

Abortion: history of Adventist guidelines

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Abortion: history of Adventist guidelines

[George B. Gainer](#)

George B. Gainer is the chaplain of Columbia Union College, Takoma Park, Maryland. This article is a condensed version of a paper presented at the conference on abortion held by Loma Linda University's Center for Christian Bioethics in November 1988.

My questions about abortion and the Seventh-day Adventist Church began on a cold day in January 1985. A "chance" encounter with a pastor while searching for parking at the Smithsonian Institute in Washington, D.C., had led to an invitation to worship with his church some time.

The following Sunday I dropped in to hear him preach. Arriving late, I sat, unnoticed, in the back. When the pastor stood to preach, he announced to the congregation that it was Sanctity of Life Sunday. After spending some time on the biblical basis for the sanctity of life position, he told the following story: "During my wife's pregnancy with our son Seth, we decided to look for a Christian doctor who shared our sanctity of life convictions. So we drove to Takoma Park, Maryland, to the office of Dr. _____, a Seventh-day Adventist. Following the test and examination that confirmed that she was pregnant, the very first question she was asked was 'Do you want this baby, or do you want an abortion?' We looked at each other in shock and disbelief. We then turned and said, 'We are sorry. We must be in the wrong place.' We got up and left."¹

At the close of his sermon this pastor invited questions and comments from the congregation. One lady asked, "Are you sure that what you said about the Seventh-day Adventists is true? I always thought that they were Bible-believing Christians."

He answered, "I am sorry to tell you that the Seventh-day Adventists are aborting hundreds of babies in their hospitals."²

While they sang a hymn I went out . . . unseen but not unshaken. What was the truth regarding Adventism and abortion? I remembered seeing an editorial in the *Adventist Review* that stated, "The Adventist Church has no official position on abortion."³ But what did that mean? Did it mean that the church saw no moral implications surrounding the practice of abortion? Did it really not incline in either direction? What did the lack of an official position mean in the actual day-to-day practice of the hospitals of the Adventist Health System? A search for answers to these questions led me to survey the history of our church's position on abortion.

Early abortion views

The June 25, 1867, *Advent Review and Sabbath Herald* contained what apparently was the first statement on abortion to appear in Adventist literature. In an article titled "Fashionable Murder," the author, John Todd, praised the work of the Physicians' Crusade—a late nineteenth-century movement against abortion, which had been widely practiced in America during the early part of that century.

Speaking of abortion, Todd declared, "The willful killing of a human being at any stage of its existence is murder."⁴

The abortion question was again addressed in the November 30, 1869, issue of the *Advent Review and Sabbath Herald*. Under the title "A Few Words Concerning a Great Sin" the *Review* said, "One of the most shocking and yet one of the most prevalent sins of this generation is the murder of unborn infants. Let those who think this a small sin read [Psalm 139:16](#). They will see that even the unborn child is written in God's book. And they may be well assured that God will not pass unnoticed the murder of such children."⁵

A Solemn Appeal contained the Adventist press's next reference to abortion. James White edited this book in 1870, while he was president of the General Conference. White excerpted a statement from Dr. E. P. Miller's *Exhausted Vitality* for inclusion in the book. The quotation he used reflects the strong sentiments of those physicians involved in the crusade against abortion. Miller castigated abortion as a "nefarious business," a "worse than devilish practice," and a "terrible sin." He went on to say, "Many a woman determines that she will not become a mother, and subjects herself to the vilest treatment, committing the basest crime to carry out her purpose. And many a man, who has 'as many children as he can support,' instead of restraining his passions, aids in the destruction of the babes he has begotten.

"The sin lies at the door of both parents in equal measure."⁶

Kellogg speaks out

What about the "right arm" of the church, the medical work? In his book *Man, the Masterpiece*, published in 1894, Dr. John Harvey Kellogg argued against the idea that abortion was permissible before quickening. "From the very moment of conception, those processes have been in operation which result in the production of a fully developed human being from a mere jelly drop, a minute cell. As soon as this development begins, a new human being has come into existence—in embryo, it is true, but possessed of its own individuality, with its own future. . . . From this moment, it acquires the right to life, a right so sacred that in every land to violate it is to incur the penalty of death. . . . None but God knows the full extent of this most heinous crime."⁷

The statements quoted above verify the little-known fact that historic Adventism was not silent regarding the abortion question. While the church did not directly involve itself in the 40-year battle to legislate anti-abortion statutes in the United States, the evidence shows where these Adventist leaders stood on the issues that crusade raised.

