

How to Make an Effective Pro-Life Argument With Dr. Sean McDowell and Dr. Scott Rae

(April 14, 2023)

Sean:

All right, friends, nice to be with you today. Sean McDowell filling in for the one and only, the great, Frank Turek. We've got an excellent topic for you today. One of the most common discussions in the media that Christians need to be ready with an answer for is the topic of Pro-life. And it's no secret that we're in a radical time of transformation, where the Pro-life movement is shifting, and we need to adapt and be ready to defend the unborn. Well, our guest today is actually my co-host with the Think Biblically podcast, and a colleague of mine. Dear friend from Talbot School of Theology, Dr. Scott Rae, who is hands down one of the leading Christian ethicists today. Scott, I don't think you've been on CrossExamined before. So, it's my treat to welcome you to CrossExamined radio.

Scott:

Well, thanks, Sean. Really happy to be with you all, and love Frank's show and I'm happy to be part of it.

Sean:

Well, this is a conversation you and I have had many times. But let's jump in and talk about your initial response. I think it's maybe been eight months ago or so. It was last summer when Roe vs. Wade was overturned. Now to frame this for folks, you have been in the Pro-life movement probably three or four decades. I don't want to unnecessarily date you here, Scott. But you've been doing this for a long time. What was your reaction to that ruling?

Scott:

Well, the Dobbs decision, the Mississippi case that overturned Roe v. Wade. My initial reaction was, this is the way Roe v. Wade should have been decided in 1973. Where instead of one law being applicable across all states, the court should have (and legal critics have been saying this for decades) left the decision to each individual state to craft laws governing abortion that reflect the will of the people in that state. Exactly what the Supreme Court did about 25 years later, when they made their decision on assisted suicide.

They said either one was constitutionally consistent, but they ought to leave it to the states to decide. In the aftermath of the Dobbs decision, about half of our states have put into play various laws that have restricted access to abortion. Primarily, because they hold to what we think is the fundamental truth in this, that the unborn have the right to life that needs to be protected.



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Sean:

Okay, Scott, let me play the skeptic with you here a little bit. You said it should go back to the individual states. I can imagine some people thinking, wait a minute, you don't think murder or manslaughter should be held by individual states. You don't think rules against rape should be held at individual states. If this is really an unborn human being, shouldn't we have a blanket protection for life for the unborn, constitutionally down? Why make an exception for this one that we don't for other areas that are arguably comparable?

Scott:

Well, typically, in our legal history, some of the most controversial issues, there's no real debate over whether murder is wrong or whether rape should be outlawed. But on the things that are divisive and contested, those moral issues, I think what the debate is about, is that the court should not be putting out a broad, universal rule that's applicable to all the states. Instead, let each state decide what they deem best, according to the will of their individual voters.

Now, I think you can make an argument why states should have laws that would protect the life of the unborn. But I think in our history of jurisprudence, and I think it's been the wisest course, that we have allowed the will of the people to be reflected, and for states to be responsive to that. So, I think in this case, this is huge progress for the unborn. Of course, the Pro-life battle is not over yet. But it's a significant victory that I think has been won. It raises other questions that I think we need to pay attention to as well, which we'll get into.

Sean:

Yeah, we'll shift into some of those questions. And for those of you watching, we're talking about how the Pro-life, the abortion issue has shifted. And also, how to make an effective Pro-life argument and advance the Pro-life cause today. Now, in some ways, I wasn't shocked when Roe vs. Wade was overturned, just because of the nature of the Supreme Court. But if I go back and I look at where the Pro-life movement has been since really the 1980s, or really maybe the late 70s, in some ways, it's surprising.

And I had a real emotional moment like, holy cow, this horrific ruling has been overturned. That was my first response. My second one was, in some ways, the Pro-life movement has just shifted into a different phase. This isn't over. In some ways, it's really just beginning because we're back where it should have been, like you said, decades ago. Was that your response too?

