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**Abortion: Helping People in Trouble**

When I was researching for today's service, I talked to my old colleague, Dr. Jack Leversee who is a retired Family Practice Professor at the U. of W. He taught the family practice residents and the Ob-Gyn residents how to do first trimester abortions. He asked me: "How did it come to be that you were asked to talk about abortion. Is abortion a topic for religious discussion?" So I asked Al G. who was really the one who talked me into speaking today. How is abortion a proper topic for a Sunday's religious service? And he asked back: "Isn't it about helping people?"

Yes, Al, it is about helping people. About helping people in trouble. As an issue of public health it's a very simple matter. Our abortion policies over the last 30 years have been a resounding success in improving women's reproductive health. But it has remained an issue of intense religious and political debate particularly from the Fundamentalist Religious Right and believers of Catholic Ideology. But I can tell you that whatever a person's belief system, those who seek abortion services represent a cross section of ethnicity, religion and political belief. We will have an equal proportion of Catholics and Protestants, True Believers and Agnostics, Liberals and Conservatives and Rich and Poor seeking help. Our common humanity binds us together in this regard.

We might site the Golden Rule to justify it as a religious topic: Do unto others, as you would have others do unto you. Or our Unitarian-Universalist principle, which urges us to honor the inherent worth of every person and to strive for justice, equity and compassion in human relations.

A bioethicist has said: "The three leading principles of bioethics -- respect for persons, beneficence and justice -- together provide an ethical mandate for guaranteeing to women throughout the world a legal right to safe abortion."

When people have unintended pregnancies it often spells trouble. For many it is a problem that is easily dealt with. There is magnanimity of heart. Dismay quickly turns to joy. A child is welcomed. No problem.

For others, unable to bond to the pregnancy, the trouble can be huge. Pregnant with someone other than spouse? Unmarried? Pregnant through rape or incest? Not wanting to have children? Pregnant at age 45 and desperately wanting no more children? A girl of 13? Pregnant with a deformed fetus? In the midst of ones education-high school- college? Absent competent, legal abortion services, women may resort to desperate measures to be rid of a pregnancy -- to the point of damaging their health or risking their life.

Attempts at self-induced abortion almost always end badly. Procedures done by untrained people have a very high complication rate. When abortion was illegal the hospital wards were crowded with large numbers of women suffering abortion complications. It is estimated that in the U.S. 10,000 women a year died from complications of inexpert abortions when it was illegal.

Before abortion was legal it often happened that a physician in the community would step up to perform clandestine abortions. I can remember as a young university student in the late 40s the name of an abortion provider in Seattle. Mamie McClaferty. She was a trained Ob-Gyn specialist. She could do an excellent abortion. The charge was $600.00. In those days it was a lot of money. She had an office in the Schaeffer Building downtown Seattle and I wouldn't doubt that she was able to buy security for her practice. And of course there were others. They were able to fulfill but a small part of the need.

Our views on the morality of abortion were challenged in the mid sixties by two tragic events. One was the Thalidomide scandal. Thalidomide was a drug widely used in Europe to give relief for morning sickness. It was not approved for use in the U. S. In 1962 an American woman, Sherri Finkbine, a mother of four, discovered that the antinauseant that her husband had brought back from Europe for her was Thalidomide, which by now had been found to cause badly deformed children. Infants were born with rudimentary arms and with shortened thighs and twisted legs. Others were missing ears or had paralyzed faces. She was unable to obtain a legal abortion in this country and eventually had an abortion performed in Sweden where it was legal. Her fetus was indeed badly deformed. The case caused much publicity.

Between 1962 and 1965 fifteen thousand babies in the US were born with severe birth defects caused by acquiring rubella, or German measles, early in pregnancy. These defects included blindness, deafness and severe mental retardation. Physicians began to react to the restrictive abortion laws that allowed no relief from these tragedies. The medical profession was becoming mobilized in favor of easing the abortion restrictions upon the realization that on many levels abortion might be less tragic than childbirth.

Gloria Steinem, the co-founder of Ms magazine, had an abortion overseas in the fifties. She had attempted the inducement of a miscarriage through reckless horseback riding. She had even considered suicide before finding relief.

Many years later she was covering an early feminist meeting as a reporter. As women began talking openly about their frightening and humiliating experiences with abortion, she had a transformative experience. She says: "Suddenly, I was no longer learning intellectually what was wrong. I knew. It was the shame of having to be silent. I had had an abortion when I was newly out of college, and had told no one. But if one in three, or one in four, adult women undergo this experience, why should each of us be made to feel criminal and alone? How much power would we ever have if we had no power over the fate of our own bodies?" And indeed, women were empowered by publicly telling their stories.

About this time the activist clergy around the country, including Unitarian Universalists, banded together to form abortion referral services. In 1967 a group of 21 clergy made a stunning announcement, reported on the front page of the New York Times, offering to refer women to doctors they knew to be performing safe and legitimate abortions. Their organization was known as the Clergy Consultation Service on Abortion and soon spread across the country with thousands of the clergy participating. They would refer women to doctors in Puerto Rico, Great Britain, Japan, and Sweden and even within the United States. In Michigan alone, a hundred members of the clergy, including a few Catholic priests, gave such referrals.

