



*Let's talk  
about ...*

## Moral and Social Issues

# Abortion

A DISCUSSION PAPER FOR SALVATIONISTS

**Purpose:** The intention of discussion papers for Salvationists is to present issues of importance in a way that stimulates thought and discussion. Many of the issues addressed are controversial and give rise to opposing points of view. Although people often think of issues as right or wrong, black or white, it is helpful to consider these issues from different perspectives. These papers are not definitive in themselves, but enable prayerful exploration by Salvationists and friends.

### Foundation for discussion

(this is not a summary of the paper)

At an individual, congregational and organisational level, Salvationists are called to seek and know the nature and will of God. As we study the Scriptures and seek the inspiration of the Holy Spirit, God reveals his plan and his purpose for us in our time and place in history. Whatever our personal situation and circumstances, God's grace and love are able to hold us to him and he will make himself known to us if we seek him with an open and honest heart.

As we venture forward into our complicated world, we would serve God well if we heed his command to "Love the Lord your God with all your heart and with all your soul ... and love your neighbour as yourself" (Luke 10:27). May The Salvation Army be a people of welcome, who treat sinners and seekers, which includes ourselves, with courtesy and respect as we journey together to seek and to know God.

### The issue

Abortion is defined as the deliberate termination of a human pregnancy, most often performed during the first 28 weeks. (Oxford Dictionary, 2012) It should not be confused with 'spontaneous abortion' or 'miscarriage', when a pregnancy ends due to natural causes rather than as the result of a deliberate action.

The topic of abortion generates powerful emotions and significant, passionate debates rage between the extremes of opinion

- the Right to Life or Pro-life lobby and
- the Pro-choice lobby.

In between these polarised opinions there are attempts to recognise the debate's complex nature. This paper is an attempt to examine some of the medical, social and practical concerns of this matter from a biblical perspective.

In approaching the sensitive topic of abortion, The Salvation Army is mindful that the experience of abortion touches members of our congregation, their family and friends, as well as employees and clients of our social services.

### The statistics

Accurate statistics on the number of abortions performed in Australia each year are unavailable as abortion, which can be obtained surgically or medically, does not have a specific identifier in Medicare or public hospital databases.

It is estimated that

- between 70, 000 to 80, 000 abortions are performed in Australia each year
- based on these numbers, the abortion rate for Australia is 19.7 per 1000 women aged 15-44 years, which compares with international





# Abortion

A DISCUSSION PAPER FOR SALVATIONISTS

rates ranging from 7.7 in Germany to 90 in Eastern Europe and a world average of 33 to 37 abortions per 1000 women.

Women seeking abortion in Australia are generally

- in their 20s
- childless
- well-educated
- employed

Research shows that over 50% of women who have abortions were using at least one form of contraception and 20% were using more than one method at the time they became pregnant. (Victorian Government Department of Health, 2011)

Around 48% of abortions are carried out on women between the ages of 20 to 29 years and around 65% are in married, de facto or long-term relationships at the time of the abortion. (Culcutt, 2007)

## The law

Each state in Australia has different laws about abortion. The ACT legalised abortion in 2002. Victoria introduced changes in 2008 which decriminalised abortion up to 24 weeks gestation and which allow abortion after that time if two doctors agree that it is appropriate. Abortion throughout the rest of Australia is generally available in order to protect the life or physical or mental health of the woman. (Petersen, 2010)

## Statement of position

The Salvation Army believes all people are created in the image of God and therefore have unique and intrinsic value. Human life is sacred and all people should be treated with dignity and respect. The Salvation Army accepts the moment of fertilisation as the start of human life. We believe that society has a responsibility to care for others, and especially to protect and promote the welfare of vulnerable people, including unborn children.

The Salvation Army believes that life is a gift from

God and we are answerable to God for the taking of life. As such, The Salvation Army is concerned about the growing ready acceptance of abortion, which reflects insufficient concern for vulnerable persons including the unborn. We do not believe that genetic abnormalities that are identified in an unborn child who is likely to live longer than a brief period after birth are sufficient to warrant a termination of pregnancy.

