

ABORTION - DON'T MENTION THE BABY? - Dr. Ted Watt.

'Don't mention the war' – remember that?

It was in the telly show *Fawlty Towers*. In *Fawlty Towers* there was something that you weren't allowed to mention – when there were **Germans** staying in the hotel, the rule was --- don't mention the war. In that case the reason was obvious – the people running the hotel didn't want to upset their German customers

'What has *Fawlty Towers* got to do with this talk?' I hear you ask – Or I **would** hear it, if you were not all so well-mannered. The answer, of course, is: Nothing. It just explains how this talk got its title Don't Mention the Baby

We (by 'we' I mean people like us, people in the Life movement) - we are increasingly being advised: When you talk about abortion, don't mention the baby, don't talk about abortion as the **killing** of a baby, and don't show **pictures** of babies. And so on

Who is telling us this? Mostly people who think of themselves as pro-life, other people in the Life movement. If you live in Melbourne you can probably think of a few names

Why are they giving us this advice (Don't mention the baby)? Partly for the same reason as in *Fawlty Towers*, for fear of upsetting people. But **mainly**, I think, because, with abortion, we have not been doing well. (With euthanasia, much better- we have been able to defeat every attempt to pass a lethal injection bill, so far). But with abortion, we have **hardly ever** had a win - successes have been rare, and setbacks serious - none more serious than the 2008 abortion bill in Victoria. And we are facing further attacks, in NSW and Queensland. In Victoria we already have, arguably, the most extreme abortion law in the western world, with the possible exception of South Africa. This has led some people on our side to suggest (and sometimes they don't just suggest, they confidently assert) that our whole approach to abortion is wrong, has been a mistake from the beginning – we should not have been denouncing abortion, we should not have been emphasizing that abortion kills babies- instead, we should have emphasized the harm that abortion does to women, and should have offered practical help to women. If we had done this, they tell us, we could have joined hands with our opponents to seek common ground with them, and so would have had more successes and fewer setbacks.

The suggestion of common ground can be quickly dismissed. We need to face squarely what we are up against - opponents who have shown **not the slightest interest** in seeking common ground. They will tolerate **no restrictions whatever** on abortion. There is **no stage of pregnancy**, however late, at which they will agree to draw a line and say: No abortions beyond this point, no abortions after so-many weeks. There is **no method of performing** an abortion that

our opponents are prepared to rule out. There is **no reason for demanding** abortion which they won't accept, not even sex selection – you might think that feminists would at least be outraged at the thought of killing a child before birth simply because she's a girl - but no, our opponents are quite untroubled by that. What they call 'a woman's right to choose' must have no limits, none at all.

Do our opponents **at least agree** with us that there are too many abortions in Australia, and that ways should be found to reduce the number of abortions? Is there at least **that** much common ground? **No**, let's be clear about this, **many** of them **don't**. It's true that they do sometimes **say** there are too many abortions, if they are running a campaign demanding that the government give more of our money to Family Planning to supply condoms to 9-year-olds. But their core position – and from time to time one of them says so openly- is that the number of abortions is exactly the **right** number, neither too many nor too few - it's the number that women **want**, so it **must** be the right number

And where they have the **numbers** in parliament, as in Victoria and South Africa, they will use those numbers to **conscript** doctors and nurses into the abortion-delivery process, against their conscience and their professional judgment. Think of that – if you're a **doctor** in Victoria, and you are not prepared to perform an abortion yourself, the law requires you find **another** doctor who **will** perform the abortion. And if you're a **nurse** in Victoria, it's **not** clear that the law gives you even **that** much space for your conscience. This is the law that Victorian politicians voted for two years ago. It's on paper in black and white. They could have accepted **amendments** in parliament. They **refused**. They had the **numbers**.

Faced with people who are capable of drafting a law like this, and voting for it, what hope is there of common ground? What hope is there of political successes based on common ground? The only hope is to defeat them on polling day – or to defeat **enough** of them to frighten the others. Good luck with that.

