

Consciousness Raising with the Clergy

Lawrence Lader, who had already written his earliest book, *Abortion*, was the first to suggest that it would perhaps be a significant gesture if the clergy were to refer women directly to places where they might obtain abortions, such as he had been doing by telephone and letter for some time. Out of Lader's encouragement was born the first concept of what later would become the Clergy Consultation Service on Abortion. Discussions of what we might be willing to do led us to call together a group of clergy to whom we would present the idea of developing a counseling and referral service while at the same time educating ourselves as to what might be done eventually regarding the law.

It was apparent from the start that the clergy who would be most likely to become involved in a project of this kind would be the same ones who had been most active in the school integration battle in New York, in the civil rights battle both there and in the South, as well as in other areas of civil liberties. It was to those clergy whose liberal attitudes and commitments had been clearly established that we turned for help in developing the original nucleus of the Clergy Consultation Service on Abortion. We invited about forty people to our first meeting, and about twenty or twenty-five persons attended. It was obvious from that initial get-together that, though some felt a keen interest, many felt that abortion was a problem about which they knew very little, and hardly any felt pressure from their congregations or communities to make this issue a priority. This attitude was reminiscent of the early days of the civil rights movement when people would say they didn't have a Negro problem in *their* community because there weren't any Negroes. The reaction of this group of clergy to the abortion issue stemmed from a poor understanding and limited knowledge of the problem as well as a failure to realize

that if they were to make themselves available to women experiencing this problem they would discover needs they never knew existed.

Clearly our first order of business had to be *self-education*. We could not enjoy the luxury of moving into this unknown territory of emotional and psychological strain without a depth of investigation which had to include the opening of our minds to experiences we had never known. Clergymen are predisposed by training and intellect to deal in answers and categories with which they have background and experience, theological and pastoral ethics. Here was a field in which ministers and rabbis had very little experience. And those clergy who did have some experience in this field, because of both religious and cultural prejudices, usually counseled against a woman opting for an abortion. Later, most of us were to see theological "principles" and ethical norms shattered by the existential burden of a decision that cried not for sermons and exhortations but for supportive affirmation and concrete assistance for the person.

Almost all projects of service which are aimed at a constituency that one wants to help demand a process of immersion in the "problem" before one decides what form an action must take. Some of the clergy, because of their own ambivalence about the issue or because of their predilection to intellectualize every ethical decision, pushed for a year of discussion on the matter. Others of us maintained that the best education we could have was involvement (our time, energy, and money) with the problem. Our mentor was Bonhoeffer (not for his stand on abortion but his faith in action), who said, "We will not know what we will not do." This maxim was underscored by the immediacy of the subject with which we were dealing. The issue was not a "problem" but a *person*, a pregnant woman, growing more pregnant every day. If we clergy could afford the extravagance of discussion groups, workshops, and national conferences on abortion, she could not. Her choices were narrowed by her condition, and her condition would brook no prolonged theologizing about *her issue*. The decision was, therefore, to move ahead rapidly, keeping our "formal" education in this to a minimum and agreeing that our enlightenment on the subject would come from the day-to-day dealing with women who were presently suffering from an unjust law.

Although a few of us had been involved in referring women on

an individual basis for abortion, we were for the most part almost totally ignorant about the subject. Shortly after Moody came to Judson Church in the fall of 1956, a former minister at Judson sent a woman from Florida to New York in search of an abortion. She was thirty-six years old, an active church woman, mother of three children, and presently separated from her husband. She felt that if the pregnancy were discovered, her marriage would be destroyed. Obviously there were no grounds for a "therapeutic abortion" in New York. Moody called up a layman in the church who had some experience with the problem; and like the blind leading the blind they struck out for New Jersey to run down the rumors of an "abortionist" who operated out of his house in West New York, New Jersey. They felt so ignorant and so frightened that when the nurse slammed the door in their faces because they did not have the code word, they were actually relieved. After following a half dozen false leads, a woman in the church found a group that operated out of a nice apartment house on the Upper West Side. After about three days the friend's pregnancy was terminated there for a low price of \$600. It was a harrowing experience and was a portent of things to come over the next dozen years. Moody never forgot this first glimpse of that dark, ugly labyrinthian underground into which women were sent alone and afraid.

Self-education became our first order of business. In order to inform ourselves, we held several sessions with medical personnel, legal counsel, and psychiatrists.

Dr. Glenn Patterson, a member of Judson Church, had patients who had undergone illegal abortions, and he arranged for us to meet with several of those women to learn about their experiences and what help they felt would have been beneficial to them at that point in their lives.

