are

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human embryos things or persons? If frozen embryos are things, rather than persons, they possess no inherent dignity and therefore may be used for the sake of morally relevant beings, that is, persons. If frozen embryos *are* human persons then they do possess dignity and must be treated as ends in themselves, for their own sake. Considerations of utility do not obtain in the case of personal being, and therefore the possible positive and negative consequences of doing good to these persons cannot determine the morality of the act itself.

Science no longer entertains serious doubts that upon conception a new human life, separate from that of the mother, comes into being. The question arises as to whether this distinct new human being is necessarily a human person, with the ethical ramifications stemming from this ontological status. From a Catholic perspective every human being, including an embryo, is to be treated as a person. The document *Donum vitae* from the Congregation for the Doctrine of the Faith teaches that "no experimental datum can be in itself sufficient to bring us to the recognition of a spiritual soul; nevertheless, the conclusions of science regarding the human embryo provide a valuable indication for discerning by the use of reason a personal presence at the moment of this first appearance of a human life: how could a human individual not be a human person?"²

The document goes on to draw the following ethical conclusion: "the human being is to be respected and treated as a person from the moment of conception and therefore from that same moment his rights as a person must be recognized, among which in the first place is the inviolable right of every innocent human being to life."³

Catholic anthropology and moral theology understand every human being to bear an equal ontological dignity. Therefore a human being still in the embryonic stage must be treated with the same care and attention accorded to children, adults and the elderly. In this regard *Donum vitae* continues: "This doctrinal reminder provides the fundamental criterion for the solution of the various problems posed by the development of the biomedical sciences in this field: since the embryo must be treated as a person, it must also be defended in its integrity, tended and cared for, to the extent possible, in the same way as any other human being as far as medical assistance is concerned."

From the foregoing consideration we can conclude that (1) the embryo is fully a human being, and (2) should be respected and cared for as we would for any other human person. To avoid the temptation of considering human embryos to be ontologically inferior to fully developed human persons, throughout this paper I will refer to them as persons.

1. The Proper Moral Categories for this Discussion

Since the question at hand refers to how a specific group of human persons are to be treated, we must frame our discussion around the ethical categories of justice and charity, which guide and govern interpersonal relations. I would argue that embryo adoption or rescue is not essentially a question of marital ethics, nor even of sexual ethics.

Church teaching regarding marital fidelity is twofold. Marriage is a communion of life and love, at the heart of which is the one-flesh union of the spouses. Marital fidelity refers first and foremost to the exclusive gift of self to one's spouse in the context of sexual intimacy. Sexual infidelity, or adultery, involves engaging in sexual relations with a person other than one's spouse. More recently, marital fidelity has been seen to entail a second, closely related dimension, that of becoming a parent only together with one's spouse. The relevant text comes once again from the 1987 instruction from the Congregation for the Doctrine of the Faith, *Donum vitae*:

For human procreation has specific characteristics by virtue of the personal dignity of the parents and of the children: the procreation of a new person, whereby the man and the woman collaborate with the power of the Creator, must be the fruit and the sign of the mutual self-giving of the spouses, of their love and of their fidelity. (34) The fidelity of the spouses in the unity of marriage involves reciprocal respect of their right to become a father and a mother only through each other.

From the perspective of marital ethics, therefore, it will be necessary to demonstrate that HET does not violate spousal rights to become a father or mother except with each other. I will endeavor to do this later on. More importantly, however, any case made against embryo adoption grounded in the nature of the spousal relationship between husband and wife cannot reach the core ethical issue in play since an unmarried woman is equally capable of accepting a human embryo into her womb with none of the ethical issues regarding spousal fidelity.

Yet nor is the core issue at hand a question of sexual ethics. If an unmarried woman were to accept the implantation of an unborn child into her womb for the purpose of saving the child's life, there could be no question of a misuse of the woman's sexuality, as argued by, among others, Mary Geach.⁵ Though implantation directly involves the woman's reproductive system, rather than, say, her circulatory or nervous system, such involvement does not imply a sexual act any more than lactation, also a part of the reproductive system, is a sexual act. The act of generation involves a relationship between two people, a husband and wife. The act of receiving and gestating an embryo, however, involves two different people, a woman and

a child, with the instrumental intervention of medical personnel. The relationship between a husband and wife in procreating a child is sexual; the relationship between a woman and a child gestating in her womb is not a sexual relationship but one of nurturing. It would be absurd to claim, for example, that a young woman adopting an embryo had lost her virginity or had engaged in a sin against chastity. The woman's *generative* capacity is not involved in HET, since generation means the bringing into existence of a new human being, whereas embryo adoption applies to the implantation of an already existing human person into a woman's womb.

2. How Are Frozen Human Embryos to Be Cared for?

Having established, at least tentatively, the ethical framework within which HET is to be considered, what are the requirements of justice and charity in dealing with these persons? "Doing good" to these frozen human persons in an embryonic stage requires a discernment of their biological needs in the first place so as to secure their inviolable right to life, prerequisite for the satisfaction of all their other rights. In order to grow and develop, indeed to survive, these persons require a specific environment and physical nourishment. In the present state of the biomedical sciences, this environment can only be provided by the womb of a human female. If any other means were available, such as an artificial womb or a special incubator, the parameters of the question would perhaps change considerably.

From the perspectives of both natural law and Catholic moral theology I would unhesitatingly assert that the human embryo has a fundamental right to gestation. This normal process by which a human baby is nourished, shaped and protected is essential for his well-being and must be considered to be part of the ordinary care that should never be denied to a human person. The fact that a child, through no fault of his own, has been deprived of gestation in the first days of his existence in no way lessens society's duty to secure this necessary good for him quickly and effectively. I have spoken here of the demands of justice and charity. Because it is a fundamental right, I would place gestation squarely in the domain of justice: the rendering of what is due to another. Gestation is not a gratuitous gift, superadded to what a person could and should reasonably expect from his fellows. The corresponding duty to secure this due good to the child would devolve first and foremost upon the child's own parents. In the case of impossibility or impracticality on the part of the child's mother, it falls to the entire human community to seek to provide for this need. I speak of charity because no other woman can be said to bear the duty to gestate a child that is not her own, but nor should she be denied this possibility if she feels so inclined, any more

than we would deny adoptive parents the privilege of caring for an abandoned child left on the doorstep of the local hospital.

