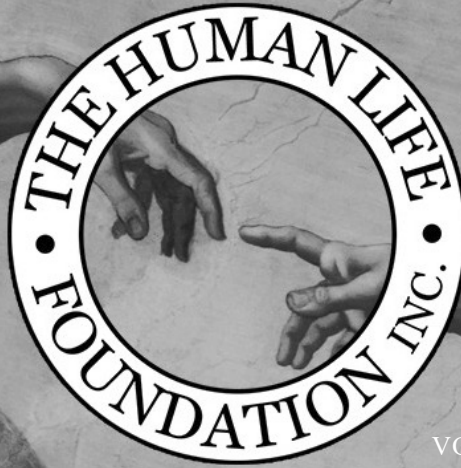


THE HUMAN LIFE REVIEW



VOLUME XLVIII No. 2 ♦ SPRING 2022

◆ FEATURED IN THIS ISSUE ◆

William Murchison on
LIFE AFTER *DOBBS*

Chuck Donovan on
RONALD REAGAN'S PRO-LIFE INFLUENCE ON AMERICA

Alexandra DeSanctis on
THE AMERICAN COLLEGE OF ABORTION ADVOCACY

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BIRTH CONTROL'S FAILED PROMISES

SILENT NO MORE: AN INTERVIEW WITH GEORGETTE FORNEY

Brian Caulfield on
CHRIS SLATTERY: LIFE IN THE FACE OF DEATH

Edward Short on
HENRY JAMES AND THE TIES OF FAMILY

David Quinn on
COVID IN IRELAND

Ellen Wilson Fielding on
PERAMBULATING IN MID-AIR?



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Booknotes: John Grondelski

From the Website: Jason Morgan • David Mills • Tara Jernigan • Diane Moriarty • W. Ross Blackburn

Appendices: Ronald Reagan • California Medical Association • Richard Stith
Seth Barron • John Hirschauer

ABOUT THIS ISSUE...

... Senior editor William Murchison, in our lead article, asks: “Could a post-*Roe* world be on the way?” The answer will be imminently clearer by the time this quarterly is in your hands—the Supreme Court’s decision in *Dobbs v. Jackson* is due by the end of June. Will *Roe* be overturned, or significantly crippled?

Meanwhile, this issue of the *Review* is an at-times wrenching testament to so much of what *Roe* has wrought over the past half-century—over 60 million abortions in the United States, with countless other lives forever damaged. And yet, you will also find here hope amidst the suffering. Georgette Forney, of the Silent No More Awareness Campaign, for example, speaks of the trauma of abortion, and the shame; yet she and the ministry she founded shine light into the darkness, offering healing and new life. The paradox of suffering and grace is also evident in Brian Caulfield’s moving profile of a pro-life warrior, Chris Slattery, now fighting for his own life, with courage and gratitude for opportunities he has been given.

The road to *Roe* was paved by the advent of the birth control pill, and, as our new contributor Grace Emily Stark writes, what it “overpromised and undelivered.” 60 years on, it is clear that what was touted as liberating for women has often had the opposite effect. The availability of the Pill enabled institutions—business, academia, medical research—to ignore challenges unique to women and focus on areas where woman can “be like men.” Abortion as a “solution” to failed birth control soon followed, and now abortion is, incredibly, “shouted” as an integral and positive right for women. On page 91, (Appendix C), we have a stunning illustration of what such a “right” really is. Rosemarie Tischer Stith’s sculpture, “Triumph,” depicts a woman with her fist raised in victory, yet, as her husband Richard Stith describes in his column, at what cost—“under her feet lies her vanquished baby.”

Thanks go to Richard Stith for permission to reprint his column; to *The American Mind* for permission for Seth Barron’s “The Cult of Abortion” (Appendix D), and to *The American Conservative* for permission to reprint John Hirschauer’s “She Buried Their Bodies” (Appendix E). Thanks as always to the cartoon genius of Nick Downes.

Keep an eye out for an upcoming book by contributor Alexandra DeSanctis, co-written with Ryan Anderson: *Tearing Us Apart: How Abortion Harms Everything and Solves Nothing*, due out in early summer from Regnery. Finally, I have a correction from our previous issue: In my review of *The Family Roe: An American Story*, we misspelled author Joshua Prager’s last name. Apologies to Mr. Prager! And congratulations on a book that Peggy Noonan (in the *Wall Street Journal*) called “stupendous, a masterwork of reporting . . . If you want to understand *Roe* more deeply before the coming decision, read it.”

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INTRODUCTION

Will a conservatively configured Supreme Court finally put a brake on “top-down enactments like *Roe*” that attempt to “cram great moral determinations down people’s throats”? That fateful decision, writes senior editor William Murchison, by “shielding pro-choice advocates from the need to give an account of their moral thinking,” paved the way for today’s widespread “culture of assertion,” in which those with differing viewpoints seek to overpower their opponents rather than persuade them. “Is it possible,” Murchison wonders in “Life after *Dobbs*,” that “somewhere down the line, though probably not without more shouting and roughness . . . we might recover somewhat our lost gift for moral discourse?” We will surely need it should the Court send the abortion question back to state legislatures, where there is already much shouting and roughness.

In “An Enduring Legacy: Ronald Reagan’s Pro-life Influence on America,” Chuck Donovan, who worked in the White House Correspondence Office during the Reagan years, reminds us that “unlike those who argue that abortion is a matter to be decided by the states,” the 40th president believed unborn children had “existing legal protection under the 14th Amendment.” (Might a Supreme Court justice or two agree?) While he directed his administration to implement pro-life policies, notes Donovan, Reagan himself used his command of the written word to sow the pro-life message: in scores of letters to private citizens, in national proclamations, and in the “unprecedented presidential essay” he wrote for this journal in 1983. (We reprint the ever relevant “Abortion and the Conscience of the Nation” in Appendix A.)

In that essay, Reagan cited a California medical journal editorial that—three years before *Roe*—predicted an emerging “quality of life” ethic would soon erode the foundation of Western bioethics. “Medicine’s role with respect to changing attitudes toward abortion,” the editors ventured, “may well be a prototype of what is to occur” (see Appendix B). No kidding. In “The American College of Abortion Advocacy,” *National Review* reporter Alexandra DeSanctis takes a hard look at “medicine’s role,” concluding that “the modern political movement pushing for legal abortion was led in large part by ideologically motivated doctors seeking to make it easier for them to perform elective abortions without facing legal consequences.” Indeed, adds DeSanctis, Harry Blackmun’s opinion in *Roe* “hardly mentions women’s rights and focuses instead on deferring to the judgment of doctors.”

The judgment of doctors is very much on Grace Emily Stark’s mind in “Overpromising and Underdelivering: Birth Control’s Failed Promises.” Stark—a fellow at the Center for Bioethics and Culture/Paul Ramsey Institute—writes that ever since the Pill passed FDA muster in 1960, “hormonal contraception has shaped both the healthcare system’s approach to women’s health and society’s treatment of women in the workforce.” The Pill, she argues, “made women’s bodies more like men’s,” and in doing so “burdened women with the expectation that they would

function like men.” In both higher education and the workplace, women have been accepted “as long as they played by the rules: Be like a man, don’t get pregnant—and if you do, make sure you ‘take care of it.’” Or in other words, get an abortion.

Georgette Forney has become a powerful voice for those who, like her, “take care of it” but then go on to suffer remorse. “Abortionists,” she tells us in the interview following Stark’s article, “are counting on women being silent so that no one will learn how badly they treat us, and how awful the procedure is.” In 2002, Forney went public with her remorse, standing alone on the steps of the Supreme Court after the March for Life, holding up a sign that read “I Regret Aborting My Baby.” Since then, she reports, her Silent No More Awareness Campaign has brought thousands of women—and men—together to share “their abortion testimonies,” including a substantial number who tell their stories every year on the steps of the Court.

For “more than 40 years,” writes Brian Caulfield in “Life in the Face of Death,” Chris Slattery, another pro-life leader, has cheerfully faced “lawsuits, fake clients, sting operations, financial hardship, gag orders, crippling fines, subpoenas, and harassment of every kind by rabid abortion advocates.” But today, the “determined, fearless, and unflinching” founder of the EMC Frontline Pregnancy Centers in New York “faces a diagnosis that puts his life dedicated to life in sharp perspective.” Slattery has cancer, Caulfield relates, “and doctors give him two to three years to live.” All who admire Slattery’s “tireless commitment” to baby-saving are praying along with him for an “extension.” As he tells Caulfield: “We have a lot more pro-life work to do.”

That is for sure. As we anticipate for the first time in decades at least a partial “win” in *Dobbs*, we must also acknowledge that a court ruling won’t restore what has been lost under *Roe*. Baby-killing is now a cult whose denizens proudly “shout” their abortions in public (see eye-opening columns by Richard Stith and Seth Barron in Appendix C and D). And previously unimaginable attacks on the traditional family are commonplace. “Those sworn to the progressive ideology,” writes Edward Short in “Henry James and the Ties of Family,” our next article, “even go so far as to insist that children denounce parents” who refuse to bow to that ideology’s “implacable gods.” But while “our more agitated neighbors seek to deliver up our unravelling social order to the direction of family-hating scolds,” our literary contributor invites readers to “find solace and sanctuary in the family-friendly Henry James,” whose short story “The Marriages,” he describes as “a witty, moving tribute to the potency of familial love.”

Progressivism’s “implacable gods” have been well-served by the pandemic. “Things did seem apocalyptic,” writes journalist David Quinn in “Covid in Ireland,” a kaleidoscopic account of how his country has fared since the first case “was confirmed on the island in late February 2020.” The government responded like the “bluest of blue states,” he reports, imposing “some of the longest lockdowns anywhere.” And “no other nation in Europe prevented public worship for a longer period.” But unlike in other European countries where clerics at least protested

INTRODUCTION

restrictions, “there was little pushback from church leaders of any denomination,” some of whom “seemed happy to become glorified health and safety officers.” It was, Quinn says, “an excellent opportunity for religious leaders to address big, ultimate issues,” but “for the most part they failed.”

Can big, ultimate issues even be seriously addressed after “several centuries of adulteration and dilution of Christian belief”? In our final essay—and it is a corker—senior editor Ellen Wilson Fielding observes that in her experience, “debates on life issues that could once be conducted across religious divides founder on materialist or individualistic or emotionally based ethics—or on someone’s unwillingness to ‘impose their beliefs’ on other people.” Are we capable, she asks, of “Perambulating in Mid-Air?” That is, can the “morally ‘evolved’ nations of the West, having jettisoned their Origin Story in favor of a myth of infinite progress,” survive for much longer, “unsupported philosophically and ethically by any real foundation of meaning”?

• • • • •

“Every time abortion intervenes,” writes John Grondelski, “a voice goes missing from the conversation.” In this edition of Booknotes, he reviews two books: *Survivor*, Claire Culwell’s “gripping” account of her life as an abortion survivor; and Steven A. Christie’s *Speaking for the Unborn*, a primer for rebutting pro-choice arguments—in 30 seconds. Both books, he says, are “intended to invigorate and arm proliferers in the ongoing abortion battle,” and both “merit a place on every proliferer’s bookshelf.” From the Website features thoughtful commentaries by Jason Morgan, David Mills, Tara Jernigan, Diane Moriarty, and W. Ross Blackburn. We close the issue with John Hirschauer’s “She Buried Their Bodies” (Appendix E), the story of Lauren Handy, a 21st-century Antigone who wants to see aborted unborn children in graves not incinerators. “Beneath the slogans and weasel words of the abortion debate,” Hirschauer writes, “is a human person. Burial is an affirmation of that most uncomfortable fact.”

ANNE CONLON
EDITOR

“

Life after *Dobbs*

William Murchison

After a life spent in daily journalism, I am coming to believe that you have to watch the little stuff in daily life in order to acquire some intellectual hold on the big stuff. Add up a lot of little stuff, after appropriate sorting, and you may arrive at a depiction, or foreshadowing, of something Important. Or not—that's true, too.

I observe all the same that the political/cultural ice floes imprisoning thought and activity in recent years are exhibiting fissures, giving off light popping noises.

Could a post-*Roe* world be on the way? How would any of us know such a thing? Could we have speculated about such a world two or three decades ago? It seems to me we can now. Indeed, ought to speculate, in a cheerier frame of mind than the moral deep freeze of the past five decades would have allowed, wherein it was usual to view respect for unborn life as an out-of-date obsession: not even worth the effort of discussing. So antique! So anti-woman!

I find, the longer I live, there is a human habit we should resist—that of believing that what goes on right now will keep going on, good or bad, just or unjust. That is not the nature of life as I understand it. I understand life as always on the move, never the same from day to day; sometimes better, sometimes worse. But always moving. We find there are pendulums and that those pendulums swing, according to their own momentum. We just have to wait.

I will try to walk through a few developments, taking in the scenery as we go.

If the U.S. Supreme Court—a prospect no one can or should take for granted—backs away a few steps at least from its past certainties about the meaning or non-meaning of human lives . . . if that happens, other things should happen. What kinds of things?

The *New York Times* gives me a hint. Wow! There, you might say, is the stretch of stretches. The *Times*?! In mid-March, the *Times* editorialized in favor of free speech! I'm talking about the *Times*, whose newsroom and management are famous lately for promoting progressive ideologies—e.g.,

William Murchison, a former syndicated columnist, is a senior editor of the *Human Life Review*. He will soon finish his book on moral restoration in our time.

the so-called 1619 Project—never mind the stupefaction of folk accustomed to the *Times*’s irritating but modest liberalism.

Times staffers in recent months have actually procured the silencing or firing of people—e.g., their own editorial page editor James Bennet—sufficiently open-minded to see non-progressive views as warranting discussion, so that some kind of consensus might emerge.

“America Has a Free Speech Problem,” the *Times*’s editorial headline declared on the first day of spring 2022. And, boy, you’ve helped cause it, not a few readers likely muttered.

“People,” the editorial said, “should be able to put forward viewpoints, ask questions and make mistakes and take unpopular but good-faith positions on issues that society is still working through—all without fearing cancellation. At the individual level, human beings cannot flourish without the confidence to take risks, pursue ideas that others might reject . . . Free speech demands a greater willingness to engage with ideas we dislike and greater self-restraint in the face of words that challenge and even upset us.”

Take a deep breath and leave that one to simmer. I lay on an adjacent burner a related datum—the mostly manufactured anger at Texas over its “bounty hunter” legislation, which took effect in September 2021, enabling private people to sue whoever aids or abets an abortion carried out beyond six weeks’ gestation. The law, allowed by the U.S. Supreme Court to stand for a while at least, is driving the Texas abortion trade into other states. Says Chelsea Tejada of the ACLU Reproductive Freedom Project: “Individuals with the means to take time off work, find childcare, and pay for transportation have made long journeys to clinics in other states in order to access abortion.” They put their money where their mouths were, instead of insisting on a rule everybody had to follow?

This was before other states took notice: e.g., Georgia, Missouri, Arizona, Alabama, Washington, whose legislatures awoke to the possibility of actually narrowing—narrowing, get that—the availability of operations that cut off human life at the threshold. Idaho’s governor signed into law on March 23 a Texas-style bill. A little variety of thought and imagination could be returning, for a spell, to the American moral experience. The big rule of thumb—easy, cost-free abortion—no longer looks so good. How about that? Divergence of thought and action. We haven’t seen that one around the neighborhood in some time.

Then look across the big pond—to Ukraine, where divergence of thought and imagination is the very last thing the evil empire of Darth Putin wishes to allow. (Cue the John Williams score.) Lord Putin will gladly squander as many Russian and Ukrainian lives as it takes to gratify his ambition of pouring into

a single mold, for purposes of melting together, all human qualities, however distinct, however ancient, however honorable or for that matter unlikeable.

What Lord Putin hadn't reckoned on was the emergence of a human attribute he thought no longer existed—human generosity, human kindness, actuated by the human desire to think and act freely, non-dependent on the holders of power. Nor had he reckoned on the roars of encouragement Ukraine's very, very moral stand would inspire around the world. "Shut up and smile," as a moral argument, shows signs of serious deterioration. A lot of people, both in our country and elsewhere, aren't taking this stuff anymore. They've had it. The surprise ascent of Volodymyr Zelensky to hero status hints at moral possibilities we have not hitherto glimpsed.

So. The three data sets I remark today—the little stuff of which I spoke at the start, though all the Russian war crimes committed against Ukraine can't be called little—warrant some wondering. Are various citizens of our nation and our world coming to understand and, finally, to appreciate the dimensions of what they hardly paid attention to before?

I confess not to know. How could I? How could anyone? I make bold all the same to suggest there are suggestions out there on public display as to how the world can work when it decides to work. The diversity of human understandings, and ideas about what to do, as well as what not to do, about that diversity could be coming into better focus. We are learning about the sterility and cruelty of the top-down approach: everybody over here; line up, listen up, shut up.

I think *Roe v. Wade* is among the foremost instances of that mindset; which is why *Roe v. Wade* may go noisily away, now or later, regardless of what a top-down judicial approach may seem to direct. The directives that Americans have received since January 22, 1973, without anything like unanimous acceptance, and now find more and more egregious, have not worked. Nor, as I think the *New York Times* is saying, have all the contemporaneous—ever hotter, ever snippier—attempts to shut down free discussion worked, in the *Times* newsroom and elsewhere. Neither is Lord Putin's attempt to make of Russian-Ukrainian culture a reflection pool for his dark, helmeted image working out so well.

I cannot but wonder. Is thought control, pursued by various means—a speaker shouted down, a bomb delivered to the roof of a maternity hospital, a court order imposed on doubters of its innate justice—starting to wear out its welcome as a means of ordering human life? Is it possible, somewhere down the line, though probably not without more shouting and roughness, that we might recover somewhat our lost gift for moral discourse, based on

respect for fellow humans?

How do you achieve respect, of that variety so unfashionable in our coercive, arm-twisting time? I am starting to see wariness with arm-twisting as a way of life when it so plainly doesn't work.

Take Texas and its "draconian," "bounty-hunter" abortion statute, as critics of the law like to call it.

The statute seems to me to indicate several realities of life. We have not given due thought to these realities as real. But they are becoming more and more visible, as is only right.

First, the futility of top-down enactments like *Roe*. Not just their hostility to moral understandings inappropriate for courts to legislate out of existence—certainly not without full debate and some resulting approach to resolution of grievances on all sides. You can't just cram great moral determinations down people's throats, à la the evil empire. When you try, you rend the fabric of civic comity into numerous tattered shreds.

Second, orders from on high send dissenters scrambling for relief. There was opposition to *Roe* on the day it came down. That opposition has never ceased. That is how it goes with moral matters. They cannot long be turned loose.

Third, long-approved constitutional forms invite not so much evasion as legitimate techniques of modification. The principle of subsidiarity that Americans long celebrated, with Alexis de Tocqueville's literary encouragement, and Burke's image of "the little platoons to which we belong," is the principle of local determination as to important matters. Those most intimately affected by great questions deserve a say in the way they are addressed. I would judge this as necessarily applying to those on both sides of the human life debate, for reasons I will shortly get to.

What Texas and California desire as to policy, whether on abortion, taxes, or fuel oil, may differ. That is not to say either of these governmental entities must be allowed to impose its viewpoint on the other. The genius of the federal system has always been, with important exceptions like war, to tolerate, if not encourage, varying approaches to problem-solution.

A post-*Roe* world might provide a federalist/subsidiarist approach to the annealing of differences over the sacredness of human life, defined by state boundaries. If the *New York Times* is picking nervously at its collar over the disappearance of respect for free speech, and if in Eastern Europe not even missiles can enforce the requirement of Correct Belief, an opportunity may be at hand. An opportunity for what? For the reawakening of what we used to call moral discourse, back when we had it.

Moral discourse went into hiding in the 20th century as the means of suppressing disagreement became more and more powerful. Shut up or we'll

shut you up! Shut up or we'll kill you! These and like admonitions have contributed mightily to the moral poverty amid which we live. Moral poverty denies the very existence of differing or countervailing viewpoints. Its long suit isn't Reason. It's Power. I (and the all-knowing) can sweep away opposition! We can rig the game.

The protection of unborn life as a duty? Who says so? Not we, respond the men—and the women—who show up for discussion armed with the fine print of a judicial edict. What is there to discuss? What is there to prove? What is there to sow discomfort if seven jurists speaking for the U.S. Supreme Court have taken care of all the relevant points?

Roe v. Wade, it has always seemed to me, by shielding pro-choice advocates from the need to give an account of their moral thinking, has led by progression of action to the shielding of many, many other modern folk from the same obligation. Ours has become a culture of assertion. We assert. That's it. No proof is necessary, just lung power and arrogance. Free speech in the Miltonian sense was never meant as a cover for ignorance and the desire to ram personal convictions down the throats of others, à la Putin.

A recent example: Some poseur of whom I had never heard before—a television personality, I gather—became moderately famous for calling the Constitution “trash” and, subsequently, accusing a U.S. senator of urging the murder of a nominee to the U.S. Supreme Court. You can still get away with this dangerous and subversive stuff in 2022, with the climate of coercion and cancellation covering us still.

And yet . . . and yet . . . consider those pop-up signs to which I allude—signs of possibly small reversals in the modern American way of doing moral business. May we not stare at them with, at the bare minimum, curiosity? Just a twinge of hope?

What this country needs isn't the good 5-cent cigar that Woodrow Wilson's vice president Tom Marshall so memorably suggested. What this country needs, a century after Wilson and Marshall and Cabot Lodge and William Borah, is an atmosphere friendly to civilized moral discourse, a thing out of style since the rise of the counterculture and its caterwaulings.

Moral discourse affords its participants equal rights. Let's hear what you've got to say. Then I'll tell you what I've got to say. And so on from there. We might discover—gasp!—that the matter we dispute has more corners and turnings, more puddles to be stepped over or valiantly waded through than ever we had supposed. Discoveries of this nature can sort of slow you down, make you allow degrees of latitude to the otherwise-minded, cause you to acknowledge it is a good thing rather than a bad to know others' minds.

Much of the pain of living in the early 21st century is the pain of knowing

it needful to scatter protective broken glass all around one's ideas and ideals, lest the media or the politicians come raging around, declaring you a jackass for aligning yourself with jackasses.

I do not see a too-much-maligned Texas abortion statute as the broad exit ramp from our tribulations over unborn human life. I see it as an experiment in the discovery of ways Americans on both sides of the abortion question can accommodate each other's expectations in the interest of, at the very least, civic peace. I see an experiment, however rough and untidy, as preferable to political guerrilla warfare: no one convincing anyone of anything. I see rough experimentation, if upheld practically and judicially, as the merest peek at a possible future in which the possibility of argument and conversion holds renewed place in our affairs.

"Conversion," I said. The best, most convincing moral arguments wheeled up to the front lines. Shown for the good they represent, the power they wield in human affairs. Would the morally informed human life presence in America shrink from such a challenge? I cannot myself imagine it.

An Enduring Legacy:

Ronald Reagan's Pro-Life Influence on America

Chuck Donovan

Recently, a friend referred to Ronald Reagan's years in office and, with the offhandedness of one who believes he is stating a generally accepted truth, said the president talked a great deal about abortion but "didn't do anything about it."

It's been more than three decades since I worked in the Reagan White House as Deputy Director of Presidential Correspondence; still, those words stung. I admit they hold a kernel of truth—justices Sandra Day O'Connor and Anthony Kennedy, both nominated to the Supreme Court by Reagan, failed to overrule *Roe v. Wade* and *Doe v. Bolton* when they had the opportunity to do so in *Planned Parenthood v. Casey*. Instead, they joined the majority that substantially reaffirmed *Roe* and *Doe*.

The toll of this tragic history has been unfathomable—more than 63.5 million human lives taken since 1973. But the truth is, Reagan shared the profound disappointment of pro-life advocates in the lack of progress made during his two terms. He rued that he was leaving office in 1989 with the Court's abortion decisions still in place. And he would rejoice that the Supreme Court today appears poised to right a wrong that has endured nearly as long as its 1896 ruling upholding the constitutionality of segregation (*Plessy v. Ferguson*, overturned in 1954 by *Brown v. Board of Education*).

But contrary to my friend's assertion, Reagan did much as president to proclaim and defend the sanctity of life, applying moral reasoning as well as conservative measures to questions of domestic and international policy. He was not only a Great Communicator but a tireless one. His White House press spokesman—the aptly named Larry Speakes—notes in his memoir a little-known fact about his boss:

He likes to write notes and personal letters in longhand, and he often sends checks to people in need, like a child who might need a kidney transplant or someone who is down on his luck. There are a lot of stories about his generosity that we don't know and probably never will. (*Speaking Out: Inside the Reagan White House*, page 113)

I can vouch for the accuracy of his observation, having seen hundreds of those longhand responses to personal pleas and policy concerns flow through the Reagan correspondence shop—which processed 8,000,000 letters a year.