That was the most important discussion we held since it provided insights into what needs women thought a clergy service should be prepared to meet. The women made it very clear that the last person in the world they would have gone to for help was the clergy because they believed, and they were probably right, that the role of the clergy in that situation would have been to talk them into having the baby. The second person that they would not talk to or turn to would have been their family doctor for much the same reasons; also, many felt the doctor would not keep their secret from other family members. We sensed that we were

up against some long-standing historical biases which would make our job at best rather difficult.

For our meeting with doctors we turned to those persons who had been publicly identified with the movement to reform abortion laws. Among those who participated was Dr. Robert Hall of Columbia Presbyterian Hospital, a longtime supporter of reform, who had written in the field and had certainly performed therapeutic abortions in his hospital. His counsel to the clergy as we gathered to talk about our resolve to establish a CCS (Clergy Consultation Service on Abortion) was very interesting in that it was far more cautionary than the action we had already decided to undertake. Dr. Hall felt we should do nothing "illegal" but instead should bring pressure to bear upon the hospitals to do so-called legal abortions. Since his hospital did a certain number of abortions, he felt that if all other hospitals did an equal number, this would gradually change the attitudes of other physicians. Dr. Hall recommended that we send pregnant women for hospital abortions in order to give hospital staffs an idea of the dimensions of the problem, even if not one woman was in fact aborted. The response of the clergy was that in addition to delaying a woman beyond the stage where it might be more dangerous to obtain even an illegal abortion, to "use" a woman in this fashion might do irreparable damage to her psyche. Thus we decided not to follow Dr. Hall's advice at all.

Another physician demonstrated the actual medical procedure, using a pelvic model and instruments. This man was not an Ob/Gyn but a pathologist who had a deep interest in the subject and was a longtime supporter of the right of a woman to have an abortion. The day the clergy went to "medical school" was a memorable one. The meeting was held at Judson Church, and the doctor brought all his instruments and the life-size model of the pelvic region including the cervix and the vagina. The nervous jokes and incredulous questions made it fairly obvious that we had majored in theology and not biology. One factor that kept the meeting from deteriorating into a stag party atmosphere was the presence of a woman Methodist minister from Staten Island, who had been associated with us from the beginning. The doctor then went step by step through the procedure which at that time was a D and C (dilation and curettage). In this procedure the cervix is dilated and the uterus is scraped with a curette so that the

products of conception are removed from the woman's uterus. In describing the technique, he indicated when and what kind of pain would be felt by the woman. It was a "first" for all of us, and it proved in time to be one of the most valuable lessons we had. In the days of real ignorance about abortion when our images came from movies like *Alfie*, it was important for a counselor to describe to a woman what would happen to her in the procedure. It is a safe guess that the kind of preparation that doctor gave us for our counseling task surpassed anything the clergy had received in pastoral counseling courses.

Our legal advice came from the New York Civil Liberties Union. Aryeh Neier, who was then the Executive Director, and Ephraim London, a cooperating attorney and member of the Board of Directors of the N.Y.C.L.U., were the two people who counseled and advised us about what they believed would happen if we went ahead; they outlined the legal risk we would be taking if we pursued this course.

The N.Y.C.L.U. had already taken a strong stand on abortion and was 100 percent behind us. Ephraim London seemed to feel that if we clergy would function responsibly and somewhat conservatively in relation to the law, we might be able to accomplish our goals without being prosecuted. The cautionary notes laid down for us during those meetings were eventually built into the standard operating procedure of the CCS in the months to come. This standard operating procedure would become the clergy's working covenant and serve as a model for future Services in the rest of the country. What this meant was that we would only refer women to licensed gynecologists practicing outside the state of New York, where the law was prohibitory. The reason London gave for doing this was that should any prosecutions come about as a result of our referring women for abortions, having diverse jurisdictions involved would make it much more difficult to prosecute the clergy. It was at one and the same time both a way around the law and a precaution in the event we discovered we were, indeed, transgressing the law.

The legal advice which gave us the most assurance was Mr. London's recommendation that we never either assume or admit that we were breaking the law. At all times we were to behave as though we were acting within the laws of New York State and that as clergy we were bound to follow a higher moral law. Our stan-

dard public response, later, to all questions about the legality of our actions was that we were not in a position to determine the legality. The courts would have to make that determination.

Ephraim London's caution, which never included any "guarantee" that we would not be arrested, encouraged an openness about what we were planning to do. He firmly believed, and later events would bear him out, that everything we did needed to be done publicly. In other words, anything that gave the CCS the appearance of being clandestine would only serve to mitigate against what we hoped to accomplish. We took that advice to heart because it was not only good legal advice, but it was also good strategic advice.

At one memorable meeting we held with our lawyers, the clergy were laughing and joking about being arrested, nervous laughter though it was. As we talked about our feelings surrounding this unknown step on the road to civil disobedience, we agreed that if one of us got arrested, all the others would go along. Our solidarity stemmed from our conviction that to go ahead was in effect an act of conscience.

