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SOUTH DAKOTA AND ABORTION: A LOCAL STORY ABOUT HOW RELIGION, MEDICAL SCIENCE, AND CULTURE MEET

by Ann Milliken Pederson

Abstract. Telling the tale about South Dakota's recent legislative ban on nearly all abortions gets messy, complicated, and dirty. There are no innocent subjects and no simple plot lines. The story reveals other stories underneath and over the top of the others. Stories counter stories, revealing who is in the know and who does the telling. To "tell the old, old story," as the song goes, is not as simple as it may seem. Religion and medical science are caught in the politics and cultural wars about abortion.

Keywords: abortion; Donna Haraway; medicine; religion; story

South Dakota was the last state in the United States to get a Starbucks and the first to pass a law outlawing all abortions with no exceptions other than to save the life of the mother. No exceptions for rape or incest or for the health of the mother. At first glance, the media portray a seemingly conservative, mostly rural state that is at war over a cultural, religious, and even scientific issue. But to assume that this is all there is to the story is to not see the whole picture.

The history of controversies between religion and science is often told using simplistic plot lines with one-dimensional characters. The issues are never easy, and yet on both sides the rhetorical language becomes oppositional, hateful, and divisive. Flinging Bible epithets at others or reciting bumper-sticker slogans is not engaging in serious moral deliberation, on

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either side of the moral issue. Serious moral deliberation requires listening, putting oneself in another's shoes, taking a new stand. Everything else we do or say is in vain, and abortive.

The story is really a network or web of stories, layer upon layer. To help discern these layers and find a wider lens, I use here the writings of Donna Haraway, a feminist historian and philosopher of science, as a guide. Haraway's feminist methodology helps us to see the deeper layers of the abortion story in South Dakota.

A few brief comments about South Dakota will help to set the local scene and my concomitant thoughts about the rapport between religion and medicine. The state has a small population of 775,933 but is comparatively large in geographical area. South Dakotans must therefore travel great distances for health-care services. Its racial makeup is predominantly white (88 percent), and approximately 8.3 percent of the population is Native American—the third highest in the continental United States (*http://en.wikipedia/org/wiki/South_Dakota#demographics*). It has some of the poorest counties in the United States. Approximately 20.2 percent of its children under the age of six live at or below the federal poverty level (*http://www.state.sd.us/factpage.htm*). Poverty, geographical distances, and racial discrimination create urgent public health-care crises in South Dakota.

Religious affiliation plays an important role in the legislation, delivery, and access to health care for South Dakotans. Approximately 65 percent of the population is Protestant and 25 percent Roman Catholic. Of the Protestant denominations, Lutherans make up approximately 28 percent (*http://www.state.sd.us/factpage.htm*). Three large hospital systems cover the state west to east from Rapid City to Sioux Falls (*www.rcrh.org*). In the eastern half, Sioux Valley Health System (*www.siouxvalley.org*), with 24 hospitals and about 150 health-care facilities, is one of the major health-care systems in the state. Avera Health (*www.avera.org*), a Roman Catholic health-care system, has about 100 locations in South Dakota. Tensions have developed regarding access to reproductive health-care needs for women, especially for abortion services and contraception. Most of the religious perspectives expressed in the media are from those who consider abortion a sin, except possibly to save the life of the mother. Because of the state's large Roman Catholic population, the popular press often cites papal authority and church doctrine on the issue of abortion. Other denominations have different stances, including the Evangelical Lutheran Church in America (ELCA), of which South Dakota has a large population. Recently, columns by Methodists, United Church of Christ clergy, and ELCA Lutherans have been offering other perspectives and noting that they are Christian as well.

These regional statistics emphasize the importance of location—in all of its cultural, religious, economic, and geographic specificities—for understanding the relationship between religion and medical science as it

pertains to reproductive health care. Physicians and reproductive scientists get caught in the morass of morals, media, and medicine.

