

# Abortion: A Christian Ethical Perspective

The tragedy of an unwanted pregnancy that threatens a woman's life or health existed in the ancient world as it does today. At the time the Bible was written, abortion was widely practiced in spite of heavy penalties. The Assyrian code prohibited abortion with this statement: "Any woman who causes to fall what her womb holds ... shall be tried, convicted and impaled upon a stake and shall not be buried." In Assyria the fetus was given more value than the woman.

## The Bible on Abortion

Although the Hebrews were influenced by many of the laws of their Assyrian, Sumerian, and Babylonian neighbors, all of which forbade abortion, the Hebrew scriptures had no laws forbidding abortion. This was chiefly because the Hebrews placed a higher value on women than did their neighbors. There are, however, some references to the termination of pregnancy. Exod. 21:22-25 says that if a pregnant woman has a miscarriage as a result of injuries she receives during a fight between two men, the penalty for the loss of the fetus is a fine; if the woman is killed, the penalty is "life for life." It is obvious from this passage that men whose fighting had caused a woman to miscarry were not regarded as murderers because they had not killed the woman. The woman, undeniably, had greater moral and religious worth than did the fetus.

There is also reference in the Mosaic law to what is now called "abortion on request." Num. 5:11-31 indicates that if a husband suspects his wife is pregnant by another man, the "husband shall bring his wife to the priest," who shall mix a drink intended to make her confess or be threatened with

termination of her pregnancy if she has been unfaithful to her husband.

Aside from these passages, the Bible does not deal with the subject of abortion. Although both Testaments generally criticize the practices of the Hebrews' neighbors, such as idol worship and prostitution, as well as various immoral acts committed in their own land, there is no condemnation or prohibition of abortion anywhere in the Bible even though techniques for inducing abortion were widely used by the time of the New Testament.

## When Does Life Begin?

A key question in the abortion controversy is, "When does human life begin?" The Bible's clear answer is that human life begins at birth, with the first breath. In Gen. 2:7, God "breathed into his nostrils the breath of life and man became a living being" (in some translations, "a living soul"). The Hebrew word for human being or living person is *nephesh*, which is also the word for "breathing." *Nephesh* occurs hundreds of times in the Bible as the identifying factor in human life. This is consistent with the opinion of modern medical science. A group of 167 distinguished scientists and physicians told the Supreme Court in 1989 that "the most important determinant of viability is lung development," and that viability is not achieved significantly earlier than 24 weeks of gestation because critical organs, "particularly the lungs and kidneys, do not mature before that time."<sup>1</sup>

In the Christian scriptures the Incarnation, or "the Word made flesh," was celebrated at the

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time of Jesus' birth, not at a speculative time of conception. We follow the biblical tradition today by counting age from the date of birth rather than from conception, a date people do not know or seek to estimate. The state issues birth certificates, not conception certificates.

The Vatican's assumption that human life begins at conception—which is derived from Greek philosophy, rather than the Bible—implies that a human being is created at a specific moment instead of by a process that takes about nine months. The Vatican also assumes that each person remains essentially what he or she was at conception, as if genes were omnipotent.

A person is more than a collection of cells created by 46 chromosomes. As the geneticist Charles Gardner observed, "Both the maternal environment outside the embryo and an unpredictable randomness inside the embryo have their effect" at every stage of development, as evidenced by the fact that genetically identical embryos will not make identical human beings.<sup>2</sup>

To focus on the biological realities of genes and chromosomes present at conception or to think of personhood solely in materialistic or biological terms neglects the spiritual nature and characteristics of humans, whom the Bible describes as created "in the image of God" (Gen. 1:26-27). This description refers not to biological similarities but to the abilities to love and to reason; to the capacity for self-awareness and transcendence; and to the freedom to choose, rather than to live by instinct.