But let's turn back to our **friendly** critics, the ones who are telling us that we should stop talking about babies and start to get interested in women

In one sense, to say that pro-lifers should **start** taking an interest in **women** is like saying that Victorians should **start** taking an interest in **football**. Leading pro-life figures are mostly women. In this **room** there are a lot more women than men. In its membership, the Life movement can't **start** to be woman-centered because it has always **been** woman-centered. If our critics don't know this, they need to get out more

Well, yes, they might reply, but having lots of women in the Life movement is no guarantee that you will be woman-friendly, woman-helpful, and woman-welcoming. Women are not always

kind to other women. The Life movement, they suggest, is **content** to stand back and **condemn** abortion – without providing practical **help** with **alternatives** to abortion. Fair comment?

Now wait a moment! Haven't we had crisis pregnancy centres and telephone help lines running in Australia for years? Who runs them? Family Planning? Emily's List? The Royal Women's Hospital? And who funds them? The Victorian Government? The Federal Government? If you're pregnant and desperate and don't know how you can cope, if you need bump clothes or baby clothes, a stroller, a cot, a place to stay after mum and dad or the boyfriend have thrown you out, or just a friendly ear and a cup of coffee, and another cup next week, whom can you turn to? Leslie Cannold? Lachlan de Crespigny? Jo Wainer? Catherine Deveney? No – these pregnancy centres, these help phone lines, are nearly all affiliated with pro-life bodies like this one. Who runs them? – Some of **you**, in this **room**, and other women **like** you, in your **own time**. And who **pays** for them (beginning with the blood-curdling phone bills)? **You** do, people in this room, through your donations, and people **like** you in other pro-life groups.

And if you turn up at one of these; crisis pregnancy centres, or phone one of these help lines, what sort of **reception** will you get? Will some hard-faced, hard-voiced woman **shout at** you? Will she tell you that you had no business getting pregnant because you're not married? Will she say that you got what was coming to you? Will she call you a baby-murderer for **even thinking** about abortion? That's what our opponents believe (or **pretend** to believe) goes on in Pregnancy Counselling Australia, and similar centres. **Does** it?

Of course not. If **anything** about pregnancy counseling is **clear**, it is that there is no **way** of helping an unborn child except by helping his or her mother. You **have** to get the mother on side. Are you likely to get here on side by **shouting** at her? By **humiliating** her?

So if we are urged to offer practical help to women in a problem pregnancy, we can point out that the **only** practical help available is through the Life movement. No doubt we could **do more** – any volunteers? No doubt we could do a better job of publicizing Pregnancy Counselling Australia – any ideas? Too many of the women who need to talk to you have **never heard** of you.

Likewise, when we are told that we need to say more about the **harm** done to women by abortion, how can we **follow** this advice? Where can we **go** to **inform** ourselves? If we want to know about the association of a past abortion with **future infertility**, cervical incompetence, miscarriage, and premature birth in a future pregnancy, **whom can we ask?** The Royal Women's Hospital? The Royal Australian College of Obstetricians and Gynaecologists? If we want to know about the association of a past abortion with subsequent **anxiety**, depression, panic attacks, obsessive-compulsive disorder, sleep disorders, eating disorders, abuse of drugs, relationship failure, and risk-taking and self-harm, suicide – **whom can we ask?** The Royal Australian College of Psychiatrists? The major psychiatric hospitals? Relationships Australia?

If we want to know about the association of abortion with breast cancer, **whom can we ask?** The Cancer Council? The State Health Department? The Age newspaper? The New York Times?

In fact, almost the **only source of publicity** about the harm done by abortion to women is the **Life** movement. **Not our journalists and editors**, those tireless and fearless investigators, those foes of all concealment, those champions of the public's right to know. **Not our doctors and medical administrators**, those highly trained and deeply dedicated guardians of our health and well-being – people who know the medical evidence, people who read in the medical journals about the various kinds of damage done by abortion, but then go on to speak and act as if they know nothing about it. In some cases it is not too strong to say: they **pretend** to know nothing about it.

So that leaves us. We are a small voice, sadly, but we are just about the only voice there is.

So, once again, as with offering **practical help** and **support** to women, so with **publicizing the harm** done to women –

What our friendly critics are telling us we **should** do; we are **already** doing, and have been doing all along

And if **other groups than ours** want to get involved, in helping women or in informing women, we should be glad, not sorry (provided, of course, that they are doing it properly). We should not be snooty, saying that we were here first. We should not stand on our dignity – we are not in this for the sake of our own egos. And if the newcomers sometimes sound as if they think they have **just invented the wheel**, and are offering to show us how it works, we should treat them patiently, and keep our chuckles to ourselves. Provided that they are doing it properly.