Chuck Donovan is president of the Charlotte Lozier Institute.

In fact, it was a letter that had firmly bonded pro-life groups to Reagan in 1980. He was the heavy favorite that year for the GOP nomination, but campaign manager John Sears cautioned him to run “above the fray,” shunning the kind of fora and grassroots contact natural to Reagan. As his momentum faltered, March for Life leader Nellie J. Gray wrote to the campaign, urging Reagan to make his pro-life commitment explicit. In his letter responding to Gray he did just that: He would support a reversal of *Roe*, he wrote, and the restoration of a constitutional right to life.

After this, a team of pro-life lobbyists and leaders—including Phyllis Schlafly, Sen. Jesse Helms, gubernatorial candidate Guy Farley of Virginia, and Missouri’s Anne O’Donnell—marshaled forces to support Reagan’s bid for the nomination and secure a pro-life platform at the July 1980 convention in Detroit. It was no easy victory. Reagan’s rise had been resisted by the bulwarks of the GOP establishment; those who ran Gerald Ford’s campaign in 1976 had not been pleased with calls to amend the Constitution to reverse *Roe v. Wade*. Texas Sen. John Tower, chairman of the 1980 platform committee, and even some of Reagan’s own aides, at first resisted abortion-softening language offered by pro-life delegates. But in the end an expanded platform plank was adopted:

There can be no doubt that the question of abortion, despite the complex nature of its various issues, is ultimately concerned with equality of rights under the law. While we recognize differing views on this question among Americans in general—and in our own Party—we affirm our support of a constitutional amendment to restore protection of the right to life for unborn children. We also support the Congressional efforts to restrict the use of taxpayers’ dollars for abortion.

We protest the Supreme Court’s intrusion into the family structure through its denial of the parent’s obligation and right to guide their minor children.

Reagan won the 1980 election having received a major and timely push from pro-life voters, who also propelled dozens of new pro-life House and Senate members into office. Less than a decade after *Roe*, it appeared that Congress might be ready to pass a strong pro-life measure authorizing the states and Congress to protect the unborn. Reagan made clear, publicly and in meetings with key leaders, that he would sign into law a Human Life Statute as well as support the Hatch Human Life Amendment favored by some groups.

As Cynthia Gorney recounts in her detailed history of this intense period in the national debate (*Articles of Faith: A Frontline History of the Abortion Wars*), the pro-life movement splintered over which option to support, a statute or an amendment. During this time, it also broke with Reagan, albeit less visibly, over his nomination of O’Connor to the Supreme Court vacancy created by the retirement of Potter Stewart. Then-president of National Right to

Life Dr. Carolyn Gerster resolutely opposed O'Connor's pro-choice policy stance, which was well known in Arizona (where O'Connor had a long history of public service). This, along with dissension among pro-life leaders, frustrated the swift progress that right-to-life forces had expected to make in Reagan's first term.

The best account of Reagan's role during these years is found in historian Paul Kengor's book *God and Ronald Reagan: A Spiritual Life*. Kengor's *The Judge: William P. Clark, Ronald Reagan's Top Hand*, published two years later, fills out the story. According to Kengor, Reagan spoke and wrote early on about his regret—official biographer Edmund Morris described it as an “undeniable sense of guilt”—at having signed the Beilenson abortion legalization bill in 1967 when he was governor of California. During his two terms as president (1981-89), Reagan sought to advance the right to life in domestic and foreign policy alike. His administration implemented policies—upheld by the Supreme Court in 1991—that kept abortion out of the Title X federal family planning program. (Budgets submitted to Congress regularly attempted to defund Title X.) In 1984 Reagan launched the Mexico City policy, banning abortion funding in foreign aid programs and reinforcing America's commitment to respect the customary laws and policies of nations to which we give financial assistance.

In 1983, Reagan penned “Abortion and the Conscience of the Nation” to coincide with the 10th anniversary of *Roe v. Wade*. The unprecedented presidential essay, subsequently published as a book, was suggested by J.P. McFadden, associate publisher of *National Review* and founder of the *Human Life Review*, the intellectual quarterly that animates the efforts of pro-life scholars and writers to this day. Getting Reagan to agree to such a project was a long shot, but it was crucial for maintaining pro-life momentum at the highest level for the nation's leader to denounce the damage *Roe* continued to wreak on a good and generous country. “We cannot diminish the value of one category of human life,” the president wrote, “without diminishing the value of all human life.” Reagan appealed to the nation to recognize the pain inflicted on unborn babies by cruel abortion procedures; he also called for renewed support for the work of pregnancy-help centers, which now can be found in every corner of America. And he repeated these themes in annual proclamations declaring National Sanctity of Human Life Day, a practice observed by all of his pro-life successors.

I can attest that Reagan's private exchanges met or exceeded the high standard these public declarations set. When in early 1981 Anne Higgins, his Special Assistant and Director of Correspondence, asked me to join her

shop at the White House, I didn't hesitate to accept. (I did wonder, however, whether "answering the mail" would be an engaging role.) I had met Anne when she was a lobbyist for McFadden's Ad Hoc Committee in Defense of Life. I was 28, newly married, and working as Legislative Director for the National Right to Life Committee. I was also new to the Washington D.C. scene. Anne and her colleagues, John Mackey and his wife Connie, became my political mentors.

Anne knew, or intuited, something that most others did not: Ronald Reagan was not merely a Great Communicator of the spoken word but of the written word as well. While he enjoyed addressing big and exuberant crowds, he also sought intimate contact. His generation was accustomed to writing letters—to family, to confidants, to the public at large. The Correspondence shop at the White House therefore became a hub and direct conduit to the president. Policy responses, draft speeches, and other documents generally wound their way through several departments and signoffs before the president would see them. Not so with letters from the public. Whenever Anne or a member of her team came across a story or anecdote they thought would interest or entertain the president, she would send the letter, along with a note, to his personal secretary. So it was with the letter from eight-year-old Peter Sweeney, who wrote after the assassination attempt: "Dear Mr. President, I hope you get well quick—or you might have to make a speech in your pajamas." Reagan famously read Peter's letter aloud during his 1981 address to a joint session of Congress.

Throughout his presidency, Reagan treasured letters he received from the public. Anne sent a packet of 25 to 30 every Friday—the Weekly Sample—that he would read and respond to over the weekend. More than once on a Friday afternoon, word would come from Marine One that Reagan was waiting on this packet before leaving for Camp David. More than once he called Anne on a Monday morning to apologize for not responding to every writer, or maybe to discuss a topic brought up in one of the letters (such as the Shroud of Turin) that had piqued his interest. It really was the case that the American people had special access to him in this way. Naturally, given her own passion for life, Anne Higgins ensured that Reagan saw letters about abortion and other social issues—from citizens on both sides of the debate. More than anything else, the responses to these letters convinced me that Reagan's conviction concerning the inestimable value of human life was both profound and central to his worldview.

As Kengor describes him, Reagan was a religious man, a practical Christian, born to a Catholic father and evangelical mother. But his insights on

life issues were broadly humane. His opposition to abortion was grounded in common-sense observations that rejected pro-abortion evasions. On the eve of the 1982 March for Life, confronted by a reporter who challenged the strength of his anti-abortion stance, Reagan replied:

If you came upon an immobile body and you yourself could not determine whether it was dead or alive, I think that you would decide to consider it alive until somebody could prove it was dead. You wouldn't get a shovel and start covering it up. And I think we should do the same thing with regard to abortion.

In his October 1984 debate with Democratic presidential nominee Walter Mondale in Louisville, Kentucky, Reagan repeated an observation he had long made about the ability of Congress to interpret and carry out provisions of the Constitution:

With me, abortion is not a problem of religion, it's a problem of the Constitution. I believe that until and unless someone can establish that the unborn child is not a living human being, then that child is already protected by the Constitution, which guarantees life, liberty, and the pursuit of happiness to all of us.

In a "proclamation of personhood" issued on January 21, 1988, Reagan elaborated on this idea of existing constitutional protection under the 14th Amendment. Consciously echoing the words of the Emancipation Proclamation, the president wrote:

In legislation introduced at my request in the First Session of the 100th Congress, I have asked the Legislative branch to declare the "humanity of the unborn child and the compelling interest of the several states to protect the life of each person before birth." This duty to declare on so fundamental a matter falls to the Executive as well. By this Proclamation I hereby do so.

Thirty-four years later, Ronald Reagan's insistence that protection of unborn children is inherent in the Constitution may at last command a majority of the U.S. Supreme Court. Unlike those who argue that abortion is a matter to be decided by the states, Reagan contended for the idea that the unalienable rights with which we are endowed by our Creator are not gifts from the state but guarantees inscribed in our very humanity—that, as Lincoln said in 1858, "nothing stamped with the Divine image and likeness was sent into the world to be trodden on, and degraded, and imbruted by its fellows."

Reagan's gravesite memorial on the grounds of his Presidential Library in Simi Valley, California, bears this inscription: "I know in my heart that man is good, that what is right will always eventually triumph and there is purpose and worth to each and every life."

Today, while some elements of the GOP have wandered far from Reagan's governing philosophy, there is no doubt that the Party is pro-life.

President Trump wasn't a letter writer, and the advance of email and other social media have no doubt diminished the output of "men of letters." But Ronald Reagan's appeal to our nation's conscience is even more compelling—more urgent—than ever. And, in an irony of history, well beyond my ability to fathom, it is likely to be Donald Trump's—not Ronald Reagan's—judicial appointees who bring down the evil edifice of the 1973 abortion cases. God works in mysterious ways.



"You want that slice with or without the backstory?"

The American College of Abortion Advocacy

Alexandra DeSanctis

Proponents of legal abortion often couch their position in the language of female empowerment, claiming that abortion is necessary to protect women's freedom, equality, and opportunity. But while supporters often speak about abortion in terms of "women's rights" and remember it as a crusade of Second Wave feminists in the 1960s and 1970s, the modern abortion-rights movement did not originate entirely with the women's liberation movement.

The modern political movement pushing for legal abortion was led in large part by ideologically motivated doctors seeking to make it easier for them to perform elective abortions without facing legal consequences. Leading up to the Supreme Court decision in the 1973 case *Roe v. Wade*, which invented a constitutional right to abortion, a growing number of self-interested doctors coalesced around the goal of legal abortion. Before *Roe*, most states strictly prohibited elective abortion; however, rather than imposing criminal penalties on the pregnant women who obtained abortions, they punished the doctors who performed them.¹

Ignoring the growing scientific evidence that confirmed human life in the womb, a significant subset of doctors became a crucial force behind the campaign to legalize abortion. Though medical experts had yet to develop sophisticated ultrasound technology like that we have today, doctors were already well aware that the creature in the womb was a human being. Their studies, the biological evidence, and regular medical practice made it quite clear that this was the case. Nevertheless, elite medical groups, most notably the American College of Obstetricians and Gynecologists (ACOG)—supposedly a nonpartisan membership organization—rallied to the pro-abortion cause and used their influence to lobby the Supreme Court, especially Justice Harry Blackmun. It was not the case, to be sure, that most doctors in the United States wanted abortion to be legal. But an influential group of activist doctors in prominent leadership roles did. Since then, these actors and groups, including ACOG, have hardened their pro-abortion stance, at every turn lending their voices to the political movement supporting unlimited abortion on demand.

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ACOG didn't start out as a pro-abortion lobbying group, but as its leaders slowly became involved in the policy fight to legalize abortion, they made the group what it is today: one of the most powerful and prominent abortion advocates in the U.S. At several key points in the abortion debate, ACOG has used its status as a medical organization to lend a veneer of legitimacy to the pro-abortion cause, playing rhetorical games to disguise its extremism and offering politicians cover for their radical policies.

Today, supporters of abortion often use the phrase “reproductive health care,” a euphemism meant to suggest that this gruesome procedure has something to do with women's health. But rather than adhere to the standards of care typical of the rest of the health-care field, abortion providers use tools of healing as lethal weapons, and they often perform shoddy work that puts pregnant mothers at risk, too. At every turn, the abortion industry opposes regulations aimed at bringing their grisly work into line at least with the ethical obligations of informed consent and clinic safety. This state of affairs has obvious implications for medicine. How did a procedure that ends the life of an unborn human being—and sometimes harms the child's mother in the process—become regarded as standard medical practice? Why do major medical organizations insist that abortion is health care yet reject typical health-care regulations and safety standards?

This status quo can be better understood by studying the evolution of ACOG. In *Roe*, the leaders of ACOG used their influence as medical professionals to push the court to rule in favor of abortion, enabling the justices to argue that their decision was in line with the recommendation of doctors. Today, ACOG is one of the nation's foremost lobbying groups pushing for unlimited abortion on demand, under the guise of medical expertise.

But the organization wasn't founded to serve as an abortion-advocacy group. It was created as a nonpartisan professional organization to educate obstetricians and gynecologists. The group's decision to hide behind this model, while in fact becoming an advocate for unlimited abortion, illustrates how the abortion industry has been so successful at infiltrating the medical field and passing off abortion as health care.

ACOG Shifts to Advocacy of “Therapeutic” Abortion

Founded in 1951, ACOG initially handled the brewing abortion controversy by advising doctors to perform abortions only “where the death of the mother might reasonably be expected to result from natural causes, growing out of or aggravated by the pregnancy, unless the child is destroyed.”² ACOG affirmed, in other words, that elective abortions are unethical medical practice.

During ACOG's first decade, its leaders continued to insist that the effort to legalize elective abortion was a matter for social debate, not an issue that could be resolved by medical expertise, and thus that ACOG should not become involved in the particulars of the debate. But in the late 1960s, pro-abortion members of ACOG's leadership began slowly pushing for the organization to use its influence to lobby for legal abortion. Slowly, the group's leadership chose to redefine the words "health" and "therapeutic" as they relate to abortion, subtly ushering elective abortions under the umbrella of medical necessity.

In 1968, ACOG's Committee to Study Liberalization of the Laws Governing Therapeutic Abortion issued a report announcing that doctors could perform "therapeutic" abortions "when continuation of the pregnancy may threaten the life of the woman or seriously impair her health." Crucially, the report added: "In determining whether or not there is such risk to health, account may be taken of the patient's total environment, actual or reasonably foreseeable."³ This redefinition of "therapeutic" was broad enough to encompass any possible reason that a woman might seek an elective abortion, essentially sanctioning elective abortion by fiat, without consulting ACOG members, even when it was illegal in most states to perform elective abortions. The phrasing ACOG used in this report is uncannily similar to the wording used by the court in its 1973 ruling in *Roe's* companion case, *Doe v. Bolton*.

As an add-on to its opinion in *Roe*, the court in *Doe* created a workaround for abortion restrictions, demanding that any state law regulating abortion include an exception for "maternal health." But rather than limiting this to cases in which a woman's life was threatened, the court defined health expansively, allowing doctors to exercise their medical judgment "in the light of all factors—physical, emotional, psychological, familial, and the woman's age—relevant to the wellbeing of the patient. All these factors may relate to health."⁴ This rationale has made it nearly impossible for states to enact any significant or effective regulations on abortion, even the most modest of protections. The court's mandate evidently had its roots in the notion ACOG had begun to articulate: Doctors should be permitted to exercise their judgment about when abortion is necessary by accounting for a woman's health, defined broadly to cover nearly any reason a woman might say she "needs" an abortion.

ACOG's shift toward supporting elective abortion didn't end there. In 1971, the group's executive committee formally approved the decision of ACOG president Clyde Randall to sign an *amicus curiae* brief filed at the court in *Doe* by the pro-abortion James Madison Constitutional Law Institute.⁵ Randall

argued at the time that ACOG should take a formal stance in favor of legal abortion, writing in a report, “The termination of pregnancy is one of the few areas in which laws now dictate what the physician may or may not do in the care of his patient.”⁶

It is impossible to overstate the influence that pro-abortion medical professionals such as ACOG had as the justices deliberated on *Roe* and *Doe*. ACOG filed one of the most influential *amicus curiae* briefs in the case, signed by nearly 200 doctors, arguing that legal abortion was necessary to enable good medical practice.⁷ Several of the brief’s signatories were doctors at the Mayo Clinic in Minnesota, a move aimed at influencing Blackmun, who had served as general counsel at the Mayo Clinic in the 1950s, prior to becoming a federal judge.

In their brief, the doctors argued that the Texas ban on abortion at stake in *Roe* “interferes with a physician’s practice of medicine by substituting the mandate of a vague legalism for the doctor’s best professional judgment as to the medically indicated treatment for his pregnant patients.” The brief went on to complain that “physicians treating pregnant women run the risk of criminal charges as the result of their professional decisions.”⁸ The argument, in other words, was that abortion bans are antithetical to good medicine—a compelling claim coming from elite doctors.

ACOG stated that the group opposed the abortion laws at issue because they allowed abortions only to save the life of the mother, which ACOG claimed was “unconstitutionally vague.”⁹ The brief offered an expansive definition of the so-called “life of the mother” consideration, arguing that “life may mean the vitality, the joy, the spirit of existence, as well as merely not dying,” meant to intimate that abortion could be necessary for a woman’s life in some sense other than immediate physical danger. The brief insisted that decisions about whether abortion was medically necessary—even under this new, expansive definition—should be left to physicians alone.

Hiding their political advocacy behind the veneer of medical expertise, these supposedly unbiased professionals told the court that abortion bans inhibited them from exercising their best judgment as to whether abortion was medically necessary in any given instance. That argument worked. Both the ACOG brief and policy advice from the American Medical Association—which likewise had begun endorsing relaxed abortion laws—appeared to have significantly influenced Blackmun’s thinking.

The opinion Blackmun wrote on behalf of the seven-justice majority in *Roe* hardly mentions women’s rights and focuses instead on deferring to the judgment of doctors: “For the period of pregnancy prior to this ‘compelling’ point [the end of the first trimester], the attending physician, in consultation

with his patient, is free to determine, without regulation by the State, that, in his medical judgment, the patient's pregnancy should be terminated," he wrote.¹⁰ Blackmun also cited the AMA's 1970 declaration holding that "the Principles of Medical Ethics of the AMA do not prohibit a physician from performing an abortion that is performed in accordance with good medical practice and under circumstances that do not violate the laws of the community in which he practices."¹¹

The influence of these doctors on the outcome in *Roe* is especially clear if you contrast the ruling with the court's 1992 ruling in *Planned Parenthood v. Casey*. In *Roe*, Blackmun grounded his rationale in large part on trusting physicians to decide whether abortion is necessary—so much so that feminists and scholars have criticized *Roe* for emphasizing the role of doctors to the exclusion of female autonomy.¹² Even Supreme Court justice Ruth Bader Ginsburg criticized *Roe* on those grounds: The decision, she said, was based on "the woman in consultation with her doctor. So the view you get is the tall doctor and the little woman who needs him."¹³ *Roe* created a right to abortion, but in Blackmun's telling, that right functioned more to protect doctors in their practice of medicine than to let women do as they pleased.

"The decision vindicates the right of the physician to administer medical treatment according to his professional judgment up to the points where important state interests provide compelling justifications for intervention," Blackmun wrote in *Roe*. "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."¹⁴

Casey, by contrast, places women at the center of its logic and grounds the right to abortion in liberty and autonomy, so much so that the role of the doctor in abortion—the fact that abortion even involves a doctor—all but vanishes. In *Casey*, the Court's reasoning essentially removes the abortion right from the context of a doctor's judgment and transforms it into an issue of female freedom and equality.

ACOG as Abortion Cheerleader after *Roe* and *Doe*

With its involvement in *Roe* and *Doe* on behalf of the legalization of abortion, ACOG had begun its steady march toward what it is today: an abortion-advocacy organization. Since first placing its thumb on the scale in 1971, ACOG has weighed in on abortion policy at every turn to insist that restrictions are incompatible with good medicine. In more than a dozen Supreme Court cases, ACOG has filed *amicus* briefs advocating the least restrictive possible stance on abortion, and the court has cited ACOG's contributions as representative of medical standards.¹⁵ In two of the most recent cases,

Whole Woman's Health v. Hellerstedt and *June Medical Services v. Russo*, ACOG argued against admitting-privileges requirements for abortion clinics—even though these requirements apply to all other forms of ambulatory surgical centers and even though ACOG's own guidance states that direct patient handoff can reduce the incidence of medical errors.¹⁶ ACOG's position on medical standards for abortion, in other words, has always stood in stark contrast to accepted medical standards and best practice for all circumstances other than abortion.

In 1996, when Congress was considering legislation to ban “intact dilation and extraction” abortions—otherwise known as partial-birth abortions—ACOG prepared a statement admitting that the group “could identify no circumstances under which this procedure . . . would be the only option to save the life or preserve the health of the woman.”¹⁷ But after collaborating with the staff of President Bill Clinton—who was preparing to veto the partial-birth ban, and who later did so twice—ACOG added this blatantly political modification: “An intact D+X, however, may be the best or most appropriate procedure in a particular circumstance to save the life or preserve the health of a woman, and a doctor should be allowed to make this determination.”¹⁸ This assertion was later quoted by the Supreme Court in *Stenberg v. Carhart* in defense of its decision invalidating Nebraska's ban on partial-birth abortion.¹⁹

In 2007, ACOG issued an ethics statement suggesting that OB-GYNs should either perform abortions or refer women elsewhere to obtain one, a move that nearly led to doctors losing their board certification if they objected.²⁰ In 2010, ACOG formed the American *Congress* of Obstetricians and Gynecologists, an affiliated lobbying organization that exists solely to advocate unlimited abortion on demand under the guise of medical expertise. All ACOG members are required to finance this group through their dues, even if they express their opposition to abortion.²¹

The evolution of ACOG from a nonpartisan medical group into an abortion cheerleader illustrates how, both before and after *Roe*, a critical mass of the elite medical community began to coalesce around more and more liberal abortion laws, pretending that such a position was medically necessary. This still has political ramifications today. In addition to its influence on the high court, ACOG plays an important role as a supposedly neutral source for biased reporters covering abortion.

In the debate over pro-life heartbeat bills—which prohibit abortion after a fetal heartbeat can be detected, usually at about six weeks' gestation—some outlets have refused to use the phrase “fetal heartbeat,” instead citing ACOG guidance that attempts to diminish the reality of the unborn child's developing heart. *The Guardian*, for instance, updated its style guide in

2019 to replace the phrase “heartbeat bill” with “six-week abortion ban,” citing ACOG on the point, which says that it “does not use the term ‘heartbeat’ to describe these legislative bans on abortion because it is misleading language, out of step with the anatomical and clinical realities of that stage of pregnancy.”²²

ACOG’s transformation from a nonpartisan network of doctors into a pro-abortion lobbying group shows how abortion has corrupted otherwise legitimate institutions, thereby altering the terms of public debate. The organization has retained its name and, in most circles, its reputation, but it consistently advocates policies that contradict the oath calling on doctors to do no harm. That ACOG is now among the country’s premier abortion lobbyists captures the great extent to which the political movement for legal abortion was not first and foremost a goal of women’s liberation but an objective brought about by the profit-driven self-interest of medical professionals.

NOTES

1. NR Symposium, “One Untrue Thing,” National Review Online, August 1, 2007, <https://www.nationalreview.com/2007/08/one-untrue-thing-nro-symposium/>.
2. Nancy Aries, “The American College of Obstetricians and Gynecologists and the Evolution of Abortion Policy, 1951-1973: The Politics of Science,” *American Journal of Public Health* 93, no. 11 (2003): 1812.
3. ACOG, Item 6.39 Report of the Committee to Study Liberalization of the Laws Governing Therapeutic Abortion: Transcript of Executive Board Meeting, 9 May 1968:4.
4. *Doe*, 410 U.S. at 192.
5. Aries, “The American College of Obstetricians and Gynecologists and the Evolution of Abortion Policy,” 1817.
6. *Ibid.*
7. Brief of the American College of Obstetricians and Gynecologists, et al., as Amici Curiae for Petitioners, *Roe v. Wade*, 410 U.S. 113 (1973).
8. *Ibid.*
9. Brief of the American College of Obstetricians and Gynecologists for Petitioners, *Roe*, 410 U.S. 113 (1973).
10. *Roe*, 410 U.S. at 163.
11. *Roe*, 410 U.S. at 143-44, nn.38-9.
12. See Katie L. Gibson, “The Rhetoric of *Roe v. Wade*: When the (Male) Doctor Knows Best,” *Southern Communication Journal* 73, no. 4 (2008): 312-31. <https://www.tandfonline.com/doi/abs/10.1080/10417940802418825>.
13. Robert Barnes, “The Forgotten History of Justice Ginsburg’s Criticism of *Roe v. Wade*,” the *Washington Post*, March 2, 2016, https://www.washingtonpost.com/politics/courts_law/the-forgotten-history-of-justice-ginsburgs-criticism-of-roe-v-wade/2016/03/01/9ba0ea2e-dfe8-11e5-9c36-e1902f6b6571_story.html.
14. *Roe*, 410 U.S. at 165.
15. See Brief of American Association of Pro-Life Obstetricians and Gynecologists as Amicus Curiae for Petitioners, *Dobbs v. Jackson Women’s Health Organization* (2021).
16. Committee on Patient Safety and Quality Improvement, “Communication Strategies for Patient Handoffs,” *Obstetrics & Gynecology* 119, no. 2 (2012): 408. https://journals.lww.com/greenjournal/Citation/2012/02000/Committee_Opinion_No_517_Communication.50.aspx.
17. Senator Dianne Feinstein (CA), “Partial Birth Abortion Ban-Act of 1999,” *Congressional Record* 145 (1999): 26371. <https://www.govinfo.gov/content/pkg/CRECB-1999-pt18/html/CRECB-1999->

pt18-Pg26366-8.htm.