The brain is crucial to such human abilities. Michael V. L. Bennett, Chair of the Department of Neuroscience, Albert Einstein College of Medicine, said, "Personhood goes with the brain and does not reside within the recipient body," although the body "is necessary for brain function." He asserted, "There is none, not heart, kidney, lung, or spleen that we cannot transplant, do without, or replace artificially. The brain (which cannot be transplanted) is the essence of our existence."<sup>3</sup> The 167 scientists and physicians mentioned above said, "It is not until sometime after 28 weeks of gestation that the fetal brain has the capacity to carry on the same range of neurological activity as the brain in a full-term newborn."<sup>4</sup>

Fifty-one percent of all abortions in the United States occur before the 8th week of pregnancy; more than 91 percent occur before the 12th week (in the first trimester); and more than 99 percent occur before 20 weeks, which is about 4 weeks before the time of viability (when 10 to 15 percent of fetuses can be saved by intensive care). In such cases of early abortion there is no fetal neocortex, and hence no pain. However, every termination of potential human life presents a moral problem and can be justified only by the

damage to living persons that may result from an unacceptable pregnancy.

Contraception (birth control), the practice of which can greatly reduce the number of abortions, involves the prevention of conception, ovulation, or implantation in the uterus. The Vatican's position that all sexual activity must allow the possibility of procreation has led the anti-abortion movement to be silent about contraception as a way to prevent the need for abortion. Other groups, including the Roman Catholic bishops, have exerted pressure to minimize or prevent research on new methods of contraception. The Vatican's idea that a human being exists at a particular moment during or immediately following intercourse has led virtually all anti-abortion groups to oppose the prevention of implantation. The official position of the Vatican is that of advocating "natural family planning," the least effective method of birth control with a failure rate of 20 to 35 percent. It requires up to 17 days of abstinence from sexual relations each month. (The period of abstinence must include not only the days of a woman's fertile period, but extra days to allow for the durability of sperm within the female body.) The argument that conception is a more crucial step in the birth process than implantation is irrelevant. Conception is not complete until the fertilized egg is implanted in the uterus, which generally occurs about ten days to two weeks after ovulation. Up to 50 percent of fertilized eggs do not implant, and in those cases it is impossible to speak of conception. Except in cases of in vitro fertilization, it is impossible to know that fertilization has taken place until implantation occurs.

Of the fertilized eggs that are implanted, between 20 to 50 percent are miscarried. If objections to the prevention of implantation are based on the assumption that this is taking life, then nature or God is the greatest killer, because there are more spontaneous preventions of implantation than there are medical preventions. In other words, it is not God's will that every conception should eventuate either in implantation or in birth. This argument is consistent with our assertion that a fetus, as well as a fertilized egg, is a potential rather than an actual human being.

Actually, those who claim that a human being exists at conception are guilty of prolepsis, a term defined in *Webster's Dictionary* as "an anticipating, especially the describing of an event as if it had already happened."<sup>5</sup> This type of anticipation is being practiced by those who speak of the few cells that exist after conception or a fetus in the early trimesters as "a baby" or "an unborn child."

## **Do the Born and the Unborn Have Equal Value?**

Some years ago at a meeting of the American Society of Christian Ethics, a workshop was confronted with the case of a 3-year-old child and an

18-week fetus, both with a dread disease for which there was only one injection of medicine in Chicago. The Chicago airports had been shut down by a blizzard, preventing the doctors from obtaining more of the medicine. We unanimously concluded that the child should get the injection. The moral difference is that the child is among us in a way that the fetus is not. The child's claim is based on relationship, rather than on a legal point of birth.

Although the Roman Catholic hierarchy strongly opposes intentional abortion, in practice it sometimes recognizes the priority of the woman over the fetus, as is evident in the following excerpt from a U.S. Catholic Conference publication:

*Operations, treatments and medications, which do not directly intend termination of pregnancy but which have as their purpose the cure of a proportionately serious pathological condition of the mother, are permitted when they cannot be safely postponed until the fetus is viable, even though they may or will result in the death of the fetus.<sup>6</sup>*

The Roman Catholic church argues that in this situation, although the death of the fetus is foreseen, it is not intended, because the intention is to preserve the health and the life of the woman. Is it not reasonable to assert that the intention of most women who choose abortion is to preserve their health and well-being, not to "kill" the fetus, although its death may be foreseen? In such situations, the fetus does not have equal value with the mother, and allowing the fetus to be lost is not the same as permitting the woman carrying the fetus to die or otherwise suffer.

Judaism generally views the fetus as a part of its mother. Just as a person may choose to sacrifice a limb or organ to be cured of a malady, so may the fetus be removed for the sake of the pregnant woman.