In his 1981 apostolic exhortation *Familiaris consortio*, Pope John Paul II emphasized the need to be especially attentive to the rights of the most helpless of children:

In the family, which is a community of persons, special attention must be devoted to the children by developing a profound esteem for their personal dignity, and a great respect and generous concern for their rights. This is true for every child, but it becomes all the more urgent the smaller the child is and the more it is in need of everything, when it is sick, suffering or handicapped.⁶

He adds to this the following consideration:

Concern for the child, even before birth, from the first moment of conception and then throughout the years of infancy and youth, is the primary and fundamental test of the relationship of one human being to another.⁷

The intimate care entailed by embryo adoption implies real human sacrifices but violates no human good. As it stands, Catholic morality has always been prepared to go to extremes for the good of another, especially when a fundamental good such as life is at stake. Perhaps the most striking example of this is the case of organ donation. During the 1940s organ transplants became medically possible. Moral theologians and ethicists debated the issue for decades and only recently has the Catholic papal Magisterium pronounced authoritatively on the subject, since neither Pius XII, John XXIII or Paul VI issued any substantive or definitive statement in this area. The 1992 Catechism of the Catholic Church sums up magisterial teaching with the simple expression: "Organ transplants are in conformity with the moral law if the physical and psychological dangers and risks incurred by the donor are proportionate to the good sought for the recipient." What could seem evident to us now proved a source of great vexation and discussion for moral theologians of the time.

The development of the arguments leading to the present teaching of the Church can prove especially illuminating in the matter of embryo adoption because of the parallels between the two cases. Mutilation of the human body, especially when causing irreparable damage to the organism, constitutes an evil to be avoided. Corporal mutilation refers to "any procedure that temporarily or permanently impairs the natural and complete integrity of the body or its functions." Mutilation can at times be permitted, however, as a means to a greater good. Catholic medical ethics has traditionally explained the moral possibility of the amputation of limbs to save a life through the "principle of totality." By this principle, the part only exists for the sake of

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the whole and thus can be sacrificed when absolutely necessary for the good of the whole. The point of reference here is the person himself and his life, not the arm, the leg, or any other member. This applies both in the case of amputation of diseased limbs and in the case of the removal of *healthy* body parts for the sake of preserving life, such as when a person cuts off a healthy foot stuck in a railway track in order to escape from an oncoming train.¹¹

Formulations of this principle always specify that such mutilations are licit only when the good end sought is unattainable by other means. For example, Pius XII stated that one may destroy or mutilate parts of the body "when and in the measure which is necessary for the good of the being as a whole, to assure his existence, or to avoid or repair grave and lasting damage which cannot in any other way be avoided or repaired." ¹²

Catholic ethics ran up against tremendous hurdles, however, when attempting to apply the principle of totality to the case of what we could now call heterologous organ transplants (to distinguish from homologous organ transplant in the case of say, moving a piece of healthy flesh from the buttocks to the face in the case of burn victims). Strictly speaking the procedure of heterologous transplanting of organs is not therapeutic, in the sense that the mutilation does not benefit the donor undergoing it. The principle of totality cannot be ethically applied because the relationship of one person to another or even to the community is not that of a part to the whole. One person does not exist for the sake of another, but each possesses an inviolable dignity as an end in himself.

An early defense of the morality of heterologous organ transplants came from Bert J. Cunningham in his doctoral dissertation at Catholic University in 1944.¹³ In this work Cunningham argues that what one is permitted to do for the good of oneself one may also do for the good of another. He points out that the members of one's own body are directed not only to one's own good but in a certain way to the good of others. If the individual himself is ordered not only to his own good but to the good of others, then the parts of the individual are also ordered to the good of others. Since according to Catholic morality one may and indeed should sometimes risk one's life for another, for certain very serious needs of others one should be able to undergo the lesser evil of mutilation, Cunningham concludes.

A statement by Pope Pius XII in 1958 opened the door for applying the principle of totality to heterologous organ transplants. "To the subordination of particular organs to the organism and to its own finality," he wrote, "is added the spiritual finality of the individual himself." Not only are members subordinated to the good of the body, but a person's corporal good does not exhaust his comprehensive good, which includes his spiritual good. Pius'

words were later applied by ethicists to the case of organ transplants from live donors in that the spiritual good of self-giving toward one's neighbor justified what would otherwise have been illicit because such an act, though harming corporal integrity, contributes to the moral and spiritual good of the donor himself. In this way, and assuming the voluntary nature of the donor's gift, one person is not instrumentalized for the good of another, but integrates his self-sacrificing act of charity into his overall end as a spiritual being.

Though considerable differences exist between the ethical circumstances surrounding organ donation and those of HET, I have devoted space to the consideration of organ transplants and the history of the ethical debates that led to its acceptance to illustrate the lengths that Catholic moral theology is willing to go for the sake of saving human life. If ethicists are willing to sanction the physical evil of corporal mutilation resulting in real damage to the physical integrity of the organ donor in order to save another human life, how could we fail to accept the implantation of embryos necessary for their survival, when such a procedure causes no permanent damage to the gestating woman?

3. Procreation, Motherhood and Fatherhood

Some ethicists have argued against HET on the grounds that it violates the intrinsic structure of human procreation. From his reading of certain magisterial texts, for example, Father Tadeusz Pacholczyk infers that papal teaching understands procreation to include the entire period from conception to birth. Basing himself on passages from Casti Connubii, Gaudium et spes and Familiaris consortio regarding the purposes of marriage and of the marital act, Pacholczyk arrives at the significant assertion that "implicit in the basic formulation is the idea that whatever precedes the education of children (beginning formally at birth) would be 'procreative' in character. Birth seems to be the significant threshold where procreation ends and education begins."15 Yet none of the documents cited makes this claim. Nowhere in the referenced magisterial texts is there any suggestion that procreation and education refer to collectively exhaustive chronological periods; the texts rather treat procreation and education together as the primary end of marriage, a fundamentally different notion. The papal Magisterium has never taught that these two terms comprise the entire realm of responsible parenthood, which likewise includes nurturing and nourishing, which are realized both pre- and post-natally, though in different ways. Is feeding one's child an act of procreation or education, or neither? Where does this essential parental obligation fit into a human timeline wherein the entire role of

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motherhood and fatherhood vis-à-vis the children is subsumed under the categories of procreation and education?