Scott:

I think, yeah, that's basically correct. And I think what the Pro-life movement has done very effectively, is a two-prong strategy, where they've been at work on the legal front since 1973, largely unsuccessfully. And there have been a group of very faithful, committed lawyers, Americans United for life as an example. Alliance Defending Freedom is another example, that have been at work on the legal front, I think, largely beating their head against the wall for that amount of time. And I remember saying to my students ten years ago, that I don't envision Roe v. Wade being overturned in our lifetime.

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Sean:

Wow.

Scott:

Because the legal precedent had been so solid. The court had several opportunities over the years to reverse it and had shown no inclination to do so. I think this court got it right, to turn that matter back over to the states. So, I mean, I was delighted. I think it did raise other questions. I know other people had different emotional reactions to that. I think it largely reflects the success of the on ground, that's the second prong of this, the on ground movement of the Pro-life movement. Where the at the grassroots, I think the battle over the life of the unborn has been, the tide has been turned over the years. Primarily, I think, through the advent of things like ultrasound technology, particularly 4D ultrasound, that allows physicians to look into the womb like they've never been able to do before. It's this really up close and personal look at the unborn.

And I think what the Pro-choice movement, I think has recognized, is that it's getting harder and harder, to make a plausible case that the unborn is simply a piece of tissue analogous to your liver, or a kidney or something like that. So, I think at the grassroots, it's been it's been very successful in turning the tide of public opinion.

Sean:

Well, as we get into the next segment, we can talk about really where that debate has shifted to. But you hinted at certain things the Pro-life movement has done well. And I'd say, the pregnancy resource center movement is remarkable. And it's significant. And it shows this isn't just about words and arguments, but caring for moms, caring for dads, caring for newborns. I think, obviously, now we see the success of the legal strategy, at least, the advancement of ideas through the legal system. But there's also been this apologetic side that you and I have been a big part of, advancing arguments for Pro-life. Those three things, it seems like we've done well. Would you add anything to that? Would you tweak that? Bottom line is, what have we done well, before we get to where the topic has shifted to today?

Scott:

Well, I think we've done well at making the case apologetically. Although in my view, there's no substitute for technology making the case for us in this. In fact, I think technology has been the best friend of the Pro-life movement, and perhaps even more influential than the legal and the apologetic side of things. Because to see somebody like Naomi Wolf, who 20 years ago, chided her Pro-choice colleagues to stop trying to argue for something that can't be won, that the unborn is nothing more than a piece of tissue. And she took tons and tons of criticism for that.

But I think she was right about that. And I don't think that's taken hold in the Pro-choice side quite like we would have hoped. But I think it's been a significant dent in that view, that has just, I think assumed for so long that the unborn child is nothing more than just a piece of tissue.

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Sean:

Well, seeing that ultrasound convinces many women to choose life. That technology has been powerful. All right, when we come back, we're here with Dr. Scott Rae on CrossExamined radio. We're going to take a look at where the topic is shifting to today, and the debates about over the counter abortion, what's called the abortion pill. See you in a minute.

All right friends, welcome back to CrossExamined radio. I am not Frank Turek. I am Sean McDowell, filling in for the one and only, Frank Turek, today. Our guest is Dr. Scott Rae, a colleague and friend of mine from Talbot School of Theology, one of the leading ethicists, today. We're talking about how the Pro-life movement has shifted. Now in just a second, Scott, I'm going to ask you about this debate going on with over the counter abortion pill, what that means, what's at stake here.

But first off, those of you watching will not want to miss Frank in person on May 6, with Alisa Childers and Natasha Crain at the Unshaken conference. Check out UnshakenConference.com, and this will be at Chino Hills in Southern California, to learn how to defend your faith. All right, Scott, let's pick up where we were last time. This debate has shifted to a drug called Mifepristone. And it's possible I mispronounced that. Explain what that is, as the over counter abortion pill.

