Dispute over Abortion Laws and Women’s Protest Ethics immediately after the Student Movement in a Divided Germany and Japan

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Abstract

In West Germany, the slogan “My body belongs to me” and “The Personal is Political” spread in the early 1970s as a result of the student movement. What did women try to achieve with these slogans? In this article, the author will consider the following, (1) the grounds and arguments used by those who opposed and supported the legalization of abortion, (2) the social and political circumstances influencing the opposition to abortion laws; while also considering the common and differing factors between East and West German disputes over the abortion laws reforms during the 1970s. The historical result was that in West Germany, abortion for medical, eugenic, ethical (criminal) and social grounds was legalized in 1976, while abortion during the first-trimester of pregnancy was legalized in East Germany in 1972.

Furthermore, the situation in West Germany will be compared with that of Japan. During this period liberalization of the contraceptive Pill and of abortion came about in many advanced nations. However the political approach to the birth control issue, abortion law, and the role of the representatives of the Women’s Liberation Movement differed from nation to nations, there were, for example, great differences between West Germany and Japan. In contrast to West Germany, where the legalization of abortion was realized by the 1970s “grass-roots movement”, abortion was liberalized in Japan by state policy from 1949. The contraceptive Pill was introduced to West German markets in 1961, while it was not approved for use in Japan until 1999, due mainly to a lack of demand by the Japanese public, including the main Women’s
Introduction

In West Germany, the slogan “My body belongs to me” and “The Personal is Political” spread in the early 1970s. What were women trying to achieve with such slogan? In a recent article: “My body belongs to society? Politics of abortion laws reform in the seventies” the following questions were examined:

1. How did the state, political parties, the church and professionals control abortions between 1871 and 1995,
2. What gaps existed in the view of abortion by the state and society at large,
3. the relationship between the student movement, the movement calling for abortion legalization, and the actual reform of abortion laws,
4. the reasons for the government pursuing two apparently inconsistent policies simultaneously, namely the prevention of the falling birthrates and the legalization of abortion. The article concludes, that abortion is never purely an individual decision but is also a political one.

In this article, the author reconsiders the following, based upon new findings, (1) grounds and arguments used by those who opposed and supported the legalization of abortion, (2) the social and political circumstances influencing opposition to abortion laws; while also considering the common and differing factors between East and West Germany surrounding disputes over abortion laws reform during the 1970s.

Attention will also be focused on two previous studies: Michael

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Gante, who researched the transition of abortion laws, the situation of abortion in society, and arguments surrounding abortion between 1927 and 1976; and Donna Harsch, who carried out research on the relationship between the Communist state and abortion law reform in East Germany.

Finally, the situation in West Germany is compared with that of Japan: Tiana Norgren, who discussed the relationship between the laws surrounding birth control and abortion in Japan, on one side and activities of interest group and citizens’ group on the other; and Miho Ogino, who studied the government related family planning since the turn of the 20th Century until the 1970s. During the 1960s and 1970s, liberalization of the Pill and abortion came about in many advanced nations, but the politic approach to the birth control issue and abortion, and the role of the representatives of the Women’s Liberation Movement differed greatly between West Germany and Japan. Investigating these differences is also very important when considering the political factors and historical significance of disputes surrounding birth control and abortion laws during the second wave of feminism during 1970s, from a more global perspective.

1. Abortion Legalization Movement in West Germany

At the beginning of the seventies, many women protested that the student movement was authoritarian and patriarchal in its relationship to women, despite its objection to the authoritarianism of the Nazi Generation. Women arose, asking for equality between men and women in politics, the workplace and the family. By the end of the 1960s many female participants of the student (68er) movement formed the Women’s Liberation Movement with it’s major themes of (1) women’s participation in social decision, (2) protest against a system, which attempted to enforce gender specific lifestyle and family values, (3) blaming the state for oppressive child education, (4) self determination of abortion, (5) ill-treatment and violence against women and (6)
work assignment based upon gender.