18. Yuval Levin, "The War on Science," National Review Online, June 29, 2010, available at: <https://www.nationalreview.com/corner/war-scienceyuval-levin/>.

19. *Stenberg v. Carhart*, 530 U.S. 914, 932-35 (2000).

20. See ACOG Committee on Ethics, "The Limits of Conscientious Refusal in Reproductive Medicine," ACOG Committee Opinion No. 385 (2007). <https://www.acog.org/clinical/clinical-guidance/committee-opinion/articles/2007/11/the-limits-of-conscientious-refusal-in-reproductive-medicine>.

21. Christina Francis, "The OB-GYNs Who Play Politics With Women's Lives," *Wall Street Journal*, March 3, 2020, <https://www.wsj.com/articles/the-ob-gyns-who-play-politics-with-womens-lives-11583279360>.

22. Jessica Glenza, "Doctors' organization: calling abortion bans 'fetal heartbeat bills' is misleading," *The Guardian*, June 5, 2019, <https://www.theguardian.com/world/2019/jun/05/abortion-doctors-fetal-heartbeat-bills-language-misleading>.



Overpromising and Underdelivering: **Birth Control's Failed Promises**

Grace Emily Stark

One milestone missed amid the chaos of those first pandemic months of 2020 was the sixtieth anniversary of the FDA's approval of the world's first contraceptive pill, Enovid. Lauded from the beginning as a "liberator" of women that would free them from unwanted pregnancies, "the Pill" is considered one of the major factors contributing to women's surge into the workforce and institutions of higher education in the 1960s, '70s, and '80s. With the arrival of "the Pill," it seemed that women, too, had arrived.

And not just because they now felt in control of conception. The Pill has also long been prescribed as a panacea for nearly every health issue related to the female menstrual cycle. In fact, although Enovid was developed specifically as a contraceptive, it was originally approved by the FDA in 1957 for "gynecological and menstrual disorders"; in clinical trials it had proved effective at suppressing the symptoms of certain gynecological disorders, such as heavy menstrual bleeding, pain, and cycle irregularity, and it could not yet legally be advertised as a contraceptive. However, the "contraceptive activity" of Enovid was already so well-known that, by the time the Pill was approved for explicitly contraceptive purposes in 1960 (well before the 1965 ruling in *Griswold v. Connecticut* effectively legalized contraception nationwide), half-a-million American women were already taking it.

Now, the perspective of sixty-plus years allows us to see how hormonal contraception has shaped both the healthcare system's approach to women's health and society's treatment of women in the workforce. From the vantage point of 2022, it is clear that freedom from one's fertility and suppression of one's menstrual symptoms have come with two clear costs: an expectation that women accommodate themselves to the male-normative workforce, and a dearth of effective options to treat the root causes of gynecological and menstrual issues that plague millions of women around the world. In short, the pill has overpromised and underdelivered concerning the dual goals of improving women's health and meaningfully expanding women's economic opportunities.

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Birth Control's Effects on Healthcare and Women's Health Research

Although the Pill's original 1957 FDA approval for the market was a disingenuous "soft launch" of sorts, intended to gauge women's interest in taking a daily medication for something other than a therapeutic purpose, it did seem to free many women from the painful, heavy, debilitating periods that since time immemorial were for some part and parcel of "being a woman." Today, the Pill and other forms of hormonal contraception are still used, often off-label, to manage the symptoms of gynecological issues such as endometriosis, polycystic ovary syndrome (PCOS), and uterine fibroids, and more generally, to "regulate" a woman's cycle.

In truth, Enovid and every iteration of hormonal birth control developed since has worked both to prevent pregnancy *and* suppress the symptoms of gynecological disorders, precisely because they *override* a woman's natural cycle of fertility with synthetic hormones—namely, synthetic estrogen and synthetic progesterone, known as progestin.

A woman on hormonal contraception, whether it is a combined oral contraceptive, a progestin-only oral contraceptive, an implant, an injection, or a hormonal IUD, does not experience the natural monthly ebb and flow of endogenous estrogen and progesterone that is responsible for ovulation; the synthetic hormones found in birth control suppress it. Because these women do not ovulate, they do not menstruate, and therefore they do not experience symptoms like pain or heavy periods associated with certain disorders of the menstrual cycle.

In fact, some have argued that the Pill has worked a little too well in that regard, drawing attention and funding away from the research needed to find better ways to treat the root causes of the menstrual and gynecological disorders that plague millions of women all over the world. Despite being fairly common and causing a markedly decreased quality of life, including lost time at school and work because of symptoms like severe pain and heavy bleeding, menstrual disorders like endometriosis, PCOS, and uterine fibroids are virtual orphans in the health science and drug research industries. It can take the better part of a decade or more to accurately diagnose these conditions, in part because it is so easy to put a teenager or young woman on the Pill at the first sign of menstrual irregularity, and send her on her way without further investigation into the root cause of her symptoms.

As effective as hormonal contraceptives can be at masking the symptoms of menstrual issues, because they do not treat the root causes of those issues, these symptoms may return with a vengeance if a woman comes off birth control for some reason, whether to have a baby or because side effects have become

intolerable. Discontinuation of birth control use is, in fact, quite common, since some of the side effects can be as disruptive as the issues these drugs purport to treat, and some are serious enough to cause death. Among the evidence-based risks and side effects of birth control are increased risk of blood clots (and through these, increased risk of heart attack and stroke); increased risk of certain cancers (chiefly breast and cervical cancers); increased risk of depression, anxiety, and suicide; loss of libido; osteoporosis and bone fractures; weight gain; irritable bowel syndrome; and increased risk of developing certain autoimmune disorders.

The mechanisms behind some of these effects are well-known, but the risks are often downplayed in statistical analyses and in public health policy decision-making. Still, sixty years after the Pill's FDA approval, researchers have barely begun to scratch the surface of the myriad ways the synthetic hormones used in contraception affect women's bodies. Likewise, we are just beginning to understand the significant role that endogenous sex hormones play in the proper functioning of the female body's major systems and how hormonal contraception interrupts their functioning. It's therefore unsurprising that hormonal contraception has been found to prevent the following: proper development of bone density during the years of adolescence and early adulthood, proper maturation of cervical tissue, development of certain parts of the brain, and maturation of breast tissue, to name just a few of the bodily processes suppressed or interrupted by these synthetic hormones.

As more becomes known about how the Pill works within the female body (and, simultaneously, the importance of natural, healthy cycles for female health and development), many women have begun to question whether hormonal contraception is the "miracle pill" it was promised to be. Likewise, more women are beginning to question the irony of a drug that supposedly "liberates" them by suppressing such a defining, vital aspect of their womanhood.

Birth Control and Women's Role in Education and the Workforce

It is clear that the existence of a reliable option for pregnancy prevention, particularly among married women in the 1960s and '70s, played a role in prompting women to pursue higher education and to enter the workforce at higher rates than ever before—and for businesses to eagerly accept them into these spaces. What deserves questioning is the *nature* of the role the Pill played, because it had serious ramifications for how women were treated in higher education and in the workplace that continue to this day.

To put it simply, hormonal contraception made women's bodies more like men's. In doing so, it burdened women with the expectation that they would function like men in the workplace and in higher education.

No longer cycling and mostly protected against an unplanned pregnancy, a woman on birth control could enter a program of higher education or embark on a career path reasonably confident that her fertility wouldn't cause an unforeseen deviation from her plans. And because birth control typically rendered women's bodies incapable of becoming pregnant (thereby increasing their similarity to the normative, male body of the workforce and education sectors), its use also made women more acceptable to leaders of previously male-centered spaces.

As I have written at *Verily Magazine* in discussing the lack of clinical research on pregnant, breastfeeding, and menstruating women, "Bodies that do not have a monthly cycle and cannot become impregnated are easier for science to study, easier to rely upon in the workplace, and so on, with the result being that bodies that menstruate, ovulate, and carry life are often left . . . to fend for themselves." With the advent of hormonal contraception and legalized abortion, everything that was "problematic" or "unreliable" about a woman's body—namely, that it menstruated and could become pregnant, and (because of hormonal cycling) could also experience greater fluctuations in professional productivity—could finally be rectified and controlled.

This came with a cost. With widespread use of hormonal contraception and legalized abortion, pregnancy and motherhood became a lifestyle choice, rather than something that, especially in the case of married women, could be expected to naturally occur. Is it any wonder, then, that women are still fighting for fair maternity leave policies in the workplace, let alone *paid* maternity leave?

And while the pandemic accelerated the acceptance of flex work and working from home (advancements that at first seemed to make it easier for mothers to continue working), it also caused mothers to exit the workforce en masse, as the boundaries between work and home life evaporated, making it impossible for mothers to be as productive in their work while caring for and schooling children, who suddenly found themselves home full-time. In fact, the pandemic has laid bare how little support there is for working parents—and especially for working mothers. While working mothers with college degrees and greater resources could sometimes choose to step away from work during the pandemic (although this may not have felt like much of a "choice"), many poorer, less educated women were fired for being "unreliable" because they lacked childcare. One such woman related in the *Washington Post* that she was denied jobs throughout the pandemic because, as her would-be employers told her, "'you are a mom and you're going to miss work.'"

Has widespread use of birth control—especially birth control directed at and controlled by women, ostensibly identifying them as the only party responsible

for family planning decisions—made our society less understanding, less compassionate toward working mothers? It would seem so. After all, with the ample selection of drugs, devices, and procedures available to women to prevent conception and birth, becoming a mother is largely seen as an intentional choice.

Sadly, this lack of compassion extends to women even before they enter the workforce. Several years ago, ESPN uncovered instances of college athletes threatened with the loss of scholarships when they became unexpectedly pregnant and therefore unable to compete athletically. Many of these athletes felt pressured into choosing abortion to prevent the loss of the scholarships they needed to finance their college education. The ESPN investigation does not mention whether they discovered similar pressures exerted on male college athletes who fathered children while on scholarship.

On that note, hormonal contraception has also handed women the same “life script” that men are given in order to achieve success. By this, I mean the belief that upon graduating high school, a woman must enter higher education and then immediately enter the workforce or graduate education, spending the next several years building up a career before considering starting a family.

This is antithetical to how female fertility works; a woman is in the prime of her childbearing potential during her early- and mid-twenties. This is also the time of life when pregnancy health outcomes for both mother and child are best. But a woman who takes time off from the workforce during the early years following college graduation, when she is expected to be “growing her career,” is often professionally penalized for doing so. This hiatus from educational or professional work to have a family during the most biologically opportune time does not fit neatly on a resume. It is a particularly cruel catch-22 for women: If they *do* take time off as young women to raise families, they often face many obstacles to returning to the workforce later on; however, if they wait to start their families in their late thirties and early forties after first establishing a career, they may find themselves unable to conceive, or unable to have as many children as they would like.

We know that becoming pregnant and giving birth does not have to derail an education or a career—we currently have a Supreme Court justice who is a mother to seven, and Olympic athletes who have gone on to win gold *after* becoming mothers. Yet, on the whole, women are still fighting for the things that make working motherhood possible for the average woman: flexible work, reasonable childcare costs, paid maternity (and paternity) leave, the acceptance of resume gaps, and safe, high-quality schools that remain open,

instead of throwing families with working parents into chaos by shutting down or sending children home to self-isolate whenever a positive Covid case appears in the classroom or childcare center.

What has become painfully clear over the course of the pandemic is that birth control (and its backup, abortion) did not change the *workplace* to better fit women, but rather changed *women* to fit the workplace. In other words, accommodating *mothers* was never part of the script for equal-opportunity workplaces. Women would be allowed to enter higher education en masse and compete for all levels of workplace achievement as long as they played by the rules: Be like a man, don't get pregnant—and if you do, make sure you “take care of it.”

And women are the worse for it. In what has been called the “paradox of declining female happiness,” women's happiness and sense of well-being have eroded over the last handful of decades, even as objective measures of quality of life have improved. Looked at another way, the economic and educational opportunity gains made in lockstep with the advent of widespread birth control use seem to have done little to contribute to women's happiness. Emblematic of this phenomenon is the fact that, on the whole, Western women are bearing fewer children, while simultaneously reporting that they would *like* to have more children. There is also the possibility that birth control itself may be robbing women of their ability to enjoy life: In her book, *This Is Your Brain on Birth Control*, Dr. Sarah E Hill details the data behind the effects of birth control on women's brains, including anecdotal stories of how hormonal birth control puts some women in a “fog,” causing them to lose their “drive,” and their ability to “see life in color” (an effect that she herself experienced on birth control, only realizing it after she stopped using the Pill and noticed the difference in her own mental and emotional health).

Ironically, side effects like these can actually keep women out of school and the workforce. Consider, for example, the school and work hours lost to depression and anxiety associated with the use of hormonal contraception (the risks of which are well-documented)—not to mention other side effects and risks like pain and prolonged, heavy bleeding (common on the copper IUD), or even more seriously, breast cancer and strokes. While many credit birth control with keeping girls in school and bringing women into the workforce, these adverse effects (including the changes hormonal birth control causes in the structure and function of certain parts of women's brains, which makes them operate more like men's brains) compel us to consider what uniquely feminine perspectives we may be missing in these spaces because of hormonal birth control.

Women Deserve Better than Birth Control

Imagine a world where workplaces and institutions of higher education had to adjust to the reality of women getting pregnant, rather than the other way around. A world where women not only had meaningful opportunities to enter the workforce and higher education, but could enter them on their own terms. Perhaps women wouldn't delay childbearing for so long, and would have more children, relieving the United States and other Western countries from our clear demographic decline.

Perhaps, in such a world, young women would receive real help for their menstrual-cycle problems sooner, from restorative reproductive medical professionals seeking to treat the root causes of those issues, instead of entangling their patients in the vicious cycle of birth control symptoms and the antidepressants so often prescribed to mitigate them. Perhaps women who found themselves unexpectedly pregnant would keep their babies instead of aborting them out of the fear of losing their ability to earn a living. Perhaps women in college who became pregnant wouldn't believe the lie that they can't achieve greatness, whether in a sport or in a career, with a child. Maybe employers would offer insurance policies that would cover restorative reproductive medicine, instead of just birth control, egg freezing, and in vitro fertilization, as an enticement to female workers.

A world that makes space for women *to be women* is one in which women are empowered, families are valued, and children are better protected and provided for. To paraphrase both Pope Francis and the late Supreme Court Justice Ruth Bader Ginsburg, such a world would make it possible for women and their authentic, unadulterated feminine genius to be present wherever important decisions were being made. That is the world I want for my daughters. That is a world worth striving for.

“Silent No More”:

An Interview with Georgette Forney

If you’ve attended the annual March for Life in Washington, D.C., you’ve probably seen Georgette Forney and her Silent No More Awareness Campaign. Forney’s group organizes the powerful testimonies about abortion that are delivered each year by women (and men) on the steps of the U.S. Supreme Court—where the March ends. In 2001, Forney watched the post-March television coverage: 20 seconds of clips of marchers followed by two full minutes of interviews with a handful of women at the Supreme Court defending Roe as necessary for women’s health. Tired of seeing the same unbalanced and misleading story after every March, Forney decided then that she would be “Silent No More.” The following year, she voiced a solo note at the Court, holding up a sign that read: “I Regret Aborting My Baby.” Since then, the chorus of Silent No More witnesses has become a fixture of the pro-life movement, and not only at the March for Life. Forney and her group have brought the Silent No More Awareness Campaign to all fifty states, countering the poisonous message of ideologues with the sobering truth of personal experience. Georgette Forney is also head of Anglicans for Life. She recently spoke to the Human Life Review about her pro-life work.

Human Life Review (HLR): After long camouflaging their advocacy in terms of a sad-but-necessary procedure that should be “safe, legal, and rare,” proponents have shifted to unapologetic promotion, calling on women to “shout your abortion.” What happens when that worldview collides with the experience your members are *not* shouting about, that is, the pain and suffering abortion brought into their lives?

Georgette Forney: “Shout Your Abortion” implies a sense of pride, almost a giddiness for having exercised your right to have an abortion. It is about seeking to empower and affirm yourself and your choice. The women who contact the Silent No More Awareness Campaign are not proud of their choice to abort their unborn children. Shame, grief, pain, and guilt are the most common words I hear women use to describe how they feel about their abortion experience. So, the collision is, if you will, in what motivates someone to share their abortion experience. Silent No More women share their story to help others better understand the reality of how their abortion impacted their lives. We speak of how it undermined our sense of worth, our self-esteem, how the trauma of the procedure caused us to abuse drugs and alcohol to numb the feelings and nightmares, of living with depression, in unhealthy relationships. Being able to admit that you struggle with grief and guilt is hard, but in order to find peace, being honest about the emotional fallout following an abortion is really the only way to heal from it in a healthy way.

HLR: Your organization’s name suggests that over the past half-century silence has played a major role in bringing the United States to the point where over

60 million abortions have been performed. Please talk about the multiple ways silence aids and abets abortion.

Forney: When I started to share my abortion story in 1998, I felt like a lone ranger. I had not met any women who were talking about their experiences. But once I shared my story, they would later come up to me and say, “me too.” I realized there was a real stigma about discussing abortion. I think part of why it is hard to talk about abortion from personal experience is that it is such a political issue. The personal-story side gets lost in the rhetoric. But the personal side is actually more important than the rhetoric because the real-life experience is what is at the heart of the issue—the death of the baby and the traumatic physical and emotional impact for the mother (and father). I must add that the two sides of the movement can make it hard for women to share. Prolifers affirm our guilt when they call women who have abortions murderers, while pro-abortionists undermine our feelings by saying abortion is no big deal, you can have a baby when you are better prepared. Women learn from both, in some ways, to keep our feelings, our pain, inside and stay quiet. This is not a healthy way to handle trauma, because the pain will manifest itself in our behavior, our health, and our relationships. Staying silent allows abortion to continue unchecked, because if no one talks about the negative consequences, people continue to think it is good for women. We know abortion kills the baby, but we also need to get the truth out about how it impacts the mothers and fathers. As the people who have used the product (so to speak), we must talk about the problems associated with it. Abortionists are counting on women being silent so that no one will learn how badly they treat us, and how bad the procedure is—if the truth is revealed, fewer people will want to use their product. All of this is why I knew we had to start sharing our stories. One of the key components of our testimonies is the final point we make, that is, we talk about how we found healing: grace to receive God’s forgiveness and to forgive ourselves. Going through a healing program is a critical step we encourage women to take before sharing their abortion stories. Healing allows our story to be rooted in grace versus pain and anger.

HLR: How many testimonies has the Silent No More Campaign gathered? Do you do any kind of verification/corroboation of them?

Forney: The Silent No More Campaign began November 11, 2002. As of December 31, 2021, it has held 2,252 gatherings (in all 50 states and 17 countries), with 6,821 women and men sharing their abortion testimonies. Testimonies have also been shared at 174 high schools and universities in the

last 11 years. There are 3,012 testimonies posted on the Campaign website with 621 of them shared via video. Currently there are 20,276 people (representing 77 countries) registered with the Campaign. People who are not ready to join the Campaign are invited to “register their regret.” So far, 6,684 women and 710 men have said they regret their abortion or lost fatherhood. Also, 604 women and men have posted memorials to their children. We have an attestation field in which each person who submits a testimony must sign, confirming that this is their truthful story. Our abortion stories tell about ourselves: Why would anyone claim to have an abortion when they hadn’t!?

HLR: The circumstances of each abortion are unique because each person is unique. That said, is there a kind of “typical profile” or “profiles” that emerge from the testimonies you’ve assembled?

Forney: That is a really hard question to answer—partly because these are my personal observations versus a professional’s clinical review of the data. Women who have abortions fear other people’s opinions and therefore are more insecure by nature—but once they go through healing, it is as if they find their courage, their voice. Once we were weak and easily manipulated, and after healing, we find our spine, and the strength to be strong.

HLR: Though proponents insist abortion is a “woman’s” issue, the testimonies Silent No More gathers include those of men who regret facilitating their partner’s abortion as well as those who are denied any say in the death of their child. Can you discuss the role of men in Silent No More?

Forney: When we launched the Campaign, I didn’t even consider men’s voices. However, we quickly got calls from fathers saying “What about me?” We invited the men to speak too, but what I didn’t anticipate was how men speaking of their grief and shame would impact the women. Hearing the men say they regretted helping their girlfriend or wife have an abortion brought about forgiveness and reconciliation between the sexes! I would say the vast majority of women wished their partner in the pregnancy had been more supportive of the choice to parent. As men speak up, they encourage the next generation of fathers to take responsibility to parent. Men also benefit from going through an abortion aftercare program for men—unpacking the trauma and emotional baggage of abortion is critical for everyone involved.

HLR: From the testimonies you have gathered, what have you learned about what men can do to reduce abortions, even one at a time?

Forney: Both the opinion of the father of the baby and the attitude of the pregnant woman's father can influence the woman's decision to abort, parent, or place for adoption. We need to teach young men that truth. I also think we need men to encourage young men to mature and engage in responsible behavior. For too long, we have undermined young men by allowing them to stay in a perpetual state of irresponsibility.

HLR: Pro-life Americans hope that the upcoming ruling in *Dobbs v. Jackson Women's Health Organization* will at least severely curb the unlimited abortion license invented in *Roe v. Wade* and send the abortion issue back to the states. If that happens, what will be the role of Silent No More and how do we bring its work to bear on the state level in 50 states?

Forney: We are only now beginning to contemplate this question. Obviously, our testimonies can be used to educate legislators about the reality of abortion versus the rhetoric of it! We also will need to ensure that more abortion aftercare programs exist so those who have suffered in silence with their abortion grief can find safe places to seek help and healing.

HLR: In addition to your work in Silent No More, you are President of Anglicans for Life. Tell us more about that organization and how it fits within the Anglican Communion in the United States, an ecclesial community whose internal divisions on sexual matters are no secret.

Forney: I am grateful that when the Anglican Church in North America (ACNA) was working to establish the Canons for the Province, they contacted Anglicans for Life (AFL) and asked if we had any Declaration of Life type of statement that they could consider. Fortunately, we had just adopted one, which they incorporated into the founding Canons for the ACNA. The fact that the Church has such Canons makes it easier for AFL to work with ACNA churches and bishops in developing life-affirming ministry in local parishes. As the only para-church organization that focuses on the sanctity of life, AFL is the go-to resource in the ACNA for life ministry resources. AFL publishes a lot of educational materials; we have two adult-ed curriculums, one that provides a "101"-type overview of key life topics, and the second on aging and dying to combat euthanasia. We also have a youth curriculum called Abundant Life: You Were Made for More. In addition to educational resources, we help local churches establish ministry outreach and have a strong team of Prayer Intercessors as we fully appreciate the spiritual battle of life vs. death.

HLR: Something heard from a not-insignificant number of women considering or having procured abortion is their fear that the Church will treat them with a judgmental or condemning attitude. From your experience, how real is that fear, and how can churches be more supportive of women in these circumstances?

Forney: Anglicans for Life recognizes the research done a few years back on this issue by Lifeway. It breaks my heart to think that 30 percent of women attended a church service within 30 days prior to having their abortion. AFL encourages churches to check their attitude toward women facing unplanned pregnancies—and if they can refrain from judgment, we ask them to post an announcement in their weekly bulletin that invites any woman facing a pregnancy to seek support from them and their local pregnancy center.

HLR: How can readers support Silent No More?

Forney: If someone is holding a pro-life event, invite women from the Silent No More Awareness Campaign to come and share their testimonies. Have conversations about abortion from the woman's perspective. Know where local abortion aftercare programs are being held in your community and share that information on your social media or in your church bulletin. The more people there are who heal from their abortion pain, the more we will break the silence with friends and family. Use your smartphone to show some of our online video testimonies to women walking into the abortion clinic. We have coordinators in many states: See our "Regional Coordinators" website page.

HLR: Tell us more about Silent No More's website.

Forney: The website *SilentNoMore.com* includes a big section on the Shockwaves of abortion, which refers to all the other people/family members who are impacted by the death of the child and the trauma of the mother. You can also access the testimonies at *AbortionTestimony.com* and find healing programs at *AbortionForgiveness.com*

HLR: Thank you, Ms. Forney.

