

Women's Health & Abortion

**Evidence shows
that legalizing
abortion does not
reduce maternal
mortality**



Kenyan mother and child

ADVOCATES OF LEGALIZED ABORTION ARGUE that laws prohibiting or restricting abortion lead to the deaths of many women from dangerous, illegal abortions, increasing the rate of maternal mortality. This claim is contrary to extensive worldwide evidence. Maternal mortality is determined to a much greater extent by the overall quality of maternal health care than by the legal status or availability of abortion. Legalizing abortion actually threatens women's health and violates basic principles of justice.

The problem of maternal mortality

A 2010 study published in the medical journal *The Lancet* shows that deaths worldwide due to maternal conditions (deaths of women during pregnancy, childbirth, or in the 42 days after delivery) declined by 35 percent from 1980 to 2008.¹ A 2012 United Nations study indicates further decline through 2010.² This progress is welcome and critical, but maternal mortality remains prevalent in the developing world.

In many cases, basic maternal and prenatal health care are lacking. Often there is no birth attendant, the medical environment is not fully sanitary, emergency facilities and supplies are absent or inadequate, doctors are not trained or equipped to handle obstetric emergencies, and basic medical and surgical supplies such as antibiotics and sterile gloves and equipment are scarce or unavailable. **The danger to pregnant women is present whether pregnancy is ended by abortion or live birth.**

The solution: Better care

Most maternal deaths can be prevented with adequate nutrition, basic health care, and good obstetric care throughout pregnancy, at delivery, and postpartum.

In the developed world, the decline in maternal mortality ratios (MMRs)—the number of maternal deaths per 100,000 live births—coincided “with the development of obstetric techniques and improvement in the general health status of women” (from 1935 to the 1950s), according to the World Health Organization (WHO).³ This took place well before the widespread legalization of abortion.

To reduce maternal mortality, we must strive to give women in the developing world access to the same standard of care that has been available to women in the developed world for decades—care that results in a healthy outcome for mother and child.

Abortion status does not determine safety

Contrary to the claims of organizations advocating legal abortion, no direct relationship exists between the legal status of abortion and maternal mortality rates (see Fig. 2), or even between the legal status of abortion and rates of maternal death caused specifically by abortion.

In the United States, abortion was a relatively safe (i.e., generally not life-threatening) procedure long before it became legal in 1973 (see Fig. 1). Dr. Mary Calderone, former

medical director for Planned Parenthood, concluded in 1960 that “abortion, whether therapeutic or illegal, is in the main no longer dangerous, because it is being done well by physicians.”⁴ The late Dr. Bernard Nathanson, a former prominent abortion provider and co-founder of NARAL Pro-Choice America, wrote in 1979 that the argument that women could die from dangerous, illegal abortions in the U.S. “is now wholly invalid and obsolete” because “antibiotics and other advances [have] dramatically lowered the abortion death rate.”⁵

According to estimates from WHO, UNICEF, UNFPA, and the World Bank, the four countries that decreased their MMRs the most between 1990 and 2008 are Maldives, Romania, Iran and Bhutan.⁶ Three of these countries (excepting Romania) have maintained bans on abortion.

In the Central American nations of Nicaragua and El Salvador, abortion is completely illegal. Nicaragua has seen its MMR drop 44 percent since 1990; El Salvador’s MMR has also dropped 44 percent.⁷ Ireland prohibits abortion and boasts what many believe to be the world’s lowest rate of maternal mortality.⁸ Poland prohibited most abortions in 1993 after years of abortion on demand. Poland’s MMR has decreased 67 percent since 1990 and is among the lowest in the world.⁹

Conversely, South Africa legalized abortion on demand in 1997. Since then, maternal mortality in that country has risen significantly. The MMR was 410 in 2008, nearly double the rate in 1990.¹⁰ The MMR of Canada, which permits abortion on demand, increased 94 percent from 1990 to 2008.¹¹

