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Abortion: Part XII - Japan

Paul V. Harrington

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contrary to the Encyclical’s teaching has an invincibly erroneous conscience, I would want to estimate the matter at this level of magisterial authority especially, and not only at the level of philosophical argumentation.

This would mean that the penitent who in grave matter is lacking evaluative knowledge whether habitually or only actually in the concrete situation is according to traditional terminology acting without the sufficient reflection and therefore without the full consent of the will requisite for grave sin.

THE PASTORAL ROLE OF THE PRIEST

One of the primary duties of the confessor is to achieve and manifest a Christlike, compassionate understanding of the penitent and his problems of daily Christian living. One of the primary duties of the priest-representative of Christ and His Church is to teach Catholic doctrine clearly and without ambiguity. One of the primary duties of the priest with regard to Humanae Vitae is by word and example to educate the faithful to a proper understanding and an acceptance of the Encyclical’s teaching. All of these duties need to be and can be reconciled with one another.

Some national hierarchies have come out publicly in favor of at least a “good faith” application to an in-vincibly erroneous conscience, when couples after sincere prayerful study and because of the present acute controversy feel they cannot accept the Encyclical’s teaching. It seems unreal, then, to argue that for a confessor to grant absolution to such a penitent, determined in good faith to continue acting contrary to Humanae Vitae, would involve grave scandal. But at the same time we can expect the confessor to manifest his disapproval of anti-Catholic reasons for such an act and to make sure that nothing he says leaves the impression he is approving the particular illicit practice. Gradually through education in and outside of the sacrament of penance we may be able to teach the faithful to a full understanding of their obligation to abide by the Encyclical’s teaching.

Pope Paul himself in the encyclical compassionately recognizes the difficult practical problems of conscience and of daily living facing married couples today. He even mentions that “...to many the teaching of the Church will appear to be even impossible to observe...” (Encyclical, No. 20). Following the Pope’s own observation, it seems that the confessor may tolerate such a judgment in favor of the penitent’s continuing use of contraceptives without prompt subjectively grave sin. Therefore, although a couple accepts the teaching, they may sincerely judge it simply impossible for them to observe the practice. Again the confessor cannot approve of the behavior and he must explain that the reason he is giving absolution is their sincere judgment of impossibility of observance.

In both of the above cases, the “good faith” situation hopefully will be only temporary, that is, until the educative process can enlighten all the faithful to an acceptance of Humanae Vitae. If we do not put a strong emphasis on the duty to lead the faithful to an acceptance of the Encyclical’s teaching, the Bishops and priests by their silence, if not by this guidance, may lead the faithful to ignore the voice of the Vicar of Christ, and therefore to ignore the word of Christ in today’s world.

Abortion - Part XII - Japan

Before deciding to liberalize existing abortion laws or to legalize abortion completely it would be useful and necessary to study what has been the result and the effect in countries and states that have had actual experience with liberal laws or easy abortion.

JAPAN:

We shall begin our investigation with Japan because this country has had either an unique and unusual experience: legalized abortion for purposes of controlling population.

In the mid-nineteenth century, Japan, consisting of four islands, was basically an agricultural country with little or no industry and had approximately thirty million people. During this period, there was only a limited increase in population because of a high infant mortality, artificial abortion and a type of infanticide. However, with a national program, geared towards industrial and military growth, emphasis on education for all children and prohibiting infanticide and abortion, the population increased, in fifty years, to fifty million. Japan, victorious in wars with China and Russia, became a leading power in the world in the early part of the present century and, with this upgrading, came an increase in population up to and beyond seventy million.

Between the First and Second World Wars, there was pressure put on the national government to curb the population increase but the conservatives, who controlled the government and who were primarily interested in becoming a strong military power, refused to adopt any program of contraception. In fact, Margaret Sanger was not even allowed to visit the country.

After being defeated in the Pacific War of 1941-1945, Japan lost Manchuria, Korea and Formosa and, with the return of the soldiers and repatriated citizens, there were eighty million people on the original four islands. This amounted to one half the population of the United States but it was crowded into one twenty-fifth of the area of the United States. Population restriction was considered urgent.