The Silent No More Awareness Campaign can be reached at mail@Silent-NoMore.com or 1-412-749-0455.

Life in the Face of Death

Brian Caulfield

The sun is shining brightly on a warming February afternoon along McLean Avenue, where every day looks like Saint Patrick's Day. Past the Irish pubs, breakfast nooks, package stores, and *Fáilte* travel agencies of the Yonkers neighborhood moves a tall, exceedingly thin figure clothed in layers against the wind while bearing with strength and dignity the slow grind of advanced cancer. Nothing has ever stopped Chris Slattery from pursuing his goals, and it is clear from his still-lively eyes and familiar Irish smile that his current health challenges are not sidelining his prodigious New York pro-life work.

Through more than 40 years of defending life in the nation's abortion capital, Slattery has been a happy warrior. He began his pro-life work counseling women on the streets of Manhattan and opened his first pregnancy center in the summer of 1985, when the city's proliferators were not well-organized and sometimes worked at cross purposes. The inspiration for the pregnancy center came after he was invited to hold the baby of a woman whom he had counseled out of having an abortion. If he could save one baby's life by standing on a sidewalk, he reasoned, imagine how many more babies he could save with a pregnancy center.

The idea grew from there. Despite being plagued with lawsuits, fake clients, sting operations, financial hardship, gag orders, crippling fines, subpoenas, and harassment of every kind by rabid abortion advocates, Slattery kept his original center going in a narrow building on East 23rd Street until 2000. By then, he had expanded into the South Bronx across the street from Planned Parenthood in 1995, opened a center in the same building as another Planned Parenthood in downtown Brooklyn, and then opened the third of his currently operating offices in Jackson Heights, Queens, in the early 2000s. His centers bear an appropriate name: EMC Frontline Pregnancy Centers, with EMC standing for Expectant Mother Care, the longtime name of his original Manhattan center. With a background in advertising, he is still the best promoter and ad copywriter for the cause; his website declares:

Fighting for life in NYC—The Abortion Capital of America. EMC FRONTLINE has been an innovative leader serving in the mouth of the abortion capital where 70,000

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abortions are done annually. Because of our missions and services, we have been able to save 43,000 innocent children from abortion.

Now 67, Slattery faces a diagnosis that puts his life dedicated to life in sharp perspective. Cancer of the colon has spread to his lungs, and doctors give him two to three years to live. The multiple chemotherapy sessions he has undergone will slow but not eradicate his form of cancer, his doctors say.

“Everyone dies, we all face it at some time or another,” Slattery said when we met. “I will just die sooner rather than later.”

After hearing from a mutual friend about his condition, I asked to meet Chris for lunch at an Irish coffee shop not far from his home. I had worked closely with him for a number of years while I was a sidewalk counselor outside Manhattan clinics in the 1990s and wrote about him often as a reporter for *Catholic New York*. I had not seen him much since I began working twenty years ago for the Knights of Columbus in New Haven, Conn., but kept tabs on his frontline labors through email and social media. Seeing him in action many times successfully counseling women from having an abortion, and marveling at his spunk in fighting lawsuits and unfair regulations, I have come to respect his methods and courage. In the culture wars that move closer to home each day, Chris Slattery is one person I would like in the foxhole with me.

Known for his tireless commitment to the cause and 24/7 work ethic, he has been slowed a bit by cancer but remains engaged in his many pro-life works. He still oversees the three pregnancy centers, although he is not on site as often, leaving the work of counseling women, offering pregnancy tests, and providing ultrasounds to his trained employees, volunteers, interns, nurses, and medical technicians. Calls from abortion-minded women still ring on his cell phone, which he answers with his signature, “Can I help you?”—not mentioning that they have contacted an “Abortion Alternatives” hotline rather than an abortion clinic. He opened his pregnancy centers with the clear goal of reaching women who are one step away from scheduling an abortion and has perfected a series of questions, answers, and suggestions designed to change the caller’s mind or delay her decision. This method has been called “deceptive” by various state authorities who have sought to shut down Slattery’s centers or at least make him specify in public statements and ads that he does not offer abortion. Determined, fearless, and unflinching, and backed by the First Amendment and expert legal counsel, Slattery has fought every effort to stifle his work and has prevailed in numerous court proceedings.

“They want to shut us up and shut us down,” he observed. “But we have truth on our side and free speech protected by the First Amendment. They

are trying to force speech on us, to make us say something we don't want to say, to tell people what we *don't* provide, but they don't require the same forced speech for abortion clinics."

The list of his legal battles and fines is long. He once had as many as twelve centers but was forced to cut back by laws requiring each to have a medical professional on the premises. By his own count he has faced restrictive measures or subpoenas from five New York attorneys general. The current AG, Letitia James, has an open subpoena on Slattery, though he assumes she has been distracted by enforcing draconian Covid rules, issuing a report on disgraced former Gov. Andrew Cuomo (son of Mario), and mounting a reelection campaign after briefly entering the race for governor. As for fines, there are too many to recall, but he's paid only a few of them. Among the outstanding judgments is \$50,000 by New York District Judge Robert Ward for Operation Rescue activities. (Slattery said the judgment disappeared after the judge's death in 2003. "It was either a miracle or Judge Ward had second thoughts and removed them," he concludes.)

Slattery's ongoing challenge to the so-called New York "Boss Bill" held up implementation of the law, passed by the state legislature and signed by Gov. Cuomo in late 2019. The law prohibits employers from accessing employees' medical insurance information related to "reproductive health" such as abortion and contraception, and bars employers from firing employees for "reproductive choices." In a suit against the governor and the attorney general, Slattery claims that the law violates his freedom of expressive speech and religion as an employer who runs a Catholic pro-life organization. The success of his organization requires him to hire and retain only employees who agree with and act upon its pro-life mission, he argues. The case was dismissed by a New York court in March 2021, but Slattery is appealing.

In his battle with cancer, Slattery brings the same determined spirit, though he realizes that he is in his toughest fight yet, with a foe that cannot be reasoned with or brought to court. Coming face to face with his mortality seems to have deepened his contemplative nature and softened some of the rougher edges of his personality. Far from giving up, he is responding to this intractable challenge with a measure of grudging acceptance and grace.

During our long lunch together, his phone buzzed regularly; he texted while continuing to speak to me, and answered a few calls that looked like emergencies.

"Can I help you? . . . An abortion at that stage would cost about \$600 in New York. . . . If you come into our office we can give you a free ultrasound. Where do you live? . . . Yes, we have a center in Brooklyn. Would you like to

make an appointment? . . . Okay, call us back after you think it over.”

“She sounded uncertain about what she wanted to do,” Slattery explained to me. “I’m not sure if she’ll call back. But I get a couple dozen calls like this every day. With each one, you realize that a human life hangs in the balance.”

I first met Slattery in 1988 when he was invited by Professor Bill Marra to Fordham University’s Lincoln Center campus to recruit volunteers for his pregnancy center. I was an adult continuing-education student who had shifted to a pro-life position after reading Cardinal John O’Connor’s article in the *Human Life Review* on the inconsistency of New York Gov. Mario Cuomo’s “personally opposed but” approach. There was much ferment on the pro-life front at the time, with new ideas, initiatives, and direct-action movements popping up over coffee, around kitchen tables, and in the prayer groups of countless churches. Among the pro-life faithful there was a mixture of supernatural hope and “why-not?” activism, when even the loftiest pro-life dream seemed achievable: So many of the frontline workers had what I called a “let’s roll Jericho” attitude toward the nation’s seemingly impregnable wall of abortion. After all, pro-life Ronald Reagan was president, and Cardinal O’Connor was squaring off with the nation’s powerful abortion forces. The cardinal had given retired Auxiliary Bishop Austin Vaughan permission to risk arrest with Operation Rescue, which was in the infancy of its goal of blocking every abortion clinic. It was hardly surprising, then, when I entered Dr. Marra’s class on St. Augustine in the fall of 1988, that he mentioned offhandedly he was running for president—not president of a philosophical society, as I thought at first, but president of the *United States*. (Marra was a third-party Right to Life Party candidate; his running mate was Joan Andrews.) He was out to show America what a real Italian Catholic candidate looked like by opposing “that fraud” Mario Cuomo. Marra was, to put it mildly, an intellectual provocateur, a tour-de-force personality who held forth in the classroom with the freedom of a long-tenured professor and hosted his own Sunday night show on AM talk radio, “Where Catholics Meet.” That evening at Fordham, he told his dozen students that they had to do something about the scourge of abortion or risk eternal consequences, as he introduced Slattery and his wife Eileen, who looked every bit the first-year newlyweds they were.

After hearing them talk about their experience sidewalk counseling outside a Manhattan abortion clinic and bringing “turnarounds” to the pregnancy center on 23rd Street, I challenged the Slatterys about their methods. What right did they have to stop someone on the sidewalk and ask if they had come for an abortion? What if a woman was going to another business in the building? How could you bring someone who was looking for abortion

to a center that doesn't do abortions? "I'm against abortion, for sure," I told them, "but isn't there a law or some moral restriction against what you do?" Chris grew impatient and finally said, "You can be as genteel and sweet as you want in your so-called *opinion* against abortion, but you'll never get an abortion-minded woman to change her mind, and that's the one I am out to persuade."

That hurt.

The first thing I learned about Slattery is that he doesn't suffer fools—like me at the time—lightly. He is so single-mindedly involved in his work that he doesn't always consider the feelings or perspectives of those who may be sitting on the fence. Or maybe he figures that the only way to get them off the fence is to provide a firm verbal push. Whatever the case, it worked with me. I thought I was doing the pro-life movement a great favor by writing articles against abortion for the Fordham newspaper, but his jabbing words and dismissive attitude got me thinking. A year later, I was praying outside the same abortion clinic where Slattery had started and, as a sidewalk counselor, brought a number of pregnant women to his 23rd Street pregnancy center. I even stood as the godfather at the baptism of one saved baby.

Of course, Slattery's sharp words have not always had such positive results, as I also witnessed firsthand. In the summer of 1992, when the Democratic National Convention that endorsed Bill Clinton was being held in Madison Square Garden, I was talking with Slattery outside the church where Operation Rescue was holding an evening rally. Earlier that day, he had hung up on a pro-life lawyer friend, and that lawyer walked up to him outside the church and knocked him to the sidewalk with a right hook to the jaw. Cops rushed to the scene, thinking it was a fight between pro-lifer and pro-abortion, before they were finally convinced it was an intramural squabble. Tempers cooled, Chris got up like a gentleman, said he was fine, and the two men remain friends to this day.

I hesitate to tell this story for fear of giving the wrong impression about Slattery in particular and pro-lifers in general. But I think it belongs in any honest account of his life, because it stands out so starkly as unusual. In the day-to-day struggles of the decades-long movement for life, fraternal ties and habits of charity run deep, as beautifully illustrated by the care two pro-life heroes showed for one another not long ago. Despite abdominal pains caused by cancer blocking his colon, Slattery traveled to Washington for the rally outside the Supreme Court last December 1, when oral arguments for the *Dobbs* case were being held. At some point, his abdominal pains became so excruciating that he could barely stand, and Slattery asked for the assistance

of fellow pro-life warrior Randall Terry, founder of Operation Rescue. In a scene that contradicts the typical media image of proliferers, Terry helped Slattery into the passenger seat of his own car and drove him all the way to Newark Airport, where Slattery's wife met them to drive Chris the rest of the way home.

What Slattery means to the pro-life movement is best expressed by his many friends who have posted messages on the storyworth.com website. I quote them anonymously and at length to indicate the range and warmth of the comments:

You are my friend who has helped and comforted me when I needed help. You also are one of my heroes.

The Lord of Life loves you, and I do too. And, of course, thousands upon thousands more people love and appreciate you, including those who owe their lives to you because you saved them from abortion.

Your suffering will take you to the presence of eternal, omnipotent, divine Love! I am praying for you. Please pray for me always.

I am so sorry to hear about this cancer. But praying GOD will heal you! It is an honor to know you, and I thank GOD for all of your Pro-Life work and dedication to help pregnant women.

I enjoy our friendship more than you know and have deep gratitude to you for opening the door for my participation in your relentless pursuit of giving voice to the unborn and in saving innumerable lives. With Christ always at your side, the good seeds you have planted will be harvested beyond our knowledge.

I enjoyed every one of our conversations and was deeply enriched by them and by you. You have more courage than an army of men to do everything you have done and to lead every battle, including all those legal battles. You are the man in the arena, Chris, that Theodore Roosevelt wrote about and whom we all try to emulate. Countless people in the pro-life movement know of your courage and strength and beautiful example.

When I think about the many pro-life heroes that I have gone to jail with, prayed with, sidewalk counseled with or heard about as fearless legends, your name comes to the top of the list. And for that I can only offer a humble thank you but that comes with the priceless gift that I can offer you now, which is my prayers for your health and to offer the holy sacrifice of the Mass for your intentions.

Do not be afraid of colon cancer or anything of that sort. We proliferers do not die: We only change place: We go to live with God the FATHER in heaven where pro-life fellowship, laughter and peace will have no end. In heaven we will be welcomed by all unborn babies whose lives we have saved while living on earth.

You are a pro-life hero to me. For more than 30 years I have turned to you for advice on how to help run Centro Tepeyac in Silver Spring, Maryland. You are always ahead of the curve in advertising and reaching vulnerable women. And you are always looking for new and improved ways of reaching them. Your training in advertising has certainly been an asset. And you work, work, work, at what you do! Thanks for your example and mentoring.

So sorry to learn of your adverse diagnosis, Chris. I have long been inspired by your dedication to the pro-life cause. I always felt confident supporting EMC's work because of your direct action. We need many more of you so we must all do our part in stepping up! That way your legacy will be secure. Godspeed in your journey.

I am one of the hundreds of young Spaniards who interned with Chris at EMC. I stayed at the Life House in the Bronx for 12 weeks in the fall of 2010 and I have to say that this experience changed my life, and I cannot be grateful enough to Chris for the hard work he put in all these years and the opportunity to become part of EMC's family. I made such good friends.

From the first meeting at . . . Westchester-Putnam Right-To-Life group it was you who was the most inspiring to me. That big hat and sure smile belied the passion for the cause of Life in your heart. Many years have passed. God chooses our time. Each minute is precious! God bless you!

But any story about Chris Slattery must give him the last word to express what matters most to him. As vice-postulator for the sainthood cause of Blessed Michael McGivney, founder of the Knights of Columbus, I had brought a first-class bone relic to our lunch meeting. After praying to God through Father McGivney's intercession, Slattery reflected on past days and the days to come.

"It's been a wonderful life," he said. "I have been privileged to serve the most defenseless and vulnerable in America's greatest city. I have had the privilege of getting to know and work side-by-side and go to prison with the great proliferators in history . . . I can't say it's been easy, in fact, it's been very hard, with many challenges that have been tough to withstand. But it's been very much worth it, and I pray for God to give me an extension. We have a lot more pro-life work to do."

Henry James and the Ties of Family

Edward Short

Recently, we have heard a good deal about the family during our national discontents. Those sworn to the progressive ideology blame the family for perpetuating what the Soviets used to call “dissidence”; they even go so far as to insist that children denounce parents if they fail to salaam before the ideology’s implacable gods. Those critical of the ideology, on the other hand, deplore the part it continues to play in the breakdown of the family and all the turmoil to which such breakdown inveterately gives rise. However we look at it, the family is a defining factor in our social order, and for that very reason it might be amusing to see what our greatest American novelist had to say of it.

In 1887, Henry James heard from his sister Alice of a daughter who was distraught by her father’s remarrying because, as she said, it was “forty years of her mother’s life wiped out.” This was the genesis of his short story “The Marriages” (1891), which, in its debt to the theatrical melodrama that James had imbibed as a boy in New York and in its psychological acuity, exemplifies his finest fiction.

It also shows how much his art drew upon and was sustained by his own sense of family—in this case, a sense reinforced by his sister Alice, with whom he would always be close. This is the same Alice who said of their father, the insouciant Swedenborgian Henry James Senior, “Father, the delicious infant, couldn’t even submit to the thralldom of his own whim.” Both siblings realized that the love of families is only made possible by the forbearance of families—an important *leitmotif* in “The Marriages.”

The plot of the tale is simple. Adela Chart tries to prevent her father, Colonel Chart, from remarrying by telling his rich fiancée, Mrs. Churchley, that he had broken her mother’s heart, a fabrication which affronts her brother Godfrey, who is fond of the fiancée for offering to resolve his “idiotic secret marriage.” Godfrey, an imprudent youth, has married an unpresentably cockney woman. In the end, the Colonel’s remarriage is prevented, though not for the reasons Adela supposes.

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James saw the story's drama inhering in the "pangs of filial piety" and pivoting on what he called "the consciousness, the fond imagination, the possibly poisoned and inflamed judgement" of the daughter, who takes it upon herself to hallow her mother's memory. The author's "possibly" leaves it to the reader to decide whether Adela's judgment is "poisoned."

Clearly, no one could consider her judgment slack. There is a pronounced lack of sentimentality about her. "Adela had reason to believe she should never marry, and that someday she should have about a thousand a year," the narrator tells us. "This made her see in the far future a little garden of her own, under a hill, full of rare and exquisite things, where she would spend most of her old age on her knees with an apron and stout gloves . . . steeped in the comfort of being thought mad." What James would call "the terrible *fluidity* of self-revelation" is here drolly exhibited.

In thus capturing the peculiar drama of consciousness, James transforms what might have been a potboiler into a short masterpiece. What gives the story an added *frisson* is its scenic briskness, proof that James had learned the lesson of the dramatic master in Maupassant.

In describing Adela's distaste for Mrs. Churchley, James takes full advantage of the exaggerations of melodrama: "Everything about her, to Adela Chart, was enormous. She had big eyes, big teeth, big shoulders, big hands, big rings . . . big jewels . . . She was high and expansive herself, though not exactly fat; her bones were big, her limbs were long, and she had a loud, hurrying voice, like the bell of a steamboat." At the same time, Adela respects Mrs. Churchley for never breaking her confidence: The rival to her father's affections may be vulgar, even a little absurd, but she is not dishonorable.

Leon Edel, James's biographer, read the story as a precursor to Freud, showing how "a young girl, under the guise of filial piety and filial self-righteousness can turn passionate jealousy into an exercise of power." Yet trusting Freud to explain Adela's opposition to Mrs. Churchley can hardly account for the story's genuine pathos. When Adela discovers that her brother does not share her view of their father's remarriage, she recognizes why she must be all the more opposed to it. "Their worship of their mother's memory, their recognition of her sacred place in their past, her exquisite influence in their father's life, his fortune, his career, in the whole history of the family . . . was like a religion . . . to fall away from which was a form of treachery."

Of course, Adela also recognizes that "This wasn't the way people usually felt in London. . . . Remembrance there was hammered thin—and to be faithful was to be a bore. . . . When they had hustled all sensibility out of their lives, they invented the fiction that they felt too much to utter." If this is

merely the guise of filial piety, it is an oddly convincing guise. It also recalls Thackeray's great question: "Who is ever missed in *Vanity Fair*?"

Seeing the story in Freudian terms also overlooks its comedy. When Adela recoils from Mrs. Churchley "as undomestic as a shop-front and as out of tune as a parrot," it is because her father's intended "would either make them live in the streets or bring the streets into their life—it was the same thing. She had evidently never read a book, and she used intonations that Adela had never heard, as if she had been an Australian or an American." This is the comedy of class, which would have baffled the morose Austrian in Freud. James mines the same comedy when Godfrey's inconvenient wife insists that she be allowed to meet with one of the family: "fice to fice."

When the meeting finally occurs, Adela reels. Her interlocutress has "vivid yellow hair," a "blue cloth suit with brass buttons, a stick-up collar like a gentleman's, a necktie arranged in a sailor's knot, a golden pin in the shape of a little lawn-tennis racket, and pearl-grey gloves with big black stitchings." At first, Adela mistakes her for an actress, but then she is sure that she is unlike anyone she has ever met. When the "apparition" speaks, it is to insist that Adela's father Colonel Chart must intercede on her behalf and force his son Godfrey to let her accompany him abroad, whither he is going to escape Mrs. Godfrey. The sequel to this demand is blurry.

What really happened Adela never quite understood; what seemed to be happening was that the room went round and round. Through the blur of perception accompanying this effect the sharp stabs of her visitor's revelation came to her like the words heard by a patient "going off" under ether. She afterwards denied passionately even to herself that she had done anything so abject as to faint; but there was a lapse in her consciousness . . .

Towards the story's end, Adela, seeing her father's "wasted and jilted air," repents of her meddling, confesses her lies to Mrs. Churchley, and begs that she take the Colonel back, whereupon the lady reveals that she never believed Adela's lies. She broke off the marriage because she thought her fiancé's daughter "horrid," not her fiancé. Later, when Adela crows: "Mrs. Churchley can never come back—she's going to marry Lord Dovedale," we are reminded that few Edwardian peers, certainly none strapped for cash, would have objected to the vulgarity that Adela finds so insufferable in her monied *bête noire*.

Whether this confirms Mrs. Churchley's low view of Adela is, of course, arguable. Robert Louis Stevenson, for one, adored James's heroine, as the verses he sent his friend attest: "Adela, Adela, Adela Chart/What have you done to my elderly heart/Of the ladies in paper and ink/I count you the paragon, call you the pink," though it is necessary to add that the reason for this

adoration was somewhat barbed: “. . . in all the asylums that cumber the ground/So delightful a maniac was ne’er to be found.”

“The Marriages” reaffirms the extent to which Alice James inspired her brother’s muse. When the 3rd Duke of Sutherland (1828-92) married Mary Caroline Blair (née Michell) in March 1889, after the death of his first wife, his daughter, Lady Alexandra Leveson-Gower, was so upset by the re-marriage and what she regarded as the implicit disrespect shown her mother by it that she actually died three years afterwards. Alice’s response to this woe-ful demise, which she shared with Henry, needs quoting: “Will there be no stirrings of remorse in her father’s bosom for the brutalities which rent that delicate fibre?”

Here is the *donnée* that set James’s muse afire. Of course, true to the alchemy of art, Adela may not be “delicate,” but she nonetheless attests to the profound feeling that courses through what Lancelot Andrewes called “the bands of birth.” At the end of “The Marriages,” when Colonel Chart walks away from his inamorato, Adela tells her brother: “Papa gave her up, as it were, for *me*. Fancy the angel, and fancy what I must try to be to him for the rest of his life!” There is nothing “poisoned” in this dénouement to James’s witty, moving tribute to the potency of familial love.

While our more agitated neighbors seek to deliver up our unravelling social order to the direction of family-hating scolds, the rest of us can find solace and sanctuary in the family-friendly Henry James.

Covid in Ireland

David Quinn

The Covid pandemic has been a test of what we value most. First and foremost, it has asked whether we value freedom more than safety or vice versa. Like other crises, it brought to the fore once again considerations about the common good.

Prolifers have had to ask themselves questions about the vaccines and their remote link to abortion. Was it better to forgo them or not? We have also had to ask whether the most consistently pro-life position to take over the course of the pandemic was to support strict lockdowns on the grounds that this would save the most lives.

Religious leaders have had to ask themselves to what extent they favored restrictions on public worship in the name of health and safety. They were confronted with what to do when the state seemed to be going too far in its demands. To what extent should it be challenged? Should civil disobedience be considered? Has public health become too dominant a concern? As religious believers, are we losing sight of a transcendent frame of reference in which physical health is far less important (although very important) than our ultimate spiritual destiny?

I write from Ireland, and so I will draw heavily on what happened here. In American terms, the response of the Irish government resembled that of the bluest of blue states. We had some of the longest lockdowns anywhere. No other nation in Europe prevented public worship for a longer period. We prided ourselves on the lives saved by these measures, although if you compare us with other sparsely populated countries on the edge of Europe that underwent less strict lockdowns (such as Denmark, Finland, and Norway), our performance was about average.

We Irish looked on aghast at what was happening in America under Donald Trump and in Britain under Boris Johnson. We were pleased that our response was not as chaotic. After Covid vaccines were approved, almost all of us rolled up our sleeves—as I did myself after listening to leading orthodox Catholic thinkers like Professor Robert George, who said it was morally licit to do so.

The first case of Covid-19 was confirmed on the island in late February

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2020. At the time, our equivalent of Dr. Anthony Fauci, Dr. Tony Holohan, head of the National Public Health Emergency Team (NPHE), was not too worried. Indeed, on March 3, he was predicting that we would have only a “sporadic” number of cases. The government refused to close our borders. After Donald Trump had barred travel from China a few weeks before this, Ireland joined in the chorus condemning him as “xenophobic.” In this way, too, we were reacting like a blue state. The EU also opposed closing borders, and the World Health Organisation took the same position. The virus knows no borders, we were told.

