

Session 1: Introduction and Three Essential Skills

Summary: You can start a conversation and keep it productive using just three skills: listening to understand, asking questions with an open heart, and finding common ground when possible. This session can help you with conversations on any topic!

Introduction to “7 Conversations in 7 Hours”

Presentation

1. Listen to understand.
2. Ask questions with an open heart.
3. Find common ground when possible.

Interactive Activity

See Interactive Guide, Page 10: Activity 1 (“Imitate”)

Q&A

Next Step (Conversation Starter)

See www.jfaweb.org/7-start-the-conversation

Direct Link to Notes for this Session: www.jfaweb.org/7-notes/session-1



Notes, Links: www.jfaweb.org/7-notes

Login, Materials, and Questions: webinars@jfaweb.org

Session 2: Are Images Helpful?

Summary: Learn to use images appropriately and sensitively in order to help people face the reality of abortion. Learn to use JFA's "Invitation to Dialogue" Brochure (digital version and paper version) to guide a conversation.

Presentation

Interactive Activity

See Interactive Guide, Page 33-34: Activity 7 ("Imitate: 5 Minutes")

Q&A

Next Step (Conversation Starter)

See www.jfaweb.org/7-start-the-conversation

Direct Link to Notes for this Session: www.jfaweb.org/7-notes/session-2



Notes, Links: www.jfaweb.org/7-notes

Login, Materials, and Questions: webinars@jfaweb.org

Session 3: One Central Question:

Summary: Focus on the question, "What is the unborn?" and defend the idea that the unborn is a living human organism biologically.

Presentation: Focusing on One Central Question

"Daddy, Can I Kill This?"

Agree — Apply — Ask Why — Ah!

Interactive Activity—Trot Out the Toddler

See Interactive Guide, Page 12-13: Activity 2 ("Imitate" and "Improvise")

Presentation: Living Human Organism (Biology)

Living

Human

Organism

Interactive Activity—Biology

See Interactive Guide, Page 14: Activity 3 ("Imitate, Parts I-III")

Q&A

Next Step (Conversation Starter)

See www.jfaweb.org/7-start-the-conversation

Direct Link to Notes for this Session: www.jfaweb.org/7-notes/session-3



Notes, Links: www.jfaweb.org/7-notes

Login, Materials, and Questions: webinars@jfaweb.org

Session 4: The Equal Rights Mystery

Summary: Many people are unsure if the unborn are persons or have equal rights to the rest of us. We train you in this session to navigate that conversation beginning with the common ground of the Equal Rights Mystery.

Presentation

Lay Out the Equal Rights Mystery

Clarify Who Would Be in and Who Would Be Out

Ask, "Does That Make Sense?"

Interactive Activity

See Interactive Guide, Page 17-19: Activity 4 ("Imitate, Parts I-IV")

Q&A

Next Step (Conversation Starter)

See www.jfaweb.org/7-start-the-conversation

Direct Link to Notes for this Session: www.jfaweb.org/7-notes/session-4



Notes, Links: www.jfaweb.org/7-notes

Login, Materials, and Questions: webinars@jfaweb.org

Session 5: The Question of Rape

Summary: Some think the toughest thing about the question of rape is answering the intellectual challenges, including, "Is abortion right or wrong in the case of rape? Should it be legal in the case of rape?" We prepare you for these challenges, but we help you meet another challenge that's more important first: the relational challenge.

Presentation

Relational Challenge: Do you care about the woman who has been assaulted?

Intellectual Challenge: Should abortion be legal in the case of rape?

Interactive Activity

See *Interactive Guide, Page 23-24: Activity 5 ("Imitate, Parts I-II")*

Q&A

Next Step (Conversation Starter)

See www.jfaweb.org/7-start-the-conversation

Direct Link to Notes for this Session: www.jfaweb.org/7-notes/session-5



Notes, Links: www.jfaweb.org/7-notes

Login, Materials, and Questions: webinars@jfaweb.org

Session 6: Do Bodily Rights Mean Abortion Is Okay?

Summary: Many people say that a woman should have a right to do what she wants with her body. This session features our surprising response to this argument.

