

After-birth Abortion: a New Euphenism

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The recent claim of Academics Minerva and Giubilini, made in the online Journal of Medical Ethics ^[1] that the killing of new-born infants (referred to by the authors as after-birth abortion) is permissible gives rise to many questions that should not be evaded.

Academic standards

A cluster of questions arises around standards of academic scholarship. The issue is not whether there should be academic freedom or the right to publish dissenting opinions. The issue is whether academic freedom now means that provided certain procedures are followed, 'anything goes' as to content. Do universities still insist on objective levels of achievement and an academic's ability to think clearly? Minerva and Giubilini claim that a child is not a person until he or she is capable of attributing a certain value to their own life, able to make plans for the future, and able to appreciate that they are actually alive. But the authors admit they do not "know when exactly" this occurs. The implication is that at some stage in the process of becoming aware, the baby might not yet be, or might already be, a person.

Ethically, the situation is no different from that in which the deer shooter knows that the moving object shrouded by the trees *might be* a person, or might be a deer. The very existence of such doubt forbids shooting it on the mere probability that it might not be a person. If a baby must first become aware in the ways Minerva and Giubilini require for it to become a person and if they don't know exactly when that occurs, then they may not condone its killing. This is basic stuff.

Power over others' lives

A further cluster of questions surrounds the implied claim that to some is given the power to decide who shall live and who shall not, for reasons which Minerva and Giubilini acknowledge need not have "anything to do with the foetus' health", as is the case with abortions. In fact, the reasons they give to justify the killing might simply be that the mother no longer has the time, money or energy to care for the baby. Others have described this claim as "chilling", and some have observed that expecting doctors to be agents of death effectively changes their basic role of preserving life.

Minerva and Giubilini accept that adoption is an option, but say it could cause undue psychological distress to the mother. Are they not aware of all that has been happening in relation to post-abortion trauma and its long-term damage to women (and to some fathers as well)?

The real challenge

The one thing going for Minerva and Giubilini is the implied and even explicit parallel with abortion. If it is acceptable to kill babies inside the womb – for other persons' reasons – then it is likewise acceptable to kill them outside the womb – for other persons' reasons. In this way they effectively, even if unintentionally, challenge a hypocritical society over how glibly it accepts abortion. They argue that killing a new-born should be permissible "in all cases where abortion is, including cases where the new-born is not disabled".

The challenge to re-examine what we are allowing in the matter of abortion is the more timely because some of the reasons previously used to support more liberal abortion have been proved false. It is reported that in the USA

"In the years leading up to the legalisation of abortion its advocates assured everyone that legalised abortion would reduce child abuse, strengthen family-life, and improve society. But all the evidence shows that after three decades of legal abortion, all these problems have gotten worse". (Janet Morana, Address to the Pontifical Council for the Family, Vatican City, 26 March 2010)

This is hardly surprising because abortion perceived as a solution to social problems requires a certain blunting of sensitivity and of conscience due to accepting the violence involved in the dismembering of babies in the abortion process.

This brings us to the questions that need to be asked about the role of law, its present formulation in New Zealand, and the responsibilities of our law-makers. The practical interpretation of New Zealand's current laws is consistent with the USA's watershed Court decision (*Roe vs Wade*, 1973) which allowed abortion at any time for any reason. But the legal situation in USA has not stood still. Individual States, with acceptance by the Courts, have made many amendments corresponding to experience and to a greater recognition of human rights. For example, parental involvement laws that require parents to either be informed of, or consent to, the abortion of a minor-aged daughter before it can be performed; informed consent laws that require that women seeking abortion be given accurate information about the development of the child, the alternatives to abortion, and the risks of the procedure; foetal homicide laws that proscribe the killing of a child other than by abortion – so-called partial birth abortion; ultrasound laws that require abortionists in some States to provide the patient with an opportunity to see her unborn child by ultrasound; and an Unborn Victims of Violence Act which protects the unborn from acts of violence other than abortion.

These restrictive modifications have come about because of the increasing opposition of feminist groups who have recognised the potentially life-long harmful consequences of abortion for women. In other words, socially and politically, there has been a strong and still growing movement away from permitting abortions to stricter limits on them. It is only lack of courage among NZ politicians that leaves our laws lagging behind these developments.

It might give heart to our law-makers to learn that far from being a denominational, or even religious issue, the increasing alarm and opposition to abortion is being found across a broad section of the community, and especially among young people. They may also take heart from the sciences. The biological sciences have long since taught that the fertilised ovum is already "a microscopic human being" even before it is implanted, and that once implanted it requires only time and nurture to develop, grow and prepare for birth – in utero it already is a separate unique human being. The medical sciences are frequently having to deal with post-abortion trauma, which in some cases does not manifest itself until years later. These are matters our elected representatives are not entitled to ignore, because looking after the well-being of all citizens, especially the more vulnerable, is part of their *core business* .

A Consistent Ethic

If persons are defined in terms of what they are capable of *doing* , rather than what they *are* , and if problems of "time, money or energy" are sufficient reasons for killing those who are more dependent on others, then the threat to life is at both ends of our lifetime.

The threat exists also for those in between birth and death in as much as social and economic planning too easily reduces human wellbeing to just *one or other aspect of well-being* – e.g. one's ability to contribute to the economy. Planning based on reductionism of any kind tends in the direction of a privileged position for the strong, and a kind of Darwinian attrition of the rest. Only by recognising the sacredness of human life and the innate dignity of every person, premised on their being human, can we arrive at a consistent respect for them *at every point* on the spectrum between conception and natural death. There is opportunity here for parliamentarians who are interested in finding a consistent, cohesive and coherent basis for all social and economic planning.

[1] Giubilini, A., and F. Minerva. "After-Birth Abortion: Why Should the Baby Live?" *JME Online First* (2012). <http://jme.bmj.com/content/early/2012/03/01/medethics-2011-100411.full.pdf+html>.