How our countenances fell when we expressed that solidarity to our lawyer and he replied that while it might be true that we would all like to "go" together, the district attorney would decide which *one* of us would be arrested. The rest of us might pray and be concerned about that individual, but there was no way we could force the authorities into a mass arrest.

At this point Moody agreed to become the spokesman for the CCS, to provide the direction and leadership necessary. This decision was based on the trust of the other clergy that when sudden decisions had to be made, that information would reach them quickly and they would follow whatever new instructions were issued. The group voluntarily placed considerable authority and confidence in the spokesman; they hoped that their faith in Moody, who would work closely with the legal and medical people, was not misplaced.

What emerged from that feeling of solidarity was an understanding of our mutual danger and the need to spell out very carefully a procedural covenant which would bind us together. The result was a standard operating procedure—verbal because we feared to put anything in writing—which included certain rules we would not, under any circumstances, violate. It was understood that each of us would counsel women in our own way; that is, the method

we used would be the same method used in all of our pastoral counseling. However, the way in which a woman would be referred and to whom she would be referred would be agreed upon and cleared by the group. In this area there would be *no* room for individual preferences, nor was there room for individuality with respect to legal advice and protecting the privacy of the woman. On the whole we did not lay down very many rules for ourselves, but those we did make became part of our covenant and we could not easily break them without being expelled from the CCS.

We are sure that many thought our legal advisor was uptight and conservative. When we wanted to take a new chance or a more radical step, London's somber advice to us was, "Remember, you can't help those women who need assistance if you're in jail and the Service is closed down." He was right of course, and we heeded his advice for we believed that his priorities were correct; the challenging of the law was secondary to helping women get abortions.

At the end of our self-education project during which we met with a variety of people who contributed to our knowledge, we were faced with a very important decision, namely, what we would call ourselves. This led to a prolonged debate within the group. We did not disagree that we were taking on the role of consultants to women who were trying to make a decision over whether to carry an unplanned pregnancy to term. Thus we decided that the "Clergy Consultation Service" sounded like a good and appropriate name. What we could not decide on for a time was whether or not we should call ourselves a "Clergy Consultation Service *on Abortion*." It is important to remember that as late as 1967 "abortion" was a taboo word rarely used except in whispered conversations. Certainly people were aware that women had abortions, but still the word was not used in public debates or formal discussions. The question before us was whether or not to use the "unspoken word" in our name and thus run the risk of antagonizing some segments of the public by use of this emotionally loaded word or whether to settle for a euphemism like "problem pregnancy." The latter term would have softened the whole question about what we were doing as clergy and perhaps would have made it publicly more acceptable. Some of the clergy preferred "problem pregnancy" because it seemed less like flouting our intentions in the faces of our adversaries. Others of us preferred to use "abortion"

because we hoped that by doing so we would be helping to "surface" the problem and open it up for public discussion; we even half-heartedly hoped using the word would help redeem both the word and the practice. The most persuasive argument and the one which ultimately convinced us that we should call ourselves the "Clergy Consultation Service on Abortion" (CCS) had to do with our reason for being and the people we wanted to serve. If we had not used "abortion" in our name, the women we wanted to reach might not have sought us out. A "Clergy Consultation Service on *Problem Pregnancies*" might have led women to think that we were available to help them bring their pregnancies to term and could have frightened off those desperate women we wanted to assist. "Abortion" clarified what we were about. The other side of that argument was that by using "abortion" we would create another misunderstanding, namely, that the only thing we were consulting about was abortion. In actual fact we had already decided that we were going to talk with women about all alternatives open to them: having and keeping the baby, giving it up for adoption, or having an abortion.

We did finally agree that we would rather be misunderstood by the public than avoided by women in trouble, and so the Clergy Consultation Service on Abortion was born. In later years Clergy Services in other states would choose to call themselves "Clergy Consultation Service on Problem Pregnancies," but by that time the public image of what we had done had been solidly established, and women everywhere in the United States turned to their local clergy service for help and reassurance.

Our next major hurdle was trying to discover the mechanics of organizing a public counseling service in an area where there were no precedents and no guidelines for us to follow. We were blazing new paths and of course made a few mistakes along the way.

In retrospect it seems clear that the strategy for the organization of the CCS was heavily influenced by and based upon the fear of being arrested and prosecuted for the act we were about to perform. It is an interesting fact that this caution on our part shaped the structure of the Clergy Service. For example, one of our decisions was to have no identifiable place of business. There would be no office, no address for the CCS. Instead it would be diffused and dispersed among all ministers and rabbis counseling women with problem pregnancies. In order to accomplish this we arranged

for a telephone answering service, which later became an electronic answering service, that would refer callers to a minister or rabbi who was part of the CCS.