In the mid sixties, Planned Parenthood of Seattle-King County seemed to be in the travel business. Abortion in Japan was legal. The agency had arrangements with hospitals and physicians in Japan so that an abortion could be obtained for about $1200.00, which included plane fare. Because of the distances and the amount of money involved, this was a service for a very few.

At this time there was a general push to provide comprehensive sex education programs in the public schools. I was asked to sit on a sex education committee for the Renton School District as the MD representative. We were to set up a Kindergarten through Twelfth grade comprehensive sex education program. I was able to contribute but it was a learning experience for me as well. After all, I was a father of five daughters, and felt a responsibility to help put a proper sex Ed program in their schools.

When I was a kid the public school sex education was minimal at best, usually consisting of a one-hour session when you were a sophomore in high school. When I became a sophomore, the boys in my class were asked to attend this session with our football coach. He was clearly uncomfortable and he hemmed and hawed a bit before dismissing the class saying: "Boys, as far as I am concerned, experience is the only teacher. Class dismissed." And that was it. Needless to say that were a lot of confused boys with a lot of unanswered questions. The girls got a short talk about menstruation.

How refreshing it is to know that our denomination, Unitarian-Universalists, along with the United Church of Christ, has available a marvelous sex education program for all ages-even we adults. The curriculum is called Our Whole Lives, or OWL. I happen to have copies of it. One of the requirements for this program is that both a trained male and a trained female do the teaching. It is very popular.

I have long been a supporter of Planned Parenthood of Western Washington and have donated many hours as a volunteer in Planned Parenthood clinics. Last year they went through a visioning process and arrived at the following goals:

1. Ensure that sexuality is understood as an essential, lifelong aspect of being human and that it is celebrated with respect, openness and mutuality.
2. Ensure access to reproductive and sexual health care for all.
3. Be a significant catalyst for the development and universal dissemination of new reproductive technologies.
4. Be an authoritative voice on bioethical standards related to reproductive health and sexuality.
5. Build a large citizen activist base to further these goals.

This is the perfect time for setting the future course for these profound and deeply personal issues related to human sexuality and reproduction.

Late in the sixties the legislatures of both New York and Colorado passed liberal abortion laws. These states were swamped with abortion requests with few facilities and little manpower (I should say person power) available to satisfy the need.

Down in Renton where I had a busy general practice there was consternation over an upstart Doctor named Franz Koome. He was absolutely dedicated to women's abortion rights. I was on the executive committee of the old Renton Hospital and reviewing charts for our quality assurance program when our pathologist shocked us by saying. "I've reviewed four of Dr Koome's D & C's, and I have to tell you what he's doing in our hospital. He's doing abortions!"

At this time that he was also setting up an outpatient clinic to perform these procedures. He was breaking the law. Finally, he wrote a letter to the then Governor Dan Evans, with copies to the local press, to announce that he was continuing to provide abortions in his clinic in spite of what the state law said. He was charging $50.00 per procedure.

Steps were set in motion to have Dr Koome thrown off the staff. I remember being the only doctor on the staff to stand up for Dr. Koome. I felt that changes were in the wind.

There was a great deal of energy to get a liberal abortion law on the ballot in this state. I am proud to say that a hotbed of the activity was to be found at the Eastshore Unitarian church. Members like the Reverend Ralph Mero and Doctor Samuel Goldenberg were tireless in their efforts in this regard. Feminist organizations such as NOW were active in the push for change. My wife, Peggy, was president of the Renton NOW Chapter and can remember lobbying in Olympia. In November of 1971, the people of this state passed a liberal abortion law. This was the first time that a liberal abortion law had been passed by a vote of the people.

There were many restrictions in that first law. Spousal consent was required. The upper limit was 15 weeks. Parental consent was required for minors. There were residency requirements. But abortions were legal and that changed the whole complexion of women's health care.

Dr Koome was saved by the bell. His case was moot. By this time he had set up a thriving abortion clinic across from Renton City Hall.

It was a short 14 months later on January 22, 1973, that the Supreme Court of the United States handed down their decision in the Case of Roe vs. Wade. It further liberalized the law. It threw out the requirements for spousal consent, parental consent for minors, and residency requirements. It set up a trimester system that said that in the first trimester the state could impose no restrictions, in the second trimester, the state could have rules for ensuring the mothers health but not to deny or delay service and that in the 3rd trimester abortions could be prohibited except where the mothers life was stake.

Sarah Weddington had argued the case before the Supreme Court. She was an untried lawyer and only in her twenties. But she was very courageous and had a passion for liberal politics.

She and her husband had traveled to Tijuana, Mexico, for an abortion, early in their relationship. Fortunately she had been referred to a qualified doctor and the procedure had no ill effects on her health. But the humiliation of having to go out of her country to get this procedure done and her empathy for the women who did not survive the procedure without grave harm to their health was enough to make her passionate about the issue. On January 22nd, 1973 she won her case.