The most successful movement was the Abortion Legalization Movement. Its members tried to liberate themselves from the excessive ongoing birth interventions by the state and to change the sexual mores of their parent's generation. In 1971 this movement expanded into a large-scale movement for legalization of abortion. The leader of the Abortion Legalization Movement was an Organization called itself “Action 70” (Aktion 70), which was founded in 1969 in Frankfurt. The activists of the Women's Liberation Movement came from around the country and were united beyond class, religion, political party and gender. This movement expanded through demonstrations, the distribution of pamphlets, petition campaigns, bus tours for abortion, and so forth.

A seminal event, which drew major attention, was “Wir haben abgetrieben” (We have had abortions) in the magazine “Stern” on the 6th of June 1971. This was inspired by an article published on the 5th of April 1971 in the French magazine “Nouvel Observateur” entitled “declaration of 343 women.” In it 343 women disclosed their experience of abortion, and resulted in a procession of thousands of feminists along the old revolutionary block in Paris, demonstrating for a change in the abortion laws. The German activist's most influential leader, Alice Schwarzer, took part in this campaign with the writer and representative of the French Woman's Liberation Movement, Simone de Beauvoir. German activists succeeded in collecting 374 signatures of women, including actress and female writers, and publicly displayed the names and photographs of these influential women. “Action 70” collected 86,000 signatures during two months and succeeded in submitting their petition to the Federal Minister Justice Gerhart Jahn of the German Social Democratic Party (SPD: Sozialdemokratische Partei Deutschlands).

The energetic activity of “Action 70” continued, and public approval for the legalization of abortion increased rapidly. According to the Allensbach Public Opinion Research Institution, the rate of
approval for the legalization of abortion rose from 46 percent in 1971 to 79 percent in 1973. The reason for this increase were as follows: (1) the economic burden of low-income, (2) women’s severe workload, as mother, housewife and worker, (3) continuation of professional education, (4) difficulty of re-employment, (5) cramped living accommodation, (6) lack of independence and leisure time. The Abortion Legalization Movement’s slogan “My body belongs to me” meant that women should be liberated from such situations and always have the final decision as to whether or not to have an abortion, as had been repeatedly campaigned for since the beginning of the 20th century. Supporters of the legalization of abortion demanded: (1) the elimination of article 218 of the imperial criminal code, (2) the total burden of the costs of abortion and the Pill to be covered by health insurance, (3) operations to be always carried by medical professional, (4) free availability of contraception.

Although the contraceptive Pill produced by the company Schering was introduced into West German markets in 1961 under the trade name Anvolar, it had only been taken by about 2,000 West German women by 1964. Initially, many doctors would only prescribe the Pill to married woman. As a result unmarried student radicals publicized the existence and benefits of the Pill, auctioned Pills, circulated addresses of doctors willing to prescribe to singles, and demanded that universities provide access to the Pill. Therefore by 1968, the number of West German women using the Pill had jumped to 1.4 million, and to 3.8 million by 1977. By 1975, 33 percent of fertile women relied on the Pill as their major form of contraception in West Germany, and by 1977, as many as 80 percent of girls under the age of 20 were on the Pill.

So who supported the legalization of abortion? According to a questionnaire in 1971 of the Allensbach Public Opinion Research Institution, which was completed by around two thousand people aged over sixteen years in West Berlin, opinion on the repeal of abortion laws was 46 percent in favor, 39 percent against and 15 percent with no opinion. Those for repeal therefore outnumbered those supporting the
status quo. Concerning the age bracket of supporters, the rate of young people supporting the repeal was greater than their parent’s generation (Nazi generation).

A remarkable fact is that 50 percent of men supported the repeal of the abortion law, but only 41 percent of women. The officially announced results of the questionnaire by “Action 70” showed that 63 percent of 931 male agreed with the legalization of abortion, as opposed to 55 percent of 1,065 women. Furthermore, a group of male supporters called “Action by men” (Männeraktion) and authors such as the Philosopher Ernst Broch were fervent supporters as was the leader of the “68er movement” Rudi Dutschke, and all were active in advocating the legalization of abortion in their more male dominated circles. Why did these men support this quest? The background should be researched in detail, but the key facts suggest that male supporters saw abortion laws as a problem and therefore willingly took part in the movement for their reform. Therefore the problem of abortion should not be simply viewed as the struggle between men and women.