The Chilean example

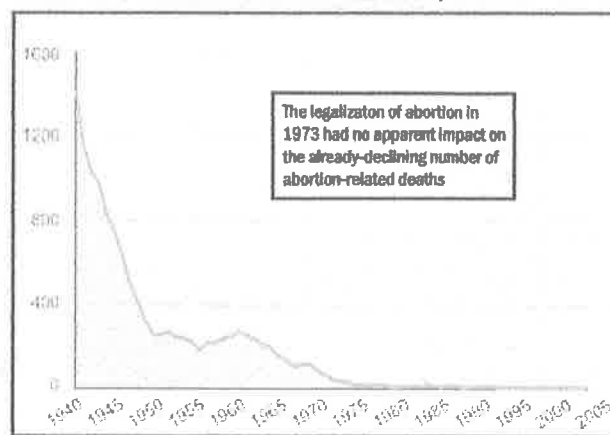
A 2012 study of maternal mortality in Chile,¹² led by Dr. Elard Koch of the University

of Chile, shows that maternal mortality is “not related to the legal status of abortion.” The MMR in Chile declined 93.8 percent from 1961 to 2007. Abortion was prohibited in 1989, and the MMR continued to decline significantly and at the same rate, dropping 69.2 percent in the 14 years after abortion was banned. Even maternal deaths due specifically to abortion declined—from 10.78 abortion deaths per 100,000 live births in 1989 to 0.83 in 2007, a reduction of 92.3 percent after abortion was made illegal (see Fig. 3).

Chile, which prohibits abortion, now has the lowest MMR in Latin America and the second lowest in all of North and South America. And maternal death due specifically to (illegal) abortion is now “practically null,” according to the study’s authors.

Koch, et al., explain that “making abortion illegal is not

U.S. Maternal Abortion Deaths, 1940-2006



Source: U.S. Center for Health Statistics and U.S. Centers for Disease Control

Fig. 1

necessarily equivalent to promoting unsafe abortion, especially in terms of maternal morbidity and mortality. ... Our study indicates that improvements in maternal health and a dramatic decrease in the MMR occurred without legalization of abortion." The authors cite various factors to explain the decrease, including a significant increase in education level, utilization of maternal health facilities, and improvements in the sanitary system.

In sharp contrast, maternal mortality has significantly increased in the U.S. over the last decade, from an MMR of 10.3 in 1999 to 23.2 in 2009.¹³

According to the Koch study, in the same period of time, Chile's MMR decreased from 23.6 to 16.9. It seems that the U.S., which permits abortion on demand, is falling behind Chile in its quality of maternal health care.

What justice requires

Legal abortion does nothing to solve the underlying problem of poor medical care in the developing world. In fact, abortion is detrimental to both unborn children and their mothers.

Justice requires that governments protect the basic rights of every member of the human family. The facts of science demonstrate that the unborn child (i.e., the human embryo or fetus) is a distinct, living, and whole organism of the species *Homo sapiens*, like each of us, only at a very early stage in his or her development.¹⁴

Further, it is a basic moral principle—affirmed in the United Nations' Universal Declaration of Human Rights¹⁵ and other international instruments—that all human beings are equal in fundamental dignity and ought to be respected and protected.¹⁶ Therefore, the law should protect unborn human beings just as it protects each of us. Any policy that permits the killing of unborn children is gravely unjust.¹⁷

Evidence shows that legalizing abortion usually increases the number of abortions that occur. In the United States, the number of abortions rose from an estimated 98,000 per year¹⁸ to a peak of 1.6 million following total legalization in

1973. More than 54 million abortions have been performed in the U.S. since that time.¹⁹ Explains Stanley Henshaw of the Guttmacher Institute (an advocate for legalized abortion),

"In most countries, it is common after abortion is legalized for abortion rates to rise sharply for several years, then stabilize, just as we have seen in the United States."²⁰ The sheer scale of this killing makes abortion the premier human rights issue in almost any country that permits it.

The dangers of abortion

Abortion—even in countries with excellent maternal health care—poses serious risks to women. These risks are well-documented.²¹ Possible physical complications of surgical abortion include hemorrhage,

infection, cervical laceration, and uterine perforation. Non-surgical or chemical (RU486) abortion can cause severe pain, cramping, nausea, hemorrhage, infection, and incomplete abortion.

Sometimes abortion complications are so serious that they result in the death of the mother. Possible long-term effects of abortion include sterility, miscarriage, premature birth, an increased risk of breast cancer, and ectopic (tubal) pregnancy, which can lead to death if not treated promptly.

