Anyone who has ever heard a conversation about abortion has heard pro-choice statements like:

- “My body, my choice.”
- “You can’t tell another person what she can’t do with her own body.”
- “The fetus is part of her body.”
- “The fetus is inside her body.”

When a pro-life advocate hears statements like these, a common impulse is to respond by saying, “But it’s not her body; it’s another body!” or “If the fetus is part of her body, does she have two heads and twenty toes?” or, perhaps, “But the unborn is a human being, here’s some evidence for that…”

Not so fast. The pro-choice statements above are ambiguous. If the pro-choice advocate is confused about whether the unborn is a separate organism from the mother, then graciously giving him an impromptu biology lesson might be helpful. In many cases, though, the pro-choice advocate is intending to communicate that the woman can do what she wants even if the fetus is a human being. Many pro-choice advocates don’t know how to articulate this argument in a way that helps pro-life advocates understand. The pro-life advocate hears, “The fetus is not human,” but the pro-choice advocate means, “It doesn’t matter if the fetus is human.”

Pro-life people generally think there is one question to answer in order to determine the morality of abortion: “What is the unborn?” Generally speaking, there is merit to this idea. For instance, when a pro-choice advocate says abortion should be legal because some women are too poor to have a child, he is begging the question. He is assuming the unborn is not a valuable human because (presumably) he wouldn’t say women should have the right to kill their toddlers if they are too poor. If the unborn is human, like the toddler, then we can’t kill the unborn in the name of poverty any more than we would kill a toddler. In contrast, attempting to give a reason that the unborn is not a valuable human being would make a better argument.

One might be tempted to think that all pro-choice justifications can be accurately summarized as either 1) assuming the unborn isn’t human or 2) arguing that the unborn isn’t

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1 Many thanks to Trent Horn, Steve Wagner, Rich Poupard, Scott Klusendorf and Josh Brahm for their excellent work, and for helping me to understand the Sovereign Zone Argument. I heartily recommend their web sites and their work. Additional thanks to Steve Wagner for serving as my editor.

2 For examples of this focus on the question, “What is the unborn?” see Greg Koukl’s article “Only One Question,” and Scott Klusendorf’s article “Only One Issue.”
human. But as Trent Horn⁴ has pointed out, there is a third type of pro-choice justification, one that 3) admits the unborn is human and says that the woman can kill it anyway because of her bodily rights.

Learning to Recognize Bodily Rights Arguments

When I first heard this distinction, it seemed foreign to me. Why would anyone admit that the unborn is a valuable human being and say it’s okay to kill it? Then I started thinking about all of the conversations I’d had in which pro-choice people made references to the woman’s body and how it didn’t seem to matter to them when I demonstrated that the unborn is a separate human organism. Could I have simply been misunderstanding them all along?

So I went on the lookout. If someone made one of the above pro-choice statements, I would clarify if he was arguing that the unborn isn’t human or if he was making a bodily rights argument. For instance, when someone said the unborn is part of the mother's body, I asked:

“I want to understand you, but it sounds like you might be saying one of two different things. Do you mean that the unborn is literally a part of her body, like a functional part or something; or do you mean that because it is inside her body and connected to her body that she has the right to kill it because she can do what she wants with her body?”

Almost every time I have asked this question, the pro-choice advocate has said that he meant the latter. I ask a similar question when people say that the unborn is inside the woman, such as:

“I want to understand you, but it sounds like you might be saying one of two different things. Do you mean that the unborn is not a valuable human being because it is inside the woman; or do you mean that even if it is a valuable human being, that a woman has the right to kill it because it’s inside her and she can do what she wants with her body?”

Almost every time, he responds by saying he meant the latter. Since I began asking for clarification on this, I have found that bodily rights arguments are much more common than I had previously thought.

The pro-life mind is generally oriented towards the unborn: the unborn is a human

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being, and it should be illegal to kill human beings, so abortion should be illegal. But pro-choice people are generally oriented differently. Even if they don’t believe that the unborn is a human being, sometimes they don’t think that issue matters. The important thing is that women can do what they want with their bodies, no matter what. If this is the perspective of one of your pro-choice friends, then biological or philosophical arguments that the unborn is a human being are not likely to change his mind about abortion. Some pro-choice people truly don’t care what the unborn is; the unborn is in the woman’s way, and that’s all that matters.

Pro-life advocates need to get in the habit of asking these kinds of clarification questions. If we do not clarify, but merely assume we know what the pro-choice advocate means, then it’s likely our conversation will get stuck and neither person will know why.

