

The Unborn Human

Keswick Lecture 26 Jul 2023

Handout

Three questions:

What does our culture say about the unborn human?

What does the Bible say?

How should we respond as Christians?

What does our culture say?

Current situation in UK

In our society it is widely accepted as a right, enshrined by law, that women have free and safe access to termination of a pregnancy. Up to 24 weeks gestation for so-called 'social reasons'. And up to full term, for serious fetal abnormality or a risk to the mother's life. This law prioritises the 'rights' of the woman over the unborn.

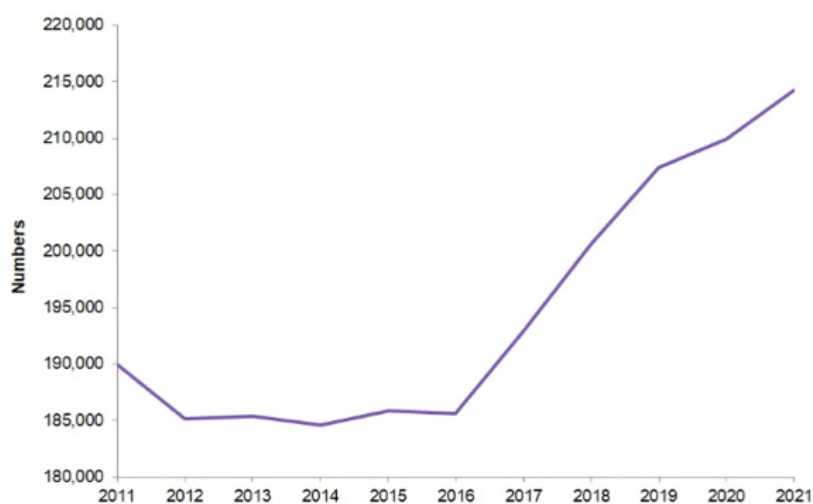
In 2021, 228,000 terminations took place in UK including Northern Ireland and Scotland. This is the highest figure ever recorded for the UK.

www.gov.uk/government/statistics/abortion-statistics-for-england-and-wales-2021

Accessed 17 Jun 2023 Graph only shows figs for England and Wales. 14,000 abortions took place in N Ireland and Scotland.

There were 214,256 abortions for women resident in England and Wales, the highest number since the Abortion Act was introduced.

Figure 1: number of abortions, England and Wales, 2011 to 2021



The age standardised abortion rate for residents is 18.6 per 1,000 women, the highest rate since the Abortion Act was introduced.

These figures represent a steep rise, possibly affected by the pandemic but continuing a pre-pandemic trend as you can see. Figures recently released for England and Wales for the first half of 2022 show a further 17% rise in the number of abortions. Indicates the trend is continuing.

The age group with the highest incidence of termination are those in their early 20s, but ages range from under 16s to women in their 40s.

87% abortions were medical (induced by taking medication as opposed to a surgical procedure). 88% were for pregnancies of 10 weeks gestation or less.

In more accessible terms, these stats mean:

- One in three women will have an abortion by the time they are 45
- One in five conceptions end in termination

History

The Abortion Act was passed in 1967. Originally it was presented as a sad necessity – although many Christians opposed the Act, some Christian doctors embraced legalization as a better alternative to maternal death by backstreet abortion. But although it started as a way of reducing harm to women, abortion rapidly became every woman’s right to choose.

Women looked at gender inequalities and saw their new ability to get rid of an unwanted pregnancy as a liberation, enabling them to act, plan and behave with the same freedoms as men. The narrative became “my body/my choice”. The language of sad necessity gradually vanished.

This was represented in the annual abortion statistics which rose rapidly:

1968	25,000
1978	150,000
1988	194,000

These numbers are partially explained by the baby boom of the post war years; baby boomers were coming into their 20s in the 1970s and 80s and there were simply more sexually active young women to get pregnant.

Several protections and limitations were included in the terms of the Act. Abortion was only legal in licensed abortion premises and required the agreement of two medical practitioners acting in good faith on one of four agreed grounds. The most commonly invoked was Ground C (now clause A), that the continuation of the pregnancy would involve greater risk to the mother’s physical or mental health (or to the health of any existing children) than terminating the pregnancy. The increasingly liberal interpretation of this clause meant that within a few years women in effect had ‘abortion on demand’. Today 98% of abortions are performed under Ground C, the so-called ‘social clause’.