The legislative debate centers on the rights and responsibilities of the mother and embryo/fetus, definitions of personhood, and the role that religious beliefs play in policy making. For example, who decides the line between when to save a woman's life or when a woman's health is jeopardized by the pregnancy? Is this a medical decision? A religious one? A legal one? Who makes the final decision? According to Lauren Bans in *The Nation* (2006), "an analysis of the steps leading up to this landmark legislation, including a study commissioned by the legislature to examine the abortion issue, raises serious questions about how fully or fairly the lawmakers considered the medical, social and personal implications of abortion—and could be fuel in the fight by abortion rights activists to challenge South Dakota's abortion ban." The way science is characterized and used is arguably won by those who have the votes of the strongest ideologies.

The story of South Dakota's legislative ban on nearly all abortions is messy, complicated, and dirty. There are no innocent subjects and no simple plot lines. Other stories lie underneath and over the top of the others. Stories counter stories, revealing who is in the know and who does the telling. To "tell the old, old story," as the hymn goes (*Lutheran Book of Worship*, #390), is not as simple as it seems. Religion and medical science are caught in the politics and cultural wars about abortion.

Haraway challenges the way we usually observe the bodies politic: "What is the right speculum for the job of opening up observation into the orifices of the technoscientific body politic to address these kinds of questions about knowledge projects?" (1997, 192) How shall we tell the story? From whose perspective? Whose views matter, and why? The questions and the answers depend on the observers and the observations of the orifices. The epistemological inquiry is a feminist project, though not an innocent one, as Haraway reminds us (1997, 191). In the cultural narrative about abortion where the word *innocent* is tossed to and fro, we must remember that none is innocent, none is pure. We are all naturally together in the mess we have created, from the embryo to the mother, from the physician to the pastor.

The stories are layered and multidimensional, with multiple species as characters. The religious and scientific narratives can conflict, or they can be woven into the same sociopolitical economic realities of the current culture. "Reproductive politics are at the heart of questions about citizenship, liberty, family, and nation" (Haraway 1997, 189). And the way science(s) and religion(s) are practiced and engaged exemplifies this political and cultural landscape currently at work in South Dakota. "The saga of emergency contraception and the F.D.A. is developing into . . . a story of the entanglement of politics, science and religious beliefs. At the heart of it is the question of whether emergency contraception is or could be a

form of abortion" (Shorto 2006). Definitions of pregnancy vary. For some, a new being happens at fertilization when sperm meets egg. For others, and according to the American College of Obstetricians and Gynecologists, pregnancy occurs at implantation (Shorto 2006). If we cannot even agree on the beginning, where do we start to tell the stories? We begin somewhere in the middle, where beginnings and endings are never clear.

Where You Stand Determines What You See

Haraway's Methodology. To speculate and open up the layers of our story, we begin with the epistemological method of feminist standpoint theory. Haraway defines this methodological viewpoint:

> A standpoint is not an empiricist appeal to or by "the oppressed" but a cognitive, psychological, and political tool for more adequate knowledge judged by the nonessentialist, historically contingent, situated standards of strong objectivity. Such a standpoint is the always fraught but necessary fruit of the *practice* of oppositional and differential consciousness. A feminist standpoint is a practical technology rooted in yearning, not an abstract philosophical foundation. (1997, 199)

Such standpoint theory provides a framework for understanding the practice of religion and science in particular situations that have universal implications. Haraway claims that complete relativism and absolutism are both sides of the same Enlightenment reductionist objectivity. To gain a better view, one must practice by using oppositional, differential, and dissonant perspectives. There is no God's-eye view from above. But we gain knowledge by seeing with new eyes, listening with other ears, and expecting nothing to be fully adequate. All truth is partial.

Haraway's speculative view includes the narratives of human animals, nonhuman animals, and the places they inhabit. This view is more fully developed in her latest writing, *The Companion Species Manifesto*. All are wrapped within the cultural places in which they stand. Standpoints are physical, geographical, and incarnate in the characters' histories. "For feminist theorists, who and what are in the world is precisely what is at stake. This is very promising philosophical bait for training us all to understand companion species in both storied deep time, which is chemically etched in the DNA of every cell, and in recent doings, which leave more odoriferous traces" (Haraway 2003, 8).