Scott:

Yeah, it's commonly known as RU486. That's the shorthand phrase for it. And roughly half of abortions today are done using Mifepristone, or RU486. Basically, it's a drug that expels a growing unborn child in the womb, expels the child from the womb and causes a miscarriage. And the dosage of the drug that's used, depends on how far along the woman is in her pregnancy. And it's really important that the woman get the dosage right, or else there's often a need for some sort of surgical or medical follow up. In in lots of cases, there's a need for that. So, it's being advertised as this completely private, over the counter, do it yourself abortion. And that's a little bit misleading, I think. Because in lots of cases, some sort of follow up from a physician is necessary. And usually, some sort of pre-exam from a physician is medically indicated to find out exactly how far along the woman is in her pregnancy. And you get the doses just right.

So, there's a lot of controversy over this. The FDA has approved this for widespread use across the country until just recently, where about two weeks ago, a district court judge in Texas, invalidated the FDA's approval in Texas, and essentially outlawed the abortion pill. Other states are expected to follow this trend, and the Texas ruling will stand until appeals courts rule on that. The supporters of RU486 have vowed that they will take this all the way to the US Supreme Court. I have no doubt that it will get there, eventually. I think the question is now, I think what's still to be determined is, does the judge's ruling stay in effect until that time comes? Or will an appeals court put a stay on the judge's order? That's, I think, the only thing still left to be determined. But I think that's where the discussion about abortion has gone.

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Sean:

Now, why has it shifted to the over the counter abortion pill, rather than going to say a Planned Parenthood clinic? Is it because it's cheaper? Is it easier? Is it that people sensed that some limitations might come in the Pro-choice movement has been preparing for this? What are the causes driving why the debate has moved towards RU486?

Scott:

I would say it's all of the above. It really takes the third party out of the picture. Ideally for supporters of this, the physician would be out of the picture. And so, it can be advertised as simply a decision for a woman about her own health and about her own body that the state should not be getting involved in, according to the Pro-choice movement. There's an article today in the Los Angeles Times, about how the mental health effects of abortion are being hotly contested now. And that would apply to surgical abortions as well. But I think the main reason that RU486 has taken hold, is the argument from privacy, for one. And it is much cheaper. And it is advertised to be much safer than a surgical abortion.

That might be true in the earlier stages of pregnancy. It's definitely not true in later stages. But I think the mental health aspects are something that the Pro-life movement has camped on for a long time. And I think it's gone under appreciated, the impact on a woman's life and health, just that the abortion decision makes. And that is a really significant part of this that should not be underplayed. And I know we'll get to more of this in a bit. But that's the part of this that is, I think, most hotly contested. The critics of the judge's decision in Texas have basically said that he either ignored or underappreciated, or I'm sorry, overvalued, the mental health ramifications of abortion. I actually think he got that just about right.

Sean:

Oh, interesting. Now, you and I would argue, if there were not mental health repercussions, abortion would still be wrong, because it results in the ending of the life of a preborn human being.

Scott:

That's a significant mental health issue for the preborn child.

Sean:

Oh, yes, and even more than that. Fair enough. Now, you and I interviewed an OB-GYN, Donna Harrison, a number of months ago. She talked about late term abortion and the medical effects that it has. And this was in a briefing before the Supreme Court. And if I remember correctly, she talked about some of the effects. There's a link with breast cancer and having late term abortions. There's a strong link with mental health, anxiety, depression, loneliness. There's a strong link to increased bleeding, and the inability to get pregnant when somebody wants to after they've had late term abortions. But RU486, I think traditionally, it was within maybe the first 10 weeks. And the later FDA ruling shifted it to like 16 or 17 weeks. What kind of mental

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effects are we seeing and/or other health effects on women who have this, even early in pregnancy?