Presentation

Relational Challenge

Intellectual Challenge, Part I:

Which Type of Argument?

“Sovereign Zone” Version of Bodily Rights Arguments

Interactive Activity

Interactive Guide, Pages 28-29 (Activity 6: Imitate)

Presentation

Intellectual Challenge, Part II: “Right to Refuse” Version of Bodily Rights Arguments

Q&A

Next Step (Conversation Starter)

See www.jfaweb.org/7-start-the-conversation

Direct Link to Notes for this Session: www.jfaweb.org/7-notes/session-6



Notes, Links: www.jfaweb.org/7-notes

Login, Materials, and Questions: webinars@jfaweb.org

Session 7: Threats to the Pregnant Mother's Life, Back-Alley Abortion, and "Personally Opposed but It Should Stay Legal" Plus Q&A

Summary: This session features an extended time of question and answers. Make notes on this page about questions you'd like to ask. Submit questions to us at any time at webinars@jfaweb.org.

Presentation

What if the life of the mother is in danger?

What if my friend says, "I'm personally opposed to abortion, but I think it should be legal?"

Interactive Activity

#Mindblown: http://doc.jfaweb.org/Training/Haschke_2015_11_Nov_MindBlown-v2020.pdf

Presentation

If abortion is made illegal, won't women die in the back alleys from unsafe abortions?

Q&A

Next Step (Please Give Us Feedback and Sign Up for Updates!)

Feedback and Sign Up for JFA Updates: www.jfaweb.org/updates

Direct Link to Notes for this Session: www.jfaweb.org/7-notes/session-7

Direct Link to Conversation Starters: www.jfaweb.org/7-start-the-conversation



Notes, Links: www.jfaweb.org/7-notes

Login, Materials, and Questions: webinars@jfaweb.org

“What if the Mother’s Life is in Danger?”

Is killing the unborn always wrong?

Stephen Wagner

Compassion: Easy to Forget in the Process of Intellectual Discussion

Just as there is an underlying test of your compassion when people bring up abortion in the case of rape, when people ask, **“Would you say that abortion is wrong when used to save the mother’s life?”** they are testing whether you are a reasonable, compassionate human being. Do you simply respond with a disinterested intellectualism? And not only must you be careful to express your compassion for both mother and child in these circumstances, you also must actually be the sort of person who has genuine concern. You can’t pass this test by faking it. If you aren’t heartbroken over these circumstances, I suggest you spend more time listening to the stories of those personally affected.

An Initial Question

“I think cases in which the pregnant woman’s life are in danger are important to consider. What life-threatening conditions are you referring to?” (The person may not have any specific cases to share; you can then offer him or her the information in the following paragraphs.)

Step 1: Find Common Ground

“If a pregnant woman’s life is in danger, and the unborn is a human being, then there are actually two human beings whose lives are in danger (the mother and the child). I’m very concerned about the mother whose life is in danger, but shouldn’t we also be concerned about the unborn child? I agree with the authors of the classic *Williams Obstetrics* when they note, “An important result is that the status of the fetus has been elevated to that of a patient who, in large measure, can be given the same meticulous care that obstetricians provide for pregnant women.”³⁹ Can we agree that we should avoid abortion if possible?”⁴⁰

Step 2: Clarify How Doctors Should Approach Threats Late in Pregnancy

“Late in pregnancy, the most important question is, ‘Do we need to kill the child to save the mother’s life?’ I know of no threats late in pregnancy that require *killing* the child to *save* the mother’s life. The doctor should seek to save both the life of the mother and the child using Caesarean section or other medical management. Even in the rare case in which the doctor believes the woman will die if the child is not delivered immediately, and the child is too young to survive outside the womb (prior to approximately 22 weeks gestation), the doctor can still do a Caesarean section and allow the parents to care for their baby while he is dying (this is what we do with any other dying person – we give him hospice care).”⁴¹

Step 3: For Life Threats Early in Pregnancy Intervention Is Similar to Triage

“I’m aware of only one threat to the woman’s life that occurs early in pregnancy. I’m referring to ectopic (“out of place”) pregnancy, and specifically the sort of ectopic pregnancy in which the child implants in the fallopian tube rather than in the uterus (also called a “tubal pregnancy”). In some cases, the child dies naturally before the tubal pregnancy becomes a threat to the mother’s life. In many cases, however, the

³⁹ F. Gary Cunningham (et. al.), *Williams Obstetrics*, 23rd ed., (New York: The McGraw-Hill Companies, Inc., 2010), p. 78. A portion of this quotation appears on Side 1, Panel 1 of the Justice For All Exhibit.

