

Centering on Ministry



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Pastoral Care and Problem Pregnancies

By Donald L. Collins

The issue of abortion is woven into the current social fabric of sexual permissiveness, disillusion and boredom. In such a dreary setting Christian faith has the bright good news that sex is most authentic and beautiful and fulfilling in a love commitment between two people "till death us do part."

But promiscuity is not the only cause that leads women to consider ending a pregnancy by abortion. Among other causes are the probability that her physical and/or emotional health will be gravely impaired; a substantial risk that the child will be born with a grave defect; a pregnancy which results from a woman's having been victimized by rape or incest. When a woman cautiously approaches a pastor to talk about a problem pregnancy, the pastor does not know what kinds of facts and fears she shelters within. Further, the pastor may assume that this is not a casual matter to her, that she is genuinely needing pastoral care. If it is just the mechanics of an abortion she wants, she can get that easily without a pastor.

A pastor may search his(her) conscience and decide to take a public, unequivocal position against abortion. That may also be a way for a pastor to be subtly insulated against sharing the heartache of persons who are in a desperate situation and feel they must seriously consider all their options. It may also insulate the pastor from one of the clearest opportunities to be a channel of Christ's care and healing to some of His little ones.

The possibility of insulating ourselves from persons in the time of their need can be

illustrated in regard to a popular perception of Catholic hospitals. Many people believe, whether justifiably or not, that Catholic hospitals adhere to a policy of valuing the fetus above the mother, that if one or the other must be sacrificed, it must be the mother. Many people have elected against the obstetric department of Catholic hospitals because they believed their feelings and convictions would be ignored at such a critical time. People may elect not to counsel with certain pastors regarding problem pregnancies for the same reason.

There are two basic ingredients a pastor may be expected to bring to persons in the crisis of problem pregnancy, as well as in any other crisis. 1) A pastor may be expected to have a deep commitment to the biblical conviction of who the person is. The person seeking help is of inestimable worth, created in the image of God, destined to grow into the stature of Christ. One of the person's God-given endowments is freedom, freedom to determine her own destiny, freedom to bring the thousand data about herself which the pastor can't know into the determination of her destiny.

2) The other thing a pastor may be expected to bring is empathy. This is not necessarily easy or comfortable. Concentrated effort is required to stand with another person in her place of pain. It requires the pastor's verbalizing his(her) perceptions back to the other person to ascertain that they accurately reflect where the other person is. When there is empathy, there is likely to be trust and the opportunity for the pastor to share insights and resources that may aid the troubled person to identify her options and make her choice.

Abortion Has Its Problems

By Carl M. Poe

All of us would agree that the most tragic experience that can confront a child is for him to be born into an environment that is absent of parental love and affection. Every child has the right to be reared by parents who love and want him. The first big mistake is made when an unwanted pregnancy takes place. A big problem facing our society is how best to handle this situation without further compounding the ill effects that inevitably follow.

Great numbers are turning to abortion as the way out of unwanted pregnancies. According to the National Center of Disease Control, the first nationwide survey of abortion shows that in 1974 there was in the United States one legal abortion for every four live births. This was an increase of 24 percent over 1973. Many authorities feel that, following the latest decisions on this matter by the Supreme Court, these figures will have sky-rocketed by the end of 1976, and we will be recording 1,500,000 legal abortions annually. The 1974 report shows that 64 percent of the women obtaining abortions were under age 25, 75 percent were white, 73 percent were not married, and 48 percent had no living children.

It is understandable that a woman finding herself with an unwanted pregnancy will go through a state of trauma. She should not compound her first mistake by making a quick emotional decision to abort the fetus without seeking advice from her pastor or other trained counselor. She should be advised that there can be very serious complications, both physical and emotional, associated with legal abortion. She should further be apprised of other options that she may choose.

Concerning the side effects of legal abortion, Dr. Robert Shearer, director of the Metropolitan Counseling Center in Kansas City, Mo., gave this statement to me personally: "It has been my experience that there are side effects to every abortion that will have to be dealt with. These may not be discernable until years later—they may be both physical and emotional."

Dr. Bohmil Stipal, Czechoslovakia's Deputy Minister of Health is quoted in the November 1975 issue of *Missouri Life Notes*: "Roughly 25 per cent of the women who interrupt their first pregnancy have remained permanently childless."

My own experiences reveal several cases where woman feel that they have been pressured into abortion without first having had the opportunity of fully reviewing other possibilities

of handling a bad situation.