And once again, we need to find ways to do what **we do, better**. Our message – that **medically**, Abortion is never best practice, that the **evidence on health outcomes**, physical and psychological, is **all in our favour** – this message has barely begun to be received. We have a long way to go.

Harm to women is an important part of our message. This is true particularly of **psychological** harm. Overwhelmingly the most widespread form of abortion-related damage is to women's **mental** health. Most women who have an abortion will **not** become infertile, though some will. Most women who have an abortion will **not** develop breast cancer, though some will. But damage done by abortion to a woman's psychological well-being is far more common - anxiety, depression, panic attacks, sleep disorders, eating disorders, abuse of drugs, relationship failure, risk-taking and self-harm – probably **not many women** are **entirely free** from one or more of these symptoms after an abortion, sometimes years later. And when you **think** about it, that's what you would **expect**. Psychological damage is related more inseparably to what has happened to her

Consider **stillbirth and miscarriage**. They sometimes have terrible effects on mothers' lives. But until fairly recently those effects were often **minimized**. They are now, belatedly, taken more seriously, as appropriate to what has happened to the mother – the loss of her child – bereavement. You don't tell someone undergoing bereavement to put it all behind her and get on with her life. You don't attempt to minimize what she has lost. On the contrary, you may advise her to **hold** her child, **name** her child, **bury** her child, visit her child's **grave**. The last thing you would do is to soft-pedal the reality of her child's life, and death.

What's the difference with the loss of a child by abortion? Only that the bereaved mother is more likely to be treated as women were often treated 50 years ago after stillbirth or miscarriage – **told to put it behind her** and to get on with her life – just as unfeeling, and just as unlikely to help her. Post-abortion bereavement counseling **can't work** by denying reality – and the reality is that she has lost her child, and her grief is entirely **appropriate and in proportion** to that loss. The advice – Don't mention the baby – will be unhelpful. Naturally, it may not be the **first** thing you mention. And it may take a lot of experience and sensitivity, and a lot of time, to bring a woman to **confront her loss**, and **accept** it.

(Perhaps I should emphasize that I'm not giving advice to people who do post-abortion bereavement counseling. I've never done it myself, and that's probably just as well)

What is true of post-abortion bereavement counselling is also true of the whole pro-life message - we need to talk about both women and babies, as we have always done.

The campaign to repeal **slavery laws** in the United States 150 years ago may provide an analogy. The 'Abolitionists' could point out the **additional injustices** that sometimes went with legalized slavery - that some owners (not all) mistreated their slaves, broke up slave families by selling some members, and so on. They could point out the **economic costs** of slavery – that the free states were **not less prosperous** than the slave states, they were **more** prosperous. But they never lost sight of the **central objection** to legalized slavery - that the **law** treated some people as **less than human**, allowing them to be at the disposal of other people, who could buy and sell them like cattle - **legally**. And for that reason the Abolitionists would still have opposed slavery even if the slave states had all been more prosperous than the free states.

So with us - we must **go on saying, and find better ways of saying**, that abortion is bad for women. We must go on helping women to **avoid** abortion, or, if it's too late for that, to **recover** from abortion. But even if, per impossible, none of this were true – even if abortion improved a woman's health, well-being, life expectancy, we could still never lose sight of the central objection to abortion – that it is the taking of a human life, and that, where it is legalized, the **law treats some people as less than human**, putting them completely at the disposal of other people who can have them **killed** like cattle - **legally**.

Like cattle, but less humanely

That's why we **can't** not mention the baby

In closing, can I put in a word for **pictures** of babies? Born babies as well as babies before birth. The ultrasound picture that Denise published recently in her newsletter showing an unborn baby giving thumbs up. The photos by Lennart Nilsson published in Life Magazine 40 years ago or more

Remember that we are not only working to change the law – we are also working to change people's minds, to win their hearts. An attractive picture may help. We may not have many advantages over our opponents, but this is one: we can show pictures – what can they show?

And thoughtful captions for those pictures. One I saw recently from America asked, on an attractive picture of a baby, 'Is this the face of the enemy?' Only the most hardened of our opponents could say 'Yes'.