

# How not to protect the not-yet-born

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LOGICIANS give the name "straw man fallacy" to the debating tactic whereby one attributes to one's opponents a weak argument, which they have not made, rather than confront their actual position. The Globe's editorial To Protect the Not-Yet-Born (Sept. 14) is a prime example of this fallacious reasoning.

The Globe paints itself as the champion and protector of "as-yet-unborn children" and labels its critics (including me, by name) as seeking "an excuse to wash our hands of the problem." Just the opposite: Critics such as me (and those of my " ilk") rejected the decision by Mr. Justice Perry Schulman to order a pregnant woman to take treatment for solvent-sniffing — a decision since overturned by the Manitoba Court of Appeal — precisely because of our concern to minimize harm to the "not-yet-born."

The Globe falsely lumps me in with some phantom ideologues who fear the recriminalization of abortion, a fear which, like The Globe, I believe to be unfounded. My argument has been that the policy of state coercion of pregnant women, favoured by Judge Schulman, not only would violate the liberty of pregnant women but would fail miserably to protect children. It would almost certainly make the birth of seriously impaired babies more rather than less likely. That is why it is bad ethics and bad social policy.

tant mothers, fearing state intervention in their conduct, to avoid detection by not seeking desirable pre-natal care." It is for just this reason that the American Public Health Association opposes turning doctors, nurses and social workers into fetal police. There is a strong public interest in having expectant mothers receive proper pre-natal care. Those most at risk, through addiction, are the ones we most need to counsel and assist.

In sum, although late intervention offers the possibility of reducing the severity of fetal damage, it is probably far too late after five months to effectively protect the fetus of a glue-sniffing pregnant woman from a high risk of grave harm. Any well-meaning efforts to minimize harm by making her a "prisoner" may result in a much larger number of infants being born with serious impairments.

Perhaps in its next comment on this issue, The Globe's editors will consider the irony that when the woman in question voluntarily sought treatment for her addiction in June, she was turned away. There was no place for her. Similar stories could be told about similar people across our country. Social problems need compassionate and sensible social solutions. Facile legal solutions do little more than give us the comforting illusion that we are dealing with the problem.

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## FEEDBACK / Forcing pregnant, addicted women to take treatment for the sake of their fetuses would make matters worse.

ibly in the life of a pregnant woman to protect her fetus until it is clear that she intends not to abort. That means late in her pregnancy.

The Manitoba case involved a woman who was five months pregnant at the time of her trial. By five months of gestation, the fetus of a glue-sniffing or heroin-consuming or alcoholic mother has, in all likelihood, already been seriously poisoned. The first six to eight weeks of fetal brain development are crucial.

THAT is why the trial judge's decision was bad medicine. To prevent the births of thousands of babies with fetal alcohol syndrome or serious damage requires a social policy that shows concern for those young women (and men) whose lives are so bleak that they opt to obliterate their consciousness with drugs. Perhaps The Globe should be asking why governments across Canada are slashing the budgets for drug outreach workers, for public health nurses, for drug-dependency programs; or why there is no public outcry against the scandal of massive unemployment among Canada's native peoples.

"[B]y restraining this mother from sniffing solvent," the judges of the Manitoba Court of Appeal noted, "we may induce other expect-

Let's start from the beginning of this sad story.

Thousands of Canadian babies are born each year with serious impairments that could have been prevented had their mothers not abused their bodies during pregnancy. Canadians universally agree that this is a moral tragedy. Life is hard enough even when one's body and brain are intact; what chance does a baby have for a decent life when it is handicapped from birth by holes in its brain, or addiction to heroin, or fetal alcohol syndrome? Thus, every pregnant woman who decides to carry her fetus to term and give birth to a baby has a clear moral obligation to give that baby a healthy start in life.

The controversy is over what we as a society should do when a pregnant woman decides not to abort but, at the same time, continues to sniff glue or abuse alcohol.

The Globe advocates using legal coercion against the woman. My position is that this approach will be ineffective at best, and counterproductive at worst, in protecting the fetus-to-be-born. The Americans have tried legal coercion. It doesn't work. Here's why.

Any woman has the right to terminate her pregnancy. The Globe, quite properly, defends this right to reproductive liberty. From this it follows that the state cannot intervene forc-