Ellen G. White did not directly address the issue of abortion, but she did make a number of strong statements regarding the sanctity of human life. For example, she wrote: "Life is mysterious and sacred. It is the manifestation of God Himself, the source of all life. . . ."

"God looks into the tiny seed that He Himself has formed, and sees wrapped within it the beautiful flower, the shrub, or the lofty, wide-spreading tree. So does He see the possibilities in every human being."⁸

And in another place she spoke even more directly to the point of protecting innocent human life when she wrote, "Human life, which God alone could give, must be sacredly guarded."⁹

So our Adventist heritage includes both statements that explicitly espouse the sanctity of human life and statements that explicitly condemn abortion. Nineteenth-century Adventism stood in harmony with the previous 18 centuries of Christian thought.

By the 1890s the influence of the Physicians' Crusade had led to the legislation of anti-abortion laws in the United States. This resulted in a cooling of public debate over abortion and began what has been called the "century of silence" on the abortion question. ¹⁰ In reality, the "silence" lasted for approximately 70 years. Christian thinking on abortion remained consistent during this period.

Not only was this opposition to abortion to be found in the church; it was also evidenced in society at large. As recently as 1963 a Planned Parenthood pamphlet warned that "an abortion kills the life of a baby after it has begun. It is dangerous to your life and health."¹¹

But by the 1960s the call for abortion rights was sounding with increasing intensity in American society. A movement was begun to repeal the antiabortion statutes enacted in the nineteenth century.

Pressures on Hawaiian hospital

The years 1970 and 1971 proved pivotal for the Seventh-day Adventist Church's stance on abortion. In January 1970, a bill was introduced in Hawaii's state legislature to repeal that state's abortion laws. Three weeks later the bill was law. Castle Memorial Hospital, an Adventist institution, suddenly found itself needing to establish a position regarding abortion.

On the island of Oahu, Hawaii, only two hospitals were open to the public for maternity or obstetrics cases: Kapiloani Hospital, exclusively an obstetrics and gynecology (ob-gyn) facility, and Castle Memorial Hospital (CMH), the only general hospital that accepted ob-gyn patients. (A third medical institution on the island, Kaiser Hospital, cared only for those people enrolled in the Kaiser Health Plan.)

Because of its unique position of being a general hospital that provided ob-gyn services, CMH, upon repeal of Hawaii's abortion laws, received numerous requests for elective abortions. Requests for abortion were not new, and CMH had permitted what were termed therapeutic abortions—those done to save the life of the mother, or in the case of rape or incest, or even for severe mental anxiety in the mother. ¹² But the repeal of all state abortion laws had created a situation for which the hospital was unprepared.

Marvin C. Midkiff, the administrator of CMH at that time, described how the pressure to loosen the abortion policy began to increase: "A prominent man in this community came to me and said, 'My 16-year-old daughter has got her self in trouble. She is in her second month of pregnancy, and I want an abortion for her at this hospital.'

"He brought out a brochure that had been used for fund-raising in this community when this hospital was being planned. The brochure stated 'This hospital will be a FULL-SERVICE HOSPITAL and will provide every service that is needed by the residents of the community.' He brought me the \$25,000 check that he had given toward the construction several years ago."¹³

The pressure on CMH to be a "full-service hospital" by providing abortion on demand began to grow. Midkiff called W. J. Blacker, president of the Pacific Union Conference, and asked for guidance from the church on how to proceed. According to Midkiff, Blacker informed the General Conference (GC) of the situation and then called to tell him that "no one knows of any position the church has taken on it [abortion]."¹⁴

So CMH set an interim policy: "In the absence of any decision by our church organization on whether or not we approve or disapprove of abortion, or whether or not we permit abortions in the hospital, our management group has made the decision to permit abortion for other than therapeutic reasons through the first trimester (three months) of pregnancy, provided there has been counseling by a clergyman, and by two qualified physicians, and written consultations have been entered in the patient's records. I want to make it clear that this is a temporary ruling until such time as a decision is handed down from our church headquarters in Washington, D.C." ¹⁵

On March 11, 1970, the GC officers appointed a committee to consider counsel to be given to Adventist hospitals. The thinking at this time was that the church would consider the abortion question in June 1970, in Atlantic City, New Jersey, at the GC session.

