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以醫療社會學脈絡比較台灣與新加坡
未出生胎兒的生命尊嚴

**A Comparative Study on Human Dignity of the
Unborn Child between Taiwan and Singapore in
the Context of Medical Sociology**

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Abstract

The human dignity of the unborn child remains uncertain in public policy domain. The importance of rethinking public reasonableness becomes unavoidable in the stage of late capitalism and liberal democracy. Political power, knowledge, and participation are three key elements of policymaking. The human dignity of the unborn child is neglected in the process of policymaking of population politics. There are advocates, United Nations, United States, eugenicists, neo-Malthusians and International Planned Parenthood Federation (IPPF) in the process of population policymaking at the international level during the past three decades. This research first attempts to focus on the inter relationship among these five advocates and to review how the unborn child becomes missing within the process of international population policymaking. Secondly, Taiwan and Singapore are two test cases to reveal the policy follower roles who adopt the similar dream of modern states. Thirdly, since the personal religious beliefs play a significant role not only in shaping attitudes, but also in economic development, political stability, sexual morality and gender equality. This research adopts qualitative approach the focus group interview to compare the attitude of human dignity of the unborn child between the faith-based people with non-faith people both in Taiwan and Singapore. In this research 24 focus groups will be organized across Taiwan and Singapore, each country contains 12 groups. Each country contains 6 faith-based focus groups and 6 non-faith focus groups. Attempt to find the difference and similarity of population policy between Taiwan and Singapore and to explore how the religious values and the concept of human dignity of the unborn child excluded in the process of demographic policymaking.

Key Words: human dignity, unborn child, focus group interview, modern state,

Eugenics

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Chapter One: Introduction

The inquiry of *human dignity* of the unborn child has been long controversial in public domains. Human dignity is not an idealistic concept abstracted from human action, yet it rather refers to *human life of human beings*. Moreover, *human rights* are derived from the inherent dignity of the *human person* (Howard & Donnelly, 1986:801). Human dignity is perhaps the best measurement of humanity (Malpas, & Lickiss, 2004:5). In this regards, human dignity could be both understood as fundamental moral norm as well as legal system guaranteed as a fundamental human rights which require the responsibility of the states to protect within the legal forces. Basically, the law can have a morally defensible basis and rest upon moral presupposition. The connection between law and morality demands the basic mutual recognition of the duty of law is considered to guarantee and to protect a minimum of morality with the aid of any institutional legal settings. Moreover, modern philosophy fundamentally emphasizes the human dignity with the conscious of its existence (Bayertz, 1996: 75). Moral forms of human behaviors, such as love, confidence and care, can hardly be fulfilled only by means of legal sanctions.

Population problem and the *public health* are major concerns of modern states. The term *population* and *hygiene* are usually linked within the development of modern states. A French official report by Reginald Kann which was restored at Centre des Archives d'Outre-Mer'd Aix-en-Provence revealed the first perspectives of European on Taiwan in 1905. The content of item 3.8 was entitled as *Population/Hygiene Publique* provided the first hand of observation of Taiwan in the early twentieth century. (鄭順德譯, Kann 著, 2001: 224) Basically, the fate of the developing country were confronted with the tension between population pressure and economic growth after the Second World War. The founder father of Singapore Lee Kuan Yew had noted this dilemma and aimed the goal of population decline as 'zero population growth'. He would like to accelerate economic growth and to achieve it within 20 years. He identified that the developing country have no other choice except to seek economic growth while the developed countries, United States of America, USSR, and the most western European countries are far reached the economic leading peak ahead. How to get rid of the poverty of the developing country and avoid of becoming the Marxist believer was his big challenge. Singapore government chose to avoid this destiny and took the population decline project to zero population growth. (Speech by Lee Kuan Yew, 1975 : 9) Taiwan chose the similar strategy to accelerate the economic

growth. Meanwhile the family planning program of the United Nations gave the ample space of the development of population control. Contraceptive practice and fertility decline played as the basic strategy of population control for the most developing countries from the 1960s (Caldwell, Khuda, & Pieris, 1999: 68)

The investigation of the concept of human dignity of the unborn child not only relates to the legal tradition, demographic studies or public health it also relates to the altitude toward human life, contraception use and abortion. Research shows that religious factors significantly vary on the issue of human dignity. Personal religious beliefs not only have a significant role not only in shaping attitudes, but also in the economic development, political stability, sexual morality and gender equality. Modern scholar using the data of the fourth wave of the World Value Survey and hierarchical linear modeling techniques found that personal religious involvement playing an important role of shaping the altitude of public opinion about abortion, divorce and gender equality (Adamczyk, 2013: 213-214).

Before discussing the human dignity of the unborn child, the population and hygiene problem may need to explore first, but what we have to bear in mind carefully is that the human dignity of the unborn child highly relates to the human behaviors which may wave with each other. Moreover, the behavior of love, care, and confidence mingled complicatedly with preference and prejudice. And human emotions and behaviors both appear in public and private domains complicatedly. Those relate to motives and drives of human beings can hardly proceed by only simple moral good motives and drives, only some rare Christian saints could achieve such a moral peak. The preference or prejudice may occur during the process of policy makings. Human dignity of the unborn child requires the modern states to review her roles to protect the fundamental moral statue of the unborn child within the legal system, since to some extent the unborn child is the product or the result of human love and sexual actions which usually referred to the private spheres. Yet some human love and sex behaviors need to be restricted in the public spheres of modern states. For instance, the incest taboo is normally forbidden in judicial system of modern states. Meanwhile the concept of cultural relativity is obviously the necessity and widely accepted within the development of modern anthropology (Lassiter 著, 郭禎麟等譯, 2010 : 24)

1.1 The Perspectives of Medical Sociology

From the perspectives of the medical sociology which concerns the relationship between the medicine professionals and patients, the tensions exist not only between

the unborn child and the mother, but also among the roles of the modern states and the bargaining as well as the related decisions of demographical policies. The human dignity of the unborn child is a policy issue. Rooted at the liberal ideas the advocates usually emphasize the women's rights, autonomy and self-determination and dehumanize the human dignity of the unborn child. Some pro-abortion physicians claim that "*The fetus is a parasite.*" by professor Rosalind Pollack Petchesky in 1984 (Arner, 2010: 128). Some physicians argue that "*Pregnancy when not wanted is a disease..., in fact, a venereal disease*" by professor Joseph Fletcher in 1979 and "*An aborted baby is just garbage...just refuse.*" by Dr. Marttti Kekomaki in 1980 (Arner, 2010:129).

Is the fetus a parasite? Is the pregnancy a kind of disease? Few natural scientists or medical professionals would answer it with accurate evidence. The population control as well as the population health challenge both the social scientist and natural scientists in modern era. Many demographers are the best-sellers of applying Darwinian ideas. Darwinian is influenced by modern biology and becomes one of the most dominant theory. Robert Dawkins suggests to analyze the cultural change of analogous usage of genes as a typical phenomenon. Furthermore, the demographers widely borrow the conceptual analogies from Darwinian's evolutionary thinking had been a path dependent. Evolutionary biology concerned the length of reproductive period, gestation period, rate of development and parental care. They are seeking the evolutionary stable of strategy (ESS). The demographers utilize the modern biology and apply it in the population control and fertility control(Wilson, 1999:531-534). That is the background picture of the modern population development and it strongly influences the population policy of the developing country, including Taiwan and Singapore.

Since the issue of human dignity of the unborn child deeply connects to the definition of human life which was associated with the scope and development of medical sociology. It is highly over lapped with demographic research, social history of medicine as well as the state population policy. Medical sociology concerns the study of the social causes and consequences of health and illness. It investigates the social determinant of health and illness, the social behavior and health care providers, social function of organizations and institutions, the social patterns of utilization of health services, and the social policy toward health (Cockerham, 2016 : 1). Increasing the relevance to the investigation of textual development of medical sociology may reveal the social reality of the construction of the understandings of the unborn child in this research. Yet the social history of medicine is more than a blend of social history and medical history. The efforts of medical sociology essentially adopt an

operational approach from the difficulties of medicine development in the present days (Hutchinson, 1973 : 423).

1.1.1 Religion and Medicine Combined in Ancient Times

Religion and the medical healing power usually combined in early times. The medical symbol 'serpent or snake' mainly came from the Bible. God spoke to Moses to liberate Israel from the hand of Pharaoh and they complained against God while stayed in Edom and many died of bitten by serpent. God told Moses to make a bronze serpent and said "*Everyone who has been bitten will look at it and recover.*" (Numbers, 21:4-9). For those who do not believe in god when Chorus asked of Prometheus "*What care did you discover for the sickness?*", he replied as "*I sowed in them blind hope.*" (Miles, 2004:19)

The priest performed the dancing rituals, recited incantations in India during the Vedic Epoch while the medicine was written according to the four Vedas (Koenig, McCollough & Larson 2001:26). The most important Chinese medicine document *Huang-ti nei-chin* (黃帝內經) was written around Han dynasty. To some extent, Chinese medicine was developed based on political disruption, religious need, a belief of cyclical recurrence which named as Yellow Turbans caused by natural catastrophes and the need of controlling the mass epidemics from the rebellions (Pioreschi, 1999: 78-79). In the western world Prometheus, his name meant 'forethought', stole the fire from gods in Greek myth. In this way humans gained the ability to inventiveness as well as the ability of art and medicine.

It would be wrong if we consider some religious factors as irrational in the process of healing in ancient times. The expectation of cure may provide the key element of the healing power. Belief in supernatural origins regarding to some diseases contained the rational demand of morality even in Western civilization. The concept of 'sacred disease' (*epilepsy*), 'king's evil' (*scrofula*) and 'leprosy' distinctively represented the different category of diseases (Nunn, 2002:96). In ancient Egypt the four children of earth god: Geb and his sister-wife Nut, the sky goddess, Osiris, Isis, Seth, and Nephthys related to Greek mythology. From the medical papyri Clement of Alexandria provided us the medical knowledge of human body, disease, remedy, the instruments of doctor, and disease of women (Nunn, 2002:97, 24).

1.1.2 From *Hippocratic Corpus* to *Soranus' Gynecology*

Now our understanding of the Western medical founder Hippocrates who lived around 500 century before Christ was introduced by the physician Galen of Ephesus.

Some scholars used the term Galen's Hippocratism to emphasize Galen's interpretation on Hippocrates. His life and medical thought were collected as *Hippocratic Corpus* (Smith, 2002:8). Another western oldest documents of gynecology traced to Greek physician Soranus. He was from the city of Asia Minors Ephesus and had practiced medicine in Alexandria during the time of Roman Empire, at the time of Trajan (98-117 AD) and Hadrian (117-138). He may belong to the early second century and die about the time when Galen (130-216 AD) was born (Soranus, translated by Temkin, Owsei, 1956: xxiv). Actually the ancient medical knowledge about the childbirth and infant care represented at this book. The embryo and fetus were often discussed. The modern edition of gynecology written by Soranus published by Johns Hopkins University was called *Soranus' Gynecology* in 1956.

1.1.3 From Medical Renaissance to Ultrasound Technology

The famous drawing 'Fetus in the Womb' by Leonardo da Vinci (1452-1519) was drawn around 1513 which showed a beautifully characterized fetus (Loudon, 1997: 4). It was earlier than professor of anatomy Andreas Vesalius (1514-1564) published his famous textbook of anatomy *De Humani Corporis Fabrica* in 1543 (Porter, 1999:10). Our understandings of the unborn child are limited within the development of our medical knowledge. For instance, though the idea that the semen contained 'fertilizing particles' had been proposed in 1623 by Louis du Gardin (Gardinus), Nicolas Hartsoeker (1656-1725) had observed tadpole-like creatures in the semen of cockerel and a tiny hunched up man drawn inside of the head of a spermatozoon in 1678 (Birkhead, Hosken, Pitnick, 2009; 8-9). The accurate concept of fertilization and unborn child remained uncertain in the seventeenth century.

What we know about the embryonic and fetal development of the unborn child is quite few before the modern technology of ultrasound scanning. Though the technology of modern ultrasound scanning is developed from the sonar sound of navigation in the 19th century, it was late about the 1980s to be applied at the medical diagnosis of the appendicitis (Juylaert, Rutgers, Lalisang, Vries, Werf, Dorr, Blok; 1987: 666).

The modern ultrasound scanning helps our knowledge of the unborn child growing more clearly inside the womb of woman. The technology of ultrasound scanning improves the observation of life of the unborn child much for real. More clinical researches have been published through the *Journal of Clinical Ultrasound*. The application of diagnostic value of sonography could also be much reviewed (Seckin, Cicek, Dikmen, Bostanc, Muftuoglu, 2016: 339).

More evidences suggest that the fetal pain is in some ways associated with electrical activities in the cerebral cortex. It connects the neural reaction between peripheral receptors and the spinal cord, upward transmission via the spinal cord to the thalamus and from there to the outer cerebral layers (Glover and Fisher, 1999). The medical evidence demonstrates that the unborn children are capable of experiencing pain certainly by 20 weeks after fertilization (Napier, 2008). Nebraska is the first state of the United States to pass the law Pain-Capable Unborn Child Protection Act on 13 April 2010 and inspires other states to attempt the similar measures. Before this law enacted, Supreme Court of the United States rejected the trimester framework and declared that there is no line other than viability which is more workable in its 1992 decision in *Planned Parenthood v. Casey* (Cohen, 2014). Now the evidence of fetal pain not only make at least ten States pass Pain-Capable Unborn Child Protection Act in the United States until 2013, but also provokes the United Kingdom to debate the possibility to change abortion laws or procedures to mitigate the fetal pain (Derbyshire, 2006).

1.2 Definition of the Unborn Child

Modern medical embryology indicates that human embryo has thousands of genes on 46 chromosomes. Basically, without any intervention like creating chimera technology to mix any animal embryo with human embryo, it usually comes from the same homologous pairs to form the diploid with number of 46 chromosomes. Within the human 23 pairs of chromosomes, there are 22 pairs matching chromosomes, also called the autosomes, and one pair of sex chromosomes. According to the definition of zygote at the textbook on embryology affirms the fact that life begins at the embryo which is the early stage of the unborn child until 8 weeks. Dr. Keith L. Moore defines the zygote as *“This cell results from the union of an oocyte and a sperm during fertilization. A zygote or embryo is the beginning of a new human being.”* (Moore, 2008: 4).

If the gamete contains the sex pair of XX is generally female, and if the gamete is taking the sex pair of XY is generally male. One chromosome of each pairs is derived from the maternal gamete, the oocyte, and with one from the paternal gamete, the sperm. The union of the gametes at fertilization restores the diploid number of 46 chromosomes (Sadler, 2012 : 11). Along with the introduction of modern embryology, the name of the single cell of human baby is divided into two periods: the first 8 week after conception is called the period of embryogenesis, sometimes also called as organogenesis, which the organs are developing, and the period from that point on until birth called fetal period (Sadler, 2012: xii). Western physicians

usually call the unborn child *embryo* before the early 8 weeks of pregnancy, and call it *fetus* after then. In this research called *unborn child* to indicate the life of human baby within the mother's womb of those 9 months pregnancy.

The concept of trimester framework of pregnancy came from the abortion case of *Sternberg v Chart* in United America. Normally, it indicated three development stages of the unborn child in mother's womb: 1) the first trimester defined from fertilization to the 12 week; 2) the second trimester defined from the 13th week to 24th week; 3) the third trimester defined from 25th week to birth (陳文政譯, 2004 : 57) And the pregnancy of the unborn child could be outlined as several stages: 1) fertilization: led about 200 to 300 million spermatozoa into the genital tract and 300 to 500 to reach the oocyte, and only one to penetrate and to fertilize it ; 2) implantation: caused mitosis occurred and move toward the uterus around 7 days after fertilization; 3) embryo developed from two cell, four cell zygote to morula as well as a embryoblast or blastocyst until day 14; 4) the primitive streak and notochord formed and entered into the trilaminar period which the primitive heart and spine functioned; 5) from the third to eighth week called the embryonic period: a number of specific tissues and organs developed and the major features of the external body form recognizable by the end of this stage; 6) from the third month which meant from the ninth week to birth called fetal period: the maturation of tissues and organs characterized; the weight of fetus continuously increased until birth especially rapidly increased during the last 2 months of gestation. The length of pregnancy is considered to be 280 days or 40 weeks, after the onset of the last normal menstrual period or more accurately 266 days or 38 weeks after fertilization (周明加編譯, 2007 : 52-131).

1.3 Definition of Human Dignity

The English term 'dignity' could find its root in the Latin word *dingus, dignitas* referred to honor, glory and respect. Human dignity gains its abundance mainly due to the social value. Since human dignity has severely violated during the Second World War, the discussion of human dignity needs to rest upon the long theological and philosophical history. The requirement of the research on human dignity demands going back to intellectual history, philosophical investigation, and some eminent philosophers, such as Thomas Aquinas and Immanuel Kant who do not directly dealing with it from the perspectives of the modern institutional value but they shaped the main concept of human dignity with moral and ethical basis (Barak, 2015:3-5). Human dignity is the ground of rights as well as the answer to some fundamental questions, such as "Why should I respect people's autonomy?" even though for some people it could be regarded as useless concept (Malpas & Lickiss, 2004:10)

The early Roman orator, in the writings of Cicero (106-43 B.C.), had appeared the term of *dignitas*, it dealt with the statue of a person within the community. Cicero also indicated that the human dignity manifested the superiority of humans reason which the morality and duty were deprived (Barak, 2015: 17-18). In Jewish tradition the human dignity is derived from the image of God (Genesis 1:27) 'God's image' is exchanged for 'God's dignity' (*kavod*). On this ground the Judaism indicates that human person is sacred both in body and spirit. It refers that human dignity contained the 'dignity of created beings' (*kavod ha-beriyot*) grounding the requirement to protect the basic dignity of humankind (Dorff & Ruttenberg, 2010:117). In Catholic theological tradition, the theologian Thomas Aquinas had indicated that God is rational. The concept of free will signified God's dignity. Human nature has not been completely corrupted due to the original sin. Unlike Catholic theology, in Protestant theology, according to Luther, God is rational but Satan is rational too. Man's characteristics, such as rationality, which are not the basis of similarity of God. The protestant theology emphasizes that human dignity is given by God via God's act of grace (Barak, 2015: 21-23).

1.4 The Scope of this Research

At the pro-life stand, this research would like to investigate the human dignity of the unborn child with comparison of the Genetic Health Act of Taiwan and Termination of Pregnancy Act of Singapore. Adopted the qualitative method, focus group interview at these two countries, firstly focus on the comparison of asking the question regarding the concept of human dignity of the unborn child. Secondly, to investigate the need of the restriction on abortion. How the interplay of family planning program from the United Nations as well as the development of Eugenics both in United States of America and Europe played as the global dominating population policy dramatically push the developing countries toward their big dreams of economic development.

The evidences shown that the social considerations are the main reasons for women to demand abortion, such as interfering the job, partner not want to get married, having a child already and etc. (Lawrence, 2005: 113; 劉仲冬, 1998; 張苙雲, 2003; 涂淑容, 2013: 1). In Taiwan some scholars articulate that the teen pregnancy is the center of abortion problem (王瑞霞, 2000; 林惠生, 2002; 武麗英, 2006). According to the Genetic Health Act of Taiwan, even though the unborn child is healthy, it does not have any genetic diseases, nor its fourth degree of kin relatives, not conceived by rape, and this pregnancy would not harm the mother's health, women could demand to abort it due to the family life and psychological reason. However, in Singapore

women who seek to abortion are required to receive the mandatory pre-abortion counselling as well as 48 hours of waiting period after the counselling. Most Singaporeans consider those institutional settings as rational reason and feel competent to be law abiding citizens. In this regards, we would like to ask the questions why these two states adopt different law conception on abortion, especially to restrict on abortion in Singapore. Why Singapore government takes restricted demographic policy and attempts to protect the human dignity of the unborn child? The main population of both countries are consisted of Chinese, why dose the difference occur?

This research attempts to investigate the human dignity of the unborn child of Taiwan and Singapore within the context of medical sociology. Since the concept of human life shifts severely from the Scientific Revolution which also is identified as the beginning of separation between science and faith. Astronomy and medicine usually refer to the leading role of scientific progress during the seventeenth century. In this study that would be a better way to go back to the historical turning point of medical tradition and the Christian as well as Catholic challenge to investigate the linkage between medical education and Christian faith. The picture of how significantly the medical concepts were twinkled with Christian faith in the western civilization. Rarely people knew when Galileo Galilei (1564-1642) reported his remarkable observation on the stars now we could better say the planets Venus and Mercury he articulated that his ability were from the divine grace. Galileo's praise to God and contributed his achievement to divine wisdom and grace not only when he was accused by some high priests but also identified himself as the way he truly lived his faith by combining with his talents. He modestly reported that it was about nine months ago when he heard of the instruments of spy-glass from Fleming and Paris caused him to apply the similar invention in his remarkable work *The Starry Messenger* (Galilei, 1610:1).

From the empirical level, I adopt the religious lens at this research and the focus group interview to investigate the human dignity of the unborn child. The data collections are designed both by the faith-based participants and non-faith participants from Taiwan and Singapore since the believers have the different notion from those who do not believe. For the Christians the sanctity of human dignity of the unborn child is directly linked with the creation of God. Life is created by the image of God and has the supreme value of holiness which cannot be brutally killed or violated. In the similar way, on the practical level, the behavior of the faithful would be different more or less from those who do not believe. That is the altitude of daily lifestyle. The richness of rite of the faithful may reunites the human dignity of the unborn child with

the specific cultural element in time, space and myth but it may quite null to those who do not believe.

In Taiwan, abortion has been legalized since 1985 (國史館，2004：336). There are six conditions that women could demand abortion legally. According to the article 9 of Genetic Health Act in Taiwan, while 1) the mother or the father having the genetic, infectious and psychiatric disease; 2) the fourth degree of kin relative of the spouse having genetic disease; 3) the pregnancy causing the life threatening to mother; 4) the unborn child having the risk of teratogenesis; 5) the pregnancy as the result of being raped; 6) pregnancy or childbirth likely affecting mother's mental health or family life, then women could demand for abortion. Estimated that 96 per cent of abortions are carried out due to affecting mother's mental health or family life and to some extent the abortion is abused by this article, there is about 4% abortion carried out since the unborn child having the genetic diseases, its fourth degree of kin relative of the spouse, causing the life threatening to mother, having the risk of teratogenesis, and the result of being raped (武麗英，2006：22).

Contrary to Taiwan, in Singapore the mandatory pre-abortion counseling and 48 hours waiting period are required while women seek to abortion according to the Termination of Pregnancy Act that revised in 2015 as below:

Mandatory counselling

5.3 Pre-abortion counselling² must be provided for all pregnant women seeking treatment for termination of pregnancy in Singapore.

5.4 Pre-abortion counselling for girls below 16 years of age (except for rape victims)

It is mandatory to refer an unmarried girl below 16 years of age for pre-abortion counselling at the Health Promotion Board Counselling Centre when she seeks treatment to terminate pregnancy. A Certificate of Attendance (COA) will be issued to her by the Health Promotion Board Counselling Centre. No termination of pregnancy can be performed unless the COA is produced by the girl. The COA form shall be attached to the patient's case notes by the abortion institution performing the abortion procedures for documentation and audit purposes. The steps for pre-abortion counselling are illustrated in Annex A.

Time Lapse

The pregnant woman is required to sign a declaration that she has been counselled and gives her written consent to the treatment in Form III set out in the Schedule to the Regulations. At least 48 hours must elapse after pre-abortion counselling before the pregnant woman can give her written consent to treatment (Guideline on Termination of Pregnancy Act Ministry of Health of Singapore: 2015)

1.5 The Main Arguments of Human Dignity of Unborn Child

The nature of the debate often comes with the questions “Is the unborn child a human being? Or when does human life begin?” “Could the human dignity of the unborn child have fundamental moral statue? The answer varies due to different persons are asked. The Roman Catholic may answer it with “Yes, human life begins at the moment of conception, the unborn child should enjoy the fundamentally moral statue”, while some people who claimed themselves as radical liberal may answer it with “No, it fully depends on the decision of the mother”. And most people would say “I don’t know.” Or they may say that “I don’t like the kids.” Or “I don’t want to get married, I prefer to get co-habituated.”

We live in a post-modern world. Some universal and basic values are doomed as valueless, such as marriage, child, and chastity. The concept of cultural relativity, relativism and plural values seems dominating the most international policies, including the demographic politics. The main trend of sociologists articulate that all social history should be comparative. Human social science can hardly investigate only by one factor or one dimension. Social history is not merely a recorder or document of social actions or social agents. Furthermore, people are the product of the social history by the perspectives of Marxist. The nature of human social world is full of sensitivity to differences and its similarity covers across space and time which need to enter both the understanding of social structuring as well as its history. (Abrams, 1984: 379) Authentically, the weakness of such a venerable unborn child within the mother’s womb remains silent. The unborn child cannot speak. Who would speak for them? Who could speak of the fundamentally moral statue of the unborn child? Dose the mother always take the first priority of the human rights than that of the unborn child?

1.5.1 What is the Beginning of the Human Life?

There are several questions usually being asked and challenged the human dignity of the unborn child. One of the main arguments of the human dignity of the unborn child is when the human life begins. The second question is who decide or who takes

priority: mother or the unborn child. The first question could also ask like this “Is the unborn child at the mother’s womb a human being?” The second question could ask like this “which one is more important: the right to life of the unborn child or the right of autonomy of the woman who demands abortion?”

If we consider the unborn child was the human being, then we would have more confidence to say that the unborn child has the basic right to live. But if we doubt the unborn child is a human being, we may easily question that the unborn child have the basic human right to live. The weighing between the mother and the unborn child is a critical issue at two ends of the scale.

Both dilemmas wave between the modern states and the individuals. Those who seemed more support the unborn child called ‘pro-life’; and the other side who stands toward the reproductive right of the woman to demand the autonomy of abortion called ‘pro-choice’. Roman Catholic Church and the Fundamental Christian are the leaders of the pro-life campaign for the unborn child. And the founder of Planned Parenthood Margaret Sanger (1878-1966) opened up the birth control movement as well as the demographic policy of United States and initiating the United Nations Family Planning Programs. Some Scientists tend to confirm that the embryos are just living organisms undergoing rapid growing but doubt that they are function any sense of persons (Maienschein, 2014). Along with this argument, those scientists promote the genetic chimerism (Maienschein, 2014)

From the perspective of Roman Catholic Church, the answer for the human dignity of the unborn child is definitely “Yes.” and affirms that human life begins at the moment of contraception. The pontifical document officially indicates that *‘The human being is to be respected and treated as a person from the moment of conception; and therefore from that same moment his rights as a person must be recognized, among which in the first place is the inviolable right of every innocent human being to life’* (Donum Vitae, 1987: Sec1-1). In the psalm of the Old Testament remained the Hebrew’s basic concept of the human life which begins at the mother’s womb throughout at least two thousands of years. *“You formed my inmost being; you knit me in my mother’s womb...My very self you know. My bones are not hidden from you, when I was being made in secret, fashioned in the depths of the earth. Your eyes saw me unformed; in your book all are written down; my days were shaped, before one came to be.”* (Psalm 139: 13-16)

Furthermore, the Hebrew respects the human life as the sacred image of God which is made by God. In the Genesis of Old Testament bears the word as God said *“Let us*

make human beings in our image, after our likeness...God created mankind in his image; in the image of God he created them; male and female.” (Genesis 1:26-27) The Hippocratic Oath is the paradigm of profession of the doctor as a morally self-regulating discipline. The wording of The Hippocratic Oath is addressed by the medical sociologist Roy Porter as *“I swear by Apollo the healer, by Aesculapius, by Health and all the powers of healing, and the call to witness all the gods and goddesses that I may keep this Oath and Promise to the best of my ability and judgment...I will not give a fatal draught to anyone if I am asked, nor will I suggest any such thing. Neither will I give a woman means to procure an abortion.”* (Porter, 1999 : 62-63).

1.5.2 Dose the Unborn Child Have the Human Dignity of Right to Live?

On the basic ground of the first question: if the unborn child is the human being, the second question is correspondingly raised. Roman Catholic Church would notify that the unborn child have the basic human dignity of rights to live. From the biblical text the unborn child gains the sanctity and may enjoy all the human rights of the human beings. The basic command rule of Ten Commandments had written *“You should not kill.”* (Exodus 20:13) In a wider interpretation, the principle of ‘not to hurt’ is part of the rule of ‘not to kill’ as the biblical text reveals. *‘When men have a fight and hurt a pregnant woman, so that she suffers a miscarriage, but no further injury, the guilty one shall be fined as much as the woman’s husband demands of him, and he shall pay in the presence of the judges.’* (Exodus 21:22).The Christian Ten Commandments has been identified as one of the oldest legal systems. If we trace another old legal document The Code of Hammurabi, we would find the similar protection on the basic human dignity regarding the basic right to live of the unborn child. The content of No. 209 of The Code of Hammurabi indicated that *“If a man strikes a free-born woman so that she lose her unborn child, he shall pay ten shekels for her loss.”* provided by the Lilian Golden Law Library of Yale Law School on the web.

The legal systems represent the basic authority of the governors or state. Even in the Roman Empire the law has been identified as the basic requirement of the Empire. The relationship between religion and state has been struggled long in such a painful process in the Western World. To some extent, it is also the issue of secularization that has endeavored many arguments among the humanists and philosophers in the Western Christian civilization. As we know the most frequent reason of abortion was to conceal the illicit sexual activities. Wealthy women or legitimate fathers do not

want to share their wealth with lower-class children. .In ancient time the rich women would seek abortions since they do not enjoy their figures with the trouble pregnancy of bouncing babies. (Gorman, 1982 : 15)

1.5.3 Public Reason and Restriction on Abortion

The human dignity of unborn child is directly threatened by some radical feminists who advocate the reproductive rights of women. Women have the right to demand abortion while the pregnancy is confronted with some medical problems. Both Catholic and Christian teachings agree to abort the unborn child while the pregnancy would cause harm to mother. It could be interpreted as the medical reason. But the abortion has been to be abused due to many social and psychological reasons in the modern world. The trend of legalization of abortion is the main campaign during the second wave of feminism in the 1960s. Evidence indicated that Russia had legalized abortion earlier than Iceland which had been reported as the first country to legalize abortion. The journal of TIME reported that Dictator Joseph Stalin celebrated the tenth anniversary of legalization of abortion in Russia on February 17, 1936 (Rothman, 2015).

To some extent, the decision of being pregnant or given birth is not a simple social behavior instead it is defined as one of major pressure of human activities. In the 1950s, Dr. Thomas Holmes noticed that most of his patients experienced some major stressful life events before they were severely-ill. With the collaboration of Richard Rahe they developed a questionnaire called Social Readjustment Rating Scale (SRSS) in 1967 for identifying stressful life events (Holmes &. Rahe; 1967: 213). According to SRSS, pregnancy is one of the major stressful life events (Cosgrove, 2001). The linkage between stress and the onset of disease need more concern. Decision of continuing pregnancy or aborting the unborn child is both crucial to the mother. It challenges not only the couples as well as the states to be ready to make a balanced decision between mother and child since the unborn child cannot speak for itself. The states are bounded in this regards. The human dignity of the unborn child and the autonomy of reproductive right of the woman seemed at the opposite site of the state demographic policy.

The gate of abortion was widely opened by the founder of Planned Parenthood of America Margaret Sanger (1879-1966) with her medical background of nurse. She run a birth control clinic in Brooklyn New York in 1916 and promoted the birth control movement in the early twentieth century. She also established the American Birth Control League and published the journal of *Birth Control Review*. In the

mid-1930s Sanger and other advocates advanced the term of *family planning* to promote reproductive health and pregnancy prevention. Finally the organization of Planned Parenthood of America extended into International Planned Parenthood Federation (IPPF) cooperated with the United Nations and made the family planning programs as a demographic policy after the Second World War.

Another trend of demographic policy was influenced by Darwinian which was extended as the eugenic. It was advocated by the cousin of Charles Darwin, Francis Galton. He emphasized the importance of race and promoted the term *eugenics* meant 'truly' or 'purely' born to order improve the human genetic species in 1883. The eugenics in Great Britain, United States and German were almost developed simultaneously and became a worldwide movement during 1900-1940 (Allen 1997). The population control and birth control had been brought into the international scenario at The Fifth International Neo-Malthusian and Birth Control Conference held in London in 1922. The president of Eugenic Society held the conference cooperated with American Birth League to urge the exercise of birth control as the scientific and medical doctrine. (The Fifth International Neo-Malthusian Report, 1922).

Along with the liberty and equality, public reason is one of the core element of liberalism. Public reason is the about the process of public justification, including the reason-giving, reason-demanding, and the insistence how the political powers are backed by reasons (Macedo, 2000:11-12). The modern philosopher of Harvard University Michael Sandel notices a close analogy between the abortion debate today and the antebellum debate over the slavery (Sandel, 1994:179). The concept of public reason or public reasonableness was required to go back to a moral principle, which may be parallel to the liberal principle beside of the distributive principle as John Rawls's masterwork *A Theory of Justice*. Furthermore, it may need to go further to learn the tolerance, a sort of natural law, the "strength of reason", which was John Locke provided in his *Letter Concerning Tolerance* and the *Second Treaties*. (Macedo, 2000:14-19).

Public reason may serve as the index or symptom of reviewing the abortion problem. The medical history may help to clarify the development and limit of medical knowledge about illness and health. The empirical tradition of medicine would categorize a particular disease connected with a biological sense in the past. And the common symptoms such as fever and cough could only be observed and recorded but the diagnosis and the level of sickness were frequently unreliable in the middle age but now the modern development of medicine would emphasize on the importance of medical prevention. To set the restrictions on abortion may help both

the women and the institutional settings to consider abortion more carefully. Pre-abortion counseling and waiting period may serve as the public reason at the level of individual and the states. The government need to provide the economic assistance to those who has the stress of bearing the child due to the economic reason. The medical professions may provide the medical knowledge about the embryo and fetus, and the abortion could be restricted and limited while the obstetricians and gynecologists have been normally educated the concept and operation of abortion in medical school (Pritchard & Macdonald, 1976: 483-515). We hope the abortion could not occur daily like the outbreak of plague or epidemics daily caused millions of death around the sixteenth century in Europe (Waddington, 2011 : 16-20).

The responses to plague was a process of medical development. Evidences provided in Europe characterized the efforts to limit the spread and impact of epidemics which outlined the development of early modern public health. The Italian city-states were the first to introduce measures to limit contact between the sick and the health. Permanent boards of health were gradually established in most major cities. For instance, in Florence, crated one to provide a systematic attempt to monitor and preserve public health. The ‘medical police’ was introduced in some Europe countries which was explained the growing role of the state to responding the healthy need of population in the eighteenth century. The work of Australia physician Johann Peter Frank *System einer Vollstandigen Medicinschen Polizey* (A Complete System of Medical Police) was fires published in 1779 which outlined the measures of regulating behaviors that might lead to disease and propose hygiene controls as well as the environmental cleaning measures (Waddington, 2011 : 230-234). The historian work of Pamela Gilbert *Cholera and Nation* (2008) illustrated how England shown the state power of medical authority and sanitary reform. The research examined that the interest groups were connected with the spread of cholera the state promoted the sanitary reform and led the Reform Bill enacted in 1832 (Gilbert, 2008 : 17). And the lawyer Edwin Chadwick was identified as the starting point of England public health movement. His resulting *Report on the Sanitary Condition of the Laboring Population* (1842) articulating the association poverty and the disease. His efforts and ethos were embodied in the 1848 Public Health Act (Waddington, 2011 : 238).

1.6 The Key Elements of Understanding the Arguments

The main challenge of questioning the human dignity of the unborn child is from the critics of radical feminism. Most feminists cast doubt and strongly go against on judicial restriction on abortion, including the pre-abortion counseling as well as the waiting period. Margaret Sanger (1879-1966) with the medical background of nurse is

the founder of Planned Parenthood of American and advocate of birth control movement. She not only polarized the dilemma of the bearing the child and the personal choice of being a mother conflict for the radical feminists but advocated the women's reproductive right. And finally the Planned Parenthood of American played as an International Planned Parenthood federation which promoted the family planning program in the United Nations. The feminist is not only a gender problem though it is related and long dominates the issue of class conflict from Marx to feminist who share the same concern with humanity. Marxism contributes to the understanding of social political practice and the conceptions of human deliberation in Western history. Feminists developed itself as an abundant resource pool to build their related theories. The feminism not only borrowed the tradition of critical theory which rooted in German idealism and Marxism, but also from the examination of modern economy, the problems arrived from the free market (Gottlieb, 1989). And all need to return to the basic philosophical investigation of individualistic practice.

The critical theory gave the insight to feminists. From Hannah Arendt (1906-1975) to Catharine MacKinnon (1946-) criticize the male authority, including the economic structure and totalitarian they built. And also to Juliet Mitchell(1940-), Barbara Ehrenreich (1941-) establish the socialist-feminist theory concerned the nature of power, especially the inequality, represented as class structure, sex, marriage, work, and law. The current feminist Catharine MacKinnon authentically and systematically criticizes that statue of women is constructed by the male domination and claims such a discrimination is everywhere. She devotes to seek the jurisdiction equality for women (MacKinnon, 2005).

The radical feminists remind of women to become more aware about how they learn even the psychology and physiology from their oppressors. And they led the movement to liberate all women. They believed that 'Without a political movement it is barely possible for women to describe even how they experience their own sexuality'. They call 'the oppressed' by man inside family and public political life as 'cultural colonization' which needed to break it. 'The first stage in this discovery is the recognition by the oppressed of a general situation of dominance'. Women work like a 'domestic worker' but without 'wages for housework' (Ehrenreich, 1984). In the paper of 1926, Karen Horney quoted 'the Flight from Womanhood' to resist the male hegemony (Rowbotham, 1973).

The feminist called the reproduction as a 'sad mimicry of production' in the society. It was 'an alienation of labor in the making of social product', and even 'in the condition of the worst exploitation'. They called the child as the 'biological

product'. 'Parenthood become a kind of substitute for work, an activity in which child is seen as an object created by the mother.' In the same way the child is a commodity by a worker and a possession of the parent. Women's role in reproduction has become the spiritual 'complement' of man's role in capitalist society. They encouraged women to escape such universalized notion of maternity according to the categories of Marxist historical analysis. (Mitchell, 1971)

1.6.1 The Institutionalization of Private and Public Domains

The term of the socialization refers to the process of '*institutionalization*'. Berger and Luckmann attempt to denote the *social norm* or the *social order* by interpreting both the influence of anthropological understanding and the psychological assumption. Therefore, they used the word of ethnological evidence as the sexual drive. Berger and Luckmann indicated that rather than a biological human nature, human sexuality sometimes is the product of human's own social-cultural formation and rigidly structured by different cultural patterns. For Berger and Luckmann, the immense variety and the luxurious inventiveness of human sexuality is the social product of the externalization of human activity contained the character of *sui generis* against both their organism as well as their environment. It is an anthropological necessity. To some extents, human kinds' humanity and their sociality are mutually affected. Berger and Luckmann claimed that "*Homo sapiens are always and in the same measure, homo socius.*" (Berger, Luckmann, 1966:51) With those concepts then we could enter the perspectives of medical sociology, the concept of human dignity of the unborn child is under the social construction of reality. Our understanding of human dignity as well as the concept of unborn child all should be evidenced not only engaged in the philosophical process but also need to investigate the analysis of the process of social construction, which also relates to the legitimate problems of relativism, historicism and so-called sociology of knowledge (Berger, Luckmann, 1966:16).

1.6.2 The Influence of Sexuality in Modern Society

To some extent the sexuality seems became the obvious factor of modern society while we concern the social norm, social order, social control, socialization and institutionalization. The sociologists Berger and Luckmann depicted that the sexuality has influenced the modern society before we discuss the development of medical sociology. Aside of eating, drinking and sleeping, sexuality obviously the most biological character of human beings which Berger and Luckmann noticed as determined interference "*The plasticity of the human organism and its susceptibility to socially determined interference is the best illustrated by the ethnological evidence*

concerning sexuality.” (Berger, Luckmann, 1966:49) The main research on this subject would contribute to Sigmund Freud (1856-1939) and his work *Three Essays on the Theory of Sexuality* (1905) made the well-known argument that human sexuality was traceable to infancy and childhood (Freud, 1975 : 97).

Berger and Luckmann articulated that unlike the other higher mammals, human beings have no species-specific environment which is borrowed from the anthropological ideas as well as the biological notions. It refers to indicate that human beings do not have a more fixed world like horses or whales. Yet the whales are restricted to the ocean and horses are bounded to the grassed geographic environment. The living world of the human beings is much related to an environment which is characterized by a sense of world-openness. The sociologists Peter Berger and Thomas Luckmann described the achievement of human kinds “*Not only has man succeeded in establishing himself over the greater parts of the earth’s surface, his relationship to the surrounding environment is everywhere very imperfectly structured by his own biological constitution.*” (Berger, Luckmann, 1966:47) They emphasized that there is no human nature in the sense of biologically fixed substratum determining the variability of social-cultural formation. Furthermore, the human beings have ‘drives’ which are sometimes unspecialized and undirected. Human beings need to construct his or her nature as well as his own products.

Basically, the concept of social construction is the main stream of modern sociology and carefully articulated by the sociologists of Peter Berger and Thomas Luckmann in the 1960s. In their brilliant work *The Social Construction of Reality: A Treatise in the Sociology of Knowledge* revealed the human beings are strongly influenced by the sexuality. And the Sigmund Freud is another modern psychologist to emphasize the importance of sexuality in this modern world. The human dignity of the unborn child is drowning since the human nature and human behaviors of most human beings are also drowning in the over-sexual dominated modern world.

1.7 The Social Value of Religion

Though the German biologist Ernst Haeckel (1834-1919) who promoted and popularized Charles Darwin’s works in German is another divergent picture since his embryonic drawing as well as the recapitulation theory led to a controversy (Raven, Johnson, 2002). However, the modern society could be understood as an atheistically skeptical society. The concept of evolution of Charles Darwin played as a dominating theory among many different fields of social science as well as political life. Influenced by David Hume, Charles Darwin tended to regard human nature as the

mental power of animal rather than the Divine Instruction. The main strand thinking of Darwin became more atheistically skeptical during 1838-1839. The argument of the existence of God also tended to natural of theology as the concept of Hume had revealed in *Dialogues Concerning Natural Religion* as well as in the *Natural History of Religion* (Keynes, 2005:57-58)

The revival of the religious study makes the faith-based social behaviors more assessable. Contrary to the previous studies to fault the religious sociologist Durkheim as reductionist and to criticize him confused the religious and social values, the modern study of religious sociology provide us a different viewpoint. Pickering's comprehensive work Durkheim's *Sociology of Religion* (1984) highly praised Durkheim had transited the religion as a new turning point. The neo-Durkheimians, such as Mary Douglas, Victor Turner, Peter Berger, Clifford Geertz, Robert Bellah, and Claude Levi-Strauss have been influenced. *The Elementary Forms of Religious Life* transited the classroom from the dated nineteenth-century-style speculation into a gold mine (Paden, 2009: 31-32).

The sanctity of the unborn child is the basic affirmation and opinion of the pro-lifer. Both the term of sanctity and the concept of sanctity are central to religion or spirituality of people worldwide. Sociology of religion has been rarely understood to those who do not have any ideas or forms of religion, even the previous generation of religion scholar, such as the Joachim Wach criticized Durkheim of confusing religious and social values. Actually, Durkheim had inferred the theory of religion rested on the science and articulated that man and society linked to the universe (Durkheim, 1995: 432). The authentic contribution on the research of sanctity of religion is from Otto and Mircea Eliade (1907-1986). The brilliant work of Eliade is *The Sacred and the Profane: The Nature of Religion* (1959) which indicated that the symbolic connection between the religious object and the ritual transformation. With the influence of anthropology, the notion of religious festival contains the richness of reuniting with the specific cultural element in time, space, myth, and rite which may convey quite different meaning from those who do not believe. To some extent the mythic realms give a more integrated quality of the cosmos, such as harmony which is called hierophany in term of religion to the aspect of the human world (Eliade, 1963: 459)

Max Weber opened up a new perspective research on the connection between capitalistic activities and the religions. He undertook his long study on the economic ethics of Hinduism and Buddhism opened another different interpretation of the South Asian religions. What he has in his mind is to investigate the religious and cultural resources which give rise to a capital spirit in non-European civilizational tradition as

he had found with forms of Protestant ethics in Europe and North America at his book *The Protestant Ethics and Spirit of Capitalism*. His famous book *The Religion of India: The sociology of Hinduism and Buddhism* originally published in German in 1916-17. According to Weber's research, there are four key aspects of religious values of Protestantism. They are active, rational, this-worldly, and ascetic (Gellner, 2009:51). Some scholars notice that Weber's study may inspire other researches which are relevant to the 'development' and 'modernization' to investigate if the Confucianism as the key to the success of Taiwan, South Korea, and Japan. Those scholars attempt to theorize about the development and to explain why some countries developed faster than others.



Chapter Two : Literature Review and Research Design

Every policy has a history. Furthermore, population policies typically refer to the state interventions into the most private aspects of citizen's life. This research attempts to probe the policy problems of human dignity of the unborn child within the population politics. This study would demonstrate the missing part of the unborn child and outline the policy problem structuring, then to identify how the population policies fail to consider the human dignity of the unborn child not only at the level of international political domains but also in Taiwan and Singapore. All the efforts of this study may only provide the understanding of problem's structures, not directly help the problem solving. May the problem is well formulated at this study and to benefit the problem of solving in the future.

The nature of policy problems are often some unrealized needs, values or opportunities for improvement which may not be pursued through policy actions (Dunn, 2012). The complexities of the policy problem may exist among numbers and varieties of elements, factors and interactions in the process of decision making (Dryzek, 1983, 1987). The investigation of the human dignity of the unborn child may not only need to endeavor the efforts of clinical settings, the awareness of the gynecologists or pediatrician but also the concept of pregnant mother and woman. We have to admit that the medical knowledge is still rare to most ordinary people like us and we are not familiar with the relationship between medical sociology and medicine which is not always harmonious. According to Gerhardt's research, the medical sociology mainly developed after the World War II and dominated by four traditions: Structural Functionalism, Interactionism, Phenomenology, and Conflict Theory. Each of these has generated its own conceptions of illness and treatment (Gerhardt, 1989).

As to the literature review, some important documents, such as the research of *Experiment of Family Planning* (1978) by Roberto Cuca, the book of calling for the population studies was *Power and Choice* (1973) written by Bachrach, Peter and Bergman, Elihu and the related works of discussing the population policy, for example, *Population Dynamics and International Violence* (1974) by Nazli Choucri; *Population and Politics* (eds) by Richard L. Clinton had been reviewed in *Journal of American Society of Public Administration*. And there are only two document on

the report of the fifth International Neo-Malthusian and Birth Control Conference(1922) and International Birth Control Conference (5th 1922 London, England) could be read online.

This study attempts to provide the comparison with identifying the importance of religious perspectives on policy making while to probe the policy problems of human dignity of the unborn child. The Catholic as well as the Christian faith is inter-used in this study. The social value of the religious is doomed and sometimes is also considered hostile in the modern world. Meanwhile, the study of the body and gender are the main trend of recent sociology and medical sociology. The most criticism comes from the sociologist and philosopher Michel Foucault (1926-1984). His work on *The Order of Things* (1970) and *The Birth of the Clinic* (1973), and *Discipline and Punish* (1977) provoke the alarming rise of the body of illness as well as the harsh interpretation of the social control and religion. From the perspective of symbolic interactionist Erving Goffman, he emphasized that the individual would define their subjective mental illness within the social situation and formed the concept of stigma. According to his analysis, there are three stages of stigmatization process: the person's initial or primary deviation from a normative framework; the negative societal reaction; and the person's secondary reaction to the negative reaction that becomes the person's "master-status". To some extent, the general hostility or ignorance of the religion could be considered as the stigma of modern world. The meshes bodies of aborted unborn child like the stigma ironed as the sign on the slaves of the modern world (Goffman, 1963, 2009 : 1). And the pro-life movement for protection of the sanctity of unborn child manifests the lay knowledge verse the elite's knowledge of some radical feminists who acted like the spoiled identity of women but actually they cannot represent all the women and voices. The 'silent majorities' includes the aborted unborn children who need someone to speak for them and hopefully the outcries could be heard of.

2.1. The Task of Modern States

Population policy is the main task of a modern nation-state, which is actually consisted of at least two different dimensions: *population growth* on one hand; and *population health* on the other hand. The former is associated with the concept of human labor of the state, also known as the national wealth; the latter concerns the infection of the disease, and known as a series of sanitary reform or political medicine in the nineteenth century (McKeown, 1976; Porter, 1994). The historians help us to indicate that the modern epidemiologists note the presence of smallpox among peoples of earlier civilization and the recent studies tend to accept that the first

clinically documented case of smallpox did not occur in England until the reign of Elizabeth (Anselment, 1989). Furthermore, European societies were experienced a complex of transformation in terms of industrialization, urbanization and modernization since the nineteenth century. A combination of political, societal and economy forces may properly account for the divergent faces of interaction between population policy and the public health.

Thomas Robert Malthus (1766-1834) was the preeminent classic economist of population he strongly concerned the danger of population growth problem in his time. Malthus professed his worry of the increase of population usually faster than the increase of food on earth at his influential work *An Essay on the Principle of Population* in 1798 to indicate that “*the power of population is greater than the power on the earth to produce subsistence for man*”. He articulated that population increases in ‘*geometrical ratio*’ and subsistence the food increases only in an ‘*arithmetical ratio*’ (Malthus, 1798). Prior to Thomas Robert Malthus (1766-1834), Italian economist Giovanni Botero (1544-1617) was the first philosopher clearly to bring out the relation between population and the means of subsistence (Smith, 2006). Botero believed that the state’s power was a function of the number of population, income and tax revenue (Fauci, 2014). Sir Walter Raleigh had argued that population had grown beyond the possibility of subsistence and indicated that war is the logical outcome of population pressure revealed at his book *Historie of the World* in 1652 (Smith, 2006). The task of the modern nation-states highly concerned the problem of population growth.

The most interesting of this study finds that the demographers, eugenic professionals, United Nations and United States and the international non-governments organizations served as the global agents to advocate the population control policies and programs who worked with highly linked and interacted with one another. The eugenics such as Lucien March, director of the National Bureau of Statistics of French, the founding member of French Eugenics Society, had shown that he was deeply associated with the development of population policy (Quine, 1996:52).

With the efforts of classical works on medical education from the sociologists, such as Howard S. Becker and his colleagues (1961), Robert Merton (1957), Samuel W. Bloom (1963) and Renee C. Fox (1988), make the outlines of medical education become clear. The medical students would be led to intervene in the problem of patients (Henderson, 1997: 205-206). The physicians were trained to achieve the cognitive and medical demands. The medical sociologist Elisabeth Armstrong has

shown her idea that the pregnancy of a risky endeavor and uncertainty through her article of 'Longing for Certainty'.

In the sixteenth century the pregnancy might be the end of death for a mother as well as for the unborn child. Though in Goffman's term, pregnancy is a master statue. Armstrong articulates that reproduction treats less to life but still remains fraught with uncertainty even in modern United States (Armstrong, 2003: 3-6). Erving Goffman mainly contributes to the concept of everyday life which is not only meant to think again our daily life but also to depict the analysis of social interaction in sociology. (Manning, 1992: 1) His first book *The Presentation of Self in Everyday Life* was published in 1956 by the University of Edinberg. It highlighted that people's life is hidden behind the team performance as drama-surgical principle. He discussed the everyday meeting as interaction moves in his latter book *Encounters* (1961b) and *Strategic Interaction* (1970).

In sharp contrast, Taiwan, Singapore and many developing countries may strive to protect the human dignity of the unborn child but the population policy remains uncertain at the level of legislative efforts. Does the unborn child have the right to life? In the case of *Vo v. France*, the European Court of Human Rights (ECHR) had dealt with the argument of whether the embryo/fetus having the protection of right to life. Some Judges express that the unborn child is considered to be worthy of protection and presuppose the *prima facie* applicability of Article 2 of European Convention on Human Rights: 'Everyone's right to life shall be protected by law' to a fetus. Objections from other judges refer to the threat to the right to abortion in contracting countries. It seems that the relevant legal instruments present the inability to reach a consensus on what a person does not prevent the law from defining related terms (Pichon, 2006). This paper attempts to investigate the concept of human dignity of the unborn child both in Taiwan and Singapore, especially in the process of being the modern nation-state development on one hand.

On the other hand, in achieving of being the modern nation-state, how the foreign advocators successfully influence both Taiwan and Singapore governments to take anti-natal population control policies. In order to clarify the population policy among these foreign advocators would trace to a variety of resources at the international political scenario, especially under the promotion of Family Planning programs of the United Nations, United States, demographers neo-Malthusians, eugenicist and international non-governmental organizations (NGOs), for instance, International Planned Parenthood Federation (IPPF), United States Agency for International Development (USAID), Population Council and etc.

The importance of *population control* and *population health* gain the most interest of scientists, government officials, demographers, eugenicists and NGOs even from the nineteenth century. The population control and population health are two important tasks for modern nation-states. The fear of overpopulation growth may hinder the economic growth is the fundamental tune after the World War II. Such an idea troubles the developing countries and causes them to adopt the Family Planning programs while they strive to join the global market and increase their national competitiveness at the international politics. However, Singapore is the first country that the government reversing her earlier anti-natalism policy since 1987 while the fertility rate of Singapore has reached the replacement level of 2.1 in 1975. However, Taiwan government has not yet taken any concrete measures, but only stated some pro-natalist statements until 2006 while the fertility rate had reached the replacement level of 2.1 in 1984. The fertility of Singapore accomplished its replacement level in 1975, while Japan has reached in 1973 and Korea in 1984 (Sun Shirley, 2012). The most Asian countries remain ultra-low fertility rate in the 1990s. To some extent, the ultra-low fertility rate of Asian countries manifest the dream of being the modern nation-states but swing between the state population policies and individual childbearing decision.