⁴⁰ See Stephen Wagner, *Common Ground Without Compromise* (Signal Hill, CA: Stand to Reason Press, 2008), pp. 45-48

⁴¹ See a reprint of Thomas Murphy Goodwin's excellent article on high-risk pregnancy management at <http://www.leaderu.com/ftissues/ft9603/articles/goodwin.html>. According to Goodwin, in most other cases of life endangerment in pregnancy, we can treat the mother and save the child. For example, a pregnant woman with cancer can be treated while the baby tolerates the chemotherapy given to the mother. The sad thing, Goodwin notes, is that many obstetricians are not well-versed in the current literature on high-risk pregnancy management, so they are not as confident as they should be to avoid abortion in these circumstances.

child does not die naturally and the mother will likely die if the doctor does not intervene. In these cases, as in other cases of triage, we must think of the child as a real human being, but we must also seek to save as many lives as we can. Because the life of the child cannot be saved (this is not a case of “child *or* mother”), the doctor should intervene. The mother and father will surely feel a mix of emotions, but they should not believe they are doing the wrong thing to allow intervention.”

Step 4: Note the Disagreement about Which Means of Intervention Are Appropriate

“Among those who take the humanity of the unborn seriously, there is some disagreement as to the appropriate way to intervene, whether through salpingectomy (removal of a portion of the tube), salpingostomy (removal of the embryonic child through an incision in the tube), or methotrexate (a drug, traditionally used to treat cancer, that stops the cellular development of the child). All of these advocates, though, agree that the mother and child are equally human and should be treated as such.”⁴²

One Key Distinction: Life Versus Health

Note: See the article entitled, “Is Abortion Legal Through All Nine Months for Any Reason?” for a review of the legal importance of distinguishing between life and health threats.

Should we allow abortion for a threat to the *health* of the mother? If so, we are placing the *health* of one human being (the mother) over the *life* of another (the child). This seems clearly wrong. There is no other circumstance in which we would allow someone to kill an innocent person to protect herself from a health threat. We don’t allow those who are exposed to disease to kill those who exposed them, do we? No. When someone’s health is threatened by the existence of another, we attempt to remove the one threatening and treat the one threatened. We can do this in the case of the pregnant woman whose health is affected by her child. We can remove the child (as soon as it is possible for him to live outside the womb) and treat the mother’s condition.

Threats That Are Not Threats

We agree that there are a number of conditions that threaten the pregnant woman’s life. But with many of these threats, we can treat the mother and save the child:

- **Preeclampsia (Toxemia):** Occurs in 1 in approximately every 12 pregnancies (5% - 8%). This is a condition of swelling, elevated blood pressure, and protein in the urine. This condition can be effectively treated either by delivery (after 36 weeks) or by bed rest (prior to 36 weeks). Delivery can also be attempted after 24 weeks with reasonable assurance the fetus will live. In some cases delivery prior to 24 weeks may be necessary although the likelihood of the child’s survival is reduced.
- **Eclampsia (Toxemia with Seizures):** Occurs in 1 in approximately 2000 pregnancies (.05%). This condition is marked by seizures that are caused by pregnancy (as opposed to some other known factor). Treatment is the same as for Preeclampsia, but this condition is more severe, usually requiring delivery either naturally or by C-section.
- **Placenta Previa:** Occurs in 1 in 200 pregnancies (.5%). The placenta covers all or part of the cervix. Although this condition has the potential to be life-threatening, with proper medical management (usually bed rest, but sometimes hospitalization), both mother and child can be protected from harm. In the case of an early placenta previa, sometimes the baby does not survive. There is no moral wrong here; this is simply a specific case of miscarriage, in which no person causes or intends the child’s death. Click on www.babycenter.com/refcap/830.html#0. Helpful information on placenta previa, including drawings, can be found on this page as well as the March of Dimes page linked under *Placental Abruption*, below.
- **Placental Abruption:** Occurs in 1 in 100 pregnancies (1%). The placenta detaches from the uterine wall. If not treated, this can harm both mother and child. See www.marchofdimes.com/professionals/681_1154.asp⁴³

⁴² I do not mean to imply, however, that there is no right answer to the question, “Which interventions are appropriate?” I am simply not weighing in on that question in this article.