In 1948, the Diet passed the notorious mother-protection law, entitled the Eugenic Protection Law, which allowed abortion even for economic reasons.
This law also provided for voluntary sterilization and the public sale of contraceptives. The law was amended in 1952 in order to make abortion even easier. Hardly any reason was required. It was stated that any woman could now have an abortion at will, if she did not desire to give birth.

In 1952, Doctor Koya, the Director of the Institute of Health, was disturbed by the large numbers of abortions and the Cabinet considered abortion dangerous. Thus, a national program of contraception was initiated. Now, 815 health centers have been established and there are over 50,000 midwives, trained by the government, prepared to counsel the women.

In twenty years, the birth rate in Japan has dropped from 34.3 per 1000 population to 17.5 per 1000 population. There are about one hundred million people at present. Japan is now the fifth most dense country in the world with 682 persons per square mile.

In 1965, there were 1.8 million babies born; this was the largest number in any year since 1953 and represented an increase of 6% over 1964. The growth rate was 1.04% per year between 1960 and 1965 as compared to a growth rate of 1.9% for the entire world.

After the passing of the Eugenic Protection Law in 1948, the number of abortions increased from 246,100 in 1949 to more than 1,170,000 in 1955, and leveled off at 1,035,000 in 1961. This, however, represents only the registered abortions performed each year. It is estimated that the total number of abortions—both registered and unregistered—is no less than 2.3 million a year and maybe very substantially higher. It is strange that in a country which has such a liberal abortion law that there would be so many unregistered abortions. The answer given is that many doctors do not wish to pay taxes on the fees received for their abortions. Also, the parents wish to avoid the cost of compulsory mortuary services.

An abortion could be performed for 3000 yen or about $8.30.

The legal abortion rate in Japan in 1949 was 3 per 1000 population. If this were to be transferred to the United States and based upon a population of 149,000,000 in 1949, we would have had 447,000 abortions. In 1961, in Japan the legal rate was 11 per 1000 population and, in the United States with a population of 183,000,000 that year, there would have been 2,013,000 abortions.

Statistics at the Welfare Ministry of Japan indicate that there was one abortion for every two births in 1965—a fifty percent loss of all pregnancies.

After almost twenty years of legalized abortion in Japan, some very clear results and effects are observable, which relate to the population of the country, industry and business, the health of the women, the mood of the people and the social problems of the young.

It must be remembered that legal abortion was introduced in Japan primarily to control births and reduce the size of the population. It must be admitted that, in this particular respect, the program of encouraging abortion has certainly been a success; it has reduced the birth rate by one half. But, this is not an immense blessing and has its own liabilities. If this trend continues, Japan, as a nation, would disappear in a few hundred years; business and industry would suffer serious employment problems— not having any labor reservoir from which to draw—and this would have a very direct reaction on the economic structure and the social future of the country; finally, the population would be aging and an ever-increasing responsibility for the caring of an ever larger elderly population, with all of the distress problems of the aged, would be placed upon an ever dwindling younger generation.

While legalized abortion was established under a eugenic law, the large numbers of abortions are sought for reasons that have absolutely no relationship with eugenics. Most abortions are requested for economic, medical and personal reasons.

In Japan, abortion is permitted up to the eighth month of pregnancy. What has been the effect of abortion on the health of Japanese women? One summary showed that twenty-six percent of aborted women reported that their health had been adversely affected with another sixteen percent refusing to answer. Another survey of 1,712 legal abortions demonstrated that slight to severe health complications resulted in forty-seven percent of all cases with the incidence of complications being somewhat higher in instances of repeated abortion.

The complications include: infection, chronic bleeding, tumors (sometimes malignant), menstrual disorders, perforation, traumatic lesion of the cervix, hormonal imbalance, involvement of the sympathetic nervous system, neurotic and neurovegetative disorders, high incidence of sterility following the first abortion, an increase by four hundred percent of gynecologic pregnancies in women who have had an abortion. Some women, after having abortion, complain that they always feel tired, that they cannot rely on their work as efficiently, that they experience cramps.

It is evident that the liberal abortion program in Japan has taken a very serious toll on the health of aborted women.

As mentioned previously, there are a great many unregistered abortions in Japan. Many of these are performed in unauthorized clinics without any previous appointment, without any registration of name or identity and for a price that is subject to bargaining by patient and practitioner. Abortions, performed under these conditions, have been described as inhuman and degrading.