Taiwan and Singapore repeat the similar demographical policy development as the western modern states. The neo-Malthusians and eugenicists merge at the battle of international population control movement in the UN. Furthermore, the United States backed the population control movement and played a key role of making international population policy. The President Dwight Eisenhower had ever served as honorary co-chairman with Harry Truman, the chairman of Planned Parenthood of Federation of American. And finally the population control develops as a worldwide campaign (Connelly, 2006).

The debate within political philosophy while the political outcome opt *to be right* or to be *fair* becomes more polarized. Democracy theory has traditionally focused on the latter. While discussing abortion, the other side of human dignity of the unborn child, the question of *goodness* or *rightness* is often ignored. In liberal democracy the civil liberty and liberalism is acknowledged to protect the freedom of individual liberty from any deprivation of governments or nations. The new development of good governance strongly influences the basic idea of civil rights and the value of human dignity. The so called '*fairness*' may help the democracy to '*track the truth*' and see democracy as being more desirable than alternative of decision making. The procedural democracy is designed to reveal *political justice* (Marchetti, 2008). Even the advocate of rights of abortion has marked as the radical-libertarian feminists

within the spectrum of women's movement since the 1960s. The liberal right to abortion for women proclaims that "*The personal is political.*" which was the famous slogan advocated by feminist Carol Hanisch in 1969. The liberals have ever claimed that the '*right*' must be given priority over the '*good*'. Yet, the belief of rationality defined as the basic ability of human nature as well as the base of liberty distinguishes human beings from other animals (Tong, 2009). When and why the human beings seem to lost their reason or rationality to choose goodness? If adopting the feminist Alison Jaggar who locates the ground theory of feminism stressed it as the uniqueness of human person (Jaggar, 1983). We hope to bring the rationality and reason back to the '*goodness*' in the process of demographic policy making.

Despite a growing interest with human rights of the children may have reached the climax at public agenda while UN declares of 'The International Year of Child' in 1979, the statue and human dignity of the unborn child still has been long way to move on. The human dignity of the unborn child is 'the missing part' at public sphere among the issues of economics and demographic politics in name of 'reproductive health' as well as "reproductive right" which has been strongly advocated by UN from The Conference on Population and Development at Cairo in 1994, aligned with the second and third waves of the feminism (Gilmore, 2008). More precisely, United States carried out the Family Planning programs which are rooted in liberalism and serviced as liberal governmental apparatus to deal with the 'unplanned pregnancy'. Family Planning programs create the liberal identities legitimately as a polar opposite of the good citizenship and attempts to lock those liberal identities as an universal language of law and science to utilize the substances in games of inclusion and exclusion to safeguard the will to govern (Panu, 2009; 2-3)

The comparison study of Singapore served as the comparative base line since Singapore government enacts the *pre-abortion counselling* and *48 hours mandatory waiting period* before abortion. These two policy settings of abortion are totally lacked in Taiwan government. Singapore government enacts The Termination of Pregnancy Act in 1987. Dose the pre-abortion counselling and 48 hours mandatory waiting period help women to make a pro-life choice both for mother and the unborn child? Is there any accurate number or research result to prove that the abortion declines after 1987? However, the concept of human dignity of the unborn child is a process of education. This paper is a dissertation project to adopt the qualitative approach with series of focus groups interview, which is the main methodological method of the social science at my dissertation. The goals of the FGI will focus on the process of inquiring the concept of human dignity of the unborn children and leading a comparison between *faith-based* and *unfaith-based* participants of several groups.

There are about 24 Focus group interview are estimated to interview in this dissertation study.

2.2. The Decline of the Religion?

Is political policy only a zero-sum resolution? The changing characters of urbanization, industrialization, modernization, and globalization influence the forming of the modern states. Moreover, secularization, religious pluralism and new forms of religious transmission add the diversity and harmony of public policy. Population policy is the main task of a modern nation-state, which is actually consisted of at least two different dimensions: *population growth* on one hand; and *population health* on the other hand. The former is associated with the concept of *human labor* of the state, also known as the *national wealth*; the latter concerns the infection of the disease, and known as a series of *sanitary reform* or *political medicine* in the nineteenth century (Porter, 1994).

The historians help us to indicate that the modern epidemiologists note the presence of smallpox among peoples of earlier civilization and the recent studies tend to accept that the first clinically documented case of smallpox did not occurred in England until the reign of Elizabeth (Anselment, 1989). Furthermore, European societies were experienced a complex of transformation in term of industrialization, urbanization and modernization since the nineteenth century. A combination of political, societal and economy forces may properly account for the divergent faces of interaction between population policy and the public health.

The tension between science and religion may rise from the argument of calendar. Medical sociologist Erving Goffman notices that while some persons are discretized due to his or her illness or bodily defect it is a kind of discrimination and he terms it as a kind of stigmatized (Goffman, 1965/2009: 3). Race, nation and religion including Catholic and Christian faith could be considered as a kind of stigma in the public policy of the modern world (Goffman, 1965/2009: 4). Although the term of 'Before Christ' and 'After Christ' are marked individually as B.C and A.D. (Anno Domini) in the west calendar which was in memorial of Era of Martyrs by Roman Emperor Gaius Aurelius Valerius Diocletianus in 284 A.D. The main argument of calendar is what takes the center of the universe: earth or sun. Pope Gregory XIII (1502-1585) set the calendar in 1582 which is 18 years after the death of Galileo and it is called Gregorian calendar or civil calendar now we use (楊玉齡譯 1999). The Catholic as well as Christian faith had been far thrown by the rise of modern states.

Not only Charles Darwin (1809-1882) and his followers severely doubted the existence of God which has mainly shaped the Western civilization. People seemed to become one dimension person and to be split or twisted between the state power and society. Personal conscience has been the fulcrum from the Revolution of modern science. Mental illness stress, conflict, and suicide even increased. The social structures, norms, and values are challenged. Religion has been severely criticized as the opium by Karl Marx. He emphasized that man makes religion, religion does not make man (Marx, 1843:1). He expected that religion is only the sigh of the oppressed creature, the heart of a heartless world, and the soul of soulless conditions. The outcries of Karl Marx focused on the injustice between the oppressed class among the ruling regimes, including the ruling class, royal class, the rich and the Christian faith. Jesus had criticized the Pharisees “This people honor me with their lips, but their hearts are far from me.” (Mathew15:8) The similar criticism comes from the book of prophet Isaiah around 740 before Christ when Jews confronted the threat from Assyrian Empire. “Since this people draws near with words only and honors me with their lips alone, though their hearts are far from me... (Isaiah 29:13a)”

The classical sociologists had outlined the severely social change from the macro-level social process. Durkheim had categorized three types of suicide emphasize the importance of social support (Durkheim, 1951). People would suffer of losing the sense of order while the social support system failed. And in a variety ways, the stress would affect people health, yet the stress would be mitigated through the social support. The influence of culture and the importance of religion regained their weights by the development of anthropology. Bronislaw K. Malinowski (1884-1942) and Margaret Mead (1901-1978) had significantly highlighted the study of across racial cultures and religious lines. Though Mead’s anthropologist’s research on Samoa had severely criticized by New Zealand anthropologist Derek Freeman still represented the important cross cultural teen research. Mead’s research of *Growing Up in New Guinea: A Comparative Study of Primitive Education* provided a comparative perspective on cross racial education for the teen research (Mead, 2001).

Modern research of medical history has notices the relationship between health and religion since nineteenth century. The research on the health statue of the clergy, the mortality covering the cardiovascular disease hypertension, stroke, uterine and non-uterine cancer though lack of some cross-cultural studies conducted by Jeff Levin and Preston Schiller (1987).

Some historians indicated that the plague burst out in Europe around the fourteenth century. It came from East via Mongol troops in the mid-thirteenth century and also

reached into central and northwest China and Central Asia. The spread of plague as flea-infested rats was outbreak to Caffa on the Black Sea in 1346. Then fast spread to the most Europe. Mortality figures for the Black Death incredibly caused the population of many cities 50-60 percent loss. In England and Germany, some villages complete disappeared (Spielvogel, 2011 : 221)

2.3 Qualitative Research Approaches

Historical understanding enables us to reflect upon the *historicity*, rather than the dead weight of the past, the event and the memory. The word *historicity* requires the investigation of documentary studies and helps to understand ‘how we got from there to here’ both spatially and temporarily. At the close of the twentieth century the *interdisciplinary* even appears prominent (Mandalios, 1996, 2000). The historical approach helps to examine how ‘overpopulation’ sensed as the development problem. Who does create this course and make it so convincing as to be the stated objective like Taiwan and Singapore? Why and how does controlled fertility signify the course of modernity? Historically turning back to some ground social theories is necessary, such as to investigate the world-system theory based on Immanuel Wallerstein, the liberal idea of modernization like Anthony Giddens that have constructed the shape of political powers. Institutional approach helps to pioneer the breakthrough to modernity, the world-economies, the core-peripheral societies, and highlight the impact from industrialization, modernization, state formation and institutional apparatus.

Basically, historical institutionalism developed in response to the group conflict theories of politics, such as Barrington Moore endeavored in the *Social Origins of Dictatorship and Democracy* (1969) and structural-functionalism which is prominent in political science during the 1960s and 1970s. The historical institutionalists recognize the institutional organizations of the polity and political economy as principle factors structuring the collective behaviors and generating different outcomes. The debates between historical institutionalists and structural functionalists led the latter to take closely look at the state, seen no longer as a neutral broker among competing interests, but as a complex of institution capable of structuring the characters and outcomes of group conflicts. Much of the contributions of the historical institutionalism led to explore other social and political institutions, including sorts of labor movement, financial systems, and cross-national comparison of public policies. (Hall and Taylor, 1996)

Against the idea of pronouncing ‘the end of history’ and the arrival of ‘the last man’ by Fukuyama (1992), this research needs to jump into the complexity of interaction between capitalism and modern nation-state. The work of Immanuel Wallerstein articulates the making of world economy *The Modern World-System* from sixteenth century consisted of three volume: *Capitalist Agriculture and the Origins of the European World-Economy in the Sixteenth Century*; *Mercantilism and the Consolidation of European World-Economy, 1600-1750*; and *The Second Era of Great Expansion of Capitalist World-Economy, 1730-1840*. The Sociologist Charles Tilly may provide the sketch of the complex development of European modern nation-state by his work *The Formation of National States in Western Europe* and the book *Coercion, Capital and European State AD 990-1990* (1990). The contribution of Marc Bloch and Fernand Braudel both make the global economic development become more visible and accurate. And the empire of Western economy provides a way of life for the developing countries on the road of modernity. The post-colonialists seek to undo the characters of ‘disciplinary knowledge’ of history, comparative literature, political science and feminist studies (Moore-Gilbert, 1997).

2.4 The Key Concept of Medical Sociology

Traditionally, medical sociology tends to side with patients and to call attention to instance of poor treatment and it has generally removed from being a subordinate position to medicine. Beside of the clinical settings from the physicians, the more need of investigation of health-related social behavior, living condition for prevention of disease, onset and course of chronic disorder foster the significant research development of medical sociology. Moreover, medical sociology set its research agenda to nurture the practice and policy as an object of study (Cockerham, 2001: 4).

The treatment of physical body is the main concern of medicine. Medical sociologist Erving Goffman concerns the disgraced body and terms it as *stigma*.in his work *Stigma: Notes on the Management of Spoilt Identity*. Basically, medical and social settings are established and categories the persons including the patients as different diseases or races. Thus people may have many different social identities. It is also called social status. Goffman articulates in details the difference between virtual social identity and the actual virtual identity that the former represents the personal expectation among the process of socialization and the latter is the social status that the person really possessed. A person while he or she is regarded as bad, dangerous,

weak or even a failing, shortcoming, and handicapped constitute the discrepancy (Goffman, 1965/2009: 2-3).

Talcott Parsons (1902-1979) played an important role of the development of medical sociology, with his privilege of study with the European classical sociological tradition from Emile Durkheim (1858-1917) and Max Weber (1864-1920). He established the academic research of medical sociology in the United States after the World War II and published the significant book of *The Social System* in 1951. His concept of the sick provided new analysis of the function of medicine and led the training of psychoanalysis at the Boston Psychoanalytic Institute when he was on the Faculty at the Harvard University (Cockerham, 2001: 4). Basically, he noticed the important influence of social culture and defined it as “ordered system of symbols” which affected people’s social action and internalized the personalities of individual actor. Moreover, people shared the social symbolic interaction which was functioning as institutionalized patterns into the social system called “cultural tradition”. Value orientations, beliefs, and expressive symbols are three principal components and systems of the social culture tradition (Parsons, 1951: 326-7). Parsons efforts attempted to find a balanced analysis the values and motives from falling into the extremes of psychological determination. He emphasized that social culture has three characters: first, it is *transmitted*, which constituted a heritage or social tradition; secondly, it is *learned*, and thirdly, it is shared.

Along with Talcott Parsons efforts, this research sets the comparison with the “faith-based via non-faith-based” focus group interview on the concept of human dignity of the unborn child. We need to bear in mind that Parsons was fully aware of the role of religion when he completed his doctoral studies at Heidelberg University in Germany in the mid-1920s. He also participated in the “Weber Circle”. He continued to meet regularly to discuss sociology even after Weber’s death at the home of his widow Marianne Weber. He translated Weber’s book *Protestant Ethic and Spirit of Capitalism* (1958) into English and introduced many European’s sociologist ideas to Americans (Cockerham, 2001: 5). The fundamental understandings of religion required put most social behaviors into the investigation of social field which was inspired by anthropology.

From the perspective of medical sociology, sometimes people are reduced to be the individual or the different interest group in the society while probing the possible policies. And individuals cannot separate themselves from sharing values or the basic understandings of the world. People’s behaviors even normally appear their preferences, including the health behaviors. From the perspective of medical

sociology, people interact with others by some symbolic behaviors. People's actions are driven by their concept of self and social situations mixed with many symbolic interactions which is one of research methods least understood and most misrepresented (Charmaz & Belgrave, 2013: 11). Based on the concept of symbolic interaction, the anthropologist George Herbert Mead (1934) and Herbert Blumer (1969) challenged the theoretical perspective of Talcott Parsons as well as the Structural functionalism. The theoretical perspective of symbolic interaction emphasized that the social reality is constructed on a micro-level by individual interaction with one another on the base of shared symbolic meanings. Human behavior could not be well organized and the social process is gradually developed through the individual's interaction which contained a variety of symbolic behaviors (Mead, 1934).

Social behaviors are related to the actors and motivations which cannot be separated from the society. Three modes of systems are layered by sociologists as: social system, personality system and cultural system. Social system and personality system are mainly conceived as modes of organizations of motivated actions. Cultural system refers to the system of symbolic patterns. Moreover, the values, norms and symbols are guided the choices among the actors. The cultural systems are related to form different patterns of value system, belief system and systems of expressive symbols. (Parsons and Shils, 1990: 39-40)

Population health is one of the important domestic policies for modern nations. Many research analyses identify that the statistically magnificent association between the greater income equality and the higher standard of population health (Wilkinson & Pickett; 2006).

Rather than semantic explanation or linear correlation, the complex of public policy renders to the multi-relationships among factors and actors. Defined as the *bounded rationality* by Herbert Simon, the complexity is something more than the sum of the system's part (Simon, 1981). This research adopts the qualitative research approaches, which is combined with historical approach, institutional approach, legal approach and focus group interview. Classical social theorists such as Giambattista Vico, Karl Marx, and Max Weber well understood the closely mutual relation between historical and social developments. The work of Daniel Smith *The Rise of Historical Sociology* (1991) introduces a clear outline of historical approach.

2.5 Focus Group Interview

Focus group interview has been widely used in social science and public health, such as HIV and AIDS to construct how the social process undergone and related to the disease (Bhana, 2009). Focus group interview provides ‘a way of listening to people and learning from them’ (Morgan, 1998). Focus group methodology can be traced back to Emory Bogards, who in 1926 described group interview in his social psychological research (Wilkinson, 2004). According to ‘David Morgan, a prominent focus group researcher, there are two broad types of focus groups: one is structured approach which is more employed in market research; the other is a less rigid and structured approach which is emerged from focus group research in social science.’ (Liamputtong, 2011: 2)

Focus group provides ‘collective conversation’ over a specific issue, and the groups can be small or large (Kamberelis & Dimitriadis, 2008). The primary aim of a focus group is set to understand meanings and interpretations from the select group of participants to gain an understanding over a specific issue. The focus group methodology is an ideal approach to examine stories, experiences, attitudes, points of view, opinions, beliefs, needs, and concerns of individuals. Moreover, focus group interview allows group dynamics, both the moderators and participants are allowed to develop diverse forms of communication and interaction, including joking, arguing, testing to recapture experiences in their day-to-day events fields (Kitzinger, 2005). Methodologically, the group size is consisted of 6-8 people who might have similar social and cultural backgrounds or similar experiences and concerns (Liamputtong, 2011: 3). ‘A successful focus group discussion relies heavily on the development of a permissive, non-threatening environment within the group where the participants can feel comfortable to discuss their opinions and experiences without fear that they will be judged or ridiculed by others in the group.’ (Liamputtong, 2011: 3). The moderator who is usually the researcher plays a key role of the group discussion. The moderator needs to prepare well and a pre-prepared discussion guide list is usually need as a memory aids in managing the group discussion around a range of key topics to meet the research objectives (Hennik, 2007).

Focus groups has been regarded as a new tool for social scientists which provides an opportunity to encourage triangulation in research (Danzin,1978; Webb et.al., 1981). The focus group methodology has gained more popularity in feminist research as well as in public health and social science. Focus group methodology could effectively provide the qualitative data to improve the shortness in questionnaire (Bisol, Sperb, Moreno-Black, 2008). The sociologist Merton (1946, 1987), who later worked in Columbia University, devoted to this research method and gave the name of ‘focused interview or focus group interview’ over 40 years, created its significant

outcomes. Merton also developed the set of procedures and came to be known as “focused interview” (Merton and Kendall, 1946) and widely used it in investigation the collective behaviors and social context of massive persuasion (Merton, Fiske and Curtis, [1946] 1971). Merton had introduced how he indebted the research method of focus interview and focus group interview from Paul Lazarsfeld in 1941. That famous story which Paul Lazarsfeld invited Merton to dinner and introduced the “Office of Radio Research” by Office of Facts and Figures in Washington, which is predecessor of Office of War Information, thus Merton first learnt the cumulative responses of “likes and dislikes” from a radio program.

The focus interviewing also becomes widespread in commercial circles and is eliciting in the academic and non-profit sectors though some criticizes arise. Some call it “*a skillful interrogator to keep respondent’s attention from wandering off at the subjects at hand*”, “*to stimulate each other under the interviewer’s practiced guidance*”. “*The most beguiling aspect of focus groups is they can be observed in action by clients and creative people hidden behind a one-way mirror. Thus, the planners and executors of advertising can be made to feel that they are themselves privy to the innermost revelations of the consuming public...and represent a cross-section of potential customers.*” (Bogart, 1984:82). However, in the mid-1950s, the essential concept of focused interview and its basic procedure with their stated rationales have been stabilized. Focus interview provides the wide content in the studies of mass-communication behavior by identifying key events and socio-metric networks at various phases of respondent’s careers to spot the successes and failures in research (Zuckerman, 1972, 1977).

According to the data collecting, social research is divided into two camps: surveys vs. experiments vs. observations vs. interviews. “*Within the realm of qualitative methods, have much to offer as an adjunct to other qualitative techniques, such as informant interviewing and participant observation.*” (Zuckerman, 1972, 1977). Focus groups focus groups break down the narrow methodological barriers in the qualitative research. Focus group interview is widely applied in policy making of medical science.

Qualitative and quantitative methods are both adopted for the research methodological needs. The “lowest-low” fertility is defined by Kohler and his colleagues (Kohler et al., 2002). He identifies five factors led to the emergence of lowest low fertility in Europe. In his discourse, the economic and social changes have made the postponement of fertility; even the modest socio-economic change explains the rapid and persistent postponement transition. He pessimistically argues

that the institutional settings in Southern, Central and Eastern European countries though favor an overall low quantum of fertility the postponement-quantum interactions have amplified the consequences of these settings by the delaying of childbearing (Kohler, Billari, and Ortega, 2002). The clarification of the linkage between the abortion and the promotion of family planning program both from the global and local level gain the basic interest of clarification.

Moreover, the concrete goals of this paper aim to collect data regarding the concept of human dignity of the unborn child through at least 36 focus groups interview, the participants including doctors, nurses, parents, young couples, teachers, teenagers, and legislators respectively invited in Taiwan and Singapore. To investigate the complicate connection among the concept of the unborn child, abortion law and the Family Planning programs. The members of each focus group are divided into pairs as with religion and non-religion led by the focus group interview of the legislators, obstetricians, nurses, teachers, parents, women, man and teens who have willingness to reveal their concepts and opinions anonymously.

2.6 Research Design

Since there is an abundant literature detailing practical steps leading to a more democratic steering of policy making such as consensus conference (Joss and Durant, 1995a), citizen juries (Guston, 1999; Horning, 1999; Smith and Wales, 1999; Sclove, 1999; Crosby, 1995; Armour, 1995) and participatory design (Trigg, Anderson, and Dykstra-Erickson, 1994) are usually applied in the making of science and technology policy. Through the focus group participating interview would move individuals toward a more general agreement about the meanings and significant attached to their common lives and endeavors. By looking for a more practical dialogue and participation through which the citizen and lay might reveal a more reality of micro-demographic view.

The questions for focus group Interview on the human dignity of the unborn child are asked in semi-constructed as bellow, and sometimes will be asked by other little modified wording.

1. How do you think of that the unborn children have the right to live?
2. What's the concept of the human dignity of the unborn child?
3. How and why do you have the concept about the human dignity of the unborn child?
4. If the unborn child is healthy, that pregnancy will not hurt the mother, and the

unborn child do not have any genetic disease, the parents and the families do not have any genetic disease, and it is not conceived by rape, how do you think that this unborn child have the right to live?”

5. How do you think of the abortion problem as well as the reproductive right about women?

6. How you think of the institutional settings, especially the mandatory pre-abortion counselling and 48 hours of waiting period before abortion in Singapore? (Introduce in a few words of the mandatory pre-abortion counselling and 48 hours of waiting period before abortion for the participants in Taiwan.)

7. Do you think of the mandatory pre-abortion counselling and 48 hours of waiting period violating women’s reproductive right?

8. Is the mandatory pre-counselling and 48 hours of waiting period a good institutional setting to protect both the right of the unborn child as well as the women?

The study mainly attempts to verify three assumptions as below:

- (1) The participants of faith-based focus group both in Taiwan and Singapore would appear more strong agreement with the human dignity of the unborn child than those from non-faith focus groups’ participants.
- (2) The participants of faith-based focus group both in Taiwan and Singapore would appear more strong agreement with the supporting of restriction on abortion by the institutional settings as the mandatory pre-abortion counseling and 48 hours waiting period than those from non-faith focus groups’ participants.
- (3) The participants of faith-based focus group both in Taiwan and Singapore would appear more strong agreement with the institutional settings of the mandatory pre-abortion counseling and 48 hours waiting period are not violating women’s right of demanding abortion than those of non-faith group participants.

Table 1: Research Design of Focus Group Interview of This Study

Item	Taiwan		Singapore	
Participants of Focus Group	Faith-based Participants	Non Faith-based Participants	Faith-based Participants	Non Faith-based Participants

Doctors	3-8 persons	3-8 persons	3-8 persons	3-8 persons
Single Adult Male	3-8 persons	3-8 persons	3-8 persons	3-8 persons
Single Adult Female	3-8 persons	3-8 persons	3-8 persons	3-8 persons
Teen Girls	3-8 persons	3-8 persons	3-8 persons	3-8 persons
Teen Boys	3-8 persons	3-8 persons	3-8 persons	3-8 persons
Couples	3-8 persons	3-8 persons	3-8 persons	3-8 persons
Group Numbers	6	6	6	6
Total Group Numbers	24			

(Made by the Author)

2.7 Text Analysis

Text analysis is a qualitative method developed from the literary theory, it highlights the interpretation and emphasize that the meanings are created. The term of 'work' of the author is replaced by the term of 'text'. Some feminists articulate that it is influenced by the symbolic interaction, Marxism, and critical theory and developed as a gender and textual politics (陳潔詩譯；Moi 著：4-5). Basically text analysis is also deeply linked with the cultural criticism. Many current concepts and ideas, such as Marxist thought, psychoanalytic thought, philosophical thoughts and sociological thoughts, media analysis, and popular cultural phenomenon may enter into the background content to analyze. Karl Marx, Sigmund Freud, Michael Foucault and dozens of scholars contribute the research of cultural criticism. Cultural criticism is derived from cultural studies which marked the establishment of the Center for Contemporary Cultural Studies at the University of Birmingham in 1971. The Journal named *Working Papers in Cultural Studies* was also published dealt with media, popular culture and ideological issues (Berger, 1995: 1-3).

Chapter Three : The Human Dignity of the Unborn Child

3.1 The Concept of Human Dignity

The concept of human dignity basically refers to the deep connection with human beings. From this point of view, the unborn child is the human life and thus surely can enjoy the respect of human dignity. The modern German theologian Kirchhoffer strongly attempts to show that human dignity is still a meaningful ethical concept. From moving forward the empirical level, he argues the possibility of human dignity as the normative criterion, a multi-dimensional concept. He provides four dimensions to analyze the concept of human dignity as: existential, cognitive-affective, behavioral, and social dimensions (Kirchhoffer, 2013:15). Furthermore, he brings the moral evaluation back into the analysis. He articulates the reasoning we might be very clear, but the modern moral philosophy has been long neglected. He explains that some human activities are not merely an action or behavior which is implied to the judgment of morally good or wrong. For example, a knife is a non-moral good thing, but while a doctor carefully uses it to cut as a surgical instrument in order to save a patient's wounded leg, the doctor is doing a moral good behavior. But if a person uses the knife to kill someone for taking money, which does not belong to the one who is acting killing, then that person is doing a morally wrong action and he commits the crime (Kirchhoffer, 2013:16). If we apply such a simple moral judgment to the abortion on demand, while the unborn child is not abnormal and the pregnancy is not harmful to the mother, why does the law in many countries permit it? Why the law permits to destroy both the human life as well as the human dignity of the human unborn child? What is the nature of law? What is the legal theory of jurisprudence?

When does human life begin? Modern medical embryology indicates that human embryo has thousands of genes on 46 chromosomes. Basically, without any intervention like creating chimera technology to mix any animal embryo with human embryo, it usually comes from the same homologous pairs to form the diploid number of 46. There are 22 pairs matching chromosomes, the autosomes, and one pair of sex chromosomes. The gamete containing the sex pair of XX is generally female and the gamete containing the sex pair of XY is generally male. One chromosome of each pair is derived from the maternal gamete, the oocyte as well as one from the paternal gamete, the sperm. And the union of the gametes at fertilization restores the diploid number of 46 (Sadler, 2012 : 11). Meanwhile, according to the human physiology, the gonads of female and male of human embryo are much similar around the early 40 days after fertilization. The research of gender is supposed as sex-determining region of Y (SRY) chromosome. Recently it finally observed at Y chromosome and called as the testis-determining factor, TDF (Fox, 于家城等译 2006 : 690).

The concept of human dignity could not be fully interpreted the development of population policy of a modern state from one aspect (McLaren, 1984). Moreover, the

demographic transition model is deeply linked with theorizing of modernization and urbanization in the early twenty century (Kraly, 1998). Furthermore, the *human rights* are the *meta norm* complex within the international politics (Risse, 1999; Sikkink, 1998). The most interesting of this study finds that the demographers, eugenic professionals, United Nations and United States and the international non-governments organizations served as the global agents to advocate the population control policies and programs who worked with highly linked and interacted with one another. The eugenics such as Lucien March, director of the National Bureau of Statistics of French, the founding member of French Eugenics Society, had shown that he was deeply associated with the development of population policy (Quine, 1996:52).

In order to strictly critical definition, in avoid of term debating, *human dignity* may properly refers to the discussion of the reality. Since the concept of human rights would demand the basic citizenship within the domains of institutional settings in modern states. In theory and practice, citizenship requires of official relationship between the state and the individual (Isin, Nyers, and Tuner, 2013).

According to the Article 1 of The Universal Declaration of Human Rights of the United Nations (UN) in 1948 ‘*All human beings are born free and equal in dignity and rights. They are endowed with reason and conscious and should act towards one another in a spirit of brotherhood.*’ had shown the basic idea of human dignity. Furthermore, at Article 3 bears the idea of rights to life as ‘*Everyone has the right to life and security of person*’. Nonetheless, ‘*No one shall be subjected to torture or to cruel, inhuman or degrading treatment or punishment.*’ at Article 5. But in reality, the unborn child may not have any *human rights* and even be crucially aborted at the 24 weeks. Why does not the state ensure her duty to protect the human dignity of the unborn child? Why does the law permit to abort a healthy embryo or fetus, even while the condition is that the pregnancy is not harmful to the mother? Who is the one to have the power to decide when two persons having quarrel or argument regarding the property arisen between each other? Is not life more valuable than the property? The human dignity of the unborn child is actually inscribed at the Civil Law of Article 7 of Taiwan, the Republic of China, as “胎兒以將來非死產者為限，關於其個人利益之保護，視為既已出生 (An unborn child is considered as if it were already born with regard to its interests, except it was subsequently born dead.)” And it claims the basic right of inheritance of the unborn child. However, the real provision of the civil rights of the unborn child is still ambivalent at Article 6 “人之權利能力，始於出生，終於死亡 (The legal capacity of a person commences from the moment of live birth and terminates at death.)” The prenatal human dignity of the unborn child still remains

unprotected. Plausibly, the Congress House of United States passed PAIN-CAPABLE UNBORN CHILD PROTECTION ACT to assure that the fetus reached to painful stimuli at least at the 20th weeks and to prohibit the late term abortion since 13 May 2015.

3.2 The Medical Tradition of Human Dignity

The medical knowledge of the unborn child remains ambiguous before the 1960s. Even in 1694 scientists articulated that the unborn child was at the top of sperm, which was the typical medical idea from the *Essay de Diotrique* by *Nicolas Hartsoeker* (Hrdy, 2004 范絢譯 : 83). The modern application of ultrasound scanning started about the 1960s when the English doctor Ian Donald applied the ultrasound technology to diagnose a patient' s huge and easily removable tumor successfully (Donald, 1958). And later this technology was applied to the measurement of fetal head (Steiner, 1982 : 1590).

If we trace the medical knowledge about the unborn child, we could find a famous embryo painting inside the womb which was drawn by Leonardo da Vinci (1452-1519). It was considered to be the very first in history to depict the human fetus lying inside the uterus. His painting was finished around 1510-1512 and there was about five hundred years ago. With acquaintance of an anatomist Marcantonio della Torre (1481-1511), Leonardo da Vinci gained the basic medical knowledge about the embryo. Within tradition of the rise of university, the Salerno medical school established by Benedictus monastery in Italy had been one of the oldest universities in medieval Europe. And the anatomy is the basic medical course and knowledge in medical education at that time. Without surprising, Salerno medical school had been regarded as the “city of Hippocrates” where the medical education of anatomy and surgery were expounded and developed in the twelfth century. “This mew knowledge burst out the bounds of Cathedral and monastery schools and created the learned professions···from Paris and Bologna those academic guilds which have given us our first and best definition of a university, a society of masters and scholars···” . (Haskins, 1957 : 5-6) The more scientific investigation of anatomy and physiology in the fifteenth century was included the publication of *De humani corporis fabrica* (1543) by the Paduan professor Andreas Vesalius and William Harvey's *De motu cordis* (1628) which demonstrated the physiological inquiry and the circulation of the blood, the role of the heart (Porter, 1999: 10).

Furthermore, through the perspectives of medical history Doctor Joan Lane would provide us an outline of development of medical knowledge. Her outstanding books:

A Social History of Medicine (2001) and *Apprenticeship in England 1600-1914 (1996)* would help us to depict the clear historical perspectives of medical sociology. The development of anatomy helped the development of medicine. The operation of anatomy and medicine were linked with the apprenticeship. The Statute of Artificers (1563) laid down the basic condition of apprenticeship and the Elizabethan Poor Law Act (1601) concerned the indenturing of the poor children (Lane, 1996 : 3-4). Apprenticeship mainly provided the entrance of 'brotherhood in cities' . It was also an opportunity of receiving education for the craft career for the poor and the working class, even in time of Shakespeare (Nicoll, 1976 : 67). This question manifests the controversial key-point of the issue of demography among the inquiries of economic development.

We may also need to explore and enlarge our understandings that the modern genetics truly indebted to the Czech Catholic Augustinian priest Gregor Johann Mendel (1822-1884), the founder of modern genetics. His task of scientific experiment on pea plants at his monastery garden open the door of modern genetics. His short paper '*Experiment on Plants Hybrids*' had announced the discovery of important fact of the law of inheritance. In 1865 when he presented his result at a local natural history society in two lectures and a year later published it at the journal, the scientific world failed to recognize this monumental finding during his life time (Le Grand, 1990).

The knowledge of embryology may be traced to Fabricius of Aquapendente, the professor of William Harvey (1578-1657) at the University of Padua in Italy. In addition to the circulation of bloods, Harvey made many embryological theories and concluded that embryos were secreted by the uterus. Marcello Malpighi observed the early hen's embryo. He thought that the egg contained the mini chick in 1675. (Moore, 2008:11). Regener de Graaf (1641-1673), the Dutch physician, observed the chambers of rabbit and clarified that the embryos could not have been secreted by the uterus. And the chambers were blastocysts and the mature female ovarian follicles were called *graafian follicles* in memory of his significant discovery. Johan Ham van Arnheim and Anthony van Leeuwenhoek used the microscope in 1677 and provided us a remarkable observation of microscope of spermatozoa (Loudon, 1997: 9). Although he misunderstood that the sperm contained a *miniature performed human beings* which would be enlarged while it was deposited at female genital tract. Karl Earnest von Baer (1792-1876) led to the understanding of oocyte in the ovarian follicles of a dog in 1827. He also contributed to the knowledge of origins and tissues of embryonic development and regarded as the father of modern embryology. (Moore, Persaud, Torchia, 2015).

Hippocrates (c. 460-377 BC) is regarded as the Father of Medicine. His watchword is “Back to Nature”. He attributes the physician as an independent standing point of seeing clearly, that is of clinical observation. To him disease is essentially a process. The treatment is “giving the Nature a chance” (Galen, Introduction: x-xii). The works of Hippocrates now called *Hippocratic Corpus* is ascribed to him and gathered around 250 BC in the library at Alexandria. His main authentic articulation is acknowledged that the medicine needed to be an understanding, empirical and rational workings of the body in its natural environment. Health is the equilibrium and illness the stability yet change-ability of nature. The human body is pictured in perpetual flux and health is a matter of keeping it within the bounds until the illness subverted (Porter, 1999 : 56). Furthermore, the patient-centered is also first identified in *Hippocratic Corpus* and a trust-based clinical relations is encouraged as “Make frequent visit; be especially careful in your examination, counteracting the things wherein you have been deceived at changes.” (Porter, 1999 : 58). The preferred treatment regarding the unborn child is the attitude of protection in the Hippocratic Oath which is the paradigm of profession of the doctor as a morally self-regulating discipline. The wording is addressed as “*I swear by Apollo the healer, by Aesculapius, by Health and all the powers of healing, and the call to witness all the gods and goddesses that I may keep this Oath and Promise to the best of my ability and judgment...I will not give a fatal draught to anyone if I am asked, nor will I suggest any such thing. Neither will I give a woman means to procure an abortion.*” (Porter, 1999 : 62-63).

The Greek physician Soranus was born around the second half of the first century and the second century. He wrote the famous medical textbook Gynecology which content covered from the field of biology to medical science. Soranus studied medical science at Alexandria which was the medical center and formed the Alexandria school. He had been to Rome to practice medicine at the time of Emperor Trajan (18-117 A. D.) and Hadrian (117-138 A.D.) Soranus had mentioned the concept of soul as the corporeal substance, the church fathers, Tertullian and St. Augustine esteemed him highly (Soranus, Owsei Temkin, 1956: Introduction xxiv). Many basic topics of pregnancy were compiled in Gynecology, such as the sign of conception, whether the fetus was male or female, what were the signs of impending abortion. Basically, this book seemed to be written both for medical professionals and laymen. It took the position between “according to nature (kata physin)” and “contrary to nature (para physin)”. What is important part at this textbook related to the unborn child was the chapter “What grows inside the uterus of the pregnant woman” (Soranus, Owsei Temkin, 1956: Introduction xxxviii).

Another Greek physician Galen (130-200 A.D.) who was born in Pergamon reminded some certain drugs could “destroy the embryo or rupture certain of its membranes” and lead to an abortion. (Gorman, 1982 : 16)

In order to avoid the term debating as well as to define the critical term usage, *human dignity* may properly refer to the reasonable discussion of the reality. Since the concept of human rights would demand the basic citizenship within the domains of institutional settings in modern states. In theory and practice, citizenship requires of official relationship between the state and the individual (Isin, Nyers, and Tuner, 2013). The concept of human dignity could not be fully interpreted the development of population policy of a modern state from one aspect (McLaren, 1984). Moreover, the demographic transition model is deeply linked with theorizing of modernization and urbanization in the early twentieth century (Kraly, 1998). Furthermore, the human rights are the meta norm which is complex within the international politics (Risse, 1999; Sikkink, 1998).

3.3 The Christian Tradition of Human Dignity

Christian faith marks the deliberation from polytheism in early human history to protect people from the cult of living offering, the infants or virgin girls. With the redemptive blood of Jesus, He manifests a moral life to keep away from the lust and self-indulgence. The distance of liberty and self-indulgence may lies within an inch. The liberalization of drug use and gun selling market are some good examples legalized in the name of free market. The argument of human rationality and the legal regulation swings within the both ends. In the letter to the church of Galatians St. Paul indicated ‘Be careful’, since the Christian are called to true ‘liberty’. He also warned that liberty may open to self-indulgence. For Christian ‘liberty’ is the core result of faith as well as the redemption of Jesus. *“My brothers, you were called, as you know, to liberty; but be careful, or this liberty will provide an opening for self-indulgence. Serve one another, rather, in works of love, since the whole of the Law is summarized in a single command: Love your neighbor as yourself.”* (Gal. 5:13-14) The apostles St. Paul repeated the teachings of Jesus.

Does the fetus have the right? While discussing the abortion, this question is rarely ignored. In liberal democracy the civil liberty and liberalism is acknowledged to protect the freedom of individual liberty from any deprivation of governments or nations. Right is an ambiguous word, especially when it relates to the authority and power. To some extent, human interactions contain the interactions among different authorities and powers. The human dignity of the unborn child relates to the right of the mother,

father, and even many others of the families. Furthermore, the more complicated tensions among the different interest groups of condom companies, such as drugs of Morning After sellers, physicians and the authorities of governments. Like from The Middle Ages, the medical practitioners had organized themselves professionally in a pyramid with physicians at the top and surgeons near the base. Medical practitioners' guild, corporation and colleges were gradually organized and merged into the public domain. The growing leading role of the medical professionals challenged the role of the modern states (Porter, 1999: 11)

Catholic teachings acclaimed that human bodies are the temple of God and it is also the temporal home for the soul. Christian has the duty of take good care for their bodies. Doctors are expected to recognize that they are the servants of divine will. The connection between soul and body are linked with each other toward the holistic health. And the sanctity of human life, including the human dignity of the unborn child has the long tradition in Christianity. There are three major branches in Christianity: Catholics, Protestant, and Orthodox due to different cultures and interpretation of Christian traditions. The concept of human beings are created by the image of God is the essential faith of Christianity. *“God said: Let us make human beings in our image, after our likeness. Let them have dominion over the fish of the sea, the birds of the air, the tame animals, all the wild animals, and all the creatures that crawl on the earth. God created mankind in his image; in the image of God he created them; male and female, he created them”*. (Gen1:26-27)

Furthermore, Roman Catholic Church highly links with the Judaism and connected it as the origin of Christian history. Roman Catholic Church takes the strong position and believes that human life begins from the moment of conception. In the Psalm of Old Testament were written *“You formed me in my inmost being. You knit me in my mother's womb...my bones are not hidden from you, when I was been made in secret, ..in your books all are written down, my days were shaped, before one came to be.”* (Psalm 139 : 13, 15-16)

It is also evidently known that not only the Torah, the five books of Moses, but also many books of Judaism are included as the main context of Old Testament revealed the clear teachings of importance of protecting pregnant woman at the second book of Moses *Exodus* that those who hurt the pregnant women and caused the miscarriage would be fined. The text is *‘When men have a fight and hurt a pregnant woman, so that she suffers a miscarriage, but no further injury, the guilty one shall be fined as much as the woman's husband demands of him, and he shall pay in the presence of the judges.’* (Exodus 21:22). The biblical archaeologists believe that the biblical text

recounts magnificent Jewish memories of the Exodus. It may date about the 13th to 12th century B.C.E. as described the Israelites were oppressed to build the cities of Pithom and Raamses for Pharaoh (Exodus1:11; Biblical Archaeology Review May/June 2016).

Though the fetus in the womb is regard as the living being and under God's care, the abortion is not a twentieth-century problem. If we trace the historical documents would find that it was not at all uncommon two thousand years ago. The most frequent reason of abortion was to conceal the illicit sexual activities. Wealthy women or legitimate fathers do not want to share their wealth with lower-class children. And in ancient time the rich women would seek abortions since they do not enjoy their figures with the trouble pregnancy of bouncing babies (Gorman : 15). Based on the Jewish oral and written tradition, *Didache* represented as the code of Christian morality and the guidance of church life in the early church. It was known as "Two Ways: the Ways of Life or Light and the Ways of Death. Literally, it bore the statements as "Thou shalt do no murder, thou shalt not commit adultery,...thou shalt not procure abortion..."(Didache : I:1 II:2). The actions of murder, adultery and abortion felt to the Ways of Death which offended against God's love, creation as well as the destroy of humanity. The association of the use of drugs with abortion was identified as *pharmakeia* and referred at the texts of New Testament as sorcery or magic potion as in Galatian 5:20 and Revelation 9:21, 18:23, 21:8, 22:15.

The Greek physician Soranus had ever referred to this type of evil drugs (Gorman, 1982 : 48). The Greek apologist, Athenagoras, had also answered three frequent charges against Christianity: atheism, incest and cannibalism. He defended as "*What reason should we have to commit murder when we say that women who induced abortions are murders, and will have to give account of it to God? For the same person would not regard the fetus in the womb as a living thing and therefore an object of God's care... We obey reason and do not override it.*" (Gorman : 53-54)

The confirmation of human dignity of the unborn child mainly comes from the teachings of Roman Catholic Church. It indicates that '*The human being is to be respected and treated as a person from the moment of conception; and therefore from that same moment his rights as a person must be recognized, among which in the first place is the inviolable right of every innocent human being to life*' (Donum Vitae, 1987: Sec1-1). Basically from the perspectives of Roman Catholic Church the concept of human dignity refers to the deep connection with human beings which is distinctively different from plants and animals.

The Roman Catholic Church noticed the rapid increase of world population and foresaw many families and developing countries would be faced with greater hardships. The available resources, not only in housing, working and food, but also the greater demands in educational and economic situation were confronted with the shortage. The new understanding of the dignity of woman and her place in society, the value of conjugal love in marriage and family life became urgent. Based on the natural law and divine Revelation, Pope Paul VI reviewed the so called principle of totality and reminded of people of God the danger of planned family and control of birth. Roman Catholic Church provided the Magisterium to reply challenge of the modern reproductive technologies by issuing the encyclical letter of *Humanae Vita* (人類生命通諭1968) and encouraging Christian married couples to be more conscious of moral responsibilities and the doctrinal principles of the church. The Roman Catholic married couples are freely and responsibly to collaborated with God, the Creator, due to the free will and the fulfillment of the church teachings even though many difficulties and hardships are often entailed.

The Pontifical Council of Family, which was previously substituted the Committee for the Family created by Paul VI in 1973, was formally established by John Paul II in 1981. The Exhortation *Familiaris Consortio* (家庭團體勸諭) was issued at the same year, which was marked the significant guideline of Roman Catholic family teachings. The values of marriage and family are seeking to live with the truth of human values. The church is set at the service of family, marriage couples, parents, youth, children, and human life. Being rooted in the personal and total self-giving the conjugal communion of couple is characterized the unity, the unbreakable oneness between them and the commitment to fidelity. The family is the first communion which is established and developed between husband and wife. By virtue of the covenant of married life, man and woman are no longer two persons but one flesh. And they are called to grow continually in their communion through day-to-day fidelity to their marriage promise of total mutual self-giving. Roman Catholic Church with her clear and strong conviction to protect human life, any public authorities or government activities attempting to limit the freedom of couples in deciding about children, such as the contraception, sterilization, and abortion are forcefully condemned and rejected (*Familiaris Consortio*: 1981: 24).

3.4. The Legal Tradition of Natural Law

Human rights are the basic right for the individual persons and as defend against the power of the states. The historical roots of individual basic rights could be traced to Kant referring to the principle of private law that one person's freedom should be

reconciled with another's. Based on Kant's idea, the protection of the freedom that a human being naturally enjoyed to pursue and increase his own well-being without harming the rights of another. Carl von Rotteck inherited this tradition and indicated that the state as a legal institution must 'respect and protect the freedom which its subjects enjoy in every sphere of activities simply by virtue of being human beings'. (Starck, 2001:100). In this sense, the individual life, health, freedom, honor and property must be respected during the course of daily dealing in the modern state. This basic conception of human rights underpins that Constitution and the German Basic Law not only provide the foundation for the basic rights in the relationship between citizens and the states, but also the basis upon which norms of private law rests. The State is refrained from violating human dignity and imposed a duty to protect that dignity in Article 1 (1) 'Human dignity shall be inviolable. To respect and protect it shall be the duty of all state authority.' (Starck, 2001:103)

Based on the investigation of moral life, Greek philosopher Aristotle articulates that the human beings possess the different power of soul as intellectual capacity, while compared of the plants and animals (Polansky, 2007:188-196). From this point of view, the unborn child is the human life which is different from plants and animals and it surely can enjoy the respect of human dignity. Furthermore, it's a moral issue in politics. According to Aristotle, people not only to have political life, he also defines ethic life and contemplative life which are also important at public domains. People would seek goodness and it is the end of life of politics (Nicomachean, chapter 5).

In the work of Republic, Plato concerned if the city could be ruled by reason, and how the reason would perform this function. Plato might fully imply that by the nature, the rule of reason was the deeper principle of law. What is the nature of the law? To explore the nature of the law is one of the main themes in the development of Western philosophy (Jacobs, 2013). For Christian tradition, Jean Porter's work *Natural and Divine Law: Reclaiming the Tradition for Christian Ethics* found that the scholastics nature, reason, and scripture were taken harmonious sources for the same moral principles rather than in some kind of tensions (Porter, 1999). Inspired by St. Thomas Aquinas, French philosopher Jacques Maritain developed the frame of natural law systematically within the 1940s and 1960s. In his own word, he emphasized that '*The Secunda Pars of the Summa Theologiae offers us a complete and perfectly articulated theological treatise on human conduct*' and attempted to clear the philosophical ground for moral philosophy and to establish its general design and proper procedure on the rational theory of human actions. (Maritain, *Moral Philosophy*:1) He defined 'culture' as the refinement of natural law which had conformity with what Mr. John C. H. Wu (吳經熊 Wu, 1959) found Confucianism in

Chinese culture as well as Greek Sophism in the 5th century before Christian era (Maritain, *Moral Philosophy*:2).

The modern German theologian Kirchhoffer strongly attempts to show that human dignity is still a meaningful ethical concept. The human dignity is a meaningful ethical concept. From the empirical level, he argues the possibility of human dignity as the normative criterion, a multi-dimensional concept. He provides four dimensions to analyze the concept of human dignity as: existential, cognitive-affective, behavioral, and social dimensions (Kirchhoffer, 2013:15).

Furthermore, he brings the moral evaluation back into the analysis. He articulates the reasoning we might be very clear, but the modern moral philosophy has been long neglected. He explains that some human activities are not merely an action or behavior which is implied to the judgment of morally good or wrong. For example, a knife is a non-moral good thing, but while a doctor carefully uses it to cut as a surgical instrument in order to save a patient's wounded leg, the doctor is doing a moral good behavior. But if a person uses the knife to kill someone for taking money, which does not belong to the one who is acting killing, then that person is doing a morally wrong action and he commits the crime (Kirchhoffer, 2013:16). If we apply such a simple moral judgment to the abortion on demand, while the unborn child is not abnormal and the pregnancy is not harmful to the mother, why does the law in many countries permit it? Why the law permits to destroy both the human life as well as the human dignity of the human unborn child? What is the nature of law? What is the legal theory of jurisprudence?

While the scholars articulate the human action is morally engaged we would find the roots in religions (Hare, 2015), though basically the western state model is the classical liberal model in the nineteenth century. From the perspectives of classical liberal model, the legal system tends to proclaim the protection of individual autonomy which manifests the general principle of formal equality of all citizens before the law, especially at the written constitution (Nolte et al., 2005:85). Philosopher Philip Quinn proposes the idea of 'Divine Command Theory' at his creative work of *Divine Command and Moral Requirements* (Oxford, 1978). Now it is normally known as 'the natural law theory'. Quinn defines the 'will of God' as a 'complete reason' on which all the moral obligations defend. Quinn does not limit the concept of divine command theory within Christianity, he leave it open to the questions of how the theological voluntarism in comparison to any case for competitors. Based on the law of prayer is the law of belief (*lex oractice, lex credenda*) as well as the ethics of love (*agape*), he further claims the tension between theological

voluntarism and non-theological presumptions (The Oxford Handbook of Ethical Theory, 2006:65) Some philosophers such as Thomas Talbott is arguing that the genuine basis of divine command theory is obscure (Talbott, 1982: 193). Beside of the Christian theologians concerning the discussion of divine command, some scholars emphasize the multi faces of religions within Judaism and Islam such as Robert E. Adams's *Finite and Infinite Goods* (Oxford, 1999). Adams further separates the meaning between 'good' and the metaphysical grounding of goodness. God is supreme good but God cannot do goodness as resembling a human dose. Follow the will of God cannot automatically do goodness. To make moral decision according to moral principles is a process of moral reasoning and the essence of ethical thinking. In *Summa Theologica* of Thomas Aquinas, good and wise are both to God, we need carefully to discern the language we talk to God and the language we talk to human (Harris, 2002:2).

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The identification between the human dignity and human beings are the main themes in ethics and moral philosophy. If people do not respect for human dignity any more, could people only rely on law the judicial system to protect the basic human rights? In the embryonic stem cell debates have been highlighted the ethical controversy of the definition what counts as human life regarding its origin and death (Williams, Kitzinger & Henderson, 2003:793). From the perspective of natural law, the nature of law is deeply rooted in the social and political traditions from Roman Empire and Athens as Cicero said:

True law is right reason in agreement with Nature; it is universal application, unchanging and everlasting...[T]here will not be different laws at Rome and at Athens, or different laws now and in the future, but one eternal and unchangeable law will be valid for all nations and for all times...(Cicero/ Keyes, 1966:211)

The modern German scholar Ernst Bloch articulates that last canon of law was given by the collected works of Justinian. The idea of Stoic theories of natural law was introduced around 150 B.C. He articulates that 'Man appears as a being of dignity'. Marcus Aurelius believed that everything was contained in the formula *to anthropou poiein*. It means that the human being is the person to be and to act. From

this perspective, the pathos of human dignity appears in a specific form and that is the characteristic of natural law. On the other hand, the logic of classification, the trial according to definition, the law of the people (*jus civile*), legislative action, the procedure of law, the law of courts and etc. were also introduced by the Stoicism. (Bloch, 1996: 18-19)

Lon Fuller claims the need of 'inner morality of the law' at his famous book *The Morality of Law* (1964, 1969, 1979). He criticizes the 'principles of legality', listed as 'Eight Ways to Fail to Make Law'. That causes H.L. A. Hart engaged in the argument between legal norms and moral norms (Luban, 2007:101). Hart had given his famous facts of human nature in the positivistic viewpoints as: human vulnerability, relative equality, limited altruism, limited resources, limited understanding and strength of will. He emphasized that people are not devils but neither are they angels (Alford, 2011:31). While speaking of the natural law, Alford directly emphasizes it is all around and to put 'feelings into the words' and 'the words into feelings'. To define it as humanity meant to become the best human one can be and to fulfill one's potential as fully as possible. 'Written on the heart' is often used to describe the idea of natural law (Alford, 2010:3). Martin Luther King Jr. suffered the persecution while against the segregation. In the *Letter from Birmingham Jail* which was written in 1963 powerfully toned the simple justification of natural law:

How does one determine whether law is just or unjust? A just law is a man-made code that squares with moral law or the law of God. An unjust law is a code that is out of harmony with the moral law....Any law that uplifts human personality is just. Any law that degrades human personality is unjust.(page 3)

In modern era, the revival of natural law connected with the revival of Kantian legal thinking around 1970s. The protection of human dignity is the primary task of the contemporary legal cultures (Fletcher, 1984). The former president of the Supreme Court of Israel, Aharon Barak proceeds to consider that the human dignity as the constitutional value which is grounded in humanity. Furthermore, he also analyzes that human dignity as the constitutional rights and articulates that the purpose of constitutional right to dignity is to realize the constitutional value of human dignity (Barak, 2015:144).

