

## Why should we care about Abortion and Euthanasia

### Sermon preached at St Michael's Sandhurst on Sunday 19<sup>th</sup> September 2021

As part of our sermon series on "Tough questions for Today's church", this morning's sermon is considering these 2 very topical issues of Abortion and Euthanasia.

Abortion and euthanasia are being considered together because they both involve the deliberate act of ending human life; at present one is considered legal *in certain circumstances* and the other is illegal.

As I open this discussion, I am very conscious that these are emotive subjects, they are complex and controversial, and they may stir some up very deep feelings. If you are troubled by this sermon, I would really encourage you to speak to someone, to me, the clergy or to engage with the resources listed at the end to find further information and support.

But it is precisely **BECAUSE** they are difficult **and** topical that as Christians, we should engage with these subjects : that we don't ignore them and look to God both in prayer and in His Word for guidance.

We may find ourselves supporting others going through this or you may feel motivated to engage with charities seeking to support individuals who are so driven by their particular circumstance that they are considering abortion or euthanasia.

Lets start with some definitions:

#### **Abortion is defined as**

The termination of a pregnancy with the expulsion or removal of an embryo or fetus. A pregnancy is normally 40 weeks long and the age of viability is considered now to be 24 weeks so if a baby is born at 24 weeks it has a good chance of survival.

Spontaneous abortion (miscarriage) occurs in approximately 30-40% of all pregnancies ie 1 in 3 pregnancies will spontaneously miscarry.

**The 1967 Abortion Act** was crafted out of compassion for women who found themselves needing to resort to dangerous backstreet abortionists often with dreadful outcomes. The Act listed 7 categories "grounds" under which an abortion could be legally performed and broadly speaking they divide into 2:

Either issues affecting the mother and /or issues affecting the baby.

**Either** that the physical or mental health of the mother would be severely compromised by the continuation of the pregnancy **OR**

That the baby was severely handicapped.

In 2020 there were 205,930 terminations of pregnancy in England and Wales. This does not include Scotland or Northern Ireland.

98% of these were carried out on the ground of impairing the mental health of the mother , these could be considered the social terminations generally taking place at around 10 weeks gestation.

1.5% were conducted because the baby was considered to be mentally or physically handicapped

236 terminations were conducted after 24 weeks gestation because the law allows termination for abnormality up to the point of birth.

As a midwife I have been involved in the care of women and their partners undergoing termination of pregnancy for fetal abnormality. These terminations usually happen on the Labour ward. I have needed to reflect on how I as a Christian reconcile my faith and beliefs in such a situation. I too feel conflicted by these issues, I understand the sanctity of life message from the Bible but I see also the conflict that couples face when trying to navigate these very tragic circumstances..

So now to

### **Euthanasia**

- Euthanasia (Greek for “good death”) the act of deliberately ending a person's life to relieve suffering.
- Eg administering an overdose of sedatives or muscle relaxant, with the sole aim of ending their life (Active)
- Passive: don't intervene to save life or choose to stop treatment: eg withhold life extending drugs, disconnect a feeding tube,

**Active Euthanasia is ILLEGAL in Britain considered either manslaughter or murder : penalty is life imprisonment**

Assisted suicide is often linked to euthanasia because the person affected may not actually be physically capable of completing the necessary actions and relies on family to help them die with dignity.

- Eg If a relative obtained medication, knowing the person intended to use them to kill themselves, the relative may be considered to be assisting suicide.
- Illegal (Suicide Act (1961): punishable by up to 14 years' imprisonment.
- **Trying to kill yourself is not a criminal act.**

You may remember some of the tragic cases that have come to public attention Diane Pretty (2004) suffering from Motor Neurone Disease and Debbie Purdy (2009) suffering from Multiple Sclerosis who sought assurances from the Attorney General and the then DPP Sir Kier Starmer that their partners should not be prosecuted for assisting their death (which was denied). These cases have moved the debate a little further along however on each occasion the cases were pushed back to Parliament and there is great reluctance amongst politicians to pick up this particular debate.

In 2014 the UK Supreme Court was asked to consider whether assisted suicide was compatible with “right to a private life under Article 8 of the European Convention on Human Rights”.

However, **a very important distinction in UK law exists** between active euthanasia and passive euthanasia. Tony Bland was a 17 year old Hillsborough survivor, whose family requested doctors to withdraw care after 3 years of Tony remaining in a persistent vegetative state. The House of Lords unanimously agreed and the landmark **Bland** ruling of **1993**, clarified the position on “passive” euthanasia, in which ‘assisted suicides’, that involve ‘omissions’ that are principally the removal of life-saving care are **not illegal**. However, actively taking action to end another’s life is illegal, even with their consent.