In addition to government policy and public opinion, the respective positions of the Catholic and the Protestant Church must be considered and compared: both churches agreed initially that the embryo could not be protected through a regulation bill with a time limit. But the view on abortion of both churches was inclined to differ, since the Protestant Church recognized not only medical grounds but also ethical and eugenic grounds and many Christians agreed upon first-trimester abortion at the conference of the Protestant Church in January 1974.

The Catholic bishops committee recognized throughout only abortion based on medical grounds, namely if there was a serious threat to the health or life of the pregnant woman, reasoning that the embryo has the right to live from the moment of conception. While this committee blamed the use of the Pill for a reduction in moral standards and an increase in fornication out of wedlock and insisted on the necessity of concrete personal support so that women in distress could avoid abortion: by promoting an environment where pregnant woman could have
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contact easily with both a doctor and a clergyman, and were provided
with information by the establishment of a professional counseling
center, financial support and so forth.\(^{19}\)

However even within the Catholic Church, the opinions of Chris-
tians were not unified. For example a Professor of theology at Münster
University, Anton Anweiler, supported contraception and respected the
rights of women who did not want to give birth. According to the
Allensbach Public Opinion Research Institution in 1971, 50 percent of
Protestants and 38 percent of Catholics approved the repeal of Para-
graph 218, as well as 34 percent of supporters of the Christian Demo-
ocratic Party (CDU: Christlich-Demokratische Union) and the Christian
Social Union (CSU: Christlich-Soziale Union), with 52 percent op-
posed.\(^{20}\) In fact it appears that a gap between leaders and supporters
existed. Women, including Catholic women, generally supported abor-
tions inside and outside the country regardless of legality, even if
women had to leave the church.\(^{21}\) This suggests that many people rec-
ognized abortion as individual problem regardless of their religion and
support of a political party. Incidentally the annual number of illegal
abortions in the 1960s and the first half of the 1970s was two hundred
thousand\(^{22}\) and, according to the federal Ministry of Justice, may have
been between 0.2–1 million.\(^{23}\) Moreover 17,531 women from West Ger-
many received legal abortions in Great Britain in 1972 and many women
traveled to countries such as Scandinavia, The Netherlands and Swit-
zerland, where abortions could be obtained quickly and easily.\(^{24}\)

Let us now consider the view of medical doctors, regardless of their
sex. According to the results of the c. 1,700 questionnaire by the Ger-
man obstetrics and gynecology associations and the German female
doctor occupation league, 94.28 percent of female doctors believed that
abortions should be limited to only cases with serious medical grounds
in order to preserve the right to life of the embryo. A total of 85.46
percent of female doctors accepted the need for abortion based on medi-
cal grounds, 83.94 percent on ethical grounds, 73.13 percent on eugenic
grounds, and 65.48 percent on social grounds; this concludes that
female doctors were more likely to be against abortion than the general public. Research by “Stern” in 1974, which questioned 228 medical doctors in the whole of Germany, found that only 18 doctors approved of the legalization of abortion within 12 weeks, while 80 (35 percent) approved of abortion for social reasons, if the pregnant woman was in a state of intolerable distress. \(^{26}\)

On the other hand, there were doctors, who favored a revision of the legalization of abortion within 12 weeks rule. 330 doctors, mainly of the Berlin Doctor Organization, recognized from their experience that many women needed support. They accepted the idea that abortion laws should consider the individual women’s circumstances. \(^{27}\) As can be seen from the above, the abortion problem was never a issue which divided male and female doctors.