Though Catholics understand procreation and the education of offspring to be the primary end of marriage, education in reality is a subset (albeit the most important) of the more general category of care for offspring, which includes attention to all the needs of the child from shelter and food to clothing and instruction. If we were to insist on distinguishing chronological periods in the relationship between parents and offspring, the first would be the punctual moment of procreation followed by the more general category of responsible care for the well-being of a child, which comprises manifold expressions and spans the period from gestation all the way to the wise counsel given by parents in old age to their adult children. Yet even if one were to insist on the corporately exhaustive nature of the categories of procreation and education, the gestation period would have to be considered a part of education rather than procreation. This is the perspective offered by Pope John Paul in his 1994 Letter to Families: "The first months of the child's presence in the mother's womb bring about a particular bond which already possesses an educational significance of its own. The mother, even before giving birth, does not only give shape to the child's body, but also, in an indirect way, to the child's whole personality."16

"Begetting" and "procreating" are coterminous. Yet begetting and procreating children refer to something that cannot, as some assert, extend beyond the generation of an embryonic human. Begetting a child refers to an act of sexual union resulting in the generation of a new human being. In its exact sense procreation must be a punctual event. Otherwise we would find ourselves in the absurd situation of speaking of partially procreated children. The binary nature of personhood and non-personhood, itself a particular manifestation of the metaphysical distinction between being and non-being, precludes this possibility. Thus, to describe the activity of an expectant mother by saying "She is procreating" would be to fundamentally misrepresent what is really going on.

Though in a broader sense creation continues throughout our lives, in that God's creative will sustains us in existence by continually communicating to us a share in his own being, in a more precise sense creation refers to the punctual act of bringing something or someone into existence that did not exist before. Procreation differs from God's initial creation of the world in two essential ways. First, God's original *creatio ex nihilo* brought the material and spiritual world into existence out of nothing, whereas procreation implies the preexistence of both material and spiritual realities and the coming into being of a new, distinct human substance from these realities.

Secondly, while God created the world independently, procreation entails the cooperation of human agency, and thus procreation is also a form of cocreation between God and parents. Yet the passage from non-being to being is common to both creation and procreation. Since being and non-being are mutually exclusive realities, procreation is necessarily and essentially punctual in time and cannot be thought of as a gradual coming into being.

I would add to the coterminous expressions of "begetting" and "procreating" a further synonym often adopted in papal teaching, namely "becoming a mother" and "becoming a father." This is pertinent to arguments similar to Pacholczyk's that see motherhood in a broad sense, as Pacholczyk sees procreation. Here again we return to the relevant passage from *Donum vitae*: "The fidelity of the spouses in the unity of marriage involves reciprocal respect of their right to become a father and a mother only through each other." In his objection to HET, ethicist Christopher Oleson affirms that natural motherhood transcends conception and encompasses a larger unity which inseparably comprises conception, bearing, and birth. He sees the principle invoked by *Donum vitae* as having a relevant application to embryo adoption, in that bearing a child would have a specifically maternal significance, and thus should be actualized only within the marriage covenant.

Here I think we must insist on the essential difference between being a mother and becoming a mother. Being a mother is a lifelong project describing a relationship of maternity-filiation involving numerous manifestations, including those enumerated by Oleson. I would also agree that these various component elements of motherhood should not be separated. Yet in the case of cryogenically preserved embryos, this separation has already occurred. Becoming a mother, on the other hand, does not have the temporally extensive character of motherhood. When, in fact, does a woman become a mother? When does a man become a father? A woman is a mother in the very moment that her offspring comes into being. In the most precise sense, a woman becomes a mother in the moment when her sexual act bears the fruit of the conception of a new human being. From that moment on she is truly a mother and her husband is a father. With the passage of time she does not become "more" a mother. The punctual nature of becoming a parent is especially evident in the case of a father. He "fathers" a child through a life-giving act of sexual intercourse and becomes fully a father through that punctual act. His later acts of responsible fatherhood, such as the affection, protection and education offered to his offspring, are merely an ongoing, consistent living out of his paternal role. We call a pregnant woman an "expectant mother," not in the sense that she is expecting or waiting to become a mother, but

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because she is a mother expecting the birth of the child she already bears within her.

Oleson is right in affirming that expectant mothers "do not experience the period of pregnancy or the place of their womb as merely a post-maternal means of providing a safe and nurturing environment for the new life within them . . . Their *bearing* their child in their womb is experienced as an inherent aspect of their motherhood." It is right and good that it should be so. It is also right and good that adoptive mothers experience their love and care for their children as motherhood, and that they treat their adoptive children as their own. The greater the natural bond between them, the better an adoptive mother will live out her role. Yet "becoming a mother" speaks of a fundamentally different reality, that of bringing a child into existence.

Pope John Paul II, in his *Letter to Families*, speaks of the nature and punctuality of the generative act in the clearest of terms:

In particular, responsible fatherhood and motherhood directly concern the moment in which a man and a woman, uniting themselves "in one flesh," can become parents. This is a moment of special value both for their interpersonal relationship and for their service to life: they can become parents—father and mother—by communicating life to a new human being.¹⁹

A little further along he adds:

All married life is a gift; but this becomes most evident when the spouses, in giving themselves to each other in love, bring about that encounter which makes them "one flesh" (Gen 2:24). They then experience a moment of special responsibility, which is also the result of the procreative potential linked to the conjugal act. At that moment, the spouses can become father and mother, initiating the process of a new human life, which will then develop in the woman's womb.²⁰

Distinctions of genetic, sexual, gestational and social motherhood provide an interesting linguistic clarification of some of the ways the term motherhood is employed, but we must remember that these are analogical uses of the term. Adoptive motherhood, be it gestational or social, will never make a woman the mother of the child in a technical sense, since she did not beget the child but rather assumes responsibility for and nourishes a pre-existing human being. Since becoming a mother and becoming a father refers specifically to a generative act resulting in the existence of a new human being, I would tentatively suggest that a child manufactured by IVF in a sense has no mother and father. A certain woman and a certain man furnished the biological material necessary for the production of a new human being, but they did not engage in a generative act resulting in the fruit of a new human life. It was not their act, but the act of another, that resulted in another human coming into being. The closest thing that child will have to a father is

the Frankensteinian figure of the lab technician that united the two gametes that produced the child. Herein lies the deep tragedy of IVF: that children are produced without a mother and a father. Not that they will never know their mother and father, or that their mother and father died, but that they never *had* a mother or a father in a full sense.