Abortion can also have numerous psychosocial consequences, including grief, depression, drug abuse, and relationship problems. Many women (and men) now regret their decision to have or participate in an abortion.²²

Legalizing abortion in a country lacking adequate maternal health care is particularly dangerous and would lead to more women suffering and dying from abortion. Jeanne E. Head, R.N., U.N. Representative for the National Right to Life Committee and experienced obstetric nurse, explains: "Women generally at risk because they lack access to a doctor, hospital, or antibiotics before abortion's legalization will face those same circumstances after legalization. And if legalization triggers a higher demand for abortion, as it has in most countries, more injured women will compete for those scarce medical resources."²³



Fig. 2

Source: WHO, et al., Trends in Maternal Mortality: 1990 to 2008

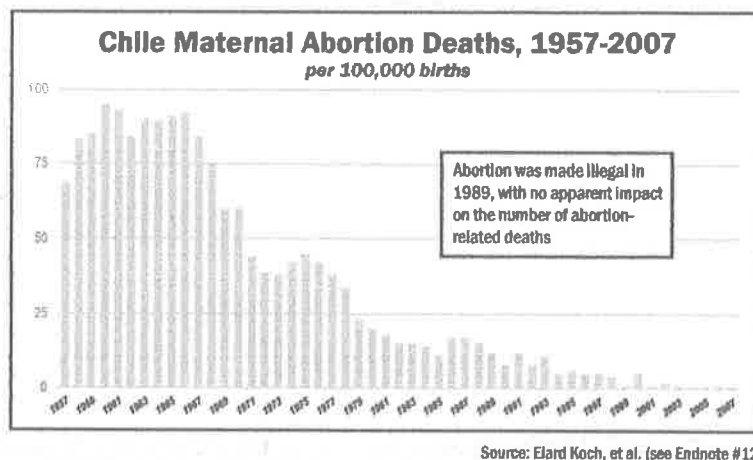


Fig. 3

Source: Elard Koch, et al. (see Endnote #12)

"The child, by reason of his physical and mental immaturity, needs special safeguards and care, including appropriate legal protection, before as well as after birth."

Declaration of the Rights of the Child

"Recognition of the inherent dignity and of the equal and inalienable rights of all members of the human family is the foundation of freedom, justice and peace in the world."

Universal Declaration of Human Rights

Care for women is needed

Legal abortion only leads to more abortions and, as a result, more unborn children killed and more abortion-related

complications for women. Better medical care, not abortion, is the solution to the problem of maternal mortality in the developing world.