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Along with the articulation of human dignity as the fundamental rights as well as the constitutional value, some scholars further extend the conception of human dignity from the moment of conception as the asymmetry and gradualist, secular conception to person already born (Plomer & Tsarspatsanis, 2013). And the state has the duty to provide protection of human rights such as human life, health, freedom and property at the constitutional level called Basic Law in Germany (Starck, 2000). Based on the respect of human dignity, the unborn child is regarded as human person and has the constitutional rights (陳愛娥, 1997). By contrary, the idea of human dignity or human rights is ignored as the fundamental rights and severely criticized by the scholars of liberal perspectives (Reimann and Zekoll, 2005: 22-23).

It is important to bear in mind that the natural law is not a matter of will but reason. Some of the laws have good justification from the moral principle, some do not. There are some moral principles and habits to be justified at the process of law making. Law has its history and is constituted within human discourse. How to evaluate or understand what is a good law as the social institution requires a strict value-free description and analyzing law-making process in analytic jurisprudence. The human goods need to be secured through the institutions of human law. Jurisprudence like any other social science aspires to be more the conjunction of lexicography with any local history. Law is labelled with many languages. The requirement of practical reasonableness to decide what law could be account as good refers to the 'internal' or 'legal' point of view, including many legal experiences in term of legal theory (Finnis, 2011).

The term of human dignity usually used as synonym of human rights in the West. Moreover, the international human rights standards are based on the substantive conception of human dignity. Nonetheless, these two terms are quite distinct notions. The conceptions of human dignity express particularly the inner moral nature and emphasize the political connection with the society. By contrast, human rights take its

political senses of individual equality and entitlement against the states (Howard & Donnelly, 1986:801-802). In the document, the International Human Rights Covenants (1966) proclaimed that human rights derived from the inherent dignity of human person. Some scholars explore it with notion of honor and self-determination. Some scholars indicate it as the idea of charity. Some scholars investigate it within the Christian religious context. Some scholars examine it within historical and social context, like Greg Dening and Nicholas Tarling. Some scholars explore it within national and international legal theory and practice, such as Sir Guy Green, Don Chalmers, Ryuichi Ida, and Michael Tate. Some scholars trace it within the medicine and medical practice (Malpas & Lickiss, 2004: 3). The concept of human life begins at the moment of conception is the doctrine of Roman Catholic bioethics. People may criticize that the human ovum is only a zygote and reject his or her human dignity. The invisible human zygote contains all the potentials to develop into a human fetal life if there were no any artificial or malign interference.

3.5 The Perspectives from Liberalism

In contrary to the natural law, the empirical law system regards the law and adjudication is social constructed and political. There is no 'pure' theory of law. Law is made up of institutional facts like other orders and rules. Law is the product of people's thinking, bargaining, and acting in society (Hart, 2012). Furthermore, law is defined as the 'institutional normative order'. The differentiation of right from wrong, demands the basic binary of the opposition on which law is founded. For example, crimes are the species of wrongs, which merit the state to impose the punishment. In the long run civil society gains the ground to extend the peaceful interaction among different communities and the function of social justice there could be achieve. (MacCormick, 2007)

The reproductive right has been developed as subset of human rights at the United Nation's 1968 International Conference on Human Rights within the trend of liberalism which identified the idea of 'equal right' (female/male dimension) among various fields. This study would aim to trace the literature on the concept of pro-choice regarding abortion. The outline of social feminism will be reviewed to depict the reproductive right, the core concept of abortion. How the reproductive right is applied to justify in the feminist birth control movement and how it related to civil liberty will be illustrated in this section. The origin of civil liberty in the context of Utilitarian, especially the J. S. Mill will be introduced. The concept of rational choice

which claimed to fit the collective decision in political policy will be examined in the last part of the essay.

The work of John Lock *Two Treaties of Government* insisted that individual has an inherent right to liberty. Sir William Blackstone said 'The liberty of the press is ...essential to the nature of a free state' in the commentaries on the Law of England (1760).. The tension between the state and individual remained tight. State has its secular goals and position, but religion has its particular views of social life, political life. Religious freedom, including on faith, speech, prayer and the position on 'life' and 'abortion' become a controversy issue. The term 'religion' has its reference to its one's views on his /her creator, and to the obligations they imposed or reverence for their beings and characters (Heyman, 2008)

In *Areopagitica: A Speech for the Liberty on Unlicensed Printing* (1644), John Milton argued that for freedom of conscience and of the press by appealing to reason the truth. Milton called the personal 'truth' as 'our richest Merchandise'. He said that 'Give me the liberty to know and to argue freely according to conscience, above all liberties.' Milton even described individual lifestyle as 'experiments' which may 'proved practically' for one, but 'failed' to others. (Gaus, 2003)

Instead of 'liberty of the Will', which meant the moral doctrine in Kantian, J. S. Mill (1806-1873) defined liberty as 'civil' or 'social' dimension, referring the nature and limits of the power which can be legitimately exercised by society over the individual. *'The struggle between Liberty and Authority is the most conspicuous feature in the portions of history ...By Liberty, was meant protection against the tyranny of the political rulers.'* (Mill, 1869:1) Civil liberty is the weapon to go against the external oppressive power.

The individual need the protection but the nation did not need to be protected against its own will. Mill emphasized that the rulers must be responsible to its governing. What the core concept or the first principle of the liberty Mill attempt to assert is the ruler cannot have an absolute authority on individual in the way of compulsion and control or the physical force in the form of legal penalties. The citizen has the basic right of self-protection.

Moreover, Mill articulated that the will of the people may manifest the most numerous or the most active part of the people. Now we know it as "majority" or "public opinion". Mill also noticed that people those who succeed in making themselves as majority may desire to oppress a part of their number and precautions of other abused powers. However, Mill still concerned how to make fitting adjustment

between individual and social control. Though he acknowledged the 'decision' or the 'standard of judgment' mixed with the similarity of following some prejudices or superstitions, including the envy, jealousy, fear, or arrogance: 'their legitimate or il-legitimate self-interest', he reasoned that even the 'class interest' and 'sentiment' which might generate the moral feelings still toward the selfishness.

In this regards, Mill criticized that the British Church though had broken the yoke of Universal Church when the conflict was over; it reduced its hope to regain the ground of charity. Individual liberty needs to seek its minority to protect its well-beings. The role of law or opinion interpreted as the main thing which has practically determined the rulers laid down for general observance, under the penalties of law or opinion. Mill mentioned such notes linked with 'the last generation of European liberalism' the 'the political thinker of the Continent' which may implied Rousseau (1712-1778).

In the end of the Chapter One Mill expressed his concept of liberty in his precise words, Mill introduced his concept of liberty contained several parts. Firstly, *'It comprises, first, the inward domain of consciousness; demanding liberty of conscience, in the most comprehensive sense; liberty of thought and feeling; absolute freedom of opinion and sentiment on subjects, practical or speculative, scientific, moral, or theological.'* The liberty of expressing and publishing opinion is included. The principle of liberty mainly requires 'not harm others' and 'tastes and pursuits; of framing the plan of our life to suit our own character; of doing as people like. And people should know the consequences which their behavior may follow. With the principle of not doing harm to others and people need to avoid their foolish conducts.

Mill articulated the philosophy of 'liberty of the press' which identified as human 'fallibility' since to fault is natural. For Mill the liber of the press and opinion are the most important absolute liberty which needs to be fully protected. He criticized the law of England, on the subject of the press, 'is as servile to this day as it was in the time of the Tudors.' He ideally presumed that 'everyone well knows himself to be fallible' and mocked of Roman Catholic Church though he took the condemnation of Socrates as the example that he misused of the time and subject. Socrates was accused crime of the condemnation of impiety, in denying the gods but not from Roman Catholic Church. The part of blasphemer for Socrates was his teachings contradict to the rulers of Greek. Mill interpreted 'diversity is not an evil, but a good.' He said that 'mankind is much more capable than at present of recognizing all sides of the truth...applicable to men's mode of actions, not less than to their opinion.' He thinks that human being has arrived at the maturity of his faculties to use and interpret

experience in his own way and to find out how to understand what part of his recorded experience is applicable to his own circumstances and character. 'The human faculties of perceptions, judgment, discriminative feeling, mental activity, and even moral preference, are exercised only in making a choice.' (Mill,1869:74) In Mill's idea, if a person acts only because of the custom, it is not making a choice. He criticized if a person had no exercised what he desired he would have no knowledge what was best for him.

For Mill a person choosing his plan of life is the way to construct his own real world, not only imitating others where his opinion lies on. People has many choices need to make, for example, what kind of house to build, what corn to plan, what machine to buy, and even what prayer to say all need to practice the ability of making choice. Mill linked the 'Pagan self-assertion' or 'Christian self-denial' with 'Greek self-development' and interpreted as 'self-government'. He asserted when a person practice his own it is the practice of his existence, the fullness of his life. That is also to keep his faculties of action and enjoyment in his best order.

Mill criticized the public opinion in his time was what 'peculiarly calculated to make it intolerant of any marked demonstration of individuality.' The intellectual have no 'taste and wishes strong enough to incline them to do something unusual', they seemed 'accustomed to look down upon.' In a town there seemed no energy to produce any outlet except business. (Mill, 1869: 85) He quoted the remarks of Tocqueville that 'how much more the Frenchman of the present resembles one another'.

Mill led the criticism in line with asking the problem if there is 'limit' to the authority of society over individual. There is no higher direction inside the society to judgment the individual, even the law system. In general, no matter how foolish the action is, there exists no judgment from above. He said that 'If society lets any considerable number of its members grow up mere children, incapable of being acted on by rational consideration of distant motives; society has itself to blame education.' Any exposed disagreeable opinion need to be accepted, no institute needs to play the role of moral police. Any imperfection of law could not organize the powerful police system to go against their voices.

3.6 The Rational Choice

How people make choice? Why and what does it mean when a person choose the item A instead of item B? Choice would vary among different persons. Is item A better than item B, or item B is better than item A? May item A and B both equally be

the same? Are there any internal elements, subsets, variables, or components inside item A or item B which determines the choice to make between these two? If there are some elements, subsets, variables, or components which play the key factors to make the choice, what would the elements, subsets, variables, or components be?

The economic reason seems the common-ground of compromising on abortion which remained in place even as the extent of the practice of induced abortion become more widely known. As the role of induced abortion plays in fertility transitions has become better understood, and more women have gained enhanced access to legal abortion that permits its use as a means of fertility control (Hudgson, 2007). The economic reason on the abortion may dominate the European elites from Middle Age to post Modern time. The land elites' stander of living was functioned with the predictable income from fixed assets, lands, or dowries. Families were forced to recognize the sub-division and transmission of landed estate, family business, or investment portfolios based on their privileged lifestyle. The small size of family was a statue-protecting behavior. Abortion become the main method to terminate the 'unwanted pregnancy' and some recorded history reported that women have resorted to induced abortion regardless of legal sanction and risk of health and well-being (David, 1981; Devereaux, 1955, 1967, 1976).

There exists three demographic assumptions of family planning programs were: (1) Rapid population growth impedes economic development, and lower rates of population growth and lower fertility will lead to improved living standards and human welfare. (2) Couples in developing countries want fewer children and interested in regulating their fertility. (3) Making contraception widely available is an effective way to meet couple's need for fertility regulation and help lower fertility levels. And the research evidence of the debate over the link between rapid population growth and economic development are unfounded (Population matters). Even though there is no other indicator of reproductive behavior predicts a population's fertility better than contraceptive prevalence. The plots of trends in fertility and prevalence in Thailand (1969-83) and Taiwan (1965-85) falling to the tremendous regression line was taken as a close standard look of the Eastern Asian elites to investigate why the fertility rates remain high in other developing countries (Bongaarts, 1987).

Rational choice theory assumes that people would make the rational choice. But what dose 'rationality' mean? Rationality may contain the similarity with exercise of human 'reason' in the context of Kantian, which related to the moral order and obligation. But in concept of Utilitarian, the 'price' is the main element of rationality.

The problem will arise when the element or the choice cannot be equivalent to 'price'? Some choices are more complicated than choosing between the 'one apple' and 'two oranges'. For example, 'life' cannot be equivalent or estimated by price, and life cannot be traded. And love, family, friendship, and many virtues, courage, wisdom, charity and etc. are all priceless.

Rational choice is a particular model of individual behavior which could be traced around 1870, the revolution of economic theory. The economists deal with the economic problem by determining the relationship between a set of unlimited ends. The scarcity of resources and rationality are a set of tools for defining the best choice. Rational choice assumes that individual decisions are based on desires and be measured as a maximizing process with mathematical techniques. (Barnes and Sheppaer, 1992). Human reason may tend to converge on the truth in moral and politics as well as in science, since it associated with the Enlightenment, the origin of discovering the modern natural science and social science. Scholars point out that Enlightenment was not a single movement, the Scottish, French, and German having their significant paces. The spirit of 'disagreement' more than the 'agreement' of Enlightenment is rarely acknowledged, and the Enlightenment thinkers had even cast doubt on if there existed the best way to exercise human reason. The progress and diversity were asserted and they existed in the process.

Life can be more subtle though the language of the rational choice may be explained the demand vector $d(p, M)$ which is chosen by an individual when faced with the price vector p , and the income M . Some scholars, for instance Uzawa (Arrow, 1959) suggested a binary relation but with a weak ordering. Furthermore, rational choice may reveal the 'preference' with element-valued choice functions and some restrictions may be suggested (Sen, 1971). Sen articulated the detail reasoning of 'revealed preference' which Arrow had been identified. When someone makes a choice between x and y , not only x or y is alternative, but implied one is rejected where the preference is hidden.

The conflict between 'morality' and 'rationality' need to be examined by the utility maximization and the rational agents are also examined in the light of micro-economic concept. The question is asked 'can circumstance be specified in which imposing constraints on one's self-interest?' or 'utility-maximizing behavior would be irrational?' when the conflict between the morality and rationality arise. In pure reasoning, the logic is reasonable like this: 'Under condition of perfect competition, the individually rational, self-interested, behavior of all agents, induces a Pareto-efficient outcome.' It means there is no one superior to the other. In optimal

equilibrium, each actor does as well as he or she can, that is his utility is maximized subject to the utility maximization to others. If by acting purely self-interestedly, each agent does as well as he or she can, then it would be irrational for any agent to impose restrictions on the pursuits of his or her self-interest.’ But the logic of the Utilitarian is in a given the utility of others, and a perfect competition, people would do the best by pursuing his self-interested behavior and do less well by constraining his self-interested behavior. Then the actor will have no incentive to adopt constraints, including moral or other on his utility-maximizing behavior. (Kraus & Coleman, 1987)

In the real world, there is no perfect competition, some gain, some lose. Market failure many occurs throughout human history. For example, while capitalists attempt to maximize profits for their survival, workers face the opposite problem of trying to resist capitalists’ demands. There is rarely ‘morally free zone’ or ‘moral anarchy’ in the public domain. The similar dilemma exists in politics and the public policies while the government or public agents tend to apply their utility maximizing actions, by increasing their incentive, or claimed to create the public welfare, left no room of morality, who will really benefit, and who will be harmed? How to examine the bias of government actions? To some extent, morality is a potential solution to the problem of market failure, since it is introduced to govern social interaction. ‘The rationality of morality depends on its being a particular kind of solution...one that secures a Pareto-efficient outcome by making each individual better-off. To have a viable solution to the problem of market failure, morality must be both individually and collectively rational.’ (Kraus & Coleman, 1987)

Some scholars indicated that Hobbesian political contractarianism is a model of characterizing the state of nature as a failed market. For Weber (1930), capitalism is born from believing in the protestant ethic, though many modern scholars regard it as a historical fact died in the early century. Marxism and neo-Marxism criticized the capitalism expanded their kingdom by exploiting the labor echoed in the air of the nineteenth century. Morality and politics attempt to ‘bridge the gap’ between the in-efficient equilibrium of the state of nature and the potential Pareto-efficient equilibrium of unavailable if individuals act non-cooperatively.

3.6 The Basic Problem

In modern century Immanuel Kant is the first person to separate morality from religion at the work of *Religion within the Boundaries of Mere Reason*. He remains God as an unknown One while people seek their autonomy of moral behavior. From the last two decades, the philosophy of medicine vigorously developed is mainly

engaged in bioethics study. Many of professionals named themselves as bioethicists. Previously, philosophical anthropology, social philosophy, medical epistemology, medical ontology does non-existent and have rare products in relation to medical science (Have, Carson & Burns, 1997:105). The basic problem of human dignity of the unborn child at the public domains of our time mainly arises from the Universal Declaration of Human Right of the United Nations in 1948 (Glendon, 1998).

Although The ultimate value of 'human dignity' is affirmed at the very beginning of the Preamble, and accorded again at the article 1; and it is woven into the text at three key points, connecting the Declaration to the Charter in the fifth clause of the Preamble, while introducing the social and economic rights in the 'chapeau' at Article 22 and Article 23's reference to 'an existence worthy of human dignity' (Glendon, 1998: 1172), the key point still remains vague at the specific image of human person. In the Declaration human beings are 'endowed with reason and conscience'. What is the definition of human beings? Does it include unborn child? We may strictly criticize this document if we call its thirty articles as a pick-and-choose cafeteria style. To some extent it is right like philosopher Michel Villey noted some universal rights contradicting with each other such as liberty and equality. Philosopher Alasdair MacIntyre also warned to combine the fragment of different conceptual schemes and to rest upon incommensurable moral premises is like a recipe of the mischief. The working committee is the United Nations Educational, scientific and Cultural Organization (UNESCO) which composed by many leading thinkers, such as Jacques Maritain, University philosopher Richard Makeon and chaired by Cambridge historian E. H. Carr. The fundamental contribution of the Declaration is the universal human rights come to an agreement among divergent economic, political, social, religious and cultures.

There are numerous significant research results on female diseases in the medieval studies that would indirectly be helpful to grasp the unborn child. In The Book of Dina, which is the medieval Hebrew treatise around the thirteenth century, remained the problems and diseases of the womb. Its manuscript provides the basic knowledge of gynecological prescriptions, such as menstrual problem and birth problem. Another treatise called Zikhron ha-Holayim ha-Hovim bi-Khley ha-Herayon (Recollection [about] the diseases occurring in the generating organs), is the medical treatise around the fourteenth century, which provided us the knowledge of medical problem and diseases affecting both men and women. One chapter of this Hebrew treatise directly dealt with the difficulties of birth, such as sterility, caused by diseases (Barkei, 1988)

The practitioners that advocate abortion rights of women by critical choices tend to view religions, especially Roman Catholic as obstructive, dogmatic and anti-choice. The side of supporting the human dignity of the unborn child called pro-lifers, and the other side tend to support the autonomy of the mother called pro-choice. The fetus leaves no room to live and the argument of pro-choice strongly doubts the human dignity of the unborn child. Supporters of each side claim that their value has priority over that of the other side. One major argument is whether or not the fetus is a person.

From the early days of ancient Greek, Rome and the time of Augustine, abortion was practiced frequently by the pagans. The wealthy were more common adopted it than the poor. The most frequent reasons were to conceal their illicit sexual activities and the rich did not enjoy the effects of pregnancy on their figures. The rich preferred not to get a big and trouble womb with bouncing babies (Gorman, 1982). John Noonan, who is the main philosopher of catholic anti-abortion raises the fundamental argument that fetus is the human beings. His basic theological criteria are *potentiality* and *whoever is conceived of human being is human being*. Based on these presumptions, it's wrong to kill humans, however poor, weak and defenseless. The embryos lack the opportunity to develop their potential to be the human beings. Therefore, it's morally wrong to kill embryo (Noonan, 1968). The Geneva Declaration of the Rights of Child of 1924 had ever protected the rights of the child in term of both materially and spiritually.

In the 1960s, many countries have yield the basic human dignity of the unborn child to the private realm and leave it into the hands of sex-seeking people. If followed the concept of Hippocrates, the father of medical science, the human dignity of unborn child has been strongly declared and protected. The Hippocratic Oath has assumed and represented a point of view from the ancient Greek medical community which attributed as the Oath of Pythagoreans (Miles, 2004; 176). **The World Medical Association** adopted the idea of Hippocratic Oath, known as the **Declaration of Geneva Physician's Oath**, and respected it as human life from the moment of conception in 1948. This notable tradition has ever been honored but now seems to be obscure even among the medical professionals. Dose the unborn child have the rights to live? Do only women and mother have the rights to abortion? The debate on the human dignity of the unborn child and the rights to abortion struggles long at the demographic battle.

With the influence of the concept of personality from Sigmund Freud (1856-1939), the pioneer of medical sociologist Talcott Parsons (1902-1979) is the first scholar to adopt the notions of the role of parent-child to analyze the role between physician and

patient in the field of medical sociology (Cockerham, 2001: 5-6). Disease, pain, suffer, health and death are the main issues of medical sociology. The medical knowledge about disease, pain, suffer, health and death was restricted within the medical development. Furthermore, the classes, races, economies and resources are also some key elements of influencing the tension between the medical professionals and patients. The social factors of drug use, alcoholic problem, and eating disorder are some new issues of medical sociology. Basically medical history may provide the basic outlines of how the modern states developed to control on the diseases, epidemics and populations from the seventeenth century while the Westphalia contract was signed to cease the religious war between Protestant in Germany and Roman Catholic in 1648. This year has been considered as the landmark of the birth of modern states.



Chapter Four : From Fear of Overpopulation to Birth Control Movement

Thomas Robert Malthus (1766-1834), the preeminent classic economist of population, strongly concerned the danger of population growth problem in his time.

Based on the idea that man living on the food, Malthus wrote his influential work *An Essay on the Principle of Population* in 1798 indicated that “*the power of population is greater than the power on the earth to produce subsistence for man*”. He articulated that population increases in ‘*geometrical ratio*’ and subsistence the food increases only in an ‘*arithmetical ratio*’ (Malthus, 1798).

A slight acquaintance with numbers showed the immensity of the first power, the population growth, exceeded the second, the production of food supply. Malthus declared “*The race of plants and the race of animals shrink under this great restrictive law. And the race of man cannot, by any efforts of reasons; escape from it...misery is an absolutely necessary consequence of it.*” Malthus witnessed the early stage of industrialization when England underwent an ‘*agricultural revolution*’ characterized by the spread of improved farming and grazing techniques. His vital idea accompanied by the idea of ‘*restrictive law*’ which means ‘*the law of our nature*’ which emphasized that food was necessary to the existence of man. The similar worries put on the ‘*labor of artificers*’. Malthus noticed that United States of America, where the means of subsistence had been more ample than any modern state in Europe (Malthus, 1798).

According to the demographic transition theory, high death and fertility rate are the basic checking norms. The death rate begins to decrease and birth rates remain the same at the first stage of demographic transition (Livi-Bacci, 1997). When the medical improvement and the control of disease had progressed is identified the first stage of demographic transition. The second stage of demographic transition showed that the death rate was decreasing and fertility rate may continue to increase or at least both death rate and fertility rate were low. At the third stage of demographic transition, fertility rate have decreased over a time span and eventually will reach ‘*replacement level of fertility*’ whereby every couple produced two children. Most western countries had underwent the main demographic transition along with the industrialization as well as urbanization and their death rate and fertility rate both fell and all reached to replacement level of fertility around the end of nineteenth century (Eberstadt, 2001).

Meanwhile, the international population policy makers tend to understand welfare provision in terms of ‘*family economy*’ in the late nineteenth and the early twentieth century while materialism and child welfare become the central issues at the field of social policy (Cohen and Hanagan, 1991). The concept of large families changed and the idea of small family become popular (Kraly, 1998). The social security of mothers and their offspring increasingly determinates policy in British Empire. The

government claimed that the social assistance would relieve the household poverty (Lewis, 1996b). Materialists offered a route for middle-class women to move from the private sphere of managing their households to the public sphere of administrating social security. In England, the social reform identified that women are allowed to become members of local school boards in 1870 as well as the Poor Law Guardians in 1875 (Hollis, 1987). Accordingly, In Europe and the United States, within the context of social reform women gained the citizenship to participate in the public sphere (Lewis, 1994; Koven and Michel, 1990). Where the population grows, new contraceptive technology advances which leads the basic social and political changes. In this context, population and fertility came into scene of the agenda of modern states. During the year about from 1850 to 1950, the contraceptive knowledge and techniques among the working classes gave women more control over their bodies and sexually emancipating power to control their life development (Shorter, 1971). The expectation of higher living standard also gave the impetus to family planning among the new middle classes. What lay behind the practice of birth control among the proletariat, the waged workers were the economic factors which changed the traditional household economics (Tilly & Scott, 1978).

Family planning programs are now widely used to regulate population in many countries. It is estimated about 179 countries, representing 92 percent of governments with over 99 percent of the world's population have some similar forms of family planning programs in 1998 (Rand, 2002). Governments provide substantial supports for family planning programs and promote contraceptive supplies and services, including legalizing abortion law and providing abortive surgeries in the name of protecting women's health and rights. Public discussion tends to emphasize the favor of the *contraceptive technology/methods* since the World Population Conference in Rome from 1954. The United Nations Conference on Population held in Bucharest Romania in 1974 and the family planning programs firmly established to check the global population growth and how to reduce the fertility gained the primary concern by the demographers in world politics. The debate of reproductive right or reproductive health for women is another important issue among the international population control. How the social feminists which also known as worker's birth control movement in the 1920s linked with international abortion campaign on the 1970s needed more investigations and further research (Hoggard, 2000). What known today that induced abortion promoted as the national and international policies in the developing countries, but to ignore the controversial debate over *abortion* problem generates the humanity chaos. The origin of family planning programs also rarely acknowledged the false concept of mixing induced abortion with contraceptive methods. Furthermore, abortion well planned by some radical social feminist

advocators. United Nations serve as the political force to legitimize as the *reproduction right* in the domain of *reproductive health* (Anderson, 2005:76-80)

In 1984 the United Nations International Conference of Population was held in Mexico City. President Reagan took a strong stand to oppose abortion and announced a new policy, known as '*Mexico City Policy*' to prohibit the U.S. Family Planning funds to any overseas organizations that offering counseling about abortion or abortion referrals in other nations. This policy marked the greatest triumph of the pro-life movement. The Policy was continued by President George H.W. Bush, but rescinded by President Clinton in 1993, and reinstated by President George W. Bush in 2001. And President Obama rescinded it again in January 23, 2009 to direct the United States Agency for International Development (USAID) and to release its limitation of raise-funding to engage in a wide range of activities, including providing advice, counseling, or information regarding abortion, or lobbying a foreign government to legalize or make abortion available. The new elected American President Donald J. Trump issued the Presidential Memorandum regarding the Mexico City Policy in 23, January 2017 to restrict the prohibit the funding as well as the advocating the US non-governmental organization to support the abortion services. He firmly ensures all US taxpayer dollars will not fund organizations or programs that support or participate in the management of a program of coercive abortion or involuntary sterilization.

The core idea of Mexico City Policy planned to protect the human dignity, especially the embryo, abortions only be done in response to rape, incest, or threat to the mother's life or health. With the precise wording of the Policy is as follows:

The United Nations Declaration of the Rights of the Child (1959) calls for legal protection for children before birth as well as after birth In keeping with this obligation, the United States does not consider abortion an acceptable element of family planning programs and will no longer contribute to those of which it is a part. Accordingly, when dealing with nations which support abortion with funds not provided by the United States Government, the United States will contribute to such nations through segregated accounts which cannot be used for abortion (Statement of the United States of America at the United Nations International Conference on Population).

The United Nations has been usually acknowledged as the promoter of abortion practitioners, rarely backed up the protection of rights of the unborn. Since for the past several decades those agents or practitioners who engaged in shaping population

policy muted their voices while the topic of abortion has been raised. Many advocacies tend to use the *induced abortion* as the means of family planning and on claims that expanding access to contraception will reduce the number of abortions. The modern discourse of abortion was stigmatized in the words of ‘the war among women, the unborn, and physician.’ People are blocked by their complicated interplay and led by the mass media only labeled the pro-lifer as the conservative Catholic stand.

4.1 From ‘Population Growth’ to ‘Birth Control’

Urbanization and industrialization in the nineteenth century affected the concept of family size gave the ways to fertility control. The work of Robert Dale Owen (1801-1877) *Moral Philosophy* and *A Brief and Plain Treatise on Population Question* in 1831 gained the popularity among the middle and upper classes. The small size of family has become more popular due to the wide spread of Owen’s book. Furthermore, the idea of Owen inspired the British Dr. Charles Knowlton (1800-1850). He wrote more influential book *Fruit Philosophy: Private Companion of Young Married Couple* to articulate that human reproduction was the least selfishness and recommend young couple to achieve sexual ‘gratification’ without having more babies (Engelman, 2011). ‘French rubber goods’ which now known as condom also became popular not only in Europe but also in United States in the nineteenth century. The classical economist John Stuart Mill had ever concerned the family limitation of the working class. The main ambitious goal of Neo-Malthusian, such as Charles Robert Drysdale and his wife Alice Vickery, advocated that the lower the birth rate of the poor would be better to improve the standard of living. The first contraceptive clinic was inspired and opened by a Dutch physician Aletta Jacobs in Amsterdam in 1882 (Fisher, 2006).

Eugenics places the links between demography and degeneration at the center of discourse on the quality of population, which noted as the part of population health and the roots of abortion. The European population growth has been the tendency of explosion with the influence of industrialization in the late nineteenth century. Furthermore, European intellectuals had ever advocated the biological degeneration of assumed racial supremacy (Pick, 1989). At the beginning of the twentieth century, the investigation of heredity has linked with the science of eugenics set of philosophical goals for racial improvement and the prevention of evolutionary degeneration through the planned human reproduction (Porter, 1999).

Sweden is the first country to legalize abortion. The Swedish Minister for Justice drafted a bill to allow abortion for social reasons and this bill was forcefully supported by the women of the Social Democratic Association (SDA) in 1935. However, the pro-natalists resisted such reform and insisted to set up a Population Commission at the same year to investigate ways to facilitate demographic increase by providing marriage loans, maternity benefits, paid to all childbearing mothers. In 1945, Sweden government introduced the child allowance throughout the state (Ohlander, 1991). Oppositions to pro-natalists articulated an ideology shift among Social Democratic women who considered 'the state as reinforcing a view of women as child-producing machine' (Porter, 1999:186). Some scholars in Britain, such as Enid Charles and David Glass, supported pro-natalism and helped to develop eugenics study and published the journal of *The Struggle for Population* by The Eugenics Society in 1936.

The European population growth has been the tendency of explosion with the influence of industrialization in the late nineteenth century. Herbert Spencer, the social theorist applied Darwinian evolutionary theory of natural selection to social development. He believed that consciousness created society and human species became subject to social progress as much as the similar mechanism to human society. Spencer argued that natural selection produced 'survival of the fittest', which now is known as 'social Darwinism' (Bannister, 1979). Some scholars applied the concept of social Darwinism to the studies, such as on the physiological characteristics of criminology and degeneration which indirectly led the development of population control and eugenics. The Italian criminologist, Cesare Lombroso known as the founder of the study of criminology, considered of his medical understanding was reduced to biological difference (Vyleta, 2007). Some scholars even completed the study on a family called Jukes which traced the ancestry of a group of criminals, prostitutes and social misfits back through seven generations (Haller, 1984).

A line with the population health, the situation in Germany is more focused on claiming the contraceptive rights of women. The abortion was mentioned in nineteenth century when German medical literature mainly referred to the pathological or clinical approach (Hegar, 1887). Abortion in German was ever identified as an act of race reason against the 'bodily fruit of the German Volk' which was punished by death in the beginning of twentieth century. Selective abortion was also available if the mother's life was in danger as well as under eugenic grounds (Porter, 1999:191). Moreover, a revolution of social relations of sexuality and gender in the 1960s was resulted in a liberalization of laws concerning human reproduction which allowed women much greater control of their own fertility. Finally, the birth

control became universally available and abortion was legalized (Porter, 1999:194). Therapeutic abortion was openly performed for many years whenever medical emergencies were clearly apparent (Stumpt, 1907). The growing practice of illegal abortion created the so-called concern about the health of women (Hamburger, 1908, 1916; Hirsh, 1910, 1914; Winter, 1919). The demographic implications were also considered (Marcuse, 1913; Bumm, 1916; Nurnberger, 1917).

The concept of reproductive right of women could be traced the initiator of birth control movement, the **American Birth Control League (ABCL)** provides contraceptive for poor and immigrant women. Margaret Sanger (1879-1966), a nurse in New York founded the Birth Control League of New York and launched the ***Birth Control Review*** as its official publication. Sanger led the ABCL until June 12, 1928 due to the lashes with the board and her resignation. She founded another clinic and renamed it Birth Control Clinic Research Bureau. In 1937 the Birth Control Council of American was founded to coordinate the work of old league and Sanger's bureau. In 1939 the two organizations merged to form the Planned Parenthood of America, the pre-organization of International Planned Parenthood of Federation (IPPF), the abortion advocator of the United States. The term of '*birth control*' is originated by her. Birth control meant a strong choice, compulsory at most, to take an effort to legitimize the conditions of women to prevent pregnancy from 1916. Sanger opened a birth control clinic in Brooklyn of New York. In the mid-1930s Sanger and others advanced the term of '*family planning*' to approach '*reproductive health*' and pregnancy prevention.

The reproductive technology, the oral contraceptive pill and the intra-uterine device (IUD) had developed during the 1950s and 1960s. In the early 1960s spurred enthusiasm for making modern contraceptive technology available to countries around the world. IPPF played a powerful voice in the movement for women's reproductive right. Not only in U.S. but in Europe a series of political actions were adopted, especially to abolish the restriction on abortion in the penalty. The penalty was the state system to control the individual liberty. The influence of advocating civil liberty is evident in feminist birth control strategy. In 1913 National Birth Rate Commission was organized by the Council for Promoting Public Morals in England. The population control and birth control had been brought into the international scenario at The Fifth International Neo-Malthusian and Birth Control Conference held in London in 1922. The president of this conference, C. V. Drysdale, reported the contraceptive section and was highly accepted by 146 countries. They used the '*irresistible*' to join this '*scientific doctrine*' to urge the exercise of birth control (Report, 1922)

In the openly address the president of this conference C. V. Drysdale shared his experience with the founder of Birth Control League, Margaret Sanger, mentioned her idea about the birth control was the human basic need. Furthermore, the campaign of birth control was soon spread and had been welcomed in Japan, India and China. The demographer and birth control advocator predicted that assumption of population would cause economic distress which was restated in the conference. How the birth control became the medical subject drew the support from physician Dawson of King College? The special thanks were given to Cambridge economists who were reviving the interest of Malthusian doctrine. The position from Catholic Church was harshly criticized by the conference. The great success of birth control was reported. For example, in England and Wales the birth rate was fallen from 6.3 in 1876 to 22 in 1920. The whole birth rate of Europe fell from 40 in 1876 to 36.5 in 1901. The average of birth rate of the world was reduced around 17 or 18 per 1,000.

In the 1950s and 1960s three U. S. organizations, the Ford, Rockefeller Foundations and the Population Council, served as catalysts in bringing experts and government leaders from around the world at various international meetings to discuss implications of rapid population growth and dedicated themselves to lower the high fertility rate (Report, 1922). Human reproduction gains the public focus which is mainly encouraged by eugenic concerns about degeneration as well as the health welfare since the social policy having needs of more women of labor power in the early years of twentieth century (Porter, 1999: 174). Sir William Crookes offered the idea of 'colossal dilemma' which concerned the life and death question for generation to come. The United States Department of Agriculture (USDA) shown that by 1898, the wheat supplies were smaller than they had ever been. The U. S. wheat production seemed to have a declining trend and the wheat supplies may just only to provide enough population till the year 1930 (Kellman, 1987).

4.2 The Development of Eugenics

The eugenicists concern the betterment of race, which meant the quality and composition of the population, in the population control movement. Eugenics is prominent in British at the beginning of twenty century. The eugenics in Great Britain, United States and German rise simultaneously and become a worldwide movement during 1900-1940 (Allen 1997). The term eugenics means 'truly' or 'purely' born which is the science to improve the human genetic species originally coined by Charles Darwin's cousin Francis Galton in 1883. Francis Galton concerned the unknown theory of 'natural inheritance' and emphasized the 'national significance' which referred to national intervention into human evolution. He spoke of 'national

eugenics' and attempted to establish a scientific theory to introduce this concept. Based on this basic idea, he ultimately devoted it as a social movement of a 'new religion' in the level of 'national consciousness'. The term eugenics is derived from Greek word *eugenes* which means "good in stock, hereditarily endowed with noble quality" defined in the book of *Inquiry into Human Faculty and Its Development* by Francis Galton, a British naturalist. He articulated the theory of evolution which implied to produce "a highly gifted race of men by judicious marriage during several consecutive generations". In fact, Galton's eugenics was directed against the fatalism founded in the Darwinian's theory of 'natural selection'. The 'unfit ones' should to a large degree be excluded and those people who are talented or gifted should have above average of number of children, meant to reproduce. The British eugenicists organized Eugenic Education Society in 1907. Meanwhile, the German racial hygienists emphasized on propagation and intervention in the evolution of mankind organized the first International Eugenics Congress in 1912 (Kühl,2013).

The prime mover of American eugenic movement is Charles B. Davenport, the disciple of Francis Galton. Other terms for eugenics since the mid-nineteenth century have also known as *inherited realities*, *race betterment*, *race culture*, *race regeneration*, *racial hygiene*, *sanitary marriage*, the *new genetics* and *genetic engineering* in the late twentieth century (Engs, 2005). Divided by *positive eugenics* and *negative eugenics*, the former stressed the improvement of the racial quality of the future generation under the social control, and the latter is termed the opposite of eugenics as *dysgenics* or *racial degeneration* to depict the decay of the health and efficiency of the population, such as criminals, disabled, the mentally ill and the poor from reproduction. There some obvious linkages and successes between eugenics and population policy, for instance, Frederick Henry Osborn was the founding members of American Eugenics Society in 1926 and played a vital role of founding of the Office of Population Research in Princeton University in 1939.

And basically, eugenics is originated with Charles Darwin and noted by the historian of British eugenics movement G. R. Searle. Furthermore, Darwinism was entwined with French naturalist Jean-Baptist Lamarck's in the late nineteenth century. To replace of the blind process of *natural selection* to be passed to offspring, the social Darwinism was developed to seek "*survival of the fittest*" known as *natural selection* and avoid negative characteristics such as poverty and alcoholism into the social system. Arthur de Gobineau adapted "hierarchy of races" to promote the intelligence and advancement of civilization in the mid-nineteenth century. He classified people from northern European ancestry at the top of the ladder and those with African ancestry at the bottom. The historian of German eugenics movement,

Sheila Faith Weiss noted the influence of Gobineau's theory which led the great majority of educated whites in Europe and the North America to accept "the racial and cultural superiority of the Caucasians as a matter of course". Such eugenic concerns especially remained popular at the upper middle class and strongly supported by leaders in biology, criminology, social work, sociology, liberal religion and medicine.

The idea of "good of society" was more important than the "rights of the individual" for The America academic Louis Menard in The Metaphysical Club. And the belief in eugenics would benefit humanity by curtailing reproduction among the unfit and reduce disease, the cost of charity and public health. In the United States eugenics was the theme in many health-reform crusades, including the sexual purity, birth control, anti-prostitution, pure food and drug, and anti-venereal disease campaign. The focus on negative eugenics had developed some eugenic measures, such as sterilization, immigration restriction, and marriage license requirement which had been also legislated. In German to marry "undesirable races" such as Jews was even forbidden. The eugenics also became associated with holocaust under the Nazi regime. In the 1950s many eugenic organizations in the United States dedicated to *population studies, family planning, genetic counseling*, along with the National Tuberculosis Association had evolved into the American Lung Association to work on the elimination of smoking. Political scientist Diane B. Paul had noted that many eugenicists were racist who promoted that only the 'fit' having the right to survive or to reproduce. Assisted with reproduction method the development of negative eugenics became critical in manipulating for the future of healthy population. And the current interest in eugenics is expressed from *The Perfect Baby* by Glenn McGee as well as by more controversial eugenic researchers such as Richard Lynn, Richard J Herrnstein and Charles Murray.

4.3 The Legalization of Abortion in the Modern World

Abortion was a crime and the life of infant was under protection of The Offences against the Person Act in England during the 1860s. "Any poison or noxious things" were used to procure abortion but the Act was absurd about the timing of abortion within the pregnancy. The Infant Life Preservation Act was enacted in 1929. According to The Offences against the Person Act as well as the Infant Act abortion was understood and only permitted while the pregnancy may damage the mother's life. The History of abortion in United Kingdom was dramatically signed in UK Parliament since Dr. Aleck Bourne carried out abortion for a teen girl. She was 14 years old and was raped and pregnant by a soldier passed. Dr. Bourne was accused against the Infant Preservation Act as well as The Offences against the Person Act.

The issue of abortion is a criminal offence or not becomes problematic and the argument of legalization of abortion was heated up due to this event (Nelson, 2013: 130). Although Dr. Aleck Bourne helped the girls due to the pregnant of rape and the therapeutic abortion he strongly opposed the legalization of abortion without any restrictions. He established an organization of Society for the Protection of the Unborn Child right after the legalization of Abortion Act in 1967 (毛立德譯，Wyatt, 著，2004：208).

In 1925, the German Medical Association convened a meeting in Leipzig to consider how to liberalize the abortion law, proposing that two physicians be appointed in every city to certify a ‘necessity’ existed for operation. Hirsh advocated abortion for eugenic reason (JAMA, 1926), Theilhaber urged venereal disease of women can be an indication for pregnancy interruption (Lehfeldt, 1986). The paragraph of 218-220 were reduced the sentence in 18 May. 1926.

Abortion is illegal before 1920 in French. The French birth control movement promotes the abolition of amendment of Article 317 of the Penal code, which set the jail term for women obtaining abortions at six months to two years and one to five years for providers who performed abortions. At the end of the 1930s the Comité consultatif de la population strengthen France’s coercive pronatalist population policy. French Marshal Pétain government produced the Code de la famille in July 1939 and abortion was viewed as an anti-state act. (Hudgson, 2007) Though women had gained the right to vote in France in 1944 (Latham 2002: 17), the state’s pronatalist population policy was preeminent and viewed suppressing abortion to be a necessary component of that policy. Situation changed around 1950s and 1960s. One family planning association *Mouvement français pour le planning familial* was established by Dr. Marie-André Weill-Hallé in 1956, and it quickly became a woman-focused national organization, which started distributing contraceptives to women despite the restrictive law. It took series of presidential campaign to end birth control restrictions (Latham 2002). In 1967 the restrictions were abolished which marked the triumph of women’s reproduction right.

If we examine the Infant Life Preservation Act (1929), further reasonable understanding may be comprehensive. The argument of abortion may need investigation according to the article of Infant Life Preservation Act as followed.

Punishment for Child Destruction

(1) Subject as hereinafter in this subsection provided, any person who, with intent to destroy the life of a child capable of being born alive, by any willful act causes a child

to die before it has an existence independent of its mother, shall be guilty of felony, to wit, of child destruction, and shall be liable on conviction thereof on indictment to penal servitude for life:

Provided that no person shall be found guilty of an offence under this section unless it is proved that the act which caused the death of the child was not done in good faith for the purpose only of preserving the life of the mother.

(2) For the purposes of this Act, evidence that a woman had at any material time been pregnant for a period of twenty-eight weeks or more shall be *prima facie* proof that she was at that time pregnant of a child capable of being born alive.

The main debate on abortion is the abortion law follows church teachings. Secularization is prevailing when modern states appear. The separation of 'Church' and 'State' become the new trend. The canon law presumes that any reasonable person or on the good faith would not abort their own babies. Killing an unborn would destroy the life of the fetus. Abortion is permitted when young woman was gang raped by a group of soldiers and became pregnant due to the Dr Alec Bourne case in 1938 in UK. The Abortion Law Reform Association promotes the law should be clarified.

The Abortion Act (1967) permit abortion could be performed for urgent medical reason or to protect the mental health of the mother. But the fact is many abortions have no mental or physical problem, a growing need for women push the campaign toward ending any unwanted pregnancy. The voice of liberalizing abortion gave the rights and responsibility for decision making to women and doctors. The voice of the unborn is unheard inside the womb. The Abortion Act (1967) also as amended by Human Fertilization and Embryology Act (HFEA) 1990 which is applied in England, Scotland and Wales, but not in Northern Ireland.

A legally induced abortion must be:

- performed by a registered medical practitioner, performed, except in an emergency, in a National Health Service (NHS) hospital or in a place for the time being approved for the purpose of the act, and
- certified by two registered medical practitioners as justified under one or more of the following grounds:

A the continuance of the pregnancy would involve **risk to the life of the pregnant woman** greater than if the pregnancy were terminated;

B the termination is necessary to prevent **grave permanent injury** to the physical or mental health of the pregnant woman;

C the continuance of the pregnancy would involve risk, greater than if the pregnancy were terminated, of **injury to the physical or mental health** of the pregnant woman;

D the continuance of the pregnancy would involve risk, greater than if the pregnancy were terminated, of **injury to the physical or mental health of any existing child(ren)** of the family of the pregnant woman;

E there is a substantial risk that if the child were born it would suffer from such physical or mental abnormalities as to be **seriously handicapped**;

or in emergency, certified by the operating practitioner as immediately necessary:

F to **save the life** of the pregnant woman; or

G to **prevent grave permanent injury** to the physical or mental health of the pregnant woman.

The act provides that in relation to grounds C and D the certifying practitioner may take account of the pregnant woman's actual or reasonably foreseeable environment. The changes made to the Abortion Act 1967 by section 37 of the Human Fertilisation and Embryology Act 1990 came into effect on 1 April 1991 and included a time limit of 24 weeks for abortions under statutory grounds C and D. Statutory grounds A, B and E, F and G are without time limit. It seems more scientific but it makes no difference than killing an unborn in a more refined technology, for example at 18 weeks or 24 weeks.

The situation in Germany is more focused on claiming the contraceptive rights of women. The abortion was mentioned in nineteenth century German medical literature mainly referring to the pathological or clinical approach (Hegar, 1887). Therapeutic abortion was openly performed for many years whenever medical emergencies were clearly apparent (Stumpt, 1907). The growing practice of illegal abortion created the so-called concern about the health of women (Hamburger, 1908, 1916; Hirsh, 1910, 1914; Winter, 1919). The demographic implications were also considered (Marcuse, 1913; Bumm, 1916; Nurnberger, 1917; tietz, 1954). Initially advocated by radical feminists, liberal lawyer launched the proposing to abolish penalties for physicians performing abortions (Heinitz, 1911).

Women sexual freedom, the discourse of sex reform and gender equality fostered during the wartime. German women movement took series of political actions to demand the *reproductive right* and the repeal of the abortion law Section 218 and Section 219 of the penal code in the late of World War I. These planned campaigns brought great success. In February 1919, the new Weimar Republican government granted women to vote three months after their revolution in November 1918. More determined actions, raised the slogan of ‘Herrin Ihrest Korpers’ (master her own body), were followed to astonishingly demand the repeal of the abortion law Section 218 and Section 219 of the penal code from 1919 (Usborne, 2007). During the Hitler years (1933-45) sever restriction were placed on the availability of contraceptives and on access on legal abortion (Davis, Fleisghacker, and Hohn, 1988).

The contraception information was widely distributed around 1920s in Japan. Margaret Sanger received approval by the Imperial Diet to speak publicly on birth control during her 1922 tour to Japan (Gray 1979:185-188), served as a launching pad for the Japanese birth control movement led by Shidzue Ishimoto (Chesler 1992: 246; 365-367). The Eugenic Protection Law legalized abortion and sterilization for the protection of the mother’ s health. In 1949 the latter law was amended to allow abortions on grounds of economic hardship.

The total fertility rate in Japan was 1.71, West Europe at 1.61, and Europe as whole was at 1.90 in 1985. Some scholars questioned the ‘two or three children program’ advocated by neo-Malthusian Dr. George Drysdale claimed the ‘ideal’ number of children during 1950s and 1960s. At that time the total fertility rate in the United States has been hovering low (David and Sanderson, 1986).

4.4 United Nations and Family Planning Programs

The United Nations play a major role in increasing global awareness of population problems as well as in promoting the integrity of international population policy. Since the implementation of policy needs to be funded, the United Nations leads the general economic and programs to reduce the fertility levels. Moreover, the United Nations needs the corporation with nongovernment organizations to precede related policies. In fact, UN has been involved in population program since 1946. It mainly denoted the establishment of **The United Nations Population Commission** by the Economic and Social Council, served as a subsidiary body, to arrange for studies and advise the **Population Council**. The demographic structure and changes in the world population and on the policies designed to influence population variables, highly co-related with the social and economic factors. Demographic research was the main issue in the early years. **The first World Population Conference** was held in Rome

in 1954 to exchange information on population variables. It was co-sponsored by the **International Union for the Scientific Study of Population (IUSSP)**, a non-governmental organization which was originally founded in 1928 and reconstituted in 1947. The demographic analysis was applied and generated the creation of training the regional centers in developing countries.

The United Nations General Assembly passed the document entitled “**Population Growth and Economic Development**” in 1966 to assist the developing countries for training, research, information, advisory in the field of population programs (Salas, 1976). The UN Secretary-General U. Thant announced the creation of a special **Trust Fund for Population Activities** to supplement the regular UN budgetary appropriation. In 1968, the creation of **United Nations Fund for Population Activities (UNFPA)** served as the channeling funds to shield United States from charge of imperialism, racism and genocide while the opposite voices were leveled against Western inspired population control programs (Finkle & McIntosh, 1994).

Moreover, the important private agent which UN mainly cooperated with is **International Planned Parenthood Federation (IPPF)**. The history of IPPF was the origin of the *birth control movement* which could be traced to Margaret Sanger (1879-1966). In the stage of birth control movement Sanger has a central place. The term of *birth control* is originated by her in an effort to legitimize the conditions of women to prevent pregnancy. Sanger and others advanced the term of *family planning* in an attempt to have reproductive health and pregnancy prevention. The story about Mrs. Sacks led Sanger to the decision of quitting nurse and seeking an active role of publicist or educator, and the strong motivation to promote the knowledge of contraception. Since according to the law of New York stated no one could give information to prevent conception to anyone for any reason in the Section of 1142 and the physicians can only give advice to conception only for the cure or prevention of disease in the Section of 1145. Though Mrs. Sacks, who are 28 years old, a mother of three children aged five, three, and one, died of abortion without the help of physician, pushed Sanger made her decisive action to quit the nurse job and open a clinic for promoting the concept of birth control (Rossi, 1973). Sanger did not support abortion. She preferred to promote the knowledge of contraception.

In 1948, Planned Parenthood had awarded a small grant to Gregory Pincus, a research biologist who undertook a series of tests leading to the development of the birth control pill. Not long after the contraceptive device IUD was first invented by German physician Dr. Richter of Waldenberg in the 1900 and the Population Council played an important role to advocate the family planning programs. The development

of two new methods of contraception: the oral contraceptive pill and the intra-uterine device (IUD) in the early 1960s spurred enthusiasm for making modern contraceptive technology available to countries around the world. Planned Parenthood gave the powerful voice in the population control movement successfully for the increased access to birth control, then pushing for the creation and funding of domestic and international family planning programs. On May 9, 1960, the U.S. Food and Drug Administration (FDA) approved the sale of oral pills for contraception. The contraceptive methods/service, the pill and IUD, were mainly political strategies promoted by Planned Parenthood in the early stage.

It was Alan Guttmacher, M.D., took his 12-year tenure as Planned Parenthood president, and he became a strong advocate for a woman's right to safe and legal abortion when Americans were increasingly angered by the dire consequences of abortion restrictions. Women having a growing demand for the right to control their own fertilities drew the public support for legal and safe abortion in the 1960s. Hawaii becomes the first state to repeal laws of dis-criminalizing abortion. Planned Parenthood of Syracuse, New York was the first Planned Parenthood affiliate to offer abortion services when New York State enacts the most progressive abortion law in the nation, to permit abortion through the 24th week of pregnancy and performed by a licensed physician. Planned Parenthood establishes the international program, largely funded by the U.S. Agency for International Development (USAID) from the 1970s. Planned Parenthood's international division is the largest U.S. nongovernmental provider of family planning services, reaching millions of women and men in the developing countries.

The policy interventions were largely provided, especially the contraceptive services in the developing countries led the total fertility rate (TFRs) declined from an average of 5.4 children per woman of childbearing age in 1970-75 to 3.5 in 1990-95 (Tsui, 2001). In the 1950s Population Council was established by John D. Rockefeller III (1906-1978) in the United States and under the auspices of National Academy of Science. John D. Rockefeller III served as the first president of the council. The council had awarded the first eight graduate students as fellowship for the advanced training in demography, biochemical knowledge. Population Council also established the first biochemical Lab located at the campus of Rockefeller University and devoted to the understanding of reproductive research on new technology of contraceptives. The licenses of many famous brands of contraceptive devices, such as Norplant, Jadelle and Mirena were owned by Population Council. One of the famous leaders of eugenics Frederick Henry Osborn (1889-1981) had ever been the second president of Population Council.

The First International Conference on Family Planning Programs was held in August 1965 in Geneva under the sponsorship of Ford Foundation and the Population Council as well as additional support from The Rockefeller Foundation. The United Nations Fund for Population Activities (UNPFA) was established in 1967 to strengthen the international action to expand the support of population control movement with the efforts of neo-Malthusians (Boli & Thomas 1999; Crane 1993; Hartmann, 1995). UNPFA was put beneath the United Nations Development Programme (UNDP) as the administrative unit in 1968. The International Planned Parenthood Federation (IPPF) was the private organization, established in 1952 and has been promoted family planning associated with over 100 countries. In 1974 the Third World Population Conference held at Bucharest adopted the consensus by the World Population Plan of Action (WPPA). The Plan contained four major sections, 15 sub sections, 109 paragraphs plus 74 sub-paragraphs. 'Respect of human Life' was claimed in the Plan but referring to 'the right of couples and individuals to fertility decision, information, and means'. 'Protection family as the basic units of society' and 'Equalization in statues of women' had been acknowledged in the section (Berelson, 1975).