And this is the area that I suspect most of us will have discussions about : elderly parents with declining health: how active do we want their treatment to be in the event of a terminal diagnosis?

What decisions would we like our children to make on our behalf if we are unable to make those decisions ourselves?

This has caused some discussion in the Rectory, and we are considering if we should write Living Wills to give our families some framework for caring for us.

### **So where do we go for guidance? What does God say in all this?**

Let's look to our readings today and see what we can glean:

The Old Testament Reading ( 2 Sam 1:5) describes an Amalekite messenger reporting to David after a significant battle. He tells David that he found the defeated King Saul mortally wounded, and Saul begs the Amalekite to kill him. The messenger tells David that he assisted Saul with his request and stabbed him to death.

Is this an assisted suicide? Certainly, the messenger tells the story as if he is carrying out Saul's instructions to help him to die quickly. The messenger is expecting to be rewarded for carrying out Saul's instructions and also finishing off David's enemy.

However David is absolutely horrified..he cannot believe that the Amalekite should so wantonly kill the first man anointed by God to be the King of Israel. Saul was precious in God's sight how could this killing be justified whatever the circumstances?

David's reaction is that Life is precious to God and should be treated with reverence.

Abortion is not directly referenced in the bible Perhaps the closest account is the story of King Manasseh in 2 Chronicles 33. Manasseh is considered to be the most wicked of all Israel's kings. The writer of Chronicles makes it clear that Manasseh's practice of child sacrifice was abhorrent to God:

"Manasseh did much evil in the eyes of the Lord provoking him to anger. He even sacrificed his own sons (2 Chron 33:6)".

In these sacrifices to the god of Molech, children up to the age of four were presented as an offering in order to gain some benefit. The offerer may have sought a little more money, better health or a better job. Whatever the reason these parents obviously thought the personal benefit for them far outweighed the life of their child.

Some people today are motivated by much the same reasons. A baby will cost too much money. A baby now will spoil my plans. A baby now will tie me to my house. A baby now will ruin my career. A baby now would be inconvenient – so I'll exchange the baby for what I hope will be a better life for me.

Psalms 139 that we have just sung reminds us so clearly that each of us from the point of conception was known by God: even before our mothers knew they were pregnant God did!

God personally names 7 men before they were even born: he knew them and valued them from before birth: Ishmael (Genesis 16:11); Isaac (Genesis 17:19); Josiah (1 Kings 13:2); Solomon (1 Chronicles 22:9); Jeremiah (Jeremiah 1:5); John the Baptist (Luke 1:13); and Jesus Himself (Matthew 1:21).

Our gospel reading describes John the Baptist leaping in his mother's womb evidencing that the unborn child is clearly alive and responsive to its environment.

There is a multiplicity of Scriptures confirming that God created us in his own image and likeness, we are His people, **He** has given us life. **Exodus 4:11; Isaiah 44:24; Job 1:21, Psalm 100:3**

And God places a very high value on the sanctity of life: the 10 commandments You shall not murder

In Corinthians Paul reminds us that our bodies are not our own

“Do you not know that your bodies are temples of the Holy Spirit, who is in you, whom you have received from God? You are not your own; **20** you were bought at a price. Therefore honour God with your bodies”  
1Cor 6:19-20

So Scripture reminds us that :

- We are Created and known by God before birth Ex 4:11, Is 44:2 Ps 103
- Life is sacred Job 1:21 Ps 103
- We are to protect the innocent and weak Ps 82 Ps 127:3, Prov 17:6
- Our bodies are not our own: challenges the “woman’s right” argument 1 Cor 3:16
- We were bought at a great price 1 Cor 6:19

So we have a very clear picture from Scriptures that Life is to be treasured and valued and even more the vulnerable in life such as the unborn child or the terminally ill need advocates and protectors to speak out for them.

### **What is the role of the people of God in this dilemma?**

Dr Sam Wells in his excellent sermon ( [02-13-11ChoosingLifeandLivingwithChoices.pdf \(duke.edu\)](#))

argues that the church should be standing alongside those facing these exceedingly distressing situations:

He writes

“And that’s the real reason, I believe, why so many Christians have decided not to talk about abortion. Not because it’s controversial; not because they fear seeming judgmental; not because their own lives have taught them that the line between right and wrong is more fragile than they once believed: but because to talk about abortion means to open our eyes to the unjust social relations in our nation and to contemplate with horror the 206,000 babies whose life potential was never realised. We have to talk about abortion. Because seeing injustice and hearing the cries of the innocent are at the heart of discipleship and at the heart of God.”