The 1990 revision of the Human Fertilisation and Embryology Act shortened the original upper time limit of 28 weeks to 24 weeks in recognition of advances in neonatal medicine. But a last

minute amendment was added during a poorly attended late night sitting. This extended the termination limit to 40 weeks for 'serious fetal abnormality' and risk to the mother's life.

More recently:

In June 2022, Roe v Wade, the original 1973 case in the USA which established the constitutional right to abortion in every US state, was overturned by the Supreme Court. Hailed as a triumph for the prolife lobby, several states went ahead and banned abortion state-wide. The bitter culture wars in US on this topic trickle over here, but it's important to recognize that the medical, social and political context is very different in the UK. The NHS is responsible for providing nationwide access to abortion services. Here the trend is towards complete decriminalisation of abortion, as seen with the recent changes in the law in Northern Ireland in October 2019.

March 2022 'pills by post' scheme was made permanent. This facility was agreed as a temporary measure during the pandemic in order to minimize risks of Covid spread. Known as 'pills by post', the system enables a woman to procure a medical abortion (induced miscarriage) on the NHS by telephone up to 9 weeks and 6 days gestation without a face-to-face meeting with a medical professional and without an ultrasound scan to establish gestation. She self-administers the medication and has the abortion at home. Over half of all medical terminations are now done via 'pills by post'.

Sadly, stories of medical disasters and trauma or of coercive abortions by partners or family are starting to emerge. In June this year, a mother was imprisoned for terminating her very advanced pregnancy resulting in the death of her baby. She lied to the abortion clinic in a telephone consultation claiming she was 7 weeks when she was actually between 32 and 34 weeks. (Guardian article <https://www.theguardian.com/world/2023/jun/12/woman-in-uk-jailed-for-28-months-over-taking-abortion-pills-after-legal-time-limit> Accessed 27.6.23)

Rather than prompt a re-evaluation of the safety of the 'pills by post' scheme or expressing any sadness for the loss of the child, prochoice activists have objected that 'It's outrageous that such women be sent to prison under an archaic law' arguing this is further evidence for the need for decriminalisation.

In summary: our culture now appears to believe that the unborn human, if not wanted by the mother (for a variety of reasons) can be legitimately terminated. How does this dramatic shift in values affect those who choose abortion? Is it the freedom it is presented as?

Impact for those who choose abortion

Many attempts have been made to establish scientific evidence that abortion does or doesn't negatively impact a woman's mental health. Unfortunately, depending on the perspective of the researcher, opposite conclusions are drawn. This highlights the extreme difficulty in undertaking research in this field, both in terms of the nature of studies and the questions which are used to interrogate the data. It would be unethical to do a randomized blind trial for obvious reasons, but all other methodologies for collecting data could be viewed as at least partially subjective.

Some studies have emerged however from what could be regarded as 'neutral research'. David M Fergusson is an epidemiological scientist leading the Christchurch Health and Development Study, a longitudinal study of a birth cohort of NZ children begun in 1980. In 2005, Fergusson, a self-described pro-choice researcher, undertook to study the impact of abortion on the female participants of the cohort now aged 25. He expected his data would prove that abortion does not have adverse mental health effects but found instead higher rates of depression, anxiety and suicidal behaviours after abortion.

D.M. Fergusson et al, *Abortion in Young Women and Subsequent Mental Health*.
Journal of Child Psychology and Psychiatry, 47:1 (2006) pp16-24

Fergusson subsequently undertook further studies as the cohort became older but reached similar conclusions although made the distinction that those who had negative responses to their abortion experience were at higher risk of subsequent mental health issues. After adjustment for confounding factors, his 2008 study found that women who had had abortions had rates of mental disorder that were about 30% higher. There were no consistent associations between other pregnancy outcomes and mental health. He continues to hold the view that abortion may be associated with small to moderate increases in risks of some mental health problems.

Does abortion reduce the mental health risks of unwanted or unintended pregnancy? A re-appraisal of the evidence, D. M Fergusson et al, New Zealand J Psychiatry 2013; 47(9): 819-27.

This is contradicted by the RCOG (Royal College of Obstetricians and Gynaecologists) and the APA (American Psychological Association).

See for example:

The facts about abortion and mental health.