Some might think, “What’s the use in trying to persuade people who think it’s okay to kill humans? They’re so unreasonable. A lost cause.” I strongly disagree! While I’ve found some hardcore moral relativists almost impossible to persuade, the pro-choice advocate focused on bodily rights is different. He is right about something very important: we do have significant rights to our bodies. Yet it is not difficult to make a persuasive case that our bodily rights don’t extend as far as most pro-choice advocates think.

Distinguishing Between Bodily Rights Arguments

Trent Horn has distinguished between two types of bodily rights arguments: the Right to Refuse Argument and the Sovereign Zone Argument. The Right to Refuse Argument states that even if the unborn is a human being, a woman has the right to refuse to allow the unborn the use of her body. I will not address that argument here; if you are interested, I recommend “De Facto Guardian and Abortion: A Response to the Strongest Violinist,” Steve Wagner’s summary of the discussion of Justice For All’s philosophy team.

The Sovereign Zone Argument states that even if the unborn is a human being, a woman should still be able to have an abortion because she has the right to do anything she wants with anything inside the sovereign zone of her body. Notice that this is a much more extreme claim than that of the Right to Refuse Argument. The Right to Refuse Argument says a woman has the right not to be forced to do something, while the Sovereign Zone Argument says she has the right to do anything, as long as it’s to something within her sovereign zone.

If you say something like, “My right to swing my fist ends where your nose begins, and abortion kills a baby,” you won’t be addressing this pro-choice person’s concern.

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4 See Trent Horn, “My Body, My Choice,” in Abortion: From Debate to Dialogue - The Interactive Guide, ed. Steve Wagner (Wichita: Justice For All, 2013), pages 95-106. Trent’s observation that there are two distinct forms of bodily rights arguments was, in my opinion, a groundbreaking development for the pro-life movement.
Remember, she has acknowledged that the unborn is a human being. She doesn’t believe a woman’s right to bodily autonomy gives her the right to kill a toddler, or swing her fist into her neighbor’s nose. The unborn is different because it is in her territory, in her sovereign zone. While I haven’t ever heard a pro-choice person use the term “Sovereign Zone” to explain this view, I have talked with many who hold the position I’ve described. And, it’s an integral part of their pro-choice perspective.

**Dismantling the Sovereign Zone Argument**

The most obvious problem with the Sovereign Zone Argument is that it entails something that is indefensible: a woman should legally be allowed to do anything to her unborn child, even if it is a human being. Once I’ve clarified that I am dealing with the Sovereign Zone Argument, I respond with some version of a story I call *The Five Years of Autumn* to help the person see the problem and hopefully abandon the view.\(^5\) If the pro-choice person wants to continue to defend abortion with the Sovereign Zone Argument, he will have to “bite the bullet” in five progressively difficult scenarios.

I want to be clear that this story is not intended to mock anyone, and I don’t ever approve of pro-life people mocking pro-choice people. I also don’t ever approve of pro-life people attacking straw men instead of actual pro-choice arguments; on the contrary, I think we should go to great pains to make sure we understand pro-choice people’s views and respond to the most plausible versions of them. I’m not intending to imply that pro-choice people are like Autumn or that they should approve of her actions. I think a pro-choice person who agrees with the Sovereign Zone Argument should consider the implications of that view as illustrated by Autumn. If someone justifies abortion with the Sovereign Zone, I do not think he can consistently claim that Autumn should not at least have the legal right to do what she does.

**The Five Years of Autumn**

Autumn has just completed her doctorate at the age of thirty. She is pro-choice and has fully embraced the Sovereign Zone Argument. She believes the unborn is a valuable human being, but that abortion is justified because women have the right to do anything they want with anything inside their bodies.

In the First Year after completing her doctorate, Autumn becomes pregnant. Her boyfriend is supportive, and she’s excited because she’s always wanted a baby. Well, that is, she’s always wanted a baby boy. Her doctor orders an early amniocentesis test at twelve weeks because of factors discovered during genetic counseling with Autumn and her boyfriend. Though the child appears to be normal, Autumn’s heart sinks when the doctor tells

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\(^5\) Thanks to Steve Wagner for the ingenious idea to take the five points of this argument and tell it as a story.
her that it’s a girl. She wrestles for a few days, and finally decides to have an abortion. She
doesn’t want to have a girl, and her body is her sovereign zone after all, so she shouldn’t have
to justify to anyone what reason she has for getting an abortion.

