

# Counseling Abortion Alternatives: Can It Be Value-Free?

By SIDNEY CALLAHAN

**I** WRITE from a prolife perspective and as a person committed to the abortion alternatives movement. The nationwide effort to provide women an alternative to abortion makes use of counseling in pregnancy care centers. These centers are dedicated to helping pregnant women by offering them alternatives so that they may complete a pregnancy and have their babies. Such a value-oriented goal raises the question as to whether the counseling given in such centers can be value-free.

There are a multitude of pregnancy care centers around the country, and they vary in their policies. Here, however, I wish to articulate a standard optimal model for counseling women with problem pregnancies. This model is based upon my own training and on my experience of an approach to counseling given in one local pregnancy care center whose policies and practices provide an instructive example. These practices are also fairly typical of many other centers.

At our pregnancy care center, which is not religiously affiliated, we offer any woman who comes to us free pregnancy tests, decision counseling and offers of temporary shelter for those who may need it. We can refer also to a network of other services that can provide free medical treatment and pre- and post-birth shelters for women and their babies. Our exclusive goal is to support the pregnant woman in her pregnancy. We do not advise on contraception, provide adoption services, refer for abortions or engage in political lobbying on abortion policies. We will, however, refer women for extended psychotherapy and treatment we do not have the resources to offer. We are able to provide confidential short-term counseling for a woman and any others she wishes to involve, such as a boyfriend or family members. Our center is run exclusively by women. Our staff are all volunteers who are trained in our particular approach to crisis pregnancy counseling.

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### ***Counseling.***

Formal counseling is a time-structured, face-to-face encounter in which a counselor encourages dialogue, de-liberation and reflection aimed at helping a person in need. Persons seek counseling when some life crisis or upheaval produces a felt need for help. Usually, serious life decisions must be made, and some uncertainty exists as to what the person should do. A formal counseling relationship is unilateral, intimate and exclusively focused upon the person coming for counseling help. The counselee is usually in a vulnerable, troubled or demoralized state.

The nature of the intimate interpersonal encounter with a person in crisis makes it necessary to adhere to certain values. In fact, it seems impossible for there to be such a thing as value-free counseling. All persons who counsel and all who come for counseling will have values that one way or another affect their thoughts and behavior in the counseling situation. Those who counsel are motivated by certain values, such as a desire to help others and a belief in the efficacy of counseling. Why else engage in counseling? (Perhaps a few counselors are motivated mainly by a desire for professional prestige, power and money, but most counselors are not so motivated and, of course, volunteer counselors do not receive any of these rewards.) The question, then, is not whether values are operative in counseling, but rather *which* values will be shaping the counselor's behavior. The corollary question is how the values of the counselor will interact with the values of the person coming for counseling.

### ***General Values in Counseling.***

A basic value assumption operating in all counseling is the affirmation that an examined, reflective decision is superior to an impulsive reaction made without thought. All counselors would agree that it is not good to decide a serious question by flipping a coin, acting on a momentary impulse, taking the advice given by the last acquaintance consulted or giving in to the pressure of another's wishes. When we believe that human beings are rational moral agents who can deliberate and choose their course of action, we think it better to examine and test thoughts and emotions before acting. All counseling assumes that the examined life is superior to the unexamined life. Ignorance is not bliss. Avoidance of issues and lack of self-reflection are disabling in the long run. Persons are handicapped if they refuse to assess the social environment, think through possible future consequences of an action and reflect upon their own motivations. All counselors are committed to encouraging conscious deliberation and self-reflection as the way to help a person cope with problems in living.

Other values in counseling universally adhered to have been developed to safeguard the unique interpersonal encounter in which one person is troubled and therefore more vulnerable than the other. Since one person is in

need of help and the other is not, there is always a power differential in a helping relationship. Certain values have been seen as essential in the counseling relationship in order to protect the person in need. The values morally necessary for the counselor can be succinctly expressed:

Do no harm to the person seeking help.

Be competent and do not attempt treatment beyond your competence.

Do not counsel if impaired in personal functioning.

Keep confidentiality except in cases when the law prescribes warnings, as in the reporting of child abuse.

Do not engage in sexual, monetary or any other exploitation of those being helped.

Insure informed consent about the nature of the counseling offered, avoiding any deceptive claims or manipulation.