Endnotes

- 1 Margaret C. Hogan, et al., "Maternal mortality for 181 countries, 1980-2008: a systematic analysis of progress towards Millennium Development Goal 5," *The Lancet* 375.9726 (8 May 2010): 1609-1623.
- 2 World Health Organization, et al., *Trends in Maternal Mortality: 1990 to 2010* (Geneva: World Health Organization, 2012).
- 3 WHO, et al., *Maternal Mortality: A Global Factbook* (Geneva: World Health Organization, 1991).
- 4 Mary S. Calderone, "Illegal Abortion as a Public Health Problem," *American Journal of Public Health* 50 (July 1960): 949.
- 5 Bernard N. Nathanson and Richard N. Ostling, *Aborting America* (New York: Doubleday, 1979), 194.
- 6 WHO, et al., *Trends in Maternal Mortality: 1990 to 2008* (Geneva: World Health Organization, 2010), 33.
- 7 *Ibid.*, 29, 30.
- 8 *Ibid.*, 29.
- 9 *Ibid.*, 31.
- 10 *Ibid.*, 31. See also Minnesota Citizens Concerned for Life Global Outreach, *How South Africa is failing women and children* (Minneapolis: MCCL, 2011); available at <http://www.mccl-go.org/resources.htm>.
- 11 *Ibid.*, 28.
- 12 Elard Koch, et al., "Women's Education Level, Maternal Health Facilities, Abortion Legislation and Maternal Deaths: A Natural Experiment in Chile from 1957 to 2007," *PLoS ONE* 7.5 (4 May 2012): doi:10.1371/journal.pone.0036613.
- 13 United States Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Health Statistics, Division of Vital Statistics, Natality public-use data 2007-2009, on CDC WONDER Online Database, March 2012 (9 May 2012).
- 14 See, for example, Robert P. George and Christopher Tollefsen, *Embryo: A Defense of Human Life* (New York: Doubleday, 2008); and Maureen L. Condic, "When Does Human Life Begin? A Scientific Perspective," *Westchester Institute White Paper Series* (October 2008), available at http://www.westchesterinstitute.net/images/wi_whitepaper_life_print.pdf.
- 15 The Declaration states, "Recognition of the inherent dignity and of the equal and inalienable rights of all members of the human family is the foundation of freedom, justice and peace in the world." It also says, "Everyone has the right to life, liberty and security of person."
- 16 For a defense of this position, see Francis J. Beckwith, *Defending Life: A Moral and Legal Case Against Abortion Choice* (New York: Cambridge, 2007); Patrick Lee, *Abortion & Unborn Human Life*, 2nd ed. (Washington, D.C.: The Catholic University of America Press, 2010); and Christopher Kaczor, *The Ethics of Abortion: Women's Rights, Human Life, and the Question of Justice* (New York: Routledge, 2011).
- 17 This does not include medical procedures that are necessary to prevent the death of the mother but do not intend the death of the child.
- 18 A research team in 1981 used a reliable mathematical model to estimate an average of 98,000 illegal abortions each year in the 32 years preceding legalization. Barbara J. Syska, Thomas W. Hilgers, M.D., and Dennis O'Hare, "An Objective Model for Estimating Criminal Abortions and Its Implications for Public Policy," in *New Perspectives on Human Abortion*, ed. Thomas W. Hilgers, M.D., Dennis J. Horan and David Mall (Frederick, MD: University Publications of America, 1981).
- 19 See http://www.nrlc.org/Factsheets/FS03_AbortionInTheUS.pdf.
- 20 Stanley Henshaw, Guttmacher Institute (16 June 1994), Press release.
- 21 See, for example, Elizabeth Ring-Cassidy and Ian Gentles, *Women's Health after Abortion: The Medical and Psychological Evidence*, 2nd ed. (Toronto: The deVeber Institute, 2003).
- 22 See, for example, <http://www.afterabortion.org>.
- 23 Jeanne E. Head and Laura Hussey, "Does Abortion Access Protect Women's Health?" *The World & I*, June 2004, 56.



Minnesota Citizens Concerned for Life Global Outreach
4249 Nicollet Avenue | Minneapolis, MN 55409 USA
612.825.6831 | Fax 612.825.5527
MCCL-GO@mccl.org | www.mccl-go.org | www.mccl.org

This publication also available online. Download at www.mccl-go.org or request copies for purchase at MCCL-GO@mccl.org.

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National Right to Life Educational Trust Fund
211 East 43rd Street, Suite 905 | New York, NY 10017 USA
212.947.2692
NRLC@nrlc.org | www.nrlc.org

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Written by Kerby Anderson

Biblical Arguments Against Abortion

In this essay we will be discussing arguments against abortion. The first set of arguments we will consider are biblical arguments.

That being said, we must begin by acknowledging that the Bible doesn't say anything about abortion directly. Why the silence of the Bible on abortion? The answer is simple. Abortion was so unthinkable to an Israelite woman that there was no need to even mention it in the criminal code. Why was abortion an unthinkable act? First, children were viewed as a gift or heritage from the Lord. Second, the Scriptures state--and the Jews concurred--that God opens and closes the womb and is sovereign over conception. Third, childlessness was seen as a curse.

One of the key verses to understand in developing a biblical view of the sanctity of human life is Psalm 139. This psalm is the inspired record of David's praise for God's sovereignty in his life. He begins by acknowledging that God is omniscient and knows what David is doing at any given point in time. He goes on to acknowledge that God is aware of David's thoughts before he expresses them. David adds that wherever he might go, he cannot escape from God, whether he travels to heaven or ventures into Sheol. God is in the remotest part of the sea and even in the darkness. Finally David contemplates the origin of his life and confesses that God was there forming him in the womb:

For you created my inmost being; you knit me together in my mother's womb. I praise you because I am fearfully and wonderfully made; your works are wonderful, I know that full well. My frame was not hidden from you when I was made in the secret place. When I was woven together in the depths of the earth, your eyes saw my unformed body. All the days ordained for me were written in your book before one of them came to be (vv. 13-16).

Here David speaks of God's relationship with him while he was growing and developing before birth. Notice that the Bible doesn't speak of fetal life as mere biochemistry. The description here is not of a piece of protoplasm that becomes David: this is David already being cared for by God while in the womb.