At this point in the pandemic, Tony Holohan was opposed to the general public wearing face masks because masks might lull them into a false sense of security and therefore be counterproductive. He did not want to stop people from visiting nursing homes, even though the nursing homes themselves recommended this—for very good reason as it turned out. We believed we were “following the science.”

But by St. Patrick’s Day, Leo Varadkar, the Taoiseach (Prime Minister) at the time, addressed the nation to announce wider-ranging restrictions. At that time, we were hearing predictions that we could reach 85,000 deaths out of a population of 5 million. This would be equivalent to 5.6 million deaths in the United States, a colossal figure. People were understandably terrified. In fact, they had started to stay home on their own. (I was in Dublin city centre the evening Leo Varadkar gave his address. It was almost deserted.)

A few days later a full lockdown was imposed. In less than a month, we had gone from predicting only a sporadic number of cases, to forecasting tens of thousands dead. The “science” Ireland was following shifted from severely underestimating the virus to massively overestimating it. Suddenly, closing borders became the sensible thing to do, and as soon as supplies of personal protective equipment became plentiful, so did wearing face masks.

Aside from essential workers, no one was allowed to leave home except to exercise or to shop for essentials. Even then, you had to stay within two kilometers of your house.

As a journalist, I was counted as an essential worker. So long as I could show ID and proof of occupation, I could travel where I liked. Often, I had to go through police checkpoints. Mostly I took advantage of my press pass to attend NPHE press conferences at which we awaited the latest pronouncements from the NPHE team as though they were religious revelations. You were barely allowed to question them, because they were garbed in the majesty and authority of science.

The philosopher and priest Ivan Illich predicted such a day would come. Illich was a fierce critic of what he insisted were the overweening demands of

public health. He crystallized his critique in the book *Medical Nemesis*, published in 1974. Illich said that one day, in a medical emergency, we would grant doctors the extraordinary power of generals in war. He predicted: “He who is assigned control over death ceases to be an ordinary human Because they form a charmed borderland not quite of this world, the time-span and the community space claimed by the medical enterprise are as sacred as their religious and military counterparts.”

In keeping with Illich’s thesis, figures like Tony Holohan and Tony Fauci were no longer regarded as ordinary mortals. They had been placed far above us. They seemed to have the power of life and death. By listening to them we would be led, like the Israelites, across the desert and into the Promised Land of Health and Safety.

That sounds more cynical than I intend it to be. It made sense that public health specialists would be given special authority in a medical emergency. It would have been extremely foolish to do otherwise. We didn’t really know what we were dealing with early on, and our heads were filled with images of hospitals filling up and people dying in northern Italy. Things did seem apocalyptic.

But no one should be above questioning. In the midst of the pandemic, Tony Holohan became almost untouchable. The media hung on his every word. The national broadcaster RTÉ instantly canonized him. A fearful nation turned to him in their hour of desperation, and he became far more powerful than the Taoiseach. Only once was he publicly challenged by a major politician, and that was not until the autumn of 2020, when we were on the brink of another lockdown. That politician was Leo Varadkar, now Tanaiste (deputy prime minister). He felt things were going too far, but under fire from an angry media, the public, and opposition parties, he had to beat a retreat.

The first lockdown lasted until early summer 2020. Even when it was lifted, we were not allowed full freedom in case the virus might gallop out of control again. In the meantime, the lockdown had wrought havoc in our nursing homes, just as it had in American states such as New York.

But we are not relying on the benefit of hindsight when we say we should have known nursing homes would be especially vulnerable. The managers of nursing homes were warning NPHET before we locked down that they needed additional supports. In early March 2020, they wanted to stop visitors coming in to see relatives in case they brought the virus with them, but at first NPHET advised against this out of concern that the elderly residents would feel socially isolated.

This was a legitimate concern. Nonetheless, the view of the nursing home managers showed their insight into the difficulties they were likely to face even before the pandemic really took hold. They knew that congregated settings were an especially inviting target for a fast-spreading virus. They also had experience from bad flu seasons in previous years. But the government and NPHET seemed to have eyes for the hospitals only. Terrified by the scenes from northern Italy of hospital overcrowding, they wanted to free as many beds as possible as fast as possible. This meant cancelling everything except emergency procedures. It also involved clearing elderly people out of the hospitals into the nursing homes. Even if relatively few of those patients had Covid, little thought seemed to be given to what would happen as the nursing homes filled up.

In addition, the hospitals were grabbing what they could of personal protective equipment, which was then in short supply. The nursing homes could not compete with the state in that market. The state was also competing for medical staff, which once again left nursing homes in the lurch. The upshot is that, as in New York and indeed in many other U.S. states and European countries, the nursing homes were hit the hardest by the virus. This is astounding when we consider that elderly people were especially vulnerable to Covid-19, and that their general health vulnerabilities and immunological deficits in the face of a “novel virus” were well known.

As of March 27, 2020, there were clusters of the virus in just four care homes. By mid-April, it had rocketed to 196 care homes, out of around 500 such institutions in Ireland.

Readers will probably recall all the praise Andrew Cuomo received for his handling of the virus in the early days. Similarly, the government in Ireland and NPHET trailed clouds of glory for their early response. Cuomo was contrasted with Donald Trump, while the Irish government was contrasted with (believe it or not), Boris Johnson, the British prime minister.

Boris Johnson became a hate figure in Ireland after he was attacked for his part in persuading the British people to vote in favor of leaving the EU in 2016. We loved it whenever he found himself in political trouble, which was often. When he did not shut down England quite as fast as Ireland did, and the death toll in England mounted, we congratulated ourselves on our foresight in ordering a full lockdown before he did. It didn't seem to occur to us that England is much more densely populated than Ireland, that it has an older population, and that it contains London, a major international hub with gigantic numbers moving in and out of it every day.

In other words, we could hardly be compared with England. It made more sense to compare ourselves with other small countries on the edge of Europe,

like Denmark, for example, which suffered fewer deaths per million than Ireland, partly because it did a better job of protecting the nursing homes.

At the time of writing, Ireland had suffered just under 6,500 Covid-related deaths, equating to almost 1,300 people per million. Denmark has had 656 deaths per million. The UK figure is 2,359, and the American number is 2,875 per million. But as in America, politics totally corrupted our view of what was happening. In the U.S. it was a case of bad Trump versus good Cuomo. In Ireland, it was good Leo Varadkar and good NPHET versus bad Boris Johnson.

I attended quite a few of NPHET's press conferences in the early months of the pandemic; at this time when nursing homes were accounting for a vastly disproportionate number of the Covid-related deaths in the country, it was amazing how few questions journalists asked NPHET representatives about the matter. Nothing was allowed to interfere with the narrative of the All-Wise NPHET that most of the media were presenting to the public.

Meanwhile, no one was allowed to attend public worship. Bishops did not have to close churches completely—they were allowed to keep them open for private prayer if they wanted—but some decided to shut them anyway. They went beyond the demands of NPHET because they were so terrified of the virus. Note that they were not following the science, because the science never said to go this far. Ireland ended up with the longest bans on public worship in the whole of Europe. Over the course of three lockdowns, we could not attend public worship for months on end.

And there was little pushback from church leaders of any denomination. By and large, they meekly accepted what was happening. Some of them seemed happy to become glorified health and safety officers. By contrast, in the likes of Italy, France, Britain, and the U.S., Catholic bishops were fighting back. For example, after the first lockdown began to be eased in Italy in summer 2020, the Italian government said museums could open but Catholics could not return to Mass. The Italian bishops challenged the government over this clear case of discrimination, and it backed down.

In France, bishops were willing to go to court. In England, religious leaders from right across the faith spectrum wrote to Boris Johnson as England went into another lockdown at the end of 2020. They challenged him to justify halting public worship again. Religious leaders pointed out that they had been keeping places of worship safe by using recommended social distancing and hygiene measures. Johnson and his scientific advisers had to agree, and public worship was allowed to resume. It has not been suspended since.

By contrast, in Ireland, the government, acting on the advice of NPHET,

stopped public worship again as 2020 was drawing to a close and did not allow it to resume until May 10, 2021. At one point, you could potentially be fined for going to Mass. If you didn't pay the fine, you could go to prison. It was an incredible situation and probably unconstitutional.

A priest in county Cavan who was allowing worshippers to enter his church while he was saying Mass was warned by Gardai (police) not to do so. They put up roadblocks on the approaches to his church to stop people from driving there. As the parish priest, Fr. P. J. Hughes, stated in late March 2021:

The guards [police] attacked me and accused me of spreading the virus.

A guard told me that I was putting the lives of elderly people at risk. It's a sad day that three Garda cars are circling around this church. Have they nothing else to do? God help us.

It is our faith that brings us here and they told me that I wasn't reading the statistics and didn't know what was going on. I told them I did not accept the negative message being poured out by RTE. It's not fair.

This is sectarianism. This is against our faith. It's a sectarian act against our Catholic Church encouraged by the Government who don't believe in God anymore.

He received a fine of €500, which he refused to pay.

The bishops said very little in response to incidents like this. Instead, it was left up to a businessman, Declan Ganley, to issue a legal challenge to the measure on religious freedom grounds, but his case was never heard.

At a NPHET press conference in September 2020, as increased restrictions were being reimposed on Dublin, I asked the deputy chief medical officer how they could justify stopping public worship again when almost every other country in Europe was permitting it. He said the aim was to decrease contacts to reduce spread of the disease. He explained that this meant preventing people from meeting in settings considered to be "less important" in the context of a pandemic.

However, at this stage you could still go to the gym or a hairdresser, and therefore NPHET's thinking was clearly that both these activities were more important than attending Mass or other religious services. It was apparent that public worship was extremely low on the priority list of both NPHET and the government, lower even than it was in ostensibly far more secular countries like Sweden or France. The official attitude toward religion seemed not so much hostile as indifferent, which is worse in some ways. When people could attend public worship, churches operated very safely and strictly by the health guidelines.

As I write this, weekly attendance at Mass has not recovered to its pre-pandemic levels of about a quarter of the adult population. Many are still too

frightened to return or have simply lost the habit.

On a more positive note, the idea of the common good enjoyed something of a revival during the pandemic, even if that precise term was rarely used. People were being asked to curb their personal liberties for the sake of a greater cause, and at first almost all of us were happy to do so, because we weren't sure how severe the pandemic might be. But as the months passed, a curious thing began to happen. People who are normally vociferously pro-choice were the most likely to remain in favor of strict lockdown measures, while quite a few on the pro-life side were more in favor of giving more leeway to individual liberty. This was particularly pronounced in countries like the U.S.

I was certainly a critic of what I saw as disproportionate restrictions, like the over-long ban on public worship, but I am also strongly pro-life. How do I explain this seeming contradiction? Surely if I am pro-life then I should have favored very strong restrictions in order to save as many lives as possible?

But I would make a clear distinction between death from a natural cause, such as a disease, and deliberate killing. I am against deliberately and intentionally killing an innocent human being such as an unborn child. But obviously we cannot ultimately prevent natural death. Yes, in a pandemic the chances of dying from a disease rise rapidly, and restrictions are justified to bring down the death toll. However, the aim cannot be to bring the death toll down to zero. We make that our goal with no other natural disease. We know that the curbs on personal freedom required to do so would be grossly disproportionate. Life involves a certain amount of inherent risk. Trying to drive risk down to zero is utopian (because unachievable) and also requires tyrannical measures, like all attempts to bring about Utopia.

With Covid we needed to try and strike a balance between the social good of reducing the number of deaths, and other social goods such as the right to go to school, to make a livelihood, to be treated for non-Covid illnesses, to attend public worship, to visit family, friends, and neighbors. Indeed, striking this balance is exactly what the common good is all about.

It was entirely consistent with a pro-life ethos to come down on the side of fewer restrictions overall—or indeed of more restrictions. Either was a prudential judgment, which is not the case with abortion or euthanasia, as these are inherently wrong. But if it was relatively easy to see why people who are pro-life would reject what they saw as disproportionate restrictions, it was harder to understand why those who normally shout loudest about personal autonomy and “choice” should have been so strongly in favor of lockdowns, or indeed, vaccine mandates. Those who advocate assisted suicide and abortion in the name of “choice” were also more likely to support

measures designed to reduce deaths from a natural disease to a minimum, even at the cost of other social goods.

Perhaps the commonality is a desire for control. Abortion is an attempt to regain control over your life, as is assisted suicide when you can no longer live the way you want. Covid-19 seemed like a big, uncontrollable, random event, a crisis that had to be tamed by almost any means. The pro-life, or indeed the religious viewpoint, is that life is not always controllable, that unplanned events can happen, and sometimes we need to accept them as gracefully as we can, even if they involve self-sacrifice. Ivan Illich wrote that we were losing the “art of suffering.” I think what he meant by this is that our forebears knew life does not always go the way we want, and it is sometimes better to accept this with dignity rather than fight it all the way, which can lead to even more misery.

Our response to Covid was over-dominated by technocrats who were too likely to recommend disproportionate restrictions and were not even viewing public health (or anything else) holistically, because public health can’t be reduced to a desire to control one disease, even in a pandemic. It was understandable in the early stages that we would listen to technocrats of various hues above anyone else, but later, other voices calling for a more balanced approach needed more of a hearing, including scientists who believed some of the restrictions were going too far. The pandemic was actually an excellent opportunity for religious leaders to address big, ultimate issues like this. Alas, for the most part they failed. Philosophers weren’t any better.

When we come to reflect properly on the pandemic and our responses to it, we must realize that we cannot allow a certain kind of narrow, technocratic thinking to gain control again in the way it did, stoking people’s fears and reducing the common good, and life itself, to an excessive fear of one disease.

At the end of the day, deciding how best to balance different social and private goods in a pandemic isn’t even a scientific question, but a political, philosophical, moral, and yes, even a religious one.

Perambulating in Mid-Air?

Ellen Wilson Fielding

Many years ago, when I was pregnant with my first child, I ran into a fellow Sunday School teacher one day who congratulated me on my soon-to-be-born baby. As he turned to leave, he casually mentioned that he would pray it was a boy.

Startled, I didn't know what to reply. Of course, male heirs have been important for a variety of reasons since the dawn of time for families, clans, and nations. Even today in many poorer and more traditional societies it is the male children who are expected to provide for aged parents, carry on family farms or trades, and of course, in most pre-modern monarchies, to reign over kingdoms. A family without sons, in such societies, lacked a provider and protector, condemning its members to poverty and subsistence on charity.

But I was no Catherine of Aragon, and this was 20th-century Manhattan. Sure, my husband and I hoped for sons as well as daughters, and there was that vestigial carrying-on-the-family-name thing, but this was my first child, with plenty of time for more.

But because "I'll pray it's a boy" seems to assume this is the obvious thing to pray for—though, in a 20th century urban American context, provision for my declining years would likely not depend on my bearing a male child—I looked for the subtext.

You pray for what seems to you a good outcome. So if having a boy would be a good thing, did that make having a girl—a *bad* thing? But *I* was a girl. Where did that leave me?

To be clear, my colleague was a great guy—a loving husband and parent who would cheerfully have given his life for any of his own children, male or female, and was just as prone to brag about his daughters as his sons. Still, this incident came to mind when I spotted a news story recently about sex-selection abortions in India.

Drawn by the headline "46 Million 'Missing Females' Were Aborted in India over the Last 50 Years" (*New York Post*, Dec. 27, 2021), I read reporter Samantha Ibrahim's account of the several-decades-long "rampant" practice of sex-selection abortions of female babies, often under pressure from the husband or the husband's family members.

Ellen Wilson Fielding, a longtime senior editor of the *Human Life Review*, is the author of *An Even Dozen* (Human Life Press). The mother of four children, she lives in Maryland.

The specific cultural and economic context in which women from India, China, and certain other poorer and more rural countries have sought abortion of females does not, as the saying goes, “excuse” but does help “explain” why they do it. For much of the world is more precariously placed economically than the U.S. and Europe, and their cultural, religious, and economic predispositions reflect that. In India as in many places with expanses of poor and rural populations, it is the male child who helps provide for elderly parents and relatives, while the daughters are absorbed into the husband’s family, where they in turn anxiously await the birth of a son. Add to this traditional arrangement the modern push to reduce family size, encouraged by the West, and the pressure mounts if the first child is a girl.

Therefore in a population-preoccupied nation like India, where poorer families also bow under the weight of providing traditional dowries for their girls, it has become common (though illegal since 1994) to seek knowledge of the unborn child’s sex so that any girls detected can be aborted.

Now, the fact that these imbalances of male to female exist in poorer, more rural, and more traditional societies, though sad, is not very surprising. More surprising should be the pro-abortion and feminist resistance in Western nations to attempts to outlaw such practices. In the homelands of #MeToo feminism, the same people who champion equal funding of men’s and women’s sports programs grow quiet when prenatal sex selection comes up—after all, it is a woman’s “choice.”

The specific contexts in which women from India, China, and other recently rural, recently developing countries feel pressed to secure the family fortunes by bartering the unwanted burden of a female child for another try at a male, suggest that other countries—even other poor, developing nations—might react differently if differently organized. In much of Africa, for example, children—male and female—are considered such a good that many Africans have strongly resisted Western efforts to reduce their populations through contraceptives and abortion. Without singling out the Indian people because of their particular history and social stresses (how, after all, can we of the abortion-is-just-a-choice West talk?), they offer food for thought about how and why various nations do or do not value individual human beings, and how we should go about correcting our thinking about human worth to prevent or limit such horror stories.

For us, in urbanized and educated “progressive” societies, girls are usually not regarded as more burdensome or less valuable than boys. On the other hand, we are at least as likely to abort unborn children—male and female—because we do not want children at all, or because we want no more than we already have, or because we feel unable to support them, or just because.

Any and all of these are legally acceptable reasons for aborting the child, because our reasons do not factor into the legality of abortion in America. And from the threatened unborn child's point of view, what practical difference does it make if she never lives to experience life beyond the womb because she is an unwanted girl or for some other reason? Dead is dead.

Again, we Westerners find it shocking that some poorer male-preferencing societies nowadays pursue this preference to the abortion chamber, but we fail to be shocked at where our own preferences for healthy unhandicapped offspring lead us. The prenatal information we chiefly seek to know concerns conditions like spina bifida and Down syndrome. (No doubt many more conditions will be added as we progress in detecting them prenatally.) Again, from the unborn's point of view, the motivation for being cut from the human herd is irrelevant—dead is dead.

But it is not only human life at its beginnings that is in danger of being judged unwanted. In an increasing number of “advanced” nations—including the Netherlands, Belgium, Switzerland, Canada, and parts of the United States—the elderly, the handicapped, and those with mortal or chronically painful illnesses can legally end life early.

Of course, once we permit people who judge their lives not worth living to then proceed to the next logical step, we stamp such a choice with society's seal of approval. And this moves us very close to negative judgments about those in similar circumstances who choose to remain living. We will be inclined to view them as unwise, perhaps even selfish—particularly if this decision to remain living places physical and financial demands upon us. It is natural for those whose feebleness and incapacity drastically reduce their usefulness to those around them to struggle with guilt over “being a burden.” If those around them seem to share this viewpoint, the pressure to turn to assisted suicide can grow overwhelming.

Over the past half-century, our rapidly secularizing Western democracies have denied the inherent value of several classes of human beings, though the foundations for these judgments were laid even earlier (through the propagation of eugenics, for example). However, the slide to assign fluctuating values to human life based on cost, usefulness, and productivity is a recurrent temptation, whether a society grounds its treatment of people on religious beliefs (meaning, historically, Christianity in the West) or some form of secular materialism, hedonism, nature worship, or pantheism.

In the late 18th and 19th centuries, the Industrial Revolution created a demand for cheap and relatively unskilled labor. Along with other social changes that made it harder to make a living in rural areas, this drew large

numbers to the cities and towns, where many women (who were paid less than men and therefore were often preferred for jobs that did not require physical strength) and children (who could be paid even less, and who, as the most powerless members of society, were least likely to organize or resist ill treatment) were hired for work in the factories. Extremely long hours and unsafe and unhealthy conditions were almost universal. Individual factory owners might be more or less humane than the norm, but the norm was quite low.

Now, it is true that before the last century or so, and persisting even today in poorer or remote parts of the world, even young children had to contribute to the family income in some way. But back when the family drew its living from subsistence farming or fishing or small-scale trades such as cobbler, seamstress, launderer, carpenter, blacksmith, and the like, a young child's work was commonly for and among family members. Though there have always been abusive parents, a child's parents were much more likely to love and care for the child than a factory owner with no biological and emotional attachment, and no long-term interest.

Today modern societies rightly pride themselves on having outlawed child labor, installed workplace safety regulations, reduced working hours, and provided safety nets for the elderly and the poor in the form of welfare, Social Security, health provisions such as Medicare and Medicaid, and free schooling through high school. However, in ways we are less likely to notice because of their familiarity, we continue to prioritize the utilitarian-based treatment of people. For example, corporate America has for decades encouraged increasingly greater participation in the labor force of women—which has expanded the labor pool, fueled the growth of the economy, and also kept wages lower than they would otherwise have been if the labor pool had not been expanded.

Now, this is not an argument against the expansion of women into all sectors of the workforce—the outlooks, talents, and contributions of women in all sorts of arenas have enriched our country in many ways. But choices have costs as well as benefits, and one of the obvious costs of this move was to correspondingly shift more and more young children's daytime hours from home care to daycare. And many women who work at “jobs” rather than “careers” would, if they could afford to do so, prefer to postpone their entry into the workforce while their children are very young.

There are also more nefarious ways in which particular businesses have abused human beings for profit—by stoking addictive behaviors, for example. Perhaps the largest and darkest of these is the enormous online pornography industry, which exploits both those who consume pornography (at

increasingly younger ages) and those involved in producing it.

Of course, businesses are more than purveyors of evil: They are also transmitters of great benefits—life-enhancing and life-saving benefits—to humanity. In medicine, communications, transportation, and IT, inventors, entrepreneurs, and the business empires they build up have delivered a seemingly endless flow of goods and services, including many life-saving pharmaceuticals and safety technologies that we would be reluctant to do without. But we already know this—they tell us about it in endless advertising. And nowadays, they also tell us what to think about politics and social issues—and their opinions often don't track with those of us defending the inherent worth and dignity of the human person.

But the inherent worth of the human person is no late-blooming flower of the Industrial or Technological revolutions—it is at the root of our civilization. Henry Adams (the great-grandson of John Adams) contrasts two great forces at work in the West in a chapter of his autobiography, *The Education of Henry Adams*, titled “The Dynamo and the Virgin.” He knew the force that Christianity had exerted in the West, but saw it (when he wrote this work at the beginning of the 20th century) as largely spent.

It is not that Europe's past baptism into the faith (a baptism of immersion that, over many centuries, marinated the faithful into a Christian culture) or the present residual glow of its sinking embers of belief guarantees us moral superiority to our pre-Christian ancestors or to those from other non-religious backgrounds. In fact, that is the point of the doctrine of Original Sin and humanity's resultant inborn susceptibility to moral failures.

And that in turn is the point of many of the laws societies enact—to deter us (or, failing that, to punish or temporarily incapacitate us) from doing things some or all of us may at times desire to do, but that society has determined would be harmful to ourselves and others.

In the past, such laws included bans on euthanasia and assisted suicide (as well as laws against suicide in general)—not because, guided by our Christian heritage, everyone could be counted on to react with horror to the very notion of hastening death, but because *even with* that heritage, fallen human nature would incline some people to judge by utilitarian standards or by a pain-pleasure standard that their own or others' lives were no longer worth living or were impediments to the quality of life of others.

In our stereotypical images of primitive society, the aged person is deposited on an ice floe to prevent scarce resources from being stretched too thin. The handicapped newborn is exposed to the elements to rid the family of burdensome and unproductive elements. For societies founded upon religions

that do not teach the inherent sanctity of human life as created by God, or those grounded in materialistic, communitarian, or utilitarian conceptions of human worth, these and similar practices pose no ethical problems and therefore may not even be regulated by law. So it is a clear indication of how far we Western nations, cradled in Christianity, have departed from our religious roots that abortion has long been legalized in almost all of them.

Still, there is an important distinction between an action that is legal and therefore has been blessed or at least permitted by society, and one that, though illegal, will occur here and there, in difficult circumstances or during temptation. All through the sixteen-plus centuries from Constantine to *Roe v. Wade*, there have been women in Christian countries who, because of poverty or desertion or other circumstances, aborted a pregnancy or committed infanticide. These abortions did not occur at anything like our current rate, and their existence does not discredit the law against them any more than the existence of thieves or murderers discredits laws against theft and murder. We can expect that a society whose religion teaches a demanding morality will, while experiencing some success in reigning in the behaviors it most strongly condemns, fall short of their complete eradication. In a fallen world, the gap between ideals and actions will always yawn wider than we would like and shock those expecting more from adherents of such a creed.

On the other hand, we cannot say that our own era morally surpasses those before us just because we see less incongruity between our secular values and the behaviors of those formed in them. A lower moral bar will require less effort from those trying to reach it.