What was an expensive, often brutal and dangerous black market for abortion services, sought by up to one million women each year, would be transformed by Roe into a widely available, legal, safe and simple medical procedure.

In the seventies I had a busy general practice. But my interest turned toward abortion because of the need. I started doing procedures under local anesthesia during my days off. Soon I was scheduling abortion procedures along with seeing regular patients. I saw nothing incongruous and in doing abortions and delivering babies in the same period as part of a family practice. By 1980 I was doing abortions full time and gave up my general practice. I had become an expert in second trimester abortions. Our clinic pioneered second trimester abortion techniques.

In the early 80s, I served on the board of the National Abortion Federation. It was a coalition of those dedicated to providing quality abortion care. There were Medical School Department heads, OB-Gyn specialists, general practitioners, Feminist Women's Health Care Providers, Planned Parenthood Clinic Personnel and representatives from various governmental agencies. We assembled under the banner of wanting to provide expert, caring, non-judgmental abortion service, to share our skills and experiences and organize risk management seminars.

By the 80's, abortion had been under intense study by governmental agencies including the Centers for Disease Control. Every aspect of it, every type of complication was studied. Prolific reports from the Centers for Disease Control found it to be an extremely safe procedure, both physically and psychologically, even in the late second trimester.

Outpatient abortion clinics revolutionized how surgical care was delivered. Gone was the dependence on the hospital where patients might be psychologically traumatized in hostile settings. Now the patient was well counseled and treated with respect. The patient had to be in charge of her destiny. This was not a procedure for the husband or the parents or the boyfriend. The patient was helped to arrive at her decision by wise and compassionate counselors. Repeat abortions were not stigmatized but realized to be a problem of the vagaries of birth control methods or perhaps lack of proper counseling by the previous provider.

As I started to become heavily involved in abortion care, I felt fortunate that my children were grown and out of the house. I did not have to worry about them being harassed or for their safety. I was a part of this Renton community. If my house had been picketed my neighbors would have supported me. But I must confess to having apprehension at night when I would answer a knock at the door. Was there someone out there who would blow my brains out with a shotgun? I would grit my teeth and try to feel brave. After I retired abortion providers started wearing bulletproof vests -- for good reason.

Let me tell you about an incident that occurred in my practice. A local fireman was zealously anti-choice. Our clinic was in a complex off the public sidewalk and considered private property. But there he was in front of my clinic door accosting patients as they came to my office, giving unasked for advice, passing out anti-abortion literature and waving a two inch pink plastic fetus at my patients as they approached my door. I was angry. I called the police department for help in getting him off my property. After a short while I couldn't restrain myself and went out to the sidewalk, and confronted this man. I took the literature out of his hand and threw it in the gutter and ordered him off the property. The police car was right there. The Officer rolled up to the scene and got out of his vehicle.

Much to my amazement, he ordered me to put my hands on the hood of the squad car and spread my legs and he patted me down for weapons and arrested me. My attorney soon arrived on the scene and took care of the details, but I was charged with assault. The Fireman left the scene. I was completely bewildered and frustrated.

The jury trial took two days and was a propaganda circus for the anti-choice forces. The office was closed. My staff was in the courtroom. So was my wife. Even my mother. When it was over it took the jury but 20 minutes of deliberation to arrive at a not guilty verdict. I can't tell you what relief it was. Even when you feel you are innocent of wrongdoing, it is humbling to be put in this vulnerable position. I shook the hand of each juror with warmth and appreciation and felt I received the same in return. I realized that all politics are indeed local. It was because the city attorney was anti-abortion that it was I who was made the criminal and not the fireman.

Twelve days ago we celebrated the 30th anniversary of Roe Vs Wade. There are reasons for great concern about this fundamental right. The original 7-2 majority for Roe vs. Wade has dwindled to but four staunch supporters. With the addition of a new anti-choice justice, the reversal of Roe Vs Wade is a distinct possibility.

Our president is staunchly against abortion. His appointments to the various lifetime federal judgeships have a common litmus test requirement. His nominees are anti-choice. It is from this pool that the future Supreme Court Justices will probably be selected.

President Bush has proclaimed a National Sanctity of Human Life Day. He calls abortion evil. He likens it to terrorism. He vows to preserve and protect life from the moment of conception.

On the international level he has frozen funding for the United Nations Family Planning Fund. This fund provides contraceptive, gynecological and HIV/AIDS prevention services to 142 countries. Regan did the same thing in 1980. Consider this: Worldwide it is estimated that 500 women a day die of abortion complications for want comprehensive family planning and modern abortion care.

I'd like to conclude with a story about my mother. She was in a nursing home near the end of her life and I was soon to retire. "Baird," she said. "You know. I had an abortion. You were 10 years old."

I was completely surprised. "When had this happened? Who did the procedure? What was it like?" She had twice been in a TB Sanitarium and at one time was at death's door. She was home when this occurred but still getting air injected into her pleural cavity to put the infected lung to rest.

"Well I just told my TB doctor that I was pregnant. He knew how to perform an abortion and we did it in one of his exam rooms."

She had waited many years to tell this and I was deeply touched that she would confide in me.

Thank you, mom, for sharing that with your loving son.

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