In verse 13, we see that God is the Master Craftsman fashioning David into a living person. In verses 14 and 15, David reflects on the fact that he is a product of God's creative work within his mother's womb, and he praises God for how wonderfully God has woven him together.

David draws a parallel between his development in the womb and Adam's creation from the earth. Using figurative language in verse 15, he refers to his life before birth when "I was made in secret, and skillfully wrought in the depths of the earth." This poetic allusion harkens back to Genesis 2:7 which says that Adam was made from the dust of the earth.

David also notes that "Thine eyes have seen my unformed substance." This shows that God knew David even before he was known to others. The term translated *unformed substance* is a noun derivative of a verb meaning "to roll up." When David was just

forming as a fetus, God's care and compassion already extended to him. The reference to "God's eyes" is an Old Testament term used to connote divine oversight of God in the life of an individual or group of people.

Next, we will consider additional Old Testament passages that provide a biblical argument against abortion.

Additional Old Testament Arguments Against Abortion

Now that we've looked at Psalm 139, the most popular argument against abortion, let's look at two other Old Testament passages.

Another significant passage is Psalm 51. It was written by David after his sin of adultery with Bathsheba and records his repentance. David confesses that his sinful act demonstrated the original sin that was within him, "Surely I have been a sinner from birth, sinful from the time my mother conceived me" (Ps. 51:5). David concludes that from his time of conception, he had a sin nature. This would imply that he carried the image of God from the moment of conception, including the marred image scarred from sin.

Human beings are created in the image and likeness of God (Gen. 1:26-27; 5:1; 9:6). Bearing the image of God is the essence of humanness. And though God's image in man was marred at the Fall, it was not erased (cf. 1 Cor. 11:7; James 3:9). Thus, the unborn baby is made in the image of God and therefore fully human in God's sight.

This verse also provides support for what is called the traducian view of the origin of the soul. According to this perspective, human beings were potentially in Adam (Rom. 5:12, Heb. 7:9-10) and thus participated in his original sin. The "soulish" part of humans is transferred through conception. Therefore, an unborn baby is morally accountable and thus fully human.

Another argument against abortion can be found in the Old Testament legal code, specifically Exodus 21:22-25.

If men who are fighting hit a pregnant woman and she gives birth prematurely but there is no serious injury, the offender must be fined whatever the woman's husband demands and the court allows. But if there is serious injury, you are to take life for life, eye for eye, tooth for tooth, hand for hand, foot for foot, burn for burn, wound for wound, bruise for bruise.

The verses appear to teach that if a woman gives birth prematurely, but the baby is not injured, then only a fine is appropriate. However, if the child dies then the law of retaliation (*lex talionis*) should be applied. In other words, killing an unborn baby would carry the same penalty as killing a born baby. A baby inside the womb has the same legal status as a baby outside the womb.

Some commentators have come to a different conclusion because they believe the first verses only refer to a case of accidental miscarriage. Since only a fine is levied, they argue that an unborn baby is merely potential life and does not carry the same legal status as a baby that has been born.

There are at least two problems with this interpretation. First, the normal Hebrew word for *miscarry* is not used in this passage (cf. Gen. 31:38; Exod. 23:26; Job 2:10; Hos. 9:14). Most commentators now believe that the action described in verse 22 is a premature birth not an accidental miscarriage. Second, even if the verses do describe a miscarriage, the passage cannot be used to justify abortion. The injury was accidental, not intentional (as abortion would be). Also, the action was a criminal offense and punishable by law.

Medical Arguments Against Abortion

Thus far in our discussion we have looked at biblical arguments against abortion. But what if someone doesn't believe in the Bible? Are there other arguments we can use? Yes, there are: medical arguments, for example. Let's look, then, at some of the medical arguments against abortion.

The medical arguments against abortion are compelling. For example, *at conception the embryo is genetically distinct from the mother*. To say that the developing baby is no different from the mother's appendix is scientifically inaccurate. A developing embryo is genetically different from the mother. A developing embryo is also genetically different from the sperm and egg that created it. A human being has 46 chromosomes (sometimes 47 chromosomes). Sperm and egg have 23 chromosomes. A trained geneticist can distinguish between the DNA of an embryo and that of a sperm and egg. But that same geneticist could not distinguish between the DNA of a developing embryo and a full-grown human being.

