

**ABORTION ATTITUDES: LEGALITY VERSUS RELIGIOUS AND PERSONAL MORALITY**

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**INTRODUCTION**

A law passed in March 1970 in the New York State Legislature made it easier for women to obtain legal abortions, but has it changed people's attitudes toward abortion? We will consider attitudes of persons in the 15-45 year age cohort who could be faced with a decision to have an abortion. Does a well-informed person need a law to influence his/her opinion? Or is abortion a matter of personal or religious morality rather than a legal matter? When a woman faces a decision about accepting a pregnancy, is this highly personal matter more affected by personal beliefs or by the laws (GAP 1970)? If this generation has formed opinions independent of tradition or parental influence, to what extent has the law operated as an instrument of social change?

According to cognitive dissonance theory, "... the greater the dissonance between an individual's continued opposition to a program, behaviorally and attitudinally, and other elements of his cognitive structure, the greater is the probability of his complying and accepting the program." (Colombotos 1969 332) Spencer and Sumner claimed that legislation which is not rooted in folkways is doomed to failure, but Allport saw law, official policies, and executive orders as initiating social change rather than simply mirroring public opinion (Allport 1958 437). We lack before and after studies on the effects of abortion legislation on people's attitudes (McFadden 1972; Howe 1971).

The New York State Abortion Law is one of the broadest in the United States. Public opinion polls show that abortion is still unacceptable to large numbers of Americans (Donovan 1972 23), and for more than a year, opponents including Catholic-Dominate Right to Life Groups, Friends of the Fetus, Birth Right Organizations, and some Protestant and Orthodox Jewish Groups have been approaching legislators, conducting letter-writing campaigns, and mustering support to repeal the legislation. The Assembly passed the repeal abortion bill 79 to 68, but Governor Rockefeller, having supported the abortion legislation two years earlier, vetoed the repeal

bill with a strong message:

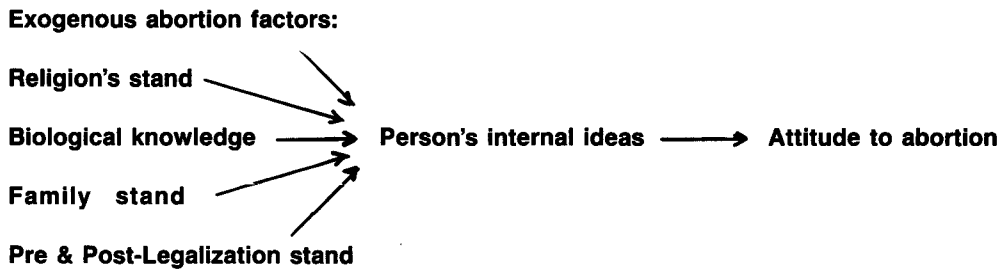
I do not believe it is right for one group to impose its vision of morality on an entire society ... repeal would not end abortions, it would only end abortions under safe and supervised medical conditions. Every woman has the right to make her own choice. (1972 78)

The number of legal abortions rose to 200,000 per annum, and mortality for mothers and infants plummeted 50 percent the first year, and an added 20 percent the second year. The number of illegitimate births also dropped, and supporters of the abortion reform felt confident that they had proven their point (Rosenthal 1972 1; McFadden 1972 1). These figures do not prove that more people are having abortions because there is no reliable data on illegal abortions performed before the new law took effect. Nor is this evidence of a change in public attitudes. Persons seeking an abortion need not fear high medical risk with unqualified abortionists conducting illegal clinics and kitchen surgery. Other studies of abortion from different viewpoints have not considered attitudes of women of child bearing age and men in the same age bracket (Hall 1970; Lader 1966; Pollman 1969; Wilke, Wilke 1971)

**METHODS**

A 44-item self-administered questionnaire was given to 450 persons with 423 responding. Demographic variables included age, sex, marital status, number of own children, racial identity, occupation, education, religion, and number of children in the family. Knowledge on the new law, limitations imposed by the old law, and effect of abortion on ability to have another child was treated in 3 items. There were 10 case study items and 8 items on case studies related to legal abortions to insure obtaining more meaningful answers. There were 11 items on personal concern as a criterion for abortion as opposed to medical and legal concerns. These items covered degree of agreement with respondents' religious attitudes on abortion, and whether the respondent would condone abortion for self or the partner before and

**FIGURE 1: CAUSAL MODEL FOR ABORTION ATTITUDES**



**TABLE 1: RESPONDENTS' AGE RANGE BY SEX (Percents)**

Age bracket	Male	Female
15-21	16	23
22-34	22	19
35-45	11	9

after the new law, which reflects the respondent's own stand on abortion. Control questions included: "When do you think life begins?" One disagreeing on this point might consider life too sacred to terminate at any stage of pregnancy. "Have your attitudes on abortion changed? Explain."

**TABLE 2: ATTITUDES TO ABORTION BY RESPONDENT CATEGORY (Number of responses)**

	Favor	Oppose	Chi <sup>2</sup>	df	p
Religion			31.5	3	.001
Jewish	170	29			
Catholic	55	43			
Protestant	21	11			
Other	68	24			
Religious activity			9.5	1	.002
Active	104	54			
Inactive	210	53			
Sex			1.2	1	.267
Males	164	46			
Females	154	57			
New abortion law effect			7.4	1	.006
Before	130	80			
After	157	53			
No of Children in family			15.7	2	.001
1-2	180	42			
3-5	123	53			
6+	11	12			

Questionnaires were randomly given to persons in Lower East Side Manhattan, the Katskill Mountains, Brooklyn, and Queens College. Of these, 25 refused to cooperate, and two returned incomplete and unusable questionnaires. Those recording no opinion were excluded from analysis.

