

Lesson #4 Iceland Video Discussion Guide for Teachers

Starting Question/Quote:

- ◆ Is anyone in Iceland against abortion?

Additional Questions for Students:

- ◆ How does the bishop of Iceland describe the group that is against abortion?
- ◆ What does the use of the word invisible make you think about the group?
- ◆ What other words might the bishop have used that might give a different message?
- ◆ How does the bishop's statement of an 'invisible' group compare to seeing the women in the second video?
- ◆ How does seeing someone make a different impact than hearing about someone?

Teacher Explanation: In *Iceland's Down Syndrome Dilemma*, the bishop of the Church of Iceland says that there is an “almost invisible group” that is against abortion. The use of the language “almost invisible group” is stronger than saying a minority group or small group and gives the sense of not only being a small group of people but also powerless, ineffective, and silenced. In contrast, the video, *Iceland is on Track to Eliminate Down Syndrome*, shows a group of pregnant women who have opted out of the screening. One mother claims that the results screening would not have made a difference for her. (Note: The underlying assumption is that in Iceland a positive test ends in an abortion and for this mother a positive test would not have resulted in an abortion.) In this second video, the choice to show the women who are against abortion gives this group visibility and a voice. In direct contrast to a group that is almost invisible this video makes the group visible and effective.

Starting Question/Quote:

- ◆ What does the video say about the unborn?

You never know what can become of your child. Children don't get to pick and choose the best genes from their parents.

Additional Questions for Students:

- ◆ The narrators claim that the mom, Thordis, doesn't discriminate between alcoholism and Down syndrome. As science learns more about genetic disorders and the genes that contribute to different characteristics and predispositions, how might Thordis respond to using other scientific data as a basis for an abortion?
- ◆ Why might the narrators have linked alcoholism and Down syndrome? How is alcoholism like and unlike Down syndrome? Given this, what do you think about potentially choosing abortion for those who have a genetic predisposition to alcoholism?
- ◆ What are the implications of the statement “Children are a mix of their parents DNA and not necessarily the best genes from each parent”?
- ◆ Why is it important to include that children are “not necessarily the best genes”?

TEACHING HUMAN DIGNITY

Teacher Explanation: In the first video, the narrators claim that Thordis doesn't discriminate between alcoholism and Down syndrome. It is important to note that Thordis has a problem with disability selective abortion because she believes that the government and healthcare industry are not allowing women to freely choose to have an abortion. In Iceland there is an expectation that women will be screened for Down syndrome and have an abortion if they have a positive result. This pressuring of women into particular paths is problematic for Thordis. Presumably, she would be ok with a woman choosing an abortion for any reason as long as she can make that choice in "freedom."

The comparison between alcoholism and Down syndrome is interesting because alcoholism has both a genetic and social component. Someone may have a genetic tendency for alcoholism, but if the person never comes into contact with alcohol then he/she cannot become an alcoholic. The comparison between the two highlights the intermingled roles of nature and nurture in the formation of a person. While genes give direction to the physical, psychological, and physiological formation of a person, a person is always more than just their genetic composition. Parents, siblings, extended family, the community, the environment, and society all play an enormous part in who a person becomes. It is impossible to predict who a person will be based entirely on their individual genome. This recognition of the complexity of an individual, of a person growing (in all aspects) over time stands in contrast to the choice to abort a child due only to genetic makeup. This is not to say that a person with Trisomy 21 will not have Down syndrome, but one cannot know even how a person's disability will play out in their lifetime. For example, doctors cannot predict how early interventions and therapies may help a person with Down syndrome.

Finally, Thordis says that not only do children not get to choose their DNA, but they don't necessarily get the best DNA from their parents. It is important to draw attention to the fact that children are offsprings of their parents. All of their DNA comes from their parents. In choosing to have an abortion, a parent is choosing to not accept part of themselves. Children don't get to pick and choose which genes they have, yet with disability selective abortion, a parent is able to pick and choose which children survive based on the particular child's genome, and this picking and choosing may potentially increase as technology increases.