⁴³ See Medline Plus (www.nlm.nih.gov/medlineplus/highriskpregnancy.html) for more information about pregnancy risks.



Rebecca's Reflections



113 N. Martinson—Wichita, KS 67203—316.683.6426—rebecca@jfaweb.org

November 2015

“#MindBlown”

Dear Family and Friends,

I met “Brian” at the University of Georgia-Athens. He confidently stated he was pro-life. I mentioned this conversation briefly in my March newsletter earlier this year, *Give Thanks In All Circumstances* because of what Brian said next. He shared that he was pro-life and a Christian, but that he felt he could not “force his beliefs on others.”

This response is not an unusual one. I’ve heard it many times. Hearing it as often as I do can be discouraging, which is why I took the time in March to reflect on the need to give thanks in *all* circumstances, not just the circumstances that seem uplifting and enjoyable.

The conversation with Brian didn’t end there, though. Look at what happened:

Brian: I’m pro-life.

Becca: Brian, what does that mean for you? Do you think abortion should be illegal?

Brian: No, we can’t force our beliefs on others. I’m pro-life because I’m a Christian, but legally enforcing my stance on abortion would push my religion on people who don’t believe the same as me.

Becca: Brian, you mentioned that it is because you are a Christian that you are pro-life. Do your Christian beliefs give you reasons for thinking that abortion is wrong?

Brian: Of course. Human life is sacred. God created those human lives, they are valuable, and we should not kill them.

Becca: I agree with those statements. From what you just said it seems that you may believe the unborn are human beings biologically. Is that true?

Brian: Yeah, absolutely.

Becca: Human beings like you and me?

Brian: Yes.

Becca: When do you believe that the unborn become biological human beings like you and me?

Brian: [He walked up to the *Justice For All Exhibit (2000)* and pointed at a picture of fertilization.] From the very beginning. Conception.

Becca: Okay. Brian, can you explain to me why you think that you would be pushing your religious beliefs on others if you supported laws that would protect unborn human beings from being killed through abortion?

Brian: Well, women have a lot of difficult choices that they have to make in their lives. Choice is an important thing. If we make a law against abortion, we are taking away their right to that choice. That’s like pushing my views on them. They no longer would have the right to choose.



continued on the reverse →

Becca: That's true. The choice to kill their children in utero would no longer be granted to women. I'm curious. Do you think that it is ever right for the government to make a law that takes away a "choice"?

Brian: Uh...no?

Becca: Well, do you agree that the laws that make it illegal to walk onto this campus and kill college students are good laws?

Brian: Of course.

Becca: I agree. However, when enforcing that law, the government is taking away particular choices of other people. What about laws prohibiting beating children in the privacy of your own home? Are those good laws?

Brian: Yes, yes. Those are good laws.

Becca: What if it is just your religion that makes you think that it is wrong to beat children? Should you have the right to impose and force your religious beliefs on me?

Brian: Yes, because those laws protect others from being harmed. That's not just a religious belief. It is a law protecting human rights.

Becca: So we can agree that laws which restrict "choice" in order to protect human lives are good, despite the fact that your support of those laws might be based on religious beliefs? It's possible that our religious beliefs may guide us to the same conclusion as those who don't share those beliefs—the conclusion that all human lives should be protected. That wouldn't be forcing our religion on others, but simply protecting human rights. Can we agree on that?

Brian: Yes, we can.

Becca: If it is important for us to protect human life and if the unborn are just as human and valuable as you and me, shouldn't they also be granted that same protection under the law?

Brian: Wow. Yeah, I guess. I just have always thought that would be imposing my beliefs on others.