These guidelines prescribed for the counselor in any helping relationship protect important ethical and professional values. Of course, it may be difficult for incompetent or impaired counselors to recognize their own condition, whether through ignorance or self-deception. Therefore, peer regulation and supervision are necessary to oversee practice and uphold standards. While some have heralded the effectiveness of the so-called wounded healer, the healer at the time of the helping relationship should have recovered sufficiently to be able to help another.

### ***Conflict of Values in Counseling.***

One issue that is unresolved in counseling is the problem of different values held by counselor and the person coming for help. What if there is a serious conflict? Different theories of counseling take different stances as to whether the counselor should express, and try to persuade a client toward, his or her own values. At one end of the spectrum, theories of client-centered therapy enjoin a non-judgmental, non-directive approach; the counselor is to listen empathetically and give only unconditional regard to the person seeking help. The assumption here is that a person can only gradually become more integrated and congruent if an accepting, non-threatening, and non-intervening-with-advice relationship produces change in his or her self-concept. Behavior will change as the self gradually becomes more congruent through self-acceptance. Self-acceptance comes about through complete empathetic acceptance by the counselor no matter what the client says or proposes.

Other approaches to helping behavior are more value-directed and believe it important to offer overt guidance and positive training toward a goal. Here the explicit goal of the counseling is articulated, and the value of overcoming the negative effects of the presenting problem is clearly stated. Often, however, the goal and values of the counselor and the counselee are the same in a free situation of private practice. In other institutional settings, there may be value conflicts and more confrontation.

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In between non-directive and overtly directed approaches, there are counseling efforts in which a counselor is permissive and accepting of a wide range of client behavior, but also has certain limits. A helper or counselor may empathize and accept a range of behavior that may indeed conflict with his or her own personal values and standards of behavior, without overt opposition or confrontation. But some behaviors enacted or described by the person coming for help will be overtly opposed as unacceptable. These actions are outside the range of behavior that the counselor can ignore without comment.

Certain harmful acts will have to be opposed, confronted or overtly countered by efforts at persuasion. Almost every counselor will try to deter acts of suicide, self-mutilation, self-destructive social behavior and acts that can harm others. At some point the non-judgmental, unconditional regard and support for a person in need can come into conflict with a felt demand to dissuade and persuade that person. In cases of unavoidable ethical confrontation, a counselor will try to exert influence. However shrewdly and subtly the attempt is made, the goal is to intervene immediately, persuade and exert enough control to avoid harmful acts.

In a way a short-term intervention and persuasion effort is a crystallization of the overall goal of remedial counseling. The goal is change and growth. The person who is presently perturbed needs to increase his or her ability to cope. The long-term goal of counseling includes efforts to induce self-initiated change. But sometimes the counselor cannot wait for self-initiated growth. A certain range of dangerous and destructive behaviors may make short-term direct intervention necessary.

We may conclude that, in every counseling situation, values are not only inescapable but essential. Certain values should govern the counseling encounter, and certain values will come into play in all intervention strategies. How does prolife pregnancy counseling embody values?

***Prolife Pregnancy Counseling.***

Prolife pregnancy counseling endorses the universal standards of counseling described above. Counseling is confidential, done with informed consent and without exploitation in an effort to do no harm. Here, too, the underlying value is that persons are free moral agents who

benefit from reflection and self-examination before making serious decisions.

Prolife pregnancy counseling is undergirded and infused by additional values, however, and prolife counseling presently takes place in a special cultural context. Prolife counselors, by and large, view the fetus as a human life that is morally equal in value with all other human lives. Those having the conviction that pregnancy involves two morally valuable human lives find themselves, almost inevitably, in opposition to the present law of the land, which does not give legal protection to fetal life. Abortion for any reason whatsoever is in effect legally permitted in most states. Those concerned for women and equally concerned for fetal life find themselves opposed to unregulated abortion and, even more, to the ideology and social forces that produce 1.6 million legal abortions a year.

Today, those who do prolife counseling are engaged in a countercultural activity. They are pledged to an ideal of radical moral equality and support for the right to life for all human lives, no matter how undeveloped or dependent. Persons arrive at their prolife convictions in different ways and hold them within different configurations of value. My own prolife convictions are extensions of my commitment to radical equality for all human beings and my rejection of violence and killing as solutions to social problems. So I am a member of Feminists for Life and of JustLife, liberal prolife organizations, and engage in peace activities protesting war.