The dispute surrounding the revision of abortion laws also excited interest in the federal parliament. In 1974 four bills were presented to the Federal Parliament: the legalization of (1) abortion within 12 weeks, which was supported by the coalition government of SPD and the Liberal Democratic Party (FDP: Freie Demokratische Partei), (2) abortion for reasons of medical, eugenic (if the child’s health would be irremediably harmed), criminal (if the pregnancy was the result of a crime like rape), social grounds, this was supported by the minority of the SPD under the Federal Minister of Justice Gerhart Jahn, \(^{28}\) (3) abortion only for medical reasons, which was supported by the minority of CDU/CSU, and (4) abortion in medical, criminal and eugenic cases, which were supported by the CDU/CSU, these parties did not admit social reasons, because they believed that such abortions could be avoided through family policy. \(^{29}\)

Eventually proposal number (1) was approved. However, in February of the following year, the German Federal Constitutional Court passed a judgment that abortion on request was unconstitutional, \(^{30}\) because the human rights of the embryo had to be protected. In 1976, in response to the decision of the German Federal Constitution Court, Parliament adopted the legislation of abortion based on medical
(without time limit), eugenic (under 22 weeks), criminal (under 12 weeks) and social grounds (under 12 weeks), but only on the condition that the pregnant woman received medical and social counseling and that the abortion was sanctioned by a medical doctor.\textsuperscript{31} In such cases, health insurance would pay for the cost of counseling and the abortion operation. With these compromises, paragraph 218 of the criminal code was finally revised in 1976. After this revision of abortion laws, the number of officially sanctioned abortions increased rapidly.\textsuperscript{32}

What then were the reasons for the government carrying out two apparently inconsistent policies at same time, namely the prevention of the falling birthrates and the legalization of abortion? This apparent contradiction can be explained by the following argument: The State cannot insist childbirth without first relieving the individual of responsibility for pregnancy; the number of illegal abortions had to be reduced by nationally supported criminal code if necessary.\textsuperscript{33} Therefore, the revision of abortion laws were indispensable under the present conditions, in which article 218 hardly functioned, and led to a huge number of illegal abortion. In terms of birthrate, it was believed, that if an environment where a woman can choose whether or not to have a delivery was fostered (for example through family policy), then a decrease of birthrate could be prevented.

2. Revision of Abortion Laws in East Germany

During the immediate postwar period in East Germany, the problem of unwanted pregnancies resulting from mass rape in the Soviet occupation zone led to a harsh confrontation with existing anti-abortion regulations. Since a great number of women were seeking illegal abortions, the ban on abortion for reasons of rape was lifted between 1945 and 1950, with the law changed by an exceptional provision. Estimates of the number of abortions performed during these years range from five hundred thousand to one million.\textsuperscript{34} Medical abortions were generally approved in cases of rape by a foreigner (in most
cases a Red Army soldier) up until the last month of pregnancy. In such cases, abortions were performed in public hospitals at public cost.  

Moreover, abortion on medical, social (excepting the East German state of Saxony-Anhalt), and criminal (only in the state of Mecklenburg) grounds, performed in the first three months of pregnancy by a licensed doctor, in hospital, were allowed during 1947 and 1948 in East Germany. After this exceptional period, however, the old abortion laws were once again strictly enforced in an attempt to counter East Germany’s low birthrate and devastated demographic makeup. On September 27, 1950, all abortions except those performed on medical (if the life of the pregnant woman was endangered by the continuation of the pregnancy) and eugenic grounds (if it was believed that the child would be born with a mental illness or severe physical handicap) once again became illegal. 

In the 1960s, however, calls for legalization of abortion began to strengthen. Physicians increasingly supported the liberalization of the abortion laws, because of the rising social cost of illegal abortions (such as the death of the woman) and the deterioration of public health through the high number of illegal abortions. 

Female intelligentsia and white-collar employees demanded the right of abortion through petitions, and the government began to advocate the necessity of relaxing the abortion laws due to factors such as, the relatively high birthrate of the late 1950s and early 1960s, and also developments in the economic sphere that made female labor more important and led to an expansion of women’s responsibilities and importance at work and in the home. 