The General Assembly, the Governing council of UNDP/ UNPFA, and United Nations regional commissions, regional bodies are some responsible to produce 'a guide of international assistance in population matters'. The UN report was biennially beginning in 1977. The Secretary-General was assigned to make appropriate arrangement with the UN system for 'a comprehensive and thorough review and appraisal of progress' every five years beginning in 1979 (Berelson, Bernard1975). As to the new change for Family Planning program in the United Nations International Conference of Population held in Mexico City in 1984, prohibited fund raising for promoting abortion was only written as 'The Conference reaffirmed the principles and objectives of the World Population Plan of Action and adopted 88 recommendations for the further implementation of the Plan...' (International Conference on Population and Development, ICDP Secretariat Background Document, 1994). The Fifth International Conference on Population and Development was held from 5 to 13 September 1994 in Cairo, Egypt. More than 180 States participated in this event. A new Program of Action was adopted as a guideline for national and international action in the area of population and development for the next 20 years. Instead of 'demographic goals' by 'Human rights standards'; 'reproductive right' replaced by 'population control' were formally recognized in this conference. After the Fifth ICPD, there exists no formal population conference to set the new guideline. The United Nations General Assembly directly monitors the implementing strategies and actions on population and development.

In general, Family Planning programs are widely used to regulate population in many countries. It is estimated about 179 countries, representing 92 percent of governments with over 99 percent of the world's population have some similar forms of family planning programs in 1998 (Rand, 2002). Governments provide substantial supports for Family Planning programs and promote contraceptive supplies and services, including legalizing abortion law and providing abortive surgeries in the name of protecting women's health and rights. Public discussion tends to emphasize the favor of the contraceptive technology which are politically promoted as the national and international policies in the developing countries, but to ignore the controversial debate over abortion problem. The origin of Family Planning programs is also rarely acknowledged the false concept of mixing abortion with contraceptive methods.

4.5 The Role of United States

The role of United States is served as an active agent in international population policy, not only effectively propagated the norm of population control to the third world development from the period of 1965 to 1973, but also the financial benefactor and donor to provide the most need for international family planning programs and population control programs. The United States worked multilaterally to advocate the population control programs and to socialize the developing countries into accepting the population control measures (Eager, 2004). Prior to the mid-1960s, the United States was *not* involved in the business of birth control even within the United States, let alone the developing world. The fear of population explosion in the developing countries gained the little concerns within the United States government in 1959. The President of United States Eisenhower had declared that "Birth Control is *not* our business..." though many statistical demographers Petchesky had warned of the 'population explosion' in the Third World (Eager, 2004; Petchesky, 1990). However, while Ehrlichs published "The Population Bomb" around 1968, the United States became highly concerned to solve the world population problem and to allocate its formidable resources, including political, economic and scientific possibility to the developing world.

The world population took the first decades to reach one billion people in the nineteenth century. The second billion has reached by 1930s. And the next billion was added in the 1960s. The evidences had shown that 90 percent of the increase of population occurred in the developing countries (Donaldson 1990). The rate of population growth in the developing countries was much rapidly increased than the United Nations Population division had realized (Frinkle and McIntosh, 1994). The

United States acting as a *norm entrepreneur* and sought to propagate the norm wherein it socialized the developing world governments into implementing population control programs. The assumption is that *population control measures*, such as Family planning programs, contraceptive methods, could significantly increase the prospect the developing countries to achieve the economic ‘take off’ and follow along the same path of modernization, industrialization as Western Europe and United States had achieved (Eager, 2004).

The agencies such as the United States Agency for International Development (USAID), which is authorized created by President Kenedy, the United Nations Fund for Population Activities (UNFPA), Ford, and Rockefeller Foundations also functioned as the main bodies of fundraising, programs promoting and projects leading role. The United States contributed more than half of all international assistance for population control and family planning programs in the Third World from 1965 to 1980 (Donaldson, 1990). The United States President Johnson had announced that he would ‘seek new ways to use our knowledge to help deal with the explosion in world population and the growing scarcity of world resources.’ in 1965 (Donaldson, 1990). In the same year the similar concern was also addressed in International Union for Scientific Study of Population (Green, 1993; Ashford, 2001). Moreover, three-fourths or more of all government resources for population assistance came from the United States government before 1974 (Singh, 1979). Furthermore, the International Planned Parenthood Federation (IPPF) and the Population Council, which were founded in 1952, were both active private agents to assist international population control activities.

A document from American House of Representatives had shown the U.S. leading position of the global population policy. A hearing was held by Chairman Lee H. Hamilton. Mrs. Margaret Catley-Carlson, president of Population Council, Dr. Alan Rosefield, Dean of Columbia School of Public Health, Harber Conable, the former president of World Bank, Dr. Samuel Preston, professor of Demography of University of Pennsylvania, and etc. were all invited and made important statements at the hearing. The chairman Hamilton depicted the fact that the leading position of United States at the beginning of the hearing as ‘*The United States is the largest funder of population programs worldwide and has played a key role in formulating the plan of action to be adopted in Cairo*’. The population problem, public health and development of the developing countries were highly concerned not only at the hearing but also in the Cairo conference. The theme of population policy concerned the maximum carrier capacity, which meant the resources of the earth. They predicted that there was about two billion population on the earth and the related problem need

to think about in advance. The population policy of Year 2100 or 2106 even appeared at the hearing. Dr. Alan, who was also an obstetrician, witnessed his firsthand experiences in Thailand around 1967-1973. He articulated that the contraceptive method has been proved effective of decreasing population in the developing countries. Dr. Alan optimistically said that the population problem which was much parallel what took place in Europe in 19th century and North American in the first half of the 20th century to achieve its demographic transition. He reported that the population went down toward stabilization. 'Two child' policy and 'contraceptive method' of the Family Planning programs were the key points. Essentially, the contraceptive method served as the free choice both to markets and to couples.

Dr. Alan asserted his strong support on women's reproductive health while abortion issue was mentioned at the hearing though most attendee agreed on that 'abortion on demand' was *not* as a mean of Family Planning programs. Dr. Alan clarified that abortion on demand as the safe guard to women who has unwanted pregnancy. The term 'pregnancy termination' was preferred to replace abortion and he focused on the women's reproductive rights. Besides, the problem of teen unwed pregnancy was also highly gained attention. The reproductive health and reproductive rights became 'the best thing' that United States could offer. That was education which was based on the contraceptive method as well as on family planning programs. The opening remarks from Congressman Chris Smith left the human dignity of the unborn child as the one of the document of statement (Hearing of U.S. House of Representatives, 1994).

An official document issued to all USAID offices domestically and internationally gave the fundamental principles of the position of the United States to support Family Planning programs in the developing countries. It declared the US-led population control efforts: (1) overpopulation and underdevelopment go hand in hand; (2) the government of every nation with a population problem should do its utmost to increase the knowledge and practice of family planning among its citizens (Gaud, 1968). In 1967 U.S. Congress added Title X, Programs Relating to Population Growth, to the Foreign Assistance Act. In 1970, Title X of the Public Health Service Act was enacted. Furthermore, the United States President Nixon asked John D. Rockefeller III, founder of the Population to chair the commission "Commission on Population Growth and the American Future" to take charge of the investigation and various aspects of population growth in the United States (Hodgson & Watkins, 1997).

Merril K. Benett, the executive director of the Food Research Institute at Stanford University, identified four waves of discussion on 'race between population and food supply' in modern history. Thomas Robert Malthus marked the first wave by his

famous article of An Essay on the Principle of Population in 1798. The second wave derived from the late 1890s, while German preceding the controversy of merits of agrarian and industrial national economy. Meanwhile, Sir William Crookes gave his presidential address at the British Association for Advancement of Science in 1898 in the English-speaking world. The World War I and World War II was the pessimistic phase of the third wave. And the concern of economic development post the World War II started the four wave of population problem. John Maynard Keynes and Keynesian economics led the main argument that the world economic development in line with the fear of overpopulation. (Kellman, 1987). The United States, along with a few other developed countries played the key roles of reconstruction of world economy after the World War II. Population control was assumed of the key factor to help the achievement of economic growth. In other word, out-of-control population may hinder the economic development. The economic growth manifested the new global concern, whereas 'food supply' was the equivalent norm from 17th century to the 19th century. Population control served as the main norm guiding global population policy from 1965 until 1994. The population policy was merged with reproductive rights and health after The International Conference on Population and Development in Cairo (1994). Cairo declared that women were no longer to be treated as the means toward the 'end' of population control. To some extent, that the concern of reproductive rights and health after 1994 is the fifth wave of the global population policy.

As to the feminists, while the Program of Action (United Nations, 1994) intended to establish international population policy for the next two decades at the international Conference on Population and Development in Cairo, in spite of feminist appeared in the document, they not only strongly cast their doubts on the implementation of the policy but also deny consensus of the population policy. According to the feminists understandings, that unusual document was bored 'to promote reproductive health defined as ensuring women the capacity to reproduce and the freedom to decide if, when and how often to do so'. In fact, the Family Planning Program was the appropriate part of such a program. In other word, the neo-Malthusians, not the feminists, typically run the program as well as the population policy since 1974 based on the Bucharest document (United Nations, 1974). The goal of feminists focuses more on suffrage than reproductive rights in early twenty century (Buechler, 1990) though the ground of alliance between neo-Malthusians and feminists has ever been twisted (Hodgson & Watkins, 1997).

Meanwhile, the birth control pill was approved in the United States in May of 1960 (Donaldson, 1990), which made the population control programs more practical.

Though birth control and population control are not synonymous, the former is controlled by individual over their own childbearing; the latter is controlled by the authorities or elites over population size and composition. There was mass discussion and hope that the wide distribution of the birth control pill and IUDs could help to decrease the fertility rate and get the developing countries on the track of economic and political development (Johnson, 1987). R. T. Ravenholt, the Director of the Office of Population of USAID from 1966-1979, had ever remarked his early experience at the annual meeting of Washington State Chapter of Zero Population Growth in 1991 and said “*when trying to move peasant populations from their traditional non-use of contraceptives to use, the act of contraceptive distribution to every household is powerful accelerate of acceptance.*”(Ravenholt, 1991).

The United Nations has been involved in population program since 1946. It mainly denoted the establishment of The United Nations Population Commission by the Economic and Social Council, served as a subsidiary body, to arrange for studies and advise the Council. The demographic structure and changes in the world population and on the policies designed to influence population variables, highly co-related with the social and economic factors. Demographic research was the main issue in the early years. The first World Population was held in Rome in 1954 to exchange information on population variables. It was co-sponsored by the International Union for the Scientific Study of Population (IUSSP), a non-governmental organization which originally founded in 1928 and reconstituted in 1947. The demographic analysis was applied and generated the creation of training regional centers in developing countries. Other units inside the United Nations have undertaken population activities, for instance, the Statistical Division of the Department for Economic and Social Information and Policy Analysis, the Social Development Division and the Division for the Advancement of Women of the Department for Policy Coordination and Sustainable Development to carry out related research, studies and population-related activities at the regional level. (International Conference on Population and Development, ICDP Secretariat Background Document, 1994)

The United Nations Fund for Population Activities (UNPFA) was established in 1967 to expand the support of family planning program, the provision of technological cooperation, financial assistance, monitoring the population education program, data collection, policy formulation, implementation and evaluation. UNPFA was put beneath the United Nations Development Programme (UNDP) as the administrative unit in 1968. The International Planned Parenthood Federation (IPPF)

was the private organization, established in 1952 and has been promoted family planning associations in over 100 countries.

In the United States context, the United States Agency for International Development (USAID) has played an active role in policy formulation. The office of Population Policy Development has funded data collection, research and information to help policy-makers better understand the magnitude of population problems.

In 1974 the third World Population Conference held at Bucharest adopted the consensus by the World Population Plan of Action (WPPA). The Plan contained four major sections, 15 sub sections, 109 paragraphs plus 74 sub- paragraphs. 'Respect of human Life' was claimed in the Plan but referring to 'the right of couples and individuals to fertility decision, information, and means'. 'Protection family as the basic units of society', and 'Equalization in statues of women' also acknowledged in the section. (Berelson, Bernard1975)

The General Assembly, the Governing council of UNDP/ UNPFA, and United Nations regional commissions, regional bodies, are responsible to produce 'a guide of international assistance in population matters'. The UN report was biennially beginning in 1977. The Secretary-General was assigned to make appropriate arrangement with the UN system for 'a comprehensive and thorough review and appraisal of progress' every five years beginning in 1979 (Berelson, Bernard1975). As to the new change for family planning program in the United Nations International Conference of Population held in Mexico City in 1984, prohibited fund raising for promoting abortion was only written as 'The Conference reaffirmed the principles and objectives of the World Population Plan of Action and adopted 88 recommendations for the further implementation of the Plan...' (International Conference on Population and Development, ICDP Secretariat Background Document, 1994)

The Fifth International Conference on Population and Development was held from 5 to 13 September 1994 in Cairo, Egypt. More than 180 States participated in this event. A new Programme of Action was adopted as a guide for national and international action in the area of population and development for the next 20 years. 'Human rights standards' instead of 'demographic goals' were recognized in this conference. After the Fifth ICPD, there exists no formal population conference to set the new guideline. The United Nations General Assembly directly monitors the implementing strategies and actions on population and development.

The radical sociological critique of medicine mainly comes from the work of Michael Foucault, Thomas Szasz, and Ivan Illich. Michael Foucault not only opened

up the social history of medicine but the new trend of medical sociology. They argued that medicine was a form of repression. Medical institutions are regarded as a system which exercised a social-political entity of power and authority over patients and society. The role of medicine in the society and power of medical profession required to be re-evaluated. And the call for a series of examination of 'the social character of medicine' and 'the history of human societies and their efforts to deal with problem of health and disease' became prominent around the 1960s. The early medical histories focus on the definition of disease mainly by medical practitioners, the new trend of medical sociology is interested in the social phenomenon of medicine examined by a much broader social, cultural, economic, political and professional influences on medicine. (Waddington, 2011 : 3).

There are a growing criticism that the process of defining boundaries between the normal and the pathological is the process of social construction which is heavily dominated by the medical expertise and ideas(Waddington, 2011 : 5). There is a growing need to review the powerful authoritarian which is associated with the biomedicine and collaboration between doctors and states.

4.6 The International Planned Parenthood Federation

The history of International Planned Parenthood Federation (IPPF) was traced the *birth control movement* to Margaret Sanger (1879-1966). In the stage of birth control movement Sanger has a central place. The term of *birth control* is originated by her in an effort to legitimize the conditions of women to prevent pregnancy from 1916 by opening a birth control clinic in Brooklyn New York. She also published journal of Birth control Review and established the American Birth Control League. In the mid-1930s Sanger and other advanced the term of *family planning* in an attempt to have reproductive health and pregnancy prevention. The story about Mrs. Sacks led Sanger to the decision of quitting nurse and seeking an active role of publicist or educator, and the strong motivation to promote the knowledge of contraception. Since according to the law of New York stated no one could give information to prevent conception to anyone for any reason in the Section of 1142 and the physicians can only give advice to conception only for the cure or prevention of disease in the Section of 1145. Though Mrs. Sacks, who are 28 years old, a mother of three children aged five, three, and one, died of abortion without the help of physician, pushed Sanger made her decisive action to quit the nurse job and open a clinic for promoting the concept of birth control (Rossi, 1973). Sanger did not support abortion. She preferred to promote the knowledge of contraception.

In 1948, Planned Parenthood had awarded a small grant to Gregory Pincus, a research biologist who undertook a series of tests leading to the development of the birth control pill. The development of two new methods of contraception: the oral contraceptive pill and the intra-uterine device (IUD) in the early 1960s spurred enthusiasm for making modern contraceptive technology available to countries around the world. Planned Parenthood gave *'the powerful voice in the movement for women's rights, fighting successfully for increased access to birth control, pushing for the creation and funding of domestic and international family planning programs.'* , On May 9, 1960, the U.S. Food and Drug Administration (FDA) approved the sale of oral pills for contraception. The contraceptive methods/service, the pill and IUD, were mainly political strategies promoted by 1 by Planned Parenthood in the early stage.

It was Alan Guttmacher, M.D., began his 12-year tenure as Planned Parenthood president. He was a strong advocate for a woman's right to safe and legal abortion when Americans are increasingly angered by the dire consequences of abortion restrictions. Women having a growing demand for the right to control their own fertilities drew the public support for legal and safe abortion in the 1960s. Hawaii becomes the first state to repeal laws criminalizing abortion. The Planned Parenthood of Syracuse, New York was the first Planned Parenthood affiliate to offer abortion services when New York State enacts the most progressive abortion law in the nation, permitting abortion through the 24th week of pregnancy and performed by a licensed physician.

Planned Parenthood establishes the international program, largely funded by the U.S. Agency for International Development from the 1970s. Planned Parenthood's international division is the largest U.S. nongovernmental provider of family planning services, reaching millions of women and men in developing countries.

4.7 The Interplay of Demographic Control, Birth Control, and Abortion

Modern research of medical history has notices the relationship between health and religion since nineteenth century. Francis Galton (1872), a cousin of Charles Darwin, who promoted the eugenics in modern world had attempted to scientifically examine the impact of religion and health. He conducted a case-control study of intercessory prayer and found that members of British royal house had the lower average life span of all group in the population. And the mortality of missionaries was no lower than

those of other people. He compared the praying and non-praying classes (Koenig, King & Carson ed. Al., 2012 : 7) .

The Family Planning Program is emerged by the complicated interplay of *demographic control*, *birth control*, and *abortion* campaign. First is the demographic control movement from nineteenth century. Birth control movement came to the second. These two movement jointed due to Margaret Sanger had exiled herself a period of time in England (Kennedy, 1970). The abortion is the third force in this issue.

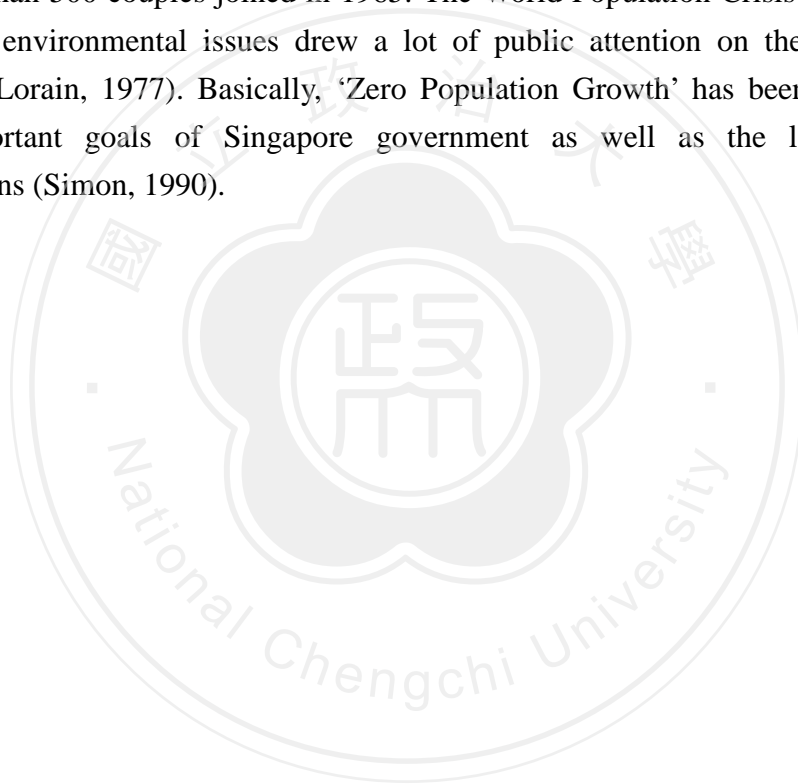
In 1913 National Birth Rate Commission was organized by the Council for Promoting Public Morals in England. Dr. Norman Haire played an important role in the 1920s. In 1922, the population control and birth control had been brought to the international scenario. The Fifth International Neo-Malthusian and Birth Control Conference held in London. The president of this conference, C. V. Drysdale, reported the contraceptive section and was highly accepted by 146 countries. They used the 'irresistible' hasted to join this 'scientific doctrine' to urge the exercise of birth control.

Professor Ferch considered that Neo-Malthusian as a necessity of civilization. Professor Isoo Abe reported the birth control movement in Japan in the conference. Dr. Tokijiro. Kaji introduced the methods of birth control in Japan. The related advance in genetics was also introduced by Professor P. W. Whiting. The necessity of abolishing law against preventive measure was discussed by Dr. Anton Nystrom. The linkage between birth control and medical practice was introduced by Dr. Hermann Rohleder. The editor of *Birth Control Review* of New York Mrs. Annie Porritt was invited to articulate the 'Publicity in the birth control movement' in this conference.

In the openly address the president of this conference C. V. Drysdale shared his experience with the founder of Birth control League Margaret Sanger, mentioned her idea about the birth control was the human basic need and the campaign of birth control was welcomed in Japan, India and China. They predicted that assumption of population would cause economic distress which was restated in the conference. And how the birth control became the medical subject drew the support from physician Dawson of King College. The special thanks were given to Cambridge economists who were reviving the interest of Malthusian doctrine. The opposition from Catholic Church was harshly criticized by the conference. The great success of birth control was reported. For example, in England and Wales the birth rate was fallen from 6.3 in 1876 to 22 in 1920. The whole birth rate of Europe fell from 40 in

1876 to 36.5 in 1901. The average of birth rate of the world was reduced around 17 or 18 per 1,000.

In the 1950s and 1960s three U. S. organizations, the Ford, Rockefeller Foundations and the Population Council, served as catalysts in bringing experts and government leaders from around the world at various international meetings to discuss implications of rapid population growth and high fertility. Peter Bachrach and Elihu Bergman called for the formulation policy of 'population establishment' to face the population problem in the work of Power and Choice (1973). The World Population Conference held in Belgrade (1965) was the second scientific conference on the problem of population with 88 countries represented, nearly 1, 000 participants and more than 500 couples joined in 1965. The World Population Crisis (1973) even joined the environmental issues drew a lot of public attention on the developing countries (Lorain, 1977). Basically, 'Zero Population Growth' has been one of the most important goals of Singapore government as well as the local related organizations (Simon, 1990).



Chapter Five : The Modern State and Family Planning Program in Taiwan and Singapore

The end of **Thirty Years War** (1618-1648) and the **Treaty of Westphalia** are marked as the rise of modern nation-state of Europe. The western modern nation-states connote the concept of sovereignty which refers to the state gained its

autonomy from the authority of the church and represented with jurisdictional and political dimensions (James, 1999; Held, 2003). Prior to Thomas Robert Malthus (1766-1834), Italian economist Giovanni Botero (1544-1617) was the first philosopher clearly to bring out the relation between population and the means of subsistence (Smith, 2006). Botero believed that the state's power was a function of the number of population, income and tax revenue (Fauci, 2014). Sir Walter Raleigh had argued that population had grown beyond the possibility of subsistence and indicated that war is the logical outcome of population pressure revealed at his book *Historie of the World* in 1652 (Smith, 2006). The task of the modern nation-states highly concerned the problem of population growth. The idea of population growth had ever seen as 'positive' phenomenon by French Mercantilists from the sixteenth century to the end of the eighteenth century since it represented as the idea for economic progress bounded with the abundance of cheap labor as well as the nutritive power of the state (Kellman, 1987). Some scholars named the interaction between population growth and population health as 'Two Revolutions' which begins in England in the late eighteenth or early nineteenth centuries. Nonetheless, the knowledge of germ theory of disease by Louis Pasteur in France and by Robert Koch in Germany in the last third of the nineteenth century also contributed to the development of public health referring to the population health (Kunitz, 2007).

Furthermore, the Industrial Revolution is another factor to the shaping of modern state. From the point of economic historians who concern the standard-of-living and ramifies a much larger set of debate between the population health of individual and state related to economic changes. The historian Eric Hobsbawm had classified the participants in the debate of Industrial Revolution and standard-of-living as optimists and pessimists. The optimists believed that the standard-of-living conventionally measured as income per capita. And the pessimists acknowledged as Karl Polanyi argued that the industrialization and urbanization will not only cause the loss of 'self-respect' of the individual, but also the 'culture conflict' among the class (Kunitz, 2007). In the field of public health policy, the series of sanitary reform are grounded on the prevention of disease, such as yellow fever, cholera, scarlet fever, smallpox, and typhus. The assumption of the disease and remedy is based on the logic of 'find the germ and kill it' (Shaw, 1965). Moreover, the influence of Darwinian evolutionary theory in biology at the end of the nineteenth century the 'population control' gains much more concern. Those who believe that the boat of country is full and to promote the states need to take strong stands of birth control strategy. Those advocates are usually labelled as neo-Malthusians which are also known as the supporter of pro-natalists.

The concept of reproductive right of women was traced the initiator of birth control movement, Margaret Sanger (1879-1966), a nurse in New York. International Planned Parenthood Federation (IPPF), the abortion advocator in the states. The term of birth control is originated by her. Control meant a strong choice, compulsory at most, to take an effort to legitimize the conditions of women to prevent pregnancy from 1916. Sanger opened a birth control clinic in Brooklyn New York. She also published the journal of Birth Control Review and established the American Birth Control League.

Furthermore in the mid-1930s Sanger and other advanced the term of family planning in an attempt to have reproductive health and pregnancy prevention. Since according to the law of penalty of New York stated that no one could give information to prevent conception to anyone for any reason in the Section of 1142. Only the physicians can give advice to conception and only for the cure or prevention of disease in the Section of 1145 (Rossi, 1973). Sanger did not support abortion. She preferred to promote the knowledge of contraception instead of abortion.

The reproductive technology, the oral contraceptive pill and the intra-uterine device (IUD) had developed in the 1950s and 1960s. In the early 1960s spurred enthusiasm for making modern contraceptive technology available to countries around the world. International Planned Parenthood Federation (IPPF) played a powerful voice in the movement for women's reproductive right. Not only in U.S. but in Europe a series of political actions were adopted, especially to abolish the restriction on abortion in the penalty. The penalty was the state system to control the individual liberty in J. s. Mill that should be abolished. The influence of civil liberty is evident in feminist birth control strategy.

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The History of abortion in United Kingdom was signed against as Offences against the Person Act 1861 in 1861. UK Parliament passed Section 58 of the Act made abortion a criminal offence. If we examine the Infant Life Preservation Act (1929), further reasonable understanding may be comprehensive. The article of Infant Life Preservation Act (1929) is tried to protect the unborn and revealed for the health for mother but this part is ignored by the public.

The situation in Germany is more focused on claiming the contraceptive rights of women. The abortion was mentioned in nineteenth century German medical literature mainly referring to the pathological or clinical approach (Hegar, 1887). Therapeutic abortion was openly performed for many years whenever medical emergencies were clearly apparent (Stumpt, 1907). The growing practice of illegal abortion created the so-called concern about the health of women (Hamburger, 1908, 1916; Hirsh, 1910, 1914; Winter, 1919). The demographic implications were also considered (Marcuse, 1913; Bumm, 1916; Nurnberger, 1917; tietz, 1954). The advocates of radical feminists, liberal lawyer launched the proposing to abolish penalties for physicians performing abortions (Heinitz, 1911).

Women sexual freedom, the discourse of sex reform and gender equality fostered during the wartime. German women movement took series of political actions to demand the reproductive right and the repeal of the abortion law Section 218 and Section 219 of the penal code in the late of World War I. These planned campaigns brought great success. In February 1919, the new Weimar Republican government granted women to vote three months after their revolution in November 1918. More

determined actions, raised the slogan of ‘Herrin Ihrest Korpers’ (master her own body), were followed to astonishingly demand the repeal of the abortion law Section 218 and Section 219 of the penal code from 1919 (Usborne, 2007). During the Hitler years (1933-45) severe restrictions were placed on the availability of contraceptives and on access to legal abortion (Davis, Fleisghacker, and Hohn, 1988).

The regional study and national history could help us to get a closer outlook of the development of modern state. The relationship between the different classes could also be illustrated though the problem of inequality is a long phenomenon throughout the human history. And the tension has become more polarized during the industrialization (Levin & Wrightson, 1994; Zell, 1994). The research on mining in Pea Country of England reveals the social conflict between the opposed interests of plebian and elite. Actually, the mining workforce in Peak country remained dominated by the key group of the medieval industry. Even those who claimed *free miners* still belonged to Duchy of Lancaster’s Peak estate, an area known collectively as King’s or Queen’s field. The documents had shown that the Court of Star Chamber heard the complaint of Sir Godfrey Foljamb, the lessee of the Duchy of Lancaster’s duties of lot and cope in the Wapentake of Wirksworth. The buyers presented their account of recent ore purchases from the miners and caver (Wood, 1999 : 43-46). The problem of inequality, revolt, riot, and rebellion last (Underdown, 1987).

5.1 Taiwan

From the perspectives of European, the history of Taiwan could be dated back to 1554 and 1558 shown the conquering *Isla Hermosa* in a report sent by city of Manila to Spanish King Philip II in 1586. The Spanish settlement had established at the north end of Keelung named *La Santisima Trinidad* while Dutch had found *Zeelandia* in the south of Taiwan (Damm & Lim, eds., 2012: 30). Those three places were now most spelled by *I lha Formosa*, *Sandiago* and 熱蘭遮城。From the perspectives of Chinese, the history of Taiwan seems to be divided at least two different historical viewpoints: one side tends to consider that Taiwan is the part of China both in culture and politics. The typical historian is 連雅堂. He is the author of 《台灣通史》. The other side tends to claim that Taiwan is an independent country from China both in history and politics. The typical historian is 史明. He is the author of 《台灣人四百年史》. However, this study highlights the history of demographic changes of the stage of modern state of Taiwan which is from the late nineteenth century the period of modernization to the twentieth first century.

There are main four kinds of inhabitants in Taiwan. One is called Taiwanese (閩南人) which refers to the inhabitants immigrated from the south provinces of Chinese. The second is Hakka which also refers to the inhabitants from the south provinces of Chinese but the language is different from Taiwanese. The third is Chinese including their generations which refer to the migrants in 1949. The fourth is the aboriginal tribes which refer to the inhabitants who had lived in this island from thousands years ago (簡後聰著, 2001: 65-158). It was about the Ming Dynasty and Ching Dynasty that the Chinese immigrated from China to Taiwan as well as to south east Asian. During the past one century the political development of Taiwan has dramatically developed from colonization of Japan to an independent country and entered into the world stage as the developing modern state.

5.1.1. Modernization Stage

When the first modern train and track were constructed from Taipei to Shongshan (松山) from 1885 to 1889 by the First officer of Taiwan Province 劉銘傳, it may be considered the modernization of Taiwan. He also built the telegram offices from Taipei to south to Tainan (游常山, 2011). Taiwan was ruled by the Japanese when Ching Dynasty lost the war aroused by Japan in 1895. Before this stage, the population of Taiwan was about 1,944,737 in 1811. At that time the house number was estimated about 246,695, so the average number was about 7.8 persons at each house. Since the immigration increased within the end of Ching Dynasty that caused population of Taiwan had soon reached to 2,546,000 in 1893 (李國祈, 1996: 112, 127). Ching Dynasty had defeated by Japan and Taiwan was colonized by Japanese government in 1895. The pace of modernization did not stop. The population of Taiwan has reached 6,585,841 in 1943 (李國祈, 1996: 326).

Population and public hygiene are often linked with each other while the European modern states rise up. According to a French report written by Reginald Kann recorded that the population of Taiwan was about 3,115,064 in 1905. This number includes the Japanese and aboriginal but does not include the soldiers. The author was assigned by French colonial government to investigate some resources facts about Taiwan. Academia SINICA published this important report via the help of French University of Provence since it was restored at Centre des Archives d'Outre-Mer'd Aix-en-Provence. It provided the first hand of investigation on Taiwan in 1905. The content of 3.8 was titled as Population/Hygiene Publique denoted the close linkage of population and hygiene. (鄭順德譯, Kann 著, 2001: 61-63).

There were about seventeen hospitals were established by Japanese government after 1895. All the doctors, nurses were hired by Japanese government. The numbers of doctors were about 180. One of their main jobs was taking effective control of epidemic diseases. The members of Red Cross branches in Taiwan were about 20,361. Malaria is the typical disease due to the tropical weather as well as the Asian region. Cholera had been burst out and caused 613 deaths before 1902 but it was under controlled after then. The plague was another disaster which caused thousands of deaths in this island before 1904 (鄭順德譯，Kann 著，2001: 64-65).

5.1.2 Family Planning Association Period (1960-1984)

Taiwan was one of the initial users of intra uterine contraceptive device (IUCD) and reached about 10 percent fertility decline of the married women in the childbearing at the end of 1965. Singapore and Hong Kong were also reaching a significant number of women with the quickening response to the introduction of IUCD. Dr. Ronald Freeman, Director of the Population Studies Center of the University of Michigan reported that these four countries as the significant sign of success in population decline. The similar induced fertility decline was also plausible in Pakistan, India, and Turkey (Freedman, 1965). In the 1960s Population Council provided grants on family planning programs. They supported a pioneering study in Taichung city of Taiwan, increased access to Family Planning information and services. There are two formal journals published by Population Council, one is *Studies in Family Planning*, the other is *Population and Development Review* which would help to map the picture of Family Planning programs in Taiwan, Singapore and many other Asian developing countries. Some scholars claimed that Taiwan was soon to accelerate the demographic decline after the post-World War II period (Casetti and Li, 1979; Freedman and Muller, 1967). The fertility transition occurs while government subscribes to pro-natalist population policy. In Taiwan the fertility apparently falls below the replacement level in the 1980s (Selya, 2004).

The restriction on population policy of Taiwan was initiated by scholar Chiang Monlin (蔣夢麟), the first chairman of Sino-American Joint Commission on Rural Restoration (JCRR 農復會) in the 1960s. His famous article “Let us face the increasingly urgent problem of Taiwan’s population” (1959) became leading the important issue and pushing the advocate of birth control policy and to promote family planning programs. And the family planning program was formally promoted throughout the province. The first five year plan was set from 1964 to 1969 and the ‘The Guideline of Population Policy’ was passed in 1969. With the assistance of American government as well as the scholars, for example Dr. Earl John Baker,

Taiwan government passed the law of 'The Rule of Family Planning Programs of Taiwan Area' in 1966 and the graduate of family planning was set up in 1975(盧忻謐, 梁妃儀, 蔡篤堅 2007).

The trend of fertility in Taiwan basically decreased over the period of the 1970s. The total fertility rate fell from 5,608 to 2,710 with a decline of 52% from 1961-78. Some scholars revealed that the fertility fall at all aged groups and the most significant fact was at the age over 30, which decline ranged was from 70 to 92 percent. Family planning programs in Taiwan had an important effect on its fertility decline. Not only the series of large research surveys but also the birth control campaigns were conducted by Taiwan Provincial Institute of Family Planning. Furthermore, the abortion was mixed used in the research of fertility decline.

The scholars indicated that the prevalence of contraceptive usage explained the rapid fertility decline in Taiwan. Abortion was used while the contraception failed (Chang, Freeman & Sun, 1981). With the home visiting and clinical services, especially through the 'Word-to-mouth strategy', the family planning practices were accepted by the couples. The study provided by the Taichung Action Program showed that the popularity of IUD (Intra-Uterine Devices) as well as the Ota ring was the highly known took the overwhelming appeal by 79% acceptance among 6,285 samples in June 1964. The most modern fertility behavior of adopting family planning methods were characterized as: the couples wanted the fewest children. They are likely to do something to limit family size. The couples were likely to use contraception, and relying less on induced abortion alone. Furthermore, they were better educated and used the mass media, had attraction of modern consumption. They are urban residence and were less favorable to traditional Chinese family value (Takeshita, 1964).

The insertion of Lippes loop, a kind of IUD, was around 260,745. The target of government of Taiwan was set for 600,000 in five years. A study of loop showed that there were about 84 per cent women accepting loops to stop having children. The acceptors were probably having four children and recently moving toward there, one of them a son. Their ages were likely to be between 30 and 34. And again, there were the higher education, the higher rate of acceptance. Meanwhile, in 1966 Korea inserted 391,810 loops and nearly all were for free. About 75 per cent of the women over 30 years old reported wanting no more children in 1966. And the dated target for loops had reached 1 million wearers at the end of 1971 in Korea (Keeney, 1967). Taiwan government promoted the Ten Major Construction Projects within this period and economic development took off.

5.1.3 1985 Onward (1985-2015)

In Taiwan the Eugenic Law was enacted on 1 January 1985 and the enforcement rules were proclaimed in April of 1985 (張勝彥編, 2004: 336). It remarked the concept of eugenic policy of population proceeded as a bio-power of scientific correctness. The current studies analyze that the population policy of Taiwan from the late 1950 to the late 1960 is a power-knowledge complex. KMT adopts series of population policies, especially the family planning programs which was strongly promoted with the assistance of American government under the consideration of economic geo-political strategy in East Asia. The power-knowledge complex is a Foucauldian perspective that is a bio politics of population (Foucault, 1978). The scholars refer that the fast population decline in Taiwan not only speeds up the population aging rate also paralyzes the societal consciousness of the impact of aging (蔡宏政, 2007)

1985 onward, the argument of demographic of family planning projects come to a relatively stable period. Instead Taiwan government struggled with a new tension of abolishment of Martial Law in this period. The government has been confronted the crisis of democratic consolidation and has the urgent need to seek the democratic transition in peace. Family planning project of *Two Kids* policy succeeds. The crude birth rate keeps declining from 49.97% in 1951 to 23.81% in 1981. Then it comes to 15.63% in 1991 to 8.55% in 2011. The birth rate is lower than the normal replacement of 2.1% in 1990s. The rates of population grow are negative in some cities of Taiwan, such as -0.36% in Yilan county, -0.1. in Nantou county, -0.10 in Yunlin county and -0.17 in Yayi county in 2002 (內政部, 2017). The main articulations of population problem remain at the eugenic considerations of more excellent population need for the development of modern state (徐美苓, 2008 : 8).

5.2 Singapore

The earlier demographic statistics of Singapore could be traced to 1824 when Singapore was occupied by British Kingdom with agreement from Sultan Hussein the eldest son of Sultan Muhmud. Seven times of population census were made until 1836. The data was mainly collected with the effort of Stamford Raffles and T. J. Newbold (Jones, Straughan and Chan, 2009). The other three investigations were carried out in 1840, 1849, and 1860 gained the interest by the scholar T. Braddell (Braddell, 1861). The ethnic factor was more classified and used at the population census since 1871 (Saw, 1999).

The regular investigation is made every 10 years before 1931, which had stopped during the Second World War. After the war the investigations respectively proceed

in 1947, 1970, 1980, 1990, and 2000. Furthermore, the data of registration of birth and death are the second important source while researching on population, which was set up from 1872 in Singapore though the data was not open until 1886. The third source of study on population is marriage registration, especially for Muslim. The registration is mandatory both for marriage and divorce respectively by the Registry of Muslim Marriage and Shariah Court. The fourth kind of demographic statistics is administrative records regarding migration. In the census of residence of Singapore reveals the number of Malays, Chinese, Hindu and Christian are totally about 24,819 in 1826, then the populations increase to 31,825 in 1836. Malays is about one-half of the population that number is 16,121 in 1826 and increase to 21,220 in 1836. Chinese is about one-sixth of the population that number is 4,125 in 1826 and increase to 4,102 in 1836. Hindu is about 862 in 1826 and the population increase to 880 in 1836. Christian is about 2, 236 in 1826 and the number increase 2,389 in 1836 (Newbold, 1839).

5.2.1 Family Planning Association Period (1949-1965)

The preeminent scholar of population of Singapore Saw Swee-Hock depicts two population policies. One tends to encourage childbearing and the other to discourage childbearing. The governments adopt the former to persuade people to produce more children and to raise population growth rate called pro-natalism. The latter is called anti-natalism while the governments do the opposite to decrease the reproductive behaviors. And Singapore adopted a strong anti-natalism stance in the 1960s. Population control programme were adopted to accelerate the fertility decline in order to take off economic growth. Four major programs such as family planning program, induced abortion, voluntary sterilization and disincentives aimed at reducing fertility caused the rapid fertility decline to the replacement level of 2.1 in 1975. Actually early in 1949 the Municipal Council permitted the infant welfare clinics to provide family planning programs. At the same year the doctors and social workers formed Family Planning Association. The number of clinics of the Association was increased from three to thirty four at the end of 1965. The main objects of the clinics were providing family planning services, especially the couples who were seeking birth control services. The number of women who accepted the scientific contraception were increased from 3,841 in 1952 to 103,986 in 1965 (Saw, 1999). Furthermore, The Family Planning Association was not only the first center of Singapore, but also the founder member of International Family Planning Federation, which was founded in 1952 while it was under the colonial government.

5.2.2 Anti-natalist Period (1966-1987)

The Family Planning Association then was taken over by the government after People's Action Party assumed office (APA) in 1957. The following enactments included the **Singapore Family Planning and Population Board Act** in 1965 and the establishment of **Singapore Family Planning and Population Board (SFPPB)** by the Act of Parliament Chapter in June 1966. The Board was directly responsible to the **Minister of Health** and with the linkage of **University of Singapore** to carry out the related research and training sections. **The National Family Planning and Population Program** in Singapore was instituted to improve the health and welfare of the mother, child and the total family unit at the micro and macro level to accelerate the fertility decline and to aid the socio-economic development. Basically, many objectives at the micro and macro level have met at the ultimate goal of improving the quality of population (Loh, 1976: 26).

During this period, Singapore government aimed the goal of population decline as 'zero population growth'. The founder father of Singapore gave the speech and declared it. He set to accelerate this goal and to achieve it less than 20 years. He identified his country as the 3rd world countries while compared to the USA and USSR, the 1st world countries and the 2nd world countries as the Western European countries, and noted that how the poorer 3rd world countries would become the Marxist believer. He tried to avoid this destiny. The population decline and zero population growth would help Singapore to accelerate the economic growth. (Speech by Lee Kuan Yew, 1975 : 9) The scholar indicated that women from the 1968-1972 marriage cohorts had 1.3 fewer children the population declined from 3.4 children in 1973 to 2.2 children in 1982 at the 3rd National Family Planning and Population Survey (Saw, Swee-Hock, 1980:40).

The oral contraceptive pill, IUD and condom were available at the clinics of the Association promoted the educational campaigns. The initial message was "Plan Your Family" and "Singapore Wants Small Families" was the emphasized in the later years. The slogan "Two-Child Families for Singapore" appeared in 1972 and "Boy or Girl, Two is enough" has been the center of the Association (Saw, 1999). Many Family Planning clinics were set up. There were about 158 community centers and 63 youth organizations joined and played the important roles in promoting the family planning programs. One government official document, which was a speech given by the Minister for Health and Home Affairs, indicated that there were 80 percent of Singaporean knew about the government policy to promote 2 child family planning programs (Speech by Mr. Chua Sian Chin, 1973:3). Moreover, **SFPPB** initiated some guidelines and attempted to achieve the total national developments beyond the family planning which would lead the whole country from an under developing

country into the developed country. The related policies covered the social and economic construction such as, housing, land development, social security, taxation, education, employment and economic incentives (Loh, 1976:1).

And the **Voluntary Sterilization Act** was passed in 1969 and revised in 1974. The **Abortion Act** was legalized in 1969 and to provide induced abortion. Married women have the good knowledge of family planning method. There was about 98% women have heard of at least one contraceptive method and around 88% know how to use at least one contraceptive method. It was about 75% of the married women aware of government recommendation of having no more than two children (Sun, Shirley, 2012).

5.2.3 Pro-natalist Period (1987-present)

The population policy of Singapore changed in 1987. This change trend was accorded with the 'eugenic phase' of 1983-1986. There was an urgent need to shift the anti-natalism in order to raise the fertility rate back to the replacement level. The Inter Ministerial Population Committee was established to review the national population policy in 1980s. After studying the recommendations of Committee, government of Singapore made the major change from population control to encourage more births on 1, March 1987. The pro-natalism measures were adopted. There is a series of **Baby Bonus Scheme**. For instance, there are childbearing subsidies, income tax relief, tax rebates (Sun, Shirley, 2012). The tax relief for the third child was increased from \$500 to \$750 in the 1988 and increased to \$1,500 in the 1990. The tax relief for the fourth childbearing was also extended to \$1,500 in 1, January 1988. The new slogan was "Have Three or More if You Can Afford it". The tax rebate was raised to \$20,000 which benefited the couples from the year of 1988. Additional tax rebate was raised 15 per cent for maternity leave for the income of women who having the third child. And finally the compulsory pre-sterilization counseling was introduced in October 1987 both for women and men with less than three children. Meanwhile the compulsory pre-abortion counseling was also introduced for women who had undergone abortion (Saw, 1999).

5.3 Similarity and Difference of Population Policies between Taiwan and Singapore

Singapore and Taiwan experienced the similar demographical transition. During the World War II the baby boom with the Total Fertility Rate (TFR) of six children per woman had reached its peak in the late 1950s in Taiwan and fell to low fertility

decline to the replacement level in the 1980s. The roles of two governments and the economic developments showed the similar strategies of the developmental state, such as the adoptions of Family Planning programs and the shift from anti-natalism to pro-natalism. Yap Mui Teng has identified the tremendous demographic transition of the research on Singapore. The postponement of marriage at age-specific proportion of marriage rate both male and female showed the similar delay. The male age at first marriage rose from 26.9 years in 1970 to 28.7 in 2000 and then delayed around at 29.8 in 2005. The corresponding figures for female are 23.1, 26.2 and delayed at age of 26.9, respectively (Teng, 2009).

It was late until 2006 Taiwan government taking some specific pro-natalist demographic measures to advocate the pronatalist measures to encourage couples of having more children (Sun, 2012). Actually in the series of public and social policy in Asia, Taiwan is the missing part from Hong Kong, Japan, South Korea, and Singapore, while discussing the ‘Ultra-low fertility in Pacific Asia’(Jones, Straughan, and Chan, 2009).

Singapore is the first country in the Pacific Asia region to reverse earlier anti-natalist policies (Jones et al. 2009b). Singapore and Taiwan have Chinese ethnicity whiles Singapore has more ethnic diversity with Malay and India. The population of Singapore has reached the fertility replacement level 2.1 in 1975 and has taken the pro-natalist policy in 1987. Singapore government has launched multi-pronged campaign such as “Have Three, Or More Children If You Can Afford It”. And “Baby Bonus” Scheme was promoted in 2000. While the fertility rate of Taiwan and South Korea have reached replacement level 2.1 in 1984, Taiwan government in spite of proclaiming pro-natalist statement but without any measurements in 1992. South Korea has taken some mildly pronatalist policies in 1996 (Sun Shirley, 2012).

5.4 The Struggle at the Crack of Economic Reason

In 1968 Paul and Anne Ehrlich published the book *The Population Bomb* which gained the neo-Malthusians’ concern. Anne Ehrlich was responsible for theorizing the equation: $I = P * A * T$ to interpret the relationship among population and economic development. Where I is the impact on the environment and is function as population size, when P the population multiplied by stream of goods and per person and A identified by per capita consumption or income as proxies multiplied by a factor that embodies the level of technology T, such as energy, commodities, and space. For Neo-Malthusians, they believed that too many people reproducing would retard

economic growth. Furthermore, too many people would destroy the environment, social service, and may fuel conflict and poverty (Sen, 1994). The neo-Malthusians and eugenics provided the main ideology, the set of belief that gives the coherence to the collective activities of population control movement. The neo-Malthusians attempted to adopt more strong stands that 'beyond family planning measures' were needed. The advocacy in the media, target and incentive were considered to lowering fertility (Davis, 1967)

There are three demographic assumptions of Family Planning programs: (1) Rapid population growth impedes economic development, to lower rates of population growth as well as to lower fertility will lead to improve the living standards of human welfare. (2) Couples in developing countries want fewer children and have more interest in regulating their fertility. (3) Making contraception widely available is an effective way to meet couple's need for fertility regulation and to lower fertility levels as well as the small size of family. These three assumptions are also the basic economic ideas for the advocators of population policy. Under these assumptions, the unborn child having no any economic competitiveness while the developing countries seek their dream of striving to be the modern nations in global politics. With the plots of trends of fertility in Thailand (1969-83) and in Taiwan (1965-85) reached to the tremendous regression line in the Eastern Asian elites (Bongaarts, 1987), the human dignity of the unborn child is determined to be the weak-tie of the economic development.

Dose the unborn children have the rights to life? Most people tend to choose silence on the issue of abortion. Some people might have the experience of aborting babies, some don't. The most difficult part is to tell others about their true stories. Sometimes, even the families are enclosed to know the true stories about their missing babies, grandchildren, nieces or cousins. The United Nations held World Population Conference in Bucharest, Romania from 19-30 August 1974. Representatives from 137 states, 109 international NGOs, various UN agencies and demography communities attended. That conference signaled an international forum which was not the same as previous conference limited within demographers from 1954 to 1965 (Finkle and Crane, 1975). Furthermore, in 1984 the United Nations International Conference of Population was held in Mexico City. President Reagan took a strong stand to oppose abortion and announced a new policy, known as '*Mexico City Policy*' to prohibit the U.S. Family Planning funds to any overseas organizations that offering counseling about abortion or abortion referrals in other nations. This policy marked the greatest triumph of the pro-life movement. The Policy was continued by President George H.W. Bush, but rescinded by President Clinton in 1993, and reinstated by

President George W. Bush in 2001. And President Obama rescinded it again in January 23, 2009.

The core idea of Mexico City Policy plans to protect the human dignity, especially the embryo. Abortions only could be done in response to rape, incest, or threat to the mother's life or health. President Reagan stated that "*We believe population programs can and must be truly voluntary, cognizant of the right and responsibilities of the individuals and families, and respectful of religious and cultural values. When they are, such programs can make an important contribution to economic and social development, to the health of the mothers and children, and to the stability of the family and of society.*" The Policy provides the stand of protection for the children before birth as well as after birth. The empirical investigation of the relationship between state population policies and individual childbearing decision is expected to provide a clearer picture of individual perceptions and experiences of state policies of human reproduction. People are blocked by their complicated interplay and led by the mass media only labeled the pro-lifer as the conservative Catholic stand (Hudgson, 2007).

The abortion is a sex-based inequality which is embedded both in biological nature and the social structure. The altitude of pro-or anti- abortion may be very personal or public issue to different people. 'No harm principle' is also ignored by feminists. The pro-abortionists use the term of 'unwanted pregnancy' and adopt the provision of civil liberty of human right. To some extent women's social statue is determined by the male and hierarchical structures, such as wealth, power, and prestige.

Margaret Sanger used the 'absurd cruelty' to criticize the abortion and promoted the birth control the feminists used to authorize her as their pivotal initiator of abortion movement. In her precise wording is "*The absurd cruelty of permitting thousands of women each year to go through abortions to prevent the aggravation of disease...we also know that particular disease can be more easily combated after such an abortion than during a pregnancy allowed to come to the full term...Why put these thousands of women who each year undergo such abortion....* (Sanger, 1920)?". The truth of the debate usually exaggerated to liberalize the restriction of Penalty or the human rights of women on one side, but the human right of the unborn on the other side is thoroughly neglected. Some radical feminist have accepted that the role of 'care' of a mother, though reject the simple fact of giving birth with the influence of the studies of attachment by psychologist Bowlby. '.... Motherliness is a way of life. It enables a woman to express her total self with the tender feelings, the protective attitude, the compassion love of the motherly woman.' (Friedan, 1965). The serious inclusion of

the female half of humanity would lead to a better understanding of social justice. If women are only assumed to be attached to or subject to the male, some problems are obvious throughout the history. The same outcome will be if women claim their priority to the unborn.

Morality is relative to culture which needs time to shape and to build in the real daily life. The concept of the meaningful world is constructed limited for each person. The idea we have may only be constructed by the knowledge of past thirty years or two decades. To broaden our knowledge and mind to the different disciplines become more urgent. We are all limited. The Alasdair MacIntyre reminds us that 'it has made us blind to ... a concept according to which standards of rational justification themselves emerge from and are a part of a history...'. When he studied the philosophy of ethics in the tradition of Enlightenment. John Rawls advises that the disputes about the values are subject to reasonable disagreement because our understanding of what is good and valuable is especially subject to what he has called the 'burden of judgment' (Gaus, 2003). And no wonder how to apply and interpret the Prisoner's Dilemma (PD) in the light of political contractualism or law which is necessary for all rational beings in Kantian, and how rational choice is problematic to deal with the collective actions (Barnes and Sheppard, 1992), then need other more essays to investigate. (Kraus & Coleman, 1987)

Women are clearly using abortion as a major means of controlling their fertilities though the policy direction has been made '*...in no case should (abortion) be promoted as a method of family planning...*' in the International Conference on Population in Mexico City in 1984. Section 8.25 has been characterized as family planning as an 'anti-abortion endeavor' or 'contraceptive only' in the International Conference on Population and Development's Program of Action in 1994. "*All governments and relevant intergovernmental and non-governmental organizations are urged ... to reduce the recourse to abortion through expanded and improved family-planning services.*" (Hudgson, 2007).

This essay will examine the origin and evolution of family planning programs to present how the fallacies of mixing *abortion* with *contraceptive methods* occur and are widely adopted in the world political domains. The development of population policy of United Nations will be first reviewed, including the key population conferences and policies. In the second section, the role of the family planning programs and International Planned Parenthood Federation which are the main practitioners of UN are also under investigation. The ethical criticisms are illustrated in the third part of the paper. Finally, how and why the fallacies of the

population policies occur in the context of policy theories/criteria and practitioners are critically analyzed in the last part of the paper.