Scientific research from around the world shows having an abortion is not linked to mental health issues but restricting access is.

Zara Abrams June 2022 Journal of the American Psychological Association, Vol. 53 No.6

<https://www.apa.org/monitor/2022/09/news-facts-abortion-mental-health>

Accessed 6 Jul 2023

In terms of physical consequences from abortion:

"The research evidence continues to be contested by campaigning groups, but there is convincing evidence that abortion is associated with a small but significantly increased risk of gynaecological complications including pelvic infection, and increased risk of preterm delivery in subsequent pregnancies." See CMF File 35 "Consequences of abortion"

<https://www.cmf.org.uk/resources/publications/content/?context=article&id=1985>

Accessed 17 Jul 2023

My experience in the counselling room is that unquestionably for some, abortion is experienced as damaging emotionally and psychologically. Whilst every client's story is unique, I've noticed themes emerge; a toxic and painful mix of guilt and shame, anger at being coerced by boyfriend, parents or others, but also anger with themselves. Grief at the loss of the child but feeling they don't deserve to feel sad. Plus, what could be called a moral

injury/trauma at realizing they've crossed a line which they didn't know they had. This causes confusion and can undermine their self-confidence and trust in their decision-making.

I came across this letter in a national newspaper early on in my work with post abortive women:

Dear Dr

I had an abortion a year ago. The decision to have it was an easy one: I was not in a relationship and I did not want to be a single mother. Mostly I felt relief once it was over. But last week while flying abroad, having hardly thought about it in the previous year, I suddenly burst into tears. I was inconsolable. I felt awash with guilt and regret and I called my best friend. She told me to check the date. It was, to the day, a year on from my abortion. She said a similar thing had happened to her friend. Do you think that the body has a memory, independent from the mind?

Yours

Annie (28)

She received a neuroscientific explanation from the Agony Dr, but it seemed to me that she'd chosen termination without having had the chance to consider her deeper feelings and beliefs about her pregnancy. The first anniversary proved an *unconscious trigger*.

As post-abortive women share their story, it often becomes apparent there's been a trigger which has prompted them to seek help now. A 30 year old client of mine spent years believing she'd put her abortion experience, aged 18, behind her, but now she wanted to start a family with her fiancé, and this proved the trigger that breached the fragile walls of her denial. She was referred for post-abortion counselling having presented at her GP surgery with depression.

Post abortion clients often retain the original rationale for their abortion choice when they first come for counselling and are deeply confused as to why they struggle with persistent emotional pain. They're experiencing what could be called a *disenfranchised grief*; the narrative around termination led them to believe this was a decision of small consequence and was their right – "I wasn't supposed to feel this way". Yet they also know it was their choice, and therefore believe they do not deserve to feel sad. Having no permission to grieve they often don't recognize what's happening to them. It's widely acknowledged that women experience grief after miscarriage. It shouldn't surprise us that post abortive women feel the same. They've experienced the same loss.

Wider impact for women – Liberation or what?

Women looked at gender inequalities and saw their new ability to get rid of an unwanted pregnancy as a liberation, enabling them to act, plan and behave with the same freedoms as men. But this has not proved to be the case. Having an abortion does not turn the clock back, a woman never forgets that she was once pregnant.

It's possible to argue that men have benefited from the legalization of abortion more than women. The law leaves pregnant women unprotected from the pressure to terminate from

men who don't want the responsibility of fatherhood or the commitment of a longer term relationship. Even the partner who says, "I'll support you whatever you choose", and I've heard this many times, is not being truly supportive. All she hears is, "it's your responsibility, you make the decision". Legally, that is of course the case and the man doesn't have a say. But what an unsure pregnant woman wants to hear is that her partner will stand by her if she continues the pregnancy. Women are not designed to be pregnant nor to parent alone and unsupported. The human infant with its protracted period of dependence ideally needs two parents. God set it up this way. And a woman knows this in her gut. I take my hat off to single parents, they are awesome, but it's seriously hard work raising a child without the committed support of a partner.

It also feels very rejecting for the woman; 'If you're not for our *baby*, are you really for *me*?' She can feel forced to choose between her baby and her partner. A position no pregnant woman ever wants to be in.