Autumn gets pregnant again soon after and this time at twelve weeks she is relieved to
find out that she’s having a boy. She and her boyfriend eagerly anticipate the birth, until
around eight months into the pregnancy when they break up. Suddenly Autumn goes from
being excited at the prospect of raising a baby boy with her boyfriend to the terrifying reality
of raising a child all by herself. She thinks eight months is awfully late to have an abortion,
but she considers the sovereign zone of her body. If it’s her sovereign zone and she has the
right to do anything she wants with anything in her body at twelve weeks, why not at
thirty-five weeks? Her state happens to allow abortion up until birth, and she convinces the
doctor that her mental strain is sufficient to qualify her for abortion in this late stage. After
she goes through with the abortion, she tells herself that it was the right thing for her.

In her Second Year after completing her doctorate, Autumn starts dating a physician.
She becomes pregnant, and she is somewhat happy about it, but her excitement is quickly
overshadowed by a terrible case of morning sickness. One day her ever-attentive new
boyfriend brings home some white pills he has illegally acquired for her. He tells her he has
brought her thalidomide, which will help her to feel better, but could cause their baby to be
born with very severe birth defects. He may be born without arms or without legs.⁶ She
thanks him for his compassion for her, but declines the pills. After suffering through three
straight days of morning sickness though, she decides she can’t take the discomfort anymore
and starts taking thalidomide. She fears for what may happen to her baby, but she decides
that those possible effects shouldn’t stop her from doing what she feels is necessary. After all,
she tells herself, “My body, my choice.” When she sees her deformed baby for the first time,
she realizes just how severe the consequences of her actions are. But, she thinks, at least she
gave him a chance to live, and if he decides later that he would have preferred death to being
handicapped, he could make the choice to end his own life when he is old enough.⁷

As she goes into the Third Year after completing her doctorate, she discovers that she
doesn’t mind so much having to take care of a deformed child. Her community doesn’t know
she took thalidomide, so they all think she’s a hero for being so strong for him. When she
becomes pregnant again, this time with a little girl, she fortunately doesn’t experience such a
bad case of morning sickness, but she still has some of those little white pills left. She
considers the bond her kids would have if they went through the same challenges together,
and the way her community would support her and admire her.

⁶ I believe Rich Poupard of the Life Training Institute was the first to utilize thalidomide in an argument
against the bodily-rights-based arguments for abortion. See his post “Do No Harm (Except For That Killing
Thing)” here. Trent Horn applied it specifically to the Sovereign Zone Argument.
⁷ I don’t think words can do justice to the effect thalidomide has on a child. A simple Google image search on
the term “thalidomide” illustrates this. Warning: The pictures are disturbing.
She thinks about her deformed infant son and how hard his life will be, and feels selfish for even thinking of deforming another child. But then again, she considers what her abortion doctor told her about abortion procedures. If she had the right to have a doctor pull her baby apart while killing it through a dilation and evacuation abortion, why shouldn't she have the right to take a drug to deform it? Having an arm pulled off seemed a lot worse to her than just not growing one properly, so if her sovereignty over her body gave her the right to do the one, why not the other?

She considers the possibility that some might argue that it is worse to maim someone than to kill him. But if people really thought that, why didn’t they go around killing maimed people to help them out of their misery? She knew happy handicapped people. And even if it is worse to be maimed than to be killed, who are they to judge her for doing what she wants to with what’s in her body, especially if they’re pro-choice? She concludes that she doesn’t have to justify to anyone her personal decisions about what she does with her body. After all, it is a private medical decision between her and her doctor. She takes the remaining thalidomide and when her baby girl is born, she is pleased to see that she turned out deformed. She has second thoughts about her decision from time to time, and sometimes even feels like she’s a pretty mean person. But she tells herself that even if it were immoral, surely no one could tell her it should be illegal.

In her Fourth Year after completing her doctorate, she decides to take an art class at a local university. She was always artistically talented and had even considered pursuing an art degree when she was in high school. She seems to have the skill to succeed, but she struggles to come up with ways to make herself really stand out as an artist. One day a pro-life group comes to her campus with graphic pictures depicting the results of abortion. The pictures don’t really bother her, but it does occur to her that they are very controversial and attention-grabbing, and this gives her an idea.

She gets herself pregnant three times and has three early abortions, having already agreed with her doctor that she could keep the bloody remains of the embryos and placentas so she can use them for her art. She succeeds at getting a lot of attention when she unveils her project, though more of it is negative than she expected. When one critic asked her how she could do such a thing, she fired back at her, “Who are you to tell me what I can do with my body? What business is it of yours how many abortions I have, when I have them, or why I have them? It’s my body, so it’s my choice.”