Isaac Klein, a 20th-century Conservative rabbi, elaborated on a ruling of Maimonides against a "pursuer" that is comparable to the law of self-defense: "Since the child causing a difficult birth and threatening the woman's life is regarded as one pursuing her and trying to kill her it may rightly be aborted."

Neither Anglo-Saxon law nor the U.S. Constitution has ever given a fetus the same legal status as a woman. Until a baby is born there is only a potential person. When abortion was illegal, it was reviewed as a felony rather than a homicide. The fetus has always been a potential rather than an actual person.<sup>7</sup>

What right does a woman have to an abortion? One answer is that the right of living persons takes precedence over any rights of potential persons, just as immediate or present needs take precedence over future or potential needs. This question can also be restated: What right does anyone have to impose mandatory pregnancy on a woman? The

ethical question is not whether abortion can be justified, but whether we focus on an embryo or fetus as the object of value or whether we focus on the woman as a moral agent who must have freedom of choice.

## The Freedom to Choose

When Moses asked God his name, God said, "I am who I am," or, in the future tense, "I will be who I will be." God is a free moral being whose actions are not determined by cause and effect. Humans made in the image of God are likewise moral beings precisely because they engage in free choice in all of their decisions.

A passage in Genesis describes humans as moral decision makers who, like God, know the difference between good and evil. Of all the animals in the Garden of Eden only one, the human being, was free to make choices. Humans were given the ability to choose between good and evil and, of course, the responsibility to face the consequences of their choices.

In the New Testament, there is an emphasis on the priesthood of all believers: "You are a chosen race, a royal priesthood, a holy nation, God's own people" (1 Pet 2:9). Each believer has direct access to God and has the ability to know and do God's revealed will. We are not bound by any natural law derived from Greek philosophy; neither are we bound by the ancient Jewish law or by any other legalism handed down by any religious or spiritual leader.

When Jesus said, "Man was not made for the Sabbath, the Sabbath was made for man" (Mark 2:27), he struck at the heart of legalism, or the imposition of rules for their own sake. The Bible tells us that we live by grace. This means that God acts within human beings to set us free and to enable us to assume responsibility for ourselves, our environment, and our future. If we make wrong choices, God's grace is available as judgment and forgiveness.

Humans, by the grace of God, have developed medicine, surgery, and psychiatry to prolong and enhance life. These same medical approaches can be chosen to prolong or enhance the life of a woman for whom a specific birth would be dangerous.

An area that has recently been emphasized in theological ethics is the integrity and welfare of women. Women, whose lives and freedom have been largely controlled by men for centuries, must make or be involved in decisions that affect their lives, their futures, their families. To refuse on principle to permit a woman to consider her life or welfare when it seems threatened by pregnancy is to say that only men are the recipients of God's grace in terms of freedom and responsibility. It is also to say that the primacy of the fetus's right to bodily life places all other

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considerations, including the health, worth, and dignity of women, on a lower level.

## Doctrinal Issues

Roman Catholic and Protestant doctrines differ in, among other things, the degree to which they are legalistic. The Catholic church would have us all obey the rules formulated by the Vatican, but Protestants believe that we are free by grace and justified by faith. The phrase “the sacredness of life” means one thing to Catholic bishops—that the life of the fetus is all-important—but to most Protestants and many others it means that there is a presumptive right to life that is not absolute but is conditioned by the claims of others. For us the right to life and the sacredness of life mean that there should be no absolute or unbreakable rules that take precedence over the lives of existing human persons.

The pro-life position is really a pro-fetus position, and the pro-choice position is really pro-woman. Those who take the pro-fetus position define the woman in relation to the fetus. They assert the rights of the fetus over the right of the woman to be a moral agent or decision maker with respect to her life, health, and family security.

The second doctrinal issue in both the abortion and birth-control controversies is who is to have the power to control procreation—women, in consultation with their partners and their physicians, or the church. The historic natural-law position of the Catholic church was concerned not about feticide, but about the sin of sexuality if it interfered with procreation, as contraception and abortion do. The Pope and the bishops have been unable to persuade women to accept control by the church over their sexuality; their only hope for asserting that control is to persuade the state through political power to make a church sin into a secular crime. The low view of women that keeps them from being ordained and insists that their proper role is that of mother is not simply Catholic theology but fundamentalist political ideology, which is also anti-woman. The key term in the controversy is not simply “pro-life,” but “pro-family,” in which “family” is always defined as a patriarchal family.