Becca: *[I then pointed to pictures in the [JFA Exhibit 2000 Brochure](#) depicting various genocides throughout history.]* Brian, do you think that people who were not victims of the injustices shown in these pictures had an obligation to stand up for those who were being killed?

Brian: Yes.

Becca: I'm going to make a proposal. Brian, not only is it *right* for you to believe that abortion should be illegal because it takes the life of a human being; but actually—as a person who has the knowledge that 1) the unborn is a human being and 2) over a million are killed each year in the country in which you reside—you *have an obligation* to speak up for those humans who are being killed.

(silent pause)

Brian: #MindBlown [hashtag: Mind Blown].

Brian's final response took me by surprise. From the start of our conversation he seemed so confident in his belief that it is wrong to enforce laws telling others what they can and cannot do. Until that final moment in our conversation, the questions I had asked him did not seem to be creating any change of mind or heart. When he looked at me and said, "#MindBlown," his entire demeanor changed. It was as if he had finally been given permission to defend the lives of innocent human beings that he understood were valuable, permission to voice his opinion without shame. Relief and amazement radiated from his eyes.

The culture in which we live is permeated with the belief and mantra that we cannot tell others what to do. Thank you for your support that not only helps us challenge the beliefs of those who do not think the unborn are valuable human beings, but also helps us encourage the students who recognize the unborn are valuable, but do not feel they have the right to share that belief with others.

Defending life together,

Rebecca J. Hasche

Read More on this Topic: www.jfaweb.org/blog/mindblown

Activity 16: “Women Will Die in the Back Alley!”

An Advanced Poll Table Activity

ANALYZE

When people claim that women will die in the back alleys if abortion is made illegal, pro-life advocates typically attempt to show the claim is factually false. This inevitably leads to an unproductive argument over carelessly tossed-around facts of history and unfounded projections into the future. In addition, you may appear callous if you choose to argue this way. (Is your first concern proving you’re right?) Instead, follow these four steps:

1. Build common ground by showing concern for women dying. (“That would be tragic.”)
2. Instead of trying to prove the facts wrong, assume for the sake of argument that women would die.
3. Show that women don’t have only two options (kill a child through legal abortion, or kill a child and themselves through illegal abortion). They can also give birth. Isn’t it demeaning to assume that some women *can’t* follow the law or choose to avoid abortion?
4. Show that a law to protect human beings from assault is legitimate even though some may choose to endanger themselves by breaking it. Our real disagreement is about whether the unborn are human beings.

IMITATE

Pro-Life: What do you think will happen if abortion is made illegal?

Pro-Choice: Women will still do it. They’ll have unsafe abortions in the back alley.

L: If a woman did that, would you agree with me that it’s tragic?

C: Of course. That’s why abortion should be legal.

L: But it sounds like you’re saying there are only two options, that either the child gets killed in a legal abortion clinic, or the child and his mother gets killed in an illegal back alley clinic. Isn’t there a third option?

C: What would that be?

L: Isn’t it possible for the woman not to get an abortion at all? Couldn’t she give birth?

C: Sure, but I still think it should be her choice. She shouldn’t have to be subjected to an unsafe surgery.

L: I think that makes sense, if abortion is simply a surgery like tonsillectomy. We should certainly keep it safe. But is abortion safe for the baby?

C: I don’t think it’s a baby.

L: Do you see, though, that this is where we really disagree? We have different views on whether abortion should be legal because we have different views on what the unborn is. If the unborn is a human being, abortion can never be made safe for him. If the unborn is not a human being, it makes no sense to make abortion illegal, unless it’s really unsafe for the woman having the abortion. Do you agree?

C: Yes, I see your point...

IMPROVISE

Turn to your neighbor and pick *Pro-Life* or *Pro-Choice*. Imagine you are standing at the “Should Abortion Remain Legal” poll. The Pro-Choice Advocate is writing on the YES side of the poll.

Pro-Life: What do you think will happen if abortion is made illegal?

Pro-Choice: Women will die from unsafe abortions.

Pro-Life: ???

Activity 19: “Women Will Die in the Back Alleys!” (Expanded)

Does it justify abortion to point to the consequences of making it illegal?