Ms. A became pregnant as a teenager. Her parents talked her into a quick and quiet abortion. Some years later she married a man whom she loved very dearly. He was desirous of having children of his own. After fifteen years of marriage, they submitted to tests which showed her to be incapable of pregnancy. She revealed to her husband what had happened in her teen years. He was unable to make the proper adjustment and divorce resulted. She lives alone, and with God's help is getting her life back together again.

Mrs. B was married while she and her husband were still in school. When she became pregnant unexpectedly, they couldn't see how they could possibly provide for a child and carry through with their plans. They arranged for an abortion. The physician told them that she had aborted twin fetuses. While they have been able to have other children, Mrs. B carries a tremendous sense of guilt whenever she comes into the presence of twin children.

Physicians themselves are often disturbed with many abortions. Nick Thimnesh, writing in the *Kansas City Times*, December 7, 1974, quotes Bernard N. Nathanson, M.D. who was the former director of the Center for Reproductive and Sexual Health (this is one of the largest abortion clinics in the Western world where 60,000 abortions were performed in eighteen months); Dr. Nathanson states, "I am deeply troubled by my own increasing certainty that I had in fact presided over 60,000 deaths . . . there is no longer a serious doubt in my mind that human life exists within the womb from the very onset of pregnancy."

It should be pointed out that there are many legitimate agencies that are ready to help those who have unwanted pregnancies. These agencies will provide pre-natal care as well as seeing that proper adoption procedures are followed. I have worked with other pastors in helping young mothers through such experiences. So far I would have to report that the results have been good.

There is quite a trend now for parents of unwed mothers to provide for the daughter and baby. This gives the young mother a chance to finish her education or train for a work position. I can cite several examples where most of these are making good marriages that are proving very successful.

It is not the purpose of this article to condone in any way illegitimate relationships; but, since so many mistakes are being made in this day of so-called "liberation," I do feel that pastors and spiritual leaders must better prepare themselves to help bind up broken lives.

Abortion: a Moral Dilemma

By Barry L. Callen

The ethical and religious atmosphere in which I was reared took for granted that abortion was an immoral activity of rather rare occurrence and with virtually no defense. I knew very little about it and certainly I was unaware that it is an issue of considerable ethical complexity and one with rapidly growing social significance. Time, however, has changed my perceptions.

It is now quite obvious that abortion, when commonly practiced in a culture, presents an unusually complex and crucial set of ethical and social problems. Fundamental concerns surface with the many faces of protecting the right to life, enhancing the quality of life, even finding it necessary to define the nature of human life. Around it all now surges the call for women's "liberation," the contemporary problems of food shortage and overpopulation, the charge of murder, the reality of human selfishness and the cry that deformed and unwanted children should not be forced to live stunted existences devoid of usefulness and dignity.

With very few issues does one find the need to ask so many elemental questions that force forward so many perplexities. Just when does living matter become human life? To what extent should medical and biological information and judgments influence or be influenced by theological assumptions? What of values that seem to come into severe conflict with each other, particularly in cases of rape, unwanted and resented children or a pregnancy that endangers the mother's life? Does Christian responsibility require that we exert a firm control over the number of live births in order to save our planet from the tragedy of "population" (the devastating pollution of human life resulting from the presence of too many people)—even if

that requires widespread and legalized abortion? If such mass implementation of abortion seems necessary, should a Christian view this as ultimately humane or grossly inhumane? Abortion—a maze of overlapping questions that makes necessary the conclusion that no simple approach will be wholly adequate.

Life and death clearly belong to the province of God. To destroy human life with impunity and malice is obviously unacceptable ("Thou shalt not murder"). But whether under all circumstances abortion must be included in the murder category is not clear. And now modern man is faced with the even larger moral problem pressed upon him by an increasing technical competence which even suggests the possibility of his being able in a limited way to "create" life, to avoid conception by chemical and other artificial means, and to postpone death by the mechanical prolonging of life processes. Nature and providence are being challenged by the assertiveness of our human wills as we discover ways of crossing those once sacrosanct and uncrossable thresholds of life's inception and demise. But, stumbling in the darkness of this new territory, we find ourselves very uneasy with our intrusions. Where are the ethical guidelines when matters of life and death are increasingly controllable?