To read the details about the abortion controversy in South Dakota requires a wider lens, a deeper notion of history, and an imagination to link what may not be obvious. In South Dakota—and other states whose primary economic base is agricultural—human reproductive issues cannot be separated from veterinary medicine. What ends up at the in vitro lab in the city probably began in the barns of the university veterinary school. From her research in and writing about biology, primatology, and cyborgs,

Haraway has learned that we develop our identities with those with whom we are in relationship over time. Human beings have neglected their non-human animal partners in order to understand their own identity. Using explicitly Whiteheadian overtones, Haraway's recent work explores the relationships of dogs and humans through the image of companion species. Two questions emerge for her from studying the relationship between dog and human: "how might an ethics and politics committed to the flourishing of significant otherness be learned from taking dog-human relationships seriously; and . . . how might stories about dog-human worlds finally convince brain-damaged US Americans, and maybe other less historically challenged people, that history matters in naturecultures?" (Haraway 2003, 3) Such questions are at the heart of human and canine relationships.

In her earlier work, Haraway connected cyborgs and humans in the vast world of technoscience. In both cases, cyborg and canine, stories inform who we are as we seek to understand to whom and how we are related. "Telling a story of co-habitation, co-evolution, and embodied cross-species sociality, the present manifesto asks which of two cobbled together figures—cyborgs and companion species—might more fruitfully inform livable politics and ontologies in current life worlds" (2003, 4). These stories of cohabitation remind us that we are neither alone nor superior in the evolutionary narrative and that, while we may long for a pristine purity, we must accept our pedigree—we are mutts in the making. Our ontological history is not for the "pure of heart who long for better protected species boundaries and sterilization of category deviants" (2003, 4). All are hybrids, mutts, "deviants."

As though composing a fugue, Haraway weaves together layers to create a complex, historically bound story whose boundaries collapse, implode, and expand again.

> In sum, "companion species" is about a four-part composition, in which co-constitution, finitude, impurity, historicity, and complexity are what is. *The Companion Species Manifesto* is, thus, about the implosion of nature and culture in the relentlessly historically specific, joint lives of dogs and people, who are bonded in significant otherness. Many are interpellated into that story, and the story is instructive also for those who try to keep a hygienic distance. (2003, 16)

This story is about getting down and getting dirty. We begin there—in the dirt, the humus of life.

Scientific Stories. To find out who we are, we look at what we do. At Augustana College in Sioux Falls, biology students under the tutelage of Dr. Maureen Diggins do research on body fat and fertility using the lethal yellow mouse mutant (*www.augie.edu/dept/biology/Web/faculty/diggins/diggins.html*). Their research is used by the faculty at the University of South Dakota School of Medicine (USDSM) for work on reproductive medicine. USDSM faculty continue research on in vitro fertilization and

other biomedical issues related to reproduction. The relationship is fertile and has yielded many articles and grants.

On the other side of the city is Hematech: "Hematech, a subsidiary of the Kirin Brewery Limited, is developing a novel system for production of human polyclonal antibodies" (*www.hematech.com*). Transgenic cows are "created" or produced to treat human diseases. "Human polyclonal antibodies can be used for a wide variety of therapeutic applications, including treatment of antibiotic-resistant infections, biodefense, immune deficiencies, cancer and various autoimmune diseases" (*www.hematech.com/hematech*). Boundaries between human and nonhuman animals collapse to regenerate life—to create transgenic species. We sacrifice the lives of mice and cows in order to understand and better our own species.

The research projects undertaken at the university and at Hematech have in common that they are expressions of the deep-seated drives to understand the mysteries of the life process and to manipulate it in ways that satisfy human needs and desires. Yet, these incredible and powerful scientific and biotechnological innovations are never linked to the politics of abortion and other human reproductive concerns. Clearly, abortion of human embryos and fetuses is only one small layer of a much more complicated relationship between human and nonhuman.

Scientific evidence is used by those on both sides of the debate in South Dakota. The intersection of personal and medical opinions gives way to more division. "Determining scientific fact on the abortion issue is difficult, medical experts say. Even within the state's medical community, the abortion debate has been divisive" (Myers 2006). The South Dakota State Medical Association issued a policy statement (SDSMA 2006) stating that the matter of abortion is personal in nature and that the SDSMA should not attempt to change personal beliefs. Whether or not an abortion should be performed is also a matter of personal conscience, but the patient's health should not be compromised.