The experience of Japan very clearly proves that, no matter how liberal the abortion laws are and how many hospitals and clinics are established for the purpose of performing abortions and how well-trained and knowledgeable the medical staff and the paramedical staff is, a large and ever-increasing number of women will go to unauthorized places and put themselves at the mercy of unskilled personnel operating in deplorably unhygienic conditions with obvious detriment to their health and life. This is the experience and we must keep this in mind when we listen to the proponents of legalized abortion laws who tell us: that, with a simple change in the law, abortion will become respectable, all abortions will be done under the best antiseptic surroundings, with the latest technical knowledge and by the most skilled and experienced doctors; the professional abortionist, with little skill and operating under miserable and degrading conditions, will be put out of business; the darkened room at the end of a dead-end street or alley will cease to exist. Such dreaming! Such delusion!

It has been reported that abortion is so popular in Japan that it has become fashionable and has created an "abortion mood," which has in-
fected family and social life, undermined the relationship between parents and children, with the result that children experience a lack of parental love and turn to anti-social behavior, crime and delinquency.

Professor John Nishinoiri of Waseda University in Tokyo, speaking at the Asian Population Conference in New Delhi in December, 1963, described the situation: “The mood for birth control is now so strong that people who fail with contraception resort to abortion. By now we have maybe two million abortions a year. A recent survey in Nagoya indicated that only one out of three women had succeeded with contraception. The other two-thirds had one or two or three or even four or more abortions.” He concluded by saying: “I think our government would be willing to change its policy now, but it will have to change the mood of the people first. That is not easy now once the people have the mood for birth control.”

The official Japanese government has become very disturbed and worried about the unfortunate results of the large-scale abortion phenomenon and is now seeking an antidote but, as already noted, when a people become more attracted towards non-life and even the suppressing of life already conceived, the government can do very little to reverse the program. The question of a “mood for abortion” is intangible, elusive and hard to measure but very real and very devastating. The government is trying to turn its people away from abortion and interest them in contraception. This in itself is clear indication of the disenchantment with a broad and easy abortion law. However, the inevitable fact remains that where the accent and the emphasis is on the control of birth and population, abortion is the remedy sought for the failures of contraception.

The Japanese Minister of Welfare has referred to abortion as “an anti-social practice eroding the physical and moral health of our nation.” The Japanese government and the Japanese Family Planning Federation are worried about the increasing number of abortions in their country and no longer encourage them. The Ministry of Welfare and Public Health has completely changed its attitude towards abortion and has officially warned that artificial abortion is not only not harmless but entails many undesired disasters and should be avoided.

In 1962, an association for the Protection of Life was formed in Tokyo and Osaka. Its primary purpose is to educate and inform the citizens that artificial abortion is immoral and harmful to the health of mothers.

We can and we ought to learn some very important lessons from the Japanese experience with abortion:

1) The broader and the more indulgent the law, the greater will be the numbers of legal abortions.

2) With even the most liberal law, illegal or unauthorized or unregistered abortions will still continue. Legalizing abortion will not extinguish illegal abortions.

3) With illegal and unauthorized abortions continuing, the intervention of the professional abortionist, who operates in the dark room at the end of an alley or dead-end street under intolerable conditions, will still be required and will remain in existence.

4) Even when done under the best conditions by the most skilled technicians, abortion will inevitably lead to medical and neuropsychiatric complications.

5) When the law on abortion is liberalized and the numbers of abortions increase, a "mood for abortion" is created, which is difficult to change, because the value of life becomes diminished.

6) Prevalent abortion has disastrous consequences in the parent-child relationship and seriously disturbs the feelings of security that every child should have. Further, social complications, in the form of anti-social behavior, crime and delinquency, follow from a program of liberal abortion.

7) When there is an interest in the control of births and in the control of population as a public policy, it is inevitable that abortion will be practiced on a large scale even though contraception is the vehicle chosen to limit births. This is true primarily because where there is such a determinism to avoid births, if contraception fails, abortion will be relied on to correct the failure. So, we must beware if any public policy that is determined to limit population or is oriented towards the avoidance of birth at all costs.

FOOTNOTES

