

# ABORTION & RAPE

RAPE is often put forth as an argument in favor of abortion mainly because of its **emotional impact**. BUT what are the **facts** concerning rape and pregnancy?

## PREGNANCY RESULTING FROM ASSAULT OR FORCIBLE RAPE IS EXTREMELY RARE

Statistics used by those promoting abortion are most often inflated, contradictory and unreliable. The probability of pregnancy from rape must be calculated from information provided by reports from medical professionals, law enforcement professionals and some limited scientific studies. Together what these clearly confirm is the rarity of pregnancy following forcible rape. (1, 2, 3) For example, at a meeting of obstetricians at a major midwest hospital, a poll taken of the doctors present (who had delivered over 19,000 babies) revealed that not one had delivered a bona fide forcible rape pregnancy. (4)

## WHY IS PREGNANCY FOLLOWING FORCIBLE RAPE SO RARE?

Among factors that contribute to the low incidence are the following: The vast majority of women are not fertile at the time of the attack (i.e. are incapable of conceiving a child) since women might conceive a child only a few days out of the month; there is evidence that severe emotional trauma, such as that experienced from a forcible rape, may prevent ovulation. (Emotional trauma can affect body chemistry. For example, if you're suddenly scared, you get a strange feeling in the pit of your stomach - adrenalin is released in your system. Fear releases hormones in your body. If a woman is forcibly attacked, hormones are released and can set up a chemical barrier to her becoming pregnant.) (5); a tubal spasm might occur; a study has shown that 58% of assaultants were "sexually dysfunctional" at the time of the attack. (6)

## WHAT IS THE DIFFERENCE BETWEEN FORCIBLE RAPE & STATUTORY RAPE?

Forcible rape occurs when a woman is actually attacked and forced to submit to intercourse against her will. Statutory rape occurs when a woman consents to intercourse but is under the legal "age of consent" (usually 16 to 18 years of age, depending upon the particular state). Some cases that receive newspaper publicity or are used in attempting to compile statistics are actually statutory rape rather than forcible rape cases.

There is also the possibility that a woman, facing condemnation by a judgmental society, may seek to explain her pregnancy by saying, "I was raped three months ago." Prior to legal abortion on demand, those states which passed laws allowing abortion for rape saw a substantial increase in the number of alleged "rapes." (8, 9)

## ANY WOMAN WHO IS ATTACKED SHOULD GO TO A DOCTOR OR HOSPITAL IMMEDIATELY

Immediate medical treatment is directed to establishing the fact that rape has occurred, obtaining evidence that can be used if the rapist is apprehended, preventing venereal disease, repairing injuries, alleviating emotional shock and preventing conception. Conception (fertilization) does not take place immediately after intercourse.

Thus, WE DO NOT NEED ABORTION ON DEMAND, which has STRIPPED THE PROTECTION OF THE LAW FROM MILLIONS OF INNOCENT UNBORN CHILDREN to AID THE VICTIM OF RAPE. We do need to EDUCATE WOMEN TO IMMEDIATELY SEEK MEDICAL ATTENTION if they are raped and see that COMPASSIONATE, COMPETENT AID IS AVAILABLE.

## BUT, WHAT IF A GIRL DID BECOME PREGNANT?

Even if there is one case of one woman who becomes pregnant as a result of rape, we must be concerned for her welfare - and for the life of the innocent child. The trauma of the rape has already occurred, and willfully adding a second tragedy cannot relieve the pain of the first. Rather than having to live with the memory of destroying her developing baby, (10) a woman, given care and support, may ultimately be more at peace remembering that, in spite of becoming pregnant against her will, she nevertheless gave her child life and a home (possibly through adoption).

In her beautiful autobiography, *His Eye Is On The Sparrow*, Ethel Waters reveals that she was conceived following the rape of her 13 year-old mother at a time when treatment and care were unavailable. Ethel Waters' value to society was not diminished by the circumstances surrounding her birth. The innocent child conceived in rape or incest is not less human than the baby conceived within marriage. Only the circumstances of conception are different, not his/her intrinsic nature.