Perhaps the best analogy for prolife counseling is draft counseling by those who morally oppose war. Draft counselors are opposed to anyone serving in the military, but they know that this a legal option—indeed, a much-admired, culturally sanctioned choice. In their counseling they recognize that the military is constantly sold to the public as an attractive choice and that social pressure is applied to join up. But those who oppose war and cooperation with the military are rejecting the use of organized legal killing and violence to solve problems. They are also advocating the right to life and equality of whoever will be designated “the military enemy.” To be effective, draft counselors must tell the precise truth about military service, and they must also confront the inescapable and central value questions regarding killing.

Prolife pregnancy counseling is engaged in a similar effort to oppose the use of a solution involving violence and technological destruction of life. Since abortion is

legal and readily available, every woman can procure an abortion. This cultural sanctioning of the abortion choice then produces strong social pressure upon a pregnant woman to abort. But many women do not wish to abort what they perceive as their baby. They come to the pregnancy care center looking for support and some other solution to their problem pregnancy.

Many young women who have had an abortion before do not want to go through it again.

One goal of the pregnancy care center is to insure that no woman is pressured or forced into an abortion because of lack of social and economic support. Another goal is that a woman as a responsible moral agent should reflect and deliberately confront the serious decision she faces, with all its consequences taken into account. Abortion is forever, in the same way that the birth of a baby is forever. Counselors explore the reality of abortion for woman and fetus, as well as the alternatives that are available—such as temporary shelter, provisions for adoption or keeping the baby. Psychological support is offered so that a woman facing the opposition of her sexual partner or her family need not be alone in her decision to have her baby. Unfortunately, in an abortion-habituated society, many males feel they have fulfilled their obligation to a pregnant sexual partner if they help pay for the abortion.

Families also pressure their daughters to have abortions. Some parents fear the embarrassment or shame of an unmarried daughter's pregnancy. Others do not want their daughters to interrupt schooling or careers. Families worry about the girl's future prospects if she is an unmarried mother with a child. Of course, some families will be more supportive than the young woman imagines in her anxiety. The desire to have an abortion before she has to reveal her problem to her family may be based upon an unfounded view of the family's reaction.

Often a woman facing a crisis pregnancy is emotionally upset, with many conflicting feelings and thoughts. Ambivalence is a normal reaction in pregnancy. It is a terrible time to make such an important decision. A woman needs support if she is to be able to support her pregnancy and care for the new life she carries. *A basic principle of prolife counseling is to treat the woman you counsel as you would want her to treat the new human life within her.* Following this guideline makes it important to treat the pregnant woman with as much nurturing empathy as possible. The absolute respect paid to her is nonjudgmental and nonmoralistic.

The prolife counselor also tries to meet the woman where she is in her development and give her whatever she needs to encourage her potential for maturity. One hopes she will do the same for her developing embryo. A woman needs to be protected in order to protect her developing baby. She also needs to know all the facts about fetal development, the nature of abortion and the realistic options available to help her carry her pregnancy to term. Precise truth in all facts is vital. It is also important

for a woman to assess the pressures in her social world against her carrying her baby and, on the other hand, to realize what social sources of help she may possess. As a moral agent, she must decide.

If a woman decides on abortion and announces this fact, the counselors in the pregnancy care center are not judgmental. It is obvious, however, that the center's counselors will not refer to abortion clinics or cooperate in furthering abortion. Abortion clinics advertise and are well-publicized in the New York area. We know that many women who come to us eventually choose abortion, which is presently a legally sanctioned practice that those who obey the law may not hinder. But we also know we may see these women again in their next pregnancy. Many women who have had abortions come for counseling in order to avoid another. While many women may not suffer from having abortions, many do. They may need us next time.

The whole prolife movement is struggling against what is viewed as a legally available but wrongful overriding of the right to life of the fetus. The prolife counsel-

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ing movement tries to support the rights of every life and cannot accept using a destructive means to an end. The refusal to accept any wrong means to an end also guides the means used in prolife counseling. A woman's rights to life, developing potential and good treatment insure that she cannot be manipulated, deceived or subtly coerced. There have been charges that manipulative, coercive counseling has taken place in both abortion clinics and in prolife counseling centers. Any such deception or coercion infringes upon respect for a woman and disregards the moral necessity of using good means to obtain a good end.

The prolife movement has championed the values of nurturance, nonviolence, equality and the fulfillment of developing potential for life. Prolife counseling tries to enact and embody these values. While many in the United States seek the power inherent in the logic of domination and control, even to extinguishing life, the prolife movement advocates the importance of the actualizing power of creating life. Hope must conquer the despair that leads to death. Pregnancy counseling and the abortion alternatives movement is one way to support life. ■