On March 17, 1970, Neal C. Wilson, president of the North American Division, made a statement on abortion that was carried by the Religious News Service. He predicted that when the denomination met at Atlantic City in June it would steer a middle-of-the-road course. He said that while the church would steer away from anything that would encourage promiscuousness, the church "would not feel it our responsibility to promote laws to legalize abortion . . . nor oppose them. . . ."

"Though we walk the fence, Adventists lean toward abortion rather than against it. Because we realize we are confronted by big problems of hunger and overpopulation, we do not oppose family planning and appropriate endeavors to control population." ¹⁶

Wilson stated that because the denomination was active in 220 different countries, it would have a difficult time taking a hard and fast position on the abortion question. He also said that Adventists might favor abortion in some instances—rape, mental or physical illnesses in the mother, or in cases of probable severe illness in the fetus. ¹⁷

On May 13, 1970, after considerable discussion and rewriting, the GC officers voted to accept "suggestive guide lines for therapeutic abortions." (See box, page 15.) The guidelines were of necessity "suggestive" since they were voted by the GC officers and not by the GC Committee.

But the plan to take the guidelines to the floor of the GC session for discussion and a vote was dropped. Some of the medical community felt that the abortion guidelines were inadequate because therapeutic abortions had been performed all along—even before the repeal of Hawaii's abortion statutes. Marvin Midkiff returned to CMH from the GC session unable to fulfill his promise of bringing with him the official position of the church. ¹⁸

Moving toward a liberalized policy

The issue, however, remained alive. The medical community's rejection of the May 13, 1970, abortion guidelines signaled the beginning of serious discussions regarding the feasibility of an open-door policy in Adventist hospitals to abortion on demand.

During the first week of July 1970, R. R. Bietz, a GC vice president, met in Honolulu with Midkiff and A. G. Streifling, chairman of the board of trustees of CMH. In a letter dated July 8, 1970, Bietz relayed the substance of their conversation to W. J. Blacker. The following statements from that letter shed light on the thinking of leadership after the first abortion guidelines were rejected:

"Five or six non-Adventist MDs who patronize Castle Memorial wish to go beyond the present policy of performing therapeutic abortions only. If they are not allowed to do this in Castle Memorial, they will take their patients to other hospitals in the city of Honolulu. If this is done, chances are fairly good that they will take their patients over there for other treatments as well. This could mean a loss of goodwill and also patronage for Castle Memorial. . . ."

*"Our own Seventh-day Adventist doctors strongly oppose, except for therapeutic reasons, abortions."*¹⁹ This further complicates the problem. If we change our policy, we may have the ill-will of our own men; and if we don't change, we'll be misunderstood by the non-Adventist MDs. Some heavy contributors to the Castle Memorial Hospital feel we should be willing to work in harmony with the laws of the state. In their opinion the community, federal, and state monies have for all practical purposes made this a community hospital. They reason, therefore, that community wishes should be taken into consideration. . . .

"It is important that either the Pacific Union Conference, the North American Division, or the General Conference take a position in regard to this matter. The hospital administration and board need support no matter which direction they might go. *Should the decision be to have abortions beyond what they are doing now, the Adventist doctors could no doubt be satisfied or at least silenced if the administration would have the support of the higher church organization.*

"As I see it, the crux of the matter is mostly theological."²⁰

Meanwhile, at their meeting of July 6, 1970, the GC officers had voted to enlarge the former committee "so as to study what counsel should be given regarding elective abortions."²¹ This decision was made in response to a request for further counsel regarding elective abortion. The local members of what was now called the Abortion Problems Committee met on July 20, 1970, to discuss the implications of the issue for the church and its health-care institutions. This small committee also looked specifically at "the viewpoint of our West Coast leaders in gynecology." Finding no solution, the committee recommended further study.

The committee met again on September 25, 1970, and recommended that "the enlarged committee appointed July 20, 1970, be further expanded to make it representative of additional areas of concern and that it be authorized to meet for approximately two days to study the problem in depth, hopefully to develop guidelines that will be useful in bringing uniformity into the direction given our health-care institutions in North America."²² The committee concluded its meeting with "the expressed hope that due to the urgency described in correspondence from our health-care institutions the expanded committee might meet ... as early as possible to give study to this challenging question."²³

Chief of staff urges decision

On December 13, 1970, Dr. Raymond deHay, chief of staff at CMH, wrote A. G. Streifling asking that the decision process be expedited. Noting that the deliberations had been going on for some 10 months, he said that was "much too long a time . . . without some answer being communicated to the members of the medical staff of this hospital."²⁴

On December 16, 1970, DeHay wrote a second letter to protest the delay in making a decision, this time to R. H. Pierson, GC president. In this letter DeHay said, "We recognize that Castle Memorial Hospital is a church-operated hospital, but we also feel that you must concede to being at least a quasi-public hospital in the eyes of many local residents."