People do not like to feel alone in their acts of selfishness, shameful behavior, cowardice, or mediocrity. We naturally wish to regard those who appear to surpass us in heroism, self-sacrifice, and courage as no better than we are. They are hypocrites or their motives are twisted or their self-restraint and heroics are evidence of an unbalanced personality or they pride themselves on being superior to us. And of course these explanations are sometimes true. But virtue, excellence, and courage do exist. As with individuals, so with civilizations and eras. There are markedly better and worse times and places, not just in terms of material progress and scientific innovation (air conditioning, anesthesia, antibiotics, smartphones) and not even in levels of cultural production (the pyramids, the Taj Mahal, Dante, Bach), but in moral and spiritual insights and (unfortunately), to a lesser degree, practice.

Human societies without number have engaged in human slavery, from the most primitive tribes enslaving their defeated neighbors to the most sophisticated Egyptian, Greek, and Roman civilizations to the antebellum American South. The presence of what we now confess to be the great stain of slavery

is not, unfortunately, the unusual note in history, but a near-universal note. But the admission that it is a great stain, because human beings should not be owned, and the tracing of the reason why humans should not be treated this way to our common human identity as beloved children of our Creator, arose from religion. The full detonation of that realization over great lengths of time took much too long. But over 1800 years of Christian history, it actively irritated the minds of Christians like the grain of sand in the oyster that over time forms a pearl.

Very early in the Christian era pagans remarked, not always positively, on differences they perceived in their Christian neighbors—such as their shrinking from the practice of abortion or infanticide and caring for not only their own sick but for those around them, even during epidemics when doing so imperiled their lives. The pattern of self-sacrificial love was woven into Christianity, however much imperfect individual Christians have rebelled against its practice.

What we see today, however, is something different. It is the result of several centuries of adulteration and dilution of Christian belief. Even among Americans not nowadays identifying their religion as “other” or “none,” it is harder to conduct a conversation about life issues based upon once-common first principles like the inherent worth of the human person. Increasingly, in my experience, debates on life issues that could once be conducted across religious divides founder on materialist or individualistic or emotionally based ethics—or on someone’s unwillingness to “impose their beliefs” on other people. Instead, “That’s my opinion, but everyone has to decide for themselves,” or “People need to do what makes them happy.”

This easygoing individuality coexists today with a brutally conformist morality on particular topics like gender. That’s another area where many of the nonreligious and “spiritual” people (as in “I’m not religious, I’m spiritual”) refuse even to take up the debating weapons of logical argument.

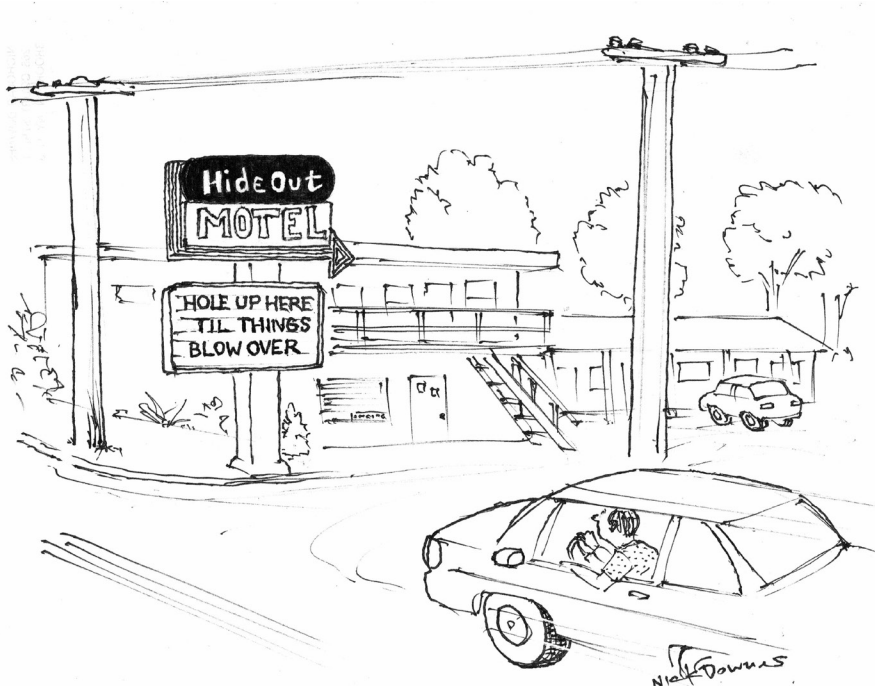
Thankfully, there are still clusters of people persuaded by and open to logical argument from common principles, even among unbelievers including atheist and agnostic proliferators. But unfortunately they seem in no danger of persuading the mass of atheists, agnostics, “others,” and “nones.” That is no slight to them—Christians and other believers, after all, are experiencing similar difficulties, and both groups find arguments that move only the heart often do not suffice to convince people that the life issues are one area where we should be thinking beyond individual choice.

Way back in the mid-twentieth century, C. S. Lewis noted that in his experience there was little point in trying to persuade a religious nonbeliever or someone whose god was reduced to a vaguely benevolent and permissive deity

that premarital sex is wrong. In 1940s Britain, strictures against fornication already seemed senseless outside the orthodox religious framework, just as the religiously disaffected and vaguely spiritual of our own day can't comprehend injunctions against euthanasia or homosexual marriage. Since the era of the 18th-century Deists, the moral authority of Christianity in the West has been ebbing in these areas, despite periods in which the tide seemed to be turning.

Throughout this long recession, atheists and agnostics have repeatedly assured people that the shrinking influence of Christianity in the West need make no difference to the kind or level of morality our secularizing civilization adheres to. "An atheist can be as good a person as a Christian." And indeed many atheists have led lives at least as good as many Christians. But the larger question, whose answer is perhaps beginning to take recognizable shape, is whether an atheist or agnostic or rapidly "spiritual" or materialist society can be as good—can form people to be as good—as a Christian society, or at least can suffer pangs of conscience at not being better.

Two thousand years ago, Jesus demonstrated his ability to walk on water. What we now wait to see is whether the morally "evolved" nations of the West, having jettisoned their Origin Story in favor of a myth of infinite progress and a consequent abhorrence of the past, can perform the miracle of perambulating in mid-air, unsupported philosophically and ethically by any real foundation of meaning—any explanation of our purpose, our origin and goal, our Creator and Redeemer.



BOOKNOTES

SURVIVOR: AN ABORTION SURVIVOR'S SURPRISING STORY OF CHOOSING FORGIVENESS AND FINDING REDEMPTION

Claire Culwell with Lois and Steve Rabey

(Waterbrook/Multnomah Books, 2021, paperback, 189 pages, \$17.00, e-book, \$11.99)

SPEAKING FOR THE UNBORN: 30-SECOND PRO-LIFE REBUTTALS TO PRO-CHOICE ARGUMENTS

Steven A. Christie

(Emmaus Road, 2022, paperback, 168 pages, \$14.95, e-book, \$14.95).

Reviewed by John M. Grondelski

Ronald Reagan observed that supporters of abortion had one thing in common: They were all already born. The 40th president's insight underscores another critical fact: Every time abortion intervenes, a voice goes missing from the human conversation.

Claire Culwell is one of a growing number of children who survived an abortion attempt and are now giving voice to that experience. Melissa Ohden, author of *You Carried Me* (Plough) and founder of the website Abortion Survivors Network (abortion survivors.org), is another.

Culwell was conceived by a 13-year-old girl named Tonya, whose mother pressured her into having an abortion. A few weeks later, Tonya discovered she was still pregnant, the abortionist having failed to notice that she was carrying twins. Her sibling was killed, but by the time it became known that Claire had survived, it was too late under Oklahoma law for Tonya to have another abortion.

Born in 1988, Claire was adopted by Warren and Barbara Culwell, an active Christian family whose desire for children had been stymied by infertility. Although she knew from childhood that she was adopted, Claire was unaware of her birth mother's abortion until they met when she was 21 years old.

Tonya had been standoffish towards her daughter, but when they finally did meet she broke down and revealed the guilty secret she had been bearing for more than two decades: She had intended to abort her child, not once but twice.

Survivor is a gripping, personal story about how two people can reconcile despite one of them having sought the death of the other. That account

itself—of how the healing power of forgiveness can make all things new—makes for compelling reading. The book, however, is also an illuminating chronicle of how Claire, who admits to never having thought too much about life issues, became a pro-life activist (and brought Tonya along with her).

Before she learned the painful details of her past, Claire had planned to become a nurse. But on returning home after meeting Tonya's mother—the grandmother who wanted Claire aborted—she was a ball of emotions. Looking out her apartment window, she saw people across the street whom she recognized as regulars. They were doing sidewalk counseling in front of a Planned Parenthood abortion clinic—the same clinic where Abby Johnson had her pro-life road-to-Damascus moment. Out of curiosity, Claire approached the counselors, got to know them, and eventually shared her story.

The rest—including her friendship with Abby Johnson—is history. Learning the circumstances of her birth mother's abortion gave Claire insight into what many women experience silently and alone. Noticing the presence of sidewalk counselors helped Claire find her own pro-life voice. Meeting Johnson was a force multiplier for her. Slowly, Claire also got Tonya involved in making her—their—story public. And, having stopped one day to help a homeless woman who turned out to be pregnant, Claire found she could accommodate a house guest. These small encounters had enormous consequences.

Claire Culwell has a distinct and important role to play in the struggle to restore the right to life to unborn children. But we are all called to engage in the abortion debate when opportunities present themselves to us. Steven A. Christie, both a physician and a lawyer, provides invaluable assistance in how to make the case for life in an informed and cogent way.

In *Speaking for the Unborn: 30-Second Pro-Life Rebuttals to Pro-Choice Arguments*, Christie provides quick, pithy, 30-second responses to several common pro-abortion arguments. The ripostes are to the point, punchy, and memorable. Consider this comeback to the claim that an embryo is just part of a woman's body:

The embryo is—in no way—a “part” of the mother's body. Science clearly defines “body part” as a structure that shares the same genetic code as the rest of the body (like the appendix, arms, tonsils, or heart) and does not direct its own development. The unborn child has a completely unique genetic code. Half of the time it even has a different sex! It also directs its own development. So the embryo clearly is a separate living human being residing temporarily inside his or her mother. That's the science of the matter (p. 33).

The book is replete with such jewels as “How does a six-inch journey

through the birth canal magically confer life or value?” “My own personal opposition to abortion is based on science, reason, morality, social justice, and the visible evidence.” “Abortion is a human issue, not a gender issue. You didn’t have to be black to oppose slavery . . .” It also features an amusing series of mock newspaper reports parodying pro-abortion slogans, e.g., a photograph of Justice Amy Coney Barrett headlined “Without Abortion, Women Might Have to Settle for Having 7 Kids and Sitting on the Highest Court in the Land.”

In an age of shrunk attention spans and soundbite communication, Christie recognizes the need to get our points across quickly and memorably. He provides model answers that can be memorized and tailored to individual interlocutors. He also suggests using technology to back up our arguments: Can you upload pictures depicting the stages of fetal development and, where appropriate, images of actual abortions, to your phone? Christie has also made videos that demonstrate how to make important points when debating abortion (you can access them at www.SpeakingForTheUnborn.org).

Intended to invigorate and arm proliferers in the ongoing abortion battle, both *Survivor* and *Speaking for the Unborn* merit a place on every proliferer’s bookshelf.

—*John M. Grondelski (Ph.D., Fordham) was former associate dean of the School of Theology, Seton Hall University, South Orange, New Jersey. All views herein are exclusively his own.*

FROM THE WEBSITE

FATHERS AND SONS

Jason Morgan

In Herodotus' *Histories* we learn that Croesus, King of Lydia, waged war upon his neighbor Cyrus II, the great king of the Persian Achaemenid Empire. At the outset, Croesus felt assured of his victory, having been told by the oracle at Delphi that he would destroy a great empire. When Croesus lost to Cyrus, however, he learned—too late—that the empire he was fated to destroy was his own.

“Croesus,” Cyrus asked the defeated and condemned Lydian king, “what man persuaded you to wage war against my land and become my enemy instead of my friend?” Croesus blamed “the god of the Hellenes” for inciting him to wage the ruinous war. It must have been Apollo, because “no one is so foolish as to choose war over peace,” Croesus said. “In peace sons bury their fathers, in war fathers bury their sons.”

As I write, the bitter lesson of war and loss is being learned anew in Eastern Europe. War is inverting the natural order of things. Russians and Ukrainians are burying their sons (and daughters). As death fills the news, it becomes easy to forget that this is not how things are supposed to be. Fathers are not supposed to bury their sons. Fathers are supposed to love and protect their sons, to risk their own lives to save their children—not the other way around.

I was powerfully reminded of this recently by a rare bit of hopeful news concerning Ukraine. In February and March, I read various reports about an Alabama medical doctor named Christopher Jahraus. Dr. Jahraus and his wife were in the process of adopting an orphaned boy named Sashko from Ukraine when war broke out. The Jahraus family had met Sashko before, and Sashko had even spent time with them in the United States. That was before the bombs started falling on Kiev. With his soon-to-be-adopted son suddenly in a war zone, Dr. Jahraus was anxious—as any father would be—to bring his boy home to safety.

I reached out to Dr. Jahraus to learn more about why he had decided to become an adoptive father. He responded with all the warmth and openness one would expect from a man eager to provide a loving home to a special-needs child, to be a father to a son being pulled into the horrors of war. “My wife and I have a blended family of five kids,” Dr. Jahraus explained to me in an e-mail. “We have talked about adoption before, but just hadn’t found the right fit in terms of programs. Then Bridges of Faith (BOF) came to our attention last August.”

Bridges of Faith is an Alabama-based Christian adoption agency that helps place Ukrainian orphans in homes in the United States.

“Dr. Tom Benz, the president and founder of Bridges of Faith,” Dr. Jahraus continued, “came to our church and talked to us about this idea of orphan hosting, of bringing a Ukrainian orphan here to live as part of our family for a month, just to see what a healthy, loving family looks like.

“My wife Gina and I met with Tom and his wife Nancy, and we became fast friends. The decision to host a child was obvious. In September or October, we got a couple of pictures of Sashko, and in very little time I had written him a letter to introduce us and gotten it translated into Ukrainian. Late last fall, everything was confirmed, and Sashko arrived for a month with us in December of 2021.”

Dr. Jahraus says that his family bonded with Sashko during the boy’s time in America. One of the highlights for him was taking Sashko to church. “We’re members of Christian Life Church, an Assemblies of God congregation in Birmingham,” Dr. Jahraus told me. “Sashko knows who Jesus is, and in short, he’s quite a natural little charismatic! The worship of God transcends language barriers, and seeing him lift his hands in worship was like getting a tiny glimpse of Heaven!”

Those glimpses of Heaven have given way these past few weeks to scenes from Hell. Bombed-out buildings, bullet-riddled vehicles, and streets strewn with the bodies of war-wracked dead. “The atrocities of war can be seen so readily on the tear-stained faces of the people of Ukraine,” Dr. Jahraus writes.

Not all of the atrocities are readily visible, however. Some lie hidden—requiring the love of a father to reveal.

Dr. Jahraus traveled to Poland on March 8, carrying a letter from Sashko’s attending physician stating that the boy (who was born with fetal alcohol syndrome) needs urgent medical care and must be evacuated to safety immediately. Dr. Jahraus had hoped to have Sashko brought over the Ukrainian border to Poland so that father and son could return to America together. However, Ukrainian officialdom denied his request. According to news outlets, the Ukrainian Service of Children’s Affairs contacted Dr. Jahraus while he was in Poland to announce that “by order of the Ministry of Social Policy of Ukraine, no children would be allowed to leave the country with ‘foreign nationals during hostilities.’” Dr. Jahraus was forced to board a plane for home without Sashko.

The current official moratorium on adopting children from Ukraine, Dr. Jahraus tells me, is due to fears about child trafficking. The chaos of war, it seems, presents opportunities for criminals to prey on the most vulnerable in society, kidnapping the young and selling them off for a quick profit. A related atrocity is that this criminal activity prevents children from be-

ing adopted, and also from receiving medical care. Without the love of Dr. Jahraus for Sashko, stories such as these, about the suffering of the weakest in society, might get lost in the news footage of explosions, gunfights, and roaring tanks.

But fathers do not give up on sons, no matter what the cost. Because of the temporary adoption moratorium, says Dr. Jahraus, “at this point I am only asking the Ukrainian government to grant us a six-month guardianship, so we can get Sashko here to safety, and also get him started in the critically important therapy he needs to overcome fetal alcohol syndrome. We have a letter written on behalf of Bridges of Faith by Ambassador Suzan Johnson Cook, the third Ambassador of the U.S. for International Religious Freedom, appealing to Ukrainian Ambassador Oksana Markarova to assist us in getting at least a temporary guardianship of Sashko for us.” The Ukrainian Embassy in D.C., Dr. Jahraus writes, has not yet responded.

I contacted the Embassy of Ukraine in Japan to see if I might glean some information about Sashko’s case from that alternative route. The Embassy replied on the morning of Tuesday, April 5, Japan time:

“Unprovoked Russian aggression has caused many sufferings among the Ukrainian population. One of the most affected of them are children, who are in the foster care, and whose adoption was jeopardized by the war. The Embassy of Ukraine in Japan does not follow Sashko’s case, since the adoption is to be done in the US. Therefore we advise you to follow up with the consular section of the Embassy of Ukraine in the U.S.”

The attempts to bring Sashko to safety continue, but some questions remain. Why would a doctor in Alabama, a father with five children at home already, seek out a special-needs orphan halfway around the world? Why would he keep trying to bring that orphan to the safety of a new home and family, despite the outbreak of war, bureaucratic red tape, and the pain involved in opening one’s heart to someone lost in a broken world?

Because the love of fathers sometimes has nothing to do with the accidents of birth. Adoption can make fathers and sons (or daughters) out of even the worst situations. These are things that proliferators know well, so it probably won’t surprise *Human Life Review* readers to learn that Dr. Jahraus is pro-life.

“In theology,” Dr. Jahraus tells me, “we talk about general revelation and natural law, those things which are so inherent to and obvious in God’s creation that, even if one never read the Bible, the truth of such things would still be obvious. As a physician, I can tell you that God programmed mothers and fathers to love and bond with their children, all the way down to the fact that when we hold a baby, we release oxytocin, a sort of bonding hormone.”

The natural world, in other words, speaks of the love and design of the

One who made it. But this is not the only reason that Dr. Jahraus is pro-life. “Long before I knew anything about physiology, from the first time I had heard of the notion of abortion, it was just so obviously and dreadfully wrong,” he says. “Abortion is so shamelessly destructive of the remarkable and beautifully intricate way in which God brings us into existence.”

He goes on: “In high school and college, and even in med school, I formed a deeper understanding of my position, which now extends to include an opposition to euthanasia and capital punishment—oppositions which aren’t always ‘politically congruent’ in the contemporary sense. For example, on euthanasia, I’m a Protestant evangelical, but I gained so much appreciation for how God moved in Pope John Paul II when he argued that when a person asks for euthanasia, he or she isn’t in fact asking to be put to death, he or she is in fact crying out for the love, care, and compassion of the family, doctors, and caregivers around them.”

Dr. Jahraus knows well the difference between administering care and doing harm. He is an oncologist. In helping people with cancer to heal, he does the work of God as part of his chosen profession. “The Bible is right (obviously) when it asserts that love conquers all,” Dr. Jahraus writes. “That influences my practice as a radiation oncologist a LOT! If every God-ordained moment of every life is sacred, and it is, then how could I not want to care for a child, in Sashko’s case, whose mother was stricken with alcoholism, and whose disease in turn has left Sashko with developmental disabilities that can (maybe) be reversed if we can get him here and offer him the rehabilitative care, and moreover the love, that he can’t get in a Ukrainian orphanage, and now, in a war zone?”

War rages now in Europe, as men in kingly office—men as rich and proud as Croesus once was—strive to regain bits and pieces of an imagined “motherland.” Sons on both sides of the divide go down into the dirt as the contest for the motherland continues. In the past, sons have died for fatherlands, too. Fathers bury sons in war, offer them up to political ambition.

But there is a different kind of “Fatherland,” a different kind of connection possible between a Father and His sons. The love that God has for all of us is the logic of adoption, of the fatherhood that is chosen out of love for one’s brothers and sisters. That Fatherland demands life, not death. In war, fathers bury sons. In Heaven, there is no more death, no more burying in the ground. Adoption gives all of us a peek at what that new life will be, when there are no more wars and no more abandoned or trafficked children. The pro-life father shows the world what our pro-life Father wants for all of His sons and daughters.

“It’s ironic,” Dr. Jahraus writes in closing. “My heritage is what’s known

as ‘Germans from Russia.’ Three hundred years ago, my great-great-great-grandfather farmed the land in a German settlement called Rohrbach, located just outside the now-Ukrainian city of Mykolaiv. That makes my connection with Sashko feel even deeper. But of course! God knew before either of us, and many of our ancestors, were even conceived that He would bring us together. With a plan of God’s that great, how could I be anything but pro-life?”

—*Jason Morgan is an associate professor at Reitaku University in Kashiwa, Japan.*

SILLY-CLEVER PRO-CHOICE ARGUMENTS, AND HOW TO TAKE THEM DOWN

David Mills

It was an example of the kind I call “silly-clever,” borrowing the term from George Orwell. He used it in criticizing the work of the major Christian apologists of his day, including Chesterton and Lewis. (I don’t think his argument against them is very good, for what it’s worth.)

The pro-choice meme began: “Here’s a test. I’m holding a baby in one hand and a petri dish in the other. I’m going to drop one. You choose which.” It continued: “If you really truly believe an embryo is the same thing as a baby, it should be impossible for you to decide. You should have to flip a coin, that’s how impossible the decision should be. Shot in the dark, you saved the baby. Because you’re aware there’s a difference. Now admit it.”

It’s “silly-clever”: clever because the assertion seems a legitimate “gotcha” point—one that takes down the other side’s argument in just a few words—and silly because it’s actually just silly. You may feel its force at first, but when you think about it, you see how dumb (or frivolous or specious) the argument really is.

Silly-Clever Works

But still, few proliferators can refute the good silly-clever claim efficiently and quickly. It leaves most of us not knowing what to say, and the speaker beaming with triumph. It feels like the other team kicked the winning field goal just as time ran out, and all you can do is slump back to the locker room.

Most of these memes, like the one we’re talking about, include a big “gotcha”

effect. The people who agree with the claim like it because it says what they want to hear and shows (they think) how foolish or stupid are the people who don't agree.

Most of us who disagree can't deal well with silly-clever stuff put into short punchy memes. Sometimes we know the silly-clever stuff is wrong but can't say exactly how it's wrong. We certainly don't have a short punchy meme to give in return. Given the nature of the argument, a meme invites another meme.

Other times, we know how the claim is wrong, but don't know how to explain that without trying to explain the nature of free will, the moral law, the problem of evil . . . while the memer just smirks. Two pro-life philosophers, my friend Robert P. George and Christopher Tollefsen, wrote an excellent refutation of a similar silly-clever argument, but it's 2,047 words long. Presented with a response like this, the memer has long since rolled his eyes and left. A lot of people who want to see the meme refuted have also left.

And of course we often have the problem of people who agree with the meme and think there is nothing we can possibly say that will disprove it, so they either won't listen or won't stop talking. They also feel they've kicked the winning field goal as time ran out, and expect us to leave the field while they celebrate.

"Now admit it"

Now let's look at two very good examples of how to refute this meme.

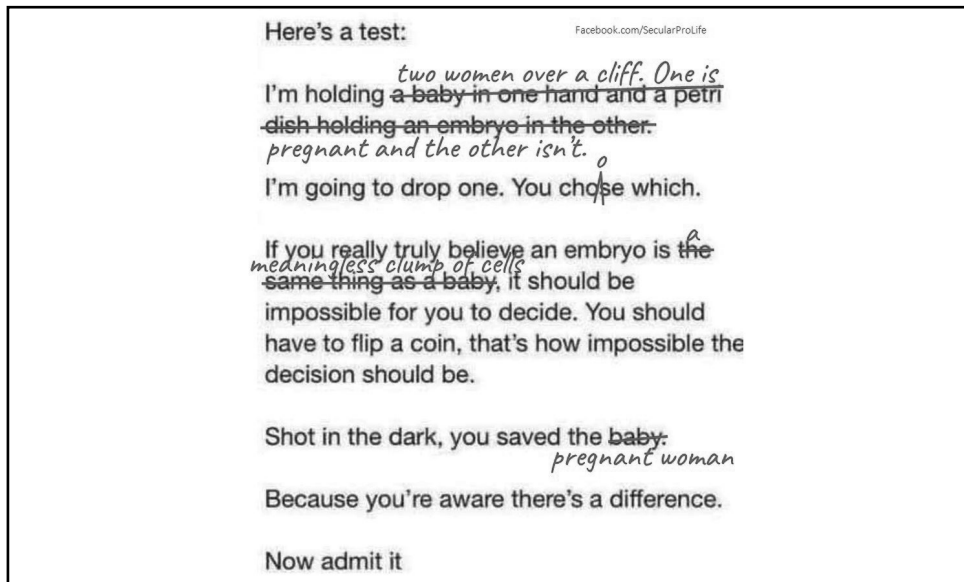
The writer Kate Cousino wrote in response to my posting the meme on Facebook:

We know that in most situations, people will, under pressure and without time for thought, instinctively help the person they relate to most strongly. Which means that quite a few people will save someone of their own race over someone of another race; their own culture over another culture; their own neighbor over a stranger; their own child over someone else's child.