As theologian Rosemary Reuther has pointed out:

*It is not accidental that Catholic countries where both contraception and abortion are discouraged have higher abortion rates than countries where both are legal but where contraception is encouraged. It is also well known that Catholics in the United States have a higher proportion of abortions than Protestants and Jews. Why? Quite simply the combination of an anti-contraception culture, combined with hostility toward female*

*sexuality and self-determination promotes the conditions of unchosen pregnancy and hence recourse to abortion as the unchosen but forced solution.*

## The Right of Privacy

The Supreme Court in its *Roe v. Wade* decision did not hold that women have a constitutional right to an abortion; it held that they have a constitutional right of privacy that permits them and their physicians to make decisions “including a woman’s qualified right to terminate her pregnancy.” The Court also held that during the last three months of pregnancy, the state, “in promoting its interest in the potentiality of human life, may, if it chooses, regulate, and even proscribe, abortion, except where necessary, in appropriate medical judgment, for the preservation of the life or health of the mother.”

The right of privacy is the right to make personal choices without governmental supervision or dictation. The government exists to serve the people, not to dominate them. The government should not force women to bear children, to remain at home, to relinquish their careers, to accept welfare as the price of not working, or to be subjected to a higher mortality rate from coerced childbirth. Both the woman and her physician have the right to choose appropriate medical procedures for the health of the patient without government dictating that one medical procedure is forbidden regardless of the consequence to the woman.

## Rights, Obligations, and Laws

In answering the question, “Is there a right to life in law or in biblical faith?” we must distinguish between a virtue and a right. If I am walking along the bank of a river and someone who cannot swim falls or jumps in, it could be argued that I ought also to jump in to rescue the drowning person, even if my own life is thereby endangered. But the person who jumps or falls in cannot claim that I must jump in because that person has a right to life. The mere fact that rescuing another would be a virtuous choice does not give that other person a right to decide my actions.

The common-law rule is that we have no duty to save the life of another person unless we voluntarily undertake such an obligation, as a lifeguard does in contracting to save lives at a beach or swimming pool. Neither is there a biblical mandate that each of us is morally required to risk our lives to save the life of another. Jesus considered it highly exceptional and evidence of great love if “a man lay down his life for his friends” (John 15:13).

No one who has not willingly contracted to do so is legally or morally required to give his or her life, or to make large sacrifices of health or money, to save the life of another person. Even an identical twin is not legally required to donate a kidney or

blood to save a sibling's life. The virtue of the Good Samaritan lay precisely in doing something he was not obligated to do.

No woman should be required to give up her life, her health, or her family's security to save the life of a fetus that is threatening her well-being. At the very least she is entitled to self-defense. On the other hand, many women are willing to sacrifice their health and their future in order to have one or more children. The religious community that respects the freedom of women to make such a choice must respect equally their freedom to choose not to bear a child.

Laws cannot eliminate abortions. In Romania under Ceausescu, the Communist secret police checked monthly on all female workers under the age of 45 and monitored pregnant women; yet Romania outranked virtually all other European nations in rates of abortion and abortion-related female deaths.<sup>8</sup> In Brazil, where abortion is illegal, there are twice as many abortions as in the United States, although Brazil's population is only half that of the United States. In Latin America, illegal abortion is the number-one killer of women between the ages of 15 and 39.<sup>9</sup>

By contrast, in countries where abortion is legal, it is a medically safe procedure. Cook County Hospital in Chicago, prior to the Supreme Court's decision legalizing abortion, admitted about 4,000 women each year for medical care following illegal abortions. After the decision, the hospital admitted fewer than five such cases a month.<sup>10</sup>

## Reducing the Need for Abortion

Rather than pursuing laws banning abortion, which I believe would be as effective as passing laws against earthquakes, we should direct our energies toward reducing the need for the procedure. Supporters and opponents of legal abortion alike would agree that reducing the need for abortion, and thus the number of abortions performed, is a worthy goal.