The chief of staff wrote that in view of the local non-Adventists' contributions to the hospital of time and resources and the state appropriations of more than \$2 million, "we on the Medical Executive Committee feel that perhaps the local public is justified in requesting total care at Castle Memorial Hospital."²⁵

Noting that the church had no official stand on abortion, he continued, "We have rather reliable information that a number of your West Coast hospitals are permitting abortion which is termed therapeutic but appears to be greatly liberalized as to the actual definition of therapeutic abortion as we in the medical profession have come to understand it over the years. We feel that there is already a precedent for permitting this surgical procedure at this hospital."²⁶

Pierson's response to DeHay (Jan. 5, 1971) defended the May 13, 1970, abortion guidelines, saying, "They are based upon our appreciation for *the sanctity of life*, respect for the *person image*, and our sense of responsibility for the care of fellowmen."²⁷ Pierson then stated: "We stand ready to assist in making total health care available to all. However, Doctor, we have not conceded to the assumption that total health care includes abortion on demand."²⁸

Pierson then informed DeHay that "a competent committee will be meeting in Loma Linda, California, January 25 [1971], to discuss the matter further."²⁹

And so, one year after the abortion issue had been brought to the attention of the twentieth-century Adventist church, an ad hoc committee convened "to make sure that the cause of truth and humanity are recognized theologically, medically, and philosophically in this large area of concern today."³⁰ Of the 18 individuals named to the 'restructured' committee at a GC officers' meeting held on January 6, 1971, 11 were present. Four others were added to these 11, making it an ad hoc committee of 15.³¹

Updating the statement

In his opening remarks, W. R. Beach, committee chairman, reviewed the work of the Abortion Committee, stating that the abortion guidelines of May 13, 1970, had been helpful, but that the rapidly changing situation, especially in Hawaii and New York, made a new and updated statement necessary.³² Harold Ziprick, the head of Loma Linda University's Obstetrics and Gynecology Department, presented a paper entitled "The Abortion Problem Today," which showed the complexity of the abortion question. The rest of the morning was spent discussing the numbers of therapeutic abortions in Adventist hospitals [e.g., Glendale Hospital: 1966, 1 abortion; 1967, 3 abortions; 1968, 4 abortions; 1969, 10 abortions; 1970, 34 abortions. White Memorial Hospital: 1968, 3 abortions; 1969, 12 abortions; 1970, 79 abortions].³³ Also discussed were the problems CMH was facing as a result of the repeal of Hawaii's abortion laws.

In the afternoon session Jack Provonsha presented a paper titled "An Adventist Position Regarding the Abortion Problem." He advocated that with each request for abortion every attempt should be made to save both the pregnant woman and the developing fetus, "but if this cannot be achieved and one must be sacrificed, the lower must be sacrificed in favor of the higher human value."³⁴

Following Provonsha's presentation, the committee voted to amend and re-vise the May 13, 1970, abortion guide lines. The committee concluded its work that day by recommending that the GC officers appoint a committee to give continued study to the issue.

Back in Washington this committee began its work by turning first to the task of amending and revising the old guidelines, but their efforts eventuated in the development of an entirely new document entitled "Interruption of Pregnancy Guidelines." This document contained both a statement of principles and guidelines to acceptable "interruptions of pregnancy." A comparison of this document with the papers Drs. Ziprick and Provonsha presented at the Loma Linda meeting shows that their ideas and wording served as primary sources for both parts of the document.

The new document underwent a number of revisions. The statement of principles was composed and then expanded during February 1971. Between February and June the guidelines themselves had at least three different forms. A fourth guideline was added, stating that abortion was permitted "in case of an unwed child under 15 years of age." Later, a fifth guideline was also added, one that permitted abortion "when, in harmony with the statement of principles above, the requirements of functional human life demand the sacrifice of the lesser potential human value."³⁵ Eventually this guideline was revised to read that abortion is permitted "when for *some reason* the requirements of functional human life demand the sacrifice of the lesser potential human value" (italics supplied).

The revisions also included dropping the word "grave" from guideline 2, which pertained to physical deformities and mental retardation, and the word "seriously" in guideline 1.

Why the delays?