From the earliest period of the Christian community the Church has been generally opposed to the practice of abortion. This historic opposition, however, often has included distinctions such as St. Augustine's between an *animate* and an *inanimate* fetus, both being alive in a medical sense, but only the former being considered alive in a human sense. Once made, such a distinction can become a rationale for the legitimacy of abortion, at least in some instances. Such distinctions are commonly made by Christians and non-Christians alike, even though sometimes they seem to be purely artificial and

This issue of "Centering on Ministry" deals with the subject of abortion. Most pastors have been or will be involved in counselling persons who have problems coming from abortion. These pages may be especially helpful to those who are enrolled and participating as students in Continuing Education for Ministry. Some of you will use these articles as the basis for discussion in colleague groups or Clergy Support Groups. If you engage in additional reading for such discussion, you might want to write me for a bibliography of helpful materials.

The first issue of "Centering on Ministry" brought a good response, both in favorable

comment and in suggestions for future themes.

These first two issues have been sent free to all pastors and ministers in the 1976 yearbook. It is likely that future issues will be sent free to only those enrolled in Continuing Education for Ministry and/or alumni of the School of Theology. You could be certain of getting the winter issue of "Centering on Ministry" by enrolling now as a participating minister in Continuing Education for Ministry.

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academic attempts to lay a groundwork for previously held judgments. Nonetheless, some such assumptions must be made if any firm position is to be established and consistently argued and applied in today's open marketplace of ideas and practices.

The important question seems to be, "From what prime consideration does a Christian begin the logic which leads to his conclusion in this matter of the rightness or wrongness of abortion?" If, for instance, the Biblical theme of *self-determination* is emphasized and given priority, quite a liberal approach to at least the occasional appropriateness of abortion can be defended. Willis Edward Wygant, Jr., explains that "Scripture recognizes the self-determination of man as a gift of God through the story of Creation in Genesis 1:1-28, in which man is told to 'fill the earth and subdue it, and have dominion over every living thing that moves upon the earth.' Notice the word 'dominion' here. This means that man is to have control over God's creation. The concept of control also implies that man has choices to make concerning that over which he has dominion."¹

If, on the other hand, the Biblical theme of the *sanctity of life* is emphasized, almost any attitude toward abortion can be defended. Consider the case of the Roman Catholic Church which clearly emphasizes the sanctity-of-life theme. James H. Newton has written, "The Roman Catholic stance on abortion is relatively clear. Roman Catholics who oppose abortion do so on the principle that it is a violation of the commandment 'Thou shalt not kill.' Biochemically the embryo contains the necessary constituents of a human being and, thus, has a soul. Therefore, abortion at any time during pregnancy would be the termination of the life of a human being or soul, violating the commandment and constituting murder."²

Many other Christians seek to uphold the sanctity-of-life theme, but they do so by thinking much more in terms of the *quality* of life as a means of measuring its sanctity. In this case Christians tend to think about human relationships and the potential social consequences related to the permitting or denying of abortion in given instances. Certainly one can develop rather compelling moral arguments for abortion from the considerations of the plight of unwanted children, population pressures as related to major food shortages, danger to the mother's life, virtual medical certainty that a child will be born in a severely deformed condition, etc. So, how does one finally balance the sometimes competitive

concerns of the *right* to life and the *quality* of life to which a new fetus may be heir?

It is true in regard to so many issues that one arrives at the destination predetermined largely by the point from which the journey is begun. From which angle shall the issue of abortion be approached? Which of its several concerns will most demand our attention and thus largely dictate our decisions? There is little question about the fact that the issue of abortion presents a moral dilemma to the Christian community. The dilemma may be expressed in the form of the following two paradoxes.

First, abortion is one effective approach to the solution of at least one major social problem, overpopulation and food shortage. It is now one of the most widely used methods of birth control in the world. But it is also the occasion for the creation of additional social problems of considerable magnitude. Abortion and euthanasia deal with life itself and thus are at the very frontier of the mystery of our being. If this frontier is not vigilantly defended by moral guidelines and restraint, selfish and scheming persons will and now are making the future grim with prospects of a contrived mass manipulation of the "production" and "elimination" of desired and undesired human beings. Thus the paradox: this manner of solving some problems is often a door into new problems of equal dimensions.

Secondly, the whole issue of abortion exists for the Christian in a moral order where there is absolute truth, but, nonetheless, where appropriate applications of that truth are not always clear. As one faces the complex question of abortion, a strange and paradoxical phrase like "an ambiguous moral absolute" seems an appropriate (though not very satisfying) definition of what is really right. Truth often presents itself in *principle*, though still requiring the role of hard thinking and the input of circumstance before its most appropriate application can be known.