Stephen Wagner

ANALYZE

Forms of the Argument:

- “Women will die in the back alleys if you make abortion illegal!”
- “Do you want a woman to be forced to use a coat hanger to have an abortion?”
- “Aren’t you pro-life? If the child’s going to die either way, don’t you want at least the mother to live?”

Five Tasks

1. Avoid common pro-life mistakes
2. Show concern for the woman who would be harmed
3. “Trot Out the Toddler” (or use alternate tactics)
4. Prepare a response for the more sophisticated version
5. Clarify the facts (if necessary)

Common Mistake #1: Waste Time

The following responses to the back alley argument don’t change whether abortion is right or wrong (even if they’re true!). Pro-lifers waste time when they try to...

- Show that women didn’t die in droves before Roe.
- Show that in fact women will not die if Roe is repealed.

Don’t spend your time fighting over statistics when you can be clarifying the moral logic of the pro-life position.

Common Mistake #2: Hurt Your Credibility

If you make false statements or assertions you can’t support adequately, why should anyone listen to you? Here are some examples of common tasks pro-lifers attempt (and botch!):

- Claim that coat hangers are never used for abortion
- Attempt to show that there is no back alley (that all doctors will perform abortions in offices)
- Claim women will always be able to use abortifacients to abort (they won’t need coat hangers or surgical abortion)
- Claim that doctors will perform all abortions even if they’re illegal. Yes, Mary Calderone did say in 1960 that 90% of illegal abortions were done by physicians who

“must do a pretty good job if the death rate is as low as it is.”⁶¹ But this is hardly evidence that an abortion will never be performed by someone who is not a doctor.

Although you are right to be skeptical about these points, grant them for the sake of argument (that coat hangers are used, that abortions have been done in unseemly places, that all types of abortion will likely be used in some situations, and that some people that aren’t doctors will do abortions) and show how they’re irrelevant.

Common Mistake #3: Appear Callous by Showing No Concern for Women Who Die

Like the concerns about life of the mother, embryo research, and rape, this is a test to see if you have compassion regarding the circumstances of women. Do you care if women die at the hands of unsanitary abortionists? What if they feel desperate enough to give themselves an abortion with pills or a coat hanger? Whether or not these are likely to be common if abortion is made illegal is irrelevant. If you don’t feel genuine concern for any woman who might be hurt in the process of getting an abortion, and if you don’t communicate that concern, it will be difficult for many pro-choice people to hear your arguments against abortion.

Always preface your response with one of the following statements:

- “Can we agree that it’s tragic for any woman to die from either a legal or an illegal abortion?”
- “I agree with you. We all mourn needless deaths.”
- “I agree with you that if a woman is harmed aborting her own child, that she’s just as valuable as the unborn.”

Clarify the Moral Logic of the Pro-Life Position

- *Ask a simple question:* “Back alley abortion is risky to whom, the mother or the child?”
- *Find common ground:* Compare abortion to tonsillectomy. If abortion is merely a surgery, then women dying from unsafe illegal surgeries is a good reason to make abortion legal. But if abortion kills a human being, it’s odd to keep abortion legal so that it’s safer for a woman to kill a human being. Abortion is intrinsically (always) unsafe for one of the participants, whether it’s legal or illegal.
- *Point out that abortion is always dangerous...for the unborn:* “Do you mean that it is wrong to make surgeries illegal because that limits access to the procedures and increases how risky they are? If the surgery kills an innocent human being, isn’t the surgery always risky?”
- *Trot Out a Toddler (or someone else):* “Currently, it’s very dangerous to open fire on an elementary school playground. Should we make it legal to do this so that it’s safer?”

Deal with the More Sophisticated Version

Much of the time, the back alley concern masks the fact that an abortion advocate is assuming the unborn is not a human being. In other words, she is saying, “It’s wrong to make a surgery

⁶¹ Mary Calderone, “Illegal Abortion as a Public Health Problem,” American Journal of Public Health, July 1960, p. 949

more dangerous if it is innocuous.” We can agree in principle, then show that the unborn is a human being and the surgery is not innocuous at all.