Chapter Six : The Results of Focus Group Interview

6.1 Data Collection

In this research there are totally 24 focus groups across two nations: Taiwan and Singapore, each country contains 12 groups. Each country contains 6 faith-based focus groups and 6 non-faith focus group. The minimum members for each focus group are at least 3. Within which they are designed to divide into four main categories: both included faith-based and non-faith focus groups from Taiwan and Singapore to interview. Meanwhile, while there are faith-based doctors, faith-based couples, faith-based single female adults, faith-based single male adults, faith-based teen girls, and faith-based teen boys, there are non-faith doctors, non-faith couples, non-faith single female adults, non-faith single male adults, non-faith teen girls, and non-faith teen boys.

The questions for focus group Interview on the human dignity of the unborn child are asked in semi-constructed as bellow, and sometimes will be asked by other little modified words.

1. How do you think of that the unborn children have the right to live?
2. What's the concept of the human dignity of the unborn child?
3. How and why do you have the concept about the human dignity of the unborn

child?

4. If the unborn child is healthy, that pregnancy will not hurt the mother, and the unborn child do not have any genetic disease, the parents and the families do not have any genetic disease, and it is not conceived by rape, how do you think that this unborn child have the right to live?"

5. How do think of the abortion problem as well as the reproductive right about women?

6. How you think of the institutional settings, especially the mandatory pre-abortion counselling and 48 hours of waiting period before abortion in Singapore? (Introduce in a few words of the mandatory pre-abortion counselling and 48 hours of waiting period before abortion for the participants in Taiwan.)

7. Do you think of the mandatory pre-abortion counselling and 48 hours of waiting period violating women's reproductive right?

8. Is the mandatory pre-counselling and 48 hours of waiting period a good institutional setting to protect both the right of the unborn child as well as the women?

The faith-based participants of Singapore are mainly organized with assistance of the biggest parish priest Father Henry Siew of Nativity Church. There are estimated over 5,000 catholic at Nativity Church. As to the non-faith participants: some of them are organized with the help of the staff of Nativity Church; some are invited by the faith-based participants, they recruit from their friends; some are invited at least 3 strangers with their consents on the street of McDonald of Singapore near Hougang metro station. In the similar way, the faith-based participants of Taiwan are mainly organized by the researcher in New Taipei City Cardinal Tien Hospital and Cardinal Tien Junior College of Healthcare and Management, Da-ping Lim Catholic Church and Hsinchu city one parish named Our Lady of Mount Carmel. As to the non-faith participants are mainly organized by the researcher with the help of those faith-based participants. They recruit their non-faith friends. All the participants are informed the research purpose. The researcher promised the research confidentiality and got their formal signing confidential agreements. The questions of the interview are semi-constructed. There are about 41 participants from Singapore who are codified as A. There are about 22 participants are faith-based and 19 participants are non-faith participants from Singapore. There are about 42 participants from Taiwan who are codified as B. There are about 21 participants are faith-based and 21 participants are non-faith participants from Taiwan.

The total numbers are 83. The female participants are 39 and the male participants are 44. The gender ratio is 1:1. The all faith-based participants are codified as AF and BF with the numbers, but the non-faith participants remain only A or B with the

numbers. There are 25 teens: 13 (7 faith-based and 6 non-faith participants) from Singapore and 12 (6 faith-base and non-faith participants) from Taiwan. Teens are defined from age 13 to 19. There are 7 boys and 6girls from Singapore and 6 girls and 6boys from Taiwan. Both gender ration of are 1:1. All of the teen are studying in the school. Except the education of the teen are junior high students, only one male adult from Singapore and 3 female adults, 4 male adults are Junior High School graduated, the rest of participants including the doctors are university graduated. The general list of the participants is as below.

Table 2: List of Participants of Focus Group Interview

Code	Group Character	Nationality	Faith (Catholic/Non)	Gender	Age	Education	Marriage
AF1	Doctors	Singapore	Catholic AF15*Christian	M	51	Medical School of NUS	Married
AF2				F	25		
AF3				M	25		
AF4	Couples			F	42	University	
AF5				M	44	University	
AF6				M	46	University	
AF7				F	45	University	
AF8				F	66	University	
AF9	M			67	University		
AF10	Single F.			F	29	University	Non-married
AF11				F	30	University	
AF12				F	22	University	
AF13	Single M.			M	50	University	
AF14				M	33	University	
AF15*				M	32	University	
AF16	Teen Girls			F	14	Junior high	
AF17				F	13	Junior high	
AF18				F	13	Junior high	
AF19	Teen Boys			M	13	Junior high	
AF20				M	15	Junior high	
AF21				M	13	Junior high	
AF22				M	13	Junior high	
A23	Doctors	Non-faith	F	28	Medical School	Married	
A24			M	25	Medical School	Non-married	
A25			M	26	Medical School		
A26	couples		M	60	University	Married	
A27			F	60	University		
A28			F	32	University		
A29			M	33	University		
A30	Single F.		F	30	University	Non-married	
A31			F	34	University		
A32			F	40	University		
A33	Single M.		M	27	Senior high		
A34			M	27	University		
A35			M	21	University		
A36	Teen Girls		F	16	Junior high		

A37				F	16	Junior high			
A38				F	16	Junior high			
A39	Teen Boys			M	16	Junior high			
A40				M	17	Junior high			
A41				M	17	Junior high			
BF1		Doctors	Taiwan	Catholic	F	60	Medical School	Catholic sister	
BF2	M				50	Married			
BF3	M				51				
BF4	Couples					M	75		
BF5						F	75	University	
BF6						M	75	University	
BF7						F	70	University	
BF8						M	45	University	
BF9						F	48	University	
BF10	Single F.					F	58	University	Non-married
BF11				F	46	University			
BF12				F	36	Master			
BF13	Single M.			M	32	University			
BF14				M	25	University			
BF15				M	33	University			
BF16	Teen Girls			F	16	Senior high			
BF17				F	16				
BF18				F	16				
BF19	Teen Boys			M	16	Junior high			
BF20				M	16	Senior high			
BF21				M	16	Junior high			
B22		Doctors		Non-Faith	M		Medical School	Married	
B23			M			Unmarried			
B24			M			Married			
B25	Couples				M	42	Senior high	Married	
B26					M	38	University		
B27					M	50	Senior high		
B28					F	35			
B29					F	34			
B30					F	50			
B31	Single F.				F	25		Non-married	
B32				F	27				
B33				F	33				
B34	Single M.			M	32	University			
B35				M	25				
B36				M	30				
B37	Teen Girls			F	16	Senior high			
B38				F	17				
B39				F	16				
B40	Teen Boys			M	16				
B41				M	16				
B42				M	17				
合計	83 人	Singaporean:41;Taiwanese:42	Faith-Based:43; Non-Faith:40	M:44; F39	-	-	-		

The study mainly attempts to verify three assumptions as below:

(1).The participants of faith-based focus group both in Taiwan and Singapore would appear more strong agreement with the human dignity of the unborn child than those from non-faith focus groups' participants.

(2).The participants of faith-based focus group both in Taiwan and Singapore would appear more strong agreement with the supporting of restriction on abortion by the institutional settings as the mandatory pre-abortion counseling and 48 hours waiting period than those from non-faith focus groups' participants.

(3).The participants of faith-based focus group both in Taiwan and Singapore would appear more strong agreement with the institutional settings of the mandatory pre-abortion counseling and 48 hours waiting period are not violating women's right of demanding abortion than those of non-faith group participants.

6.2 Main Results of Comparison between Taiwan and Singapore via Faith-Based Focus Group Interviews vs. Non-Faith Focus Group Interviews

Basically, the main outstanding common results are both faith-based focus group interviews in Singapore and Taiwan show the participants of faith-based focus group of Singapore and Taiwan appear much more strong agreement with the human dignity of the unborn child than those both from non-faith focus groups' members of Singapore and Taiwan. Some faith-based participants reveal their very personal experiences to the researcher which is a really touching part of the religion as well as the core power of Christian faith. For instance, one faith-based couple reveals that *"I am a doctor and I do not think that the unborn child has the right to live before I receive the baptism. I have to say that I totally change the idea about the unborn child."* (BF4). His wife is a nurse and says *"I am a nurse and I have the similar idea with my husband as he just says that we do not know that the unborn child is a life before we baptized. And we even aborted the children when we think the child number were over what we expected..."* (BF5).

And three of the assumptions of this study are verified. The content would be illustrated as follows. Some other obvious outcomes and differences between Taiwan and Singapore regarding the first assumption will be illustrated as follow.

The first assumption: if the participants of faith-based focus group both in Taiwan and Singapore would appear more strong agreement with the human dignity of the unborn child than those from non-faith focus groups' participants.

One obvious common similarity between Taiwan and Singapore is that the

non-faith couples both in Singapore and Taiwan show 'the least support' toward the human dignity of the unborn child. The non-faith Singaporean couples tend directly to express that "I think the parents have the rights to make the decision for the child." (Table 3: A26, A27, A28, A29), and the non-faith couples moderately say "It depends. If the unborn child is healthy and the couples have the good condition, then they could make their own better decision." (Table 3 of B25-B30) while replying the question regarding the human dignity of the unborn child. Only one non-faith couple from Taiwan strongly supports the human dignity of the unborn child (B25, B26) due to the gratefulness of their first son in spite of pre-marital sex. Instead of aborting it they choose to keep it and get married. They seem never feel regret of that decision. One Singaporean couple mentioned the family planning project and show support of the demographic policy of Singapore (Table 3: A28, A29).

Another most important message is that the *non-faith doctors in Singapore* show 'fully support' toward the human dignity of the unborn child than those of non-faith doctors in Taiwan. The non-faith Singaporean doctors directly express that "Yes, they have the right to live. The unborn child is human person." (Table 3: A23, A24, A25), and the non-faith doctors in Taiwan directly articulate that "I think the parents have the right to decide then it has the right to live." (Table 3: B22, B23, B24) while replying the question regarding the human dignity of the unborn child. The doctors could typically represent the elites. While the non-faith doctors in Taiwan tend to consider that only the parents have the right to decide the life of the unborn child, no wonder the life of the unborn child is under threaten. The other non-faith doctor indicates the dilemma that "if the parents do not want it" even though "I think the unborn child has the right to live", and "that is the abortion problem arises" (Table of B24).

Although one non-faith Singaporean single female agrees that the unborn child has the human dignity but she worry the problem of boundary between the mother and the child "I agree with the idea that the unborn child is a human being but I have some doubts about the boundaries between the mother and the unborn child. Sometimes women have the problem to continue the pregnancy. What would she do?" (A32).

One non-faith single Singaporean male gives his fully support to the parents than to the unborn child and mentioned the abortion problem as well as the condom failure problem while replying if the unborn child having the human dignity "No, I think the parents have the rights. The parents need to consider many things and sometimes abortion is a better choice. It's a modern society, right? I have many friends they had abortion experiences. It is parts of life when we grow up. I know we have to use the

condom but sometimes it fails.” (A33).

6.2.1 Detail Results of the First Assumption of the Focus Group Interviews in Singapore

The results of faith-based focus group interview in Singapore found that the participants of faith-based focus group of Singapore appear much more strong agreement with the human dignity of the unborn child than those from non-faith focus groups’ members in Singapore. The first assumption of this study is verified.

The Question (1) : Do you think that the unborn child has the right to live and to enjoy the human dignity of life?

Almost the faith-based participants (AF1-AF22) in Singapore agree that the unborn child has the right to live and could to enjoy the human dignity of life, except two participants (AF16, AF17) have some doubts. Most of the faith-based participants reply the concept of “*Baby is a gift of God*” or “*It is a life*”. These two faith-based participants cast doubts because they are teen girls. One mentioned somethings happened last summer and she supposed she knew what happened so she used the verb ‘*suppose*’ in order to answer the researcher’s question in the group. She says that ‘*I suppose* the unborn child have the right to live.’ And to some extent the verb ‘*suppose*’ may have the function for the teen would like to use in order to indicate they have the independent thinking.

The participants from non-faith focus group in Singapore (A23-A41) tend to have the opinions that ‘the parents have the right to make the decision’, ‘a right decision’. These participants (A23, A24, A25, A30, A31, A32, A35, A36, A37, A38, A39, A40, A41,) express that the unborn child has the right to live. A23, A24, A25 are non-faith doctors. A30, A31 and A32 are single female adults. A35 is the only single male adult support that the unborn child has the right to live. A36-A41 all are teen girls and boys. Their answer surprised me.

Table3: Result of Focus Group Interview on Question (1) Singapore

Participants Code	Participants Answer	Keyword
AF1	Yes, I think the unborn child has the rights to live. They are human beings. Life begins at the moment of conception.	Yes/human being Life begins at the moment of conception.

AF2	Yes, I think the unborn child has the right to live. I took a long time to make sure that my faith is right since the concept of science usually neglect or ignore it while I was in medical school. My father helped me a lot. He helped me to re-affirm my faith and it also influence my fiance. Now he has been baptized and is a catholic.	my faith is right, catholic,
AF3	Yes, now I will say yes. The Catholic teachings help me to be a more real human being. Science always emphasizes the evidence but the beginning of the human life cannot be so accurately examined. But basically, the unborn child would be a real human being if we give it time to develop, and sure we have to provide good care at the same time. Pregnancy is a process. The unborn child is a human being.	the unborn child would be a real human being if we give it time to develop,
AF4	At the beginning of conception, though it has not fully formed, but life is decided, whether the child is fully formed, it's a life of his own.	At the beginning of conception,
AF5	Agree	Agree
AF6	We all agree	Agree
AF10	Yes, I think the unborn child has the rights to live. And I am a catholic. God creates human life and we should protect the human life from the beginning of life until to the end of life.	rights to live, catholic, human life, from the beginning of life until to the end of life
AF11	Yes, I think the unborn child has the basic human right to live. That's what the true meaning of human dignity. We should protect the life form the womb even it is unhealthy.	basic human right to live, human dignity,
AF12	Yes, I support that the unborn child has the	the right to live,

	right to live. Life is not easy. When we see the environment now we live, we almost destroy it, the beautiful earth that God creates for us. And the unborn child is another victim that people abuse their rights. People only want to enjoy sex but abort the babies!	the unborn child is victim,
AF13	Definitely, from conception	Definitely, from conception
AF14	A baby even though it is still unborn, it is a life. We have no right to end a life of the unborn child. That is what I think.	A baby even though it is still unborn, it is a life.
AF15	Yes, from conception it is the human being.	Yes, from conception it is the human being.
AF16	I think last summer I knew some friends have some talks and I think they suppose of their own thinking. I suppose the unborn child have the right to live.	I suppose the unborn child have the right to live.
AF17	Yes.	Yes.
AF18	Yes, because it has the connection with the parents.	Yes, it has the connection with the parents.
AF22	Yes, it's a life. If you don't want to have a baby, you can't actually try to make one. (All laugh.)	Yes, it's a life.
All (AF18-22)	Yes, (And all nod their heads)	Yes, (And all nod their heads)
A23	Yes, they have the right to live. The unborn child is human person.	Yes, human person
A24	Yes, it has the right to live.	Yes, right to live

A25	Yeh. They have.	Yeh.
A26	_husband : No, I think the parents have the rights to make the decision for the child. Especially when the families have the financial problems. It is necessary to make a right decision.	No, parents have the rights to make the decision for the child.
A27	_wife: Yes, I think the parents have the right to make the decision. It is not easy, but sometimes they have to.	the parents have the right to make the decision
A28	_wife: I think the parents have the right to make the right decision for the family. And sometimes some children are not healthy.	parents have the right to make the right decision for the family
A29	_husband: I agree with my wife. And I think that is what the government did through the project of family planning. The parents have to make plan for their families. What we think is to provide the best for the kids, if the situation is not ready and the parents have to do the right decision for the family.	family planning parents have to make plan for their families.
A30	Yes, I think they have the rights to live. Once the unborn child could move, I think it's a life.	Yes, I think they have the rights to live. Once the unborn child could move, I think it's a life.
A31	Yes, I think the unborn child has the right to live. We are all human beings.	right to live, human beings,
A32	I agree with the idea that the unborn child is a human being but I have some doubts about the boundaries between the mother and the unborn child. Sometimes women have the problem to continue the pregnancy. What would she do?	I agree with the idea that the unborn child is a human being but I have some doubts

		about the boundaries...
A33	No, I think the parents have the rights. The parents need to consider many things and sometimes abortion is a better choice. It's a modern society, right? I have many friends they had abortion experiences. It is parts of life when we grow up. I know we have to use the condom but sometimes it fails.	No, I think the parents have the rights.
A34	Yes, I think the parents have the right.	parents have the right
A35	No, I have different idea. I support that the unborn child have the right to live even though the parents have the right to make a decision. We still need to think more about the human dignity of the unborn child. For me it's a life.	The right to live, human dignity of the unborn child, For me it's a life.
A36	Yes, I think they have the human dignity and the basic right to live.	Yes, human dignity, the basic right to live.
A37	Yes, they have.	Yes, they have.
A38	Yes, they have.	Yes, they have.
A39	Yes, they have.	Yes, they have.
A40	Yes, they have the right.	Yes, they have the right.
A41	Yes, they have.	Yes, they have

6.2.2 Detail Results of the First Assumption in Taiwan Groups

The results of faith-based focus group interview in Taiwan (BF1-BF21) find that the participants of faith-based focus group of Taiwan appear much more strong agreement with the human dignity of the unborn child than those from non-faith focus groups' members (B22-B42).

The Question (1): Do you think that the unborn child has the right to live and to enjoy the human dignity of life?

Almost the faith-based participants agree with that the unborn child has the right to live and could to enjoy the human dignity of life than those whose opinions of participants from non-faith groups in Taiwan. The More interesting phenomenon are the altitudes toward human dignity of the unborn child shown more positive than those non-faith participants in Singapore.

B26: It depends. If the unborn child is healthy and the couples have the good condition, then they could make their own better decision. It depends.

Table 4: Results of Focus Group Interview on Question (1) Taiwan

Participants Code	Participants Answer	Keyword
BF1	Yes, sure.	Yes, sure.
BF2	Yes, they are created by God. They are life from the moment of conception. I mean from the union of egg and sperm.	Created by God, They are life from the moment of conception.
BF3	I think the unborn child has the right to live.	the right to live
BF4	I am a doctor and I do not think that the unborn child has the right to live before I receive the baptism. I have to say that I totally change the idea about the unborn child. Nobody told me that even when I receive the medical education.	I totally change the idea about the unborn child.
BF5	I am a nurse and I have the similar idea with my husband as he just says that we do not know that the unborn child is a life before we baptized. And we even aborted the children when we think the child number were over what we expected. I do feel sad about this behavior. I thank God that now I know how wrong I have done before. I wish I could know	We do not know that the unborn child is a life before we baptized.

	it earlier.	
BF6	I got married after receiving the baptism. The Catholic teachings clearly identify the human dignity of the unborn child. I have five children. And I usually choose to abstain from having the unexpected baby. I also regard the abstinence as the respect of my wife. I concern her need to rest.	Catholic teachings clearly identify the human dignity of the unborn child. to abstain, abstinence as the respect of my wife.
BF7	As my husband says that we have the grace to be a Catholic before marriage and actually I am a protestant Christian. I receive the Christian faith earlier than my husband but he knows more and decides earlier to have a devoted religious life. He leads me to know more about the value of religious life. And since he has been the president of a Catholic School, we are lucky to be invited to learn the Natural Family Planning by Catholic Church. From that program I learn how to take the temperature daily and to observe the time when the ovum is relieved. And Learn to have the plan when is the right time to have baby as well as to serve God in a right way. I also was a teacher to help the other couples. I really feel that child is the gift of God. It's a good knowledge to learn. Is it still emphasized in the church?	the value of religious life, to learn the Natural Family Planning by Catholic Church, child is the gift of God,
BF8	I have the similar experience as (BF4). I was not a catholic before I got married though my girl-friend was a catholic. Now she is my wife. We even had the pre-marriage relationship before marriage. I thank God that I do one thing right that I marry her right away when she told me that she was pregnant. I do not doubt that she has our baby. And we are right. Now we have our boy, he is our first son. And	We even had the pre-marriage relationship before marriage. I do one thing right that I marry her right away when she told me that she was pregnant. I do

	<p>the daughter came two years later. She was a very good lady and wife. I have to thank God. The way she teaches the children leads me to decide to receive the baptism. I learn the faith from my wife and children. They do the good examples.</p>	<p>not doubt that she has our baby. And we are right. Now we have our boy, he is our first son.</p>
BF9	<p>I think the unborn child is really the gift from God. I am a Catholic and my families have been Catholic from my grandparents. I came from 萬金鄉, it was the first county to receive the baptism in Taiwan. We just celebrate its 150 anniversary several years ago. I thank God that my boy-friend now is my husband, do not asked me to abort the baby when we had the pre-marital sex. Otherwise, we will kill our first boy.</p>	<p>I thank God that my boy-friend now is my husband, do not asked me to abort the baby when we had the pre-marital sex.</p>
BF10	<p>Yes, they have. It is a life. It's created by the image of God.</p>	<p>It is a life. It's created by the image of God.</p>
BF11	<p>Yes, they have right to live.</p>	<p>they have right to live</p>
BF12	<p>I think it depends. If the unborn child is healthy, and the mother has the ability to raise it, then I think it is Okay. Otherwise, There are many different cases.</p>	<p>it depends,</p>
BF13	<p>I have to say that the unborn child has the right to live. It is a life from the beginning of the conception. The science has proved it that is life. No matter how small it is. It's a life and it has the right to live.</p>	<p>the right to live, It is a life from the beginning of the conception.</p>
BF14	<p>I have the different idea. I think the mother having the more superior right than the unborn child. I do not even think that the unborn child</p>	<p>I think the mother has the more superior right than</p>

	is a life. I could accept it as a life only after it has its own heart beating.	the unborn child.
BF15	I am a catholic so I think the unborn child is a life from the beginning of the conception. And that is the foundation of its basic right to life.	unborn child is a life from the beginning of the conception,
BF16	Yes, they have the right to live.	Yes, they have the right to live
BF17	Me, too.	Me, too.
BF18	Yes, I agree with it.	Yes, I agree with it.
BF19	Yes, they have.	Yes, they have.
BF20	Yes, they should have right to live.	right to live
BF21	Yes, yes. (And they all nod their heads.)	Yes, yes.
B22	I think the parents have the right to decide then it has the right to live.	parents have the right to decide
B23	Yes, I agree. I like to think it from the point of law which is the basic line to make the decision even though the unborn child has the right to live.	Yes, I agree.
B24	I think the unborn child has the right to live but if the parents do not want it that is the abortion problem arises.	I think the unborn child has the right to live but if the parents do not want it that is the abortion problem arises.
B25	_husband (1): Yes, they have. I have to admit that my first child is conceived with my wife now before get married and I decide to keep the child and marry her. It's a life. They are our	Yes, they have. I decide to keep the child, It's a life,

	own children. How can we abort it?	
B26	_husband (2): It depends. If the unborn child is healthy and the couples have the good condition, then they could make their own better decision.	It depends.
B27	_husband (3): I agree with it.	I agree with it. (It depends.)
B28	_wife (1): I think the unborn child has the right to live. I agree with my husband's idea as he has mentioned. We keep the baby and get married. We never regret with that. But we have to be careful to become pregnant in marriage life.	I agree with my husband's idea, We keep the baby and get married. We never regret with that,
B29	_wife (2): I think it has the right to live. What my husband wants to say is about the family plan. I think the family plan does not contradict with the human dignity of the unborn child. The couples need to be responsible with their intimacy and marital sex.	right to live, family plan, the family plan does not contradict with the human dignity of the unborn child,
B30	_wife (3): I agree with my husband. The unborn child has the right to live if they are healthy.	I agree with my husband. The unborn child has the right to live if they are healthy.
B31	Yes, they are human life. They have right to live.	Yes, they are human life. They have right to live.
B32	I agree with it.	I agree with it.
B33	Yes. I agree with it.	Yes. I agree with it.
B34	Yes, I think the unborn child is human life and	unborn child is

	they have right to live.	human life,
B35	<p>I think we need to check it from the point of judiciary and the definition of natural person. If the perspective of law and natural person affirm it then I will say that the unborn child has the right to live, if the perspectives of law and natural person reject it, then I will say it does not has the right to live.</p> <p>That's why I ask the definition form the perspectives of judiciary. I try to clarify the question. First, it is an assumption, it is not a definition. Basically, the question could be asked like this: if the unborn child has the human dignity, do you agree with it?</p>	Need to check it from the point of judiciary and the definition of natural person,
B36	<p>I cannot understand your question. I cannot understand why you ask the human dignity of the unborn child since I do not know if the unborn child has the right or human dignity. So I cannot answer your question.</p> <p>Then, I am clearer now. I would say it depends. There could be several definitions. I would like to ask when the unborn child has its own hear beating. I think if the unborn child has its own heart beating, I will say that it has the right to live.</p> <p>Yes, good, then it is clear now. Then I will say yes, it has the right or human dignity to live.</p>	it depends,
B37	It depends. If the unborn child is not so big, I mean in the early stage of pregnancy, the mother have the right to abort it as I know.	It depends.
B38	M., I think the unborn child is still a life though the mother have the right to abort it.	the unborn child is still a life
B39:	No, I mean the unborn child is a human life.	The unborn child

	Even the mother has the right to abort it. We need to think more about it before make an abortion decision.	is a human life. Even the mother has the right to abort it. We need to think more about it.
B40	Yes, they have.	Yes, they have.
B41	Yes, they have.	Yes, they have.
B42	Yes, they have. (And They all nod their heads.)	Yes, they have.

6.2.3 Result of the Second Assumption of Both Taiwan and Singapore Focus Group Interviews

The results of participants of faith-based focus group both in Taiwan and Singapore show that they more strong agree with the supporting of restriction on abortion by the institutional settings as the mandatory pre-abortion counseling and waiting period than those from non-faith focus groups' participants.

Since the institutional settings of the mandatory pre-abortion counseling and waiting period have been enacted in Singapore, this question is asked by two sub-questions: 1) Do you know that the mandatory pre-abortion counseling and 48 hours waiting period are required while women seek to abortion? 2) Do you think that the mandatory pre-abortion counseling and 48 hours waiting period would violate women's right to abortion?

The Question (2): Do you know that the mandatory pre-abortion counseling and 48 hours waiting period are required while women seek to abortion?

The results of participants of faith-based focus group in Singapore show that most of them know the mandatory pre-abortion counseling and waiting period are required while women seek to abortion. Only some participants do not know these institutional settings before seeking abortion. The participants of faith-based group show more strong supporting altitude toward the mandatory pre-abortion counseling and waiting period than those from non-faith focus groups' participants.

Table 5: Results of Focus Group Interview on Question (2) Singapore

Participants	Participants Answer	Keyword
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Code		
AF1	Yes, I know. (With head nodding)	Yes, I know. (With head nodding)
AF2	Yes, I know. (With head nodding)	Yes, I know. (With head nodding)
AF3	Yes, I know.(With head nodding)	Yes, I know. (With head nodding)
AF6	It seems compulsory. They will the show you the video what is life, then they will ask you to decide. You can come back later. Maybe many teen age girls they didn't want to have an abortion. I think it helps. They will also show you how abortion will be done. They will show you the video.	It seems compulsory,
AF4	The Silent Scream.	The Silent Scream.
AF6	Yeh, The Silent Scream. I only know it is compulsory. (A disturbance was raised about what is abortion is about thirty years ago.)	I only know it is compulsory.
AF6	Now there are some people need to adopt the babies.	Some people need to adopt the babies.
AF6:	If you really want it (to have abortion), then you come back.	
AF7	If the women have thought of it thousands of times, then the pre-abortion counseling makes no any sense, just go for it. I mean if she decides to go abortion, then the pre-abortion may make difference for her. (All laugh.)	
AF6	True, True, True. That is the case my question is to know why after the pre-abortion counseling, why would they change their mind? For human or for woman, what is the	the informed decision, make a better decision, Give the person all

	<p>thing which is correct to do, if they don't have the informed decisions? For me, if I have the fact decision, I must be informed all the information and facts. All the information must be available to me. Then I can make a better decision and to know why I have to go ahead. Most of the time, they are told that (the unborn child) is just a tissue, like some pimples. You break it and it has gone. But when baby is moving, baby has the face, could you do that? So after pre-abortion counseling. Yeh, what I think that we could know what we talk about thousands of times, may my thought is wrong. When you say women have the rights. All of us have the rights. How right is right? My question is how right is right. It is usually a lie or a joke. So when we say about a decision, you must tell it both, all the good things and bad things. To give everybody the full information and let you decide. I mean I am talking about the civil rights. Everybody have to do their own decision. Give the person all the available facts and information. Everything is available and true to her. And she makes her own decision.</p>	<p>the available facts and information. Everything is available and true to her. And she makes her own decision.</p>
AF10	<p>No, actually, I don't know that.</p> <p>No, I don't think it is violating. Women really need to re-think it. I mean before doing abortion. She really needs help. I think the counseling could help.</p>	<p>I don't think it is violating, I think the counseling could help.</p>
AF11	<p>Yes, I know it.</p> <p>I don't think it is violating. It could help and provide the chance to re-think about it.</p>	<p>Yes, I know it. I don't think it is violating. It could help and provide the chance to re-think about it.</p>

AF12	<p>No, I don't know it either.</p> <p>I think it could help to think about it, in order to come down to make a right decision.</p>	<p>I think it could help to think about it, in order to come down to make a right decision.</p>
AF13	<p>48 hours may help some women to realize that human life is quite worth to consider. Especially when women hear the heart beating of the unborn child, they may change their mind. And as we know that the angry or sad emotion of the mother may affect the unborn child. It is good to give the opportunity to know more about the human dignity of the unborn child. As to the pre-abortion counseling, there is a short cut for the abortion if it is given by the pro-choice clinics or institutions. I suggest the neutral third-party to carry it out. Then we will have the true pre-abortion counseling. Pro-life and pro-choice counseling will be quite different. It could be more damage. The government sector actually is more birth control sectors. So they promote the condom and say you can use it. For the radical feminists the condom use and the contraception are their reproductive rights. They go around the world and propaganda it, especially in the developing countries. That is the same thing.</p> <p>The Feminist and pro-choice they deny it (PTSD). Actually, they neglect the hard part of womanhood. They put the sex revolution or sex industry as an important part of abortion. For the government, they just go for public vote. The rule by the majority always counts. But its original is inhumanity.</p>	<p>48 hours may help some women to realize that human life is quite worth to consider. I suggest the neutral third-party to carry it out.</p>

<p>AF14</p>	<p>I do know that there is pre-abortion counseling set by the government. It gave us counseling. Because sometimes we are waving, so we say 'poor choice'. Since it is mandatory, we could go through it and choose our side. The lady could choose to keep the baby or abort it. For her, maybe she is a pro-choice, actually, she doesn't matter. There is case, about a woman who wants to abortion. I was not there. I saw the after-things. She quite confused for a long time, but after that (pre-abortion counseling), typically, she felt, usually after the abortion, most ladies felt guilty, because part of them become lost, and after that need post counseling. Most of them, not all the times, they would rather escape the reality to view their guilty, their upsets. Because if they could review it, I mean the wrong part of choice, then there again they might gain the strength. But most of them not choose to review it.</p>	<p>We could go through it and choose our side. The lady could choose to keep the baby or abort it.</p>
<p>AF15</p>	<p>Waiting period and pre-abortion counseling are good but what I recommendation is to increase the mandatory waiting period. The idea of mandatory waiting period in my understanding is a course of abortion. If you have an abortion situation, now it's legal. But cut it as far as human beings begins, abortion is a huge decision, of course, she should think of some consequences before you go ahead. So that's the idea that you could have pre-abortion counseling. After you have given advices and informed some consequences, and I give you some times to think about it before going through this abortion process. What is the objection raised by the other side, they are des-respected because of the pre-abortion counseling. That would be said that woman</p>	<p>Waiting period and pre-abortion counseling are good but what I recommendation is to increase the mandatory waiting period, they might not know there are other choices,</p>

	<p>does not understand, perhaps, not intelligent enough, but she has to go through of this process before even she will or will not go through the abortion. Try to force this mandatory on her is a violation of her or not. My perspective it is quite a need for both women who seek abortion and who is pregnant. For most Singaporean, they will criticize that the government is power, a strong authority, but in fact, most women, especially young girls and young women in Singapore, even married women, and widow women may need go through this because they might not know there are other choices. After giving them all the information, including the adoption, about the consequences of abortion, about the unborn child, and then they go back, to think through the decision fully. And perhaps with the assistances, it may help. They might find more fruitful sides of life. Of course, I know the other side quite cannot accept it.</p>	
AF22	Yes, it helps.	Yes, it helps.
A23	Yes, I know it.	A23-A41 are non-faith participants of Singapore.
A24	Yes, I know it.	
A25	Yes, I know.	
A26	_husband: Yes, I know.	
A27	_wife: Yes, I know.	
A28	_wife: Yes, I know.	
A29	_husband: Yes, I know.	
A30	No, I don't know it. (Surprise face!)	

A31	No, I don't know, either.	
A32	Yes, I know it.	
A33	Yes, I know that.	
A34	No, I don't.	
A35	Yes, I know.	
A36	Yes, I know that.	
A37	Yes, I know that.	
A38	Yes, I know that.	
A39	No, I don't know.	
A40	I don't know it, either.	
A41	Yes, I know.	
Note	This question is not asked of the faith-based teen girls.	

6.2.4 Detail Results of the Second Assumption of Focus Group Interviews in Taiwan

The Question (2): What do you think of the mandatory pre-abortion counseling and 48 hours waiting period which are required while women seeking abortion?

In order to stand neutral, only by a few words of introducing the mandatory pre-abortion counseling and 48 hours waiting period which are required of women while seeking abortion in Singapore, the participants of focus group in Taiwan are asked of “what do you think of the mandatory pre-abortion counseling and 48 hours waiting period which are required while women seeking abortion?”

The results of participants of faith-based and non-faith focus group in Taiwan show that most of them support the mandatory pre-abortion counseling and 48 hours waiting period are required while women seek to abortion. The affirmation from the non-faith teen boys group surprises me (B40, B41, B42). They think the mandatory pre-abortion counseling and 48 hours waiting period could help mother and the

unborn child and people could face abortion in a more balance way. “Yes, I agree. I think it is a good way to help women and the unborn child both.” (B41) “Yes, I think it is a good way to help us to think more about abortion problem in a more balanced way.” (B42).

Some male participants even ask the husband also need to join the pre-abortion counseling by saying that “I even think that the husband also needs to participant pre-abortion counseling.” (Table 6: BF8, BF14) This participant wants to emphasize sharing the responsibility. He says: “Men are not clear about the birth because they cannot become pregnant. And in the similar way men do not know how to help while women want to abort the babies. They need to share the same responsibility.” (Table 6: BF8) This husband indicates that most the unwanted pregnancy duo to “Men are the trouble makers.” (Table 6: BF8) And most of them think pre-abortion counseling and waiting period could help women to “re-think about their abortion decision” before they do it (Table of BF10, BF15, BF20) and “an opportunity to consider the pregnancy” (Table 6: BF14).

The non-faith participants of the focus group expect that the pre-abortion counseling could provide some resources. “I think it is good if some resources could be also provided during the counseling.” (Table 6: B28) Practically, it indicates the need of economic problem. “Yes, I agree with it. Most women need to solve the concrete problem, especially the economic problem (Table 6: BF18, BF19, B28, B29, B30, B35).” Furthermore, they affirm that pre-abortion counseling and waiting period could help teens. “I think it is good. It could help the teens to be re-educated during the counseling. They usually have repeating premarital sex and pregnancy. It could help to re-think more before having sex and pregnancy decision.” (Table 6: B31)

Only few faith-based and non-faith group participants cast doubts on these institutional settings (BF4, B24, B35). The main reasons are worrying of the financial factors. This practical economic worry is also professed by the faith-based focus group participants by saying “If the governments have the budget to provide free pre-abortion counseling I will support it. I mean nobody will pay for pre-abortion counseling before seeking abortion...” (Table 6: BF4). The faith-based teen girls worry the mandatory pre-abortion counseling and waiting period may push the abortion go underground by saying “Maybe, I don't know. If it is mandatory, I think some teens or women may go underway and secretly do it. (Table 6: BF16, BF17)”

One non-faith male participants oppose it since there will cause a lot of paper work again from the government and it is tedious, useless. (Table 6: B36). One non-faith participants think counseling is enough and there is no need of setting

waiting period. *“Yes, I think it is good. But I don't think waiting period is helpful. Counseling is enough, no need to wait some other days.”* (Table 6: B35)

Table 6: Results of Group interview on Question (2) Taiwan

Participants Code	Participants Answer	Keyword
BF1:	Yes, I think these institutional settings are good.	I think these institutional settings are good.
BF2	I think it is quite good. It is a good chance to let the couples to re-think about it. I do not know how it will be carried out. According the idea, the teens could have the chance to be re-educated.	I think it is quite good. It is a good chance to let the couples to re-think about it. the teens could have the chance to be re-educated.
BF3	Yes, I agree with it.	Yes, I agree with it.
BF4	_husband (1): If the governments have the budget to provide free pre-abortion counseling I will support it. I mean nobody will pay for pre-abortion counseling before seeking abortion since abortion itself will be charged already. Nobody wants to pay more. Human nature is quite weak even though I am a doctor. I learn the responsibility from being a father and husband. Otherwise I only know to seek the pleasure of myself. I could earn a lot of money and spent it quickly if I do not fall in love with my wife. She is a wise and beautiful woman. That is marriage. But I am not perfect I have said that I have asked my wife to abort our unwanted babies before I receive the baptism. I support that the Catholic faith is	

	truly good value for human beings.	
BF5	_wife (1): I agree if we could know more about the value of the unborn child I will not abort our children. I thank God I become the Catholic and I could do the right thing. There are clear teachings from the Catholic.	
BF6	_husband (2): I support these institutional settings if we could succeed to promote it in Taiwan.	I support these institutional settings
BF7	_wife (2): I think Taiwan government has the big problem. Why we do not have the similar requirement? I don't even think that our government knows what the real problem is. I cannot know why the feminists are dominating by the mass media and the government is kidnaped by both of them. I think it will be great if we have the pre-abortion counseling and waiting period. But the problem is who will listen to it except the catholic?	I think it will be great if we have the pre-abortion counseling and waiting period.
BF8	_husband (3): I even think that the husband also needs to participant pre-abortion counseling. Men are not clear about the birth because they cannot become pregnant. And in the similar way men do not know how to help while women want to abort the babies. They need to share the same responsibility. I want to emphasize the word "to help" that is the urgent thing for men to learn. I think that most men learn how to be a father with the help of their wives. Abortion should not become the burden only to women for most of the time men are the trouble makers. I indicate the trouble of the unwanted pregnancy.	
BF9	_wife (3): I think it is necessary though I support that women have the right to abortion,	I think it is necessary,

	<p>especially when the unborn child is abnormal. Counselling could help women to know more about the related resources of giving birth or abortion. I regard it as one thing with two sides. Giving birth or abortion has the risk. I am a nurse too. I think most women do not have the right cognition on both giving birth and abortion. I think it is important to let more women know this truth.</p>	<p>Counselling could help women to know more about the related resources of giving birth or abortion.</p>
BF10	<p>I think it is a good way to help women who have some difficulties. And it could also help women to re-think about their abortion decision before they do it.</p>	<p>it could also help women to re-think about their abortion decision before they do it</p>
BF11	<p>Yes, I think it is good and necessary. Abortion has been abused in Taiwan. I love the institutional settings of Singapore.</p>	<p>Yes, I think it is good and necessary.</p>
B12	<p>Yes, I think it could help and it is good. But how carry it out?</p>	<p>I think it could help and it is good</p>
BF13	<p>I think it is necessary. It is a good way to protect the unborn child. It could help women to think more about the human dignity of the unborn child. Even it is a good chance to provide the recourses both for the mother and unborn child.</p>	<p>I think it is necessary.</p>
BF14	<p>I think it is necessary. Women could have more opportunity to consider their pregnancy and I also think the men or the husband also need to have such a process. I mean to receive the pre-abortion counselling.</p>	<p>I think it is necessary. the husband also need to have such a process.</p>
BF15	<p>I think it is necessary. It is a good chance both for the mother and unborn child to re-think about it before abortion.</p>	<p>I think it is necessary.</p>

BF16	Maybe. I don't know. If it is mandatory, I think some teens or women may go underway and secretly do it.	
BF17	Yes, I think it could be good. But I don't think people really want it. If it becomes a kind of law, right? I think people will try some other ways to face it.	Yes, I think it could be good.
BF18	Yes, I think it could be helpful if the government has some financial aids.	
BF16&BF17	Yes, Then there will be different. It could be helpful.	
BF19	I think it is a good institution. It could help women to re-think about their decision if originally they want to abort it.	
BF20	Yes, I agree. I think it is a good way to help women to re-think about the problem.	Yes, I agree. I think it is a good way to help women to re-think about the problem.
BF21	I think it is a good way to help us women to think more and make a right decision. We need time to make a right decision. Right decision needs more time and we also need other's advice.	I think it is a good way to help, Right decision needs more time and we also need other's advice.
B22	I support it.	I support it.
B23	I also support it.	I also support it.
B24	No, my answer will remain as the same as what I have talked above while you ask the abortion problem.	
B25	I think it is good. I could help to think more	I think it is good. I

	before making the abortion decision. Why we don't have it?	could help to think more before making the abortion decision.
B26	I think it could be helpful. But women have the final autonomy to make their own decision. It just provides a chance to rethink about it because abortion is still a big decision.	I think it could be helpful. But women have the final autonomy to make their own decision.
B27	I agree with it. It would be helpful.	I agree with it. It would be helpful.
B28	I think it is good if some resources could be also provided during the counseling.	I think it is good
B29	Yes, I agree with it. Most women need to solve the concrete problem, especially the economic problem.	Yes, I agree with it.
B30	I agree with it too.	I agree with it too.
B31	I think it is good. It could help the teens to be re-educated during the counseling. They usually have repeating premarital sex and pregnancy. It could help to re-think more before having sex and pregnancy decision.	I think it is good. It could help the teens to be re-educated during the counseling..
B32	Yes, I think it is helpful. Is there any financial aid during the counseling? I mean while some women or teens have the economic problems. If it is possible that will be better.	Yes, I think it is helpful.
B33	I agree with it. It is good and helpful.	I agree with it.
B34	I think it is good. It could give the chance to re-think about if it is really okay to do abortion or not. Some teens are too young to make a right decision.	I think it is good.

B35	Yes, I think it is good. But I don't think waiting period is helpful. Counseling is enough, no need to wait some other days. Especially when some women only need some advices, most women have their own decisions before seeking others opinions. Counseling is good for those who are waving. They really need some helps. If the government could provide financial aids, then that will be much better for those kinds of institutional settings.	Yes, I think it is good.
B36	I don't know but basically, it sounds good. It could be helpful for those who are thinking to have abortions. But in practice dimension, mandatory is good, but if there are some leaking points, like if it is just as a paper work. Then people may formally follow it, how can it really help? Many things from the government move like that. I still think theoretically it is good, but in practice, it's useless.	
B37	I think it could help the teens and women to re-think about their decisions before doing abortions.	I think it could help the teens and women to re-think about their decisions
B38	Yes, I think it is necessary to re-think about it. Abortion is not a small problem. It is a big problem. People need to think about it more in details.	Yes, I think it is necessary to re-think about it. Abortion is not a small problem.
B39	Yes, I think it could help. Is there any possible to provide financial aids? If it is possible, I think it will be really helpful. (They look each other and nod the heads.)	Yes, I think it could help.
B40	I think it is good. It could help women to	I think it is good.

	re-think about the rights of the unborn child before they want to abort.	to re-think about the rights of the unborn child,
B41	Yes, I agree. I think it is a good way to help women and the unborn child both.	Yes, I agree. I think it is a good way to help women and the unborn child both.
B42	Yes, I think it is a good way to help us to think more about abortion problem in a more balanced way.	Yes, I think it is a good way to help us to think more about abortion problem in a more balanced way.

6.2.5 Detail Results of the Third Assumption of Focus Group Interviews

The Question (3): Do you think that the mandatory pre-abortion counseling and 48 hours waiting period would violate women’s right to abortion?

Most of the participants of faith-based and non-faith both in Taiwan and Singapore do not think that the mandatory pre-abortion counseling and waiting period would violate women’s right to abortion. And they indicate that abortion is a big decision and it relates to a life (Table 7: A30-A41) *“People need advice when they need to do an important decision.”* (Table 7: AF2) One Singaporean doctor provides a definition and clarifies the nature of the mandatory pre-abortion counseling and waiting period as *“Counseling is provided by doctors and doctors are trained to help. Help itself should not be designed as a violating system. If it is violating then try to fix it. It's basically designed on mutual trust and common good.”* (Table 7: of AF3)

One of the faith-based participants in Singapore emphasizes the concept of “informed decision”. And a good decision needs to see things both good side and bad side by saying *“I must be informed all the information and facts. All the information must be available to me. Then I can make a better decision and to know why I have to go ahead...”*(Table 7: AF6) But sometimes the unborn child is regarded as a tissue. The participant is asking people need to know to make a right decision *“How right is right?”* (Table 7: AF6) And if the women have think of abortion thousands of time,

why not to include the pre-abortion counseling and waiting period? *“If the women have thought of it thousands of times, then the pre-abortion counseling makes no any sense, just go for it.”* (Table 7: AF7)

Most participants consider that the mandatory pre-abortion counseling and waiting period could be helpful to make a right decision. *“No, I don't think it is violating. Women really need to re-think it. I mean before doing abortion. She really needs help. I think the counseling could help. (Table 7: AF10)”*; *“I don't think it is violating. It could help and provide the chance to re-think about it.”*(Table 7: AF11) *“Yes, I think it could help to think about it, in order to come down to make a right decision.”* (Table 7: AF12) One participant think that pre-abortion counseling is both needy for both women who seek abortion and who is pregnant. *“My perspective it is quite a need for both women who seek abortion and who is pregnant. For most Singaporean, they will criticize that the government is power, a strong authority, but in fact, most women, especially young girls and young women in Singapore, even married women, and widow women may need go through this because they might not know there are other choices.”* He means adoption is rarely known by public. (Table 7: AF15)

All three participants of non-faith doctors of Singapore support the mandatory pre-abortion counseling and waiting period. They say *“No. Abortion is a kind of destruction. It needs to rethink about it. I support the law and it helps. (Table 7: A23)”* *“I don't think it's violating the women's reproductive right. It needs to reconsider and we have to understand why women demand abortion. As I know some choose it because of the financial problems and some for social problems. The pre-abortion counseling may provide the chance to face the problems and provide the possible resources. And the government could provide some financial aids and helps.”* (Table 7: A24) *“No, it helps to face the related problems. I don't think it's a kind of violating. It's part of law education. (Table 7: A25)”*

All couples of non-faith participants of Singapore do not think that mandatory pre-abortion counseling and 48 waiting period are violating women's right even though they have to make a painful decision. *“No, I don't think it's a kind of violating women's right. Women have the right to make a better choice. The mandatory pre-abortion counseling and 48 waiting period could help women to make a better choice. “(Table 7: A28) It is “a good opportunity to re-consider the decision before performing the abortion. It also helps the family to make a better preparation for that. I mean for abortion. It's not an easy decision.”* (Table 7: A29)

Most of the participants of both faith-based and non-faith both in Taiwan do not think that the mandatory pre-abortion counseling and waiting period would violate

women's right to abortion. *Both the faith-based and non-faith doctors* indicates that mandatory pre-abortion counseling and waiting period would *Not Violate* women's autonomy and these institutional settings could help since abortion is an important decision. *"No, I don't think it violates women's autonomy. Women could make their own decision while they receive the counseling (Table 7: BF1)". "People need time to consider some very important decisions. (Table 7: BF2)"* They have a little worry about it may function as formal process. *"No, I don't think it violates women's autonomy, either. But again I concern if the government are really ready to do it or it's just functioned as formal process. Then it's useless (Table 7: B24)"*.

Most of the faith-based and non-faith single female and male in Taiwan think that the mandatory pre-abortion counseling and waiting period would not violate women's right to abortion. Some indicate that those claim the mandatory pre-abortion counseling and waiting period are like the noisy children easily get the sugar. *"I think the government tends to give sugar to those who are noisy. It is not good. Those noises are not the truth (Table 7: B13)"*. And suggest men and husbands also need to receive pre-abortion counselling. *"I think the radical feminists are just some few minorities. I don't think they could really represent the most majorities of the women. I prefer to support the pre-abortion counselling. And I suggest that men also need it (Table 7: B14, B25)"* Some notice that the concept of liberty has been over-emphasized in Taiwan. We need some rules to weight the problem and help the families before demanding abortion. *"I do worry about that our society over-emphasized the liberty. I think that the liberty still needs some rules. I even want the husband could also have a pre-abortion counseling." (Table 7: B25)* *"I think not many women are radical and it could help the families to think more before demanding an abortion. (Table 7: B28)"* *"The mandatory pre-abortion counseling and waiting period are helpful to weight the problem in a more proper way. (Table 7: B26)"*

The faith-based teen boys and non-faith teen boys in Taiwan tend to think the mandatory pre-abortion counseling and waiting period would not violate women's right to abortion. *"... like when we teens we need our parents' advice. Parent's advice usually helps us, and they are always standing by us. They basically would like to give us the best...(Table 7: B20)"* And *"We cannot make a decision within a short time. Actually, we all need to think about this question seriously (Table 7: B21)"* They think that we cannot only one side *"Women need to re-think about it. And the government needs to help the unborn child. I think it is a good. (Table 7: B41)"* The mandatory pre-abortion counseling and waiting period could provide a balanced way of thinking. *"Yes, I think we need a more balanced way of thinking of this problem. Pre-abortion*

counseling and waiting period could provide us to re-think of it more balanced. (Table 7: B40)

The doctor in Taiwan may not acknowledge how Singapore government practice the he mandatory pre-abortion counseling and waiting period but affirm it. The doctors in Taiwan do not regard these institutional settings as violating women’s right to abortion. “No, I don't think so, though I do not know how they function. Is it by doctors or by religious professionals, right? I think counseling could help women, couples, and teens to re-think about it. (Table7: BF2) Furthermore, from the perspectives of participants from faith-based focus group of Singapore, “*the pre-abortion counseling...is a short cut for the abortion if it is given by the pro-choice clinics or institutions.*” The pro-lifers would even suggest “*the neutral third-party to carry it out. Then we will have the true pre-abortion counseling. Pro-life and pro-choice counseling will be quite different.*” though “*48 hours may help some women to realize that human life is quite worth to consider. Especially when women hear the heart beating of the unborn child, they may change their mind.*” (Table 7: AF13)

Table 7: Results of Focus Group Interview of Singapore and Taiwan-Question (3)

Participants Code	Participants Answer	Keyword
AF1	No, I don't think so. I think counseling could help women to re-think about it. And if the government could provide some financial aids would be more perfect.	No, I don't think so.
AF2	I think the pre-abortion counseling could help women to face the pregnancy crisis and to ponder after the counseling in order to make a good decision. I don't think it's a kind of violating to women's right. People need advice when they need to do an important decision, right?	I don't think it's a kind of violating to women's right. People need advice when they need to do an important decision
AF3	I agree with it. Counseling is provided by doctors and doctors are trained to help. Help itself should not be designed as a violating system. If it is a violating then try to fix it. It's	(As the Content.)