In 1965, the official reasons given for this relaxation of laws were the promotion of sexual equality in higher education, employment, marriage, and the family. In fact, the aims were to reduce social costs, improve the health situation, and to maintain the female labor force. Abortion was made legal under six conditions: (1) medical grounds; (2) eugenic grounds; (3) if a woman was older than 40 or younger than 16;
Dispute over Abortion Laws and Women’s Protest Ethics immediately (4) if a woman already had five children to care for; (5) if a woman had had her fourth child fewer than 15 months after her third child; (6) if a woman had become pregnant as the result of rape, incest, or other criminal action.\textsuperscript{43}

In 1971, after the succession of Secretary General Walter Ulbricht, who had been fundamentally opposed to abortion, by Erich Honecker, the debate over the legalization of abortion became more intense in the East German parliament (Volkskammer). Supporters of legalization put forward two main arguments: firstly, that the state lost an important part of the workforce when a woman had to reduce her full-time work to part-time in order to look after her home and children\textsuperscript{44}; secondly, that a woman should be able to decide for herself whether or not to have an abortion.

The East German satellite party of the Christian Democratic Union (CDU), however, opposed the legalization of abortion, as did its West German counterpart. The party argued that the right to life could not be compromised, and that a society based on humanism could not be created if the legal protection for unborn children was abandoned. It also contended that any legalization would lead to a further decline in birthrates.\textsuperscript{45} For the first time in the history of East Germany, the CDU cast a vote of disagreement and thus rejected the legalization bill in the Volkskammer. Despite this vote, however, the Volkskammer ratified the bill on March 9, 1972, by about 500 votes (14 votes against and 8 abstentions).\textsuperscript{46} This was partially due to the fact that the influence of the Catholic Church in East Germany was considerably weaker than in West Germany.\textsuperscript{47}

The conditions outlined in the new 1972 law were as follows: (1) a pregnant woman had the right to a first-trimester abortion performed by a physician in a specialized hospital. In this case, the doctor was required to explain the exact procedure and any potential consequences to the patient. (2) When the pregnancy was further than 12 weeks advanced, abortion was allowed only in case of a serious threat to the health of the woman, as determined by a special medical committee. (3)
Abortions were not allowed if a pregnant woman had suffered complications as a result of a previous abortion, or if she had had an abortion within the past six months. (4) All costs of the preparation for, execution of, and treatment following the procedure, as well as the costs of contraceptives, were to be covered by insurance. These conditions were guaranteed for any woman who had East German citizenship, who was married to a citizen, or who had permanent residence. Only in cases where the woman was less than 18 years of age was written consent required. Finally in 1972, abortions within the first 12 weeks of pregnancy were legalized in East Germany with little dispute in the Volkskammer, and without any public debate or feminist movements comparable to those in West Germany.

An important question is whether or not the intention of these new abortion laws was to advance respect for women’s rights and dignity. As the historian Harsch points out, there were always limits to the state’s ability to control private behavior. Furthermore, she points to the state’s ongoing attempts to suppress the independence of medical experts. In addition, the number of petitions for the legalization of abortion and the movement in general had grown since 1966, and the number of legal abortions performed between 1966 and 1970 increased from 17,558 to 20,226 per year. The East German leadership was therefore hard-pressed to avoid the legalization of abortion. Government officials believed that debate in the West also shaped popular sentiment in the East, citing the common language and the increasing number of petitions, especially during 1970 and 1971. They also believed that the legalization of abortion, which had been a demand of the labor movement since the Wilhelmine Era, should be accomplished sooner in East than West Germany. The legalization of abortion also meant that from January 1, 1972, people from East Germany would no longer need visas to visit Poland, where since 1956 abortion was legal for foreign women.