Scott:

Well, I think it shouldn't be a big surprise that we see some of the same mental health impacts that we see when women miscarry. And I think that's largely undervalued and under reported. You ask most women who have natural miscarriages, they grieve the loss of that child, because they've had a sense of bonding and connection. You don't have that connection to things. You have that connection to persons. And so, I think even at early stages, women deeply feel the impact of miscarriages. And I think with abortion, it's I think, maybe a bit more complicated. Though it's true that a lot of women resort to abortion out of desperation, that doesn't mean that they escape this sense that what they did with the abortion decision is somehow causatively different than a natural miscarriage that they had no control over.

And so, I think a good case can be made that the mental health impacts, when the abortion decision is made, are actually a little stronger and more complicated than what takes place in a natural miscarriage. And, of course, the later in pregnancy, the greater the sense of bonding. And I think that's true, even for women who don't want to keep the child. We see this in some of the early cases of surrogacy, for example, where women knew by contract that they were going to give up the child, nonetheless bonded with the child. And some of them actually ended up going to court to keep the child.

This is why infertility clinics today will not allow someone to be a surrogate, who's not been pregnant at least once before. Because you don't know what that's like until you've experienced that. And so, I think that's real. And I think it's time we stop devaluing the experience of women, and what they tell us about the aftermath of abortion. It's very similar to miscarriage. And it's even worse with stillbirth. And I'd say late term abortions probably have a similar impact on the mental health of someone that has stillbirth does.

Sean:

Now biologically, if you just think about it, it's obvious that an abortion is jarring to a woman's body, let alone the unborn. Sometimes we're told it's just another surgery. But if somebody, for example, has a tumor removed, that tumor is an invader that's unnatural, that is destroying the body. To take it out is to help the body operate the way it's supposed to.

But whether a surgical abortion or RU486 is actually jarring the body, a woman's body, from how it is supposed to naturally develop and grow in this symbiotic relationship between the mom and between the unborn. That's at the heart of why it's so jarring and damaging, is that it's stopping violently, this natural development of the woman's body. Doesn't that make sense why we would see not only mental health issues, but also physical issues, like bleeding and other damage to a woman's body?

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Scott:

Yeah, I mean, it makes a lot of sense, I think. And of course, we would say that the central question on this is, what's happening to the preborn child in the womb? As opposed to, what's happening to the woman's body? The damage to the preborn child is irreversible. Now, women do recover from having abortions. Though, I think the response to that is often longer than Planned Parenthood lets on. The standard line of Planned Parenthood is, you come in Friday, and go back to work on Monday. That is light years from the truth. Only somebody, who in my view, is really callous toward the life they're carrying, takes it that much in stride.

Sean:

So, should the Pro-life movement (let me just play skeptic here a little bit) say, well, at least it's not the kind of later abortions that we know rip apart limbs, the kind of violent acts that happen in abortion. We know at this stage, the unborn, presumably, we know is not experiencing pain. Isn't this a positive thing that we're seeing the debate move back towards the pill? Should we see it that way? Or not?

Scott:

I'd say no, not really, because it obscures the central point. Whether the unborn child can feel pain or not is irrelevant to this. That's an emotional argument, not a metaphysical one. In my view, it just is not relevant to this. In fact, we see much earlier than we expected, when surgical abortions take place, the child actually cringes and tries to back away from the instruments because they have some sort of sense of what's going on. But I'm not in favor of anything that is going to obscure the central point that we're making about the unborn.

Sean:

All right, folks, we will be back. This is CrossExamined radio. Sean McDowell, filling in for Frank Turek. When we come back, we're going to talk about how we need to pivot as a Pro-life movement and make a basic case for life. We'll see you in the next segment.

All right, friends, welcome back to CrossExamined radio. Sean McDowell, filling in for the one and only, Frank Turk. Today we're talking about how the Pro-life movement has shifted, what bills are at stake, and then how to make a good Pro-life case. Today, our guest is my colleague, actually my co-host for a podcast we do together called the Think Biblically podcast. Dr. Scott Rae, one of the leading authorities on this issue, has been speaking, writing and debating for decades. Scott, let's jump into this case that has taken place in Florida. Because I think it's really indicative of how the Pro-life movement is shifting. So, talk about what happened in this case and what it means.