The committee then gave to the GC officers, as a "tentative report," a statement that included most of the revisions noted above. But no action was taken, and the Pacific Union continued to apply pressure for a decision.³⁶

Beach gave an insight into why he delayed pushing the statement: "My opinion is that we must avoid opening the door to abortion on demand, but rather keep it within the context of a total philosophy. If I read the literature aright, there is a growing feeling in favor of a more conservative line than that promoted by the liberation movement and adopted, more or less, in some of the states. We need to watch this and make sure that our philosophy is basically sound."³⁷

On June 14, 1971, the GC officers voted to request N. C. Wilson, C. E. Bradford, and R. F. Waddell to serve as a committee to refine certain aspects of the report "Interruption of Pregnancy," submitted by the Committee on Abortions.³⁸

Finally, on July 13, 1971, Wilson was able to write to Blacker that the GC had produced some guidelines: "Please contain yourself and do not become too ecstatic, but at long last we have a report for you regarding the interruption of pregnancy. This is a more sophisticated term than 'abortions,' and since there are therapeutic and elective, we feel that the new term covers the whole spectrum. To be sure, we have not answered every question that can come up, nor have we made provision for opening up the door in harmony with certain pressures that are being brought to bear on the medical profession today. We feel it is a fair position and one that we can defend. I hope it will be helpful to you and to our brethren who have been facing the music for over a year now in Hawaii."³⁹

Still, it wasn't until August 10, 1971, that C. E. Bradford, secretary of the committee now called the Committee on Interruption of Pregnancy, released the statement "as the opinion of a representative committee of theologians, physicians, teachers, nurses, psychiatrists, laymen, etc., who met at Loma Linda, California, January 25, 1971,40 with the understanding that the report is to be used as counsel to denominational medical institutions."⁴¹ The statement was subtitled "Recommendations to SDA Medical Institutions." In his covering letter, Bradford made the following observation: "I suppose you would say this is *quasi official*, without the full imprimatur of the brethren."⁴²

So, after more than a year and a half of intermittent committee work and discussion, the Adventist Church still had no *official* position on the abortion question.

Did this mean that CMH was left in the same quandary regarding abortion on demand as they had found themselves in when Hawaii's abortion laws were repealed in January 1970? The answer is no. The wording of the new guidelines was "broad enough to interpret any way you chose to."⁴³ This allowed CMH to open its doors to abortion on demand through

the twentieth week (and even later for "compelling social or medical reasons")⁴⁴ and still be in harmony with GC guidelines.

Continuing confusion repolicy

Now the church had a policy, semi official though it might be. But a flow of confusing and misleading information regarding the church's position began even before the Abortion Committee had finished its work. In March 1971, *Ministry* published two articles on the abortion question. In the first, W. R. Beach concluded "that except in the extreme circumstances listed under our guidelines on therapeutic abortion, it would be better to enhance our reverence for life and the Christian way that leads to it."⁴⁵ He was, of course, referring to the three guidelines that had been accepted on May 13, 1970.

Dr. Ralph F. Waddell, secretary of the GC Department of Health, wrote the second article, "Abortion Is Not the Answer." Calling abortion a "war on the womb," he said, "As Christians we abhor the thought of wholesale carnage on this level. Although we accept therapeutic abortion based on proved medical indications, we do not find abortion on demand compatible with our person-image concepts."⁴⁶ He went on to say that therapeutic abortions should be performed "during the first three months, before the embryo can be considered to possess life in itself."⁴⁷

In this same issue, *Ministry* published the abortion guidelines of May 13, 1970. It is important to remember that this was the March 1971 issue. In Loma Linda on January 25, 1971, the restructured Abortion Committee had voted to "amend and revise" these original guidelines and by the time of publication the new Interruption of Pregnancy Guidelines had been written and were in the final revision stage.⁴⁸

A GC officer and member of the Abortion Committee vigorously protested publishing this material. In a March 2, 1971, letter to W. R. Beach, Robert E. Osborn wrote, "It seems to me that the articles are completely premature, or else the appointment of a committee [the Loma Linda committee] to look into the matter in depth is a farce."⁴⁹ Osborn's protest was based on his knowledge that the original guidelines were deemed too restrictive and were being superseded.