Starting Question/Quote:

- ◆ What does the video say about people with Down syndrome?

The woman with Down syndrome says that people see only her disability; they do not see her. She does not see herself as defined by her disability. Rather she is a complex person composed of so much more than just Down syndrome. Those with Down syndrome are loved dearly by their parents.

Additional Questions for Student:

- ◆ What does the 30-year-old woman with Down syndrome say about her disability?
- ◆ Why is it important that the video shows the 30 year old woman in her acting class?
- ◆ How does Thordis see her daughter? What does Helga say about those with Down syndrome? What kind of language does she use? How does her language contribute to lessening the humanity of those with disabilities?

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Teacher Explanation: Throughout the videos, there are two very different viewpoints concerning those individuals who have Down syndrome. The counselor, Helga, has the viewpoint that those with Down syndrome in utero are a possible life and those that have been born are a problem. Helga's language throughout the videos serves to dismantle the humanity of the persons who have Down syndrome. Her language of "possible life" gives credibility to the opinion that those in utero are not a life yet. Even once a child is born with Down syndrome, Helga says it is not a good thing. Although the use of the word "thing" could refer to the whole situation or be a result of language barriers - the use of "it" and "thing" contribute to the dehumanizing rhetoric surrounding those with disability. For Helga, the focus is continually on the disability and other medical complications rather than particular individuals or the person as a whole.

This minimalist approach to individuals is overcome by the parents of children with Down syndrome who are shown to love and care for their children. They are able to see their child as a person who has a disability but is so much more than just a disability. This viewpoint is most strongly conveyed by the woman in her 30s with Down syndrome. She says that all people see is her disability but she is in an acting class, has moved out of her mother's house, has a boyfriend, etc. The video shows her as a full and developed person. Rather than the focus on suffering and problems given by the medical community, the video highlights her happiness and joy for the life she has. At the end of the video, Thordis, comments that she hopes her daughter will be "fully integrated on her own terms into society." Thordis sees her daughter as a person, as a member of society rather than just defined by her disability.

Starting Question/Quote:

- ◆ Hulga, the hospital counselor, says that "A young child with Downs might be cute but an older person further along the spectrum with more complications is not a good thing, a problem." How does this statement contribute to the continued practice of disability selective abortion?

Additional Questions for Student:

- ◆ How does Helga distinguish between young children and adults with Down syndrome?
- ◆ How does Helga distinguish between children with only Down syndrome and those with other medical complications in addition to Down syndrome?
- ◆ Why does Helga make these distinctions? What is her underlying assumption about people with Down syndrome?

Teacher Explanation: Helga makes distinctions between adults and children and between children with Down syndrome and those children who have more medical complications and are further along the Down syndrome spectrum. In making these distinctions, Helga points to the older, (male) and more severely disabled person as not suffering more but rather as a "problem," presumably to be fixed by not existing. While not explicitly making the following claims, Helga's statement reveals the mindset that contributes to the continuation of disability selective abortion: *In making the distinctions across age and the disability spectrum, Helga and others may agree that these particular individuals are a problem and should not be allowed to live. Given the current medical technology, all of those with a positive screening for Down syndrome are lumped together. There are not distinctions in the screening for how severe the disability will be. In addition, all cute children will eventually grow up to be adults who are not cute children. In conclusion, if we can't predict the severity of the disease and everyone will eventually no longer be a cute child, then we should agree to fix the problems by preventing the existence of anyone with Down syndrome.*

Starting Question/Quote:

- ◆ Helga says that life is not black and white, but rather, gray. How does her counseling contradict her statement and instead reveal a very black and white approach to disability?

Additional Questions for Student:

- ◆ How does Helga explain that life is gray? What does she say is gray about life?
- ◆ How does this approach to life (in actuality abortion) help mothers choose disability selective abortion?
- ◆ Given Iceland's abortion rates, do you think mothers are counseled to continue their pregnancies after a positive Down syndrome screening result?
- ◆ How might a different approach to the counseling that mothers receive contribute to a different outcome in Iceland?
- ◆ How does Helga's claim about life being gray contribute to the continuation of disability selective abortion?