All of this leads me to the necessary conclusion that a woman who chooses to welcome an embryo into her womb provides safe harbor and nutrition for the child but does not become the child's mother. Therefore *Donum vitae*'s teaching that the bond existing between husband and wife accords the spouses the exclusive right to become mother and father solely through each other is fully respected in the case of embryo adoption.²¹

Conclusion

From the foregoing discussion I would propose that the adoption or rescue of human embryos does not violate any fundamental human goods but rather constitutes a sometimes heroic act of kindness toward extremely needy members of the human community. Fertile women are uniquely suited to provide these unfortunate persons with the only sort of care that can meet their specific needs, and indeed allow them to live. The sacrifice implied and the myriad other circumstances coming into play preclude the possibility that heterologous embryo adoption could ever be considered a universal moral obligation. Like organ donation, it will always be an instance of moral heroism for those who find themselves so disposed and inspired. But nor should ethicists fail to consider such heroism as morally acceptable and indeed commendable, since it satisfies for the child a basic human right.

The prudential ramifications of this basic moral evaluation will require considerable discussion, analysis and debate. While not affecting the substantial moral judgment of the process, the consequences of overt support for embryo adoption will invariably condition the way such support is communicated as well as the eventual regulation and limitation of the procedure. Given that human lives themselves are at stake, I would not rule out the moral possibility of allowing unmarried women to engage in HET.²² While we do not allow single men or women to adopt children, we would undoubtedly do so if the children's survival depended upon it. It would not be the best option, but it would clearly beat the alternatives.

NOTES

1. In distinguishing the world of persons from the world of things, Karol Wojtyla includes animals in the latter category. Although we would hesitate to call an animal a "thing," he writes, nonetheless "no one can speak with any conviction about an animal as a person" (Karol Wojtyla, Love and Responsibility, tr. H. T. Willetts [New York: Farrar, Straus, and Giroux, 1995], 21.)

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- 2. Congregation for the Doctrine of the Faith, *Donum vitae* ("Instruction on Respect for Human Life in Its Origin and on the Dignity of Procreation: Replies to Certain Questions of the Day"), February 22, 1987, 5.I.1. par. 3.
- 3. Donum vitae, 5.I.1, par. 4.
- 4. Ibid.
- 5. See especially Mary Geach, "Are there any circumstances in which it would be morally admirable for a woman to seek to have an orphan embryo implanted in her womb?" in *Issues for a Catholic Bioethics*, ed. Luke Gormally (London: The Linacre Centre, 1999): pp. 341-346 and "Rescuing Frozen Embryos," in *What Is Man. O Lord?*, pp. 217-230.
- 6. Pope John Paul II, apostolic exhortation Familiaris consortio (November 22, 1981), no. 26.
- 7. Ibid: emphasis added.
- 8. Catechism of the Catholic Church, no. 2296.
- 9. J. J. Lynch, "mutilation," in The New Catholic Encyclopedia, Vol. X, p. 145.
- 10. Pope Pius XII coined the expression in an address to the First International Congress on the Histopathology of the Nervous System in 1952 (Acta Apostolicae Sedis [AAS] 44 [1952]:779-89, esp. 782). Under a different name, this same principle was discussed by Saint Thomas Aquinas regarding mutilation and amputation of members and cited by moralists with little modification of Aquinas' arguments. See Summa Theologiae, II, 65, 1.
- 11. See, for example, C.R. Billuart, Summa Sancti Thomae Hodiernis Academiarum Moribus Accomodata, Paris, 1870, Vol. IV, dissert, X, art, IX, n, 1.
- 12. Pope Pius XII, AAS 44 (1952): 782.
- 13. For the following synthesis I rely on John Gallagher, CSB, in his essay "The Principle of Totality: Man's Stewardship of his Body," in Moral Theology Today: Certitudes and Doubts, Saint Louis: The Pope John Center, 1984: 217-42. Gallagher in turn refers to Bert J. Cunningham, The Morality of Organ Transplantation (Washington D.C.: Catholic University of America Press, 1944).
- 14. AAS 50 (1958); 693-4.
- 15. Father Tadeusz Pacholczyk, On the Objectionability of Embryo Adoption, manuscript in press: Proceedings—Fellowship of Catholic Scholars Meeting, 2003.
- 16. Pope John Paul II, Letter to Families (February 2, 1994), no. 16, emphasis in original.
- 17. See unpublished manuscript: Christopher Oleson, "The Immorality of Heterologous Embryo Transfer: On the Maternal, and thus Moral, Significance of Being 'with Child."
- 18. Ibid.
- 19. Pope John Paul II, Letter to Families (February 2, 1994), no. 12.
- 20. Ibid; emphasis in original.
- 21. See Congregation for the Doctrine of the Faith, *Donum vitae* ("Instruction on Respect for Human Life in Its Origin and on the Dignity of Procreation: Replies to Certain Questions of the Day"), February 22, 1987, 5.II.A.2.
- 22. I would therefore reject the position of Helen Watt and John Berkman who defend embryo "adoption" while rejecting embryo "rescue" by unmarried women, because they are not capable of giving the child the home to which it has a right. See especially Helen Watt, "Are there any circumstances in which it would be morally admirable for a woman to seek to have an orphan embryo implanted in her womb?" in *Issues for a Catholic Bioethics*, pp. 347-352; John Berkman, "Gestating the Embryos of Others: Surrogacy? Adoption? Rescue?" *National Catholic Bioethics Quarterly* 3.2 (2003), pp. 309-330; "John Berkman Replies" in the Colloquy section of *National Catholic Bioethics Quarterly* 4.1 (2004), pp. 12-13.

APPENDIX A

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Even Homer Nods

Hadley Arkes

I count myself an ally of David Gelernter in almost all things, but in a recent piece in the *Wall Street Journal*, he offered a stinging reproach to James Dobson for invoking the experience with the Nazis and German science, in drawing lessons that bear on the current argument over embryonic stem cells.

Gelernter's reflexes, in the past, have been reliably right, but in this case, he was not his usual, precise, just self. In fact, as he accused Dobson of sweeping judgments, without discrimination, he swept quite injudiciously himself. He remarked that "morally serious persons" will be sensitive to the differences between the killing of embryos and "full-fledged human beings." Just where the difference finally turns he did not finally say, but he remarked that, "It's not just that embryos ... feel no pain when they are destroyed. Not just that they leave no grief-stricken survivors in the sense that full-fledged human beings do, and rip no comparable hole in the community and the universe when they are murdered." We gauge persons as "morally serious" when they offer morally serious reasons, but surely Gelernter must be aware that these grounds of distinction are patently untenable: The victim who is anaesthetized and feels no pain; the homeless person without relatives who leaves "no grief-stricken survivors" or rips no hole in the memory, and stirs no sense of loss—nothing in these features would establish that these people have lost their standing as "full-fledged human beings." If the embryonic Joe DiMaggio had been swept away, he would not have left the enduring memory, and sense of loss, that David Gelernter and I may share. But that embryo was distinctly, solely, identically the same being, and he was never anything other than human at any stage.