Another set of medical arguments against abortion surround *the definition of life and death*. If one set of criteria have been used to define death, could they also be used to define life? Death used to be defined by the cessation of heartbeat. A stopped heart was a clear sign of death. If the cessation of heartbeat could define death, could the onset of a heartbeat define life? The heart is formed by the 18th day in the womb. If heartbeat was used to define life, then nearly all abortions would be outlawed.

Physicians now use a more rigorous criterion for death: brain wave activity. A flat EEG (electroencephalograph) is one of the most important criteria used to determine death. If the cessation of brain wave activity can define death, could the onset of brain wave activity define life? Individual brain waves are detected in the fetus in about 40-43 days. Using brain wave activity to define life would outlaw at least a majority of abortions.

Opponents to abortion also raise the controversial issue of fetal pain. Does the fetus feel pain during abortion? The evidence seems fairly clear and consistent. Consider this statement made in a British medical journal: "Try sticking an infant with a pin and you know what happens. She opens her mouth to cry and also pulls away. Try sticking an 8-week-old human fetus in the palm of his hand. He opens his mouth and pulls his hand away. A more technical description would add that changes in heart rate and fetal movement also suggest that intrauterine manipulations are painful to the fetus."¹

Obviously, other medical criteria could be used. For example, the developing fetus has a unique set of fingerprints as well as genetic patterns that make it unique. The development

of sonography has provided us with a "window to the womb" showing us that a person is growing and developing in the mother's womb. We can discern eyes, ears, fingers, a nose, and a mouth. Our visual senses tell us this is a baby growing and maturing. This is not a piece of protoplasm; this is a baby inside the womb.

The point is simple. *Medical science leads to a pro-life perspective rather than a pro-choice perspective.* If medical science can be used at all to draw a line, the clearest line is at the moment of conception. Medical arguments provide a strong case against abortion and for life.

Legal Arguments Against Abortion

At this point in our discussion, we need to look at legal arguments against abortion.

The best legal argument against abortion can be seen in the case of *Roe v. Wade*. It violated standard legal reasoning. The Supreme Court decided not to decide when life begins and then turned around and overturned the laws of 50 different states.

Most of the Supreme Court's verdict rested upon two sentences. "We need not resolve the difficult question of when life begins. When those trained in the respective disciplines of medicine, philosophy, and theology are unable to arrive at any consensus, the judiciary, at this point in the development of man's knowledge, is not in a position to speculate as to an answer."

Although the sentences sounded both innocuous and unpretentious, they were neither. The Supreme Court's non-decision was not innocuous. It overturned state laws that protected the unborn and has resulted in over 30 million abortions (roughly the population of Canada) in the United States.

The decision also seems unpretentious by acknowledging that it did not know when life begins. But if the Court did not know, then it should have acted "as if" life was in the womb. A crucial role of government is to protect life. Government cannot remove a segment of the human population from its protection without adequate justification.

The burden of proof should lie with the life-taker, and the benefit of the doubt should be with the life-saver. Put another way: "when in doubt, don't." A hunter who hears rustling in the bushes shouldn't fire until he knows what is in the bushes. Likewise, a Court which doesn't know when life begins, should not declare open season on the unborn.

The burden of proof in law is on the prosecution. The benefit of doubt is with the defense. This is also known as a presumption of innocence. The defendant is assumed to be innocent unless proven guilty. Again the burden of proof is on the entity that would take away life or liberty. The benefit of the doubt lies with the defense.

The Supreme Court clearly stated that it does not know when life begins and then violated the very spirit of this legal principle by acting as if it just proved that no life existed in the womb. Even more curious was the fact that to do so, it had to ignore the religious community and international community on the subject of the unborn.

Had the religious community really failed to reach a consensus? Although there were some

intramural disagreements, certainly the weight of evidence indicated that a Western culture founded on Judeo-Christian values held abortion to be morally wrong. People with widely divergent theological perspectives (Jewish, Catholic, evangelical and fundamental Protestants) shared a common agreement about the humanity of the unborn.

The same could be said about the international legal community. Physicians around the world subscribed to the Hippocratic Oath ("I will not give a woman a pessary to produce abortion"). The unborn were protected by various international documents like the Declaration of Geneva and the U.N. Declaration of the Rights of the Child.