The meme depends on people either not recognizing or admitting the truth of Cousino's observation. "None of those instinctive, unconscious biases reflect anything real about the inherent value of people who are different, less recognizably sympathetic, less recognized as 'one of us' at the subconscious level," she continues. "This is the point of the inherent bias test—to make us realize that our unconscious biases frequently run counter to our conscious values, to remind us of the need to be mindful and not let the primitive hind-brain run the show."

The second example comes from Secular Pro-Life, a group that takes these things apart very well.

They usually correct the memes with a red pen and turn the pro-choice argument on its head. And as it happens, they rewrote this one. Here's their version:



The Good Responses

How do Cousino and Secular Pro-Life do it? Cousino doesn't give a memed response. She needs 144 words. Not many, though, and few enough that people will listen. She accepts the meme's claim. (I think most of us would want to start our response by trying to deny it, but that won't work because the meme's right.)

She then points out that though generally true, the claim doesn't address the real question. The real question doesn't concern our motives in choosing what we choose, but the inherent value of the people we're talking about. She explains why we might choose what we choose, which has the effect of further undermining the meme.

Cousino then does something most of us probably wouldn't think of doing. She refers to an objective standard, one the memers themselves will accept. It emphasizes society's interest in uncovering such biases in order that we not act on them. This insight generally applies to racial prejudice, but it applies just as much to the erasure of the humanity of the unborn child. It's almost a "Gotcha!" itself.

Secular Pro-Life does give a memed response. As I say, they're good at it. They rewrite the meme as if they're correcting a student's paper. They simply flip the argument into the same kind of "Gotcha!" argument, but one the pro-choicers can't answer without contradicting their own beliefs. They invalidate the argument by using it against the pro-choicers.

Cousino takes the meme seriously, and takes it down. Secular Pro-Life doesn't take it seriously, and takes it down. In either case, down it goes.

Most of us aren't as insightful as Cousino or as clever as Secular Pro-Life. We're blessed to have people like them defending the life of the unborn. But we can learn from their example and practice doing what they do. Some of us may find we can do the same thing, if we follow models like these.

—*David Mills, former editor of Touchstone and First Things, is a columnist for OSV, the National Catholic Register, and other Catholic publications.*

GO TO THE FUNERAL

Tara Jernigan

"There was a funeral at school today."

I don't suppose that's something you often hear, but that was how my youngest son answered a recent "How was school?" query. Usually, since he's sixteen, his response is mundane, often a little cynical. Why describe the school day when a grunted "Boring" will suffice? The funeral, however, had got his attention, and he was ready to talk.

I had known there would be a funeral that day at school. The principal had sent out an email the night before, encouraging parents to discuss the arrangements with their children, especially the younger ones, and giving us the option of having them attend a study hall instead. Since all the students in the high school can choose study hall instead of chapel anyway, discussing the funeral with my teenager was not high on my priority list, so it caught him by surprise.

One of the school's benefactors, an elderly gentleman who never had children of his own, had passed away the week before. I thought it was particularly touching that the chapel in the school he had so generously supported would host his funeral. My son saw it differently: "They had the body there, and a priest and everything." As an adult, this made perfect sense to me—that a Catholic school would have a Catholic funeral for a Catholic man. I was tempted, but resisted my own inner teenager's urge to answer my son by saying, "Well, duh!"

Yet while it made perfect sense in one context, my son was right, too. I've never heard of a funeral being held in a (Pre-K through 12th Grade) school chapel on a school day, and doubt I ever will hear of another one. Nothing seems further from the realm of small children than the funeral of a 95-year-old man none of them knew. There is no sharper contrast between getting

educated and growing up than growing old and dying.

A few years ago, I came across an internet meme that made a poignant observation: When we were children, what we failed to notice was that as we were growing up, our parents were growing old. I would quibble with it, since my children are now mostly grown, and I certainly do not consider myself to be mostly old. Nonetheless, the point stands: Community requires that people of all ages and stages of life walk together on a common journey. History may seem linear, with generations grouped together by similarities and staying each in their own place. Community, however, is more fluid, transcending personal preferences and relationships. We do well, once we have reached enough maturity to make the attempt, to look beyond our own place in that community and love others as they truly are, whatever their races, habits, fears, hopes; whatever their place in our world.

Though none of the children knew him, this man was a part of their community, walking unseen alongside them for many years. He supported their education. He likely prayed regularly for them, without ever knowing any of their names. It was fitting that they be the ones to commend him to the Lord at the last.

My son, being sixteen and finding funerals creepy (his word!), and funerals for strangers very weird indeed, disagreed. I cannot recall what life-altering words of maternal wisdom I shared with him after he wound down his teenaged rant about funerals. I have learned to love the times when my sons talk to me, even if they are carrying on about their developing, and usually rather tedious, opinions on the world around them. His soapbox was more important to the moment than any thoughts I might have had on the subject.

Still, what I hope he will remember when he is old and grey (oh, dear Lord, may I live long enough to see him with grey hair for all the ones he has given me) are all the funerals for strangers that came his way, all the times he supported a grieving friend, all the times he saw the Church commend her own to God—and all the times he went to a funeral just because it was the right thing for someone to do.

Funerals are, very simply, the Church being who she was created to be: a midwife to escort each of us into the life to come—and a joyous, grieving, awkward community along the way.

—Tara Jernigan is a vocational deacon at Christ Anglican Church, New Brighton, Pennsylvania. She teaches Biblical Languages to high school students at Veritas Scholars' Academy and serves as an adjunct instructor for Trinity School for Ministry. Tara and her husband have two teenagers and one adult son.

YOU DON'T SAY!

Diane Moriarty

Abortion serves men, because it allows them sex without responsibility, and always has. “You take care of it.” A Democratic administration is intent on enshrining it. Who says they don’t open doors for us anymore? Which is why the hands-off-my-body placards at abortion-rights rallies and posters in dorm rooms—the tacit implication being that they are male hands—make no sense. But it’s an emotional narrative and it’s got legs, which says a lot about the seething and under-examined anger that “pro-choice” women have towards men. Indeed, in so many ways, the imagery and posturing surrounding abortion presents as one thing but is actually another. A rose is a rose is a rose? The hell it is.

At a press conference last fall, Speaker of the House Nancy Pelosi responded to criticism of her so-called Women’s Health Protection Act (“health” presented here as one thing but really meaning another), which aims to codify abortion on demand in federal law in order to nullify the overturning of *Roe v. Wade* (should it happen). Pelosi pointed out that she had given birth to five children in six years, and then insisted that only those who did as she had done had a right to be critical of her stance. Lots of pro-life women have lots of kids, and Pelosi knows it. And demanding awe for the “five kids in six years” marathon of her own choosing? What’s that got to do with the price of coffee? Pelosi’s chin-jutting challenge was really a dig at those for whom it’s impossible to bear children at all, that is, men, effectively eliminating 50 percent of the population from the discussion.

“When men can get pregnant then they can tell me what to do” is a pro-abortion trope. Who are these men? Politicians? A mercurial lot. Last year, “pro-choice” Republican New Hampshire Governor Sununu attempted to add some “pro-life” cred to his resume by not vetoing a state budget bill that included a late-term abortion ban, hoping it would bring him national attention with a bid for the U.S. Senate. The abortion lobby applied pressure and, presto, now he’s trying to gut it (as per Kristan Hawkins, Students for Life Action). Again, “When a man gets pregnant . . .” creates a standard impossible to meet but by foot-stomping such as Pelosi’s it’s anointed as criteria. It’s a poor argument, embarrassing in its flawed logic, and built on sand. Should men stop wanting abortion on demand—that’s when “pro-choice” women need to start worrying. Fat chance.

A familiar female posture when the subject of abortion arises is with eyebrows raised, arms outstretched, palms turned up, and then, in a defensive tone, uttering: “It’s legal!” This doesn’t only indicate end of discussion; it

indicates end of her need to be involved in any discussion. Because it's legal. That's what she says, but does she really think that black people being handcuffed and arrested for the crime of sitting down at an all-white lunch counter was justice for all? She says it's about what's legal, when what she means is it's about having a free pass to suspend feeling. And those are the women still capable of feeling something.

The pro-abortion front says it is terrified at the mere possibility that *Roe v. Wade* could be overturned with the *Dobbs* case. But what would that mean? That overnight every state in the union must make abortion illegal the way *Roe* declared it must be legal in every state? Ridiculous. Because that is the precise constitutional issue that afflicts *Roe*. Overturning it would only mean that the issue would return to the jurisdiction of individual states. In practical terms, that might mean extra travel for some seekers of abortion. But in America, the land of the entrepreneur, someone no doubt will launch a charter flight business, low rates. Gosh knows, Amtrak might even run a Women's "Health" Protection Acela special. When Texas won the first round in its heartbeat-law legal fight, newly minted New York Governor Hochul jumped up to promise a free trip to her state for any woman in Texas who wanted an abortion. The pesky business of who would pay for it was sketchy, but, hey, it's the thought that counts.

So, they say it's about access, but what do they really mean? It's about an idea. The idea that saying abortion is a "social good" and "sacred right" in one state but a "social ill" and "barbaric transgression" in another makes it untidy. It's no longer one size fits all. And bureaucracy especially loves one size fits all. It's ersatz consensus. Not that they'll say so. Even if it's what they mean.

—Diane Moriarty is a freelance writer living in Manhattan.

SACRED SPACE

W. Ross Blackburn

For you formed my inward parts; you knitted me together in my mother's womb. I praise you, for I am fearfully and wonderfully made. Wonderful are your works; my soul knows it very well. My frame was not hidden from you, when I was being made in secret, intricately woven in the depths of the earth. Your eyes saw my unformed substance; in your book were written, every one of them, the days that were formed for me, when as yet there was none of them (Psa. 139:13-16).

The Bible constantly uses the things of this world to instruct us. Proverbs, for example, teaches us the importance of industry: "Go to the ant, O sluggard; consider her ways, and be wise" (Prov 6:6). To illustrate the life-giving

power of God's word, Isaiah points to the rain that causes plants to grow (Isa 55:10-11). And Jesus, lamenting the obstinance of the Pharisees, says he often longed to gather them as a hen gathers her chicks under her wings (Matt 23:37; Luke 13:34). Throughout the Scriptures, we see things of the world declaring the glory of God: The name of the Lord is a strong tower; the Lord is a sun and a shield.

Another of these signposts is what we might call sacred space, set apart for the Lord and His purposes. The cardinal example of sacred space is the Holy of Holies, the place in the Tabernacle where the Lord dwelt. The Holy of Holies was indeed holy, set apart from the rest of the world and accessible only to the high priest, who was permitted entrance—and with very specific instructions—only once each year. Anyone else who approached the Holy of Holies did so at the peril of death.

The womb is also a sacred space. It is set apart from the rest of the world; while inside God works, knitting His image together. He seals off entry to the womb, so that the baby remains protected as God and the mother undertake this sacred work. Then, when the Lord's weaving is finished, and the baby is ready to encounter the world, He opens the womb.

The abortionist, therefore, has some work to do. He must open that which is sealed shut. He must force his way into this sacred place, where he then inserts weapons of destruction—knives to cut and forceps to twist—tearing apart the child God has woven together, removing pieces bit by bit from a now ravaged womb. Then, in a grotesque and blasphemous parody of God's work, the abortionist reassembles the dismembered body on a tray in order to ensure that his work is complete.

Why does he do this? Why does he destroy the work of God? Because, in fact, if the abortionist does not destroy the baby—if the child somehow survives—it is called a “botched abortion.” Contrary to the familiar rhetoric, the goal of abortion is not the termination of a pregnancy. The goal is a dead child. It is a violent and intentionally mortal assault on both the work of God and the image of God.

Am I making too much of the parallel? I don't think so. And I am not the only one to make it. Peter Leithart pushes further. Noting that the word used for knitting the child together in the womb is the same word used for the weaving of the curtains of the Tabernacle, Leithart argues that the infant is being made into a dwelling place of God. The implications are obvious, and terrifying. Leithart warns: “We are talking here not only about slaughter of the innocent but about sacrilege, a direct attack on ‘space’ claimed by God. That is the most serious offense possible. Paul's warning hovers ominously over our nation: ‘If any man destroys the temple of God, God will destroy

him, for the temple of God is holy.””

It is a testimony to the blinding hardness of the human heart that we can declare something as obviously unnatural and destructive as abortion to be a woman's right. And it is a testimony to the apathy of the church that we think so little about it. But God is watching. The frame of the unborn child may be hidden from the world, but the child is not hidden from Him.

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APPENDIX A

[Ronald Reagan, while sitting as the fortieth president of the United States, sent us this article shortly after the tenth anniversary of Roe v. Wade; we printed it with pride in our Spring 1983 issue, and have proudly reprinted it a few times since then.]

Abortion and the Conscience of the Nation

Ronald Reagan

The 10th anniversary of the Supreme Court decision in *Roe v. Wade* is a good time for us to pause and reflect. Our nationwide policy of abortion-on-demand through all nine months of pregnancy was neither voted for by our people nor enacted by our legislators—not a single state had such unrestricted abortion before the Supreme Court decreed it to be national policy in 1973. But the consequences of this judicial decision are now obvious: since 1973, more than 15 million unborn children have had their lives snuffed out by legalized abortions. That is over ten times the number of Americans lost in all our nation's wars.

Make no mistake, abortion-on-demand is not a right granted by the Constitution. No serious scholar, including one disposed to agree with the Court's result, has argued that the framers of the Constitution intended to create such a right. Shortly after the *Roe v. Wade* decision, Professor John Hart Ely, now Dean of Stanford Law School, wrote that the opinion "is not constitutional law and gives almost no sense of an obligation to try to be." Nowhere do the plain words of the Constitution even hint at a "right" so sweeping as to permit abortion up to the time the child is ready to be born. Yet that is what the Court ruled.

As an act of "raw judicial power" (to use Justice White's biting phrase), the decision by the seven-man majority in *Roe v. Wade* has so far been made to stick. But the Court's decision has by no means settled the debate. Instead, *Roe v. Wade* has become a continuing prod to the conscience of the nation.

Abortion concerns not just the unborn child, it concerns every one of us. The English poet, John Donne, wrote: ". . . any man's death diminishes me, because I am involved in mankind; and therefore never send to know for whom the bell tolls; it tolls for thee."

We cannot diminish the value of one category of human life—the unborn—without diminishing the value of all human life. We saw tragic proof of this truism last year when the Indiana courts allowed the starvation death of "Baby Doe" in Bloomington because the child had Down's Syndrome.

Many of our fellow citizens grieve over the loss of life that has followed *Roe v. Wade*. Margaret Heckler, soon after being nominated to head the largest department of our government, Health and Human Services, told an audience that she believed abortion to be the greatest moral crisis facing our country today. And the revered Mother Teresa, who works in the streets of Calcutta ministering to dying people in

her world-famous mission of mercy, has said that “the greatest misery of our time is the generalized abortion of children.”

Over the first two years of my Administration I have closely followed and assisted efforts in Congress to reverse the tide of abortion-efforts of Congressmen, Senators and citizens responding to an urgent moral crisis. Regrettably, I have also seen the massive efforts of those who, under the banner of “freedom of choice,” have so far blocked every effort to reverse nationwide abortion-on-demand.

Despite the formidable obstacles before us, we must not lose heart. This is not the first time our country has been divided by a Supreme Court decision that denied the value of certain human lives. The *Dred Scott* decision of 1857 was not overturned in a day, or a year, or even a decade. At first, only a minority of Americans recognized and deplored the moral crisis brought about by denying the full humanity of our black brothers and sisters; but that minority persisted in their vision and finally prevailed. They did it by appealing to the hearts and minds of their countrymen, to the truth of human dignity under God. From their example, we know that respect for the sacred value of human life is too deeply engrained in the hearts of our people to remain forever suppressed. But the great majority of the American people have not yet made their voices heard, and we cannot expect them to—any more than the public voice arose against slavery—*until* the issue is clearly framed and presented.

What, then, is the real issue? I have often said that when we talk about abortion, we are talking about two lives—the life of the mother and the life of the unborn child. Why else do we call a pregnant woman a mother? I have also said that anyone who doesn’t feel sure whether we are talking about a second human life should clearly give life the benefit of the doubt. If you don’t know whether a body is alive or dead, you would never bury it. I think this consideration itself should be enough for all of us to insist on protecting the unborn.

The case against abortion does not rest here, however, for medical practice confirms at every step the correctness of these moral sensibilities. Modern medicine treats the unborn child as a patient. Medical pioneers have made great breakthroughs in treating the unborn—for genetic problems, vitamin deficiencies, irregular heart rhythms, and other medical conditions. Who can forget George Will’s moving account of the little boy who underwent brain surgery six times during the nine weeks before he was born? Who is the *patient* if not that tiny unborn human being who can feel pain when he or she is approached by doctors who come to kill rather than to cure?

The real question today is not when human life begins, but, *What is the value of human life?* The abortionist who reassembles the arms and legs of a tiny baby to make sure all its parts have been torn from its mother’s body can hardly doubt whether it is a human being. The real question for him and for all of us is whether that tiny human life has a God-given right to be protected by the law—the same right we have.

What more dramatic confirmation could we have of the real issue than the Baby Doe case in Bloomington, Indiana? The death of that tiny infant tore at the hearts

of all Americans because the child was undeniably a live human being—one lying helpless before the eyes of the doctors and the eyes of the nation. The real issue for the courts was *not* whether Baby Doe was a human being. The real issue was whether to protect the life of a human being who had Down's Syndrome, who would probably be mentally handicapped, but who needed a routine surgical procedure to unblock his esophagus and allow him to eat. A doctor testified to the presiding judge that, even with his physical problem corrected, Baby Doe would have a "non-existent" possibility for "a minimally adequate quality of life"—in other words, that retardation was the equivalent of a crime deserving the death penalty. The judge let Baby Doe starve and die, and the Indiana Supreme Court sanctioned his decision.

Federal law does not allow federally-assisted hospitals to decide that Down's Syndrome infants are not worth treating, much less to decide to starve them to death. Accordingly, I have directed the Departments of Justice and HHS to apply civil rights regulations to protect handicapped newborns. All hospitals receiving federal funds must post notices which will clearly state that failure to feed handicapped babies is prohibited by federal law. The basic issue is whether to value and protect the lives of the handicapped, whether to recognize the sanctity of human life. This is the same basic issue that underlies the question of abortion.

The 1981 Senate hearings on the beginning of human life brought out the basic issue more clearly than ever before. The many medical and scientific witnesses who testified disagreed on many things, but not on the *scientific* evidence that the unborn child is alive, is a distinct individual, or is a member of the human species. They did disagree over the value question, whether to give value to a human life at its early and most vulnerable stages of existence.

Regrettably, we live at a time when some persons do not value all human life. They want to pick and choose which individuals have value. Some have said that only those individuals with "consciousness of self" are human beings. One such writer has followed this deadly logic and concluded that "shocking as it may seem, a newly born infant is not a human being."

A Nobel Prize winning scientist has suggested that if a handicapped child "were not declared fully human until three days after birth, then all parents could be allowed the choice." In other words, "quality control" to see if newly born human beings are up to snuff.

Obviously, some influential people want to deny that every human life has intrinsic, sacred worth. They insist that a member of the human race must have certain qualities before they accord him or her status as a "human being."

Events have borne out the editorial in a California medical journal which explained three years before *Roe v. Wade* that the social acceptance of abortion is a "defiance of the long-held Western ethic of intrinsic and equal value for every human life regardless of its stage, condition, or status."

Every legislator, every doctor, and every citizen needs to recognize that the real

issue is whether to affirm and protect the sanctity of all human life, or to embrace a social ethic where some human lives are valued and others are not. As a nation, we must choose between the sanctity of life ethic and the “quality of life” ethic.

I have no trouble identifying the answer our nation has always given to this basic question, and the answer that I hope and pray it will give in the future. America was founded by men and women who shared a vision of the value of each and every individual. They stated this vision clearly from the very start in the Declaration of Independence, using words that every schoolboy and schoolgirl can recite:

We hold these truths to be self-evident, that all men are created equal, that they are endowed by their Creator with certain unalienable rights, that among these are life, liberty, and the pursuit of happiness.

We fought a terrible war to guarantee that one category of mankind—black people in America—could not be denied the inalienable rights with which their Creator endowed them. The great champion of the sanctity of all human life in that day, Abraham Lincoln, gave us his assessment of the Declaration’s purpose. Speaking of the framers of that noble document, he said:

This was their majestic in their interpretation of the economy of the Universe. This was their lofty, and wise, and noble understanding of the justice of the Creator to His creatures. Yes, gentlemen, to all His creatures, to the whole great family of man. In their enlightened belief, nothing stamped with the divine image and likeness was sent into the world to be trodden on ... They grasped not only the whole race of man then living, but they reached forward and seized upon the farthest posterity. They erected a beacon to guide their children and their children’s children, and the countless myriads who should inhabit the earth in other ages.

He warned also of the danger we would face if we closed our eyes to the value of life in any category of human beings:

I should like to know if taking this old Declaration of Independence, which declares that all men are equal upon principle and making exceptions to it where will it stop. If one man says it does not mean a Negro, why not another say it does not mean some other man?

When Congressman John A. Bingham of Ohio drafted the Fourteenth Amendment to guarantee the rights of life, liberty, and property to all human beings, he explained that *all* are “entitled to the protection of American law, because its divine spirit of equality declares that all men are created equal.” He said the rights guaranteed by the amendment would therefore apply to “any human being.” Justice William Brennan, writing in another case decided only the year before *Roe v. Wade*, referred to our society as one that “strongly affirms the sanctity of life.”

Another William Brennan—not the Justice—has reminded us of the terrible consequences that can follow when a nation rejects the sanctity of life ethic:

The cultural environment for a human holocaust is present whenever any society can be misled into defining individuals as less than human and therefore devoid of

value and respect.

As a nation today, we have *not* rejected the sanctity of human life. The American people have not had an opportunity to express their view on the sanctity of human life in the unborn. I am convinced that Americans do not want to play God with the value of human life. It is not for us to decide who is worthy to live and who is not. Even the Supreme Court's opinion in *Roe v. Wade* did not explicitly reject the traditional American idea of intrinsic worth and value in all human life; it simply dodged this issue.

The Congress has before it several measures that would enable our people to reaffirm the sanctity of human life, even the smallest and the youngest and the most defenseless. The Human Life Bill expressly recognizes the unborn as human beings and accordingly protects them as persons under our Constitution. This bill, first introduced by Senator Jesse Helms, provided the vehicle for the Senate hearings in 1981 which contributed so much to our understanding of the real issue of abortion.

The Respect Human Life Act, just introduced in the 98th Congress, states in its first section that the policy of the United States is "to protect innocent life, both before and after birth." This bill, sponsored by Congressman Henry Hyde and Senator Roger Jepsen, prohibits the federal government from performing abortions or assisting those who do so, except to save the life of the mother. It also addresses the pressing issue of infanticide which, as we have seen, flows inevitably from permissive abortion as another step in the denial of the inviolability of innocent human life.

I have endorsed each of these measures, as well as the more difficult route of constitutional amendment, and I will give these initiatives my full support. Each of them, in different ways, attempts to reverse the tragic policy of abortion-on-demand imposed by the Supreme Court ten years ago. Each of them is a decisive way to affirm the sanctity of human life.

We must all educate ourselves to the reality of the horrors taking place. Doctors today know that unborn children can feel a touch within the womb and that they respond to pain. But how many Americans are aware that abortion techniques are allowed today, in all 50 states, that burn the skin of a baby with a salt solution, in an agonizing death that can last for hours?

Another example: two years ago, the *Philadelphia Inquirer* ran a Sunday special supplement on "The Dreaded Complication." The "dreaded complication" referred to in the article—the complication feared by doctors who perform abortions—is the survival of the child despite all the painful attacks during the abortion procedure. Some unborn children *do* survive the late-term abortions the Supreme Court has made legal. Is there any question that these victims of abortion deserve our attention and protection? Is there any question that those who *don't* survive were living human beings before they were killed?