Maria Bell, a Sioux Falls gynecologist and member of the faculty of the USDSM, has found herself in the crossfire of the debate around science, medical practice, and ethics. She "wasn't looking to become involved in politics but has felt compelled to become a public face in what might become the most bitter and divisive battle in South Dakota election history" (Myers 2006). Speaking out on this divisive issue can result in hate mail, death threats, and compromise in one's medical practice. "Bell said she's received many harassing e-mails—and a few that she considered to be threatening to herself and her family. She said she removed her children from Catholic school after they were taunted by other students. But like her counterparts on the opposite side of the debate, Bell is not deterred" (Myers 2006). People's lives are both personally and professional affected by the abortion politics in South Dakota. Ironically, the research on cloning cattle, which is funded by a Japanese brewing company, seems to have no direct

impact in the public discussion about reproductive politics. As Haraway reminds us, however, the stories between human and nonhuman are intimately connected in ways that inform one another and change the way technoscience is practiced.

"Contra-Conception," a 2006 article in *The New York Times*, draws connections between the history of contraception and the most recent abortion politics. Contraception changes the way sexuality is expressed; sex is no longer confined to reproduction within the marital relationship. Sexuality, abortion, and contraception are of one piece. Using Haraway's image, the speculum's view must widen to include race, class, gender, and geography. Dr. Joseph B. Stanford, appointed to the FDA by George W. Bush, comments: "Sexual union in marriage ought to be a complete giving of each spouse to the other, and when fertility (or potential fertility) is deliberately excluded from that giving I am convinced something valuable is lost. A husband will sometimes . . . see his wife as an object of sexual pleasure who should always be available for gratification" (Shorto 2006). Never mind that the opposite might occur, or that sexuality and fertility are not the property (so to speak) of humans alone.

The article notes that the boundaries between contraception and abortion are blurring and that for many evangelical Christians, contraception prevents a pregnancy and is therefore equivalent to abortion. Because contraception gives women and men more options for expressing their sexuality without fear of pregnancy, sexual expression outside of marriage is taken to be the downfall of marriage and consequently of the moral landscape of America. This issue becomes more complicated in a state like South Dakota where other factors are involved, where boundaries of geography, landscape, economics, and race further divide a small population.

Religious Stories. So, what are the roots of the controversy about abortion and contraception? Russell Shorto claims in *The New York Times* (2006) that "one starting point is the Catholic Church" whose recent views became popularized through Pope John Paul II. The Roman Catholic Church feels that reproduction within the family is the context for sexuality and that life is too easily commodified within our culture. "Further, the church holds that contraception and in vitro fertilization are sides of the same coin: both are attempts to manipulate sexuality to serve the selfish demands of the individual" (*http://www.vatican.va/roman_curia/congregations/cfaith/document/re_con_cfaith_doc_19870222_respect-for-human-life_en_htm*). While certainly part of the story, this is not the whole truth, or the whole story. Nothing ever is. To tell this new story, we must tell the old, old story.

The battle about abortion in South Dakota has tones similar to those of another religion-and-science controversy from centuries ago: the Galileo controversy. Although the subjects are much different, the dynamics may

not be. The Galileo controversy was about personalities, both religious and scientific. Galileo puts his

> arguments for the Ptolemaic system—including some that had been advanced by the pope—into the mouth of a character called Simplicio, who could not be taken very seriously. The pope was personally affronted. Galileo also used physical evidence (an argument from the earth's tides, which was later shown to be erroneous), in violation of the idea of treating the Copernican system as a mathematical formalism. The debate was further complicated by political factions and personal rivalries within the church hierarchy. (Barbour 1997, 15)

The law recently passed by the legislature has caused a flurry of editorials and letters to the Sioux Falls *Argus Leader*, the local newspaper. The letters are often strident and angry. Personalities abound, both religious and scientific. As Ian Barbour notes (2000, 7), "the historical record reveals a more complex relationship." Not unlike the Galileo situation, the struggle between competing authorities complicates the entanglement of reproductive issues. Barbour explains that in the Galileo controversy the science of Aristotle was disputed as well as differing interpretations of scripture. Both authorities—the Roman Catholic Church and the science of Aristotle—seemed to be well established. And the authority of the Church was under fire from several directions, including the Protestant reformers. Barbour claims that "[Galileo] was finally condemned as much for disobeying the church as for questioning biblical literalism" (2000, 8). In a similar manner, politicians and academics are threatened with excommunication from the Roman Catholic Church if they go against the church's stance on abortion and reproductive issues. The authority of the Church is absolute in this arena. It "reaffirms the moral condemnation of any kind of procured abortion. This teaching has not changed and is unchangeable" (*http://www.vatican.va/roman_curia/congregations/cfaith/documents/rc_con_cfaith_doc_19870222_respect-for-human-life_en.html*). Some Protestant denominations, particularly more conservative ones, hold the authority of scripture as the final voice and question the Christianity of those who go against scripture. Denominations and institutions divide over these issues.