Beach defended the decision to publish the articles and guidelines: "In view of the fact that the upcoming report of the committee which met in Loma Linda will liberalize somewhat the current guidelines, I believe that from a practical viewpoint, it was well to give the rationale for the current situation and the future viewpoints. I think it will be evident that our viewpoint has been liberalized. I feel, however, that this liberalization will be understood and accepted."⁵⁰

But the publishing of the new guidelines, which would have allowed the "liberalization" to be "understood and accepted," never happened. That the older, more restrictive set of guidelines was published and the newer, more liberalized set was not resulted in a great deal of confusion among Adventist clergy and laity regarding the church's position on abortion and its practice in our medical institutions.⁵¹ There is no evidence that leadership attempted to educate the clergy and the church about the new set of guidelines and its implications.

In effect, the church has simultaneously held two positions regarding abortion. The published May 13, 1970, abortion guidelines have presented to Adventist clergy and laity, and to the general public as well, the appearance of a restrictive stance.⁵² And the unpublished Interruption of Pregnancy Guidelines have permitted its hospitals a free hand in this economically significant practice.⁵³

Adventism and abortion

So what is the truth about Adventism and abortion? Is abortion on demand the norm for Adventist health institutions? On this question M. C. Midkiff said, "I believe if you do a bit of research you will find that the majority of Adventist hospitals permit abortion on request."⁵⁴

An explanation the president of Washington Adventist Hospital wrote in a letter to me bolsters Midkiff's prognostication: "The administration, therefore, in good faith, leaves the responsibility of deciding for or against abortion to the physician and the patient, who really are the only individuals who know the full medical situation and consequences of the case."⁵⁵

The American Hospital Association Guide to the Health Care Field, 1986 lists 12 of the 56 Adventist hospitals in the United States as offering "abortion services," including "a program and facilities."⁵⁶

In summary

Early Adventism published positions in harmony with the Physicians' Crusade Against Abortion, though it was not active in that movement. The church produced its first set of abortion guidelines in 1970, when American attitudes toward abortion had changed and some of the church's hospitals were experiencing increasing pressure from their communities to provide abortion services.

Less than a year after the first set of abortion guidelines was developed, the church revised and expanded it. The resulting liberalized guidelines have allowed Adventist hospitals a great deal of freedom in their abortion practices, a freedom that has resulted in a large number of abortions being performed. Although the church has been hesitant to let it be known, at the present it is clearly not, in either policy or practice, limiting its medical institutions to therapeutic abortions.

Ministry reserves the right to approve, disapprove, and delete comments at our discretion and will not be able to respond to inquiries about these comments. Please ensure that your words are respectful, courteous, and relevant.

Three years ago the General Conference Executive Committee appointed the Christian View of Human Life Committee (CVHLC) to review the hospital guidelines on abortion and other issues touching human life, such as in vitro fertilization, euthanasia, and contraception.

The CVHLC drafted a statement that was printed in Ministry in July 1990. This statement is now being circulated to a large number of people throughout the world divisions for further refinement. A decision will then be made as to whether the final draft will remain simply a consensus of the committee or whether some higher body such as an Annual Council will ratify it. --Editors.

1970 Abortion Guidelines

"It is believed that therapeutic abortions may be performed for the following established indications:

"1. When continuation of the pregnancy may threaten the life of the woman or seriously impair her health.

"2. When continuation of the pregnancy is likely to result in the birth of a child with grave physical deformities or mental retardation.

"3. When conception has occurred as a result of rape or incest. "When indicated therapeutic abortions are done, they should be performed during the first trimester of pregnancy."

1971 Interruption of Pregnancy Guidelines

"1. When continuation of the pregnancy may threaten the life of the woman or impair her health.

"2. When continuation of the pregnancy is likely to result in the birth of a child with physical deformities or mental retardation.

"3. When conception has occurred as a result of rape or incest.

"4. When the case involves an unwed child under 15 years of age.

"5. When for some reason the requirements of functional human life demand the sacrifice of the lesser potential human value.

"When indicated interruptions of pregnancy are done, they should be performed as early as possible, preferably during the first trimester of pregnancy."

Both guidelines say that no person should be compelled to undergo nor physician forced to participate in an abortion if he or she has a religious or ethical objection to it. The 1971 guidelines broaden this to include nurses and attendant personnel.

Reference Notes:

1 Sermon by Barry E. Wood, pastor, Solid Rock Church, Eleanor Roosevelt High School, Greenbelt, Maryland, January 20, 1985.

2 Ibid.

3 *Adventist Review*, Sept. 1, 1983, p. 14.

4 John Todd, *Advent Review and Sabbath Herald*, June 25, 1867, p. 30.

5 *Advent Review and Sabbath Herald*, Nov. 30, 1869, p. 184.