	<p>basically designed on mutual trust and common good.</p>	
AF6	<p>If you really want it (to have abortion), then you come back.</p> <p>True, True, True. That is the case my question is to know why after the pre-abortion counseling, why would they change their mind? For human or for woman, what is the thing which is correct to do, if they don't have the informed decisions? For me, if I have the fact decision, I must be informed all the information and facts. All the information must be available to me. Then I can make a better decision and to know why I have to go ahead. Most of the time, they are told that (the unborn child) is just a tissue, like some pimples. You break it and it has gone. But when baby is moving, baby has the face, could you do that? So after pre-abortion counseling, yeh, what I think that we could know what we talk about thousands of times, may my thought is wrong. When you say women have the rights. All of us have the rights. How right is right? My question is how right is right. It is usually a lie or a joke. So when we say about a decision, you must tell it both, all the good things and bad things. To give everybody the full information and let you decide. I mean I am talking about the civil rights. Everybody have to do their own decision. Give the person all the available facts and information. Everything is available and true to her. And she makes her own decision.</p>	<p>Informed decision, So when we say about a decision, you must tell it both, all the good things and bad things.</p>
AF7	<p>If the women have thought of it thousands of times, then the pre-abortion counseling makes no any sense, just go for it. I mean if she</p>	

	decides to go abortion, then the pre-abortion may make difference for her. (All laugh.)	
AF10	No, I don't think it is violating. Women really need to re-think it. I mean before doing abortion. She really needs help. I think the counseling could help.	
AF11	I don't think it is violating. It could help and provide the chance to re-think about it. .	
AF12	Yes, I think it could help to think about it, in order to come down to make a right decision.	
AF13	48 hours may help some women to realize that human life is quite worth to consider. Especially when women hear the heart beating of the unborn child, they may change their mind. And as we know that the angry or sad emotion of the mother may affect the unborn child. It is good to give the opportunity to know more about the human dignity of the unborn child. As to the pre-abortion counseling, there is a short cut for the abortion if it is given by the pro-choice clinics or institutions. I suggest the neutral third-party to carry it out. Then we will have the true pre-abortion counseling. Pro-life and pro-choice counseling will be quite different. It could be more damage. The government sector actually is more birth control sectors. So they promote the condom and say you can use it. For the radical feminists the condom use and the contraception are their reproductive rights. They go around the world and propaganda it, especially in the developing countries. That is the same thing.	48 hours may help some women to realize that human life is quite worth to consider. Especially when women hear the heart beating of the unborn child, they may change their mind, I suggest the neutral third-party to carry it out.
AF14	I do know that there is pre-abortion counseling set by the government. It gave us counseling.	I saw the after-things, most

	<p>Because sometimes we are waving, so we say 'poor choice'. Since it is mandatory, we could go through it and choose our side. The lady could choose to keep the baby or abort it. For her, maybe she is a pro-choice, actually, she doesn't matter. There is case, about a woman who wants to abortion. I was not there. I saw the after-things. She quite confused for a long time, but after that (pre-abortion counseling), typically, she felt, usually after the abortion, most ladies fell guilty, because part of them become lost, and after that need post counseling. Most of them, not all the times, they would rather escape the reality to view their guilty, their upsets. Because if they could review it, I mean the wrong part of choice, then there again they might gain the strength. But most of them not choose to review it.</p>	<p>ladies fell guilty, because part of them become lost, and after that need post counseling,</p>
<p>AF15</p>	<p>Waiting period and pre-abortion counseling are good but what I recommendation is to increase the mandatory waiting period. The idea of mandatory waiting period in my understanding is a course of abortion. If you have an abortion situation, now it's legal. But cut it as far as human beings begins, abortion is a huge decision, of course, she should think of some consequences before you go ahead. So that's the idea that you could have pre-abortion counseling. After you have given advices and informed some consequences, and I give you some times to think about it before going through this abortion process. What is the objection raised by the other side, they are des-respected because of the pre-abortion counseling. That would be said that woman does not understand, perhaps, not intelligent enough, but she has to go through of this</p>	<p>My perspective it is quite a need for both women who seek abortion and who is pregnant. For most Singaporean, they will criticize that the government is power, a strong authority, but in fact, most women, especially young girls and young women in Singapore, even married women, and widow women may need go</p>

	<p>process before even she will or will not go through the abortion. Try to force this mandatory on her is a violation of her or not. My perspective it is quite a need for both women who seek abortion and who is pregnant. For most Singaporean, they will criticize that the government is power, a strong authority, but in fact, most women, especially young girls and young women in Singapore, even married women, and widow women may need go through this because they might not know there are other choices. After giving them all the information, including the adoption, about the consequences of abortion, about the unborn child, and then they go back, to think through the decision fully. And perhaps with the assistances, it may help. They might find more fruitful sides of life. Of course, I know the other side quite cannot accept it.</p>	<p>through this because they might not know there are other choices, adoption,</p>
AF22	<p>Yes, it helps. No. How about man? (All laugh.)</p>	<p>Yes, it helps. No. How about man?</p>
A23	<p>No. Abortion is a kind of destruction. It needs to rethink about it. I support the law and it helps.</p>	<p>(As the Content.)</p>
A24	<p>I don't think it's violating the women's reproductive right. It needs to reconsider and we have to understand why women demand abortion. As I know some choose it because of the financial problems and some for social problems. The pre-abortion counseling may provide the chance to face the problems and provide the possible resources. And the government could provide some financial aids</p>	<p>(As the Content.)</p>

	and helps.	
A25	No, it helps to face the related problems. I don't think it's a kind of violating. It's part of law education.	It's part of law education.
A26	_husband: No, I don't think so.	No, I don't think so.
A27	_wife: No.	No.
A28	_wife: No, I don't think it's a kind of violating women's right. Women have the right to make a better choice. The mandatory pre-abortion counseling and 48 waiting period could help women to make a better choice.	No, I don't think it's a kind of violating women's right.
A29	_husband: No, I think it is a good opportunity to re-consider the decision before performing the abortion. It also helps the family to make a better preparation for that. I mean for abortion. It's not an easy decision.	a good opportunity to re-consider
BF1	No, I don't think it violates women's autonomy. Women could make their own decision while they receive the counseling.	No, I don't think it violates women's autonomy.
BF2	No, I don't think so, though I do not know how they function. Is it by doctors or by religious professionals, right? I think counseling could help women, couples, and teens to re-think about it.	help women, couples, and teens to re-think about it.
BF3	No, People need time to consider some very important decisions.	People need time to consider some very important decisions.
BF10	No, I don't think it is violating women right. Then women still could make their own decision after the counseling. It is a way to	It is a way to help

	help women to re-think about it what they are doing abortion.	
BF11	Yes, I think it is helpful. Too many women are too harshly to make an abortion decision.	Yes, I think it is helpful.
BF12	Yes, I agree with it. It could help. And to make an important decision needs more times and advices. It's not a violating.	It could help
BF13	I think the government tends to give sugar to those who are noisy. It is not good. Those noises are not the truth.	
BF14	I think the radical feminists are just some few minorities. I don't think they could really represent the most majorities of the women. I prefer to support the pre-abortion counselling. And I suggest that men also need it.	I prefer to support the pre-abortion counselling. And I suggest that men also need it.
BF15	I think if the radical feminists usually prefer to abort the babies the institutional settings of pre-abortion counselling make no any trouble for them but it is important to those who needs this chance to know more about the recourses.	(As the Content.)
BF19	No. I don't think so. I think we need other's advice.	we need other's advice.
BF20	It's not easy. Both women and man need time and organization to help, like when we teens we need our parents' advice. Parent's advice usually helps us, and they are always standing by us. They basically would like to give us the best. The mandatory pre-abortion counseling and 48 hours of waiting period would help us to make a better decision.	we teens we need our parents' advice. Parent's advice usually helps us,
BF21	It needs to think more. We cannot make a decision within a short time. Actually, we all need to think about this question seriously. I	We cannot make a decision within a short time.

	mean all the society.	
B22	No, I don't think so. It's a chance to reconsider the problem again. Women still have their own autonomy to make the final decision after the counseling as well as the pondering period.	Women still have their own autonomy,
B23	I don't think it violates women's autonomy, either. Women could make their own decision while they receive the counseling. This process is designed for help. I think it is helpful for those who tend easily make lousy decisions.	Women could make their own decision while they receive the counseling,
B24	No, I don't think it violates women's autonomy, either. But again I concern if the government are really ready to do it or it's just functioned as formal process. Then it's useless.	I don't think it violates women's autonomy, either.
B25	I don't think so. Women are still the main body to make their own decisions. I do worry about that our society over-emphasized the liberty. I think that the liberty still needs some rules. I even want the husband could also have a pre-abortion counseling. Men also need to learn more about the reality of the abortion and the life of the babies in the womb in order to support the women.	I even want the husband could also have a pre-abortion counseling.
B26	I think we need to see both side of women and the unborn child. The mandatory pre-abortion counseling and waiting period are helpful to weight the problem in a more proper way.	are helpful to weight the problem in a more proper way,
B27	I agree to see both sides of women and unborn child. It needs to adopt such a method to help abortion problem.	(As the Content.)
B28	I think not many women are radical and it could help the families to think more before demanding an abortion.	help the families to think more before demanding an

		abortion.
B29	Yes, I agree. Most women are doing abortion under pressure. Pre-abortion counseling could be helpful to make a wiser decision.	Pre-abortion counseling could be helpful to make a wiser decision.
B30	I agree with it too.	I agree with it too.
B31	Teens and women need to re-think about it before abortion.	(As the Content.)
B32	I agree with it. It is necessary.	It is necessary.
B33	Yes, I agree with it.	Yes, I agree with it.
B34	I think it is good. It could give the chance to re-think about if it is really okay to do abortion or not. Some teens are too young to make a right decision.	Some teens are too young to make a right decision.
B35	Yes, I think it is good. But I don't think waiting period is helpful. Counseling is enough, no need to wait some other days. Especially when some women only need some advices, most women have their own decisions before seeking others opinions. Counseling is good for those who are waving. They really need some helps. If the government could provide financial aids, then that will be much better for those kinds of institutional settings.	Counseling is enough, no need to wait some other days.
B36	I don't know but basically, it sounds good. It could be helpful for those who are thinking to have abortions. But in practice dimension, mandatory is good, but if there are some leaking points, like if it is just as a paper work. Then people may formally follow it, how can it really help? Many things from the government move like that. I still think theoretically it is	(As the Content.)

	good, but in practice, it's useless.	
B40	Yes, I think we need a more balanced way of thinking of this problem. Pre-abortion counseling and waiting period could provide us to re-think of it more balanced.	a more balanced way of thinking of this problem.
B41	Yes, I agree. Many things may have the conflicts. We can not only see one side. Women need to re-think about it. And the government needs to help the unborn child. I think it is a good.	Women need to re-think about it. And the government needs to help the unborn child.
B42	Yes, sometimes it's a violating but sometimes we need to have more chances to re-think about it. I mean to know more about the abortion problem.	
Note	The non-faith teen girls in Taiwan forgot of asked of this question (violating women's right of abortion).	

6.3 The Related Results of Focus Group Interview

6.3.1 Detail Results of the question: if the unborn child is healthy and excluded any genetic disease

The full question is “If the unborn child is healthy, that pregnancy will not hurt the mother, and the unborn child do not have any genetic disease, the parents and the families do not have any genetic disease, and it is not conceived by rape, how do you think that this unborn child have the right to live?”

Most of the time, the faith-based couples, single adult females and males, and teens have revealed their opinions when the participants are asked of the question of ‘do you think that the unborn child has the right to live and to enjoy the human dignity of life?’ Therefore, there is no need to clarify it in details. But if it is not mentioned within the flow of the interview, then the researcher will ask of it.

6.3.2 Detail Results of Doctors both in Taiwan and Singapore

This question is specifically asked of both the faith-based and non-faith doctors from Singapore and Taiwan. The results show that both faith-base and non-faith

doctors (AF1, AF2, AF3, A23, A24, A25) in Singapore without doubt to reply ‘Yes, I think it has the right’, or ‘Sure, it has’. The faith-based doctors in Taiwan (BF1, BF2, BF3) also show the strong affirmation on the human dignity of the unborn child under those conditions. But the non-faith doctors in Taiwan (B22, B23, B24) hesitate to support it. That means the unborn child have the right to live when it is healthy, that pregnancy will not hurt the mother, and the unborn child do not have any genetic disease, the parents and the families do not have any genetic disease, and it is not conceived by rape, they support that the unborn child have the right to live.

The focus groups of doctors are the hardest parts of this study to organize and to interview. Basically, the doctors are busy and their social statutes are brilliant high. Their times schedule are deadly tight. But the most value things are the faith-based doctors in Singapore are consisted of a father, a daughter and a fiancé of the daughter doctors. They all graduated from the Medical School of National University of Singapore. They are a family and they talked in true family way. The ways of non-faith doctor are talked in a very short style.

Table 8: Results of Focus Group interview of Singapore and Taiwan-Question (4)

Participants Code	Participants Answer	Keyword
AF1	Yes. I think it has the right.	Yes. I think it has the right.
AF2	Yes, I agree with it.	Yes, I agree with it.
AF3	Yes. (With head nodding,)	Yes. (With head nodding,)
A23	Sure, it has.	Sure, it has.
A24	Yes, it has.	Yes, it has.
A25	Sure.	Sure.
BF1	Yes. I think it has the right, actually, both healthy and unhealthy. They are all children of God and they cannot only speak by themselves.	Yes. I think it has the right, actually,both healthy and

		unhealthy,
BF2	Yes, I think the unborn child has the right to live.	
BF3	Yes. I agree with it.	
B22	I think the parents have the right to decide then it has the right to live.	They tend to support that parents have the right to decide.
B23	Yes, I agree. I like to think it from the point of law which is the basic line to make the decision even though the unborn child has the right to live.	
B24	I think the unborn child has the right to live but if the parents do not want it that is the abortion problem arises.	

6.3.3 Detail Results of Couples both in Taiwan and Singapore

This question of is *“If the unborn child is healthy, that pregnancy will not hurt the mother, and the unborn child do not have any genetic disease, the parents and the families do not have any genetic disease, and it is not conceived by rape, how do you think that this unborn child have the right to live?”* asked in a way of challenge to the faith-based couples. The question is illustrated as *“Do you have any friend who laughs at you? I mean, some non-Catholic or non-faith-based friends. Have you ever been laugh at because of your life idea? I mean they think the baby is not fully formed? While they have the problems, they just abort the baby. How the abortion happens?”*

According to the Catholic teachings, abortion is permitted when this pregnancy would harm the mother’s life. The researcher attempts to challenge the faith of the participants and to lead the discussion on related to abortion problems. One faith-based husband in Singapore precede an interesting reflection: *“when people have cancer, doctor says that there is a surgery then you have ten year to live, then you accept operation. Many will have no hesitation and say I will go for it.”* In the similar way, he says *“if the child (the unborn) has a voice to say--- Let me live. Let me live. Try. If anything, I can have a surgery. They tend to agree. So we have no right to abort the child (the unborn).”* (AF6)

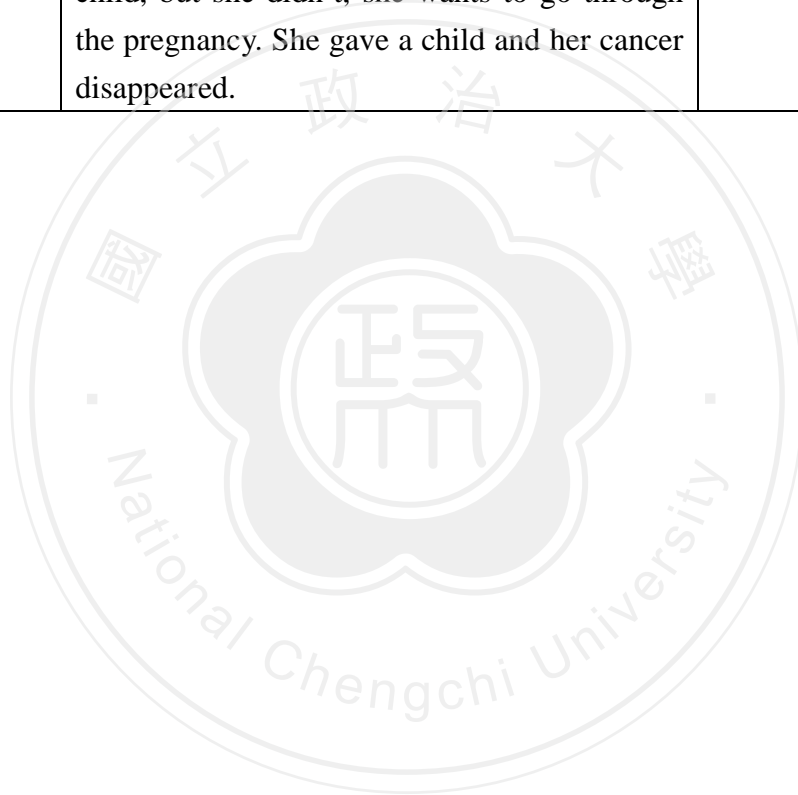
The abortion problems are at the flow of the semi-constructed interview. Most of

the faith-based and non-faith participants are aware of why abortion occurred. They have the concept of the difference between medical abortion and surgical abortion. They also aware of the social factors are one of the most dominating factors. Therefore, both the faith-based teen girls in Taiwan and Singapore concern the financial problem and the possibility of financial aids while they are asked of the question of the pre-abortion counseling and waiting period.

Table9: Results of Faith-based Focus Group interview of Singapore-Question (4)

Participants Code	Participants Answer	Keyword
AF5	We have friends when doctor said it has problem, doctor said that it is not fully formed. They aborted it.	
AF4	I also have some good friends. They ask it is a suffering when the child is not good, why do you keep it? Why are you suffering? It is a very difficult question to answer. But for me, if God ask me to suffering, it will give fruits. I accept it. I don't know, but I trust God. The outcome maybe the families strongly get together. I know it is difficult but anyone support. I am willing to accept suffering.	I am willing to accept suffering.
AF6	A good analogy like this. If we ask if you meet an accident, you lost your two legs. We ask that will you want to end of your life!?! Baby cannot speak. People will learn out to walk. I can learn.	Baby cannot speak. People will learn out to walk. I can learn.
AF6	Even when people have cancer, doctor says that there is a surgery then you have ten year to live, then you accept operation. Many will have no hesitation and say I will go for it. So if there is anything wrong, if the child (the unborn) has a voice to say 'Let me live. Let me live.'" Try. If anything, I can have a surgery. They tend to agree. So we have no right to	If the child (the unborn) has a voice to say 'Let me live. Let me live.'"

	<p>abort the child (the unborn). But some will choose to end of his life. Some people have to follow the doctor, when it has problem. But at least, you can decide.</p>	
AF6	<p>That is why I choose to learn and to live.</p>	<p>I choose to learn and to live.</p>
AF4	<p>We insist to choose life. I have a friend, the mother has the breast cancer, she was pregnant and doctor said that you have to abort the child, but she didn't, she wants to go through the pregnancy. She gave a child and her cancer disappeared.</p>	<p>We insist to choose life.</p>



Chapter Seven : Conclusion

7.1 The Elites Speaking

The government and the project of government represent the concept of elites. Family planning project is the world-wide project within the flow of modernization, especially for the developing countries. Almost the world listens to the voice of the elites and experts. And the scholars stand between the elite and lay since sometimes they have these two roles and play these two roles both at private and public domains at the same time. The religious contains more the lay knowledge which is often neglected by the circle of elites as well as the government. They also will be easily labeled as lay or even as mob. Their voice is usually silent as the unborn child lying deep inside the mother's womb. Who could listen to it? Who would speak for it?

The obstetricians and gynecologists have been normally educated the concept and operation of abortion in medical school (Pritchard & Macdonald, 1976: 483-515). And family planning is also the main content in the textbook of Obstetrics (Pritchard & Macdonald, 1976: 840-865). This is a process of professional medical elites and experts training. We live in a democratic modern world and most of the time we do not need to ask the question about the human dignity of the unborn child and just to follow the professional advice. We do not even know the core issue of the debate. Actually the debate within political philosophy concerns that whether the political outcome is opt to be right or to be fair. Democracy theory has traditionally focused on the latter. Though epistemic democrats aimed the democracy to '*track the truth*', they see democracy as being more desirable than alternative of decision making. One more important democratic 'decision rule', the aggregating votes, is also more desirable than the decision of alternative policy making. The procedural democracy is design to reveal political justice. Furthermore, some virtues may be expected to guide within the function of democratic model. However, the central point of democratic procedures is about to see the goodness or the rightness of the outcome, the body of the independent truth of the matter is easily diluted (Goodin, 2005).

When Max Weber happened to find the deep connection of the spiritual factor of Protestant ethics between the capitalistic activities, he not only opened up a new perspective on the explanation of the development of capitalism, but also encouraged the research on sociology of religion. His research experience of Hinduism and Buddhism raised the interest of others scholars to explore the similar studies on Confucianism to investigate if the Confucianism as the key to the success of Taiwan, South Korea, and Japan. Those scholars attempt to theorize about the development and to explain why some countries developed faster than others. The Protestant ethics described in the book of *The Protestant Ethics and Spirit of Capitalism* assisted the establishment of Capitalism in Europe and North America. And another book *The Religion of India: The sociology of Hinduism and Buddhism* attempted to investigate if the spiritual factor existed in Hinduism and Buddhism to influence the development in India and South Asian countries. In Weber's examination, there are four key aspects of religious values of Protestantism: active, rational, this-worldly, and ascetic.

Those four key aspects of religion are the highly virtue characters which would particularly assist that the believers to form a kind of 'self-making' character which would encourage them to take the religious message seriously and to enable them to develop a major ethical personality (Gellner, 2009:52). The similar 'self-making' interest appeared to Foucault's project of Puritanism and regarded it as a reformulation of Weber's fundamental question about the emergence of a new kind of person at a particular period of history (Krieken, 1990).

Unlike the research light of Max Weber on Christian faith Taiwan and Singapore are the developing countries and struggle among the low resources and low wage problems. As the economic development is deeply linked with the modern nation-state which pursuits of economic growth. The economic development takes their first priority for the leaders of the developing countries. And the behaviors of the religious are hidden within these two developing countries. The development theory which S. M. Lipset (1959) posed in the article of '*Some Social Requisites of Democracy: Economic Development and Political Legitimacy*' came to be well known as 'modernization theory' draws the tension between the economically political policies and social dimensions (Lipset, 1959). Demographic control is the main factor that both Taiwan and Singapore governments need to set "Zero population Growth" as one of the economic development goals. And the concept of human dignity even for the adult is reduced to a demographic number. The social dimension of family may also be reduced to an economic number in the family planning project. No wonder thirty years later when Larry Diamond reviewed Lipset's formulation in the article of '*Economic Development and Democracy Reconsidered*' (1992) found that the

evidence broadly supported Lipset theory and the level of economic development is the dominant explanatory variable in determining political democracy (Marks & Larry, 1992).

Although the validity of modernization theory or development theory may have strongly been questioned and considered out of date, some claim that globalization has been more dominated power than modernization theory or development theory. We truly understand that the validity of mathematical formulations of physical axioms in natural science would sustain more valid than the theories in social science. But the problem would be that un-named people are there. To some extents, various relationships, agents, and actors are functioning which cannot be ignored. Their voices need to be listened. The economic life, social life and political life are all around us and mixed. If we do neglect them, they are still functioning as they are. The knowledge of good governance should be both for the people and even the marginalized people and the industrial boss. Since the modernization theory and development theory are functioning in spite that some people are unable to sense their existences. It is therefore urgent to note that in all political systems there are at least two political cultures, political elite culture and non-elite culture which it is now more acknowledged by the deliberative democracy advocates. The former could represent the expertise knowledge and the latter represents the lay knowledge, or the popular everyday life. Some scholars notice that not only the intellectual traditions have shaped the sociology but also the non-elite contribute the modern and post-modern life. The popular culture has influenced the development of mass media (Grindstaff, 2008).

While we investigate the human dignity of the unborn child, the study of non-elite culture or everyday life may bear the meaning of real life (Lynch, 2005). Can these two groups, especially the medical profession doctors have to dialogue or the expertise combines with the political power only? Do only the expertise and power elites lead the play as a monologue? What is the validity of medical knowledge on the unborn child? Beck notices that the modern society enters into a stage of 'modernization' and he uses the term of 'risk' as the 'intrinsic element' to indicate the danger of scientism. Furthermore, he articulates the 'reflexive' modernization character to distinguish from the 'simple' one (modernization). The deep change within the social structure and social agents are more emphasized. In addition, the tradition of modernity is based on the free of choice, individualism, liberal democracy and self-interest need to be more exposed and to be investigated. The 'reflexive on modernization and issue of risk are the major concerns which refers to the mainstream Parsonian sociology from Habermas to Max Weber based on the development of mass

production, structural rationality and functional integration. Some scholars may criticize that Beck sees the darker dimension of the consequences of scientific and industrial development which bring us the risk (Beck, 1992). The need of set restriction on abortion may offer an option to reflect the on the reality of demographic development and economic development and bring broader participation and voice of lay public.

The Industrial Revolution has been more influential than such an epistemological tradition. The steam engine played as a powerful weapon leads the United Kingdom and the Europe to enlarge the colonial continent. To some extent the Industrial Revolution represents the technological advance. Is technological advance a kind of scientific advance? Nowadays we would admit that technological advance is a kind of scientific advance, but one hundred years ago, some scholars may ignore this understanding since knowledge has been divided into many professional domains. In line with the natural scientific revolution, social science has experienced a long struggle of 'becoming more scientific' with the efforts of Auguste Comte (1798-1857) in term of positivism in his work of *A General View of Positivism* (1844). Furthermore, the political economy has its long history with philosophical tradition with Adam Smith (1723-1790) and David Ricardo (1772-1823) since the eighteenth century. The technological advance fuels the intellectual knowledge in the political economy. In the work of *An Inquiry of the Nature and Causes of the Wealth of Nations*, Smith articulates the concept of free market economy. To some extent, technological advance and political economy are the basic elements for the bureaucracy and government. The real intellectual may well acknowledge the economic reason by Herbert Simon (1916-2001), the winner of Nobel in economics in 1978, and he proposed the economic theory of Bounded Reason. He is the student of Rudolf Carnap (1891-1970) who was the main scholar and advocator in logical positivism. But the technocracy may only inherit the tradition of Industrial Revolution and political economy, that is, the mixture of scientific advance and economic growth.

The validity of expert knowledge reveals the problem of how we analyze philosophy of science in the context of the criticism of logical positivism. Obviously, the expert knowledge is divided into different knowledge systems in the likeness. Karl Popper had been argued that if there is an even "one empirical experience falsifies any existing hypothesis or logic statement" that is come back to the basic step of establishing or to verify the true knowledge. What we don't know are much more than we do know.

Does expert knowledge know the altitude or method of falsification? The answer may be 'No', but one thing is sure that the acknowledgement of limitation is the basic knowledge. Not only for expert but also for any ordinary people especially in the democratic society, no one can know everything. That's why each of us has to be humble in the front of other field and to respect with each other. If the expert knowledge become the only dominant knowledge system the spirit of open discussion and dialogue become impossible. If only the expert has the right or privilege to speak in the public domain who could give the voice for those who lack the right or having no privilege to express? Are we going back into the time of tyranny again? In this regard, expert has become an ideology and sort of dictatorship. I emphasize any mechanism of policy making system.

Sometimes the political science rejects the contribution from history, philosophy and theology. Since my major is related to the history, philosophy and theology I do experience the discrimination from the natural science as well as from social science. The modern state relies on the role of bourgeois in the context of Max Weber. There is not wrong to emphasize the role of bourgeois, but it would be wrong if the role of bourgeois is only class limited to this discourse and the bourgeois become the dominant expert knowledge system.

The good news is the cross-disciplinary dialogue and learning is newly prevailing. The criticism from natural science or social science has stepped out from the dominance of behaviorism. Human behavior could not be simplified as the rat or mouse in the laboratory, especially in medical science. The concept of public reason may throw light on the related researches. The concept of truth-tracked orientation draws more attention than the concept of value-free system in the politics. How to mobilize more political participation and peer-review system into the public life are become more important which has long been acknowledged by S. Huntington, Gabriel Almond and many political scientists.

7.2 The Lay Knowledge

Could the professional expert knowledge system and the lay knowledge only function like the zero sum game? Are there any alternative ways lying in between these two knowledge systems? The article of "Manufacturing Uncertainty: contested Science and the Protection of the Public's Health and Environment" indicates many cases of diseases caused by medicine, for example, the Reye's syndrome, asbestos. The authors, Michael and Monforton use the term '*junk science*' to criticize the validity of medical knowledge system. It seems true that how much we do not know

accurately about the harmful results of medicine in this modern world. It's not only about the side effect, whereas, it's about the direct outcome. Like the radiation therapy would kill the cancer and the health cells are also killed in the same time. When the policy tend to listen the women, the other side of the unborn child would be neglected. We need to admit this missing part. There are thousands of unborn children are aborted and we have the doctors ordered like the 'Magna Charter', the religious lay knowledge is highly doubted. We are now exposed to the medical experts and political powers highly dominated world. The professional experts are everywhere, pregnancy is regarded as disease as the public health programs dominating the public policy. If it functions like the zero-sum game, what we could do may only to follow the order of medical professional or the political elites to make our own decision.

In the book of *Madness and Civilization* by the post-modern historian Michael Foucault, has severely criticized the western institutional arrangement in the name of 'reason'. Ironically the concept of 'reason' is the classical center of Enlightenment in the seventeenth and eighteenth centuries and the medical institution identifies the authentic modern institutionalization. The chemical industry becomes more important in the development of medical system. The Data Quality Act (DQA) takes effect without the hearings and obviously to mandate the authorized office of Management and Budget (OMB) in the States. The 'junk science movement' moves hands in hands with the policy makers to avoid regulation and litigation like the co-criminal structure. The mechanism of cost-benefit is the basic 'economic reason' which is also highly abused in the domain of population policy making, though some scholars research on the economic reason and optimally believe that the wild nature would be saved through the continued habitual conversion, the concrete results await the efforts from one generation to the next generation.

7.3 The Critique of Economic Growth

In line with economic growth the work of MITI and the Japanese Miracle (1982) by Chalmers Johnson identified that 'who governs Japan is Japan's elite state bureaucracy' which indicates both the elites of government officials and scholars. Peter Evans (1995) argues that the bureaucracy to be called the 'developmental' which is effectively embedded in the industrial linkage in his work of *Embedded Autonomy: State and Industrial Transformation (1995)*. Furthermore the development theories are carried as series of practice after the World War II the magnificent restoration. Such an elite-oriented or expertise-oriented political development relies on the strong belief in economic growth to develop both at the practice-based and empirical-based level. That will lead three concrete key problems

that the inequality, lack of capacity and differentiation which is called ‘the developing syndrome’ to identify the possible problems and attempted to solve. Inequality indicates the opportunity and right that people could participate in political function and public life is unequal. Lack of capacity refers to the universal law and respect for the achievement of empowering people to participate in the political performance which challenge the capability of the government, now usually in the terms of governance. Differentiation is an inexorable tendency toward greater division of labor and specialization of tasks that leads to a dangerous and polarized society. People are divided into different classes and to be labeled as ‘expert’, ‘expertise’, or ‘lay’ to indicate different validity of opinion and knowledge in the public domains.

The argument of the economic growth first comes from the criticism from the political development. The gigantic political scientist Samuel Huntington, his work of *Political Order in Changing Societies* (1968) challenged the orthodoxies of the 1960s in the field of development. He enlarged the vision of development theory. While the most scholars were limited in the myth of *economic growth* of being *the only variable to political development*, he noticed *the value of culture and region* as the *diversity* especially in the development experiences of The Third World countries. Furthermore, in his work of *The Clash of Civilizations* (1996), he indicates the significance of religious and other cultural values as ways of understanding cohesion and division in the world. The contribution of Samuel Huntington marked the political peak of development theory and modernization. He expanded authentic *elite vision* while the most elites seldom aware of the structural functions of political cultures, the voting or election, or dictatorship are more recognized. Most of us are standing in between these two cultures and lacking the power to push, to influence, or to change.

Woo-Cumings (1999) has examined the theory of the developmental state through the work of Chalmers Johnson’s observation in *MITI and the Japanese Miracle* (1982) which posed the model of economic planning bureaucracy in Japan, the Ministry of International Trade and Industry (MITI), constructed a Weberian ideal type of an interventionist state. It identifies a ‘plan-rational capitalist’ and the developmental state conjoins the private ownership with state guidance. Woo-Cumings introduces that Johnson’s work not only moved under the context of late development but also in the context of the twin influences of *social mobilization* and *economic nationalism*. Actually, in his early work *Peasant Nationalism and Communist Power* (1962) carries out the nature of *nationalism* by the role of the state and ideology which blend with the social mobilization which gains the power of peasant to lead the social transformation. The role of state power represents the political elite; the social transformation represents the power of peasant.

Albert Hirschman (1958) reckons the role of state in the developmental Asia as 'binding agent'. And the most brilliant part of Hirschman's articulation is that he notices the role of citizens who are aware of their participation role in the developmental process in the late development countries. (*The Strategy of Economic Development*, 1958) Hirschman argued that the leading role of the state in terms of 'binding agent' makes the distinctive development experiences between East Asian and Latin American. Johnson has argued that while there is no necessary connection between authoritarianism and development, there is a sort of elective affinity between the two. In much the same way that G. O'Donnell had analyzed the connection between the bureaucratic authoritarianism and heavy industrialization in Latin America in his work of *Modernization and Bureaucratic Authoritarianism: Studies on South American Politics* (1973).

When could the government cross the old nation-state boundaries and coordinate with the marginalized people including the faith-based citizens and to listen to the needs of the lay. The human dignity of the unborn child is the weakest of the lay. The answer may lie in the technocracy that is the leading role of effective bureaucracy. The economist Joseph Schumpeter had noted the tradition of mercantilist ideals of Germany and found that mercantilism was a pragmatic adaptation. It's a theory of 'practice'. For Rosenstein-Rodan and Simon Kuznets, the idea of the developmental state is not anything new. It may be interpreted as the system of political economy which is admirable and dangerous since the nineteenth century.

Though the year from 1950 to 1980 was defined as the second wave of globalization, the per capita income growth rate of the developing countries increased about 1 percent in the 1960s, to 3 percent in the 1970s, 4 percent in the 1980s, and 5 percent in the 1990s, with about 2 billion people become marginalized. The gap between the more globalized countries and less globalized countries is widened. How's the collective elites take more public actions to promote the "public good"? The reflection from the economist Leepak Lal who criticizes the economic policy of the United Nations toward the Third World, entitled his book as *The Poverty of Development Economics* (Leepak, 1985). He called the development economics "Dirigiste Dogma", especially those "the belief of price mechanism". The "orthodox micro-economics with the allocation of given resource", "liberal free market trade from the 19th century"---"Keynesian heritage", and 'development economics' may need to reflect this issue.

7.4 Moral Decision

The reply from one participant of faith-based teen boys in Singapore provides an

outstanding answer while I asked the question regarding abortion violating the human dignity of the unborn child. I asked all of the participants of faith-based teen boys: *“Do you know what abortion is? Is abortion violating the human dignity of the unborn child?”* He replied *“Yes, it’s a life. If you don’t want to have a baby, you can’t actually try to make a baby.”* (AF22) All the participants agreed. He is the youngest among them but he is the leader. He age is only 14. When I asked: *“How do you think of abortion? What’s the problem that people abort their babies, the unborn children?”* He replied *“It’s inhuman.”* (AF22). One boy used a metaphor of *“It is a selling fish...”* (AF21) indicating those aborted their unborn children. And I kept asked *“Why people do things, while they are not ready to have the baby?”* While other boys replied that *“The grant parents do not want the grant son.”* he replied *“No, they are just not ready!”* (AF22). I asked *“But they are adult. Why do they do that?”* He finally stated that *“It’s about the moral decision.”* (AF22)

The core of moral behavior is free will and the social justice. The concept of free will is authentically articulated by Kant. And the concept of social justice is articulated by John Rawls in 1972, which concerned the distributive justice. The libertarian, Robert Nozick, claims that justice require absolute respect for the property right, even if the result in great inequality between the rich and the poor. To the contrary, John Rawls, believe that justice require the maximum equality compatible with the individual incentives needed to promote the economic growth. Unequal treatment of human beings truly need more clear justification both with the law and social settings. Moral consideration requires concrete and reasonable regulations which would be represented in the institutional construction both in governmental, domestic industrial, trans-national industries, and global level (Wenz, 2007). Pro-life is the weak tie both in the social movement and economic world.

In the post-modern world the scientists who work with social movements may find that their relations can become tense and involve complex negotiated settlement. Some scientists seek to maintain the role of the disinterested researchers who shuns visibility and attempts to produce peer-reviewed knowledge on a controversial issue. The existence of a social movement has tends to increase the surveillance and levels of suppression of scientists whose work can aid the movement (Martin, 1999). Social movement activists who concern the lay knowledge view their alliances with scientists with ambivalence partly because of independence of the scientists and unpredictability of research generated by scientists (Yearley, 1992). The disclosure system is based on the concept of “right-to-know”. The public have the basic right to access information in the public domain. The power of information could also create a chain reaction of new incentives. The dynamics between how the social movements

interact with medical science, technology through epistemic and technological change (Eyerman & Jamison, 1991; Jamison, 2001). Justice is a controversial concept.

How does the expertise or scientific knowledge of population makers become twisted while they are making the policy decision? The distinction of *public sphere* and *private sphere* become vague in the post-modern digital world. Especially when the intellectual tends to back the idea of economic growth instead of lay opinions, the inequality will happen and the opportunities of lay become scared to participate in the public issue. Who could keep the balance, listen to both sides and encourage the real dialogue? Even though German philosopher J. Habermas has defined *modernity* as an essentially *bourgeois entity*, he emphasizes the *intellectual participation*, the concept of his *public sphere* is based on 1) the notion of **public good** which is distinct from **private interest**; 2) *social institutions*, like private property, to empower individuals to participate independently in political and social affairs; 3) the forms of private life that prepares individuals to act as autonomous, rational-critical subject (Calhoun, 1992). Hopefully the political entities may listen to the voice from the different sides and not function against people's common good.

When the world enters into modern stage, the liberty plays as the sword to pierce the heart of faith, to seek the autonomy of human dignity and build a secular world instead of the sacred one. The individual liberty is a central issue in liberal democracy. The freedom of conscience in the domain of individual liberty has first derived from the concept of human reason, which related to the moral order and obligation in the context of Kantian. John Milton (1608-1674), a Calvinist and a citizen of The British Empire of England, witnessed the Act (1649) declared England to be a Commonwealth (1649-1660). The executive power of the country was entrusted to the council of state. He developed the major concept of modern civil liberty in the context of Utilitarian.

7.5 Be Vigilant

The difference between contraception and abortion seems to be mixed among the advocates though it has been well known from ancient world. The famous Ephesus doctor Soranus had explained the difference. '*A contraceptive differs from an abortive, for the first dose not let conception take place, while the latter destroys what has been conceived. Let us therefore, call the one "abortive" (phthorion) and the other "contraceptive" (ekbolion).*' (Soranus, 1956:62) More cross-national study to investigate the strength of national Family Planning programs and the fertility change have assessed within 1982-1989. In 1982, 100 developing countries, and in 1989, 98 such countries were rated according to the strength of their family planning program

efforts; 88 were rated both at dates. Countries were scored on 30 items that are grouped into four descriptive purposes: policies and stage-setting activities; service and service-related activities; record keeping and evaluation; and availability of contraceptive method (Mauldin and Ross, 1991). And actually the first undertake of the evaluating efforts and results of Family Planning programs were also initiated by Mauldin and Lapham (1972). They developed 15 inputs measures and applied them to 20 countries. Then 46 countries were applied to be evaluated by Freedman and Berelson (1976). How do the mix-use of abortion and contraception happen which needs further investigation, though Family Planning programs provided the information and services of contraception have seen as the most direct route to achieve the goal of fertility reduction (Seltzer, 2002). Why the advocates mixed the contraception and abortion worth further investigation.

Furthermore, the institutional policy setting about *pre-abortion counseling* of The United Kingdom was first issued in 1977. British feminists from liberal legislation strongly question that abortion law considering of setting pre-abortion counselling. They articulate that the requirement of two doctors' agreement refers to deprived of women's freedom to determine the pregnancy. The feminists argue that the disparity between regulation and provision of abortion law (Lee, 2003). Some scholars indicate that counseling is *a duty* or *an option* as a *procedural provision* or *the third party review* for different countries. From the side of supporting the human dignity of unborn child would much favor the institutional settings of restriction such as: pre-abortion counseling or waiting period. Both are helpful to examine the demographic policy between the tension of human dignity of the unborn child and women who seek to abortion. There are different types of *regulatory model* for abortion, such as *prohibition model*, *indication model* to provide *safe abortion* and to mitigate the punishment (Eser & Koch, 2005) and worth to do further research in the context of medical sociology.

The term of 'pro-choice' is largely used by some feminists who take the position of supporting abortion vs. the other side of 'pro-life' who make the voice for the unborn. Some scholars limited the issues among three agents: a pregnant woman, medical advisor or physician, and her fetus / the unborn (Mason, 2007). Some radical feminists justify abortions as reproductive health while a pregnant woman labeled her fetus as an 'unwanted pregnancy'. They proclaimed that women have the reproductive right and free choice to make their own abortive decisions. But how does the choice come from and what does it mean? Even the authentic pro-choice organization, National Abortion and Reproductive Right Actions League (NARAL) fails to articulate any academic interpretation about the meaning of choice. No wonder the

pro-life advocates call those supporters of pro-choice as 'poor choice', to denote how poor the choice they made: to kill their own babies.

Dose the choice help woman's health? What are the well-beings for women? It is a central issue for the feminists. They use the term of reproductive health to justify abortion. Moreover, they call it as the reproductive right or abortion right. Some radical feminists even take the 'infanticide' in ancient Egypt, Greek, and Rome that was practiced to legitimate the rationality of abortion. The main debate in the feminist movement is whether the abortion is a 'crime'. Instead, they claim that is normal in history, like Greek preferred pennyroyal, which contains pulegone, a natural aborti-facient, Egypt texts mentioned acacia, recognized today as a spermicide. They indicate that abortion is a simply one of the many ways in which women dealt with gynecological and obstetric matters. (Hull and Hoffer, 2001) Ironically, when the radical feminists advocate the abortion as one of the reproductive rights but the consequence is the mortality female are higher than boy in South Asia also reveals the absurd cruelty of abortion. A number of studies of have found such sex bias/discrimination of selecting gender. But it is regret that some researches limit their studies in founding poorer food and nutrition given to girl than to boy (Cutpa, 1987). The fact of 'Aborting baby girl' remains a taboo in this domain. The related researches in Sub-Saharan Africa reveal the truth that married women rarely feel pressure when they have large families and the modern methods 'abortion and sterilization' confront their religious value system. The main method of attempting abortion was to swallow ergot-based pills which imported from England and said to be "for female hygiene" and often in excess of the recommended dosage. But the demographic behaviors become more acceptable in European-settled areas though the in some countries, for example in Nigeria, where the over 90 per cent of population are Christians or Muslims, the religious reasons remained strong resistance (Caldwell and Caldwell, 1987).

We need to be vigilant against the hubris that human beings are basically the political beings (Hindess, 2004). The sociologist Peter Berger has noticed that many American Christians felt they were faced with a choice between *flag-burning* and *flag-waving*. The former indicates the basic altitude of liberalist and the latter identifies the opposing groups of radical liberalists. While Malthus concerned the 'over population' problem he still had a faith in the ability of people to control their sexual behavior. His argument on this part was usually neglected by the demographers. For Malthus, the reproductive ability was confined in 'conjugal love' which needed prudential control. He articulated that the anti-natural procreative urge would sink into 'mere animal desire' should be tempered by reason and morality

(Quine, 1996). Abortion became the main method to terminate the *unwanted pregnancy* and some recorded history reported that women have resorted to *induced abortion* regardless of legal sanction and risk of health and well-being (David, 1981; Devereaux, 1955, 1967, 1976). Many demographers were familiar with applying Darwinian ideas to social phenomena. The analogies between genetics and cultural transmission have prompted Dawkins (1989) suggests the analysis of culture change a unit of cultural inheritance which is analogous to that of genes in genetic transmission. The term 'evolutionary' and 'Darwinian' are used virtually interchangeably.

The 'Pro-choice' deeply linked with feminists, especially those who promoted abortion. Feminist theories strive to explain how women lack of awareness of their own oppression, what feminists called it the problem of consciousness. The choice needs to be made by any independent person, not an agent or actor. The choice reveals the identity. And identity reveals the autonomy of a person of his /her selfness. Feminists argue that women are long oppressed in the context of male authority. The University professor and expert in constitutional law of America, Ruth Colker, illustrated this linkage by criticizing the feminists Alison Jaggar's viewpoint which disregarded religious or socialist dimension. But the 'religious and existential concept of women's liberation...*The Second Sex*, published in 1949 by the existentialist Simone de Beauvoir, must be considered a forerunner of the contemporary women of liberation movement...' remained plausible. (Colker, 1992)

If we adopt the concept of liberty we will find that Mill emphasized that 'individual liberty is not involved in the doctrine of Free Trade'. He took 'drunkenness' as example to illustrate how to apply the principle of individual liberty which '*is not a fit subject for legislative interference; but I should deem it perfectly legitimated that person, who had once convinced of any act of violence to others under the influence of drink, should place under a special legal restriction, personal to himself; that if he were afterward found drunk, he should be liable to a penalty, and that if when in that state he committed another offence, the punishment to which he would be liable for that other offence should be increased in severity.*' In general 'No harm to others' is the highest applicable principle for individual.

Human dignity are the basic ground for the individual persons and as defend against the power of the states. The historical roots of individual basic rights could be traced to Kant referring to the principle of private law that one person's freedom should be reconciled with another's. Based on Kant's idea, the protection of the freedom that a human being naturally enjoyed to pursue and increase his own well-being without harming the rights of another. Carl von Rotteck inherited this

tradition and indicated that the state as a legal institution must ‘*respect and protect the freedom which its subjects enjoy in every sphere of activities simply by virtue of being human beings*’. (Starck, 2001:100). In this sense, the individual life, health, freedom, honor and property must be respected during the course of daily dealing in the modern state. This basic conception of human rights underpins that Constitution and the German Basic Law not only provide the foundation for the basic rights in the relationship between citizens and the states, but also the basis upon which norms of private law rests. The State is refrained from violating human dignity and imposed a duty to protect that dignity in Article 1 (1) ‘Human dignity shall be inviolable. To respect and protect it shall be the duty of all state authority.’ (Starck, 2001:103)



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Appendix 1: Confidentiality Agreement

Confidentiality Agreement

I, Rosa Marie Hwei Ing Shiao, Ph. D. Candidate of Graduate Institute of Development Studies of National Chengchi University R.O.C. Taiwan. Hereby I promise the confidentiality of your personal attending and opinion regarding the human dignity of the unborn child while taking video recording, including your talk, information, image, transcript, and interpreting data only used for my Ph.D. dissertation research based on the Focus Group Interview method.

The Title of my Ph. D. dissertation is as bellow:

A Comparative Study on Human Dignity of the Unborn Child between Taiwan and Singapore in the Context of Medical Sociology

I agree to

1. Keep all the research information, both videos and transcript data, shared with me confidential by not discussing or sharing with anyone other than the *Research*.
2. Keep all the research information, both videos and transcript data, secure while it is in my possession.
3. Destroy all the research information, both videos and transcript data, when I have completed my Ph.D dissertation research tasks.

Participant

(Print Name) (Signature) (Date)

Researcher

Rosa Marie Hwei Ing Shiao

(Print Name) (Signature) (Date)

The plan for this study has been reviewed and approved by Graduate Institute of Development Studies of National Chengchi University R. O.C. Taiwan. For questions regarding participant rights and ethical conduct of research, contact the Graduate Institute of Development Studies of National Chengchi University R. O.C. Taiwan Office at (886) 2938-7068. Address: No. 64, Sec. 2, ZhiNan Rd. WenShan District, Taipei City, R.O.C. Taiwan. Zip code 11605

Appendix 2: The Transcripts of Focus Group Interview

Focus Group Interview with Faith-Based-Doctors in Singapore 201608 in Nativity Church

Researcher: Do you think that the unborn child has the right to live and to enjoy the human dignity of life?

AF1: Yes, I think the unborn child has the rights to live. They are human beings. Life begins at the moment of conception.

Researcher: Thank you. (I have eye-contacted with the other.)

AF2: Yes, I think the unborn child has the right to live. I took a long time to make sure that my faith is right since the concept of science usually neglect or ignore it while I was in medical school. My father helped me a lot. He helped me to re-affirm my faith and it also influence my fiance. Now he has been baptized and is a catholic. We plan to get married next year.

AF3: Yes, now I will say yes. The Catholic teachings help me to be a more real human being. Science always emphasizes the evidence but the beginning of the human life cannot be so accurately examined. But basically, the unborn child would be a real human being if we give it time to develop, and sure we have to provide good care at the same time. Pregnancy is a process. The unborn child is a human being.

Researcher: Thank you. My second question is: if the unborn child is healthy, that pregnancy will not hurt the mother, and the unborn child do not have any genetic disease, the parents and the families do not have any genetic disease, and it is not conceived by rape, how do you think that this unborn child have the right to live?

AF1: Yes. I think it has the right.

AF2: Yes, I agree with it.

AF3: Yes. (With head nodding,)

Researcher: Thank you. Next question is how and where did you get the concept of human dignity of the unborn child? Is it from your parents or from school's teachings?

A1: I learn it from my faith. I do not know it before I convert to be a Catholic. I did not learn about what life is when I was studied at the medical school. It's a grace that when I get married, I have the daughter, and I start to think the question about life. I learn it from the moment I become a father. And the Catholic teachings help me to find the a good answer to it. And I started the catechism and received the baptism. Now I share it with my daughter and my son in law.

AF2: Yes, I learn it also my father and the Catholic teachings.

AF3: Yes, me too. I learn my future wife and my father in law. It is good.

Researcher: Thank you, next question. Some women choose to have abortion. Do you know why and how women choose to abort the unborn child? How do you think of abortion?

AF1: I think abortion is a social problem. The government needs to provide more support to the women or some needy families. The economic is a problem and the family plan program has changed. Now the government encourages couples to give more births, since we have the population crisis now in Singapore. And we live in a culture of death, as we are Catholics and we need to tell people more about the truth

of life.

AF2: Yes, Some women are confronted some very big problems. I am quite lucky, I have the knowledge and I am a doctor. I would like to try my best to help those women in need and help the pregnancy problems and crises.

AF3: I think it's not an easy problem. The government needs to take some concrete actions to help the families. And the education for teens and families are also important to follow the related policies. I mean the demographic policies. Otherwise abortion is a normal way to solve the problem like people usually choose.

Researcher: Thank you, next question. In your country there are mandatory pre-abortion counseling and 48 waiting period after the counseling. Do you know that? I mean the pre-abortion counseling and 48 hours waiting period is required. Women have to finish that before doing an abortion. Do you know that?

AF1: Yes, I know. (With head nodding)

AF2: Yes, I know. (With head nodding)

AF3: Yes, I know. (With head nodding)

Researcher: Thank you, the last question. Do you think that the mandatory pre-abortion counseling and 48 waiting period is violating the women's reproductive right?

AF1: No, I don't think so. I think counseling could help women to re-think about it. And if the government could provide some financial aids would be more perfect.

AF2: I think the pre-abortion counseling could help women to face the pregnancy crisis and to ponder after the counseling in order to make a good decision. I don't think it's a kind of violating to women's right. People need advice when they need to do an important decision, right?

AF3: I agree with it. Counseling is provided by doctors and doctors are trained to help. Help itself should not be designed as a violating system. If it is a violating then try to fix it. It's basically designed on mutual trust and common good.

Researcher: Thank you. No more questions.

Focus Group Interview with Faith-Based-Couples in Singapore 20160203 in Nativity Church

Researcher: What's the concept of the human dignity of the unborn child? How do you think about the human dignity of the unborn child? Do they have the right to live?

AF4: At the beginning of conception, though it has not fully formed, but life is

decided, whether the child is fully formed, it's a life of his own.

Researcher: Any other else?

AF5: Agree.

Researcher: Agnes agrees.

AF4: Any objection?

AF6: We all agree.

Researcher: All agree, no objection, right? Correct? OK. My second question is what is your faith? What is your religion that teaches you about the concept of human dignity of the unborn child? What is the teaching of your faith?

AF6: The teachings of catholic are life begins at the conception. God says that "Before, I form you, I knew you...before I born you." Life is sacred...before it implanted in the womb.

AF4: The prophet of Jeremiah.

Researcher: Any objection? (All laugh.)

All: Agree. (All laugh.)

Researcher: How about, do you have any friend who laughs at you? I mean, some non-Catholic or non-faith-based friends. Have you ever been laugh at because of your life idea? I mean they think the baby is not fully formed? While they have the problems, they just abort the baby. How the abortion happens?

AF5: We have friends when doctor said it has problem, doctor said that it is not fully formed. They aborted it.

AF4: I also have some good friends. They ask it is a suffering when the child is not good, why do you keep it? Why are you suffering? It is a very difficult question to answer. But for me, if God ask me to suffering, it will give fruits. I accept it. I don't know, but I trust God. The outcome maybe the families strongly get together. I know it is difficult but anyone support. I am willing to accept suffering.

AF6: A good analogy like this. If we ask if you meet an accident, you lost your two legs. We ask that will you want to end of your life!? Baby cannot speak. People will learn out to walk. I can learn.

Researcher: So they strive to live.

AF6: Even when people have cancer, doctor says that there is a surgery then you have ten year to live, then you accept operate. Many will have no hesitation and say I will go for it. So if there is anything wrong, if the child (the unborn) has a voice to say 'Let me live. Let me live.' Try. If anything, I can have a surgery. They tend to agree. So we have no right to abort the child (the unborn). But some will choose to end of his life. Some people have to follow the doctor, when it has problem. But at least, you can decide.

Researcher: We have the freedom. God give us the free will to make our moral

decision.

AF6: That is why I choose to learn and to live.

AF4: We insist to choose life. I have a friend, the mother has the breast cancer, she was pregnant and doctor said that you have to abort the child, but she didn't, she wants to go through the pregnancy. She gave a child and her cancer disappeared.

Researcher: You mean that she recovered? How beautiful it is!

AF4: how to put God in the first place. God will take over.

Researcher: Actually, recent researches prove that the breast cancer has the deep connection with abortion. The more the abortion surgery was made, the more dangerous percentage to have breast cancer. The brain does not know why the pregnancy stops. The pregnancy is just suddenly terminated. The breast developed fully even at the early stage of pregnancy. The brain cannot adjust it. It causes the higher percentage of having breast cancer. The research has proved it.

AF7: I am wondering what the meaning of 'normal' is. For example, we are talking about children. At Legion of Mary, we monthly go to the center where the children having intellectually problems. We may need to feed them, but when we look at them, I think they bring more joy than I bring to them. As we talk this topic, these children might be regarded as monsters. I would like to share with you my experience when I look at them I feel the world is more peaceful because of them. They will not do many troubles.

Researcher: They are even the peace maker. They do not even fight or compete.

AF7: Yah. So my question is what is normal?

Researcher: You are asking the definition of normal.

AF7: Yes. And I have two friends. Both of them are pregnant and unmarried. The other is having the fifth abortion. She is still young. She came crying to me and tell me she became pregnant again. I asked her that you are crying for your pregnancy or crying about for the decision? She said both. She is just crying to go through with it. I just ask her vary simple question, how many more lives? She just dawns on me on that day. If you don't want to have this baby, give it to me. It is something like a challenge to her. And now the baby is teen girl and they often shop around our place we live. She is so happy now.

Researcher: You change her life.

AF7: Her decision.

Researcher: How beautiful it is. My next question is according to the law, even in your country and in many other countries citizens are allowed to have abortion. No matter you are catholic or not. So we have the right to abort the baby. Is it hard to be a

catholic or not? We could easily follow the rule, I mean the government's law, to have right to abort the unborn child. How do you think? Is the catholic demanding too much, or not?

AF7: I have two boys. I feel the world has changed. They might be affected. But I constantly tell them that we should follow the rule of God much than to follow the the rule of government. At age of 18, you can drink, or you can drive and make decision by your own. Whatever you know you can do (after 18 age). But do we want to be ruled by the law of the world or by law of God?