East Germany gradually recognized that birthrates could not be increased by strict control or by the complete liberalization of abortion,
but rather through family policy and public education. In 1971, the authorities started to provide practical help along the lines of: sufficient housing for multi-child families, loans for growing families (1,000 DM for the first child, 2,500 DM for the third child, and a loan repayment exemption in case of additional children), 4,593 full-time nurseries, and kindergartens covering 73 percent of the population, maternity leave for mothers (a general annual vacation of four weeks), reduction of the working hours of mothers with at least three children (40 hours per week, instead of the normal 43 hours and 45 minutes), 1,030 counseling centers for pregnant women and 10,233 centers for mothers.\textsuperscript{56} These family policies supported women through childbirth and child-rearing and helped to avoid death and illness through illegal abortions. They secured both a healthy and active female labor force and increased birthrates. Furthermore, due to new initiatives in public sexual education, such as the free distribution of the contraceptive Pill (the deregulation was complete by 1965, and from 1972 the contraceptive Pill Ovosiston was freely available to women over 16), the number of suicides among pregnant women decreased by one-fifth.\textsuperscript{57}

As a result of these new policies, the East German birthrate did temporarily decline between 1971 and 1972, but then rose again from 1973 to 1978, due mainly to the new family policies. By comparison in West Germany, where abortion laws were stricter, the general birthrate was lower than East Germany: in 1970 the total fertility rate was 2.01 in West Germany versus 2.19 in East Germany, 1.45 versus 1.54 in 1975, and 1.44 versus 1.94 in 1980.\textsuperscript{58} The new family policies and better public education thus accomplished the aims of creating a healthy female workforce and increasing childbirth after the legalization of abortion.

As indicated earlier, the differing abortion laws in East and West Germany expressed the social and political difficulties of both Germanies. The standardization of abortion laws following German reunification in 1990 proved, therefore, not only a procedural problem but also a sociopolitical one. Women's organizations favoring East German abortion laws and their policies on childbirth and childcare
tried to influence policymakers to adopt East German laws for reunified Germany.\textsuperscript{59} The bill submitted to parliament in 1992 recommended that abortion be allowed for pregnancies in the first 12 weeks, following a consultation at a counseling center. The federal state of Bavaria and 249 members of the federal parliament, however, opposed this bill as it did not correspond with the constitutional duty for the protection of life. This was followed by a formal objection in the federal constitutional court. The constitutional court accepted the statement, blocking the legalization of abortions within the first 12 weeks of pregnancy. This procedure was similar to that which had taken place in West Germany in 1974. It was only on June 29, 1995, five years after the reunification, that the reform of the pregnancy and family protection laws (Schwangere und Familienhilfeänderungengesetz) was approved by an overwhelming majority of the federal parliament. Nevertheless, these abortion laws are still largely based on West German laws.

3. Movement against the revisions to the Eugenic Protection Law in Japan

The Eugenic Protection Law, which included eugenic regulations influenced by Germany during World War II and protection of the mother, was enforced in a 1948 declaration, in a Japan then occupied by the Supreme Command of the Allied Powers (SCAP: 1945–1952) and abortion on the grounds of mother’s health, violence and rape as well as the sterilization of disabled people was allowed. During this period, the SCAP neither advocated legalization publicly nor were involved in the debate. However, SCAP authorities shared the Japanese elite’s view that legalizing abortion and birth control was necessary to control overpopulation, but they feared that the Catholic Church or the Soviet Union would accuse the United States of committing genocide if America openly defended legalizing birth control and abortion in Japan.\textsuperscript{60}

Furthermore the government revised this law in the following year to permit, for the first time in the world, abortion based on economic
reasons which might harm the mother's health. This meant the substantial liberalization of abortion. In 1952, the requirement that women had to appear before a Eugenic Protection Committee for permission to have an abortion was eliminated from the Eugenic Protection Law. The new system, which remains in place today, transferred formal decision-making power to individual designated doctors, requiring them to assess the merits of each woman's request for an abortion independently. Japanese women were given abortion rights between 1948 and 1952 without much public debate or public understanding of abortion issues, this was in marked contrast to the struggle of many women to gain abortion rights in the Western Europe during the 1960s and 1970s.

The background to this revision was twofold: the rapid population growth (baby boom), between 1947 and 1949, when about 8 million children were born (42 percent higher than that of the previous three years), and the increase of birth through rape during the occupation period. During this time the following view became widespread: smaller family size leads directly to better educated children and that this is the “right”, “progressive”, and “cultural” family approach, leading to increased happiness for the individual and the whole of Japan. As a result, the number of abortions increased rapidly from 1949 to 1953.