Scott:

Yesterday, the governor of Florida, signed into law, a bill that would ban abortions at the six week mark. After six weeks, abortion will be illegal in the state of Florida. Now, there's a little bit of legal wrangling that still has yet to come before that law is enforced, because Florida has in place a law that was similar to the one in Mississippi, that was the basis for the Dobbs case that

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overturned Roe v. Wade, that has a 15 week ban. That's at the 15 week point. So, the state Supreme Court in Florida will have to invalidate that 15 week law before the six week law can take effect. So, it's unclear when that will take effect.

But the governor that passed the House, the legislature last week in Florida and the governor actually signed it yesterday. It was front page news, as you might expect. They also put into law, restrictions on the availability of RU486. So, it can only be made available with a doctor's prescription. So, they essentially ended the over the counter abortion era in Florida. Now, chances are, that law and others will be challenged. But given the precedent that's been set by this current court with Roe v. Wade, I think a constitutional challenge to that law is unlikely. So, I think it's likely to stand and actually could be precedent setting. In fact, the legal experts expect that other states that have similarly constructed legislatures, similarly conservative legislators, will do something similar.

Sean:

Just to make sure folks are following this, when Roe vs. Wade was struck down last summer, it put the authority back to the states. So, the states could decide to make abortion legal through the entire pregnancy or make it completely illegal. Florida had legislation already pending, and has passed, signed by the governor, that says, any abortion physically in the state of Florida, either somebody has the procedure done or orders RU486, is against the law. So, in other words, the unborn is protected by the law of Florida, all the way down to six weeks and beyond.

Scott:

And it's essentially protecting the unborn from conception forward. Because at six weeks, that's one of the earliest points in pregnancy that a woman actually finds out that she's pregnant. Usually when she finds out, she's about six weeks along. So, I think it essentially outlaws most first trimester abortions as well.

Sean:

So, why would they go to six weeks rather than just say protected the entire way? I knew there was a clause that says incest and rape, they made an exception in Florida for that. Why six weeks? Why not just outlaw it entirely?

Scott:

I think because essentially, they've done the same thing. I think they may be allowing an open door for a woman who is raped and wants to take the morning after pill preemptively. I think that's one of the fears of the Pro-choice movement is that the Morning After pill will be the next domino to fall in this. So, my guess is, they want to leave the door open for women who have been victims of sexual assault, in cases like that.

Sean:

This is one ruling, but we've also seen rulings in Michigan that seem to go the opposite direction. Is this what we're kind of seeing? The dominoes falling, states just solidifying roughly

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half really conservative, half really liberal, and probably not a lot in the mid, kind of, in between. Is that how we're probably going to see things play out?

Scott:

Yeah, I think that's right. For example, our home state of California here, they not only solidified the right to abortion for all nine months of pregnancy, but the state was declared an abortion sanctuary for women who are coming from other states. California has also been stockpiling RU486, in the event that it would become outlawed in some states. From the perspective of a Pro-choice person, that looks to have been a very smart move, because the availability of that is now restricted in Florida, in ways that they didn't expect. So, I think you're seeing it become more hardened, and we may see extremes on both sides.

Sean:

Now, part of the Florida ruling that I thought was strategic and good, was that it included a lot of money to help women who are pregnant. So, they're not just saying, hey, we've ruled this out, good luck. They're putting their money where their mouth is, so to speak. And I forget the exact funds, and I don't understand how it would translate in Florida. But the idea of saying, number one, we're going to protect the unborn, but we're also going to financially help women with unwanted pregnancies. It seems like a wise move, and just a good move going forward, and good precedent for other states.