The Salvation Army recognises tragic and perplexing circumstances that require difficult decisions regarding a pregnancy. Decisions should be made only after prayerful and thoughtful consideration, acknowledging the tremendous pressures that occur during an unexpected pregnancy. There is a responsibility on all involved to give the parents of the unborn child, particularly the woman, appropriate pastoral, medical and other counsel. The Salvation Army believes that termination can occur only when

- Carrying the pregnancy further seriously threatens the life of the mother; or
- Reliable diagnostic procedures have identified a fetal abnormality considered incompatible with survival for more than a very brief postnatal period.

In addition, rape and incest are brutal acts of dominance violating women physically and emotionally. This situation represents a special case for the consideration of termination as the violation may be compounded by the continuation of the pregnancy.

The Salvation Army affirms and supports professional people engaged in the care of pregnant women who feel on religious, moral or ethical grounds, that they cannot be involved in any way with the procuring or undertaking of an abortion.

*The Salvation Army International Positional Statement, November 2010*





# Abortion

A DISCUSSION PAPER FOR SALVATIONISTS

## The debate

While there are a number of churches and individual Christians who take a 'pro-life' stance, there are many churches and Christians who would accept that there are certain situations where a termination of pregnancy may be a responsible decision.

The 'pro-life' position argues from the basis of the sanctity of all human life, including the life of the unborn child and accordingly views abortion as murder. Many of those coming from the 'pro-life' position hold the Judeo-Christian teaching which declares God's concern for the weak and vulnerable, of whom the unborn child is a primary example, and argue that to procure or allow abortion is a failure to protect life. This position argues that all children, pre- and post-birth, should have their life preserved regardless of any other possible considerations.

The 'pro-choice' position is based on the freedom of women to decide issues concerning their own bodies, including whether or not they wish to proceed with a pregnancy. This position holds that it is the responsibility of the community to provide women with reproductive choice, including access to safe pregnancy termination services for all women who make such a choice. Although this position is often presented as being 'pro-abortion', this is not necessarily the case. 'Pro-choice' supporters point out that if women are given access to a range of options and a level of support that allows for real contraceptive choices, then the decision to terminate the pregnancy will be less likely.

The pro-choice position is typically held by supporters of the feminist and women's rights perspective from both within and outside of the Christian faith. Christians who hold a pro-choice view usually argue that unwanted pregnancies happen in this imperfect world, even though contraception is readily available. If safe and regulated terminations are not provided by society, women who decide to have an abortion will resort to attempting self-induced abortions or seeking the

services of a "backyard abortionist" (if affordable) whose techniques may not be safe. This exposes women to a significant risk of acute infections, infertility, or even death.

## Ethical conflict

Abortion is an issue that brings differing moral codes and value systems into confrontation. This results in both public conflict of opinion between groups and private or inner conflict for individuals. As a result people holding extreme pro-life or pro-choice positions have been unable to reach a consensus through debate. People from both sides of the debate have resorted to violence and harassment to promote their position.

This internal conflict is evidenced in many Christians, including Salvationists, who hold a position which opposes abortion while simultaneously accepting abortion under certain circumstances.

It is seen by many that abortion is acceptable where the life or physical well-being of the mother is at serious risk or in cases of rape or incest. These women are vulnerable and in need of Christian care and concern. Termination of pregnancy may also be acceptable where a fetal abnormality incompatible with life or where total absence of cognitive function in the fetus is identified.

While there are strong arguments for those positions, similar points may be raised where a disability is identified within a fetus which is not incompatible with life nor is there total absence of cognitive function, yet where abortion is increasingly accepted by medical staff and by society. These would include, but are not limited to, a fetus having been diagnosed with medical conditions such as

- Down Syndrome
- Haemophilia
- Duchenne Muscular Dystrophy
- Thalassaemia major



# Abortion

A DISCUSSION PAPER FOR SALVATIONISTS

Australian guidelines for care of women in pregnancy include offering all women testing for major chromosomal abnormalities, the most common of which is Down Syndrome. Not all women accept this testing and not all of those whose fetus is identified as being at high risk of having an abnormality proceed past the screening test (Nuchal Translucency Scan or Triple Test) to having a diagnostic test (CVS or amniocentesis.) For those women who are confirmed as having a fetus with Down Syndrome, some will continue with the pregnancy, others will choose an abortion. For example, in an analysis of Queensland pregnancies affected by Down Syndrome in 2007-2008, 50.4% were terminated prior to 20 weeks of pregnancy. (Howell, 2009)

Current testing in pregnancy is not able to identify those fetuses who will be severely disabled by Down Syndrome from those who will be mildly affected. Nor can testing identify if a fetus has such conditions as autism, cerebral palsy, is deaf, blind or otherwise physically normally formed. When Christians have these tests the results may expose them to the moral dilemma which this paper is exploring.