Just as there are solid medical arguments against abortion, so also there are legal arguments against abortion. *Roe vs. Wade* was a bad decision that needs to be overturned.

Philosophical Arguments Against Abortion

Finally, we will conclude our discussion by looking at philosophical arguments against abortion.

A third set of arguments against abortion would be philosophical arguments. A key philosophical question is where do you draw the line? Put another way, when does a human being become a person?

The Supreme Court's decision of *Roe v. Wade* separated personhood from humanity. In other words, the judges argued that a developing fetus was a human (i.e., a member of the species *Homo sapiens*) but not a person. Since only persons are given 14th Amendment protection under the Constitution, the Court argued that abortion could be legal at certain times. This left to doctors, parents, or even other judges the responsibility of arbitrarily deciding when personhood should be awarded to human beings.

The Supreme Court's cleavage of personhood and humanity made the ethical slide down society's slippery slope inevitable. Once the Court allowed people to start drawing lines, some drew them in unexpected ways and effectively opened the door for infanticide and euthanasia.

The Court, in the tradition of previous line-drawers, opted for biological criteria in their definition of a "person" in *Roe v. Wade*. In the past, such criteria as implantation or quickening had been suggested. The Court chose the idea of viability and allowed for the possibility that states could outlaw abortions performed after a child was viable. But viability was an arbitrary criterion, and there was no biological reason why the line had to be drawn near the early stages of development. The line, for example, could be drawn much later.

Ethicist Paul Ramsey frequently warned that any argument for abortion could logically be also used as an argument for infanticide. As if to illustrate this, Dr. Francis Crick, of DNA fame, demonstrated that he was less concerned about the ethics of such logical extensions and proposed a more radical definition of personhood. He suggested in the British journal *Nature* that if "a child were considered to be legally born when two days old, it could be examined to see whether it was an 'acceptable member of human society.'" Obviously this is not only an argument for abortion; it's an argument for infanticide.

Other line-drawers have suggested a cultural criterion for personhood. Ashley Montagu, for example, stated, "A newborn baby is not truly human until he or she is molded by cultural influences later." Again, this is more than just an argument for abortion. It is also an argument for infanticide.

More recently some line-drawers have focused on a mental criterion for personhood. Dr. Joseph Fletcher argues in his book *Humanhood* that "Humans without some minimum of intelligence or mental capacity are not persons, no matter how many of these organs are active, no matter how spontaneous their living processes are." This is not only an argument for abortion and infanticide; it's adequate justification for euthanasia and the potential elimination of those who do not possess a certain IQ. In other writings, Joseph Fletcher suggested that an "individual" was not truly a "person" unless he has an IQ of at least 40.

In conclusion, we can see that there are many good arguments against abortion. Obviously there are a number of biblical arguments against abortion. But there are also medical, legal, and philosophical arguments against abortion. The Bible and logic are on the side of the Christian who wants to stand for the sanctity of human life.

Endnote

1. H.P. Valman and J. F. Pearson, What the Fetus Feels, *British Medical Journal* (26 January 1980): 233-234.

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Note from Kerby Anderson:

So many people ask for more information on abortion; I suggest you check out the Abortion Facts Web site at www.abortionfacts.com.

About the Author

[Kerby Anderson](#) is president of Probe Ministries International. He holds masters degrees from Yale University (science) and from Georgetown University (government). He is the author of several books, including *Christian Ethics in Plain Language*, *Genetic Engineering*, *Origin Science*, *Signs of Warning*, *Signs of Hope* and *Making the Most of Your Money in Tough Times*. His new series with Harvest House Publishers includes: *A Biblical Point of View on Islam*, *A Biblical Point of View on Homosexuality*, *A Biblical Point of View on Intelligent Design* and *A Biblical Point of View on Spiritual Warfare*. He is the host of "Point of View" (USA Radio Network) heard on 290 radio outlets nationwide as well as on the Internet (www.pointofview.net) and shortwave. He is also a regular guest on "Prime Time America" (Moody Broadcasting Network) and "Fire Away" (American Family Radio). He produces a daily syndicated radio commentary and writes editorials that have appeared in papers such as the *Dallas Morning News*, the *Miami Herald*, the *San Jose Mercury*, and the *Houston Post*.

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Probe Ministries
2001 W. Plano Parkway, Suite 2000
Plano TX 75075
(972) 941-4565
info@probe.org
www.probe.org