Louise Perry, in her book *The Case Against the Sexual Revolution*, fearlessly argues that the so-called liberation for women of the 1960s and 70s has been nothing of the kind. In fact, it has tipped the scales even more in favour of men. She is writing as a secular feminist but expresses many ideas that Christians agree with. Interestingly, Perry still fights shy of tackling the abortion issue head on – maybe an indication that for secular feminists, abortion remains the ultimate, untouchable shibboleth of women's freedom. She does affirm that the best way to encourage women to carry a pregnancy to term is to make the father financially responsible for the child. But whilst she doesn't say it, much of her critique of the sexual revolution's failure to liberate women equally applies to abortion.

We should also include here reproductive coercion; the abusive man who controls his partner by coercing her into an abortion. Or the opposite, the one who makes sure she's almost permanently pregnant, controlling her contraception, in order to tie her into the relationship. I'll never forget an early post-abortion client who explained that when she refused to have a termination, her partner gave her a beating, then phoned the abortion clinic to force her to book the appointment before calling the ambulance for her injuries. He explained this was because he cared for her. This pattern of behaviour is well recognized. More information in this article:

One in seven women are forced to have a baby or an abortion

Article in Independent 23 Mar 2019

<https://www.independent.co.uk/news/uk/home-news/pregnancy-coercion-reproduction-abortion-a8834306.html#> Accessed 20 Jun 2023

"Anecdotally, I would say I haven't seen a single unplanned pregnancy client who isn't experiencing coercion in some way, whether that is by a partner, family expectations, financial pressures or cultural expectations." Counsellor, London Christian Pregnancy Centre

Wider impact on the experience of pregnancy

The legalization of abortion has in some ways minimized the value of all unborn life and led to a kind of double-think in our society, two conflicting narratives. The unborn child of a wanted pregnancy is universally referred to as a baby and valued as such. Whilst at the same

time, the aborted fetus's status as an unborn child is never acknowledged and air-brushed out of the narrative by being referred to as 'the pregnancy'. Have you ever listened to programmes about the tragedy of miscarriage or stillbirth; the grief women feel, the pain when they realise others so quickly forget? And yet the journalist is talking about the same age gestationally of a child who can be legally aborted simply because they are not wanted. But this fact is never acknowledged. The programme never mentions the word abortion. The silence is deafening. The reverse happens when programmes explore abortion.

These two conflicting narratives collide for women who receive a diagnosis of fetal abnormality, almost always with a wanted pregnancy. The whole purpose of ante-natal screening is to give women the option to avoid having a disabled child. So, they can come under extraordinary pressure from professionals and others when fetal abnormality is detected. It's then the *parents* who find themselves having to justify continuing the pregnancy, everyone else expects them to terminate and try again. I'd strongly recommend Sarah Williams book: *Perfectly Human – Nine months with Cerian*. Sarah tells the story of her daughter's antenatal diagnosis with a terminal condition and her fight to see the pregnancy through and give birth. It's a painful example of how changed attitudes brought one family under pressure but the wonder of how much better it was to do it God's way.

The impact of abortion could be summarized as follows:

Legalised to Normalised to Justified to Expected

Was the 1967 Abortion Act a symptom or the cause of the cultural shift in attitudes towards sex, pregnancy and having children? We'll never know. But I'm firmly of the opinion, that the legalization of abortion contributed to the change in social attitudes to the unborn child. I've seen the resulting confusion in the counselling room.

Legalised

The legalisation of abortion, sanctioned by the government, enables women to believe that it's morally acceptable to terminate a pregnancy. Everyone else says it's OK, therefore I should think it's OK. It creates the option but also the *permission* to do something they might previously have thought abhorrent. Sometimes, I've heard the wistful comment from clients that they wished they weren't given the choice. If there was no abortion law, they wouldn't be confronted with this painful choice, they would simply have to get on with it and that appears oddly attractive.

Normalised

A secondary effect of legalisation is *normalisation*. Normalisation of both the idea and then the reality of termination as an option. Now the first question any GP or midwife asks a newly pregnant patient is 'How do you feel about your pregnancy?' A choice to terminate is seen as a perfectly normal response to a pregnancy almost under any circumstances. Of course, this is not what the original legislators had in mind.

