



Abortion and assisted suicide – nothing in common?

1 Introduction

Abortion and assisted suicide are not commonly defended in the same breath. Ideologically speaking, though, ‘choice’ underpins them both. So it is unusual to see a pro-choicer defending one and condemning the other.

Kevin Yuill¹ argues that abortion supporters should not necessarily back assisted suicide. He concludes by saying that “those who are really ‘pro-life’ should support abortion rights and oppose the campaign for assisted suicide”.

2 What the author said

Yuill fails to see any link between the practices of abortion and assisted suicide. In the pro-choice tradition, he portrays pro-lifers as hysterical when they ask the question “who will be next?”.

His first argument is that abortion addresses a real demand; that without abortion, “huge numbers of women would be saddled with children they did not want”. He compares this to The Netherlands where he says only 4000 patients per year receive a lethal injection.

He accuses anti-abortion and pro-assisted suicide groups of redefining human life, and thus reducing its worth. Those pushing for assisted suicide do this by referring to a quality of life standard, below which life is not worth living. Those opposed to abortion, he says, reduce human life to its lowest common biological denominator by likening ‘potential’ lives to actual lives.

But the central confusion in his line of thinking is that euthanasia is about death while abortion is about life, “valuing the life of a woman over the potential life of a fetus”.

3 Ethical analysis

Huill is mistaken on many counts. He fails to recognise the common ground between the two; that is, an emphasis on choice, and a false belief that a death will solve a problem.

¹ Yuill, Kevin “Why those who favour abortion rights should oppose the legalisation of assisted suicide”, *Pro-Choice Forum* 31/8/01 <http://www.prochoiceforum.org.uk/comm79.asp>



3.1 High demand for abortion

Huill erroneously cites the Dutch euthanasia victims as 4000 per year, not a ‘torrent of death’ as far as he is concerned. One might ask how many people need to die before a tragedy has occurred. In any case, intentionally bringing about the death of patients in The Netherlands occurs more often than most people would be comfortable with.²

Supply and demand cannot usefully inform moral arguments. Huill speaks of 150,000 abortions per year in the UK, conveniently forgetting that for each abortion, a woman paid and someone else profited. Abortion is big business.

Huill’s crude expression, that without abortion so many women would be “saddled with children they did not want”, is typical of the pro-choice attitude towards rising abortion statistics. Enthusiasm for abortion rights often results in ignoring the story behind each abortion. Why are some young girls sexually active with men who won’t support them? Why would young women see a baby as the antithesis of all their aspirations? What simple support measures could help this poor family to afford another child?

Both abortion and euthanasia generate their own demand; that is, their availability creates, respectively, a duty to abort and a duty to die. Very old people, sick people, and the disabled may have to justify their decisions not to die if euthanasia is legalised under the belief that it is good for such people. Young single women, career girls and the poor may have to justify their decision to keep their babies if abortion is legalised under the belief that having a baby would be a disaster for them.

3.2 Devaluing human life

Huill is correct to criticise the ‘quality of life’ paradigm as devaluing humanity. But he makes the common pro-choice error, against all biological evidence, of assuming that unborn life is only ‘potential’. It is this head-in-the-sand idea, masquerading as a philosophical argument, to which many pro-choicers desperately cling.

3.3 Abortion – pro-life?

It is a deception, perhaps a strategic one, to call abortion “pro-life”. Clearly, whether or not a woman chooses abortion, she is still alive. But choice ideology bolsters the emotional turmoil involved an unwanted pregnancy; the woman feels as if it is the end of the world, and pro-choice ideology agrees, offering abortion instead of hope.

In fact hopelessness features in both the abortion and the assisted suicide decisions. Both choose death over life, literally. Rather than enshrining hopelessness and death

² In 1995, euthanasia was performed in 3600 cases. In 2000 cases pain medication was increased with the explicit intention of ending the patient’s life, with no explicit request from the patient in 25% of these cases. In at least 14,000 cases treatment was withdrawn with the explicit intention of ending the patient’s life. Jochemsen H. “Update: The Legalization of Euthanasia in The Netherlands” *Ethics & Medicine* 17 (2001): 7-12



in law, pursuit of the well-being and good of the pregnant woman and the suffering patient requires us to offer hope.

3.4 “Who will be next?”

Huill scoffs at a pro-lifer warning that abortion and euthanasia threaten everyone. Pro-choice activists are necessarily self-assured that *their* lives will not be taken without their consent.

But ‘choice’, coupled with slippery definitions of ‘personhood’, unavoidably pushes the boundaries of who is eligible for death. It is not only those who are very close to death, or those who have not yet been born, who might be killed without their consent.

In America, attempts to ban partial-birth abortion have been met with fiery opposition from pro-choicers who view such moves as a threat to choice. In many US states, an infant surviving an abortion may still be killed, being afforded no legal protection. In China, newborn girls are killed or left to die, sacrificed to the population control movement. In The Netherlands, 900 patients in 1999 were killed without their consent simply because the doctor thought they were suffering.³ And the Dutch health minister has expressed support for euthanasia for those who are tired of life.

The question “who will be next?” is not an expression of fear for one’s own life. It articulates concern for every member of the human race, both now and in the future, threatened by the ideology of ‘choice’.

³ Jochemsen H. “Update: The Legalization of Euthanasia in The Netherlands” *Ethics & Medicine* 17 (2001): 7-12