Once we’ve made our case, the abortion advocate will likely shift to a more sophisticated argument:

“Even if abortion kills a human being, isn’t it better for fewer people to die (at least we can save the mother)? It is better that at least the mother live, than that she and her fetus should die in the back alley. Isn’t it worse for two to die than one?”

This argument assumes that the mother has *no other choice* but to kill the child. But, of course, she does have alternatives. As I like to say, she has a third option. It’s not, “Either she kills the child by legal abortion or she kills herself and her child by illegal abortion.” The third option is that she can refrain from killing anyone!

To expose the problem, take the roof off (show the argument is false by showing what it entails) with other examples where the killer can choose not to kill. Any *Trot Out the Toddler* example will work, but I prefer these two clear cases:

- *Elementary School Children:* What about the bereaved father who opens fire on an elementary school playground and is killed by the swat team before he kills any children? Wouldn’t it be better that at least the father live?
- *Victims of Terrorism:* Would we say the same thing about terrorism? I mean, even if terrorism kills human beings, isn’t it better to make terrorism legal so that the terrorist doesn’t have to blow himself up? Wouldn’t it be better for at least the terrorist to live?

Sound Bites

I use these sound bites as memory tools to structure my thinking during dialogue on campus.

- “Because one person is harmed in the process of killing someone else, do you think the state should make it safe and legal to do so?” – Frank Beckwith⁶²
- “Do you agree with pro-abortion philosopher Mary Anne Warren, who wrote this in 1973: ‘*The fact that restricting access to abortion has tragic side effects does not, in itself, show that the restrictions are unjustified, since murder is wrong regardless of the consequences of forbidding it.*’”⁶³
- “Why should the law be faulted for making it more risky to kill an innocent human being?” – Scott Klusendorf⁶⁴
- “Should we make bank robbery legal so that it’s safer for the felon?” – Scott Klusendorf⁶⁵

⁶² Francis J. Beckwith, *Politically Correct Death* (Grand Rapids: Baker Books, 1998), p. 55

⁶³ Mary Anne Warren, “On the Moral and Legal Status of Abortion” in Joel Feinberg, et al, *The Problem of Abortion* (Belmont, CA: Wadsworth, 1984) p. 103 (originally published in *The Monist* in 1973)

⁶⁴ Scott Klusendorf, *Pro-Life 101* (Signal Hill, CA: Stand to Reason Press 2002), p. 8 (exact quotes altered slightly)

⁶⁵ Ibid.

IMITATE

Pro-Choice: Don't you care if women die in the back alleys? Abortion must be kept legal.

Pro-Life: Of course I care about those women. I don't want them to die anymore than you do.

C: Then why do you want to make abortion illegal?

L: I agree that some surgeries, like tonsillectomies, should be kept legal so that they are safer for the patient. But doesn't abortion involve two patients rather than one?

C: No. It's just the woman.

L: Let me see if I understand your view. Abortion and tonsillectomy are essentially the same kind of surgery because tonsillectomy removes a mass of tissue and abortion removes a mass of tissue. Both tissue masses are part of the patient's body. Is that right?

C: Yes.

L: Isn't there a big difference, though, between a tonsil and the unborn?

C: Sure, the unborn has the potential to become a child. But it's a tissue mass at the beginning.

L: Is the DNA of the tonsil identical to the other cells in the patient's body?

C: Yes. And the unborn's DNA is not. I've heard this one before. The unborn has its own genetic fingerprint, distinct from the mother. And it has that DNA fingerprint from conception.

L: I couldn't have said it better myself!

C: But it's still inside the mother's body though. Don't you care about women who die from unsafe abortions?

L: It think it's tragic if a woman dies. Do you see, though, how we have to answer the question of what the unborn is before we can talk about safety? If the unborn is a part of someone's body like a tonsil, then obviously abortion should not be outlawed, and dangerous abortion would be a primary concern, because it would be a danger to one person, the mother. If the unborn is a human being though, like a toddler, wouldn't abortion be unsafe for two human beings? Can't we protect both human beings?

C: I just don't think the unborn is a human being.

[At this point, we are back to discussing the question, "What is the unborn?" That's progress!]