Researcher: To cultivate their consciousness of making moral decision.

AF7: Yes. And this question you ask if the catholic demanding too much. I think it depends on where we are rooted.

Researcher: Yes, to be a real catholic or to think more about what is the role of faith in our life.

AF4: To follow the law of the world or the law of god? I think it has been struggled in my life. It will challenge our children.

AF6: I think it is like the one child policy in China. The government cannot foresee rightly for the future. Now they change their policy. I think Singapore had the similar problem like China. You can choose to go to the school, I mean the government school, while we have three, four or five or more children because of the economic situation. Parents want to have more children, they tend to have them. Actually, there is no baby boom. How comes there is no baby boom? Parents tend to be selfish. (The policy for the parents is) the more of them, the less of me. They would rather to choose more of me than more of them. So that is the reverse effect.

Researcher: In your country, when women seek abortion, you have the institutional settings. It's quite different from others, like Taiwan, you have the pre-abortion counseling. In many countries, especially in Taiwan, liberal tendency is strong. Is it a good chance to re-consider the human dignity of the unborn child? Is it having some effects to save the baby or not?

AF7: It is down in my mind that it really changes the mind of parents or mind of doctors. Because I have a friend, he has the lecture in the university, and after the lecture he wanted to know more about if it is easy or difficult to have abortion. He went to KK. KK is the catholic hospitals. Then he found how easy to have abortion. Child under the age of maybe 16, there is no need to inform their parents if they want to have abortion. Those who really want to keep the babies the hospital will check the grades, if they belong to the smarter grades, if you are university students. They tend to not really abort their child. But for the uneducated people, that will be very easy. They put them into a counsel room, and know they are uneducated or poorly educated, then it is OK to abort the babies. So my friend, he is very shocked by knowing that.

AF4: They have the logic of the more intelligent mothers will deliver more intelligent babies.

Researcher: The elite idea.

AF4: Yeh.

A6: The higher intellectual, the gene, they are plus to be more mature or more prepared to have sex. Then the baby will be better. The government is afraid of the problem from birth.

AF7: they think the more educated persons may more contribute the society.

AF8: Actually, some higher educated persons may come from the parents who are washing class. Some higher educated parents spoil their child.

Researcher: Compared with the countries, is the pre-abortion counseling the process for women to re-consider their decision? How do you think?

AF6: It seems compulsory. They will the show you the video what is life, then they will ask you to decide. You can come back later. Maybe many teen age girls they didn't want to have an abortion. I think it helps. They will also show you how abortion will be done. They will show you the video.

AF4: The Silent Scream.

AF6: Yeh, The Silent Scream. I only know it is compulsory. (A disturbance was raised about what is abortion is about thirty years ago.)

AF6: Now there are some people need to adopt the babies.

Researcher: Also in your country, you have the mandatory waiting period. It's about 2 full days after the counseling. It is 48 hours. Even having the counseling, you should calm down and think about it 2 full days.

AF6: If you really want it (to have abortion), then you come back.

Researcher: In my country, the liberal radical feminists regard these institutional settings are kind of discrimination. They say when women seek abortion, they had thought about it over thousands of times. So they think there is no need to have pre-abortion counseling as well as the waiting period. It is quite different. So how do you think? It is the two opposite sides to weighting.

AF7: If the women have thought of it thousands of times, then the pre-abortion counseling makes no any sense, just go for it. I mean if she decides to go abortion, then the pre-abortion may make difference for her. (All laugh.)

AF6: True, True, True. That is the case my question is to know why after the pre-abortion counseling, why would they change their mind? For human or for

woman, what is the thing which is correct to do, if they don't have the informed decisions? For me, if I have the fact decision, I must be informed all the information and facts. All the information must be available to me. Then I can make a better decision and to know why I have to go ahead. Most of the time, they are told that (the unborn child) is just a tissue, like some pimples. You break it and it has gone. But when baby is moving, baby has the face, could you do that? So after pre-abortion counseling, yeh, what I think that we could know what we talk about thousands of times, may my thought is wrong. When you say women have the rights. All of us have the rights. How right is right? My question is how right is right. It is usually a lie or a joke. So when we say about a decision, you must tell it both, all the good things and bad things. To give everybody the full information and let you decide. I mean I am talking about the civil rights. Everybody have to do their own decision. Give the person all the available facts and information. Everything is available and true to her. And she makes her own decision.

Researcher: So is human dignity of the unborn child one of the available facts?

AF6: Correct.

Researchers: That is what I want to work on it. How do you think? Do you want to say something to the policy makers to know more about the human dignity of the unborn child according to your faith?

AF7: According to my faith?

Researcher: Yes.

AF7: I would say that life is a higher meaning, though there are many scientists. (Researcher: You mean there are some crazy scientists mixed the human embryo with pig or tiger, they want to create more strong human beings...

AF5: They want to clone some babies. It's really hard to understand they don't want the natural baby. What they want to become? Maybe the baby will become the monster.)

Researcher: The policy makers may not understand the value of faith. Could you help them to know more about it?

AF6: Not only catholic have the value of life, most Christian, Hinduism, Muslim and Buddhist are also have the value of life. For the atheist, life is just coming and going. There is no after life. So maybe you die now, you die after. It's the same. You have to die.

AF7: Life ends here.

AF6: Yeh.

AF5: (I cannot understand it. It seems that they don't want to understand.)

AF7: I think religious are human.

Researcher: They just seek their own interests.

AF4: At this interview, now it challenges me. It is the question hits me. If someone wants to cherish life, I would ask myself what I could do for him or her. I usually heard about pro-life, but I am not really aware of it. Now I think I could do something....

Focus Group Interview with Faith-Based-Single-Ault-Females in Singapore

201608 in Nativity Church

Researcher: Do you think that the unborn child has the right to live and to enjoy the human dignity of life?

AF10: Yes, I think the unborn child has the rights to live. And I am a catholic. God creates human life and we should protect the human life from the beginning of life until to the end of life.

Researcher: Thank you. (I have eye-contacted with the other.)

AF11: Yes, I think the unborn child has the basic human right to live. That's what the true meaning of human dignity. We should protect the life form the womb even it is unhealthy.

Researcher: Thank you. Your answer has covered my second question. Could we just discuss it later? (I have eye-contacted with the 3rd one.)

AF12: Yes, I support that the unborn child has the right to live. Life is not easy. When we see the environment now we live, we almost destroy it, the beautiful earth that God creates for us. And the unborn child is another victim that people abuse their rights. People only want to enjoy sex but abort the babies!

Researcher: Thank you. My second question is: if the unborn child is healthy, that pregnancy will not hurt the mother, and the unborn child do not have any genetic disease, the parents and the families do not have any genetic disease, and it is not conceived by rape, how do you think that this unborn child have the right to live?

AF10: Yes. When the baby is healthy, it has the right to live and I support to give birth to it even when the unborn child is unhealthy.

AF11: Yes, I agree with it. I had told it and it is the Catholic teachings. We should follow God's way to live if we say we are Catholic.

AF12: I agree with it. Even though it is hard to be a Catholic, we are often criticized as conservative or stubborn. But it is the truth. The unborn child is also created by God, even it is abnormal. Normal is over-emphasized. I don't want to follow the concept of utilitarianism. They only accept the concept of good function of humanity. We could learn from those disability children. That's love though it's a burden. Life itself is burden, right? And it's also a way of cross. It's a kind of joy of life.

Researcher: Thank you. Next question is how and where did you get the concept of human dignity of the unborn child? Is it from your parents or from school's teachings?

AF10: I learn it from my faith. I come from a Catholic family. I have no doubt about my faith. My mother had some struggles but my father had been a good example to me. I gradually affirm that catholic is a good way of life to follow.

AF11: I learn it also my faith. I really appreciate that I could be a Catholic. I have a clear and healthy vision of life. I don't worry to get lost. We have the consecrated priests, sisters, and we have the sacraments.

AF12: I learn it also from the Catholic Teachings. I think it's good.

Researcher: Thank you, next question. Some women choose to have abortion. Do you know why and how women choose to abort the unborn child? How do you think of abortion?

AF10: I think they have some problems, economic, or family pressure, or comes from boy-friends pressure. I think we need to evangelize as zealous as possible. Most people just live as the flock without shepherds. They do not know what the true meaning of life. So they just follow their blind feelings and body desires. I think our Christians have the debts on it. I mean to stop abortion is our Christian's responsibility.

AF11: Yes, when women are having some pressures, if they are pregnant they tend to choose abortion.

AF12: I think abortion cannot really solve the problem. It will cause hurts and repeat the problem again and again.

Researcher: Thank you, next question. In your country there are mandatory pre-abortion counseling and 48 waiting period after the counseling, Do you know that? I mean the pre-abortion counseling and 48 hours waiting period is required. Women have to finish that before doing an abortion. Do you know that?

AF10: No, actually, I don't know that.

AF11: Yes, I know it. .

AF12: No, I don't know it either.

Researcher: It is OK, the last question. Do you think that the mandatory pre-abortion counseling and 48 waiting period is violating the women's reproductive right?

AF10: No, I don't think it is violating. Women really need to re-think it. I mean before doing abortion. She really needs help. I think the counseling could help.

AF11: I don't think it is violating. It could help and provide the chance to re-think about it. .

AF12: Yes, I think it could help to think about it, in order to come down to make a right decision.

Researcher: Thank you. No more questions.

Focus Group Interview with Faith-Based-Single-Adult-Males Singapore 20160206 in CEAC

Researcher: How do you think about the human dignity of the unborn child? What's the concept of the human dignity of the unborn child? Do they have the right to live?

AF13: You are asking personally?

Researcher: Sure.

AF14: Should we answer one by one?

Researcher: Yes.

AF13: Definitely, from conception.

AF15: Yes, from conception it is the human being.

Researcher: How does your faith teach you about the human dignity of the unborn child? It is the second question.

Researcher: Are you all catholic?

AF13: Catholic. Gerard is also Catholic. Darius is Christian,

AF15: Maybe I start it. I am not a Catholic, I am a Christian. For me, it's pretty clear that all human beings are created by the image of God. That life is given from God.

And all the human beings cannot violate the life and the dignity. It's the integrity.

What my faith is supposed to speak for the unborn. It's what Jesus said that carry the

least to me. And whatever we do for the least that it is we do for Him. But to reflect

the other side, if we not do for the least, we do not do for Him. So it is supposed a

warning that we should stand up for the right of the unborn.

AF13: Everything my brother said is "Yes". And I want to say some more about that to be a Catholic you must be a pro-life. If a Catholic contradicts it, it is hard to admit that you are a Catholic.

AF14: A baby even though it is still unborn, it is a life. We have no right to end a life of the unborn child. That is what I think.

Researcher: Have we ever doubt it? I mean what the non-Catholic or non-religious thinks. They might that the baby is not fully informed. They don't have thoughts. Have you ever doubt it or have the challenge of the human dignity of the unborn

child?

AF13: I have never been. I mean to doubt it. Challenge is yes. I give course of Theology of the Body. I am a full time prolife advocator. Yes, there are many challenge and argument about the formation of the fetus. The challenge message is welcome.

AF14: We are talking about the church. While speaking the mission of God which Darius has mentioned. If we are speaking of God, it is definitely no doubt. It is a life. I don't have any a doubt.

Researcher: How about you, Darius?

AF15: For me, I never doubt it, but challenge yes. When we teach people, we are facing the secular culture or secular kind of things. And we are Christian. Some people will argue for the dignity when we speak for the unborn child. So yes, you will see all kind of these challenges. But for me what is the real challenge at this issue is abortion. It's a kind of intellectual argument. When the abortion is legal, we should ask why abortion is legal and what could I do for it? How can this society tolerate abortion? And the society allows it happens. How can we, I mean Christians, actually, sit by. I do think that for me, we should speak of the issue.

Researcher: Right, how could the society tolerate the abortion? But you know that some feminists, I mean the radical feminists. They severely doubt it. They think that the unborn child is just like a tissue, it does not fully developed, it cannot do reasoning, cannot think.

AF13: For me, the radical feminist is a living denial. They are more influenced by Corinthians. So they doubt the dignity of the unborn child. These are not Catholic teachings. For us, we have the Magisterium. Even some Christians also say that abortion is wrong. We have many pictures about the reality of the abortion. Yes, it is a challenge.

Researcher: Yes, it's a challenge to be a Catholic or to be Christian. We support that even the unborn child is not fully developed, it cannot do reasoning. It's a life. It's the gift of God, created by the image of God. But for some non-Catholic or non-religious, they consider that the Catholic or Christian is a kind of patriarch, it's the man leading thought which may discriminate the idea of women. How do you think? Especially for the thought of dignity of the unborn child and abortion, how do you think? Is the Catholic or Christian a kind of patriarch?

AF15: Yes, I think it's about the church. The patriarch is a thought of control of women, or the strict people who really deals with church. But I think the issue of abortion itself it is also about the issue of motherhood. It really relates to the woman and the child. For me, the radical feminists should really concern about the motherhood and the unborn child, not only the woman. The value of motherhood is to

raise the child, love and abound with the families. I think the prolife movement is not against women, is about what the choice. And precisely it (pro-life movement) is about the stand up for the rights of everybody, including the unborn child, the mother the aged. The solution should be both for mother and child. We should consistently to change the situation both for mother and child. When woman she is pregnant, she may worry about her job. Pro-life movement should stand up for woman to create an environment both good to mother and child. Recognize it as a society should accommodate the sources what is good to woman and what is good for the child. Rather than just to push forward the view only for one side, then fall into the trap of so-called choice. We should integrate both the motherhood and the child. A pregnant woman can fully participate into the society as a mother and provide her the possible resources both for her and her child.

AF13: Yeh, the patriarch is the problem of society, not only at the church. It could be a sort of abuse and a sort of hatred. These things truly happen. But the true feminism is really to cherish and understand the true love and hope for women. What St. John Paul II had called feminism is a truly motherhood and it is a spiritual development. The true feminism is called to share the equal with man. But equality does not mean to have equal role. In marry life the equality of man and woman must be in the share of different gender role. Both have the sort of equality to avoid bias of abuse.

Feminism is not putting woman up at too much roles of mother and wife, or at a competition with man. It is an understanding of genes and share of different role. There are some proper roles in the society. We (Pro-life movement) are not only for nurturing life, supporting life, we also acknowledge responsibility. Man is called to provide and protect, and to support woman to be a good mother and a good wife to full as possible, rather than to subject to the role of woman. It's to share the equal.

Researcher: Gerard, how about you?

AF14: The unborn child is unable to speak for himself. He or she cannot justify himself or herself. So the church chooses to give the voice for them. The radical feminists may not fully understand this and table it as patriarch.

Researcher: OK, now come to the next. The contraception is not my research, but in the case of condom-use failures though the Catholic does not even allow to use it, when you are Catholic or Christian, will you fully follow the teachings of your faith, not to use it and will you choose abortion while the condom-use failures happened? It's a really personal question.

AF13: The church never says that it is right to use condom and even say that contraception is evil. It relates to the individual behavior and it is at the Magisterium. In the church document Human Vitae, it says about the mistake of contraception.

Researcher: Human Vitae condemns the use of contraception.

AF13: Yes. The individual pays the price. The truth of the church vindicates the use of contraception and many marriages failed because of the condom-use. The couples divorced and separated because it. They cannot find the love among it.

Researcher: The sex is separated from the sacredness.

AF13: Yes, the conjugal love is destroyed. The condom-use destroys the true love. Sex is separated from reproduction and from the sacredness. The catholic is behaving like the society. That is why St. John Paul II issued the Theology of the Body. He tries to explain the human anthropology because the condom-use destroys very deep human spirituality. St. Paul said in Scripture that one woman and man marriage is the union of Jesus and the church. In Christian understanding, church is the Christ. According to St. Paul's analogy Christ marries the church. Church is the bride. They become one. That's why how we deep our faith in a way of conjugal love goes in a way of image of icon of redemption. When the conjugal interaction perverted by the condom-use there is no longer the conjugal love exist. The masturbation is the similar problem. The signs become the empty signs. If we understand it, contraceptive sex is different from the mutual-giving and life-giving marriage. It is just organism. So the condom-use destroys the conjugal love and the meaning of redemption.

Researcher: The individual behavior still has a long distance from the teachings of Catholic faith, right?

AF13: For some are yes. When use condom, your spouse become replaceable. It could be someone in China, someone in Australia. It could be anybody and the conjugal love is completely destroyed. That is why St. John Paul II talked about the spirituality of sex. It is not just flesh and organism.

Researcher: We are confronted with the sex revolution.

AF13: Yes, it is a big war. But we belong to the truth and go against the organism. We are going to the chastity.

Researcher: Compared with the voice of the unborn child, it is so silent, while the sex active people as well as the sex revolutionist are quite active. What would you say, Gerard?

: The conjugal act is like the means of two parties. One is giving and the other is receiving. It's a kind of intimacy. That's why they participate. Because of responsibility, if they are truly mature and truly love each other enough, then abortion should not happen for them. Because we will know the consequences after that and it relates to the responsibility and the trueness at the whole event.

Researcher: Thank you. How about Darius? It's a very complicated problem but deeply connected.

AF15: Well, the issue of abortion and contraception is very offended. It relates to the sinfulness and selfishness. It becomes a kind of alternative proposed like this: the idea

is that you should not use the abortion as the form of contraception. So that is what you should do. We prevent pregnancy, we prevent abortion then we use the contraception. This could be reflected like the example: they provide the pamphlet of contraception at the abortion clinics. There are also some guidelines to talk about the pre-abortion counseling and post-abortion counseling. But in fact, the sexuality even happens in schools. That is why the school provides the condom selling machine though acclaim that to teach abstinence first, and be faithful second, and finally, if you cannot avoid it, use the condom, the contraception. So you see this kind of philosophy be brought to our education system and acclaim it helps. And it becomes the policy. I just provide some statistics what is the reason for abortion. That is in 1993. 4% women feel contraception is the reason for abortion, 7% of contraception failure for abortion. In Singapore, there are some people using contraception as the main method of preventing abortion. But the principle behind contraception and abortion is that both deny the value of sexual holiness and life. The true is that the government provides these policies and sponsors them. Essentially, they promote it and the consequence is you can accept it. Well, I am not Catholic, but I still think the contraception is controversial. For me as an evangelical, the idea of contraception is a church issue. That if you have the contraception, you finally have sex, and if you get married, physically and mindfully you should understand what is the purpose and the meaning of sex. Sex, love, family, and human person are all linked.

Researcher: Last two more questions. In Singapore, in your country, you have the pre-abortion counseling. It's an institutional setting. You also have 48 hours of mandatory waiting period after counseling. Do you think it is a good institutional setting or a violating the free will of the woman who seeks abortion?

AF15: Waiting period and pre-abortion counseling are good but what I recommendation is to increase the mandatory waiting period. The idea of mandatory waiting period in my understanding is a course of abortion. If you have an abortion situation, now it's legal. But cut it as far as human beings begins, abortion is a huge decision, of course, she should think of some consequences before you go ahead. So that's the idea that you could have pre-abortion counseling. After you have given advices and informed some consequences, and I give you some times to think about it before going through this abortion process. What is the objection raised by the other side, they are des-respected because of the pre-abortion counseling. That would be said that woman does not understand, perhaps, not intelligent enough, but she has to go through of this process before even she will or will not go through the abortion. Try to force this mandatory on her is a violation of her or not. My perspective it is quite a need for both women who seek abortion and who is pregnant. For most

Singaporean, they will criticize that the government is power, a strong authority, but in fact, most women, especially young girls and young women in Singapore, even married women, and widow women may need go through this because they might not know there are other choices. After giving them all the information, including the adoption, about the consequences of abortion, about the unborn child, and then they go back, to think through the decision fully. And perhaps with the assistances, it may help. They might find more fruitful sides of life. Of course, I know the other side quite cannot accept it.

Researcher: How about the others? Will you agree with it?

AF13: 48 hours may help some women to realize that human life is quite worth to consider. Especially when women hear the heart beating of the unborn child, they may change their mind. And as we know that the angry or sad emotion of the mother may affect the unborn child. It is good to give the opportunity to know more about the human dignity of the unborn child. As to the pre-abortion counseling, there is a short cut for the abortion if it is given by the pro-choice clinics or institutions. I suggest the neutral third-party to carry it out. Then we will have the true pre-abortion counseling. Pro-life and pro-choice counseling will be quite different. It could be more damage. The government sector actually is more birth control sectors. So they promote the condom and say you can use it. For the radical feminists the condom use and the contraception are their reproductive rights. They go around the world and propaganda it, especially in the developing countries. That is the same thing.

Researcher: Yes. How about you? Gerard?

AF14: I do know that there is pre-abortion counseling set by the government. It gave us counseling. Because sometimes we are waving, so we say 'poor choice'. Since it is mandatory, we could go through it and choose our side. The lady could choose to keep the baby or abort it. For her, maybe she is a pro-choice, actually, she doesn't matter. There is case, about a woman who wants to abortion. I was not there. I saw the after-things. She quite confused for a long time, but after that (pre-abortion counseling), typically, she felt, usually after the abortion, most ladies fell guilty, because part of them become lost, and after that need post counseling. Most of them, not all the times, they would rather escape the reality to view their guilty, their upsets. Because if they could review it, I mean the wrong part of choice, then there again they might gain the strength. But most of them not choose to review it.

AF13: Living in denial.

AF14: Yes, Living in denial.

AF13: If you see the PTSD, we could know more about it.

Researcher: Yes. PTSD.

AF13: The Feminist and pro-choice they deny it (PTSD). Actually, they neglect the

hard part of womanhood. They put the sex revolution or sex industry as an important part of abortion. For the government, they just go for public vote. The rule by the majority always counts. But its original is inhumanity.

Researcher: But there is about 80% women are under the pressure of abortion which is from their boy-friends, or from husband, or from mother in law. So they are seeking abortion. It is not easy.

A13: But if we support, it will change. But now Singapore is killing their baby. It is all connected. It is connected with sex revolution, condoms abortion. If we have no babies, Singapore will die. They legalize abortion and cheat the rule, we just elect the government to go through it, it is called the freedom. They do not choose the narrow parts, the abstinence, the pro-life, and most people do not want it. It's the culture of death. We now suffer of it. Singapore is dying actually. It should be replaced by the culture of life.

Researcher: So what would you say to the public policy maker? That's the last question.

AF13: Spread this message in our propaganda, programs and all possible things.

Researcher: To promote the neutral third-party pre-abortion counseling?

AF13: I must say that the government should be more tolerate about the pro-life policies. Because I have been speaking the Theology of the body for many years, they could permit this program. Most of them are government schools. Now it seems that they are more pro-life. And some pro-life programs also go through the video. They allow it. I even start a program of not to use condom. The church should be more prophetic. We cannot lose the battle.

Researcher: In Taiwan the government promotes the contraceptive education. The advocator is a Christian pastor. His sons are also pastors. They even define themselves as pro-life.

AF13: Well, they do not have Magisterium and the teachings of the church, they do what he thinks is right. If you know What St. John Paul II has said the culture of death that is the contraception and abortion, what Singapore has done. We see the roots.

Researcher: What is your suggestion for the government?

AF14: Give them more time to study the consequences of what is happening now. They could learn.

Researcher: To organize more pressure interest group or religious group?

AF14: Yes. I mean that the groups give pressure to the government and that will be we will stand where we are and try to change the abortion.

AF15: What I would like to say that the human right of the unborn child and the rights of the motherhood all begin at the moment of conception. The unborn child has the right to live. And the Singapore government has signed the document of human right

of the unborn child. I think it's the right time to re-think about it. And the government cannot progressively roll abortion back. It (Abortion) has come to the point of unnecessary and unthinkable. When they could start it I think our job has been done and to celebrate the culture of life. Find our position for pro-life. It comes from above. It is Jesus Christ, God's only son, He conquer the death and resurrect.

Researcher: That's the end of this interview. Stand firm at our faith and keep fight. Thank you so much!



Focus Group Interview with Faith-Based-Teen-Girls in Singapore
20160130 in Nativity Church

Researcher: What's the difference between embryo and fetus? They are the different names of human beings of the unborn child. You could look it up at your cell phone. The spelling is embryo and fetus.

Researcher: what is your result of looking up at the cell phone?

AF16: Fetus is at the early stage, the first stage.

Researcher: Embryo is before 8 weeks of the pregnancy, and fetus is after that. Is it clear? OK?

All are nodding their heads.

Researcher: Are they the unborn children?

All nod their heads again.

Researcher: The second question, do you think that the unborn child have the human

dignity? Do they have the right to live?

AF17: Yes.

AF18: Yes, because it have the connection with the parents.

AF16: I think last summer I knew some friends have some talks and I think they suppose of their own thinking. I suppose the unborn child have the right to live.

AF16: You (they) are ready going to this.

Researcher: They (the unborn child) have the chance to grow up, right?

AF16: (Nod her head).

Researcher: Have you ever doubt that the baby is a human and not a chicken?

All express disagrees.

Researcher: (Explain some scientists try to mix human embryo with other animals to make chimera.)

Researcher: The next question is do we have any faith?

They express that they are all catholic.

Researcher: How is your faith telling you about the human dignity of the unborn child?

I mean the idea of the human dignity of the unborn child?

AF17: The unborn child is a human being. We should love it.

Researcher: When the sperm and egg meets and at that moment life begins, right?

All nod their head.

Researcher: (Explain that women create only 200 eggs all throughout their life but men create thousands of sperms. And...) Come back to the question that how's the faith teach you about the human dignity of the unborn child?

AF18: Once the egg and sperm combine that is a human being and we cannot have abortion.

Researcher: But some scientists doubt it.

AF18: Because they don't see the baby and they don't have the thought.

Tracy: Maybe they cannot have the thought and they think the unborn child does not have the feelings.

AF16: Can you repeat your question again?

Researcher: How is your faith teaching you about the human dignity of the unborn child?

AF18: When we have the sex, and we may have the baby. The baby is a human being. Though we may not want it but still it is a human being.

Researcher: Is abortion violating the human dignity of the unborn child?

All nod their head.

(Researcher explains about the medical and surgical abortions.)

AF16: They kill the babies.

(Researcher asks about the morning after pill.)

(They do not know and have an interest to know.)

AF18: We know about abortion but we do not want to have it.

Researcher: Why people do abortion? What kind of problem they may have?

AF17: Financial.

Researcher: Okay.

AF18: They don't want to have it (the baby).

AF16: They are not ready for the babies.

Researcher: Why people are not ready and violate the right of the unborn child?

AF16: I think it's about a moral decision. It's about the thing you have to think about but you don't. Usually when people know that is not a right they will not do it. But some people do not ready for it.

Researcher: Moral decision. Good!

Researcher: How about according to the law, the citizen has the right to abort the baby before its 24 weeks?

AF18: Sometimes the pregnancy, the baby is dangerous to the mother. They could abort the babies according to the law.

Researcher: Yes, in that case the catholic permit to have abortion. But if the baby and the pregnancy will not harm the mother's life, the catholic do not allow terminating the pregnancy and the babies. Do you understand that?

They all nod their heads.

Researcher: If the pregnancy and the baby will not harm the mother, why people choose to abort the baby? While the baby is normal, they baby is not sickness, autism, why people choose to abort it?

Tracy: I think they do not know that baby is a gift of God. Any abortion is a reject. Actually, it's not right. In catholic, we cannot do it. If you do abortion, it is a sin.

Researcher: Are you happy to be a catholic? I mean you are asked to have many rules.

AF18: Some people still have such an idea though they are not catholic. Some say you don't want it but you still have to keep it.

Researcher: How about the condom? Catholic does not allow of using it, do you know that?

AF18: Contraception.

Researcher: Yeh.

They all nod their heads and say yes.

Researcher: Do you think that the catholic is demanding too much?

AF16: I think it's Okay. The human body is sacred. If you have a sexual it supposed you have a partner inside marriage. Otherwise, it is adultery. If you use a kind of condom, it means that it's Okay, but what is the God's plan for you?

(Researcher explains the sacredness of life. The catechism is successful at this parish.)

Researcher: How about your friends, do they have the idea like yours?

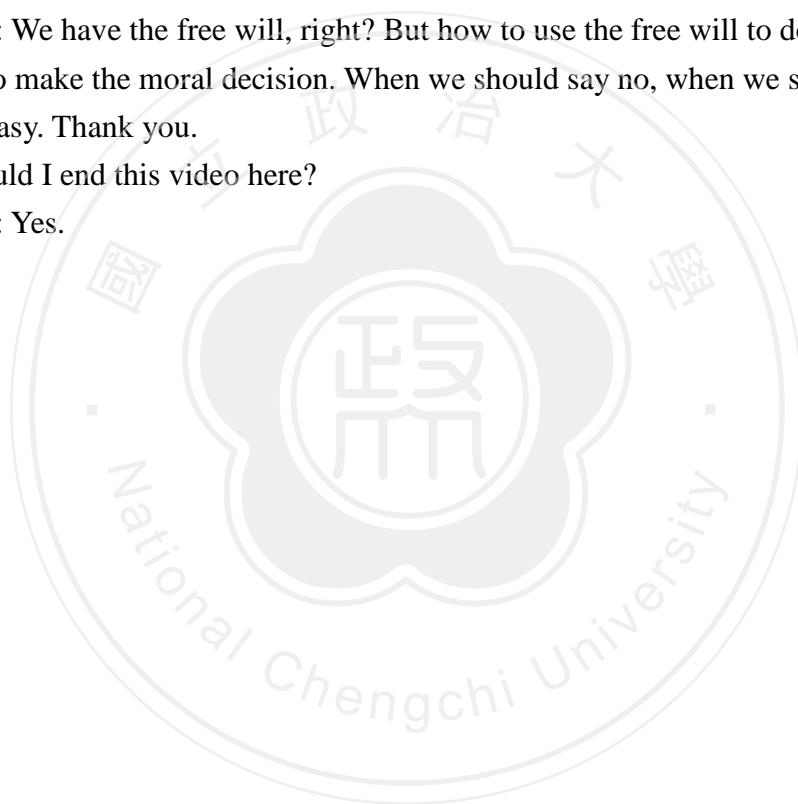
AF18: no.

A16: Most of my friends are not catholic. Sometimes they asked me about such questions. I told them about the catholic idea they think the key point is up to you to make the right decision.

Researcher: We have the free will, right? But how to use the free will to do the right thing, it's to make the moral decision. When we should say no, when we should say yes is not easy. Thank you.

AF16: Should I end this video here?

Researcher: Yes.



Focus Group Interview with Faith-Based-Teen-Boys Singapore

20160130 in Nativity Church

Researcher: What's the difference between embryo and fetus? They are the different names of human beings of the unborn child. You could look it up at your cell phone.

The spelling is embryo and fetus.

AF19: Embryo is the later stage and fetus is at the early stage.

Researcher: how about the others?

AF20: I don't know.

AF21: Embryo is at the early stage. Fetus is the later stage.

(The others follow his idea. A disturbance occurs while Samuel makes a joke of

chicken. The researcher tries to clarify that embryo is from the conception to 8 weeks. Fetus is called after that.)

Researcher: Do you know what abortion is? Is abortion violating the human dignity of the unborn child?

AF22: Yes, it's a life. If you don't want to have a baby, you can't actually try to make a baby.

(All laugh.)

Researcher: Good. You say it's a life. Then when human life begins?

AF22: When the sperm and the egg meet and then becomes a cell. Then it grows.

Researcher: When the sperm meets with the egg. It's conception. Ignatius, how do think? Do any others agree with it?

All: Yes.

Researcher: Do you think that the unborn child has the right to live? It means that the unborn child have the human dignity?

All: Yes (and nod their heads)

Researcher: Do you think that abortion is a sort of killing the unborn child?

All: Yes. (Thomas gives the thumb up to show his big yes.)

Researcher: But why some people abort their unborn children? How do you think of abortion? What's the problem that people abort their babies, the unborn children?

AF22: It's inhuman.

Researcher: How about you? Samuel?

AF21: It's selling fish...

Researcher: Means selfish?

All: (all teen boys laugh.)

Researcher: Could government provide any help? Such like baby bonus? What's the problem that people abort their babies?

AF21: For baby bonus. (All: laugh)

Researcher: Why people do things, while they are not ready to have the baby?

AF21: The grant parents do not want the grant son. (All laugh.)

AF22: No, they are just not ready!

Researcher: But they are adult. Why do they do that?

AF22: It's about the moral decision.

Researcher: Thomas, you are right. You get the point.

Researcher: But how about the others opinions? If the condom-use failed, some people make their girlfriends or wives pregnant... Is it the good reason to abort the baby?

AF22: No.

Researcher: How about the others idea?

All: No.

Researcher: Maybe they have the problem to abort the unborn child, such as financial or other reasons?

AF22: The answer is the same. They are not ready to have baby.

Researcher: Good.

Researcher: Do you have any faith?

All: Yes.

AF22: We are all catholic.

Researcher: Are you all borne catholic? It means cradle catholic?

All: Yes.

Research: How does your faith teach you about the human dignity of unborn child?

AF22: It's the gift of God.

Researcher: Does your faith allow you to abort the unborn child?

All: No.

Researcher: Is the catholic a suffering for you?

AF22: No.

Researcher: How about the others? Is your faith demanding too much?

All: No.

Researcher: Do your friends laugh at you because you are a catholic?

All: No.

Researcher: How about the pre-marital sex? Does your faith allow you to have it?

AF21?

AF21: No. but how about yourself? You have the free will.

AF21: No.

AF22: It's irresponsible.

Researcher: How about the peer pressure? Will you have the pre-marital sex because of peer pressure? Then you may have the chance to have the unborn child, right?

Researcher: How about the others? Is your faith demanding too much?

AF22: No. As long as I have the strong faith, I will follow the teachings of the church.

Researcher: We will come to the end of the interview. Do you know that in your country there is pre-abortion counseling if women seek abortions? And 48 hours mandatory waiting period is also required after pre-abortion counseling. Do you know that? Do you think it is helpful?

AF22: Yes, it helps.

Researcher: Really, in Taiwan, we don't have it. Most of our people are thinking that

we are more liberal. We don't want to have pre-abortion counseling. Those who are liberal reject the institutional settings like pre-abortion counseling and think it's violating women's rights. Is the pre-abortion counseling demanding too much for woman who seeks to abortion?

AF22: No. How about man? (All laugh.)

Researcher: Do you know the citizen have the right to abort the unborn child before its 24 week in your country?

All: Yes.

Researcher: But as the catholic, you are not allowed to have abortion unless the unborn child would harm the mother. In that case, the catholic teachings allow to have abortion. But except that, the catholic is not allowed to have abortion. Is your faith demanding too much?

AF22: No. If anyone wants to abort his or her baby, no matter what religious he or she has.

Researcher: Good answer! Here comes my last question. What do you want to say anything to the population policy makers about the human dignity of the unborn child?

AF22: To them publicly to show them that actually the unborn child is a life.

Researcher: How about the others?

All: Copies.

Focus Group Interview with Non-Faith-Doctors in Singapore
20170125 in Nativity Church

Researcher: Do you think that the unborn child has the right to enjoy the human dignity of life? How do you think about the human dignity of the unborn child?

A23: Yes, they have the right to live. The unborn child is human person.

A24: Yes, it has the right to live.

A25: Yeh. they have.

Researcher: How and where did you get the concept of human dignity of the unborn child? Is it from your parent or from school's teachings?

A23: It's mainly from my parents.

A24: It develops from parents to school's teaching.

Researcher: If the unborn child is healthy, that pregnancy will not hurt the mother, and the unborn child does not have any genetic disease, the parents and the families do not have any genetic disease, it is not conceived by rape, how do you think that this unborn child have the right to live?

A23: Sure, it has.

A24: Yes, it has.

A25: Sure.

Researcher: Is there any teaching about the unborn child in your medical education?

A23: They never discuss it.

A24: Not so much. It's just mentioned that the beginning of human life comes from the embryo.

A25: No, Never.

Researcher: Do you know there are mandatory pre-abortion counselling and 48 waiting period after the counseling while women demand abortion in Singapore?

A23: Yes, I know it.

A24: Yes, I know it.

A25: Yes, I know.

Researcher: Do you think it, I mean the mandatory pre-abortion counseling and 48 waiting period, is violating the women's reproductive right?

A23: No. Abortion is a kind of destruction. It needs to rethink about it. I support the law and it helps.

A24: I don't think it's violating the women's reproductive right. It needs to reconsider and we have to understand why women demand abortion. As I know some choose it because of the financial problems and some for social problems. The pre-abortion counseling may provide the chance to face the problems and provide the possible resources. And the government could provide some financial aids and helps.

A25: No, it helps to face the related problems. I don't think it's a kind of violating. It's part of law education.



Focus Group Interview with Non-Faith-Couples in Singapore
201608 in Their Homes

Researcher: Do you think that the unborn child has the right to live and to enjoy the human dignity of life?

A26_husband: No, I think the parents have the rights to make the decision for the child, especially when the families have the financial problems. It is necessary to make a right decision.

Researcher: Okay. What's the opinion, I mean mother?

A27_wife: Yes, I think the parents have the right to make the decision. It is not easy, but sometimes they have to.

Researcher: thank you. How about you?

A28_wife: I have the same opinion. I think the parents have the right to make the right decision for the family. And sometimes some children are not healthy.

Researcher: Sorry. It's next question. I mean to discuss while the unborn child is healthy or not.

A28_wife: Okay.

Research: And you? (I eye-contacted the husband)

A29_husband: I agree with my wife. And I think that is what the government do through the project of family planning. The parents have to make plan for their families. What we think is to provide the best for the kids, if the situation is not ready, the parents have to do the right decision for the family.

Researcher: Okay, My second question is: if the unborn child is healthy, that pregnancy will not hurt the mother, and the unborn child do not have any genetic disease, the parents and the families do not have any genetic disease, and it is not conceived by rape, how do you think that this unborn child have the right to live?

A26_husband: It depends. I still think that the parents need to know what the best is for the family.

A27_wife: Yes, it depends. Sometimes, we have to do a sad decision when the family is not ready to welcome the kids even it is a healthy child.

A28_wife: Yes. There are some different situations though the kids are healthy. Sometimes, the parents need to consider many things. I mean many facets of the families. Some decisions are made under different pressures.

A29_husband: I agree with my wife. For instance, some baby girls are aborted because they have two babies girls already even they are healthy.

Researcher: Okay. My next question is how and where did you get the concept of human dignity of the unborn child? Is it from your parents or from school's teachings?

A26_husband: I don't know. I just make my own decision when I have my own family. I just try to make the best decision for my family.

A27_wife: Yes. I don't know where I learn it. I just make my own decision with my husband together when we get married.

A28_wife: I think I learn it from the school. While I was in High school, the teacher told us that we have to know how to protect ourselves from pregnant. And after I met my husband, we had discussed it before marriage. I am happy we have the similar opinions. And we could communicate easily at this issue. Some other friends the couples have different ideas. Then they have the marriage problems.

A29_husband: I cannot clarify of how and where I have the concept about the unborn child. I only remember that it is not easy to be a full adult. I come from a small family and my parents had discussed the family planning while I was young. It is not an easy decision. I know.

Researcher: thank you, next question. Some women choose to have abortion. Do you know why and how women choose to abort the unborn child? How do you think of abortion?

A26_husband: You see. That's what happened every day. It's a painful decision but we have to do the decision like that. Then we could have a happy family life right now. It's a painful decision I know, but there is no other way.

Researcher: Sorry for this question make you feel painful. Sorry. Is it Okay to continue?

A27_wife: Yes, it's okay though it's painful.

A28_wife: I think women or parents have no other better options. We have the law. Abortion is legalized. And we could choose to abort the unborn child when it is under 24 weeks. Yes. That's the daily things that parents have to face it. It's not easy but we try to learn and to make a better choice.

A29_husband: We have to admit that is part of the family life. We try to make the family plan and try to be a good father, husband and wife. We have no other choices. I think.

Researcher: Thank you, next question. In your country there are mandatory pre-abortion counseling and 48 waiting period after the counseling. Do you know that? I mean the pre-abortion counseling and 48 hours waiting period is required. Women have to finish that before doing an abortion. Do you know that?

A26_husband: Yes, I know.

A27_wife: Yes, I know.

A28_wife: Yes, I know.

A29_husband: Yes, I know.

Researcher: Almost comes to the end, the last questions. Do you think that the mandatory pre-abortion counseling and 48 waiting period is violating the women's reproductive right?

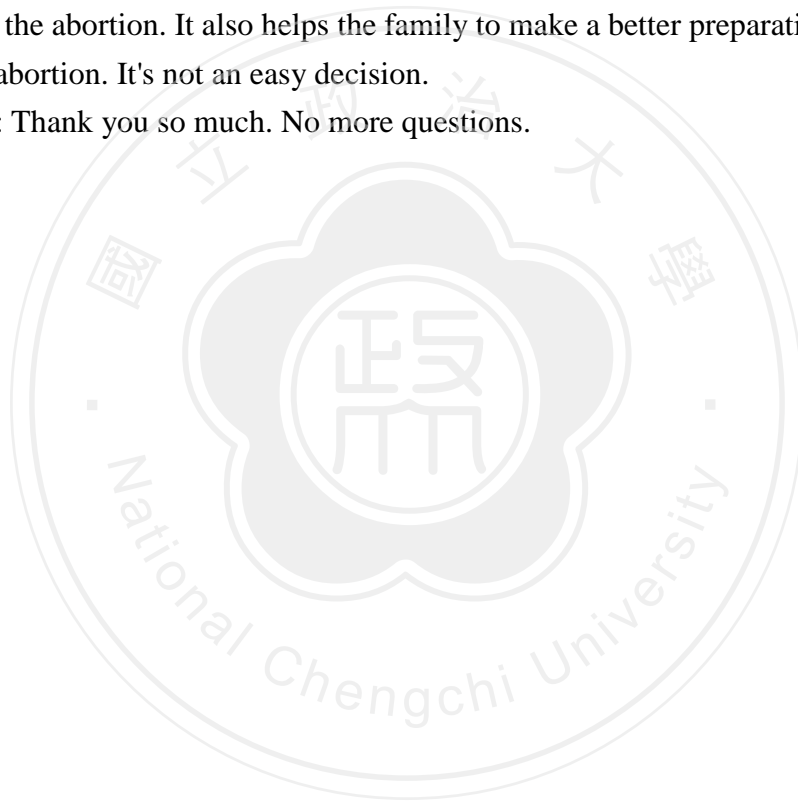
A26_husband: No, I don't think so.

A27_wife: No.

A28_wife: No, I don't think it's a kind of violating women's right. Women have the right to make a better choice. The mandatory pre-abortion counseling and 48 waiting period could help women to make a better choice.

A29_husband: No, I think it is a good opportunity to re-consider the decision before performing the abortion. It also helps the family to make a better preparation for that. I mean for abortion. It's not an easy decision.

Researcher: Thank you so much. No more questions.



Focus Group Interview with Non-Faith-Single-Adult-Females in Singapore
201608 in Nativity Church

Researcher: Do you think that the unborn child has the right to live and to enjoy the human dignity of life?

A30: Yes, I think they have the rights to live. Once the unborn child could move, I think it's a life.

Researcher: Thank you. (I have eye-contacted with the other.)

A31: Yes, I think the unborn child has the right to live. We are all human beings.

A32: Basically, I agree with the idea that the unborn child is a human being but I have some doubts about the boundaries between the mother and the unborn child.

Sometimes women have the problem to continue the pregnancy. What would she do?

Researcher: Good questions. As to the Do No Hurt principle, if the pregnancy would hurt the mother's health, it is legal to abort the unborn child, I mean even the mother is a catholic. And according to the civil law, women have the right to demand abortion while the unborn child is less than 24 weeks. In Singapore and Taiwan we have the same rule regarding to the abortion. Don't worry. Okay?!

Researcher: Thank you. My second question is: if the unborn child is healthy, that pregnancy will not hurt the mother, and the unborn child do not have any genetic disease, the parents and the families do not have any genetic disease, and it is not conceived by rape, how do you think that this unborn child have the right to live?

A30: Yes. I think in this situation the unborn has the right to live.

A31: Yes, I agree with it.

A32: I agree with it.

Researcher: Thank you. Next question is how and where did you get the concept of human dignity of the unborn child? Is it from your parents or from school's teachings?

A30: I learn it from school. I learn that I have the reproductive ability while I was a teen, the teacher told us that. From that moment I start to think about my future. I am thinking if I get married, I ask myself do I really want to be a mother. Will I be happy to be a mother? The answer is I make a promise to myself I have to be happy and I have to choose a wise man otherwise I will not get married. Hahaha...I am still

looking for. Or I could choose to be alone if I cannot find one. (We all laugh.)

A31: I learn it also my parents. I could understand that life is a journey. I am happy with the life now I have. I prefer things could be ordered in a good way.

A32: I learn it also from the Catholic Teachings. I am not baptized but I want to learn from the Catholic teachings. In Catholic I find some good ideas about life. I am still in learning.

Researcher: Thank you, next question. Some women choose to have abortion. Do you know why and how women choose to abort the unborn child? How do you think of abortion?

A30: I think it is not an easy problem to answer. I have some girl-friends, they have abortion. Most of them feel hurts from it. Of course, they also feel hurt form that relationship. How to develop a healthier and mature relationship is important. Sometimes people do the wrong things while they do not have enough supports.

A31: Yes, I agree. If the women could have some strong supports they would like to keep the unborn. It's a hard and painful decision.

A32: I think the economic is a problem and pressures are also a main factor that cause women to choose abortion.

Researcher: Thank you, next question. In your country there are mandatory pre-abortion counseling and 48 waiting period after the counseling, Do you know that? I mean the pre-abortion counseling and 48 hours waiting period is required. Women have to finish that before doing an abortion. Do you know that?

A30: No, I don't know it. (Surprised face!)

A31: No, I don't know, either.

A32: Yes, I know it.

Researcher: Okay, the last question. Do you think that the mandatory pre-abortion counseling and 48 waiting period is violating the women's reproductive right?

A30: No, I don't think so. I think women need time and some resources to re-think about it.

A31: I don't think the counseling is a kind of violating. People need more time to make a big and important decision, right?

A32: I agree with it. Abortion is not an easy thing. We need more time to re-think about it and counseling could help to see the things more completely.

Researcher: Thank you. No more questions.

Focus Group Interview with Non-Faith-Single-Ault-Males in Singapore
201608 in Nativity Church

Researcher: Do you think that the unborn child has the right to live and to enjoy the human dignity of life?

A33_NSAM1: No, I think the parents have the rights. The parents need to consider many things and sometimes abortion is a better choice. It's a modern society, right? I have many friends they had abortion experiences. It is parts of life when we grow up. I know we have to use the condom but sometimes it fails.

Researcher: OK. Sure, you could express your ideas freely. How about you?

(I have eye-contacted with the other.)

A34_NSAM2: Yes, I think the parents have the right.

A35_NSAM3: No, I have different idea. I support that the unborn child have the right to live even though the parents have the right to make a decision. We still need to think more about the human dignity of the unborn child. For me it's a life.

Researcher: Thank you. How about you? My second question is: if the unborn child is healthy, that pregnancy will not hurt the mother, and the unborn child do not have any genetic disease, the parents and the families do not have any genetic disease, and it is not conceived by rape, how do you think that this unborn child have the right to live?

A33_NSAM1: It depends. There are many different situations. I mean people have to manage their life, and life is very complicated though the unborn child is healthy.

A34_NSAM2: Yes, I agree with it. It's not easy to make a perfect decision. Sometimes the unborn child has to be aborted since sometimes it is the best decision they could do at that time.

A35_NSAM3: I think the healthy unborn child has the right to live when it is not conceived by rape or it has no any genetic disease. I think it has the right to live. People need to give the chance to the unborn child to live. We are human and we are not animal.

Researcher: Yes, Thank you. My next question is how and where did you get the concept of human dignity of the unborn child? Is it from your parents or from school's teachings?

A33_NSAM1: I cannot really say what I have learnt. I have to do the job quite earlier than others. I started to work since I was graduated from Junior High School. I had down many different kinds of jobs. I only know that life is an option. I just do what I could do at the best at any given time and situation.

A34_NSAM2: Yes. My friends have a lot of working experiences. I don't know either, where and how I have the idea about the unborn child. I do not know what I should do if I have some problem as you asked. I need to think about it later.

A35_NSAM3: I think I learn it from my parents and the school. Life is a process. We need to learn step by step. My parents do not speak a lot but I learn it from their behaviors. My parents have a hard job but they usually told me we need to appreciate since there are some other people who are having much harder life than us. And my parents would help some needy peoples that gives me a good example to learn. Life is not easy I know but we could learn and help from each other.

Researcher: Thank you, next question. Some women choose to have abortion. Do you know why and how women choose to abort the unborn child? How do you think of abortion?

A33_NSAM1: I think it is because of some economic problems. I mean both women and men could have some economic problems. Abortion is the fast way to solve the problem. Perhaps it is not proper, but we have the right to do a decision like that. Abortion is legalized in Singapore.

Researcher: Yes.

A34_NSAM2: I think women are having some pressures to do that. Economic could also be a reason. Some teens are also having the temptation of sex.

A35_NSAM3: I think some women have the pressures or some economic problems. But I do not know if there are any other options. If we could have some other options, then abortion is not the only way to solve the problem.

Researcher: Yes, is there any other option? Thank you, next question. In your country there are mandatory pre-abortion counseling and 48 waiting period after the counseling. Do you know that? I mean the pre-abortion counseling and 48 hours waiting period is required. Women have to finish that before doing an abortion. Do you know that?

A33_NSAM1: Yes, I know that.

A34_NSAM2: No, I don't.

A35_NSAM3: Yes, I know.

Researcher: The last question. Do you think that the mandatory pre-abortion counseling and 48 waiting period is violating the women's reproductive right?

A33_NSAM1: No, I don't think it is violating to women's right. I think it helps to re-think the decision more clearly.

A34_NSAM2: I agree with it. It could help.

A35_NSAM3: I think it could really help people to think about abortion more clearly.

Researcher: Thank you. No more questions.

Focus Group Interview with Non-Faith-Teen-Girls in Singapore

201608 in Kentucky Fast Food Store

Researcher: Do you think that the unborn child have the right to live and to enjoy the human dignity of life?

A36_NSTG1: Yes, I think they have the human dignity and the basic right to live.

A37_NSTG2: Yes, they have.

A38_NSTG3: Yes, they have.

Researcher: My second question is: if the unborn child is healthy, that pregnancy will not hurt the mother, and the unborn child do not have any genetic disease, the parents and the families do not have any genetic disease, and it is not conceived by rape, how do you think that this unborn child have the right to live?

A36_NSTG1: Sure.

A37_NSTG2: Yes.

A38_NSTG3: Sure.

Researcher: My next question is how and where did you get the concept of human dignity of the unborn child? Is it from your parents or from school's teachings?

A36_NSTG1: I learn it from my parents and school. We all come from an unborn child. The unborn child is the human life.

A37_NSTG2: I learn it from school.

A38_NSTG3: I learn it from my parents and school.

Researcher: Okay, next question. Some women choose to have abortion. Do you

know why and how women choose to abort the unborn child? How do you think of abortion?

A36_NSTG1: I think they have some problems. As I know they might have economic problems. And some teens may have the sex pressure or curiosity to get pregnant. And their parents made them to abort the unborn child since the teens are too young to raise it.

A37_NSTG2: Yes, some teens have the problems, like sex pressure, or curiosity and lack of knowledge or self-control those could cause the unwanted pregnancy. Then it leads to abortion. Some women also have the similar problems. They don't have enough money to raise the children. These are the factors of abortion.

A38_NSTG3: Yes, there are reasons like that. I think it comes from a lot of pressure to choose the decision of abortion.

Researcher: Thank you, next question. In your country there are mandatory pre-abortion counseling and 48 waiting period after the counseling. Do you know that? I mean pre-abortion counseling and 48 hours waiting period is required. Women have to finish that before doing an abortion. Do you know that?

A36_NSTG1: Yes, I know that.

A37_NSTG2: Yes, I know that.

A38_NSTG3: Yes, I know that.

Researcher: Do you think that the mandatory pre-abortion counseling and 48 waiting period is violating the women's reproductive right?

A36_NSTG1: No, I don't think so.

A37_NSTG2: No.

A38_NSTG3: No, I don't think it is violating women's right. If we are mature, and we are adult, I mean the women. We should know the consequences of the result and be responsible to it.

Researcher: Beautiful. And in Taiwan we do not have the similar institutional settings like yours in Singapore. So, I come to do the research and try to promote it in Taiwan. Thank you so much. No more questions.

(They all smile.)



Focus Group Interview with Non-Faith-Teen-Boys in Singapore

20170125 in Nativity Church

Researcher: Do you think that the unborn child have the right to to live and to enjoy the human dignity of life?

A39: Yes, they have.

A40: Yes, they have the right.

A41: Yes, they have.

Researcher: How and where did you get the concept of human dignity of the unborn child? Is it from your parent or from school's teachings?

A39: It's a part of human nature. Actually, I am a 早產兒. I have some heart problems. If my parents aborted me, I cannot live right now and my parents help me to recieve some medical treatments. I am OK now.

A40: It is from my parents and school's teachings.

A41: I learn it from my parents and the school.

Researcher: If the unborn child is healthy, that pregnancy will not hurt the mother, and the unborn child does not have any genetic disease, the parents and the families do not have any genetic disease, and it is not conceived by rape, how do you think that this unborn child have the right to live?

A39: Sure.

A40: Yes.

A41: Sure. They have.

Researcher: Some women choose to have abortion, do you know why and how do you think of abortion?

A39: I think there are some teen girls under the age of 20, they have premarital sex, and some women have the financial problems or have some pressure.

A40: Yes, they have some pressure, even to have the premarital sex. They are too young to raise the baby. So they choose to abort it. Some parents also support to abort the child.