Scott:

Well, I think the state's obligated to do that. And I think the Church is also obligated to participate in that effort as well. And I think it's largely going under publicized, what the grassroots side of the Pro-life movement...which is largely been religiously grounded, either evangelical Protestants or Roman Catholics. All of the things that are being done and have been done on the ground for 20 or 30 years...the crisis pregnancy movement is wide widespread across the country, yet super under publicized. There are other movements in effect, that provide assistance to women, and the children. If women decide to keep the pregnancy, there's lots of things that are available to provide assistance for them. And I think that's a part of our obligation.

Because I understand, women in some of these southern states, for example, feeling like they have no alternative to a desperate situation. And the goal, I think, is for women never to feel like they are so desperate, that they have to resort to ending a pregnancy to get out of their desperation. And we're not saying that when a woman's pregnant, that she has to become a parent, that she has to become a social parent. Now, she is a parent, actually, once she becomes pregnant. But you can end a relationship with your child by doing things other than ending the pregnancy and killing the child. And the goal, I think, is for no woman to feel so desperate that she has to resort to that. And so, I think the idea that abortion becomes rare, I think, is a thing that we have in common with lots of parts of the Pro-choice movement, [those] who see it as a necessity, but not something that's glorified or valorized.

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Sean:

In some ways, there's been a lot of people criticizing any political movement by Pro-lifers, that we should stay out of politics. It seems like there's kind of a political angle, Roe vs. Wade, and what we're seeing in Florida is a positive step for life. But there's also the Church's role, and individual roles, and nonprofit things like pregnancy resource centers. It seems like all of these play an important role in this. So, it'd be unwise to put all our chips, so to speak, in the political movement. But it would also be unwise to ignore that element. We saw that voting and politics is one lane amongst others, that can result in the protection of the unborn. So, how do you balance those different factors as Christians look at the Pro-life movement going forward?

Scott:

I think it's incumbent on every follower of Jesus, to take this issue seriously. I don't think this is something that we can say is just optional. And if I feel like getting involved in it, I will, and if I don't, I won't. The life of the unborn is, I think, one of those fundamental ethical issues, that as a church, we have to stand for. Now, at the same time, I think we are obligated to care for the women who are impacted by having unwanted pregnancies. And it's not enough, in my view, to say, well, you knew you could get pregnant when you've had sex. Therefore, suck it up, you're on your own.

I think we have an obligation to care for many of these women who are in very desperate circumstances, who don't have the means to travel out of state, and don't have the means to raise an additional child. And so, providing the medical care that's necessary, providing the pastoral care for lack of a better term, the spiritual care, and helping care for these women after the babies are born, if they decide to keep them, and then caring for the children, especially if they are put into the foster care or adopted out to families.

I think the prospect of somebody having a baby and putting the child immediately into foster care, I think is a relatively unattractive one. And therefore, I think it's incumbent on the Church, I think, to step into the gap there, and to provide those fostering services. And groups like Families Forward, they've taken up route in many churches around the country. That's a great organization that provides temporary foster care for women in a wide variety of circumstances that need it. So, things like that...I think if somebody feels a calling to be involved in the political arena, good, so be it. I suspect most followers of Christ are not going to have that particular sense of calling. I think we're all called to vote our convictions. But they're lots of other things that can be done that don't require specialized training. They don't require any additional education. They just require a willing heart and some time and energy to do it.

Sean:

I appreciate this all hands on deck approach that you're talking about. That this is a holistic issue. We need to care for the unborn, we need to care for women. We need to be engaged in the political process. We need to put our funds where our mouth is, so to speak. We've seen positive gains already, which is super encouraging, but we can't give up. When we come back for our last segment, Scott, let's take a look at the most common Pro-choice arguments we

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hear, and offer our responses to them. So, join us. I'm here with Dr. Scott Rae, filling in for Frank Turek at CrossExamined radio. We'll be back in just a few moments.