In another famous controversial case about origins and human identity, Darwin's theory of evolution challenged the authority of both science and the church. Darwin's scientific views were not readily adopted by some scientists of his time. Barbour notes (2000, 7–8) that three issues were at stake: a challenge to biblical literalism, a challenge to human dignity, and a challenge to design. The parallels between this controversy and the contemporary one around reproductive issues are self-evident. In fact, many voices in the conflict repeat the same three issues that Barbour defines. Current practices of contraception and abortion seem to directly challenge biblical views on the beginning of human life, the dignity of an unborn child, and God's design for human life.

On the other side, more progressive churches such as the United Church of Christ (UCC) and the ELCA challenge the conservative views of the Roman Catholic Church and other more conservative Protestant denominations. The UCC has affirmed and "reaffirmed since 1971 that access to safe and legal abortion is consistent with a woman's right to follow the dictates of her own faith and beliefs in determining when and if she should have children, and has supported comprehensive sexuality education as one measure to prevent unwanted or unplanned pregnancies" (*www.ucc.org/justice/choice*). These different views on abortion and reproduction are related to the denomination's understanding of authority.

To Be Seen but Not Heard: Cultural Stories

Whose voices get heard and whose who do not are part of the story's landscape. Haraway reports the results of a study done in the 1990s on reproductive freedom by Charlotte Rutherford of the NAACP Legal Defense and Education Fund. Although this study is not particular to South Dakota, it does raise similar concerns about choice, freedom, responsibility, rights, and justice. It relates similar issues to Native American women, rural women, and poor women. It defines reproductive freedom for poor women in the following ten ways:

> (1) access to reproductive health care; (2) access to early diagnosis and proper treatment for AIDS, sexually transmitted diseases, and various cancers; (3) access to prenatal care, including drug treatment programs for pregnant and parenting drug abusers; (4) access to appropriate contraceptives; (5) access to infertility services; (6) freedom from coerced or ill-informed consent to sterilization; (7) economic security, which could prevent possible exploitation of the poor with surrogacy contracts; (8) freedom from toxics in the workplace; (9) healthy nutrition and living space; and (10) the right to safe, legal, and affordable abortion services. (Haraway 1997, 198)

Reproductive freedom as defined in this study is broader than simply the right to choose. The definition of health and health-care delivery is expanded and explicated from perspectives of women whose voices are rarely considered important.

To draw a comparison to South Dakota, a state divided by race, religion, and politics, American Indian women are rarely given voice or importance in the media. In an article from *The New York Times*, the author observes the racial and economic divisions at work in South Dakota:

> As opponents of the ban set out to gather signatures outside public buildings, at bowling leagues and in coffee shops, those who favor it were setting out across the state as well, on a bus they had dubbed "the Fleet for Little Feet," complete with an ultrasound machine and plastic models of a growing fetus. The leader of the largest Indian reservation here, meanwhile, has pledged to open an abortion clinic on tribal land if the state ban stands. (Davey 2006)

The embryo/fetus and women's bodies are a battleground between the church, the state, and science. Religion and science are conjoined and coconstituted in the incarnational stories about abortion. Those who worry about the life of the fetus often seem unconcerned with living babies whose lives are cut short by poverty, disease, and lack of love. We can find ways to join together, but they are not easy and rarely innocent. I believe that Haraway is correct when she states: "'Ethics' turns out to have precious little to do with 'choice' in vast areas of technoscience, including the yearning for reproductive freedom" (1997, 209). The plot line is much more complicated, and it is still unfolding in South Dakota. These unacknowledged, messy, and ambiguous stories are the context of the interaction of religion and science in the twenty-first century.

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