Justified

It naturally follows then, that there is no need to *justify* choosing termination. All a woman needs to say is 'I'm pregnant and I don't want to be'. In fact, most women bypass the GP altogether, contacting the abortion provider direct and providing the name of their GP who is

informed of the termination afterwards. Most NHS abortions, over 90%, are contracted out to private abortion providers, primarily British Pregnancy Advisory Services (BPAS) and Marie Stopes. Both operate central booking phone lines which a woman can call direct.

Expected

And then it becomes what's expected; the woman who wishes to continue her pregnancy often finds *she's* the one having to justify *not* choosing termination. It's what people naturally *expect* her to do in her circumstances. I've had so many clients who've come under pressure to terminate from those around them. "No-one is excited about this pregnancy". I recall one delightful young woman, recently launched on her career, but unexpectedly pregnant. "I feel such a fool. My friends can't believe I would have a baby now. I'm being stupid to throw all my opportunities away." Unable to face such disapproval she chose termination though it violated her deeper instincts and values.

This is even more the case for women whose unborn child is diagnosed with a fetal abnormality antenatally. Many report pressure from professionals to terminate.

With all these narratives humming in the background, it's not surprising that a normal, expected response to an unplanned pregnancy or fetal abnormality can be to terminate. Neither was on the agenda; we can fix it, terminate and start again. This doesn't have to be your life, take back control. But the baby and a mother's heart get lost in the mix. And sometimes a father's heart too.

Abortion – legalised, justified, normalised, expected.... Or *I want* becomes *you can and may*, becomes *you should*....

What does the Bible say about the unborn?

Psalm 139

In this Psalm David reflects on his personal intimacy with this God who knows him inside out. He tracks God's presence in his life all the way back to his beginnings in the womb; *v13 you knit me together in my mother's womb.*

This Psalm teaches the full humanity of the unborn child; David describes continuity between his embryonic self right through to his adult self. God knew him and was in covenantal commitment to him from his earliest beginnings in the womb through to the present. His days were ordained from conception to death (v16).

For a more detailed exposition of this Psalm, please see Matters of Life and Death Chapter When Is a Person?

Luke 1: 39-45

In this short narrative, although outwardly, only two people would have been visible, Luke actually describes a scene with four players: the pregnant Elizabeth, a 26 week gestation John the Baptist, a young pregnant girl, Mary, not yet showing, and a tiny Jesus, barely visible to the naked eye.

This text assumes the full personhood of the unborn children in that scenario. They are players in their own right, John the Baptist in his leap for joy and Jesus by his tiny but significant presence as Lord.

Secondly, this text confirms the incredible mystery of the incarnation. The Lord of the universe submits to being 'knitted together in *his* mother's womb', made of her stuff, her genes, her flesh, just like every other human baby before and after him. This alone sanctifies the life of the unborn human and invests that state of being with honour, respect and wonder.

The NT writers used one Greek word to describe both the baby in the womb and the baby after birth, *brephos*. And, like us, when they use that word baby for both, they imply the child within the womb and the child outside the womb is the same being, with the same worth and value and due the same protection.

These texts establish the Biblical perspective of the unborn child as fully human and therefore entitled to the same rights, protections, honour and respect as all human beings. Abortion is therefore, tantamount to taking the life of the child.

But, whenever we say something is wrong, we must come up with a better solution.

What should a Christian response be?

When I first began work in a Christian pregnancy centre 20 years ago, I thought of myself as 'saving babies'. But as I began to counsel worried pregnant women, I rapidly understood that this is about them too, we must reach out to them. The polarized political debate has often represented the baby's and the mother's needs as being in irreconcilable conflict. But I've come to see that the best interests of the mother and the best interests of the baby are *not* in conflict. In fact, the way forward is to hold the two together. Both lives matter! It's a faith position but one which I think the Bible teaches. What might that look like? What biblical principles apply here?

John 8:2-11 Hold equally to grace and truth

In this story about the woman caught in adultery and dragged into the temple court by the religious leaders in order to trap Jesus, we see two ways of looking at someone who's broken God's law. The religious leaders saw only a guilty and shamed woman deserving of condemnation and execution and consequently treated her with contempt.

But Jesus saw someone in need of compassion, feeling shamed and unworthy, and desperate for forgiveness. By stooping down and refusing to participate in her public humiliation, Jesus showed her love and respect. Despite being the only one there who was entitled to condemn her, instead he threw her the lifeline of acceptance and forgiveness. Only once she knew she mattered to him, that she was not condemned and of no value, could she then hear his invitation to 'go and sin no more'.