CONCERN BY SOCIETY FOR THE LIFE AND FUTURE OF BOTH HER AND HER CHILD, AND POSITIVE SUPPORT AND ASSISTANCE WITH WHATEVER PROBLEMS SHE MAY ENCOUNTER, IS THE MOST HUMANE SOLUTION FOR BOTH THE MOTHER AND CHILD.

KILLING THE CHILD WHO RESULTS FROM RAPE DOES NOT HELP TO APPREHEND AND/OR PUNISH THE RAPIST. IT DOES NOT HEAL THE WOUNDS OR SOOTHE THE ANGUISH OF THE RAPE VICTIM. IT DOES NOT PREVENT SUCH CRIMES FROM OCCURRING AGAIN. IT ONLY PERPETRATES A SECOND VIOLENCE ON A SECOND INNOCENT VICTIM.

## WHAT ABOUT ALLOWING ABORTION IN CASES OF INCEST?

Incest involves a complex family situation that will not be cured by abortion. (11) All family members need treatment and compassionate help from society to prevent the crime from recurring. Incest usually does not come to the attention of authorities until the victim, usually young, is well along in her pregnancy, making abortion especially dangerous for her health and future reproductive capability. (12) A study done at Toronto General Hospital on a group of very young patients found that one out of three suffered complications following abortions which might jeopardize their ability to ever have children again. Abortion can ultimately be more traumatic for a girl than competent supportive and loving care to bring her through her pregnancy. With proper medical care, girls old enough to conceive a child can be brought through pregnancy very successfully. (13)

THE MORE EFFECTIVE RESPONSE TO THESE SITUATIONS IS TO DEAL WITH THE ENVIRONMENT UNDER WHICH THE GIRL IS BEING VICTIMIZED AND PROVIDE HER WITH THE MEDICAL AND PSYCHOLOGICAL HELP SHE SO DESPERATELY NEEDS. ABORTING THE GIRL AND SENDING HER BACK TO THE FAMILY SITUATION THAT CAUSED THE PROBLEM IS NO SOLUTION AND OFTEN SERVES TO COMPLICATE THE PROBLEM BY PRODUCING ADDITIONAL GUILT FEELINGS WHICH THE VICTIM CANNOT HANDLE.

- (1) Gerster, Carolyn F., M.D. "Why Not Keep Legalized Abortion for Rape & Incest?" prepared at request of a member of Congress and published in the **National Right to Life News**, November, 1975.
- (2) Mecklenburg, Fred, M.D. "indications for Induced Abortion." **ABORTION AND SOCIAL JUSTICE**, pp. 48-49.
- (3) Gardner, A.B., **THE PERSONAL DILEMMA**.
- (4) Willke, J.D., M.D. **HANDBOOK ON ABORTION**. p. 40.
- (5) Mecklenburg, op. cit.
- (6) **Sexual Medicine Today**, January 1978, p. 16.
- (7) "Sexual Assault: Hennepin County's Changing Attitudes and Minnesota Legislation." **Hennepin Lawyer**, Nov.-Dec. 1975.
- (8) Mecklenburg, op. cit.
- (9) "Virginia Abortions Increase in First Seven Months of 1970." **Washington Post**, September 25, 1970.
- (10) Study done at the University of British Columbia's Department of Psychiatry reported in **Psychiatric News**, March 3, 1978.
- (11) Kennedy, M.; Cormier, B.M. "Father-Daughter Incest - Treatment of the Family." **Laval Medical**, 40:946-950, November 1969.
- (12) "Deaths and Near Deaths with Legal Abortions." M. Bulfin, M.D., Meeting of the American College of Ob/Gyn, Florida, 1975.
- (13) J. Durger, Roosevelt Hospital, New York. **Family Practice News**. May 1, 1978.



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