Some societies permit abortion on the basis of the sex of a child, independent of any risk of medical conditions. Although not accepted practice in Australia, there are those who are advocating this position.

Overall it is not unreasonable to claim that many Christians would concur with limited exceptions. However, they remain concerned that it is impossible to objectively define and legislate on what are acceptable justifications, if any, for abortion and at what stage of pregnancy abortion becomes unjustifiable.

## Consistency of ethical position

The issue of abortion touches on other ethical issues. The Salvation Army approves the use of artificial means of contraception, which prevents a pregnancy from taking place. However, the mode

of action of some of these interventions, including some forms of synthetic hormonal contraception and some mechanical methods of contraception, for example the intra-uterine device (IUD) or the minipill, may work by prevention of implantation of the fertilised ovum onto the walls of the uterus thus preventing further growth and development.

Such forms of contraception are not supported by The Salvation Army because they are inconsistent with our belief, as presented in the Army's International Positional Statement on Abortion, in the sanctity of all human life from the moment of fertilisation. Although it could be argued that the "morning after" pill is just as legitimate a means of birth-control as any of the other forms, in reality that argument is effectively saying that abortion prior to an identified term during the pregnancy is justifiable.

**"The fetus is a human life which can develop the personhood that he or she already possesses."**

Sanctity of intra-uterine life also raises the question of the sanctity of extra-uterine embryonic and fetal life. An ethical position on abortion will have influence on an ethical position regarding research on embryos produced from IVF programs. It will also affect how cells, organs and tissues (which can be extracted from aborted embryos—whether induced or spontaneous) might be utilised for research or therapeutic reasons. The Salvation Army does not support the creation of human embryos specifically for research purposes, but acknowledges that in some circumstances embryo research might be considered acceptable. See The Salvation Army Australia's Guideline for Salvationists on IVF for further discussion, and particularly the section 'Embryo Research': [www.salvationarmy.org.au/en/Who-We-Are/vision-and-mission/Positional-Statements/Guidelines-for-Salvationists/In-Vitro-Fertilisation/](http://www.salvationarmy.org.au/en/Who-We-Are/vision-and-mission/Positional-Statements/Guidelines-for-Salvationists/In-Vitro-Fertilisation/)



# Abortion

A DISCUSSION PAPER FOR SALVATIONISTS

## Biblical and theological principles

John Stott, writing in “Issues Facing Christians Today” highlights Psalm 139 as a key passage of Scripture for a perspective on abortion and makes the following points:

1. The affirmation of God’s creative activity “in utero”. Despite the lack of scientific knowledge, the Scripture writers’ affirm that ante-natal life is not merely haphazard and chance, but evidence of God’s creative work and skill (Psalm 139:13). (This theme can also be noted in Job 10:8, 10-11; Job 31:15, and Psalm 119:73)
2. The affirmation of continuity of identity. The Psalmist surveys his life in several stages: past (verse 1); present (verses 2-3); future (verse 10) and pre-natal (verse 13). He expresses a consciousness of being the same person before and after birth, as a baby, a youth and an adult. It is a matter of conjecture at what point the fetus has soul/spirit; however the Hebrew understanding of personal identity as “embodied soul” implies, in the Psalmist’s affirmation, the psycho-spiritual dimension of the unborn child.
3. The affirmation of covenant relationship. The same God who creates, sustains, knows and loves the individual, also calls all people from before birth into a relationship with himself and will always remain faithful (verses 7-12). This theme is also found in Psalm 22: 9-10; Psalm 71:6, and Jeremiah 1:4.

Psalm 139 gives a Biblical perspective indicating that a fetus is not merely a growth in a mother’s body, nor merely a potential human being. Rather the fetus is a human life which can develop the personhood that he or she already possesses.

Alongside the affirmations above, there are biblical and theological principles which also underpin The Salvation Army’s position on abortion. The following principles are quoted directly from our International Positional Statement (November 2010).