The religious leaders had got it right in thinking the woman was guilty, they had a hold of the truth, but they had no grace. I'm afraid the church has often been like this on the issue of abortion. We've been very clear that abortion is wrong, but we've lacked compassion.

However, it's equally possible to swing the other way; to show so much compassion that we step outside the boundaries of God's truth. We must be like Jesus, full of both grace and truth. And it's not easy. So yes, we do need to respond to abortion but in a way that doesn't leave women who've made that choice or are contemplating it feeling judged and condemned. We should speak with sadness, not hate, in our voices, with compassionate understanding not judgemental superiority.

An example of a Biblical response from the early church.

How did the early church interpret and apply the Biblical teaching on responding to others and the value of the unborn child? What was their better solution? This is worth considering, mostly because we should always as Christians be mindful of church history, but secondly because the pagan culture and world views they lived amongst most closely resemble our own now in a post-Christian era. I've learned this history from two good books:

Abortion and the Early Church: Christian, Jewish and Pagan Attitudes in the Greco-Roman World

by Michael J. Gorman 1998

Bullies and Saints: An Honest Look at the Good and Evil of Christian History

By John Dickson pub. Zondervan Jun 2021

Two key theological insights became drivers for the early church's distinctiveness in a pagan society:

- The *Imago Dei* – every human being is made in the image of God and therefore endowed with intrinsic value and worth. This always included the unborn child as well as the pregnant woman.
- Love your neighbour as yourself – the Golden Rule. The unborn and the newly born, together with their mothers, were consistently identified as 'neighbours' by the Christian church.

In other words, grace and truth. The truth is that unborn babies are of intrinsic value and worth. Grace teaches us to respond with love, care and protection for both mother and child.

Both these concepts were in stark contrast with the prevailing attitudes of the day which presumed the newborn had no intrinsic value and could be disposed of at will. Sound familiar! Abortionists were well recognised and accepted within Roman society and no one thought ill of their trade. A letter from a 1st century Roman soldier to his pregnant wife back home contains this throw-away line at the end. 'If the child is a boy, keep him but if it's a girl, expose it'. The tone of the letter is far from uncaring but reveals a casual attitude towards the newborn.

In contrast to this, 1st century Christians adopted a different take. In Corinth for example, Christians compassionately offered refuge to pagan temple prostitutes who found themselves pregnant (despite being offered the potions of the abortionists). These despised and exploited women were taken into Christian homes where they could safely have their children and get a fresh start on life.

And Christians throughout the Roman Empire became known for rescuing abandoned newborns from the exposure walls outside the cities. These foundlings were then adopted and raised in nurturing Christian families.

The Christian church was robustly pro-life in its theology *and* compassionate in its practices to all parties. This emphasis, not on being *against* something, but being *for* something, being '*for life*', has never been lost in the Christian church since. Although it's come under attack at times, it has always resurfaced and been reclaimed in every generation.

In other words, the modern Christian unplanned pregnancy movement, in trying to replicate this grace-filled yet truth-based response, stands in a long and honourable tradition.

How did the church respond to the legalisation of abortion in 1967?

The Roman Catholic church remained steadfastly clear that abortion was not Biblical as it was taking life. The same cannot be said for evangelicals, some of whom framed it as a compassion issue, partly driven by revelations of the horrors of backstreet abortions. This was especially true for some doctors. An attempt at scientific justification emerged whereby the fetus could not be regarded as fully human until the central nervous system was intact, approximately by 12 weeks' gestation. Some Christian doctors believed life was not present until the child had taken its first breath. A return to a more orthodox belief in the protection of life for the unborn only re-emerged later in the 1970s influenced largely by the Festival of Light movement begun in 1971 which amongst other things, challenged evangelical Christians to a more orthodox yet still compassionate response to abortion. From the early 1990's Christian pregnancy centres with the goal of reaching out to women facing the dilemma of an unplanned pregnancy began to appear across the UK. A national organisation, Care Centres Network, funded by CARE, provided leadership and resources.

Today, **Pregnancy Centres Network**, an independent grassroots charity founded by existing Centre leaders across the UK in 2013, acts as the national umbrella organisation for Christian pregnancy centres. PCN's goal is to support independent local centres in building best practice by providing training courses for volunteers in pregnancy choices and post-abortion counselling, an annual conference, ongoing CPD sessions plus GDPR training, Trustee forums, Centre Leader forums etc. Find out more at www.pregnancycentresnetwork.org.uk

What happens at a Christian pregnancy centre?