Gelernter accuses Dobson of being too freewheeling in making comparisons with the Holocaust. Since my wife and I lost members of our own family in the Holocaust, I think I can claim a certain license to object to those too quick to censure all comparison with the Nazi experience. They curiously sail past at least two points that bear on the current controversy over embryonic stem cells, and which cannot be rejected without a certain obtuseness: (1) It was quite wrong to subject Jewish prisoners to lethal experiments even though "they were going to die anyway." (2) It could have had vast utility, even for people who were not German, to find out just what temperatures the body could sustain in waters freezingly cold. But we seem to understand now that it would have been legitimate to impose a moral refusal on that kind of "research," even though it would have blocked researchers from investigating what they passionately wished to know, and discover things that might have saved lives.

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In the case of stem cells, Gelernter notes that "some Americans support expanded stem-cell research because they are frantic for science to find new cures for desperately ill friends or family members." He then asks, "Is Dr. Dobson so small-hearted that he can't cut such people a little slack?" Of course, that connection is quite speculative—there haven't even been any clinical trials yet of any of the therapies that are projected from the embryonic cells. In striking contrast, there have been dramatic gains through the use of adult stem cells, which don't require the destroying of human beings in their embryonic stage. Would Gelernter really regard it as hard-hearted if we insisted first on pursuing the research whose dramatic promise has been foretold already by its dramatic accomplishments—while we avoid research that is lethal?

As it turns out, that research conducted by the Nazi doctors did yield some results, which have proved useful for people who have been neither German nor Nazi. And yet, I don't think David Gelernter would have regarded himself as "small-hearted" if he had refused to "cut such people a little slack" in pursuing their research, hoping to save the humans they happened to care about.

I understand, of course, David Gelernter's concern: There has been a recent tendency in our politics, to invoke the Nazi analogy in a manner so untethered, so detached from any sober moral judgment, as to be nearly obscene. When George Soros compares George W. Bush to Hitler he suggests that he recognizes no moral difference between a regime of genocide, utterly detached from any restraints, legal and moral, and a conservative administration, operating under the constraints of law, and taking seriously the principles of the American Founding. But James Dobson does not fall into this class. And it would offer a moral instruction, quite as clumsy and wrong, to jump on people who invoke the lessons of the Nazi experience, in the places where those lessons remain chillingly apt.

APPENDIX B

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Justice Restraint

Clarke D. Forsythe

Americans who cherish constitutional freedom and self-government will miss the presence of Chief Justice William Rehnquist on the U.S. Supreme Court. Appointed in 1971, he served 34 years on the Court, the last 19 as chief justice. Many of his decisions and opinions have forcefully advocated the limits of judicial power and the overriding right of the people in this democratic republic to govern themselves through their elected representatives.

The Constitution leaves most political issues to be decided by the people through the democratic process. Chief Justice William Rehnquist sought to preserve the right of the people to decide political and social issues, even the most controversial ones.

He was the last surviving dissenter from the Supreme Court's 1973 decision in *Roe* v. *Wade*. He understood that *Roe* was a usurpation of the people's authority to decide the abortion issue through their representatives at the state level, labeling the decision "judicial legislation."

And he had the wisdom and foresight to see the mess that the Court has created by its abortion decisions, accurately predicting that they "will accomplish the seemingly impossible feat of leaving this area of the law more confused than it found it."

With controversial political issues like abortion, Rehnquist understood that the goal of judicial decision making "is surely not to remove inexorably 'politically divisive' issues from the ambit of the legislative process, whereby the people through their elected representatives deal with matters of concern to them. The goal of constitutional adjudication is to hold true the balance between that which the Constitution puts beyond the reach of the democratic process and that which it does not."

During his tenure, he cautioned that the Supreme Court should not adhere to wrong decisions because they might be popular at the moment. The Supreme Court "derives its legitimacy, not from following public opinion, but from deciding by its best lights whether legislative enactments of the popular branches of Government comport with the Constitution."

If the Court misinterpreted a statute, the people could take their case to Congress or the states to overturn the Court's interpretation, as happened more than once during his tenure. But because interpretations of the Constitution are not subject to change by Congress or state legislatures, it was all the more important that the Court be open to change wrong decisions and to "take care to render decisions grounded truly in principle" and not simply as political and social compromises...."

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He was careful to base constitutional decisions, as much as possible in individual cases, on the text and history of the Constitution, and was constantly wary of legal rules that were based "on a judge's subjective determinations." Adherence to the text and history of the Constitution was needed "to prevent 'judges from roaming at large in the constitutional field' guided only by their personal views."

Consequently, he spurned the subjective "complex balancing of competing interests" in judicial decisions which turned judges into legislators. And he rejected creating new constitutional rights not found in the text of the Constitution "from abstract concepts of personal autonomy." The public will is better expressed by elected representatives than by nine unelected lawyers.

Where the Constitution did not dictate otherwise, he deferred to state decisions or procedures. For example, Chief Justice Rehnquist wrote the majority opinion for the Court in the 1990 *Cruzan* case. There, in a case with similarities to the Schiavo case, the Court upheld the authority of Missouri to require "clear and convincing evidence" of the desires of a disabled patient, Nancy Cruzan, before withdrawing food and fluids.

Likewise, he also wrote the opinion for the Court in the *Glucksberg* case in 1997 which upheld Washington State's prohibition on assisted suicide and left the issue of assisted suicide to the people through their representatives in the states. He noted that the states' laws prohibiting assisted suicide "are longstanding expressions of the States' commitment to the protection and preservation of all human life."

His opinion in *Glucksberg* is an excellent example of his consistent effort to limit judicial decision-making. In *Glucksberg*, he wrote that the Court's analysis should begin "by examining our Nation's history, legal traditions, and practices." He emphasized that "[b]y extending constitutional protection to an asserted right or liberty interest, we, to a great extent, place the matter outside the arena of public debate and legislative action." Therefore, the Court's analysis should at least be "carefully refined by concrete examples involving fundamental rights found to be deeply rooted in our legal tradition."

He deferred to popular expressions of religious conviction that were not ruled out by the Constitution. He dissented in the *Santa Fe* case when the Court struck down a school policy of student-led prayer before high-school football games. He rejected the Court's opinion that "bristle[d] with hostility to all things religious in public life."