## *The sanctity of life*

The Salvation Army believes in the sanctity of human life. Humankind was created in the image of God (Genesis 1:27). All people—without exception—are of value to him, holding a special place in his creation (Psalm 8:5), irrespective of age, gender, race, religion, health or social status, or their potential for achievement. The Bible makes it clear that human life is sacred: it is God who gives life (Acts 17:25) and God who decides when it ends (Psalm 104:29). In particular the scriptural principle of the right to life of innocent human beings is firmly established (Isaiah 59:7, Jeremiah 22:3).

## *The start of human life and personhood*

God’s concern for humanity includes life in the womb (Psalm 139:13-16, Jeremiah 1:5). This is reflected in Old Testament law which imposes penalties upon those who cause the loss of fetal life (Exodus 21:22-23). The visit of Mary to Elizabeth (Luke 1:39-45) seems to demonstrate the continuity of life from the fetal stage. Although not specifically mentioning abortion, these texts imply that any decision deliberately to end an unborn life is a violation of its ongoing sanctity and is therefore a serious issue requiring justification to God.

## *Free will*

Part of God’s gift of life to humanity is our free will and the ability to make decisions (Proverbs 1:29; Isaiah 7:15-16). Some people would argue that, despite the notion of sanctity of life, the mother has the right to choose whether or not she wishes to continue with a pregnancy and that her right to do so supersedes the right of the unborn child to life. This is not consistent with the Christian belief in a God who cares for and defends the weak and the marginalised (Leviticus 19:14, 33-34) and who is a God of justice (Psalms 140:12, 146:7-9). The notion of human rights must be accompanied by that of human responsibility. In the case of abortion, the Christian’s responsibility to defend those at risk is not to be set aside.





# Abortion

A DISCUSSION PAPER FOR SALVATIONISTS

## TESTIMONIAL

### Why we said no

When I was 18 weeks pregnant with our first child, my husband and I went to the hospital for a routine scan. The word 'routine' makes it all sound very normal, and our discussions beforehand focused on whether we wanted to find out the sex of our baby.

Being the first in our circle of friends to be pregnant, we had no experience of others facing pregnancy issues or difficulties, and no concerns were raised in our minds. We were just going along to see pictures of our baby.

So we were completely unprepared for the devastating news we received during the scan that our baby had significant health issues. That day, doctors were unsure of an exact diagnosis, but a large growth around her head and heart prompted them to tell us it was unlikely she would live to full term. If she did, she would probably not survive once born.

We immediately called family and friends, rallying them to pray with us for our baby. Overhearing these conversations, the doctor (who we had not met before) cautioned us against contacting people as a decision to terminate a pregnancy was much easier to do alone as a couple than with the opinions of others clouding our judgment.

We thanked him for his advice, but assured him that termination was not an option we were considering. To us, choosing to end our baby's life because of medical diagnosis, no matter how grim, was potentially denying God the opportunity to do the miraculous. Our baby was a gift from God, and we would not choose to end her life.

During the next few weeks more doctor visits did not change the diagnosis. We prayed, others prayed. We cherished every moment we had with our unborn baby, who we'd named Grace, until she died three weeks later.

A year later I was pregnant with our second child. Many doctors had made a 12-week scan available as a way of diagnosing, among other things, Down syndrome. When our GP asked if we wanted this scan, our answer was a firm no. We would not consider terminating our child's life, irrespective of what that test determined, so there was no point doing it. We still had a scan at 18 weeks. Our sense of dread at bad news was only overcome by our faith and trust in God that again, our child was his and in his care.

Medical science provides us with many, many benefits. We have information and knowledge available to us like never before, and lives are being saved and enhanced. But with this knowledge and information comes greater responsibility and potentially greater burdens and decisions. Medical science allowed us to know Grace was sick for three weeks before she died. We are thankful that a scan gave us time to process, prepare, hope, and most importantly pray. But we never saw a scan as a way of allowing us to choose whether or not to proceed with the pregnancy.

We now have three beautiful girls – Grace is waiting for us in heaven, and God has granted us the joy of having Ellie and Sophie here with us, gifts we are daily grateful for.



# Abortion

A DISCUSSION PAPER FOR SALVATIONISTS

## Practical responses

### Access to termination services

As abortion is lawful under certain circumstances, it is essential to ensure that these services are accessible to all who need them, without discrimination. Distance, language, culture or cost should not exclude any from such services.

### Access to medical information

In considering a termination of pregnancy, whether legal or illegal, all women have the right to a full disclosure of the possible physiological as well as psychological outcomes which are known to be associated with abortion.