Primarily, Centres support women (and their families) through a pregnancy crisis in a compassionate yet constructive way through counselling and practical support. A pregnancy crisis can be caused by relationship breakdown, diagnosis of fetal abnormality but most commonly, unplanned and unwanted pregnancy. Centres are all independent charities and vary according to the needs in their localities but most provide the services listed below. Just to say, that not all Pregnancy Centres are Christian and not all adopt a non-directive approach. If you are thinking of referring someone to a centre, please check out its ethos first. All PCN associated centres are Christian and provide non-directive counselling. If in doubt, please contact PCN first at admin@pregnancycentresnetwork.org.uk

The rationale and theology behind a non-directive approach is that women in crisis need time and space to consider all their options. So, we offer a safe, unhurried space. We aim to

demonstrate empathy and understanding of her dilemma and listen to her fears because we genuinely care about her concerns and her unborn child. We use two decision-making tools: the Head/Heart model encourages clients to articulate both what they are *thinking* about the pregnancy but also what their *heart* might be saying, that deeper part of them that includes values, beliefs and conscience. Is there an internal conflict? Part of them wants to be a mum, another part is fearful. We commonly see this. Secondly, a Gains and Losses account for their three options of parenting, termination or adoption. What might she gain by choosing each option but what might she lose both in the short and longer term. This is helping them to make room for all of themselves to respond to truth in a space of grace. Client feedback consistently demonstrates appreciation for not being judged, not being told what to do and being given time.

We know that God always invites and never coerces. It's common for women to find everyone else is telling them what to do. We must not be another coercive voice. But, being non-directive does not mean we run away from the hard questions or difficult feelings. This is a big decision and needs to be taken with all avenues explored. The commonest reason for choosing termination in our experience is fear – fear of losing something or someone. Helping women to move beyond the dictates of fear and to really listen to their heart is one of our best gifts to them.

Most Christian pregnancy centres offer these services:

- Unplanned pregnancy counselling – compassionate, constructive, non-directive
- Perinatal counselling for the duration of the pregnancy if appropriate
- Practical support with free loan of pre-loved baby clothes and equipment
- One-to-one befriending programme for first year of their child's life
- Sign-posting or referral to other local agencies, statutory and voluntary to build a raft of support
- Post abortion counselling programme – one to one counselling in weekly sessions usually over a six-month period
- Some Centres also provide relationships and sexual health education in local schools

A word to Church leaders

The evangelical church has been largely silent on the issue of abortion in recent decades. We appreciate it is a difficult topic to cover sensitively but we mustn't think that abortion is a problem out there, it's here in our churches too.

Results of a survey from Pregnancy Centres Network exhibition stand at New Wine 2021
Of 361 respondents:

67% had never heard abortion spoken about at their church.

54% were aware of friends outside church affected by abortion

21% said it had affected them within the family

70% approximately were unaware of the Christian crisis pregnancy movement

93% felt there was a need for a local crisis pregnancy centre supported by their church

“Abortion particularly is hard to talk about, in part because it is so much bigger than just the specific procedure – it touches on views of women in society, and of personal independence

and freedoms, on issues of consent, 'choice' and its perceived limitations, familial values and relationship patterns, unforgiveness and stigma. It is a big, complex subject, and very hard to cover sensitively, compassionately and comprehensively.”

Jennie Pollock, Head of Public Policy, Christian Medical Fellowship.

But the silence in churches on abortion is shaming and appears uncaring, making it very difficult for those affected by unplanned pregnancy or past abortions to speak about their difficulties within their church context. Let's change the landscape. Wouldn't it be wonderful if *church* became the place which not only Christians but women across our culture knew was a safe place to find support with these issues?

What could you do practically? How about finding out if there's a Christian pregnancy centre near you? Contact PCN for details. And if there isn't, might God be calling you to start one? Our Centre was started by a group of local churches who came together. PCN can advise about setting up a centre from scratch. Or, if that's not possible, consider supporting PCN financially – this would signal to your church that you are committed to a grace-filled and truth-based approach.

