The Heal Without Harm Initiative is a package of two complementary bills, the Fetal Remains Respect Act and the Unborn Child Disposition and Anatomical Gift Act, which seek to demonstrate respect for unborn children by 1) outlawing the future exploitation of aborted children for fetal body parts and 2) providing families, doctors, and scientists with ethical sources of fetal tissue.

- The Fetal Remains Respect Act (LRB-1754) prohibits any person from knowingly acquiring, providing, receiving, or using fetal body parts obtained from induced abortions (i.e., where the child is directly and deliberately killed). However, doctors can examine an unborn child to confirm a prenatal diagnosis or to perform an autopsy. The Act also requires a facility that provides an abortion to arrange for the entombment, inurnment, or internment of the aborted remains. Any entity that violates this Act will be subject to a civil fine of not less than $50,000 and not more than $100,000. No individual, including mothers and fathers, will be subject to this fine.

- The Unborn Child Disposition and Anatomical Gift Act (LRB-1755) requires that in every instance of an unborn child’s death due to stillbirth or miscarriage (i.e., where the child dies naturally or accidentally) within a facility, the facility shall inform the mother that she may request her child’s remains either for final disposition or to make an anatomical gift for research, experimentation, study, or transplantation. Facilities must inform parents that they may request and obtain a certificate of stillbirth for their child. The Act does not pertain to stillbirths or miscarriages that occur outside of a facility (e.g., in a home). The facility that violates this Act will be subject to a civil fine of not less than $5,000 and not more than $10,000. The Wisconsin Department of Health Services will use any of these fines to study the feasibility of developing fetal tissue and umbilical cord blood banks for use in research.

1. If abortion is legal and if the aborted fetus will be discarded anyway, isn’t it better to use it to find life-saving cures for others?

   The unborn fetus is a human being with a right to life. To directly terminate her life by means of an induced abortion is unjust. To view her as useful only for her body parts further degrades and dehumanizes her.

   The dependence of fetal tissue research on the abortion industry legitimizes abortion, creates a demand for it, and further embeds it in our educational and medical institutions.

   Ethically, it is never right to commit a wrong, even if good can come out of it. Human beings must never be treated as a means to an end, however noble. An aborted unborn child did not consent to her destruction. Full respect for our aborted brothers and sisters demands that they receive a proper burial, not dissection and experimentation.

2. But weren’t vaccines to prevent polio and some other diseases derived from aborted fetuses?

   Yes, but not to the degree we perceive (see pages 376-379 in the U.S. House of Representatives Select Investigative Panel on Infant Lives Final Report). Moreover, the fact that unethical practices occurred in the past does not mean that they need to continue to occur today, especially when ethical alternatives exist. In the mid-twentieth century, U.S. researchers made scientific advances by experimenting on children with disabilities. Today those experiments are universally regarded as unethical and are prohibited by law.

   Science could discover all kinds of things and with much greater speed if there were no ethical limits on human experimentation, but ethical limits exist to make certain that vulnerable members of the human family are not exploited.

   Our human reason and our Constitution teach us that every human being has an inalienable right to life, from which all other rights flow. Human reason also tells us that it is wrong to intentionally kill innocent human beings. The human
fetus is an innocent member of our human family. To destroy a child and then use her for scientific experimentation is to deny her the full respect she deserves.

3. Don’t researchers already follow strict ethical guidelines in obtaining fetal tissue?
It is very difficult to ensure that current guidelines are truly being followed. A recent Congressional report confirms that abortion clinics sometimes altered their abortion practices in order to produce the most desirable fetal specimens for researchers; and some women were allegedly coerced into donating their aborted children’s remains, or were not fully informed about what would be done with their children’s remains.

If one looks at the history of scientific experimentation in the U.S., it is evident that self-regulation within the scientific community did not always adequately protect vulnerable populations. Instead, it was public outcry that demanded and obtained legislative action. For example, the researchers who conducted the infamous Tuskegee Syphilis Study and the hepatitis study at the Willowbrook State School strongly defended their actions and denied they were acting unethically. However, public pressure halted the studies and spurred Congress to pass legislation protecting human subjects in medical research and granting civil rights to people with disabilities (i.e., Americans with Disabilities Act or ADA).

4. Won’t restrictions on this research result in lost jobs and a weaker Wisconsin economy?
It is true that Wisconsin’s biotech industry and the University of Wisconsin-Madison are both invested in abortion-derived fetal tissue research, but this is not a sufficient reason to allow it to continue. Just because unethical research may continue elsewhere does not justify doing it here. We don’t condone medical experimentation on prisoners just because other countries are doing it.

No one really knows if significant job losses will truly come to pass, especially since the Heal Without Harm Initiative not only allows the use of aborted fetal tissues obtained before January 1, 2017, but also encourages the donation of tissues from stillbirths and miscarriages, which are free from ethical concerns.

If enacted, the Heal Without Harm Initiative will no doubt encourage new avenues of discovery and attract new researchers and biotech firms. Indeed, the 2007 discovery of induced pluripotent stem cells (iPS) at the UW-Madison and the University of Kyoto was made possible in part because of the desire to find ethical alternatives to human embryonic stem cells. Today, Wisconsin is one of the leaders in the iPS industry.

Wisconsin has an extraordinary opportunity to lead the nation by championing research that is ethical, innovative, and effective. Such a commitment to heal without harm would truly uphold our state’s proud tradition of social justice and respect for human life. As a group of Wisconsin researchers point out, the use of abortion-derived fetal tissues and human embryonic stem cells in many Wisconsin laboratories is driving away students who wish to pursue ethical research.

5. Is there sufficient ethical fetal tissue available to researchers?
Some researchers have argued that there simply is not enough fetal tissue available from ethical sources, such as stillbirths or miscarriages. One way to determine this is to compare the number of these natural or accidental deaths to those caused by abortion.

The Wisconsin Department of Health Services (DHS) reports that in 2014, 317 stillbirths occurred after 20 weeks gestation. (Miscarriage and stillbirth are not defined in Wisconsin law and are often used interchangeably, even by medical professionals. However, it is common to describe a fetal death post-20 weeks as a stillbirth.)

By comparison, DHS reports that in 2015, 359 abortions occurred between 16-20 weeks and 56 after 20 weeks, for a total of 379 abortions.

In short, there are almost as many stillbirths (317) as abortions (379) in Wisconsin. Thus, if every parent of a stillborn were informed of their ability to make an anatomical gift of their child’s remains, Wisconsin could have a sufficient supply of ethical fetal tissue. Nationally, the Centers for Disease Control (CDC) estimates that there are approximately 27,000 preterm deliveries and 24,000 stillbirths each year. The Unborn Child Disposition and Anatomical Gift Act (LRB-1755/P3) aims at providing researchers with more of these life-saving ethical tissues.