### The right to conscientious objection

Doctors and theatre staff must have the right to obey their conscience by declining participation in abortion procedures without recrimination or discrimination.

### The right of the father

It is not always easy to determine the role of the father in the decision-making process. Ideally, both partners should make the decision together and take responsibility for caring for one another as the outcomes are worked through. This is an imperative where Christian marriage vows have been exchanged.

### The role of the Church

If the Church claims a right to participate in the abortion debate, this claim must be supported by addressing, in a practical way, the personal and social impact of unwanted pregnancy, unwanted children and a fractured society.

The Church seeks to offer compassionate care and provision for

- Women who choose to continue with a pregnancy, even though unplanned or unwanted. Whether a mother decides to keep

her child or relinquish her child for adoption, she, her family and the child born into that situation will need ongoing pastoral, social and practical support. Church members need to know how to locate and refer pregnant women to pregnancy and family support services (better still, such services could ideally be provided by the Church).

- Women who are considering or who have had an abortion and who seek care and counsel. This care and counsel may include dealing with practical implications of their decision or other outcomes.
- Other family members.

All such care needs to be provided completely free from stigma—something the Church does not always do well.

The Church, of which The Salvation Army is a part, also has a responsibility to address those social issues that contribute to the incidence of unwanted pregnancy in our society, such as breakdown of family life, abuse of women (including rape in war and human trafficking), poverty, sexual ignorance and the exploitation of sexuality.

### For further reading:

Stott, J *Issues Facing Christians Today: New Perspectives on Social and Moral Dilemmas*, Marshall Pickering: London (p.315-318)

Shaw Clifton: *Strong Doctrine, Strong Mercy*

The Salvation Army International Position Statement on Abortion (November, 2010)





# Abortion

A DISCUSSION PAPER FOR SALVATIONISTS

## Suggested discussion points for groups and/or individuals

There is no expectation that every member of a group will come to the same conclusions. Each of us is growing in our faith and is being led by God from where we are today to where he wants us to be tomorrow.

What are the factors that lead to a woman seeking an abortion and what can we/I do to influence these prior to this point?

Read Matthew 6: 25-33 asking God for understanding.

What message is at the heart of Jesus' words in this passage?

Now read Psalm 139 slowly, again asking God for understanding.

What are the main themes of the Psalm?

What does it reveal about our God?

What does it reveal about people and personhood?

In what ways do these insights affect  
My world view?  
My decisions?  
My relationships?

Are there principles here which help to clarify the various elements of the abortion debate?

## Bibliography

Culcutt, C. (2007). Abortion Services in Australia. O & G Summer 2007, 27-28.

Howell, S. (2009, June). *Maternal characteristics in pregnancies affected by Trisomy 21 (Down Syndrome) in Queensland 2007-2008*. Retrieved December 10, 2011, from Queensland Health: [www.health.qld.au/hic/statbite/statbite18.pdf](http://www.health.qld.au/hic/statbite/statbite18.pdf)

The Salvation Army IMASIC. (2010, November). *Abortion*. Retrieved April 12, 2012, from The Salvation Army: [www.salvationist.org/extranet\\_main.nsf/vw\\_sublinks/8A04FA3170AA86AB8025774500731612?openDocument](http://www.salvationist.org/extranet_main.nsf/vw_sublinks/8A04FA3170AA86AB8025774500731612?openDocument)

Oxford Dictionary. (2012). Abortion. Retrieved April 12, 2012, from Oxford Dictionaries: [oxforddictionaries.com/definition/abortion?q=abortion](http://oxforddictionaries.com/definition/abortion?q=abortion)

Petersen, K. A. (2010). Early medical abortion: legal and medical developments in Australia. *The Medical Journal of Australia*, 193 (1): 26-29.

Stott, J. *Issues Facing Christians Today: New Perspectives on Social and Moral Dilemmas*, Marshall Pickering: London (p.315-318)

Victorian Government Department of Health. (2011, July). Abortion. Retrieved April 12, 2012, from Betterhealth.vic.gov.au: [www.betterhealth.vic.gov.au/bhcv2/bhcarticles.nsf/pages/Abortion\\_in\\_Australia](http://www.betterhealth.vic.gov.au/bhcv2/bhcarticles.nsf/pages/Abortion_in_Australia)