A39: My parents told me never to have the premarital sex.

A40: So do my parents. They warn us never to have it.

Lee: We should try our best to protect the women we love in the future when we grow up.

Researcher: Do you know there are mandatory pre-abortion counselling and 48 waiting period after the counseling while women demand abortion in Singapore?

A39: No, I don't know.

A40: I don't know it, either.

A41: Yes, I know.

Researcher: Do you think it, I mean the mandatory pre-abortion counseling and 48 waiting period, is violating the women's reproductive right?

A39: No. I don't think so. I think it's good. It could help to rethink about it.

A40: Yes, I think it is necessary. We need time to think more about the decision. It's a life.

A41: No, it helps to face the related problems. I don't think it's a violating.



Focus Group Interview with Faith-Based-Doctors in Taiwan
20170206 in Cardinal Tien Hospital

Researcher: Thank you. My first question is: if the unborn child is healthy, that pregnancy will not hurt the mother, and the unborn child do not have any genetic disease, the parents and the families do not have any genetic disease, and it is not conceived by rape, how do you think that this unborn child have the right to live?

BF1: Yes. I think it has the right, actually, both healthy and unhealthy. They are all children of God and they cannot only speak by themselves.

BF2: Yes, I think the unborn child has the right to live.

BF3: Yes. I agree with it.

Researcher: Do you think that the unborn child has the right to live and to enjoy the human dignity of life?

BF2: Yes, they are created by God. They are life from the moment of conception. I mean from the union of egg and sperm.

BF1: Yes, sure.

BF3: Yes, I think the unborn child has the right to live.

Researcher: Thank you, next question. Some women choose to have abortion. Do you know why and how women choose to abort the unborn child? How do you think of abortion?

BF2: In my opinion, there are many teens have the abortion problem. They are afraid of telling of their parents. And some couples aborted their 3rd child. And some couples aborted their children while are planning divorce.

BF1: Yes, some problems happened like that. They are choosing what benefits themselves and they do not admit they are selfish.

BF3: Yes, things happen like that. We all know that. People find any excuses while they only care about themselves.

Researcher: Thank you, next question. In Singapore, there are mandatory pre-abortion counseling and 48 waiting period after the counseling. Do you know that? I mean the pre-abortion counseling and 48 hours waiting period is good? How do you think about it?

BF2: I think it is quite good. It is a good chance to let the couples to re-think about it. I do not know how it will be carried out. According the idea, the teens could have the chance to be re-educated.

BF1: Yes, I think these institutional settings are good.

BF3: Yes, I agree with it.

Researcher: Thank you, next question. Do you think that the mandatory pre-abortion counseling and 48 waiting period is violating the women's reproductive right?

BF2: No, I don't think so, though I do not know how they function. Is it by doctors or by religious professionals, right? I think counseling could help women, couples, and teens to re-think about it.

BF1: No, I don't think it violates women's autonomy. Women could make their own decision while they receive the counseling.

BF3: No, People need time to consider some very important decisions.

Researcher: If we adopt these institutional settings, do we only adopt the mandatory pre-abortion counseling alone, or plus, 48 hours waiting period?

BF2: I think both.

BF1: Yes, both.

BF3: Yes, both.

Researcher: And how many days of waiting period are better? Is 48 hours enough?

BF2: I think 7 days will be better.

BF1: Yes, 7 days.

BF3: Yes, 7 days.

Researcher: Thank you. Next question is how and where did you get the concept of human dignity of the unborn child? Is it from your parents or from school's teachings?

BF1: It is from my parents and faith. We are doctors we concern and care the life.

BF3: I learn it also from my parents and my faith.

BF2: I learn it from my teen health education and from being a doctor. A doctor is assumed to care about life.

Researcher: Is there any teachings about the human dignity of the unborn child from your medical education?

BF1: No.

BF3: No.

B2: No.

BF1: If we have such institutional settings in Taiwan I think some of my patients do not need to make the natural reproductive project since they have some abortion problem.

Researcher: I do not understand the relationship between abortion and natural reproductive project? It's beyond my research.

B2: The abortion may have some complications and it may hurt the womb if the function is already weak due to the abortion. Abortion is destructive process.

Researcher: Thank you. I need learn more about it. No more questions.

Focus Group Interview with Faith-Based-Couples in Taiwan

20160318 in Our Lady of Mount Carmel Church

Researcher: Do you think that the unborn children have the right to live? What's the concept of the human dignity of the unborn child? How do you think about the human dignity of the unborn child? Do they have the right to live?

BF4: I am a doctor and I do not think that the unborn child has the right to live before I receive the baptism. I have to say that I totally change the idea about the unborn child. Nobody told me that even when I receive the medical education.

BF5: I am a nurse and I have the similar idea with my husband as he just says that we do not know that the unborn child is a life before we baptized. And we even aborted

the children when we think was over the child number we expected. I do feel sad about this behavior. I thank God that now I know how wrong I have done before. I wish I could know it earlier.

Researcher: Thank you. Yes, it's not easy (See Francis and Cecilia)

BF6: I got married after receiving the baptism. The Catholic teachings clearly identify the human dignity of the unborn child. I have five children. And I usually choose to abstain from having the unexpected baby. I also regard the abstinence as the respect of my wife. I concern her need to rest.

BF7: As my husband says that we have the grace to be a Catholic before marriage and actually I am a protestant Christian. I receive the Christian faith earlier than my husband but he knows more and decides earlier to have a devoted religious life. He leads me to know more about the value of religious life. And since he has been the president of a Catholic School, we are lucky to be invited to learn the Natural Family Planning by Catholic Church. From that program I learn how to take the temperature daily and to observe the time when the ovum is relieved. And Learn to have the plan when is the right time to have baby as well as to serve God in a right way. I also was a teacher to help the other couples. I really feel that child is the gift of God. It's a good knowledge to learn. Is it still emphasized in the church?

Researcher: Good question. Thank you. Okay. (See Francis and Cecilia)

BF8: I have the similar experience as Doctor John the Baptist. I was not a catholic before I got married though my girl-friend was a catholic. Now she is my wife. We even had the pre-marriage relationship before marriage. I thank God that I do one thing right that I marry her right away when she told me that she was pregnant. I do not doubt that she has our baby. And we are right my boy is our first son. And the daughter came two years later. She was a very good lady and wife. I have to thank God. The way she teaches the children leads me to decide to receive the baptism. I learn the faith from my wife and children. They do the good examples.

BF9: I think the unborn child is really the gift from God. I am a Catholic from my grandparents. I came from 萬金鄉, it was the first county to receive the baptism in Taiwan. We just celebrate its 150 anniversary several years ago. I thank God that my boy-friend now is my husband, do not asked me to abort the baby when we had the pre-marital sex. Otherwise, we will kill our first boy.

Researcher: Could I ask what influence you the concept of your opinion of the human dignity about the unborn child? It seems quite clear that most of your concept of human dignity of the unborn child have revealed at the answers of the first question. It sounds that your faith teaches you the basic concept of the human dignity of the unborn child, right?

(They all nod their heads and smile.)

Researcher: The next question is about the secular world. The law system is permit to abort the unborn child. How do you think it? Why does the law permit it?

BF4: The faith or religion is one dimension of the society. When people do not have the faith it is easily to ignore the human dignity of the unborn child. As I have said I do not know that unborn child is a life. My teacher the doctor who does not think that unborn child is a life. I think many doctors still have such idea. Not alone the law system. The layer will be mush selfish I mean maybe...than the doctor.

BF5: To raise a child is not easy. Family planning program told us, I mean our nurse to have the right to decide the number of the children. It will ease our sense of guilty to abort the baby. And we have the law to abort the baby what could be good news to most women when their families' economies are not so good. Like President Chen and I have five children which is not easier at that time. What I want to say that it is the problem of time. Law is the product of history or society. We have to preach the good news of Christian faith then we could save more babies.

BF7: It makes my position strong again. I mean to promote the Natural Family Program again.

BF6: I think I need to concern the similar problem with my children. My age is over 70. I will bring this question to my children to think about it since I follow the law of God, not the law of the world. I do not have any opportunity to ask or to discuss the similar question with them.

BF8: I worry that we cannot change the world or the law system. My religious life is not long enough or strong enough. I cannot answer this question.

Researcher: I concern that do you feel any conflict between your faith and the world law system.

BF4: I don't have the conflict now since I am an adult and I support President Chen and my wife's idea that we need to transmit it to our next and next generations before it is too late.

Researcher: The last question. It requires a mandatory pre-abortion counseling before women seeking abortion in Singapore. And it also requires 48 hours of waiting period after counseling. How do you think this kind of institutional settings about the abortion?

BF9: I think it is necessary though I support that women have the right to abortion, especially when the unborn child is abnormal. Counselling could help women to know more about the related resources of giving birth or abortion. I regard it as one thing with two sides. Giving birth or abortion has the risk. I am a nurse too. I think

most women do not have the right cognition on both giving birth and abortion. I think it is important to let more women know this truth.

BF8: I even think that the husband also needs to participant pre-abortion counseling. Men are not clear about the birth because they cannot become pregnant. And in the similar way men do not know how to help while women want to abort the babies. They need to share the same responsibility. I want to emphasize the word “to help” that is the urgent thing for men to learn. I think that most men learn how to be a father with the help of their wives. Abortion should not become the burden only to women for most of the time men are the trouble maker. I indicate the trouble of the unwanted pregnancy.

BF4: If the governments have the budget to provide free pre-abortion counseling I will support it. I mean nobody will pay for pre-abortion counseling before seeking abortion since abortion itself will be charged already. Nobody want to pay more. Human nature is quite weak even though I am a doctor. I learn the responsibility from being a father and husband. Otherwise I only know to seek the pleasure of myself. I could learn a lot of money and spent it quickly if I do not fall in love with my wife. She is a wise and beautiful woman. That is marriage. But I am not perfect I have said that I have asked my wife to abort our unwanted babies before I receive the baptism. I support that the Catholic faith is truly good value for human beings.

BF5: I agree if we could know more about the value of the unborn child I will not abort our children. I thank God I become the Catholic and I could do the right thing. There are clear teachings from the Catholic.

BF7: I think Taiwan government has the big problem. Why we do not have the similar requirement? I don't even think that our government knows what the real problem is. I cannot know why the feminists are dominating the mass media and the government is kidnaped by both of them. I think it will be great if we have the pre-abortion counseling and waiting period. But the problem is who will listen to it except the catholic?

BF6: I support these institutional settings if we could succeed to promote it in Taiwan. Researcher: President helps us to come to the end and no need to ask the question if we promote the pre-abortion counseling will you support it? Let's stop here and thank you all.

Focus Group Interview with Faith-Based-Single-Adult-Females in Taiwan

20161117 in 大坪林天主堂

Researcher: Do you think that the unborn children have the rights to live? What's the concept of the human dignity of the unborn child? How do you think about the human dignity of the unborn child? Do they have the rights to live?

BF10 : Yes, they have. It's a life. It's created by the image of God.

BF11 : Yes, they have right to live.

BF12 : I think it depends. If the unborn child is healthy, and the mother has the ability to raise it, then I think it is Okay. Otherwise, There are many different cases.

Researcher: Thank you. My next question will be more defined as the problem you concerned. Okay?

BF12 : Okay

Researcher: The next question is that the law of Taiwan permits women to abort the fetus before it is within 24 weeks. Do you know this? There are six items to permit abortion. 1) While the parents has the genetic disease. 2) The families has genetic disease.3) While the unborn child gas the genetic disease. 4) While this unborn child is conceived due to the rape.5). While the pregnancy would be harmful to the mother. 6) While this pregnancy would affect the family life or cause the women's psychological presser. The No. 6 would cause 95% abortion in Taiwan. How do you think its legitimacy? Dose the government have the right to abort baby? Why women need to abort their babies?

BF10 : I don't know that. I only think that the unborn child is innocent. We adults need to know that abortion would hurt both the mother and child. It cannot solve the problem.

BF11 : I agree it. And I do not know the percentage is like that. It's horrible. I think abortion is abused. We need to be more careful about it, especially we are Catholic. We need to know what we could do or not to do according to the faith.

BF12 : I still concern why women choose abortions. They must have some big problems that they cannot solve. We need to understand it first.

Researcher: Let's come back to the question why do you have the idea that the unborn child has the rights to live? How do you have the idea that the unborn child has the right to live. Is it from your faith, family or education?

BF10 : I learn it from my family and the faith. I have no doubt with it.

BF11 : I learn it from the school and the faith. I need to learn more. Sometimes I am not so sure.

BF12 : I learn it from my family and the school. I have some different ideas from the faith. Maybe I am still learning since it is not an easy problem. We could see things in different ways.

Researchers : Sure and thank you. There is mandatory pre-abortion counseling before women seeking abortion in Singapore. And it also requires 48 hours of waiting period

after counseling. How do you think of this kind of institutional settings about the abortion? Do you think it is a good institutional setting while the unborn child could not speak for themselves inside of the mother's womb?

BF10 : I think it is a good way to help women who have some difficulties. And it could also help women to re-think about their abortion decision before they do it.

BF11 : Yes, I think it is good and necessary. Abortion has been abused in Taiwan. I love the institutional settings of Singapore.

B12 : Yes, I think it could help and it is good. But how carry it out?

Researchers : Good question, I could learn it together after my research has done, Okay? There comes the next question. Some radical feminists regard the mandatory pre-abortion counseling as well as the waiting period as a violating to their rights of autonomy to abortion. How do you think of it? Do you also regard it as a violating to women of their rights of autonomy of abortion?

BF10 : No, I don't think it is violating women's right. Then women still could make their own decision after the counseling. It is a way to help women to re-think about it what they are doing abortion.

BF11 : Yes, I think it is helpful. Too many women are too harshly to make a an abortion decision.

BF12 : Yes, I agree with it. It could help. And to make an important decision needs more times and advices. It's not a violating.

Researcher: Will you support it if some people want to promote the mandatory pre-abortion counseling as well as waiting period in Taiwan? How many days do you think it is more helpful?

BF10 : Yes, I will support it. And I think 7 days is more helpful.

BF11 : Yes, I will support it. And I think 7 days is proper.

BF12 : Yes, I will support it, but I think 2 or 3 days is enough.

Researcher: No more questions. Thank you so much!

Focus Group Interview with Faith-based-Single-Adult-Males in Taiwan
20161206 in Cardinal Tien Hospital

Researcher: Do you think that the unborn children have the right to live? What's the concept of the human dignity of the unborn child? How do you think about the human dignity of the unborn child? Do they have the right to live?

BF13: I have to say that the unborn child has the right to live. It is a life from the beginning of the conception. The science has proved it that is life. No matter how small it is. It's a life and it has the right to live.

BF14 : I have the different idea. I think the mother having the more superior right than the unborn child. I don't even think that the unborn child is a life. I could accept it as a life only after it has its own heart beating.

BF15 : I am a catholic so I think the unborn child is a life from the beginning of the conception. And that is the foundation of its basic right to life.

Researcher: Okay. My next question is why do you have the idea about the human dignity of the unborn child? It's from your faith, family or education?

BF13: I am a catholic and I would like to follow my faith. And furthermore I agree with the teachings and the perspectives from my faith.

BF14 : Though I am a catholic I think I am also influenced by the school teachings that the couples or parents have the basic rights over their babies. They could make their own decisions.

BF15 : I do not receive the teachings from catholic formally. Basically I was influenced by the school teachings like the course of Health and Life in Junior High School. I think the unborn child has the right to live.

Researcher: The next question is the law permits women to abort before the fetus is within 24 weeks. How do you think its legitimacy, especially you all catholic?

BF13: I will divide the pregnancy as two categories. One is those women who are voluntary to become pregnant; the other are those who are not voluntary pregnant. The former needs to take their responsibility to decide. I mean they need to continue their pregnancy unless the unborn child is raped, ill-gene or causing harm to the mother. That is the latter I labeled those who are raped, ill-gene or causing harm to the mother. Then they have the right to abort the unborn child.

BF14 : I need to say that the mother or the women having the legitimacy to claim that they have the right to keep the baby or to abort the baby. The law is acknowledged as the right for women to keep the baby or to abort it.

BF15 : I would like to follow the law from God. I mean to keep the baby. But I have to admit that it is not easy to follow if the unborn child is ill-gene or raped or causing harm to the mother. I might abort it if the unborn child is ill-gene or raped or causing

harm to the mother and the law permits it.

Researcher: There is mandatory pre-abortion counseling before women seeking abortion in Singapore. And it also requires 48 hours of waiting period after counseling. How do you think this kind of institutional settings about the abortion? Do you think it is necessary?

BF13: I think it is necessary. It is a good way to protect the unborn child. It could help women to think more about the human dignity of the unborn child. Even it is a good chance to provide the recourses both for the mother and unborn child.

BF14 : I think it is necessary. Women could have more opportunity to consider their pregnancy and I also think the men or the husband also need to have such a process. I mean to receive the pre-abortion counselling.

BF15 : I think it is necessary. It' is a good chance both for the mother and unborn child to re-think about it before abortion.

Researcher: The next question is about the perspective form the radical feminists. They regard the pre-abortion counselling is violating their basic human right to make their own decision. How do you think about it?

BF13: I think the government tends to give sugar to those who are noisy. It is not good. Those noises are not the truth.

BF14 : I think the radical feminists are just some few minorities. I don't think they could really represent the most majorities of the women. I prefer to support the pre-abortion counselling. And I suggest that men also need it.

BF15 : I think if the radical feminists usually prefer to abort the babies the institutional settings of pre-abortion counselling make no any trouble for them but it is important to those who needs this chance to know more about the recourses.

Researcher: The last next question: will you support it if we promote the pre-abortion counselling and waiting period? Is two days enough or too long?

BF13: I will support it and I think three days is enough.

BF14 : I think pre-abortion counselling is necessary but let the women decide how long she wants to make the final decision.

BF15 : I support it and I think no need to set the waiting period.

Researcher: Thank you. No more questions.

Focus Group Interview with Faith-Based-Teen-Girls in Taiwan
201603 in CTCN

Researcher: Do you think that the unborn child have the right to to live and to enjoy the human dignity of life?

BF16: Yes, they have the right to live.

BF17: Me, too.

BF18: Yes, I agree with it.

Researcher: My second question is: if the unborn child is healthy, that pregnancy will not hurt the mother, and the unborn child does not have any genetic disease, the parents and the families do not have any genetic disease, and it is not conceived by rape, how do you think that this unborn child have the right to live?

BF16: Yes. They have the right to live.

BF17: Yes.

BF18: Yes.

Researcher: How and where did you get the concept of human dignity of the unborn child? Is it from your parents or from school's teachings?

BF16: I think I learn it from my faith. God creates human beings. it is a life from God.

BF17: Yes, I also learn it from my Faith. The unborn child is a human being.

BF18: Yes. I also learn it from my God. We are all Catholic.

Researcher: Thank you, next question. Some women choose to have abortion, not only in Taiwan. Do you know why and how women choose to abort the unborn child? How do you think of abortion?

BF16: I think they might have some problems. Maybe they are young and they do not have enough money.

BF17: Yes, Maybe they are afraid of telling their parents. You know some teens will borrow money from friends to abort the unborn child. I heard about.

BF18: Yes. Yes, I think they have some problems to tell others and abortion is a quick way to solve the problem immediately. I mean teen or women are the same. And problems may repeat.

Researcher: Thank you. There are mandatory pre-abortion counseling and 48 waiting period after the counseling, they are called some institutional settings, while women demand abortion in Singapore, but we do not have it in Taiwan. Do you think the

mandatory pre-abortion counseling and 48 waiting period after the counseling are helpful to solve abortion problems?

BF16: Maybe. I don't know. If it is mandatory, I think some teens or women may go underway and secretly do it.

BF17: Yes, I think it could be good. But I don't think people really want it. If it becomes a kind of law, right? I think people will try some other ways to face it.

Researcher: Do you mean that it is useless, right?

BF16&BF17: That's what I mean. (They laugh.)

Researcher: How do you think? What's your opinion?

BF18: Yes, I think it could be help if the government has some financial aids.

BF16&BF17: Yes, Then there will be different. It could be helpful.

Researcher: You mean economic is very important factors, right?

BF16&BF17&BF18: Yes. (They all nod the heads and say "yes" powerfully!)

Researcher: If we promote the similar ways, will you support it? I mean the mandatory pre-abortion counseling and 48 waiting period after the counseling in Taiwan.

BF16: Yes, I will. Is there economic aid included, or not?

Researcher: Good questions.

BF17: If there is no economic aid, I think it will not succeed.

BF18: Yes, I agree with it.

Focus Group Interview with Faith-Based-Teen-Boys in Taiwan
201503 in Our Lady of Mount Carmel

Researcher: Do you think that the unborn children have the rights to live? What's the concept of the human dignity of the unborn child? How do you think about the human dignity of the unborn child? Do they have the rights to live?

BF19 : Yes, they have.

BF20 : Yes, they should have right to live.

BF21 : Yes, yes.

(And they all nod their heads.)

Researcher: Thank you. My next question is why do you have the idea that the unborn child has the rights to live? How do you have the idea that the unborn child have the right to live. Is it from your faith, family or education?

BF19 : It's a life. And I learn from my parents. The school also tells us.

BF20 : I learn from the school and the church.

BF21 : I have the idea my parents as well as from the church. The school also tells us how we come from, so the unborn child has the life.

Researcher: The next question is that the law of Taiwan permits women to abort the fetus before it is within 24 weeks. Do you know this? How do you think its legitimacy? Dose the government have the right to abort baby? Why women need to abort their babies?

BF19 : I think that the women may have some difficulties to continue the pregnancy. Maybe they don't have the money to raise the baby. So the government permits them to abort the unborn child. I don't know why the government needs to govern this thing. May it is because it is called law.

BF21 : Yes, maybe the women have the problems, like outside marriage or the pre-marital sex. I think many governments just have to do his job to govern this thing.

BF20 : I think that the women just don't want it while they have some problems. And I think it's very bad for the unborn child. We need to do things carefully. We need to think about it before do anything. Even the law permits us to abort the unborn child. I still think that it's not fair to the unborn child.

Researcher: If the unborn child is normal, and having this pregnancy is not harmful to the mother, and there is no rape regarding to this pregnancy, and there is no genetic problem happening to this unborn child, will you think that this unborn child has the right to live?

BF19 : Yes, I think this unborn child has the rights to live under such kind of healthy and normal condition.

BF21 : Yes, I agree. He or she has no any genetic problem and will not damage the health of the mother. I do not think that we could abort the unborn child while they are healthy.

BF20 : I agree. We should even need to protect the unhealthy baby according to the teachings of the Catholic Church.

Researchers : There is mandatory pre-abortion counseling before women seeking abortion in Singapore. And it also requires 48 hours of waiting period after counseling. How do you think of this kind of institutional settings about the abortion? Do you think it is a good institutional setting while the unborn child could not speak for themselves inside of the mother's womb?

BF19 : I think it is a good institution. It could help women to re-think about their decision if originally they want to abort it.

BF20 : Yes, I agree. I think it is a good way to help women to re-think about the problem.

BF21 : I think it is a good way to help us women to think more and make a a right decision. We need time to make a right decision. Right decision needs more time and we also need other's advice.

Researchers : Some radical feminists regard the mandatory pre-abortion counseling as well as the waiting period as a violating to their rights of autonomy to abortion. How do you think of it? Do you also regard it as a violating to women of their rights of autonomy of abortion?

BF19 : No. I don't think so. I think we need other's advice.

BF21 : It needs to think more. We cannot make a decision within a short time. Actually, we all need to think about this question seriously. I mean all the society.

BF20 : It's not easy. Both women and man need time and organization to help, like when we teens we need our parents' advice. Parent's advice usually helps us, and they are always standing by us. They basically would like to give us the best. The mandatory pre-abortion counseling and 48 hours of waiting period would help us to

make a better decision.

Researcher: Will you support it if some people want to promote the mandatory pre-abortion counseling as well as waiting period in Taiwan? How many days do you think it is more helpful?

BF19 : Yes, I will support it. And I think two days is enough.

BF21 : Yes, I will support it. And I think seven days is better.

BF20 : Yes, I will support it, but I think 5 days is better.

Researcher: Thank you. No more questions.

Focus Group Interview with Non-Faith-Doctors in Taiwan 20170210 in Cardinal Tien Hospital

Researcher: Thank you. My question is: if the unborn child is healthy, that pregnancy will not hurt the mother, and the unborn child do not have any genetic disease, the parents and the families do not have any genetic disease, and it is not conceived by rape, how do you think that this unborn child have the right to live?

B22: I think the parents have the right to decide then it has the right to live.

B23: Yes, I agree. I like to think it from the point of law which is the basic line to make the decision even though the unborn child has the right to live.

B24: I think the unborn child has the right to live but if the parents do not want it that is the abortion problem arises.

Researcher: Thank you. Next question is how and where did you get the concept of human dignity of the unborn child? Is it from your parents or from school's teachings?

B22: I don't know, I do not trace its development. That's what I have now.

B23: Maybe I learn it from my parents and all my educational process. I prefer to think about things from the point of view of law. I think it's basic.

B24: I think it's natural, I mean I think the unborn child has the basic right but it depends on the parents and the nation. If the parents have good idea and have the ability to raise it, it is also natural.

Researcher: Thank you. Next question, some women choose to have abortion. Do you know why and how women choose to abort the unborn child? How do you think of abortion?

B22: It depends. The factors of faith as well as the economic condition are all included. Sometimes the social considerations are also important factors. People concern how others ideas or attitudes and decision of having the kids or aborting it.

There are some many teens and families have needs to abortion. People have different educational backgrounds that will affect how they consider and respond to the abortion problems. There are many different situations regarding abortion.

B23: Women have the need of abortion. People need to make some important decision. Abortion is one of the important decision people need to make. Economic and faith and education are some important factors.

B24: Sometimes people do not have enough resources or ability to make a decision not to abort the kid, but what I concern is the problem how the state sees and thinks this problem. If the kid is health and not have any genetic disease, the parents and the families do not have any genetic disease, and it is not conceived by rape, will the state have the ability or some institutional settings to help the women or the families to raise the unborn child? What does the state really concern? If the state's will is not for sure, while we discuss the human dignity or human right of the unborn child, it will be empty. If the state does not have the proper resources including the salary, training, or education, we could say that we are not ready to discuss the abortion problem. Then Abortion happens every day.

Researcher: Thank you, next question. In Singapore, there are mandatory pre-abortion counseling and 48 waiting period after the counseling. Do you know that? I mean the pre-abortion counseling and 48 hours waiting period is good? How do you think about it?

B22: I support it.

B23: I also support it.

B24: No, my answer will remain as the same as what I have talked above while you ask the abortion problem.

Researcher: Thank you, next question. Do you think that the mandatory pre-abortion counseling and 48 waiting period is violating the women's reproductive right?

B22: No, I don't think so. It's a chance to reconsider the problem again. Women still have their own autonomy to make the final decision after the counseling as well as the pondering period.

B23: I don't think it violates women's autonomy, either. Women could make their own decision while they receive the counseling. This process is designed for help. I think it is helpful for those who tend easily make lousy decisions.

B24: No, I don't think it violates women's autonomy, either. But again I concern if the government are really ready to do it or it's just functioned as formal process. Then it's useless.

Researcher: If we adopt these institutional settings, do we only adopt the mandatory pre-abortion counseling alone, or plus, 48 hours waiting period?

B22: Yes, I will support it.

B23: I will support it.

B24: I have made my viewpoint clear enough, right?!

Researcher: Yes. I know. Thank you. No more questions.

Focus Group Interview with Non-Faith-Couples in Taiwan

201701 in CTCN

Researcher: Do you think that the unborn child has the right to live and to enjoy the human dignity of life?

B25: Yes, they have. I have to admit that my first child is conceived with my wife now before get married and I decide to keep the child and marry her. It's a life. They are our own children. How can we abort it?

B26: It depends. If the unborn child is healthy and the couples have the good condition, then they could make their own better decision.

B27: I agree with it.

B28: I think the unborn child has the right to live. I agree with my husband's idea as he has mentioned. We keep the baby and get married. We never regret with that decision. But we have to be careful to become pregnant.

B29: I think it has the right to live. What my husband wants to say is about the family plan. I think the family plan does not contradict with the human dignity of the unborn child. The couples need to be responsible with their intimacy and marital sex.

B30: I agree with my husband. The unborn child has the right to live if they are healthy.

Researcher: So my second question is related. If the unborn child is healthy, that pregnancy will not hurt the mother, and the unborn child dose not have any genetic disease, the parents and the families do not have any genetic disease, and it is not conceived by rape, how do you think that this unborn child have the right to live?

B25: Of course, the unborn child has the right to live if he or she is health and as the

bad conditions have been excluded. And I still want to emphasize that the unborn child has the basic human right to live even when it is unhealthy.

B26: I agree that the unborn child has the right to live under these conditions. That is what I want to explain about the 1st question.

B27: I agree with it.

B28: I think it is much clearer that the unborn child has the right to live. It has the right to live.

B29: Yes, I agree.

B30: I agree too.

Researcher: How and where did you get the concept of human dignity of the unborn child? Is it from your parent or from school's teachings?

B25: I think it is natural. I learn it from my parents. Those old traditions are handed like what I have said and I am influenced. I think it is a good tradition.

B26: I learn more from the school teachings. We need to make a more balanced decision, so it depends.

B27: I both learn from my parents and the school. And we could make our own decision.

B28: I learn it both from my parents and school. I am happy I could have a similar concept with my husband.

B29: I learn it from my parents and the school's teachings.

B30: I learn it from my school teachings.

Researcher: Some women choose to have abortion. Do you know why and how? How do you think of abortion?

B25: I think most teens do not have enough concepts about the relationship of life and sex. As I said I have pre-marital sex before marriage. But the difference is I value the life of the unborn child. I worry that this kind of idea is fading away. That is the reason why most people abort their children. I think it is a problem. And another situation about the married women, as I know the outside marriage sexual relationship is a problem that caused a lot of abortion. I don't think economic could be a problem. If we want to have the sex, we need to consider the consequence before we do it. We also need to educate our kids to be responsible to sexual behavior.

B26: It is a complicated problem. People have their own free choices. We cannot criticize it too harshly. We also have the right to choose abortion because we have many different problems.

B27: That is a real problem in our society. Or I think it is not only happened in Taiwan.

B28: The teen pre-marital sex is a big problem. I also need to ask myself how well I could teach my own kids when they grow older. I think a good example of the parents could be a good solution. I have similar worry about the outside marriage sex. We heart a lot of sad stories around our young friends. They abort their unwanted pregnancy babies. I think it is much clearer that the unborn child has the right to live. It has the right to live.

B29: I always feel bad if I heard that some women need to end their unwanted pregnancy by an abortion.

B30: I think financial is a big problem. And female selection is another big problem. Most married women have the pressure to abort their girl-babies while they and their families are waiting for the unborn boys.

Researcher: Yes, It's sad. Do you think there could be a restriction before demanding an abortion? I mean the mandatory pre-abortion counselling and 48 waiting period after the counseling while women demand abortion in Singapore, but in Taiwan, we do not have these institutional settings. Some radical feminists claim that abortion is the basic women's right. Do you think mandatory pre-abortion counselling and 48 waiting period after the counseling would be helpful to decrease some sad abortions?

B25: I think it is good. I could help to think more before making the abortion decision. Why we don't have it?

B26: I think it could be helpful. But women have the final autonomy to make their own decision. It just provides a chance to rethink about it because abortion is still a big decision.

B27: I agree with it. It would be helpful.

B28: I think it is good if some resources could be also provided during the counseling.

B29: Yes, I agree with it. Most women need to solve the concrete problem, especially the economic problem.

B30: I agree with it too.

Researcher: Do you think it, I mean the mandatory pre-abortion counseling and 48 waiting period, is kind of violation to women's reproductive right?

B25: I don't think so. Women are still the main body to make their own decisions. I do worry about that our society over-emphasized the liberty. I think that the liberty still needs some rules. I even want the husband could also have a pre-abortion counseling. Men also need to learn more about the reality of the abortion and the life of the babies in the womb in order to support the women.

B26: I think we need to see both side of women and the unborn child. The mandatory pre-abortion counseling and waiting period are helpful to wave the problem in a more

proper way.

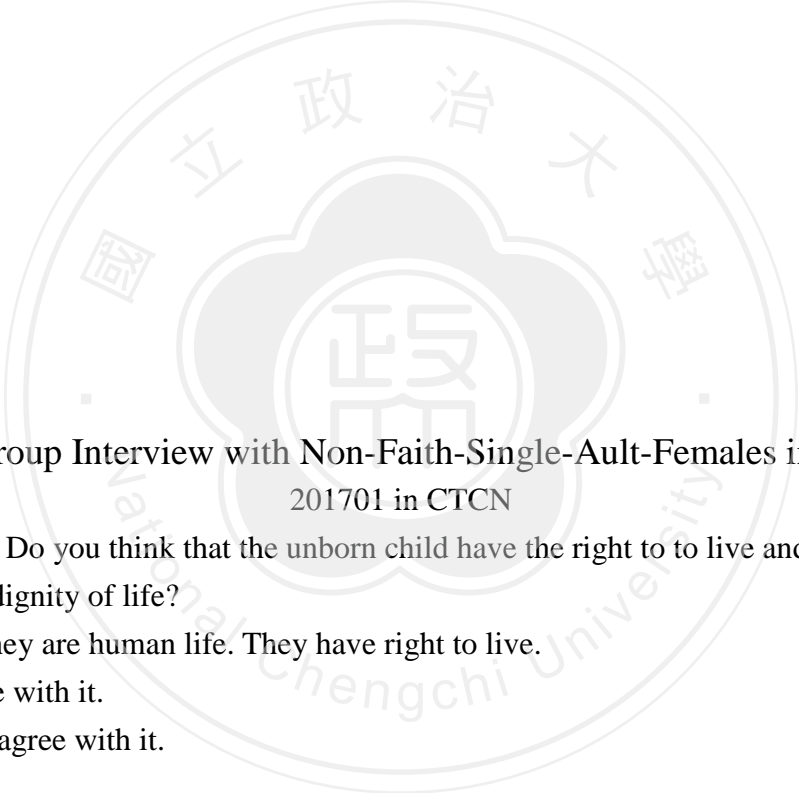
B27: I agree to see both sides of women and unborn child. It needs to adopt such a method to help the high abortion problem.

B28: I think not many women are radical and it could help the families to think more before demanding an abortion.

B29: Yes, I agree. Most women are doing abortion under pressure. Pre-abortion counseling could be helpful to make a wiser decision.

B30: I agree with it too.

Researcher: Thank you. No more questions.



Focus Group Interview with Non-Faith-Single-Adult-Females in Taiwan
201701 in CTCN

Researcher: Do you think that the unborn child have the right to to live and to enjoy the human dignity of life?

B31: Yes, they are human life. They have right to live.

B32: I agree with it.

B33: Yes. I agree with it.

Researcher: My second question is: if the unborn child is healthy, that pregnancy will not hurt the mother, and the unborn child does not have any genetic disease, the parents and the families do not have any genetic disease, and it is not conceived by rape, how do you think that this unborn child have the right to live?

B31: Yes, of course. They are healthy. I personally cannot accept to keep the unborn child while it is conceived by rape. It is hard to keep the baby under that situation.

Except it, actually, I agree all the unborn child has the right to live even when they are abnormal. You know they are innocent.

B32: Yes, the unborn child cannot speak. I want to say their right for them now.

B33: Yes. I think that the unborn child has the right to live.

Researcher: How and where did you get the concept of human dignity of the unborn child? Is it from your parent or from school's teachings?

B31: I mainly learn it from myself. I learn even from the web. There is a video which is about the abortion. I watched and knew it since my teen age. It helps me a lot to know how an unborn child is a real life. The abortion is so horrible.

B32: I learn it from the school. When I was about 14, my school Health Education teacher introduced that we could have the ability to conceive a baby even I was a teen. And I learn that I have to be careful about it. The unborn child is a life.

B33: I learn it from my parents and school's teachings. I think we have to now it carefully.

Researcher: Some women choose to have abortion. Do you know why and how? How do you think of abortion?

B31: I think the teens has the big problem. They don't have the basic concept. They usually come from some broken families. They feel lonely to have pre-marital sex and have the baby. Some married women might have some financial problem.

B32: I agree with that, I don't know why some teen gilds are so naive. They have to know how to protect themselves.

B33: Abortion was made by a lot of problem and really caused hurts. I think women and girls need to know that before having sex.

Researcher: There is a restriction before demanding an abortion in Singapore. I mean the mandatory pre-abortion counseling and 48 waiting period after the counseling while women demand abortion in Singapore, but in Taiwan, we do not have these institutional settings. Some radical feminists claim that abortion is the basic women's right. Do you think mandatory pre-abortion counseling and 48 waiting period after the counseling would be helpful to decrease some sad abortions?

B31: I think it is good. It could help the teens to be re-educated during the counseling. They usually have repeating premarital sex and pregnancy. It could help to re-think more before having sex and pregnancy decision.

B32: Yes, I think it is helpful. Is there any financial aid during the counseling? I mean while some women or teens have the economic problems. If it is possible that will be better.

B33: I agree with it. It is good and helpful.

Researcher: Do you think the mandatory pre-abortion counseling and 48 waiting period is violating to women's reproductive right?

B31: No, I don't think so. Teens and women need to re-think about it before abortion.

B32: I agree with it. It is necessary.

B33: Yes, I agree with it.

Researcher: If we promote the mandatory pre-abortion counseling and 48 waiting period after the counseling, will you support it? How many days of waiting period is proper?

B31: Yes, I will support it. And I think 3 or 5 days will be better.

B32: I will also support it. And I think 7 days will be better.

B33: Yes, I will support it. I also agree 7 days will be better.

Researcher: No more questions. Thank you so much.



Focus Group Interview with Non-Faith-Single-Ault-Males in Taiwan
201701 in CTCN

Researcher: Do you think that the unborn child have the right to to live and to enjoy the human dignity of life?

B34: Yes,I think the unborn child is human life and they have right to live.

B35: I think we need to check it from the point of judiciary and the definition of natural person. If the perspective of law and natural person affirm it then I will say that the unborn child has the right to live, if the perspective of law and neutral person reject it, then I will say it does not has the right to live.

B36: I cannot understand your question. I cannot understand why you ask the human dignity of the unborn child since I do not know if the unborn child has the right or human dignity. So I cannot answer your question.

B35: That's why I ask the definition form the perspectives of judiciary. I try to clarify the question. First, it is assumption, it is not a definition. Basically, the question could

be asked like this: if the unborn child has the human dignity, do you agree with it?

B36: Then, I am clearer now. I would say it depends. There could be several definitions. I would like to ask when the unborn child has its own heart beating. I think if the unborn child has its own heart beating, I will say that it has the right to live.

Researcher: Thanks for the clarification. And it's a good discussion and question. Since this is an interview, it is not a course. Now I am a researcher, not a teacher. As a researcher, I cannot teach or dominate the discussion what I could do is only to lead the discussion and to remain objective. According to the embryology, the unborn child has its own heart beating from 21 days after the conception.

B36: Yes, good, then it is clear now. Then I will say yes, it has the right or human dignity to live.

Researcher: My second question is: if the unborn child is healthy, that pregnancy will not hurt the mother, and the unborn child does not have any genetic disease, the parents and the families do not have any genetic disease, and it is not conceived by rape, how do you think that this unborn child have the right to live?

B34: Yes. Actually, I will support the unborn child even it is unhealthy and conceived by rape. I know most people will not accept it. I know it is hard. I just want to say that the unborn child are innocent and even they are abnormal. It is a life. We eat also some ugly vegetables, right? Down syndrome children are some good cases. I know most parents will become mad if they have the babies like that. I would say it could be OK to me if I get married and have an abnormal child. I will accept it since it is my child. It is not an animal though it has some problems. I will try my best to raise it and love it. I emphasize that it is my child.

B35: You mean the unborn child is healthy, right? And not conceived by rape, right? Then I will say yes. The unborn child has his or her right to live.

B36: Yes. I agree but I also think the parents also have the rights to make their own decisions on this unborn child.

Researcher: How and where did you get the concept of human dignity of the unborn child? Is it from your parents or from school's teachings?

B34: I think it is developed gradually. It's divided as three stages. First, when I was a teen I do not think that the unborn child has its own human dignity. Teen wants to do some cool things, like to be cruel and do not think about unborn child is a life. Teen is like a child. And teens struggle to grow up or not to. It's a hard time. When I become an adult, I start to think things deeply. I even want to marry a nice lady and have a family. I try to understand what the meaning of family and marriage is. That is the second stage. And now I have a girl-friend, I love her and we are thinking to get

married. And we discuss about how many children we want to have. Then comes to the third stage, and I know I want to be a father in the future. I ask myself what the meaning to be a husband and to be a father. I become more responsible to love my girl-friend, my future wife, and I also want to be a good husband for her and father for my sons or daughters. There are different stages of the concept about the unborn child.

B35: I personally learn it from the school. The book said there is a puberty stage, and I know I could make a baby with a girl, but the things are what kind of girls I love. I know that I could only have it come true when I am ready and it could be several years after I finish my own study plan. I have to be careful about the things what people called love. It is dangerous. There are many things I need to learn.

B36: I also learn it from the school's teachings but it is not much. I think I am learning. I need to know and to learn a lot.

Researcher: Thank you, next question. Some women choose to have abortion, not only in Taiwan. It's globally. Do you know why and how women choose to abort the unborn child? How do you think of abortion?

B34: I personally cannot accept abortion. If the marriage and wife is clear, bearing children is normal. And we need to plan. Once we have the child then, give birth to it., even it is abnormal as what I have said. I cannot think people need to abort their unborn children. I don't think economic is a reason. It's kind of weakness or lack of plan. Some people don't have the basic idea about the marriage and family. We can not only enjoy marital sex and not to have the idea of pregnancy.

B35: I think some abortions come from the condom failure. It is hard to say that I really understand why women choose abortions. I think they might have some pressure. As I know some of my friends give the order to their lady friends to abort while the condom failures happed. It is a hard decision I think. Economic problem could be a reason. That's what I know.

B36: I think women are under much pressure while some men are irresponsible. I think it is not an easy problem to solve. Abortions exist and it is a problem. That is what you want to do the research, right?

Researcher: Yes. Thank you for your understanding.

Researcher: Okay, the mandatory pre-abortion counseling and 48 waiting period after the counseling, they are called some institutional settings, while women demand abortion in Singapore, but we do not have it in Taiwan. Do you think the mandatory pre-abortion counseling and 48 waiting period after the counseling are helpful to solve some abortion problems?

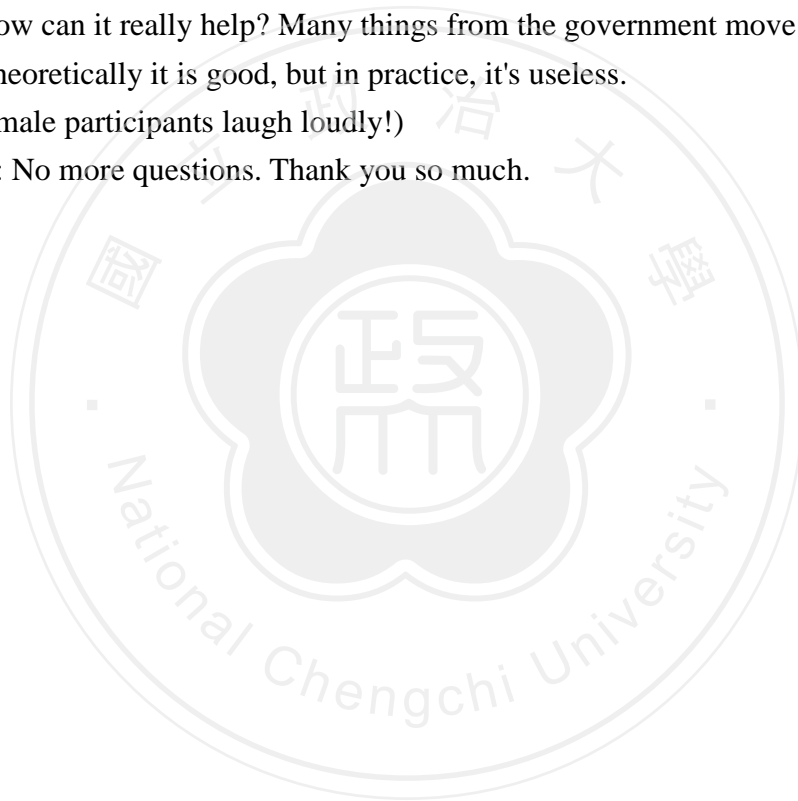
B34: I think it is good. It could give the chance to re-think about if it is really okay to do abortion or not. Some teens are too young to make a right decision.

B35: Yes, I think it is good. But I don't think waiting period is helpful. Counseling is enough, no need to wait some other days. Especially when some women only need some advices, most women have their own decisions before seeking others opinions. Counseling is good for those who are waving. They really need some helps. If the government could provide financial aids, then that will be much better for those kind of institutional settings.

B36: I don't know but basically, it sounds good. It could be helpful for those who are thinking to have abortions. But in practice dimension, mandatory is good, but if there are some leaking points, like if it is just as a paper work. Then people may formally follow it, how can it really help? Many things from the government move like that. I still think theoretically it is good, but in practice, it's useless.

(All of the male participants laugh loudly!)

Researcher: No more questions. Thank you so much.



Focus Group Interview with Non-Faith-Teen-Girls in Taiwan

201605 in CTCN

Researcher: Do you think that the unborn child have the right to to live and to enjoy the human dignity of life?

B37: It depends. If the unborn child is not so big, I mean in the early stage of pregnancy, the mother have the right to abort it as I know.

B38: M.., I think the unborn child is still a life though the mother has the right to abort

it.

B39: No, I mean the unborn child is a human life. Even the mother has the right to abort it. We need to think more about it before make an abortion decision.

Researcher: My second question is: if the unborn child is healthy, that pregnancy will not hurt the mother, and the unborn child do not have any genetic disease, the parents and the families do not have any genetic disease, and it is not conceived by rape, how do you think that this unborn child have the right to live?

B37: You mean that the unborn child is healthy, right?

Researcher: Yes.

B38: I will say yes, but still, I think the mother still have the right to make the final decision.

B39: M., I think the unborn child has the right to live and the mother need to think more about the life of the baby.

B39: I think the unborn child has the right to live and the mother cannot abort a healthy child.

Researcher: I am doing the research, you could have different opinions. Okay. My next question is how and where did you get the concept of human dignity of the unborn child? Is it from your parents or from school's teachings?

B37: I think I learn it from school.

B38: Yes, I also learn it from school. But I have my own idea.

B39: I learn it from Bible though I baptized but I seldom attend any religious activities. But I think it is important.

Researcher: Thank you, next question. Some women choose to have abortion, not only in Taiwan. Do you know why and how women choose to abort the unborn child? How do you think of abortion?

B37: I think some teen girls have such problems and some married women have the similar problems. They want to enjoy sex but do not want to take responsibility.

B38: Yes, some teen have the problems, but not the girls, including the boys. They just choose an easier way, but I don't think abortion is a good way to solve the problem. It just looks to solve the problem quickly, but the influence lasts. Some teens and women may repeat the similar problem.

B39: Yes. Yes, I agree with it. It looks like an easier way, but it hurts. And the problems repeat.

Researcher: Wow, great, next question. There are mandatory pre-abortion counseling

and 48 waiting period after the counseling, they are called some institutional settings, while women demand abortion in Singapore, but we do not have it in Taiwan. Do you think the mandatory pre-abortion counseling and 48 waiting period after the counseling are helpful to solve abortion problems?

B37: I think it could help the teens and women to re-think about their decisions before doing abortions.

B38: Yes, I think it is necessary to re-think about it. Abortion is not a small problem. It is a big problem. People need to think about it more in details.

B39: Yes, I think it could help. Is there any possible to provide financial aids? If it is possible, I think it will be really helpful.

(They look each other and nod the heads.)

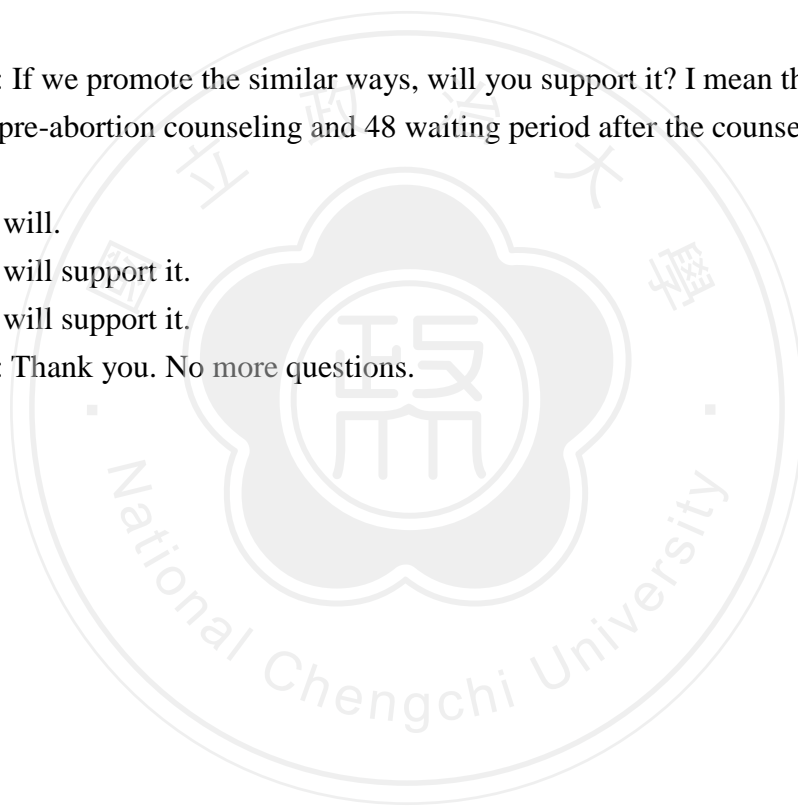
Researcher: If we promote the similar ways, will you support it? I mean the mandatory pre-abortion counseling and 48 waiting period after the counseling in Taiwan.

B37: Yes, I will.

B38: Yes, I will support it.

B39: Yes, I will support it.

Researcher: Thank you. No more questions.



Focus Group Interview with Non-Faith-Teen-Boys in Taiwan

20161207 Junior College of Cardinal Tien Healthcare and Management

Researcher: Do you think that the unborn children have the rights to live? What's the

concept of the human dignity of the unborn child? How do you think about the human dignity of the unborn child? Do they have the rights to live?

B40 : Yes, they have.

B41 : Yes, they have.

B42 : Yes, they have.

(And They all nod their heads.)

Researcher: Thank you. My next question is why do you have the idea that the unborn child has the rights to live? It's from your faith, family or education?

B40 : It's natural. We all come from it.

B41 : Yes, I agree. I have the idea from my family. We all come from family and parents.

B42 : I have the idea from the school teachings. It's life from the egg meeting the sperm. That's the beginning of life. We come from it.

Researcher: The next question is that the law of Taiwan permits women to abort before the fetus is within 24 weeks. How do you think its legitimacy? Dose the government have the right to abort baby? Why women need to abort their babies?

B40 : I think the government has the right to permit aborting the unborn child. And I think that women who decide to abort their babies when they have some problems, such as they do not want it.

B41 : I think many governments, I mean many countries permit women to abort their babies while they have the problem like the unborn child is abnormal or they have the economic problems. I don't think that the government or the law could permit to abort the babies while they have the heart beating. I think it is a life while the unborn child has the heart beating. The law should not permit it to be aborted.

B42 : I do not know why the government permits women to abort their babies. It's a kind of national authority. I also do not know why and how the governments have such kind of authorities. Who give it to government? My personal idea is that I have heard of such kind of problems. I try to understand that women might have some problems and the governments just permit it.

Researcher: If the unborn child is normal, and having this pregnancy is not harmful to the mother, and there is no rape regarding to this pregnancy, and there is no genetic problem happening to this unborn child, will you think that this unborn child has the right to live?

B40 : I think this unborn child having the rights to live under such kind of healthy and

normal condition.

B41 : Yes, I agree. I do not think that we could abort the unborn child while they are healthy. The governments need to provide more ways to help more babies to survive.

B42 : I think the healthy babies have the right to live. But when the women having some problems to raise up the babies, they also have the rights to decide to abort their babies.

Researchers : There is mandatory pre-abortion counseling before women seeking abortion in Singapore. And it also requires 48 hours of waiting period after counseling. How do you think of this kind of institutional settings about the abortion? Do you think it is a good institutional setting while the unborn child could not speak for themselves inside of the mother's womb?

B40 : I think it is good. It could help women to re-think about the rights of the unborn child before they want to abort.

B41 : Yes, I agree. I think it is a good way to help women and the unborn child both.

B42 : Yes, I think it is a good way to help us to think more about abortion problem in a more balanced way.

Researchers : Some radical feminists regard the mandatory pre-abortion counseling as well as the waiting period as a violating to their rights of autonomy to abortion. How do you think of it? Do you also regard it as a violating to women of their rights of autonomy of abortion?

B40 : Yes, I think we need a more balanced way of thinking of this problem.

Pre-abortion counseling and waiting period could provide us to re-think of it more balanced.

B41 : Yes, I agree. Many things may have the conflicts. We can not only see one side. Women need to re-think about it. And the government needs to help the unborn child. I think it is a good.

B42 : Yes, sometimes it's a violating but sometimes we need to have more chances to re-think about it. I mean to know more about the abortion problem.

Researcher: Will you support it if some people want to promote the mandatory pre-abortion counseling as well as waiting period in Taiwan? How many days do you think it is more helpful?

B40 : I will support it. And I think seven days is more helpful.

B41 : Yes, I will. And I think seven days is helpful.

B42 : Yes, I will support it, but I think 3 or 5 days is enough.

Researcher: Thank you. No more questions.