Late-term abortions, especially when the baby survives, but is then killed by starvation, neglect, or suffocation, show once again the link between abortion and infanticide. The time to stop both is now. As my Administration acts to stop infanticide, we will be fully aware of the real issue that underlies the death of babies

before and soon after birth.

Our society has, fortunately, become sensitive to the rights and special needs of the handicapped, but I am shocked that physical or mental handicaps of newborns are still used to justify their extinction. This Administration has a Surgeon General, Dr. C. Everett Koop, who has done perhaps more than any other American for handicapped children, by pioneering surgical techniques to help them, by speaking out on the value of their lives, and by working with them in the context of loving families. You will not find his former patients advocating the so-called “quality-of-life” ethic.

I know that when the true issue of infanticide is placed before the American people, with all the facts openly aired, we will have no trouble deciding that a mentally or physically handicapped baby has the same intrinsic worth and right to life as the rest of us. As the New Jersey Supreme Court said two decades ago, in a decision upholding the sanctity of human life, “a child need not be perfect to have a worthwhile life.”

Whether we are talking about pain suffered by unborn children, or about late-term abortions, or about infanticide, we inevitably focus on the humanity of the unborn child. Each of these issues is a potential rallying point for the sanctity of life ethic. Once we as a nation rally around anyone of these issues to affirm the sanctity of life, we will see the importance of affirming this principle across the board.

Malcolm Muggeridge, the English writer, goes right to the heart of the matter: “Either life is always and in all circumstances sacred, or intrinsically of no account; it is inconceivable that it should be in some cases the one, and in some the other.” The sanctity of innocent human life is a principle that Congress should proclaim at every opportunity.

It is possible that the Supreme Court itself may overturn its abortion rulings. We need only recall that in *Brown v. Board of Education* the court reversed its own earlier “separate-but-equal” decision. I believe if the Supreme Court took another look at *Roe v. Wade*, and considered the real issue between the sanctity of life ethic and the quality of life ethic, it would change its mind once again.

As we continue to work to overturn *Roe v. Wade*, we must also continue to lay the groundwork for a society in which abortion is not the accepted answer to unwanted pregnancy. Pro-life people have already taken heroic steps, often at great personal sacrifice, to provide for unwed mothers. I recently spoke about a young pregnant woman named Victoria, who said, “In this society we save whales, we save timber wolves and bald eagles and Coke bottles. Yet, everyone wanted me to throw away my baby.” She has been helped by Sav-a-Life, a group in Dallas, which provides a way for unwed mothers to preserve the human life within them when they might otherwise be tempted to resort to abortion. I think also of House of His Creation in Coatesville, Pennsylvania, where a loving couple has taken in almost 200 young women in the past ten years. They have seen, as a fact of life, that the girls are *not* better off having abortions than saving their babies. I am also reminded of the remarkable

APPENDIX A

Rossow family of Ellington, Connecticut, who have opened their hearts and their home to nine handicapped adopted and foster children.

The Adolescent Family Life Program, adopted by Congress at the request of Senator Jeremiah Denton, has opened new opportunities for unwed mothers to give their children life. We should not rest until our entire society echoes the tone of John Powell in the dedication of his book, *Abortion: The Silent Holocaust*, a dedication to every woman carrying an unwanted child: "Please believe that you are not alone. There are many of us that truly love you, who want to stand at your side, and help in any way we can." And we can echo the always-practical woman of faith, Mother Teresa, when she says, "If you don't want the little child, that unborn child, give him to me." We have so many families in America seeking to adopt children that the slogan "every child a wanted child" is now the emptiest of all reasons to tolerate abortion.

I have often said we need to join in prayer to bring protection to the unborn. Prayer and action are needed to uphold the sanctity of human life. I believe it will not be possible to accomplish our work, the work of saving lives, "without being a soul of prayer." The famous British Member of Parliament, William Wilberforce, prayed with his small group of influential friends, the "Clapham Sect," for *decades* to see an end to slavery in the British empire. Wilberforce led that struggle in Parliament, unflaggingly, because he believed in the sanctity of human life. He saw the fulfillment of his impossible dream when Parliament outlawed slavery just before his death.

Let his faith and perseverance be our guide. We will never recognize the true value of our own lives until we affirm the value in the life of others, a value of which Malcolm Muggeridge says: "... however low it flickers or fiercely burns, it is still a Divine flame which no man dare presume to put out, be his motives ever so humane and enlightened."

Abraham Lincoln recognized that we could not survive as a free land when some men could decide that others were not fit to be free and should therefore be slaves. Likewise, we cannot survive as a free nation when some men decide that others are not fit to live and should be abandoned to abortion or infanticide. My Administration is dedicated to the preservation of America as a free land, and there is no cause more important for preserving that freedom than affirming the transcendent right to life of all human beings, the right without which no other rights have any meaning.

APPENDIX B

[The following is the complete text of an editorial first published in California Medicine, the official journal of the California Medical Association (Sept., 1970; Vol. 113, No. 3). It was a seminal document in the abortion/euthanasia debate, and remains as relevant today as when first published. We reprint it here for the benefit of those readers who have not actually read the original, which we have reprinted four times previously, the first time in our Vol. I, No. 1. issue.]

“The Traditional Ethic...”

The traditional Western ethic has always placed great emphasis on the intrinsic worth and equal value of every human life regardless of its stage or condition. This ethic has had the blessing of the Judeo-Christian heritage and has been the basis for most of our laws and much of our social policy. The reverence for each and every human life has also been a keystone of Western medicine and is the ethic which has caused physicians to try to preserve, protect, repair, prolong, and enhance every human life which comes under their surveillance. This traditional ethic is still clearly dominant, but there is much to suggest that it is being eroded at its core and may eventually even be abandoned. This of course will produce profound changes in Western medicine and in Western society.

There are certain new facts and social realities which are becoming recognized, are widely discussed in Western society and seem certain to undermine and transform this traditional ethic. They have come into being and into focus as the social by-products of unprecedented technologic progress and achievement. Of particular importance are, first, the demographic data of human population expansion which tends to proceed uncontrolled and at a geometric rate of progression; second, an ever growing ecological disparity between the numbers of people and the resources available to support these numbers in the manner to which they are or would like to become accustomed; and third, and perhaps most important, a quite new social emphasis on something which is beginning to be called the quality of life, a something which becomes possible for the first time in human history because of scientific and technologic development. These are now being seen by a growing segment of the public as realities which are within the power of humans to control and there is quite evidently an increasing determination to do this. What is not yet so clearly perceived is that in order to bring this about hard choices will have to be made with respect to what is to be preserved and strengthened and what is not, and that this will of necessity violate and ultimately destroy the traditional Western ethic with all that this portends. It will become necessary and acceptable to place relative rather than absolute values on such things as human lives, the use of scarce resources and the various elements which are to make up the quality of life or of living which is to be sought. This is quite distinctly at variance with the Judeo-Christian ethic and carries serious philosophical, social, economic, and political implications for Western society and perhaps for world society. The process of eroding the old ethic

and substituting the new has already begun. It may be seen most clearly in changing attitudes toward human abortion. In defiance of the long held Western ethic of intrinsic and equal value for every human life regardless of its stage, condition, or status, abortion is becoming accepted by society as moral, right, and even necessary. It is worth noting that this shift in public attitude has affected the churches, the laws, and public policy rather than the reverse. Since the old ethic has not yet been fully displaced it has been necessary to separate the idea of abortion from the idea of killing, which continues to be socially abhorrent. The result has been a curious avoidance of the scientific fact, which everyone really knows, that human life begins at conception and is continuous whether intra-or extrauterine until death. The very considerable semantic gymnastics which are required to rationalize abortion as anything but taking a human life would be ludicrous if they were not often put forth under socially impeccable auspices. It is suggested that this schizophrenic sort of subterfuge is necessary because while a new ethic is being accepted the old one has not yet been rejected. It seems safe to predict that the new demographic, ecological, and social realities and aspirations are so powerful that the new ethic of relative rather than of absolute and equal values will ultimately prevail as man exercises ever more certain and effective control over his numbers, and uses his always comparatively scarce resources to provide the nutrition, housing, economic support, education, and health care in such ways as to achieve his desired quality of life and living. The criteria upon which these relative values are to be based will depend considerably upon whatever concept of the quality of life or living is developed. This may be expected to reflect the extent that quality of life is considered to be a function of personal fulfillment; of individual responsibility for the common welfare, the preservation of the environment, the betterment of the species; and of whether or not, or to what extent, these responsibilities are to be exercised on a compulsory or voluntary basis.

The part which medicine will play as all this develops is not yet entirely clear. That it will be deeply involved is certain. Medicine's role with respect to changing attitudes toward abortion may well be a prototype of what is to occur. Another precedent may be found in the part physicians have played in evaluating who is and who is not to be given costly long-term renal dialysis.

Certainly this has required placing relative values on human lives and the impact of the physician to this decision process has been considerable. One may anticipate further development of these roles as the problems of birth control and birth selection are extended inevitably to death selection and death control whether by the individual or by society, and further public and professional determinations of when and when not to use scarce resources.

Since the problems which the new demographic, ecologic and social realities pose are fundamentally biological and ecological in nature and pertain to the survival and well-being of human beings, the participation of physicians and of the medical profession will be essential in planning and decision-making at many levels. No other discipline has the knowledge of human nature, human behavior, health

and disease, and of what is involved in physical and mental well-being which will be needed. It is not too early for our profession to examine this new ethic, recognize it for what it is, and will mean for human society, and prepare to apply it in a rational development for the fulfillment and betterment of mankind in what is almost certain to be a biologically oriented world society.

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Gerard “Gerry” Bradley teaches Constitutional Law and Legal Ethics at the University of Notre Dame Law School. He is the co-director, with John Finnis, of the Natural Law Institute and co-edits *The American Journal of Jurisprudence*, an international forum of legal philosophy.

For an overview of **Pregnancy Help NYC**’s many critical services to pregnant women, see:

<https://pregnancyhelpnyc.org/>

APPENDIX C

[Richard Stith is professor emeritus of law at Valparaiso University in Indiana and a member of the board of the Consistent Life Network, on whose website (<https://consistent-life.org>) the following article appeared on April 4, 2020. Adapted from an article first published by Mercatornet on March 28, 2022, it is reprinted here with Mr. Stith's permission.]

Behind and Beyond the Shout for Abortion

Richard Stith

The US Supreme Court in *Planned Parenthood v. Casey* (1992) stated in support of abortion that the “ability of women to participate equally in the economic and social life of the Nation has been facilitated by their ability to control their reproductive lives.”

But laws are not the only impediment to a woman's choice to abort.

The negation of social as well as legal constraints on abortion is necessary for abortion freedom. Moral qualms (and consequent mental health worries) could stop the choice of abortion. These, too, must be negated in order for women to feel free to abort. Abortion must become a normal part of a decent life.

Women must be made ready and willing to choose abortion if they are to “participate equally in . . . economic and social life” with their male colleagues. Abortion must become ordinary.

To this end, women are being encouraged to speak loudly about their abortions.

Shout Your Abortion is a movement working “to normalize abortion through art, media, and community events all over the country,” according to its mission statement. It's a kind of shame-shaming in which women are exhorted to normalize “terminations,” to see them as an everyday part of life.

Its Twitter feed is full of messages like:

- “Abortion is normal. Our stories are ours to tell. This is not a debate.”
- “I aid and abet abortion and will do so proudly and constantly for the rest of my life.”
- “Happy #CelebrateAbortionProviders Appreciation Day!”
- “It seems incredibly damaging to label folks who choose abortion as naïve or uneducated or selfish. Or victims.”

From the beginning, as in the basic training of soldiers, shouting was going to be needed to make humans feel good about killing other humans.

Words can go only so far in combating this purposeful hardening of hearts. Closely reasoned arguments and statistics may fail to pierce the defiance of its “iron dome.” There is a thick layer of pain, abuse, fear, loneliness, and anger shielding abortion supporters from the truth.

Perhaps the best way to dissolve this coating is with art. Recall Picasso's great painting of the carpet bombing of a town in northern Spain, Guernica (now Gernika). It is a more radical revelation of the horror of war than any textbook.

Where is the art radically uncovering the horror of abortion?

I'd like to nominate the sculpture below: "Triumph," by Rosemarie Tischer Stith (1973).

Artist Stith, herself a child refugee from the WWII firebombing obliterating Dessau, Germany, foresaw the great shout for abortion way back in 1973, the year a right to abortion was first proclaimed by the US Supreme Court.

Her 36-inch ceramic sculpture, "Triumph," depicts a woman—standing tall in victory—her left hand on her hip and her right fist thrust into the air. Her head and hair are back. Her eyes are closed. Her mouth is open in a cry of triumph. Her chest swells in exultation, while her peculiarly elongated legs raise her pridefully high.

Under her feet lies her vanquished baby.

Here we see a mother's contemporary assertion of dominion over her unborn child, but with her triumphal shout she dehumanizes herself rather than her child.

Indeed, the child is still intact, not yet aborted but only made available for abortion. The point of the sculpture is to depict not abortion itself but the new idea of motherhood that came with the US Supreme Court's abortion proclamation.



Rosemarie Tischer Stith, "Triumph" 1973

APPENDIX D

[*Seth Barron is the managing editor of The American Mind, an online publication of the Claremont Institute, and author of, most recently, The Last Days of New York. The following editorial was published on April 4, 2022 (<https://americanmind.org>) and is reprinted with the magazine's permission.*]

The Cult of Abortion

Seth Barron

As the Left abandons the meaningful existence of gender, abortion remains a sacrament reserved for women in the woke cathedral.

As we all have learned by now, women do not get pregnant and have babies—“birthing people” do. Women do not exclusively menstruate—both men and women have periods. And women do not nurse babies—“chestfeeders” do. But, so far at least, abortion is still exclusively a question of women’s health.

In May of 2021, Representative Cori Bush testified in a congressional hearing about maternal death among black women and babies. “Every day,” she tweeted, “Black birthing people and our babies die because our doctors don’t believe our pain. My children almost became a statistic. I almost became a statistic.” But Bush, a radical socialist legislator who is sticking with “Defund the Police” as a mantra, was not using some arcane terminology in substituting “birthing person” for the usual “mother.” This substitution apparently reflects official U.S. government policy under the Biden administration, which used it in 2022 fiscal documents.

Tampon companies have also embraced the idea that their products are, potentially, for everyone. “Fact: Not all women have periods,” Tampax tweeted. “Also a fact: Not all people with periods are women. Let’s celebrate the diversity of all people who bleed!” The ACLU has embraced “menstrual equity” as a matter of civil rights, asking, “How can we recognize that barriers to menstrual access are a form of sex discrimination without erasing the lived experiences of trans men and non-binary people who menstruate, as well as women who don’t?” Numerous colleges have installed tampon machines in men’s bathrooms, too.

Breastfeeding has also emerged as a problematic concept, even though both men and women as they are traditionally defined have breast tissue, so the term “chest-feeding” has become a preferred term in some circles. A 2016 article from *The Atlantic* describes how a new birthing person from Manitoba called Trevor MacDonald “was born with the mammary glands and milk ducts required for lactation, but he’d had his breasts removed. Once he had his baby, his care providers supported his desire to nurse, but it was up to him figure out how.”

Sad story—to think that even Canada, with its up-to-date gender policies and universal healthcare, just leaves it up to people who have voluntary double mastectomies to figure out how to chestfeed their babies all by themselves.

In any event, there doesn’t yet seem to be much talk about how abortion is for “all

people who no longer wish to be birthing persons.” It isn’t cast as a men’s health question or a matter of universal consideration. When it comes to abortion, the debate is still framed—as it has been for 50 years—as a fundamental right for women.

NARAL, the nation’s biggest pro-abortion activist organization, came out solidly in favor of Cori Bush’s use of the term “birthing person,” but still uses the old binary terminology when it comes to ending that status. “When the right to abortion is endangered, the fundamental equality of women is threatened,” NARAL quaintly insists. “A woman can never be equal if she is denied the basic right to make decisions for herself and her family.”

Beto O’Rourke, the former El Paso congressman who ran unsuccessfully for U.S. senate and president, is now looking to become governor of Texas. Commenting on the new Texas abortion ban, O’Rourke tweeted, “The Texas GOP’s attack on women is deadly. It is complicating life or death medical decisions by forcing women to carry out unviable, dangerous pregnancies.”

Obviously, abortion is an important partisan wedge issue which Democrats use to appeal to their base, which is largely female. So the narrative of a *Handmaid’s Tale*-style war of systematic Christofascist oppression of women by men is too valuable to obscure in favor of a less-resonant topic which only matters to a tiny subset of radicals and professional ideologues. So traditional biology retains its meaning when it’s necessary for political expediency.

But abortion is also so central to the American Left’s vision of human freedom that it’s virtually a sacrament. Any restriction on abortion, even up to the moment of parturition, is intolerable. Bill Clinton’s pronouncement that abortion should be “legal, safe, and rare” would, if said today, probably disqualify a Democrat from running for major office. Calling for fewer abortions is, for the Left, tantamount to calling for no abortions.

Abortion is such a profound disruption of nature and the essence of the divine feminine that it must be elevated to a position of high cultural esteem. To promote universally available abortion is to construct a new religion out of the rubble of the old, in its inverted image. As such, advocates for abortion must retain the biological determinism of woman as creatrix, but to cast her as the destroyer of life, not its bringer-forth, though equally holy.

As with any cult, abortionism demands new acolytes. So abortion must be advertised in cheerful, anodyne terms, like getting a pedicure or haircut, in order to attract initiates. Once the procedure is over, the novices confront the horror of ritual infanticide by entering the coven of their sisters and fellows and accepting the embrace of their dark knowledge, which must be shared and imparted to a new generation of recruits in order to expand the circle.

So don’t expect “aborting people” to enter the discourse anytime soon. The Left needs the deep currents of biological essentialism even while it denies them.

APPENDIX E

[John Hirschauer is assistant editor of *The American Conservative*, where the following article was originally published on April 13, 2022. Reprinted with permission.]

She Buried Their Bodies

John Hirschauer

But after a long time, Salmanasar the king being dead, when Sennacherib his son, who reigned in his place, had a hatred for the children of Israel: Tobias daily went among all his kindred, and comforted them, and distributed to every one as he was able, out of his goods: He fed the hungry, and gave clothes to the naked, and was careful to bury the dead, and they that were slain.

And when king Sennacherib was come back, fleeing from Judea by reason of the slaughter that God had made about him for his blasphemy, and being angry slew many of the children of Israel, Tobias buried their bodies. (Tobias 1:18-21)

The disfigured corpses of more than 100 aborted children were recovered in Washington, D.C. late last month by a pro-life activist named Lauren Handy. They were reportedly found in a box on a medical-waste truck on their way to be incinerated. In an act of perfect moral inversion, the only person facing prosecution in connection with the children's deaths is the woman who discovered their remains.

Handy claims to have found the remains of 115 unborn children in a medical-waste container in a truck departing from Washington Surgi-Clinic, an abortion clinic in Washington, D.C., late last month. She says five of the recovered children were aborted post-viability. Photos of the five viable children's remains were leaked to the anti-abortion group Live Action.

The first child pictured in the report is called "Baby Boy #1." He is fully formed, roughly the size of a healthy newborn. One of the neonatologists quoted by Live Action estimates his gestational age at 32 weeks. The child's limbs are discolored, jaundiced from decay. His head is shriveled like a prune and stomach distended. His mouth is frozen agape and eyes swollen shut. The skin on his left leg is peeling.

The second child, "Baby Girl #1," is curled in the fetal position. Her face is misshapen, and her head is stuck to her chest. There are deep lacerations on the back of her neck. She has all ten of her toes—they're pinkish, and at a glance could be mistaken for the feet of a live newborn.

"Baby Girl #2" is pictured third. All that remains of her little body are severed limbs and a portion of her spine. A neonatologist interviewed by Live Action believes the child was decapitated during a "dilation and extraction" abortion.

The last child pictured is blue from apparent oxygen deprivation. The baby's sex is unknown.

Handy allegedly came to possess the remains after confronting an employee of

Curtis Bay Waste Management, who was loading what he supposed to be medical waste from Washington Surgi-Clinic to the back of his truck to be disposed of at the company's industrial-grade incinerator. In her telling, she asked the employee if he knew what was in the boxes. He did not. Handy told him she believed the boxes contained the remains of aborted children, which shocked the employee. She asked if she could take one of the boxes from the truck.

"Would you get in trouble if we took one of these boxes?" she asked.

The employee reportedly asked what she would do with the box if he allowed her to take it.

"We would give them a proper burial and a funeral," she said, at which point, Handy claims, he gave her the box.

The company denies having given Handy the box and says it does not incinerate fetal remains. Handy posted a photo of the box with a label from Curtis Bay Waste Management.

Then, Handy claims she and a friend opened the box and were aghast at what they saw—the remains of 110 "pre-viable" and five "post-viable" children, the latter she believed to have been killed illegally.

Handy then did what she told the employee she would do—she buried the children. She contacted a priest, who performed a Catholic rite of burial for the 110 pre-viable children at an undisclosed cemetery.

Given the graphic deaths of the five late-term babies in the box, Handy supposed they could have been victims not only of an unthinkable moral crime, as had the other 110, but a crime recognized even by the civil authority. She reported the deaths of the five post-viability infants to the D.C. Metropolitan Police Department's Homicide Unit, which came to Handy's house to investigate.

Police confirmed that the remains of the 115 children in Handy's possession were, in fact, aborted children, and claimed—in a statement that should forever discredit the moral authority of the District of Columbia—that each of the children was aborted in a manner consistent with D.C. law. The remains of the five children will not be autopsied.

"Those fetuses were aborted in accordance with D.C. law, so we are not investigating this incident along those lines," Executive Assistant Chief Ashan Benedict of the Metropolitan Police Department told reporters. "There doesn't seem to be anything criminal in nature about that now except for how they got into this house."

The man who allegedly performed the abortions at Washington Surgi-Clinic apparently will not be charged. Dr. Cesare Santangelo, the abortionist at the D.C. clinic, admitted to an undercover reporter in 2012 that he has allowed babies born alive during the abortion procedure to die.

"Obviously you're here for a certain procedure," he told the reporter, who was 24-weeks pregnant at the time. "And if your pregnancy were—let's say you went into labor, the membranes ruptured, and you delivered before we got to the termination part of the procedure here, you know. Then we would do things—we would—we would not help [the child]."

While Santangelo will not be charged, Handy was indicted that same day for earlier anti-abortion activism. On March 30, the Department of Justice announced it was charging Handy in connection with an alleged incident outside of an abortion clinic in 2020, in which Handy is alleged to have, with others, “forcefully entered the clinic and set about blockading two clinic doors using their bodies, furniture, chains and ropes.”

Handy has not yet been charged in connection with her handling of the children’s remains. D.C. police are still investigating her acquisition and storage of the corpses. D.C. Mayor Muriel Bowser, in a letter to Senate Republicans, accused Handy of “tampering with fetal remains.”

The act of burying a fetus is offensive to even some Catholics, Christians, and nominal pro-life activists. Handy’s actions feel “extreme.” After all, the children are already dead—why not let them be incinerated alongside blood and bodily fluid? The country is already polarized—don’t these tactics make compromise harder?

Perhaps. But there is no reasonable compromise to be had. There is no half-way position between allowing hundreds of thousands of unborn children to be killed and preventing those children’s deaths. The “correct” number of abortions is not 300,000. It is zero. And until it is zero, every child sacrificed on the altar of liberation should be given a burial at the state’s expense. Beneath the slogans and weasel words of the abortion debate—“reproductive health,” “bodily autonomy,” “women’s healthcare”—is a human person. Burial is an affirmation of that most uncomfortable fact.

And when he had gone, returning he told him, that one of the children of Israel lay slain in the street. And he forthwith leaped up from his place at the table, and he left his dinner, and came fasting to the body, and taking it up carried it privately to his house, that after the sun was down, he might bury him cautiously. And when he had hid the body, he ate bread with mourning and fear, remembering the word which the Lord spoke by Amos the prophet: Your festival days shall be turned into lamentation and mourning. So when the sun was down, he went and buried him. Now all his neighbors blamed him, saying: Once already commandment was given for thee to be slain because of this matter, and thou didst scarce escape the sentence of death, and dost thou again bury the dead? But Tobias fearing God more than the king, carried off the bodies of them that were slain, and hid them in his house, and at midnight buried them.” (Tobias 2:3-9)

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“It was entirely consistent with a pro-life ethos to come down on the side of fewer restrictions overall—or indeed of more restrictions. Either was a prudential judgment, which is not the case with abortion or euthanasia, as these are inherently wrong. But if it was relatively easy to see why people who are pro-life would reject what they saw as disproportionate restrictions, it was harder to understand why those who normally shout loudest about personal autonomy and ‘choice’ should have been so strongly in favor of lockdowns, or indeed, vaccine mandates.”

—David Quinn, “Covid in Ireland”