Some resources to help you:

Pregnancy Centres Network - to access or refer for counselling support at a local centre. Or to find out more about your nearest Christian Pregnancy Centre, contact PCN Administrator at admin@pregnancycentresnetwork.org.uk

OPEN Abortion recovery weekends for women in the church. Contact Jenny Baines at CARE <https://www.weareopen.org.uk/> Next weekend 5 – 7 Sep 2023 in Perth, Scotland

OPEN is a department of CARE and also provides training seminars for pastors and churches on responding to the abortion issue within the church. More information and resources here: <https://care.org.uk/cause/abortion>

The Stress Test by Jonathan Jeffes - an excellent resource to be used by church, youth leaders or parents to help everyone think through how *they* would respond to an unexpected pregnancy. Guidance for parents, church and youth leaders. Jonathan has spent years supporting men and women in the church through abortion recovery.

More info: www.thestress-test.com

Contact Jonathan Jeffes at office@thestress-test.com

CMF Collaboration with PCN and church leaders

CMF (Christian Medical Fellowship) are currently working together with PCN and other Christians already in the field of responding to abortion, with a specific brief to explore how best to equip church leaders to speak about and support people around unexpected pregnancy, abortion and pregnancy loss in their churches. Come and be part of the conversation, they're especially keen to hear from more church leaders. Next meeting 26 Sep 14.00 – 16.00 at CMF HQ in central London or hybrid, if you prefer zoom.

Contact Jennie Pollock, Head of Public Policy CMF at jennie.pollock@cmf.org.uk

Reading List

Matters of Life and Death: Human dilemmas in the light of the Christian faith
by John Wyatt IVP

A consideration of all the main ethical dilemmas relating to the beginning and end of life. Chapter on abortion gives a more detailed analysis of biblical thought and teaching and how to regard the unborn child.

Bullies and Saints: An Honest Look at the Good and Evil of Christian History
by John Dickson Zondervan

Accessible and very readable overview of 2000 years of church history clearing up some of the misnomers and myths but also acknowledging where things went horribly wrong. Some good material on the early Christian response to abortion and infanticide, both common in 1st century Roman Empire.

Abortion and the Early Church: Christian, Jewish and Pagan Attitudes in the Greco-Roman World
by Michael J. Gorman

Powerful and well-researched, provides a more detailed description of how the early Christians responded to the dilemma of abortion and infanticide in the Roman Empire. Slightly one-sided but an inspiration nevertheless.

The Case Against the Sexual Revolution
by Louise Perry Polity Press

Brave and outspoken critique of the so-called gains of the sexual revolution for women demonstrating that in many ways women have been the losers. Interestingly, this fearless young writer fights shy of tackling the abortion issue head-on but does have some helpful comments. As an unbeliever, Perry expresses all the non-pc views that Christians think but dare not speak because we are now cast as the oppressors in the new culture wars. Enlightening, scary and refreshingly frank.

Christ and the Culture Wars: Speaking for Jesus in a World of Identity Politics
by Ben Chang Christian Focus Publications

A helpful overview of how our culture currently thinks and how we can respond as Christians in this new and hostile environment.

Perfectly Human – Nine months with Cerian
By Sarah Williams

Powerful story of one Christian woman's courageous fight to see her pregnancy through and give birth despite her child being diagnosed with a fatal abnormality. It was the only time she would ever have with her baby. Beautiful example of how love changes our perspective on the value of the 'imperfect'.

Startling Beauty: My Journey from Rape to Restoration
by Heather Gemmen

Another challenging story of how one Christian mother came to find the daughter conceived by rape was, in reality, a gift of startling beauty.

Being Human – Bodies, Minds, Persons

By Rowan Williams

Very helpful explanation of the origins and burdens of our culture's commitment to 'expressive individualism', my responsibility to make my own future. Abortion laws were a forerunner of this trend now very evident in the Gen Z generation.

Abortion: Christian compassion, convictions and wisdom for today's big issues

by Dr Lizzie Ling and Vaughan Roberts

CMF Talking Points series.

Pregnancy and Abortion: A Practical Guide to Making Decisions

by Dr Mark Houghton, Dr Esther Lüthy et al 27 Apr 2020

A practical book both for those with the dilemma of unplanned pregnancy and those supporting them. Explains the decision-making tools used by most Christian pregnancy centres when supporting women through the crisis of unexpected pregnancy.