Welcome back to CrossExamined radio. Sean McDowell here, filling in for Dr. Frank Turek. In this final section we have together, we're going to talk about and respond to the most common Pro-choice arguments. And we put a link below, because our guest today, Dr. Scott Rae and I spent about an hour walking through the top 12 Pro-choice arguments. Here, we want to equip you with quick responses to them that might come up in conversation.

Scott, here's a simple case that I often make. Let's lay out the positive case very quickly, before we get to some of these objections, for Pro-life. And there's different ways to do this. I'll give a few steps. Number one, humans get human rights. Number two, the right to life is a human right. Number three, the unborn is human. Number four, therefore, the unborn has the right to life. That is a simple, common sense case. I didn't quote the Bible. I didn't use Scripture. I just appealed to human rights. And, of course, Scripture backs this up. What's a basic Pro-life case that you make?

Scott:

Well, here's what I would suggest, we start with what's medical. We say, from the point of conception, the unborn child is a living, distinct entity human being. No debate about that. Any embryology textbook will tell you that, that from conception forward, that's it. Second point, and this is where I think for the person who takes the Scripture seriously, this ends the discussion. But the second point is that, ending a pregnancy stops the handiwork of God in the womb. No doubt. I mean, it does a lot of other things, but it stops God's handiwork in the womb. For a follower of Christ, that should be enough. I don't think we even have to show that the unborn child is a person, for that argument to stand.

Third, there is no point between conception and birth, that is a logical place where you can say, now you have a person, and one day before, you didn't. Even birth is a change of location, implantation is the same. Viability just reflects medical technologies has nothing to say about what the unborn child is like. Fourth, being a person is something you are, not something you do. You don't have to achieve a certain set of qualities or characteristics in order to be designated as a person. People under general anesthesia don't have any of those qualities: rationality, relationality, self-conscious, things like that. Even some people who are in a really deep sleep don't have those characteristics.

And then fifth, (the best way to do this an illustration), assuming that the unborn child is a person, then the unborn child not only has the right to life, I think you can make an argument that the unborn child has a claim on the mother's body for what he or she needs to flourish and mature. Frank's going to get some grief about that one, but I think it's true.

Think about a couple who's got six-month old twins, and they're going crazy trying to care for these twins. They're not getting any sleep and they decide, I have to get away. So, we're going

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on vacation, we're going to Hawaii for three weeks. But all they do is stack a big stack of diapers, put a bunch of bottles in the fridge, pat the twins on the head, and say, we'll see you in three weeks. They don't make any provisions for care, nothing like that. Who's likely to meet them on their return? Angry neighbors, angry in-laws, the police, maybe the district attorney. And they would be charged with a number of criminal offenses.

And the reason they would do that, is because the rights of the child had been violated, because those newborn children have a claim on the parents for the resources that they need. Now, if the parents can't provide, then the state steps in and puts them somewhere else. So, even if we concede that the unborn child is a person, which the Pro-choice movement is increasingly doing. We've seen this lately, too. I think then you make an argument, if there's no difference between a newborn and the unborn, child abandonment statutes are to apply to the unborn, like they are to a newborn.

Sean:

That makes sense. Now our friend, Katy Faust, at Them Before Us, says, when you deliver a child, when a woman does at the hospital...say you see a bunch of children being cared for in the nursery. You don't randomly pick out a child. You have the responsibility to the child you conceived and delivered, minimally, to make sure that child is okay. That rests on you, secondary, somebody else by default. So, if you have that responsibility to the child, then that child has the right for you to care for it as the parents. So, I think your case is solid.

Now, let's give some bullet point responses to some of these objections. For example, here's one. When people say, well, isn't abortion just healthcare? And my quick response is, what is healthcare? It's care that's meant to improve the life of a patient. How many patients are there when a woman is pregnant? Every OB-GYN will tell you, there's two. So, healthcare is to improve the life of one of the patients, and abortion violently ends it, then abortion cannot be considered healthcare. It's really that simple to me. Would you add anything to that objection?