For similar reasons, in 2002, Chief Justice Rehnquist delivered the opinion of the Court upholding the Cleveland school district's policy of giving tuition aid to attend either public or private schools, including religious schools. He wrote: "where a government aid program is neutral with respect to religion, and provides assistance directly to a broad class of citizens, who, in turn, direct governmental aid to religious schools wholly as a result of their own genuine and independent private choice, the program" is constitutional. A program of "true private choice" is constitutional.

His commitment to judicial restraint was summed up in his dissent in *Texas* v. *Johnson* in 1989, when the Court held that state and federal laws prohibiting flag burning were unconstitutional. He filed a strong dissenting opinion, expressing his conviction that Congress and the states could constitutionally prohibit the public burning of the American flag because of its "unique position" as "the visible symbol embodying our Nation." He looked to "the Nation's history, legal traditions, and practices" as constraints on judicial decision-making.

Today, the Court needs new justices who will carry on Chief Justice Rehnquist's loyalty to the text and history of the Constitution, his skepticism of judicial power, and his devotion to constitutional self-government.



APPENDIX C

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Dame Cicely Saunders

The mother of modern hospice care passes on

Wesley J. Smith

Ralph Nader once mused to me about what a terrible thing it was that Jack Kevorkian was (at the time) the world's most famous doctor. He was right. That distinct honor should have belonged to Dame Cicely Saunders, the founder of the modern hospice movement who died last week at age 87 in London at St. Christopher's, the hospice she founded in 1967.

Dame Cicely, as she was known affectionately in England, was a nurse and devout Anglican who was working as a medical social worker in a London hospital in the years immediately following World War II. She met a Jewish immigrant, named David Tasma, who had escaped the Warsaw ghetto, only to lie dying in a London hospital at the age of 40. Tasma was alone in the world and Saunders made a special point to visit with him every day. Their friendship changed our world.

As Saunders and Tasma spoke of his impending death, she began to comprehend "what he needed—and what all of the other dying patients and their families needed." Saunders had an epiphany. She told me, "I realized that we needed not only better pain control but better overall care. People needed the space to be themselves. I coined the term 'total pain,' from my understanding that dying people have physical, spiritual, psychological, and social pain that must be treated. I have been working on that ever since."

Saunders's work was a "personal calling, underpinned by a powerful religious commitment," wrote David Clark, an English medical school professor of palliative care and Saunders's biographer, to whom she has entrusted the organization of her archives. So strong was Saunders's faith in what she perceived as her divine calling, she began volunteering as a nurse at homes for the dying after work. Urged on by her deep desire to help dying people, she went to medical school at the age of 33, this at a time when there were few women doctors.

Saunders focused her medical practice on helping dying people and alleviating pain. She obtained a fellowship in palliative research and began work in a hospice run by nuns, where pain control was unevenly applied, a nearly universal problem at the time, causing much unnecessary misery. Saunders conceived of putting patients on a regular pain control schedule, which, in her words, "was like waving a wand over the situation."

Believing firmly that "the St. Christopher's project [was] divinely guided and inspired," she became an activist, energetically raising money for the new project,

and in the process, raising the consciousness of the medical establishment. Saunders's initial idea was for St. Christopher's hospice to be a "sequestered religious community solely concerned with caring for the dying." But the idea soon expanded from a strictly religious vision into a broader secular application, in Clark's words, a "full-blown medical project acting in the world."

Saunders succeeded beyond even her own wildest hopes. St. Christopher's opened in a London suburb in 1967 and jump-started the modern hospice movement. "We started in-home care in 1969," Saunders said, "the majority of our work is out in the community." Saunders soon exported hospice to North America. In 1971, she sent one of her team doctors to New Haven, Connecticut, to help found the first modern hospice in the United States, from whence it spread nationwide.

As I ponder Dame Cicely's life, I reflect upon the death of my father in 1984. Dad fought the good fight against colon cancer for about two years until the day he was sitting on a hospital bed contemplating a bile drainage bag doctors inserted to prevent jaundice caused by a tumor blocking his bile duct. Dad looked at the bag taped to his inner thigh. He sighed deeply and his shoulders sagged and he looked up at me with an expression I had never seen before. That was it, I knew. Dad had made a momentous decision: his fight to stay alive was over.

As a society, we too often make dying a shameful thing, something unnatural to be hidden away in a dark corner. Mom and I were determined that wouldn't happen to Dad, that just because he was dying that did not mean his life was over. We shifted emphasis from cure and life prolongation, to comfort, dignity, and peace. That meant hospice, which then was still a relatively novel concept.

Dad benefited tremendously from hospice care. His last several months were peaceful, pain-free, and nurtured. He was cared for deeply by my mother and by dedicated hospice professionals. He would spend hours sitting on a bench in his back yard overlooking his beloved cactus garden, contemplating his life and the ultimate issues raised by human mortality. As an only child, I carried a heavy burden, not only in caring for my father, but also my mother, who was devastated by the depth of her pending loss. Hospice provided me with grief counseling—before Dad died—an invaluable aid in helping me help my folks. Dad died in a veteran's hospital hospice unit in Los Angeles, and with his passing he gave me an invaluable gift: my father taught me how to die with dignity, courage, and fortitude.

I also reflect upon Frank's death. Frank was my childhood best friend's father and my "second dad." In 1997, he also died of colon cancer. Unfortunately, unlike my father, it was difficult for his family to get his doctor to agree to hospice care, causing him much unnecessary suffering. But once admitted to hospice, Frank's life changed from one of intense pain and suffering, into a relaxed, peaceful, painfree ending. "Hospice was so wonderful." Frank's wife, Jean, recalled. "I will never forget the depth of care showed by the doctor and the nurses, particularly Jill, who came every day to visit. They showed Frank such *tremendous* compassion. It is hard to believe that there are people in the world who are so deep down compassionate to strangers. But there are. They are sincere and wonderful about it."

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Frank's last words to me, spoken quietly and with great dignity just three days before his passing, reflected the quality of care he received: "I am ready to die."

My good friend Julia died this last April 1, at the too early age of 50, from breast cancer. Julia had three young children and she was determined that they would always know that she didn't leave them easily. For nine years she fought with grit and determination against her spreading disease.

Julia's spirit was more than willing but finally, her body gave out. Julia received excellent hospice care for the remaining months of her life, during which time she remained a central figure in her family, her symptoms managed as she slowly weakened. She received such good care that she enjoyed a leisurely lunch with her husband Colin, my wife Debra, and me at a restaurant near her home a mere four days before she died.