He suggests that women have abortions for 3 reasons: Shame, Abandonment, Disability

### **They are ashamed of the situation they find themselves in, its not convenient , others will judge them**

As human beings we all mess up: we have all made mistakes, some mistakes may be very public very obvious but surely Jesus would say “Life isn’t about never making mistakes. It’s about what you do when you’ve made them. Life isn’t about not having regrets. It’s about what you turn your regrets into. Christianity isn’t about effortless perfection. It’s about costly forgiveness and shouldn’t God’s church be the place where forgiveness and acceptance is offered and received?

### **They feel abandoned , on their own having to face this huge burden with no emotional or financial support.**

Understandably women facing unexpected pregnancy feel abandoned and powerless to cope with the enormity of raising a child, the expense the commitment the loss of their own ambitions and dreams. But there are alternatives Christian charities such as Care Christian Action Research and Education and the Society for the Protection of the unborn child are just 2 which exist to support women and their partners social stigma has changed and the church again .the Christian message is one of standing alongside: bearing one another’s burdens. The heart of life is friendship and companionship, with one another and with God;

**Because disability is viewed as less than perfect and there is fear that a disabled life is less than a full life.**

And finally abortion on the grounds of disability, yes some babies do sadly have conditions which are incompatible with life and they may die during pregnancy and birth or soon after. But many so called disabilities are not: Down's syndrome, Cleft lip and palate, children born with talipes or club feet ..these children may require specific and sustained support but again are we not as Christians defenders of the vulnerable? As humans we all have imperfections , we all have limitations but God works in us and through us despite the imperfect that we are.

Sam Wells argues eloquently that the church is uniquely placed to stand alongside women and men facing this huge dilemma and I would like to show you now a short video about one such organisation

[We Are Open - a pastoral response to abortion](#)

As this is a reflective sermon we have some space now to think of our own reactions:

1. What thoughts or questions do you have following this sermon?
2. What do you think God might be saying to you about your response to these issues?

**Father God**

**Please give us grace wisdom and compassion as we face these complex dilemmas of abortion and euthanasia. We pray for all who are conflicted, confused and distraught as they face these situations now. We pray for Christians engaging with these situations and dilemmas. Help us as individuals and as a church to consider our response to those who are so traumatised. Amen**

**Resources:**

## Resources

**Abortion Act 1967**

<https://www.gov.uk/government/statistics/abortion-statistics-for-england-and-wales-2020/abortion-statistics-e>

**Christian Action Research and Education CARE**

<https://care.org.uk/>

For more than 35 years CARE has been a voice for truth in the public square. Our mission is to bring a uniquely Christian insight to the policies and laws that affect our lives. We believe in a better story for our society and culture, one where the life of every human being from conception to natural end is respected and upheld.

[Home \(spuc.org.uk\)](http://spuc.org.uk)

The **Society for the Protection of Unborn Children** (SPUC) is the oldest pro-life campaigning and educational organisation in the world.

We campaign to end abortion in England, Wales, Scotland, Northern Ireland and internationally. We advocate the need for a consistent life ethic – one that values the lives of all human beings – and so we also campaign against other direct threats to the lives of vulnerable individuals, such as euthanasia and embryo abuse.

[We Are Open - a pastoral response to abortion](#)

One in three women in the UK will have had an abortion by the time they are 45. Inevitably, this will therefore be a part of the story for many in our churches.

Some women and their partners may have come to terms with their experience of abortion, but others still feel deeply affected, even if they felt it was the right decision at the time.

Many people might hesitate to tell people at church about their abortion, in case their response is unsympathetic or judgmental. This means they are left to deal with the hurt and pain on their own.

### **Sermons well worth reading:**

[Are Euthanasia, Abortion And Suicide Options For The Christian? Sermon by W F, Deuteronomy 30:19 - SermonCentral.com](#)

Dr Sam Wells St Martin-in-the fields Sermon : [02-13-11ChoosingLifeandLivingwithChoices.pdf \(duke.edu\)](#)

## **Euthanasia**

The moral distinction between active and passive euthanasia, or between "killing" and "letting die". Is there a real difference? [BBC - Ethics - Euthanasia: Active and passive euthanasia](#)

[Euthanasia \(righttolife.org.uk\)](#)

dissertation All Answers Ltd. November 2018. **Euthanasia and Assisted Suicide in the United Kingdom**. [online]. Available from: <https://ukdiss.com/proposal/attitudes-towards-euthanasia-and-physician-assisted-suicide.php?vref=1> [Accessed 16 September 2021].