A decision had to be made as to where to locate physically the telephone answering service, which was the only tangible object of the CCS. It was nothing but a little gray box, a recording device that answered the phone automatically and gave the caller instructions. Robert Pierce, a member of Judson Church, who worked at the National Council of Churches, felt that we could place it in his office at 475 Riverside Drive. We all thought that would be a grand ecumenical gesture, good for the CCS, and a wonderful place to have it in the event anything were to happen. While we were in the process of having the phone installed, we received word from the legal counsel for the National Council of Churches that housing the phone would be too much of a risk for them to take. Afterwards we received a particularly sympathetic letter from a woman executive at the National Council expressing her deep regret that the council was unable to contribute to our effort in even this small way and offering her own support for the work we were about to do.

Of necessity we had the answering machine installed at Judson Church, which later turned out to be the ideal place for it since it was close to the spokesman and the staff who could change the taped message at a moment's notice if and when emergencies arose. The taped message gave the names and phone numbers of counselors available during a given week and women would then call for an appointment which would be kept at the church or synagogue with which the counselor was affiliated. This eliminated the need for a central office where women could be easily identified, detected, and possibly prosecuted, as even the clergy might have been if all counseling and referral had taken place in one location. By decentralizing the CCS, clergy were counseling in their own offices, and abortion counseling was just an additional pastoral responsibility, part of the natural order of their working lives.

Because of our caution we decided not to have any formal organization, no presidents or secretaries or officers of any kind. We also chose not to have any bank account in the name of the CCS. All of our funds were handled through Judson Church. We had been warned by our legal advisors that no money should ever pass between counselee and counselor. Historically women

had been financially exploited due to the illicit nature of the practice, and any taint of profit to clergy would have been "anathema," reducing our credibility as honestly concerned citizens who had no personal stake in the abortion issue. Clearly we believed that not having a formal organization and not having a bank account protected us to some extent against legal prosecution.

The last act of our consciousness-raising program was to put down our statement of purpose that was the articulation and distillation of many lengthy discussions and numerous meetings. This document was the foundation from which we launched our service and on which we took our stand. That document must be read in order to understand our professional role in this social crisis and how we used that role in the service of this need.

CLERGY STATEMENT ON ABORTION LAW REFORM AND CONSULTATION SERVICE ON ABORTION

The present abortion laws require over a million women in the United States each year to seek illegal abortions which often cause severe mental anguish, physical suffering, and unnecessary death of women. These laws also compel the birth of unwanted, unloved, and often deformed children; yet a truly human society is one in which the birth of a child is an occasion for genuine celebration, not the imposition of a penalty or punishment upon the mother. These laws brand as criminals wives and mothers who are often driven as helpless victims to desperate acts. The largest percentage of abortion deaths are found among the 35-39-year-old married women who have five or six children. The present abortion law in New York is most oppressive of the poor and minority groups. A 1965 report shows that 94% of abortion deaths in New York City occurred among Negroes and Puerto Ricans.

We are deeply distressed that recent attempts to suggest even a conservative change in the New York State abortion law, affecting only extreme cases of rape, incest, and deformity of the child, have met with such immediate and hostile reaction in some quarters, including the charge that all abortion is "murder." We affirm that there is a period during gestation when, although there may be *embryo* life in the fetus, there is no living *child* upon whom the crime of murder can be committed.

Therefore we pledge ourselves as clergymen to a continuing effort to educate and inform the public to the end that a more liberal abortion law in this state and throughout the nation be enacted.

In the meantime women are being driven alone and afraid into the underworld of criminality or the dangerous practice of self-induced abortion. Confronted with a difficult decision and the means of implementing it, women today are forced by ignorance, misinformation, and desperation

into courses of action that require humane concern on the part of religious leaders. Belief in the sanctity of human life certainly demands helpfulness and sympathy to women in trouble and concern for living children, many of whom today are deprived of their mothers, who die following self-induced abortions or those performed under sub-medical standards.

We are mindful that there are duly licensed and reputable physicians who in their wisdom perform therapeutic abortions which some may regard as illegal. When a doctor performs such an operation motivated by compassion and concern for the patient, and not simply for monetary gain, we do not regard him as a criminal, but as living by the highest standards of religion and of the Hippocratic oath.

Therefore believing as clergymen that there are higher laws and moral obligations transcending legal codes, we believe that it is our pastoral responsibility and religious duty to give aid and assistance to all women with problem pregnancies. To that end we are establishing a Clergymen's Consultation Service on Abortion which will include referral to the best available medical advice and aid to women in need.