May God grant that those of us who minister to persons in the crises of their lives may be loyal to truth as it is in Christ, aware of complicating circumstances as they emerge, and redemptive toward persons as we actually know them and their needs. In this difficult task we must believe with all of our hearts that God honors our best thinking and honest acting when, in His name, we must look into the mirrors of a moral dilemma and act on the basis of what appears to us only dimly.

¹Willis Edward Wygant, Jr., "A Protestant Minister's View of Abortion" in *Journal of Religion and Health* (July, 1972).

²James H. Newton, "Abortion: A Protestant Position" in *Pastoral Psychology* (January, 1971).

Statement of Convictions Regarding Abortion

By William S. Anderson

Killing a human being is certainly a sin in God's eyes. Surely the killing of one's own helpless offspring is one of the most heinous sins one can imagine.

There is no shred of medical evidence that convinces me that the interruption of an established fetus is not just that, the killing of one's own offspring. I see no difference between this and infanticide. Both involve the conscious killing of a helpless, innocent human being. Hard words, but that's the way it is. To call it otherwise is self-deception. That we are able to sit and talk intellectually about this, without tears in our eyes, indicates the degree to which we have been influenced by a disintegrating, sick society.

The Bible decries from its very heart the slaughter of innocents. Our civilization as it has reflected the Christian ethic has in the past years epitomized concern for the individual. Now, immediate selfish considerations have achieved priority over long-term morality, and we Christians are condoning, yes, recommending abortion! We who name Jesus as our master, the One who suffered the little ones to come unto Him, recommend to the young girl a quick, clean, sterile, traumatic trip to New York so she can be back in high school in 2 or 3 days, as if nothing happened!

How come she got in trouble? Because she did not get good contraceptive advice? Or because no Christian leader told her that God has reserved sexual intercourse for the marriage relationship!

Christ had some heavy words for us. When the disciples asked, "Who is the greatest in the kingdom of Heaven?" He called a child to Himself and said, "Truly I say to you, unless you are converted and become like children, you shall not enter the kingdom of heaven. And whoever receives one such child in My name receives Me. But whoever causes one of these little ones who believe in Me to stumble, it is better for him that a heavy millstone be hung around his neck, and that he be drowned in the depth of the sea. Woe to the world because of its stumbling blocks! For it is inevitable that stumbling blocks come. But woe to that man through whom the stumbling block comes.

"See that you do not despise one of these little

ones, for I say to you, that their angels in heaven continually behold the face of My Father who is in heaven."

These words should weigh heavily upon us as we counsel with or advise one of these "little ones" concerning sexuality and abortion.

Finally and most importantly, we must tell them, if we believe it, of the joy that is involved in doing things God's way. The joy of the life free of guilt and regret. And to these little one's who have already strayed, we must tell them of the One who forgives and washes away the stains of sin, even the sin of abortion.

Pastoral Counseling in Abortion Cases

By Donald E. Williams

Just a few weeks ago, one of my fellow Police Chaplains was fatally wounded while in the performance of duty. Even though he was rushed to the hospital and placed on life-support machines which sustained his "life" for several days thereafter, was not his life terminated the moment the bullet crashed through his skull and shattered his brain?

The question has certainly arisen in many quarters in recent years "when does life actually end?" However, a question which cannot be avoided in this discussion is "when does a human life begin?"

Both of these questions challenge the many "definitions" of life. Whether the physician honors the Hippocratic, Nuremberg or Helsinki formulation, his impulse is to alleviate suffering, preserve human life, and, by doing so, enrich man's existence. There are clinical, moral, ethical, psychological, as well as theological implications of the questions before us which deserve serious deliberation and analysis which may cause reconsideration of values in an attempt to arrive at satisfactory moral guidance.

Dr. Eugene Sterner, in his article "On Life and Death" (*Vital Christianity*—August 25, 1974), voices this dilemma when he states: "Embryonic life is at least potentially human. It is not plant tissue. It is HUMAN tissue. The exact point at which the embryo or fetus becomes a human being no one actually knows."

There are many medical sources which conclude scientifically that "when the chromosomes of the father and mother unite they form an absolutely unique, never-to-be-duplicated human person. At that moment, life begins."

These questions of life must be a part of the

pastor's study and prayerful thought if he is to intelligently counsel an individual seeking help or some solution to an unwanted pregnancy; or in counseling someone who perhaps thought they had found a solution in abortion.