Teacher Explanation: Even though Helga explains at one point that life is gray, for her the issue of Down syndrome seems to be black and white. Helga's interview highlights these inconsistencies in her worldview. She claims that abortion is not murder and that life is not black and white, yet in Iceland 100% of women with a positive screening choose abortion. Helga explains that she counsels women that they need to decide how they want to live their life. She argues that many times those with Down syndrome have other medical complications and refers to them as a problem. Helga's viewpoints don't allow for any gray that might result in choosing something other than abortion. Throughout her interview, it appears as though those with Down syndrome should not exist and consequently those with a positive test for Down syndrome should choose to have an abortion. This is a very black and white approach to life which presumably impacts Helga's counseling and conversation with women who have a positive test result for Down syndrome. Helga sees gray only in her justification that abortion is not murder. Maybe if Helga saw more shades of gray within humanity instead of just the black and white of disabled and healthy, her counseling would leave room for the continuation of life.

Starting Question/Quote:

- ◆ Hulda makes the statement: "Women will be upset if they have a child with Down syndrome and were not offered the screening." What does this statement assume or imply?

Additional Questions for Student:

- ◆ Hulda assumes that women will be upset if they have a child with Down syndrome. Is her assumption correct given the people interviewed in the videos? What about the women who choose not to be screened?
- ◆ Given the current social trends in Iceland, what is assumed about any woman who has a positive screening result for Down syndrome?
- ◆ How does this assumption impact a woman's choice to be screened?
- ◆ Thordis, the mother of a girl with Down syndrome, is critical of the government. She claims that there is a strong indirect message of what a mother should do. What has the Icelandic government done that has given this strong message? Are these same assumptions found in other places in the video?

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Teacher Explanation: Hulda explains that every woman is offered the Down syndrome screening. Although she admits that offering the screening may not be a neutral act in regards to disability selective abortion, she justifies offering the test to every woman by claiming that if she didn't offer the test and a mother gave birth to a child with Down syndrome the mother would come back to the hospital and ask why she wasn't offered the screening. This claim is packed with underlying assumptions about the entire enterprise of screening, counseling, and abortions. According to Hulda's opinion, a woman will be upset if she has a child with Down syndrome because, Hulda assumes, such women would choose to terminate their pregnancies given the opportunity. There is the possibility that a mother would be upset she was not offered the screening because she could not prepare herself and family for the medical struggles the new child would face when born. Given the statistics, at least in Iceland, this scenario seems improbable and not one that Hulda is assuming would happen. It is fair to say that Hulda assumes the mother regrets not having an abortion before her child was born.

The prevailing assumption in Iceland is that once a mother has a positive prenatal test for Down syndrome, she will choose to have an abortion. The mothers interviewed in the geothermal pools are against disability selective abortion but still operate within the same framework. They choose not to have the prenatal test because if the test were positive they would not have an abortion. Presumably they could choose to have the test and not have an abortion, but they will be strongly pressured to have an abortion, or women may not even comprehend that there are options other than abortion in a country with such strong views on Down syndrome as Iceland. (It is also possible that depending on the particular testing utilized that the women choose not to have the test because of potential risks. For example, amniocentesis carries the a risk of spontaneous abortion.) Those born with Down syndrome in Iceland are born not because their mothers choose to have a child with a disability but because the screening is wrong or not done at all.

Starting Question/Quote:

- ◆ How might fear and the unknown play into a woman's decision to have an abortion? What evidence do you see to backup your claims?

Additional Questions for Students:

- ◆ What does the mom of the 30-year-old woman with Down syndrome say about her initial thoughts when her daughter was born?
- ◆ What does the pregnant woman in the geothermal baths give as her reason to not have her child screened for Down Syndrome?
- ◆ Were mothers able to imagine the smiles, the joys, and potential lives of their children do you think they would choose abortion?