Women do not engage in sexual intercourse or become pregnant in order to have abortions. Some women become pregnant unintentionally because of a lack of sex education. Increasing the availability of birth control information and contraceptives is a possible response to this problem.

Then there is the problem of contraceptive failure. The failure rate of barrier methods is in the 10 to 15 percent range, and of birth control pills 1 to 4 percent. Until a contraceptive that is 100 percent effective is developed and made widely available, we must provide support for victims of contraceptive failure. For some women, particularly those close to the poverty line who would be financially unable to care for an additional child without jeopardizing the very existence of their families, an unexpected pregnancy can be devastating. Free day care centers for children of working mothers, or a

guaranteed annual income such as economist Milton Friedman and the late senator Barry Goldwater once proposed, would remove some of the economic reasons for seeking abortions.

Another way the number of abortions could be reduced would be to provide ample facilities for the care of children with severe birth defects at no cost to the parents. For families unprepared or unable to devote the vast emotional and financial resources necessary to care for a severely handicapped child, such a program would present a compassionate and realistic alternative to abortion.

Finally, we must face the horrendous problems presented by rape and incest, both of which induce great suffering among their victims. The responsibility of men in sexual relationships must be stressed in the home, in schools, in our churches, and in our legal system. Our society must undertake strong educational and enforcement measures to reduce the tragedies of rape and incest and ensure the safety and dignity of women.

## The Need for Compassion

Many Christians are quick to condemn what they believe is immorality in others. Such people should be reminded that men and women sometimes find themselves caught in situations that they feel leave them no choice, and that we all need understanding, forgiveness, and compassion. All too often a young, physically and psychologically vulnerable woman must bear the entire physical, social, emotional, and financial cost of birth while the father of the child assumes no responsibility. A young woman in those circumstances needs the acceptance, love, and compassion of her parents, her pastor, and her community.

In the story of the woman who was about to be stoned because she had been caught in the act of adultery, Jesus expressed compassion and understanding when he said to the men, "Let him who is without sin cast the first stone," and to the woman, "Neither do I condemn you." Jesus was always more critical of sins of the spirit than sins of the flesh. That is why he spoke so compassionately to this woman but so strongly to the self-righteous, legalistic men.

All of us who discuss ethics must learn from Jesus that it is not laws that make people good but love, education, active concern for others, and forgiveness when others are found wanting.

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## Endnotes

1. Amicus Curiae Brief of 167 Distinguished Scientists and Physicians, Supreme Court of the U.S., October Term 1988, William L. Webster V. Reproductive Health Services No. 88-605, p. 10.
2. Charles A. Gardner, *In These Times*, May 23-June 5, 1990.
3. *Abortion Rights and Fetal Personhood*, ed. by Edd Doerr and James W. Prescott (Long Beach, CA, Centerline Press, 1990), p. 77.
4. Amicus Curiae Brief, p. 14.
5. *Webster's New Universal Unabridged Dictionary* (New York: Simon and Schuster, 1979), p. 1439.
6. Ethical and Religious Directives for Catholic Health Facilities, Publications Office, United States Catholic Conference.
7. New York in its homicide statute defines a "person when referring to the victim of a homicide (as) a human being who has been born and is alive." (N.Y. Rev. Penal Law 125.05) The U.S. Constitution in the 14th Amendment also makes birth a prerequisite to citizenship.
8. Charlotte Hord et al., "Reproductive Health in Romania: Revising the Ceausescu Legacy," *Studies in Family Planning*, 22 (4) (July/August 1991):231-239.
9. Toni Carabillo, *Abortion: For Survival, A Guide to the Videotape* (The Fund for the Feminist Majority, 1989), pp. 8-10.
10. Senator Charles Percy, *Congressional Record*, April 10, 1974.

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The Religious Coalition for Reproductive Choice, founded in 1973, is the national organization of pro-choice people of faith in the United States. The Religious Coalition—comprising Protestant, Jewish, and other denominations and faith groups, the Clergy for Choice Network, and state affiliates throughout the country—works to ensure reproductive choice through the moral power of religious communities. In all programs, the Religious Coalition seeks to give clear voice to the reproductive health issues of people of color, those living in poverty, and other underserved populations.

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