Some months ago as I traveled by air from New York to Detroit, I was thrust into a counseling situation with a young lady who had experienced an aborted pregnancy that very morning. She was on her way back home to husband and family who were unaware of her reasons for the trip. She had gotten herself quite upset trying to conceal her emotions, but the fact was that something traumatic had happened in her life which she could not deny, and she desperately needed help. When she discovered that I was a Clergyman, she did not hesitate to confide in me.

There is no question that somewhere in the personal history of millions of women in this nation there is a traumatic experience stashed away in the bank of an unforgettable memory.

There are many simple answers given to the questions of abortion—answers which on the one hand regard abortions as murders, and on the other hand, those which regard abortions as mere medical procedures. Continuation of a pregnancy which endangers the life of the mother is not a moral necessity in my view, and I further believe that the decision to abort such a pregnancy is in the path of mature Christian judgment.

The Church has a responsibility to:

1. Provide education on human sexuality and family life.
2. Provide counselling opportunities for married and unmarried couples on the principles of responsible parenthood.
3. Provide each pregnant woman accessibility to medical care and nutrition adequate to insure healthy children.
4. Make information and materials available so all married couples can exercise responsible choice in the areas of contraception and controls.
5. View parenthood in the widest possible framework, recognizing that many children of the world today desperately need functioning parental figures.
6. Encourage both parents to demonstrate actively their responsibility by creating a family context of nurture and growth in which the children will have the opportunity to share in the mutual love and concern of their parents.
7. Be aware of the fears of many poor and minority groups—fears of coercion and

Abortion—One Physician's Perspective

By Kenneth E. Schemmer

Abortion is defined medically as the interruption or termination of pregnancy before the age of viability of the fetus (about the twentieth week after conception). There are various types of abortion. The most common is natural abortion which occurs whenever a woman loses a baby before the age of viability due to medical reasons without any help from the outside. Ninety percent of these occur because of severe malformation of the fetus which would be incompatible with life anyhow. About six percent of them are due to abnormalities of the placenta, so that as the child grows larger it is unable to get the nourishment from the mother that it needs. The remainder are usually due to abnormalities of the uterus, such as a double uterus or a tumor in the uterus or an incompetent cervix.

The next reason for abortion is psychological. This has been done for a number of years both legally and illegally. The other reason for abortion is for medical purposes when the continued development of the baby in utero would cause undue strain upon a medical condition or which would result most probably in the mother's death. The latest type of abortion is what is called "on demand" abortion, meaning that whenever a woman decides that she wants to have an abortion she can request and have the abortion performed. Illegal abortion is almost a term of the past in that nowadays a person can have an abortion for almost any reason she wants it, so that it is almost an antiquated term at present, and is not the major concern of this paper. Thusly only abortion on demand would be a central point of this paper.

Let us consider a few principles of life and

genocide—and strive to see that family planning programs respect the dignity of each individual as well as the cultural diversities of groups.

It is estimated that some two-million abortions are carried out per year in this country. What do we do about it? Do we pretend it does not happen within the Church of God family, or do we adequately prepare ourselves to educate our people in the responsible and planned parenthood and other more desirable preventions of and solutions to unplanned, unwanted pregnancies?

commitment as our discussion of abortion continues. First the sanctity of life. I firmly believe that the Bible teaches human life contains God's image and thereby is sacred. Nowhere in the Bible can I find excuses to destroy life. Scripture develops the theme of living, of learning to cope with our human condition in a world of problems and tragedies, of depending upon God in faith and commitment for the resources to handle our difficulties. Therefore, since abortion deals with life, with the reproduction of ourselves through voluntary action, I am compelled to view abortion on demand as a symptom of psychological and spiritual need.

The second principle is that I have Christian compassion for the sick and injured. In the Hippocratic oath it definitely states these things, "Above all do no harm, and I promise that I will not aide in the performance of an abortion." The whole basis of being a physician is predicated upon preserving life, aiding people to enjoy life and health, and is always against destroying life.

Thirdly, I believe that I am answerable to God for the use of the skills that I possess, be it technical, professional, or intellectual.

Fourthly, in the physician-patient relationship I am obligated by society as well as God and myself to do what I know is best for the patient with the understanding, training, and experience that I have.

Fifthly, when we consider abortion, since it has to do with destroying life, we must consider abortion in the light of the continuum of life. For a long time there has been the question of whether euthanasia is proper. This is otherwise known as mercy killing and usually unacceptable in most ways. Could it just be that if we liberalize and sanction abortion to the point of having it on demand that it is very easy then to carry on the question of destroying life which is disagreeable or unacceptable to us in one form or another when we have the major say so? Abortion for the convenience of the mother is not an isolated event. It is not something that in itself is completely innocuous and has no repercussions.