6 E. P. Miller, quoted in James White, *A Solemn Appeal* (Battle Creek, Mich.: Steam Press, 1870), p. 100.

7 J. H. Kellogg, M.D., *Man, the Masterpiece* (Battle Creek, Mich.: Modern Medicine Publishing Company, 1894), pp. 424, 425.

8 Ellen G. White, *The Ministry of Healing*, p. 397.

9 _____, *Patriarchs and Prophets*, p. 516.

10 Kristin Luker, *Abortion and the Politics of Motherhood* (Berkeley and Los Angeles: University of California Press, 1984), p. 40.

11 John Powell, *Abortion: The Silent Holocaust* (Alien, Tex.: Argus Communications, 1981), p. 92.

12 Conversation with Marvin C. Midkiff, Oct. 22, 1986.

13 Marvin C. Midkiff, speech to Kailua, Hawaii, Rotary Club, Jan./Feb., 1970.

14 Midkiff conversation.

15 Midkiff speech.

16 Religious News Service, Mar. 17, 1970, pp. 16, 17.

17 *Ibid.*, p. 17.

18 Midkiff conversation.

19 Midkiff remembers one non-Adventist doctor and one Adventist doctor as pushing for a policy change allowing elective abortions.

20 R. R. Bietz to W. J. Blacker, July 8, 1970 (italics supplied).

21 General Conference Officers' Meeting, minutes, July 6, 1970, pp. 70-330.

22 Abortion Problems Committee, minutes,
Sept. 25, 1970.

23 Ibid.

24 Raymond DeHay to A. G. Streifling, Dec.
13, 1970.

25 Raymond DeHay to R. H. Pierson, Dec. 16,
1970.

26 Ibid.

27 R. H. Pierson to Raymond DeHay, Jan. 5,
1971 (*italics supplied*).

28 Ibid.

29 Ibid.

30 W. R. Beach to Abortion Committee, Jan. 11,
1971.

31 Those present were: W. R. Beach; C. E.
Bradford; P. C. Heubach; David Hinshaw, M.D.;
C. B. Hirsch; Gordon Hyde; Joann Krause; Elizabeth
Larsen, M.D.; R. E. Osborn; Jack W.
Provonsha, M.D.; A. G. Streifling; W. D. Walton;
N. C. Wilson; Mrs. C. Woodward; and
Harold Ziprick, M.D.

The most notable committee member absent
was R. H. Pierson, who had declared just 20 days
earlier his support for the existing guidelines.

32 GC Committee on Abortions, minutes, Jan.
25, 1971.

33 Ibid.

34 Jack Provonsha, M.D., "An Adventist Position
Regarding the Abortion Problem," pp. 10,
11.

35 Beach said that this guideline would "cover
less definitive reasons for any interruptions of
pregnancy." W. R. Beach to N. C. Wilson, Mar.
8, 1971.

36 W. J. Blacker to N. C. Wilson, Mar. 30,
1971.

37 W. R. Beach to N. C. Wilson, May 11, 1971.

38 GC Officers' Meeting, minutes, June 14,
1971, pp. 71-218.

39 N. C. Wilson to W. J. Blacker, July 13, 1971.
The GC officers voted to accept the "Interruption

of Pregnancy Statement of Principles" on June 21, 1971.

40 At Loma Linda University's "Conference on Abortion," November 15, 1988, Dr. Provonsha stated that although his paper's wording was used in the 1971 Interruption of Pregnancy Statement, it was used out of context, and that he did not see or vote on the statement until it was released to Adventist medical institutions as a completed document.

41 C. E. Bradford, Aug. 10, 1971.

42 Ibid.

43 Midkiff conversation.

44 Bietz, op. cit., p. 2.

45 W. R. Beach, *The Ministry*, March 1971, p. 6.

46 R. F. Waddell, *The Ministry*, March 1971, p. 9.

47 Ibid.

48 W. R. Beach to N. C. Wilson, Mar. 8, 1971.

49 R. E. Osborn to W. R. Beach, Mar. 2, 1971.

50 W. R. Beach to R. E. Osborn, Mar. 8, 1971.

51 A case in point: On April 23, 1987, during a discussion relating to a request from the Ohio Conference constituency for guidance on the abortion question, copies of the discarded May 13, 1970, guidelines were presented to members of the Columbia Union executive committee as the church's position.