However from around 1958 onwards during rapid economic growth, abortion became a social problem, because the birth rate fell to around half of the baby boom period. It was typical, during this period, that interest groups played a critical role in abortion policy making in Japan, with politicians serving as “agents,” and bureaucrats serving as “followers” or “referees.” For example, when the woman’s magazine “Fujin Kōron” in 1961 published a feature “abortion paradise,” some of the family planners such as Katō Shizue, who was a representative of the Japanese family planning movement and a member of the House of Councilors from 1950 onwards, denounced the spread of abortion under the Eugenic Protection Law. The idea of abortion regulations to protect the “human rights of the embryo” and to spread birth control became as popular in Japan as in Europe and America. Elsewhere, the women’s
organization of a right-wing nationalist religious group called Seichō no Ie, which emerged in the early 1950s, expressed, around 1959, the view that abortion is “child killing by the parents” and this group built for Mizuko Kuyō “Zenkoku Ryūzanji Muenrei Kuyoutō” (a memorial shrine for an aborted fetus) in 1961 in Uji (Kyōto). The group Seichō no Ie had actually grown more influential since the 1970s: at least judging by its membership, which increased from roughly 1.5 million to 3.5 million between 1955 and 1980.

When the Minister of Health and Welfare (Kōseishō) tried to introduce the contraceptive Pill in 1964, the Planned Parenthood Federation of Japan (Nihon Kazoku Keikaku Renmei), which was established in 1954, opposed it as being a premature and unnecessary measure. The reasons were as follows: (1) Differing from Europe and America, where since the early 1960s the use of the Pill spread, in Japan abortion and birth control were substantially free. The mainstream methods of the birth control were the condom or the Ogino theory, called the rhythm method. The annual number of abortions in 1958 was 2–3 million. Therefore the Pill was not a necessity, (2) the opposition to medicine was strong, because illness and disease due to industrial pollution and prescription drugs, and linked to rapid economic growth, was generally believed to be a frequently occurrence. For instance, from 1962 to 1963 cases such as: the Chisso Minamata disease, a chronic nervous illness caused by mercury poisoning; and thalidomide scandal, where the prescription of the sedative thalidomide to alleviate morning sickness during pregnancy led to birth of many severely “handicapped children,” were frequently reported. Finally in 1967, the Minister of Health and Welfare decided not to approve the Pill as contraceptive because of uncertainty surrounding potential side effects.

Therefore, from the late 1960s to the first half of 1970s the dispute over abortion law was also taken very seriously in Japan. When the Council on Population Problems discussed the necessity of a recovery of the birthrate in 1969, an investigation into this issue by the Minister of Health and Welfare confirmed falling birthrates since the second half of
the 1960s, and a direct link to the Eugenic Protection Law was indicated.\textsuperscript{73} As a result the LDP (the Liberal Democratic Party) proposed a revision to the Eugenic Protection Law in the Diet (at this point not debated) in April 1970, which was finally discussed in April 1972. The proposed revision to the Eugenic Protection Law was as follows: (1) Criminalization of abortion for “economic reasons,” (2) Addition of the fetal provision (sanction of the abortion in cases of fetal disease or defeat), (3) public education for family planning by the Eugenic Protection Consultation Office, stipulating the ideal age of a mother at for first childbirth, the Age of 22 was regarded as best.\textsuperscript{74}

Confronted with this situation women who felt sexually discriminated against in the student movement started the Japanese Women’s Liberation Movement (Uman Ribu-movement) at International Anti-war Day, on October 21, 1970. And from 1973 onwards they conducted the movement against a revision to the Eugenic Protection Law from the following grounds: (1) abortion for “economic reasons” is necessary, because many married women could only work part-time, and therefore low income households still existed, despite the Japanese GNP being ranked second in the world, (2) if abortion for “eugenic reasons” is permitted as soon as birth defects are detected (called amniotic fluid test), women will have the responsibility of the final decision, (3) elderly primigravida was regarded as undesirable, however young mothers often must cope with low wages after childbirth. For the Ribu-activists a revision of abortion law meant enforcement monogamy for women and the reconstitution of the family system by the state, which feared “degradation of the father’s authority” and a “liberalization of sex.”\textsuperscript{75}