In regards to the first point, the sanctity of life, I would like to bring to our attention the conclusion from the First International Convocation-Conference on Abortion held in Washington, D.C. in October 1967. Six major scientific authorities in the fields of medicine, ethics, law and social sciences were invited to participate as consultants in this symposium. The medical group, made up of geneticists, biochemists, physicians, professors, research

scientists, etc. came to a near unanimous conclusion with only one dissension, "The majority of our group could find no point in time between the union of sperm and egg, or at least the blastocyst stage and the birth of the infant at which point we could say this was not a human life." The blastocyst stage occurs approximately one week after fertilization and accounts for twinning. Nothing is added to this growing being from the time of union of sperm and egg until the ultimate death of the old man, that is nothing is added except nutrition, oxygen, and time. This is not a blueprint, this is the house in miniature needing only to mature and develop. The only thing happening at birth is a change of the external life support system of the baby. A newborn baby is not capable of independent existence. It is blind, deaf and totally helpless. It is merely more mature than three, six, or eight months earlier. Consequently, it would seem that abortion at any rate is a second best. That is, it would be better to allow the life to mature to birth and then adopt out the child if for some reason the parents were incapable or unwanting of that child. However, we have situations psychologically and medically in which the carrying of the child to maturity or its birth could be very injurious to the mother, even to the death of the mother. Consequently at this point we must choose which is the most important life to preserve, and abortion becomes an acceptable alternative.

In regards to the question of euthanasia, there is a very definite correlation between the establishment of liberalized abortion and the slow and progressive acceptance of euthanasia and even infanticide as a need in a country. England narrowly missed adopting a permissive euthanasia law by one vote two years after their abortion law passed. When we lose respect for and eliminate the safeguards protecting human life at any one stage of development, we progressively come to lose respect for and eliminate the safeguards protecting human life at other stages of development. We come then to the acceptance that, as Hitler said, "useless eaters" of any age are so much a burden on society that their lives too must be snuffed out.

Christian physicians are motivated by compassion for individuals and seek to responsibly mitigate the effects of sickness or evil when possible. The Christian physician who is asked to perform an abortion should seek to discover the will of God in this as in every other area of his life. He needs divine guidance for himself, his practice, and for the council of his patients. The physician in making decisions

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should take into account the following principles: the human fetus is not merely a mass of cells or an organic growth; at most it is the actual human life or at least the potential of developing human life. For this reason the physician with a regard for the value and sacredness of human life will exercise great caution in prescribing an abortion. The Christian physician will advise induced abortion only to safeguard greater values sanctioned by scripture. These values may be individual, familial, or societal. From the moment of birth the infant is a human being with all the rights which Holy Scripture accords to all human beings. Therefore, infanticide under any name should be condemned. Ethical judgments cannot be based on the situation alone. While the physician must consider the individual circumstances present in each situation, this evaluation must be controlled by biblical law and principles.

Pregnancy results from the physical union of male and female. Usually the child is wanted. Perhaps, the reasons for sexual intercourse and why a child is not wanted needs examination. Usually pregnancy in teenagers is not related to deep personal love between husband and wife but between two people who have been driven together by peer pressures or parental pressures which have caused young women to have little self-worth and esteem. Young males often find a real need to be superior, and strong, and pregnancy results from some of their conquests. Frequently, abortion is demanded as the result of unfaithfulness by married women. Many other reasons could be listed why a pregnancy is unwanted.

Perhaps we need to be more responsible for our actions, seek better ways to relate to other individuals and love our children and friends in such a way that we will all act more like the caring, worthwhile human beings we have been created to be than a part of the animal kingdom. The problem with the factors that led to the

development of the problem, unless remedied, will recur and repeated abortions may have to be performed.

In conclusion, abortion should be reserved for those somewhat few instances of malformation of the fetus or severe illness of the mother and less often mentally. An unwanted child should be delivered by natural means at the end of pregnancy. (A) If the child is still unwanted, it should be adopted. (B) If the child is wanted, the mother has gained instead of lost. We would, therefore, suggest that women be encouraged to depend upon the Lord for the solution of their problem and not take life into their own hands. It would seem to me that in most situations an abortion performed on demand is not the cure of the problem.

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