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8 To learn about abortion procedures, see http://www.abort73.com/abortion/abortion_techniques/ or “What Are the Facts? Frequently Asked at Justice For All Events” (www.jfaweb.org/Facts).
9 Unfortunately, this is based on a true story. Aliza Shvarts, an art student at Yale, allegedly had multiple early abortions intentionally so she could use the remains for her art project. When I talk about her in conversations with pro-choice people, I’m careful to specify that it isn’t clear whether she actually did this or not, but that she claims she did it. I heard of this story as a response to bodily rights arguments from Scott Klusendorf of the Life Training Institute on pages 199-200 of The Case for Life. Trent Horn applied it specifically to the Sovereign Zone Argument.
At the beginning of the Fifth Year after completing her doctorate, Autumn breaks up with her physician boyfriend and falls madly in love with a very pro-life man. She doesn’t tell him about her abortions, her role in deforming her children, or, heaven forbid, her recent art project. Before they start sleeping together, they agree that if she becomes pregnant, she won’t have an abortion. She becomes pregnant after a few months, and shortly thereafter, her new pro-life boyfriend cheats on her. Fueled by her desire for revenge, she forms a plan.

She goes back to her abortion doctor and tells him of her situation and he agrees to help Autumn carry out her plan. He devises the cruelest possible ways he can hurt a late-term fetus without killing it. They wait until thirty-eight weeks, then Autumn goes to her doctor’s clinic, where he tortures her child for as long as possible until finally the child dies.

She reflects afterward on how much suffering she caused her child, but reminds herself that her right to do what she wants with her body is absolute. While many would surely disapprove of her decision, no one, not even the child’s father, has a right to stop her from doing anything to her baby as long as it is inside her sovereign zone.

Cognitive Dissonance with the Sovereign Zone

There is only one question this story is intended to ask the pro-choice person: should Autumn’s actions be legal? My argument is very simple: if abortion should be legal on the basis that women can do whatever they want with anything inside their bodies, then Autumn’s actions should also be legal. One could consistently believe abortion should be legal and believe that Autumn’s actions should not be legal, but only if he doesn’t rely on the Sovereign Zone Argument to justify abortion.

As a conversational tool, sometimes it is easier to simply point to the five implications of the Sovereign Zone Argument, rather than walk through a detailed story.

Five Implications of the Sovereign Zone Argument:

1: There can be no restrictions on abortion at any stage or for any reason.
2: A pregnant woman can take thalidomide to treat her morning sickness even though it will deform her fetus.
3: A pregnant woman can take thalidomide to intentionally deform her fetus.
4: A woman can have multiple abortions for the sole purpose of using the results for an art project.
5: A pregnant woman can do anything to her unborn child, including having it tortured to death.

In my experience, most people aren’t willing to accept the third “year” or implication
of the Sovereign Zone Argument. Most people do not think a woman should have the right to intentionally deform her child, *even if they think she should have the right to intentionally kill it*. They know intentionally deforming a child is wrong, so when confronted with the third year, they either try to make a distinction to save the Sovereign Zone Argument, or they abandon it entirely and move on to a new argument. Every now and then, they change their minds about abortion altogether. Only on very rare occasions have I met someone who has agreed that fetal torture should be legal.

When I’m in a conversation in which I can tell the pro-choice person advocating the sovereign zone is struggling with her view, especially after discussing thalidomide, I often ask her if she knows how abortion procedures are done. Often she has no idea. After describing an abortion procedure, such as suction abortion or dilation and evacuation abortion, I gently ask one of the following questions:

- Why should a woman have the right to dismember a child if she shouldn’t have the right to deform him?
- Why is it okay for her to have a doctor rip her child’s limbs off with a suction machine or with forceps, but it is not okay for her to take a drug that causes her child to not grow limbs?
- Why does she not have the right to cause her child to have a harder life, but she does have the right to deprive him of life completely?

The cognitive dissonance this line of argument creates is extremely powerful. I suspect that pro-choice views are often driven by a sort of wishful thinking. Many pro-choice people *want* abortion to be okay, so they rationalize it in their minds.¹⁰ They think: “It’s not really human anyway,” or, “it’s basically a part of her body,” or even, “maybe it’s wrong, but it should still be legal.” But while they have spent years rationalizing that *killing* fetuses is justified, they have not gone through a similar process of telling themselves that it is okay to *deform* a fetus. Their moral compasses still function properly once we step away from abortion for a minute and talk about doing something else to an unborn child, something that is obviously immoral. When we bring up the case of thalidomide, we force their rationalization of abortion to come into conflict with their view that it is obviously wrong to deform a child with thalidomide.

²⁰ For the record, I am not claiming that self-deception only exists on the pro-choice side. I am making a specific comment about how self-deception affects pro-choice people, and how that impacts their response to thalidomide.