UK Laws Relating to Euthanasia or Assisted Dying [UK Laws Relating to Euthanasia or Assisted Dying - LocalSolicitors.com](#)

## **Background Information**

### **History of the legalisation on abortion in the UK**

<b>Date</b>	<b>Key event</b>
October 1967	Abortion Act 1967 passed. Introduced by David Steel and supported by the government under a free vote. It legalised abortion on certain grounds, by legalised practitioners, in England, Wales and Scotland. The act came into effect on 27 April 1968.
November 1990	The Human Fertilisation and Embryology Bill lowered the gestation limit for abortions from 28 weeks to 24 weeks. This is the currently accepted point at which the fetus is considered viable outside the mother's body. The act came into effect on 1 April 1991.
June 2017	Northern Ireland funding scheme introduced, to provide funded abortions in England and Wales, for residents of Northern Ireland. In cases of hardship, travel costs are also covered. Funding is provided by the Government Equalities Office and HM Treasury.
June 2018	Women in Wales, and from 28 December 2018 women in England, can take the second of the two abortion pills, <u><a href="#">misoprostol</a></u> , at home. This brought England and Wales in line with Scotland, which allowed the second pill to be taken at home from October 2017.

<b>Date</b>	<b>Key event</b>
December 2018	Abortion legalised on certain grounds, in the Irish Republic, up to 12 weeks gestation and later if the woman's life or health is at risk. The law came into effect on 20 December 2018.
October 2019	Abortion in Northern Ireland decriminalised after a free vote by Westminster MPs in July 2019. The suspended Northern Ireland Executive did not return by 21 October 2019, meaning the amendment introduced by Stella Creasy was passed into law through The Northern Ireland (Executive Formation etc) Act 2019 on 22 October 2019.
March 2020	Women in England and Wales can take both abortion medications, mifepristone and misoprostol at home, without the need to first attend a hospital or clinic. This has been temporarily approved by the Secretary of State for Health and Social Care to limit the transmission of coronavirus (COVID-19) from 30 March 2020 and by the Welsh Government's Minister for Health and Social Services from 31 March 2020.
March 2020	The Abortion (Northern Ireland) Regulations 2020 came into force on 31 March 2020. The regulations introduce a new legal framework for abortion services in Northern Ireland.

### **Grounds for abortion**

#### **Ground Definition**

A	That the continuance of the pregnancy would involve risk to the life of the pregnant woman greater than if the pregnancy were terminated.
B	That the termination is necessary to prevent grave permanent injury to the physical or mental health of the pregnant woman.
C	That the pregnancy has NOT exceeded its 24th week and that the continuance of the pregnancy would involve risk, greater than if the pregnancy were terminated, of injury to the physical or mental health of the pregnant woman.
D	That the pregnancy has NOT exceeded its 24th week and that the continuance of the pregnancy would involve risk, greater than if the pregnancy were terminated, of injury to the physical or mental health of any existing child(ren) of the family of the pregnant woman.
E	That there is substantial risk that if the child were born it would suffer from such physical or mental abnormalities as to be seriously handicapped.
F	To save the life of the pregnant woman.
G	To prevent grave permanent injury to the physical or mental health of the pregnant woman.

### **The situation in 2020**

The proportion of abortions performed under different grounds has remained similar to previous years.

In 2020, 98.1% of abortions (205,930) were performed under ground C .

A further 1.5% were carried out under ground E (3,083 abortions, a decrease of 100 since 2019), 0.4% (776 abortions) under ground D.

The remaining grounds account for very few abortions; 128 in total across grounds A, B, F and G. Most of the overall increase in the number of abortions is the result of ground C abortions increasing.

The vast majority (99.9%) of abortions carried out under ground C alone were reported as being performed because of a risk to the woman's mental health. These were classified as F99 (mental disorder, not otherwise specified) under the International Classification of Disease version 10 (ICD-10).

Ground E abortions are those performed because of fetal abnormality at any gestation. There were 3,083 abortions performed under ground E in 2020. This is a slight fall since 2019, when there were 3,183 (2%) abortions performed under ground E .

There were 229 (7%) ground E abortions at 24 weeks and over

The proportion of abortions that are performed at under 10 weeks has continued to increase since 2010. In 2020, 88% of abortions were performed under 10 weeks, increasing from 82% in 2019 and 77% in 2010. In comparison, abortions performed at 10-12 weeks decreased from 9% in 2019 to 6% in 2020. The percentage performed at 20 weeks and over decreased from 2% in 2019 to 1% in 2020.

The legal limit for a woman having an abortion is 24 weeks gestation. This is the point at which the fetus is viable outside the mother's body. Abortions may be performed after 24 weeks in certain circumstances, for example, if the mother's life is at risk or the child would be born severely disabled. Abortions where gestation is 24 weeks or over account for a very small number of abortions (0.1% of the total). There were 236 such abortions in 2020.

Above information taken directly from [Abortion statistics, England and Wales: 2020 - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/statistics/abortion-statistics-england-and-wales-2020)