A METHODIST STATEMENT ON

ABORTION

Adopted by the Methodist Conference of 1976

INTRODUCTION

1. The question of abortion continues to exercise the thought, conscience and compassion of men and women. The area of the debate at this stage is limited to the period between conception and birth.

2. Abortion has at once moral, medical, legal, sociological, philosophical, demographic and psychological aspects. In addition, the Christian will seek to bring to the discussion insights and emphases which derive from his faith.

THEOLOGICAL ASPECTS

3. The Christian believes that man is a creature of God, made in the divine image, and that human life, though marred, has eternal as well as physical and material dimensions. All human life should therefore be reverenced. The fetus is undoubtedly part of the continuum of human existence, but the Christian will wish to study further the extent to which a fetus is a person. Man is made for relationships, being called to respond to God and to enter into a living relationship with him. Commanded to love their neighbours, Christians must reflect in human relationships their response to God’s love. Although the fetus possesses a degree of individual identity, it lacks independence and the ability to respond to relationships. All persons are always our ‘neighbours’; other beings may call forth our loving care. In considering the matter of abortion, therefore, the Christian asks what persons, or beings who are properly to be treated wholly or in part as persons, are involved and how they will be affected by a decision to permit or forbid abortion.

4. It is of the essence of the Christian Gospel to stand by and care for those who are facing crises and to help them to make responsible decisions of doctors and nurses who find themselves unable to take decisions about their situation. It also respects the conscientious part in carrying out abortions.

5. In considering the question of abortion, Christians must never overlook the reality of human sin. This impairs judgement with the result that the abortion decision may be made in a context of selfishness, carelessness or exploitation. Human sin is also seen in attitudes and institutions which foster any debasing of human sexuality or are complacent to social injustice and deprivation. In facing these dimensions of failure and sin, Christians will work for an experience of spiritual renewal and a deeper understanding of the nature of human responsibility in the response made to abortion.
THE ISSUES INVOLVED

6. On one side of the abortion debate is the view which seeks to uphold the value and importance of all forms of human life by asserting that the fetus has an inviolable right to life and that there must be no external interference with the process which will lead to the birth of a living human being. The other side of the debate emphasises the interests of the mother. The fetus is totally dependent on her for at least the first twenty weeks of the pregnancy and, it is therefore argued, she has a total right to decide whether or not to continue the pregnancy. It is further argued that a child has the right to be born healthy and wanted.

7. Both views make points of real value. On the one hand, the significance of human life must not be diminished; on the other hand, abortion is unique because of the total physical dependence of the fetus on the mother, to whose life, capacities or existing responsibilities the fetus may pose a threat of which she is acutely aware. It is necessary both to face this stark conflict of interests and to acknowledge that others are also involved – the father, the existing children of the family, the extended family and society generally.

8. From the time of fertilisation, the fetus is a separate organism, biologically identifiable as belonging to the human race and containing all the genetic information. It will naturally develop into a new living human individual. A few days after fertilisation, implantation (or nidation) has taken place; it is significant that in the period before nidation a very large number of fertilised ova perish. At some time after the third month, the ‘quickening’ occurs – an event which is of significant, perhaps crucial, moment for the mother. Not earlier than the 20th week, the fetus becomes viable, i.e. able to survive outside the womb if brought to birth.

9. There is never any moment from conception onwards when the fetus totally lacks human significance – a fact which may be overlooked in the pressure for abortion on demand. However the degree of this significance manifestly increases. At the very least this suggests that no pregnancy should be terminated after the point when the aborted fetus would be viable. This stage has been reached by the 28th week and possibly by the 24th or even earlier. It would, in fact, be best to restrict all abortions to the first twenty weeks of pregnancy except where there is a direct physical threat to the life of the mother or when new information about serious abnormality in the fetus becomes available after the twentieth week. There is indeed also a strong argument on physical, psychological and practical grounds to carry out abortions in the first three months wherever possible.

10. Because every fetus has significance, the abortion decision must neither be taken lightly nor made under duress. It is for this reason, as well as in her own long-term interests, that the mother should receive adequate counselling. This should enable her to understand what is involved in abortion, what are the alternatives to it and what are the considerations she should weigh before asking for termination. The skills of social workers and the particular technique of counselling, as well as the responsible medical judgement of doctor and consultant, must therefore be engaged. The provision of this service should be a duty laid by administrative regulations on those approving abortions whether in the NHS or the private abortion clinics. This is another reason why abortion on demand is to be rejected.
THE ABORTION ACT 1967

11. It is again to preserve the awareness of the significance of the fetus that the present form of the Abortion Act 1967 is of value. It retained the basic statement that abortion is unlawful, but indicated criteria which sufficiently altered the situation as to make abortion permissible. The intention behind the Act is therefore to be welcomed as it reflects a sensitivity to the value of human life and also enables serious personal and social factors to be considered.

12. These factors include, for example, the occasion when a pregnancy may pose a direct threat to the life or health of the mother. The probability of the birth of a severely abnormal child (where this may be predicted or diagnosed with an appreciable degree of accuracy) also provides a situation in which parents should be allowed to seek an abortion. It is right to consider the whole environment within which the mother is living or likely to live. This will include the children for whom she is already responsible and there will be occasions when she is unable to add to heavy responsibilities she is already carrying. Again, there are social conditions in our country which are offensive to the Christian conscience, particularly those connected with bad housing and family poverty. These conditions must be improved; meanwhile it is clear that abortion is often sought as a response to the prospect of bearing a child in these and similarly intolerable situations. In the particular circumstances indicated in this paragraph, abortion is often morally justifiable.

13. The Abortion Act is nevertheless imperfect and requires clarification and amendment either by legislation or administrative regulations. Abortions should be limited to the first twenty weeks of pregnancy save in the exceptional cases to which reference has been made. Counselling must be offered in all cases. The profit motive must be reduced. There must be further consideration of the clause which allows abortion when the risks of continuing the pregnancy are greater than the risks in terminating it. This clause can be interpreted to justify abortion on demand. Unless the medical profession or suitable administrative regulations can ensure that this clause is not used alone to authorise abortion on demand, the difficult task of amending the Act at this point must be attempted. There is little doubt that the responsible interpretation of the Act and the proper provision of abortion is more likely to be secured if a high proportion of terminations are carried out in NHS hospitals and not in private abortion clinics. The Methodist Church urged this in 1966. It again emphasises its concern.

14. Abortion must not be regarded as an alternative to contraception, nor is it to be justified merely as a method of birth control. The termination of any form of human life can never be regarded superficially and abortion should not be available on demand, but should remain subject to a legal framework, to responsible counselling and to medical judgement. The Church, with others, must help to provide more adequate counselling opportunities. Society must also be sensitive to the burden it places on medical personnel, and not least upon nurses, by permitting abortion very freely. It must fully respect the conscience of those in the medical profession who feel unable to carry out terminations; though, on their part, they have a responsibility to put women who approach them in touch with alternative sources of advice.
15. The problems raised by abortion can be finally resolved only by a new and sustained effort to understand the nature of human sexuality and to encourage expressions of sexual relationships which are joyous, sensitive and responsible, and which do not tend to exploit others. Christians believe that in conception and birth, parents are pro-creators with God of new human life. They also affirm in the whole of their sexual relationships that identity-in-mutuality which is inherent in marriage and which argues so strongly for the permanence of the marriage commitment. In an imperfect world, where both individuals and society will often fail, abortion may be seen as a necessary way of mitigating the results of these failures. It does not remove the urgent need to seek remedies for the causes of these failures.