Teacher Explanation: Fear and the unknown contribute to the choice of women to have an abortion when the child is diagnosed with Down syndrome. The pregnant woman in the geothermal bath explains that she knows those with autism and Down syndrome. Given her interview it is fair to say that, at least in large part, it is because of her experience and relationship with those who have different disabilities that she is against disability selective abortion and thus chooses not to have the prenatal screening.

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The mother of the 30-year-old woman with Down syndrome gives voice to the unknown she experienced when her daughter was born with Down syndrome. She remarks in her interview that the future was black after her daughter was born. She couldn't imagine the possibilities of her daughter's life. The strong focus on medical problems and future suffering separated from the imagination of all the other dimensions of the person's life make it easier to choose abortion.

Starting Question/Quote:

- ◆ What does it mean to have healthy children?

Additional Questions for Students:

- ◆ How is disease eradicated? Give some examples.
- ◆ What does it mean to give birth to healthy children? Is this different or the same as having health children? Is this different or the same as having healthy children? Is way ways is it different or the same?
- ◆ Is there a difference between eradicating disease and eradicating children?

Teacher Explanation: Iceland and other countries with disability selective abortion are striving to have healthy children. As the geneticist states - having healthy children is good, but at what cost? (It is important to note, that using the language of "having healthy children," makes invisible those who have disabilities and are aborted.) There is a difference between only allowing healthy children to live and finding means to bring health to those with medical problems. There is a difference between eradicating disease and eradicating those with disease so there are only healthy people. In the past, disease has been eradicated through vaccines and medications. These technologies function at the service of the suffering individual. Disability selective abortion does not provide any cures or health for the individual suffering. It does not eradicate disease but instead eradicates the patient with the disease. The slippage in language and understanding of the difference between having healthy children and only allowing healthy children to be born contributes to the continuation of disability selective abortion by making it appear to be a good rather than an evil.

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Starting Question/Quote:

- ◆ How is the unborn child made invisible?

Additional Questions for Students:

- ◆ What language does Helga use when she talks about the unborn? What does Helga mean when she talks about a “possible life”?
- ◆ What language does the video use to discuss the medical technology employed? Who is screened for Down syndrome?

Teacher Explanation: “100% of pregnant women whose prenatal screenings have come back positive for Down syndrome have decided to end their pregnancies.”

This quote from the movie highlights the focus of the medical field on the autonomy and individual of the pregnant woman rather than the unborn child. In actuality, the child is being screened and tested for Down syndrome, but much of the language around the testing and results is in reference only to the mother. This rhetoric makes the unborn child invisible in the process.

Starting Question/Quote:

- ◆ What does the prayer card reveal about the reality of the situation of disability selective abortion?

Additional Questions for Students:

- ◆ Why do you think parents get a prayer card with the footprints and weight of their unborn child? How did seeing the footprints and hearing about the weight of the aborted child in the movie make you feel? Does this information make the child more or less human for you?
- ◆ What does it mean that parents mourn and grieve? What might this tell us about the reality of the situation?

Teacher Explanation: Helga speaks about those in utero with Down syndrome as being a “possible life” and in her counseling focuses on the mother and the mother’s choice of how she wants to live her life. Yet, at the same time, Helga talks about giving parents a prayer card with the footprints and weight of their child. Parents sometimes even have a priest come and say a prayer. These actions reveal the truth of the situation. Helga talks about a “possible” life but yet the life of the child is concretized through his/her unique footprints and weight. At some level, parents seemingly recognize this loss of life and mourn the loss of their child. It is not a possible life that is lost. A life is lost and along with this loss of life are all the possibilities of what this person could have done and the contributions this person could have made to their family, community, and society. A person is more than their genome and in many ways, those who choose disability selective abortion see only the disability and potential struggles related to the disability rather than the full humanity of a person.