The dependent variable was the effect of the New York State legalization of abortion on respondents' attitudes toward abortion. Attitude is defined as a predisposition to think, feel, perceive and act. The conceptual model is shown in Figure 1. According to this model, a person's attitude towards abortion depends on internalized ideas about abortion which are affected by external factors. Table 1 shows the distribution of respondents by sex and age level.

**ANALYSIS AND DISCUSSION**

The main consequences of this research are reflected on Table 2. Religious orientation makes a significant difference in attitude toward abortion, as does the level of religious participation. There appears to be no distinction by sex where the ratio of favoring the abortion law is about 3 to 1 for both sexes. A primary finding is that the promulgation of the new law did have a significant positive effect on people's attitudes. Finally, the number of children in the respondent's family appears to be inversely related to a favorable attitude toward abortion. It appears that past behavior

and frequency of childbearing have a measurable effect on attitudes to abortion.

The relation of the respondent's sex and knowledge of abortion laws and consequences were analyzed from responses to these questions:

Did you know that anyone can obtain an abortion in New York State under the new law until the sixth month of pregnancy?

Did you know that under the old abortion law, abortions were only permitted in case of threat to a woman's mental and physical well being?

Do you think that an abortion, if done properly, would ruin a woman's chance of having a child in the future?

If there were positive answers to the first two, and negative answers to the third question, the respondent was considered knowledgeable on the abortion issue. The relation was not significant by sex, and the ratio of those aware to those unaware was 3:1.

### INTERPRETATION

The religious factor appeared quite important in this population. The Catholic Church has taken a strong stand against abortion although most Catholic respondents do not agree with this position. Among Jewish groups, the Orthodox group takes the most restrictive position, and the Reform group is the most liberal. Positions of Protestant denominations vary. In 1961, the National Council of Churches approved hospital abortion "when the health or life of the mother is at stake." The American Baptist Convention "recognizes that abortion should be a matter of responsible personal decision." (May 1968) The Protestant Episcopal church and the Church of England (Lambeth Conference 1968) allowed abortion at the dictate of strict and undeniable medical necessity, broad enough to cover health and life. The Department of Christian Social Relations of the Episcopal Church stated that abortion is probably decided among Episcopalians based on the individual's moral judgment, with family, parish priest, and the physician (Friends 1970).

Since most state legislation fails to define *health* as grounds for abortion, the laws often conflict with medical judgment and medical practice. Modern physicians add the dimension of responsibility to promote and preserve health, which is now described by the World

Health Organization as "a state of complete physical, mental, and social well-being, and not merely the absence of disease or infirmity." Doctors are likely to consider not only whether the woman might die or suffer serious injury, but denial of an abortion request would be in terms of the well-being of the woman, her children, and her family if they are forced to live in greater poverty and pain with an unwanted child or with an illegitimate child.

The majority of the respondents who answered the illustrative cases felt that an abortion was up to the woman and her doctor, and most agreed that if a doctor advised that a child would be deformed, she should be able to have an abortion. The same opinion applied to victims of rape. Most felt that an abortion should be performed in this case both before and after passage of the new law.

Personal and moral beliefs also affect when abortion should take place, since many respondents were ambivalent regarding the question: "When do you think life begins?" those who stated that life begins after birth were more inclined to approve of abortion. This question has been a crucial factor in the abortion issue. Biologists cannot say definitely, "At this point, life begins."

The twentieth week has special significance. Before that time the fetus is incapable of independent life; thereafter, it has a bare chance of survival outside the womb. British Statute Law considers the beginning of the ability to survive outside the uterus as 28 weeks.

### CONCLUSIONS

One's detreee of education affects the attitude on abortion. The less education the respondent had, the higher the probability of opposing abortion. The effect is reversed for size of family, with increase in family size, as indicated by number of children, the higher the probability of opposing abortion. Under conditions of underpopulation and unused land in an agricultural society, a large family is an advantage. It provides additional workers and the strength of numbers. Under industrial conditions, and overpopulation, a large family is a serious economic disadvantage. This is particularly true if the mother's labor is required to maintain family income and sustenance. These practical issues relate directly to

questions inherent in present legal reforms. From July 1970, abortions have been legalized in New York State. In a general sense, the passage of the law has had significant effect in changing public attitudes. The effect of this change was to strengthen the pre-existing majority which favored more permissive abortion laws.

The basic hypothesis regarding attitudes in favor of abortion was supported. However, some parts of the construct were difficult to measure because they dealt with ideas that were too intangible. We did find that religion, education, biological knowledge, and family size affected a person's attitude. The hypothesis that age would affect attitude toward abortion was not supported within this cohort of child bearing age. Many moral issues remain unanswered. Should the reduction of unwanted pregnancies be encouraged by freer access to contraceptives and abortion? Would the wider availability of abortion laws encourage sexual promiscuity? Is opposition to reform based more on fear of sexual irresponsibility and license than on legal concern to protect human life? If so, is it right to use the law to enforce morality? Should everything that may be ethically wrong be legally prohibited? Should legal reform be supported because of the evil it corrects, even if some results cannot be justified morally?

Moral aspects aside, this study clearly shows a general acceptance of an abortion law which has been encouraged by legislative recognition of the medical and social needs of the patient. Whatever the answers to these questions, the national trend of opinion is to favor the right of abortion for personal or medical reasons. National samples taken in Gallup polls in November 1969 and December 1972 indicate a 6 percent increase in those favoring abortion, from 40 percent favoring at the earlier time. The 1973 Supreme Court decision asserting the private right of women immediately concerned to determine this issue for themselves will probably accelerate this shift.

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