There is a direct through-line of compassion and love from David Tasma in 1948, to my father in 1984, to Frank in 1997, and Julia in 2005, and now to Dame Cicely herself in 2005—to the millions of others who have benefited from hospice care since 1967. None of this would have happened had Cicely Saunders not come to the realization that dying isn't dead: It is living, and that means no one should be denied dignity, love, and inclusion as they pass through their final days. The good she did cannot be measured.

APPENDIX D

[Steven W. Mosher is the President of the Population Research Institute in Front Royal, VA (pri@pop.org). The following commentary appeared July 27, 2005 in the San Diego Union-Tribune and is reprinted with Mr. Mosher's permission.]

Population Control Kills

Steven W. Mosher

In 1994, in the run-up to the Cairo Conference on Population and Development, the U.S. National Academy of Science circulated a resolution openly calling for sustainable development—that is, slow or no economic growth—and global population control.

The African Academy of Science (AAS), rightly suspecting that sub-Saharan Africa would be the chief target of such a campaign, not only refused to sign, it issued a strongly worded dissent: "For Africa, population remains an important resource for development, without which the continent's natural resources will remain latent and unexploited." Africans value families and children, the AAS went on, seeing "marriage as important both for companionship and for procreation." Many of Africa's leading scientists had had first-hand experience with Western-funded fertility reduction programs, and wanted nothing further to do with them.

The population control movement was furious at this defection. Its leaders *knew*, with all the certainty of suicide bombers, that Africa already had too many people, not too few, as the AAS statement implied. The number of Africans had tripled over the past fifty years, and the continent was dangerously "overpopulated." Why did Africans have the shortest life spans, the highest rate of disease, and more often went to bed hungry than other peoples? Because there were simply *too many of them*, they answered.

But it was not intuitively obvious to those outside the movement that Africa had too many people. After all, the continent is more than twice the size of the United States and has only in recent years achieved the same population density. Nor could the controllers offer a workable demographic definition of "overpopulation" to defend their position—for the simple reason that no such definition exists.

Instead, the controllers attempted to justify their programs by conjuring up images of poverty-low incomes, poor health, unemployment, malnutrition, over-crowded housing—all of which, they claimed would be solved, or at least greatly ameliorated, by reducing the African birth rate.

The controllers were also offended by AAS' talk of "exploiting" Africa's abundant natural resources. This ran directly contrary to one of their cherished goals, namely, ensuring that as much of Africa remained as free of human footprints as possible. As one population control enthusiast put it to me at the time, "We have to make sure there is enough room for the elephants, the giraffes, and the hippos." He was not smiling.

The controllers had been blown into Africa and Asia by the population bomb

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hysteria of the late sixties, arriving with deep pockets and a grim-faced determination to rescue healthy human populations from the "crisis" caused by their own fertility.

Once on the ground, the controllers behaved exactly like the overbearing colonial administrators who had departed a handful of years before. They set out to change longstanding norms governing marriage and family size, ignoring objections from local leaders that this constituted cultural imperialism. They virtually took over the ministries of health in a number of countries, and succeeded in skewing health care in many others in an anti-natal direction. The importance of their salvific mission trumped all other considerations.

The predictable result has been repeated epidemics, the resurgence of malaria, and now one of the great pandemics of all time. Some 50 *million* Africans are infected with HIV/AIDS, nearly all of whom will be dead in a few years. "If we had devoted the personnel and resources spent on family planning to building up the primary health care system," commented an expert at an international HIV/AIDS conference in Nairobi, Kenya, a few years ago, "Perhaps we wouldn't have an AIDS epidemic today."

Medical personnel who are busy performing sterilizations and birth control pills cannot, at the same time, be administering vaccinations or giving lectures on basic hygiene. By undermining primary health care, population control has cost millions of lives.

The population controllers also work at cross purposes to the most important American foreign policy goal, that of promoting democracy in Africa and elsewhere. Encouraging governments to violate the rights of parents to decide for themselves the number of their children is a step towards dictatorship, not democracy. The rigorous family planning programs favored by the controllers are rarely popular, and need considerable government backing to succeed. Dictatorships, not surprisingly, are the controllers' best friends when it comes to passing laws governing family size or setting and enforcing targets for such things as sterilizations. Moreover, like China, they have little compunction about using force if need be.

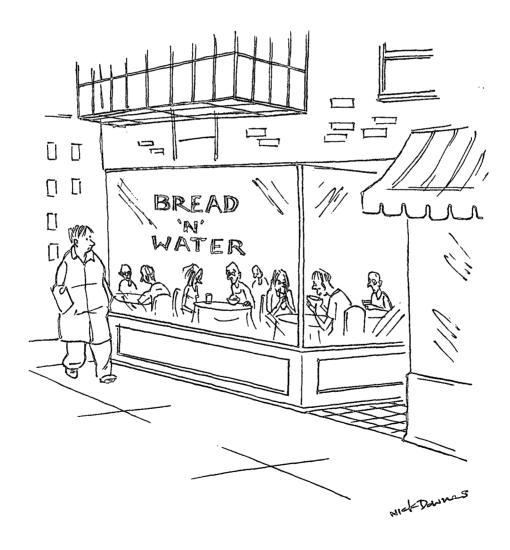
The use of coercion in family planning programs is not the exception, but the norm. The Population Research Institute has documented serious abuses in 41 different countries. Not all government-sponsored family planning programs are as coercive as China's, of course. But they are typically carried out by agents of the state, who in turn are driven by the need to fill quotas for sterilizations and targets for contraceptive "users." To understand how oppressive and intrusive such programs are, imagine how you would feel if someone from the Department of Health and Human Services showed up on your doorstep bearing injectable contraceptives, or an order to report for sterilization.

Moreover, these programs typically involve the indiscriminate provision of powerful, steroid-based contraceptives to women without a prior medical examination, absent informed consent, and without even cursory follow-up care. The former Secretary of the Kenyan Medical Association, Stephen Karanja, reports that "Some

of these contraceptives like Depo-Provera cause terrible side effects to the poor people in Kenya. Many are maimed for life."

African fertility is indeed falling—women whose mothers averaged seven or eight children are having four and five today. At the same time, the controllers have in many ways exacerbated the problems of disease and poverty that they came to cure.

But a still greater irony lurks behind their anti-natal efforts. By inhibiting Africa's political development, by siphoning money away from health and education, and by contributing directly and indirectly to the spread of disease, they may have actually delayed Africa's demographic transition. After all, development is the best "population control," as the dying peoples of Europe, Russia, and Japan can testify.



APPENDIX E

[Mary Ellen Synon writes from Ireland. The following column first appeared in Ireland on Sunday (August 14, 2005) and is reprinted with permission.]