52 In their 1984 publication, *A Community Planning Guide for Sanctity of Human Life Sunday*, the Christian Action Council included a "Summary of Attitudes Toward Abortion by Religious Organizations." The Seventh-day Adventist Church was listed in Group 2, as "generally opposed to abortion but would make exceptions in hard cases (e.g., pregnancy resulting from rape or incest, pregnancy leading to the birth of a baby with deformities or birth defects, pregnancy resulting in a severe threat to the mother's health)," (p. 15).

53 Since 1971, statements in the Adventist press have continued this confusion. See, e.g., the editorial by Eugene Durand in the *Adventist Review*, "About Abortion," (Sept. 1, 1983, p. 14), which called the 1970 abortion guidelines "the nearest this church came to a stand on the problem." The editorial later listed guidelines 4 and 5

but made no effort to point out why they were added or what they meant.

See also the "Dear Miriam" column in the *Adventist Review* of Sept. 12, 1985 (p. 21). The author said that upon reading a correspondent's letter regarding the church's abortion policy, she "communicated immediately with the Health and Temperance Department of the General Conference and discovered that a statement of 'Abortion Guidelines' was drawn up back in 1970 and given to all Adventist hospitals." She went on to imply that "abortions of convenience" in Adventist hospitals were the result of "infractions of guidelines and rules." Apparently the Health and Temperance Department did not tell the author about the second, more liberal, set of guidelines.

But what was perhaps the most confusing statement of all came from the president of AHS/U.S., Donald Welch. On February 13, 1986, in an interview the *Adventist Review* called an "in-depth look at the Adventist health system," Welch said, "The church developed guidelines for hospitals and health-care institutions in regard to abortions back in 1969 [sic.]. Those guidelines strongly discourage abortions. They do allow for abortions in certain cases in which there is medical consultation—several doctors agree that it needs to be done for the health of the mother, and in certain other cases such as rape."

Welch continued: "I will be frank and tell you there was a time when a number of our institutions did quite a few abortions, and that situation led to these guidelines." Whether or not he intended them to be, Welch's statements were misleading, to say the least.

54 M. C. Midkiff to Bert Haloviak, Oct. 20, 1986.

55 R. D. Marx to Mr. and Mrs. George Gainer, April 19, 1985.

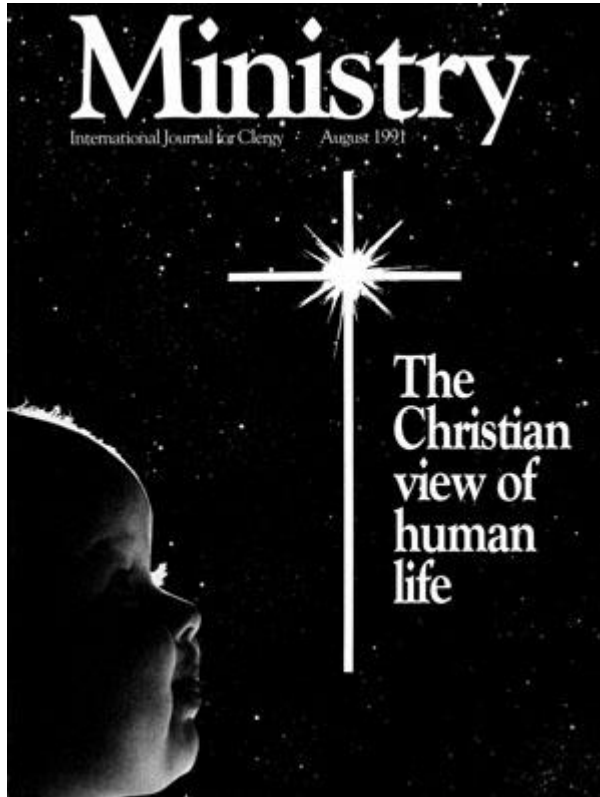
56 American Hospital Association, *Guide to the Health Care Field*, 1986. (The Guide is based on hospital-supplied reports.)

The hospitals listed are as follows: Castle Medical Center, Hadley Memorial Hospital, Hanford Community Hospital, Loma Linda University Medical Center, Porter Memorial Hospital, Portland Adventist Medical Center, Shady Grove Adventist Hospital, Shawnee Mission Medical Center, Sierra Vista Hospital, Walla Walla General Hospital, Washington Adventist Hospital, and White Memorial Medical Center.

As to numbers, participants in the "Pastors' Protest Against Abortion" supplied the figure of

1,494 abortions performed at Washington Adventist Hospital from 1975 through July 1982. They said that the medical records office of the hospital supplied these statistics.

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