Scott:

Yeah, this assumes that the unborn child is no different than a tumor that has to be removed. Removing a tumor is healthcare. Ending a pregnancy is not. And I'll just leave it at that.

Sean:

Okay, so how about this one? Just yesterday, I was putting on Twitter a short video clip from our interview talking about this and somebody said, here goes two men wanting to control women's bodies. First off, I thought, well, my wife is also Pro-life, so, this argument wouldn't work for her. This is clearly just attacking the source, rather than dealing with the argument. What would you add to that?

Scott:

I'd say, in 1973, it was nine men who decided Roe v. Wade. Nobody's disqualifying them from that because of their gender. The other thing I'd say, that's an ad hominem argument. Which I

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describe as attacking the person and not the position, usually resorted to only for someone who's run out of other arguments and is intellectually desperate. So, as a friend of mine put it, an ad hominem argument is when you're on the horns of a dilemma, you shoot the bull. And that's, I think, what is done here.

There may be some crazy Pro-lifers for whom that's true. But most Pro-lifers want to protect the life of the unborn. They have no desire to control women's bodies. And I think we have to make a distinction between...the unborn child is not a part of the woman's body, technically speaking. It's a distinct entity, and in 50% of cases, with a different gender. It's dependent on the woman's body, and those are two really different things. That degree of dependence only changes slightly once the child is born.

Sean:

Okay, how about this one? I also put another clip from our conversation on Twitter. Somebody responded and said, well, are you in favor of banning assault rifles? If not, don't call yourself Pro-life. And I thought, obviously, we've had some school shootings recently, that are very serious, Pro-life kinds of issues. But the difference here is, nobody's saying we should have school shootings. Nobody's saying that. Both sides agree that we want to limit the violence and misuse of guns. One side says, the best way is to get rid of, or limit access to guns. The other might say, having more guns, so to speak, and more people armed, will minimize it. Now, we could look at the facts and have that debate. But it seems like it's a totally different issue, that somebody could be Pro-life and pro guns, and there's not necessarily a contradiction there in my mind.

Scott:

Nobody is saying school shootings should become safe and rare. This is a debate about the means, not the ends. We agree on the ends. We disagree on the means to get there. There's a legitimate place for self-defense. I wish we would have that same right given to the unborn, to defend themselves in the womb. Which is supposed to be the safest place for them. But I don't think those are necessarily inconsistent. Now, I think we can debate about whether individuals ought to be allowed to own assault rifles. I think that's a legitimate debate. I wouldn't be unhappy if the law prohibited those. But I don't want people to lose the right of self-defense.

Sean:

Fair enough. And that's a separate debate, apart from being Pro-life that we could have. By the way, you said safe, legal, and rare. That came from Clinton in the 90s. Now people are saying, shout your abortion. Nobody is saying, shout your school shooting. No one on either side is in favor of this. How about the last one that we get, is that you can't be Pro-life but also pro death penalty. Is there a contradiction there? Because to me, it seems like Pro-life is saying we want to protect innocent life. But if somebody has done a murder or some other crime that warrants the death penalty, that's actually holding the value of life up. That would be the arguments. Your thoughts? We got about 30 seconds.

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Scott:

A convicted murderer is different than any innocent person, much less an innocent, unborn child in the womb, who's not done anything yet. So, you know, that's just a case where the premise is wrong, that the unborn is somehow equivalent to a convicted murderer. And I think you can make a good case that in order to protect life as best we can, we have the strongest possible penalties for murder, and that the life for life principle, is something that the Scripture upholds.

Sean:

You want in depth responses to the top arguments for Pro-choice. Check out the link below. Scott and I talk about this. And don't forget the Unshaken conference. UnshakenConference.com, Chino Hills, May 6. Frank will be there, Alisa Childers, and Natasha Crain. Sean McDowell filling in for Frank. Hope you enjoyed this episode on the topic of Pro-life. See you soon.

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