Women want an informed choice? Here are the facts

Mary Ellen Synon

The Irish Family Planning Association, a pro-abortion pressure group, has started yet another campaign to bring abortion on demand to Ireland. Last week, two of their women, Catherine Forde and Ivana Bacik, were back on a platform, demanding "safe and legal abortion" and "women's right to choose."

"Ireland has changed!" they said. Ah yes, Ireland has changed! One almost felt nostalgic to hear it again. Those two earnest middle-aged ladies in suits were giving us the old youth-culture, free-love cry from the 1970s. This is the dawning of the Age of Aquarius and everything is different, Ireland has changed!

Well, yes, Ireland has changed. But the world outside has changed, too, and that appears to have gone unnoticed by the ladies. Forde, Bacik and the IFPA sound like they are back in the 70s with Starsky, Hutch and the red Torino. Or more precisely, back in 1973 with *Roe* v. *Wade*, the U.S. Supreme Court decision that introduced abortion on demand to America. The judges decided in favour of legalised abortion on the grounds that, "at this point in the development of man's knowledge," no one was in a position to speculate on when a life begins.

Well, 32 years later, any doctor or scientist now has more than enough knowledge to speculate on when a life begins. Indeed, many doctors and scientists are doing far more than just speculating. Many of them across the world are looking at what we now know about life in the womb and saying, "It is time to stop and think again about abortion."

Dr. Trevor Stammers, a senior tutor at St. George's University of London Hospital, told me last week, "I know of a number of colleagues who will not perform abortions any more, or who will not perform abortions above 12 weeks, because it is just so traumatic for them."

"Certainly the medical students that I teach at the moment are much less confident that the woman's right is the only issue than they would have been ten years ago."

Before I go into the techniques the abortionists use, and which many doctors now question—but which the IFPA are keen to see available in our hospitals and clinics—I do not want to hear any complaints that this kind of thing is too "distressing."

Ivana Bacik insists "We've got to recognise the reality." I am all for that, I am all for recognising the reality. Indeed, no argument is worth making if it is not based on the facts of existence.

And here are the facts: abortion is the killing of a living human by means of poison, chemical burning, dismemberment, a lethal injection to the heart, or in the case of partial birth abortion, which can be performed only on foetuses older than five months, by pulling his body feet-first two-thirds of the way out of the mother's

vaginal canal, then piercing his skull, scrambling his brain and crushing his skull before removal.

All of these procedures are carried out with the mother under anaesthetic but without anaesthetic for the individual in the womb.

When I asked the IFPA which abortion techniques they would not want introduced here, the spokesman replied that the only techniques they did not want are the ones that are "unsafe and/or illegal."

Since none of the above techniques is considered unsafe or illegal in America and Britain, they are clearly the ones the IFPA want here.

No doubt back in the Age of Aquarius all of those techniques would have seemed reasonable. But then, in 1970s, even the mullet haircut seemed reasonable. What do we know now about an individual's life in the womb that we did not know then?

An individual's heart begins to beat after 22 days of existence, by week three his spinal column and nervous system are shaping up, his brain waves are detectable at six weeks, at 12 weeks he has all the parts necessary to experience pain, and his vocal cords are complete.

At week 17 he has REM sleep, and even if he is born prematurely at 22 weeks, he has a chance of surviving and living for another 70 years. There is a lot more we know, but you get the drift. At any point in the womb after 22 weeks, he is mostly spending his time getting bigger, healthier and busier.

But is he alive? You betcha. Indeed, if you listen to abortionists you will occasionally get a hint of just how difficult it can be to kill the little fellow.

And before I tell you just how hard abortionists sometimes have to work to guarantee the delivery of a dead foetus instead of a breathing infant, let me say that if you think that all this is too gruesome for the public to hear about, then you are wrong.

The public are now content to sit in front of a television and watch every kind of blood-fest from boob implants on extreme makeover shows, to shots of bodies crisped to black in suicide bombings, to archive shots of Hiroshima A-bomb victims.

So do not imagine that the details of what goes on in abortion clinics ought not to be discussed. Women want to make "an informed choice" on abortion? Fine. Let them have the information, good and hard.

Return to the problems abortionists sometimes have making sure the undesirable foetus is dead. In the late abortion technique which uses prostaglandin, the drug causes powerful contractions of the womb which kill and expel the foetus.

Or are supposed to kill and expel the foetus. Sometimes he doesn't die. Abortionists can be left holding a living infant when they are being paid to dispose of a dead foetus.

So before giving the mother prostaglandin, the textbooks recommend that the abortionist inject a second drug, such as the poison urea, into the womb to ensure the foetus is killed before he is delivered.

Of course, in earlier abortions, the dead foetus is not expelled whole, but dismembered in the womb, then pulled out piece by piece.

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In one recent court case in America, in which abortionists were trying to overturn a law which sought to stop partial-birth abortion, the abortionists complained that the proposed law did not distinguish between "dismemberment procedures" (dilation and evacuation) and "extraction" (partial-birth abortion), so that the law could leave them in a difficult position because foetuses take some time to die in the womb even after their arms and legs are torn off.

Research by a team led by Dr. Shantala Vadeyar from St. Mary's Hospital in Manchester, and published recently in the *British Journal of Obstetrics and Gynaecology*, showed that dozens of infants have survived abortions even though they were younger than 24 weeks.

The study showed that some of the infants who initially survived abortions were only in the 18th week of pregnancy. More than half were under 22 weeks. Some were able to move around, breathe normally and even cry out. One survived for four and a half hours.

Imagine being the doctor who tries to poison a child to death in the womb, and yet finds the infant alive and moving in his hand.

Imagine being the mother who hears her child, who was happy and healthy in her womb only moments earlier, cry out and struggle for breath, perhaps for hours, before he succumbs to the death she ordered.

Or imagine this. There is a ghastly coincidence in the timing of the partial-birth abortion. The earliest at which the procedure can be performed, as I said, is at five months. That is just the moment at which, scientists now tell us, a child in the womb can recognise his mother's voice.

So what should a mother do, as a doctor is getting ready to kill her child in that way? Should she use her voice to soothe her child, maybe hum the Age of Aquarius as the foetus is turned in the womb, ready to have his feet pulled out and his death begin?

A dangerous thought. One would like to imagine there could come a reply, other lyrics from another song in the same musical: "Got my hair, got my head, got my brains, got my ears, got my nose, got my fingers, got my toes—I got my guts, I got my muscles, I got life!"

Though perhaps all that might be too much for a small fellow to hum with his first, and his last, breath.

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