The movement against the revisions to the Eugenic Protection Law therefore emphasized the following issues: (1) they wanted the focus to be turned away from the killing of unborn handicapped children. For example, they tried to cooperate with the organization Nihon Nōsei Mahisha Kyōkai Zenkoku Aoshiba no kai Sōrengō Kai, Aoshiba no Kai, which represents victims of cerebral paralysis. (2) they did not simply
go along with the idea that “avoidance of birth means women’s liberation” and that “abortion means the women’s right over her own body,” (3) they recognized necessity of sufficient discussion on birth control and abortion, which should included men, and they accordingly did not simply fall into line with American Women’s Liberation Movement. (77) Especially principles (1) and (2) were inspired by the American Women’s Liberation and the German New Women’s Movement, which demanded a liberalization of abortion as a “women’s right”, because abortion was prohibited on religious grounds.

Ribu’s leading faction (for example, Ribu Shinjuku Center) did not trust the Chūpiren, formal name is Women’s Liberation Federation for Opposing the Abortion Prohibition Law and Lifting the Pill Ban (Japanese, Chûsetsu Kinshi Hō ni Hantai shi Piru Kaikin wo Yōkyū Suru Josei Kaisō Rengō) which was established in April 1972. (78) Many Ribu activists were critical of this group’s politics and suspicious of their motivations for advocating the Pill. (79) The leader of this group Enoki Misako was enthusiastic promoter of the Pill and demanded a complete repeal of the Abortion Prohibition Law, because she regarded abortion as individual women’s right. Her opinion on birth control and abortion was, therefore, similar to the one commonly held in Germany. This Federation was very active in many fields, including the mass media and many ingenious performances, in particular with illustrations concerning birth control and abortion, with detailed explanation of how to get and use the Pill published in the Journal “Neo-Ribu.” The article also discussed the ingredient, effects and side effects of Pill, and free distribution of the Pill. A Japanese feminist and professor, Teruko Inoue, criticized these activities severely, because this Federation did not discuss the ethics of human relationships, in contrast to the Ribu movement. (80)

From 1973 to 1999 the Pill was informally approved as a hormone treatment, but not as a contraceptive. (81) Hence, women who wanted to take the Pill used it under the pretext of a hormone therapy by their medical doctor. In the late half of 1980s social reformers, who advocated
family planning, changed course radically, as the high safety and low-dose Pill became available worldwide. The legalization of the Pill was nevertheless postponed due the rise in HIV transmissions and a negative image of the Pill’s side effect. In surveys taken between 1986 and 1999, when the Pill was approved, at the most only 12.9 percent of Japanese married women answered that they would want to use the Pill (with a minimum of 6.4 percent during the period), up to 71.8 percent of married women said that they would not want to use the Pill (with a minimum of 44.2 percent), and up to 37.0 percent said they did not know (minimum 15.9 percent). The opinion of unmarried women was very similar. This differs greatly from the general attitude in Germany. In Japan, The Pill was deemed to be ineligible to be paid for by health insurance as it was not considered a valid medical treatment.

Japanese public opinion did not demand an early approval of the Pill, on the contrary, a tendency to oppose the Pill was strong. Ribu-activists did not regard the Pill as a part of women’s liberation and found it more important to protect the woman’s body from the Pill’s negative and unnatural side effects. To upset the natural body function by the Pill seemed to them more undesirable than simply to use a condom. A most influential and charismatic leader, Mitsu Tanaka presented the problem as follows: “Liberation from the Toilet,” i.e. in the male understanding, a woman can only be a mother or a whore; taking the Pill is not a spontaneous decision, but it allows women to take responsibility for contraception; abortion on the other hand forces women to make a decision as to whether to bring up a disabled child or not; abortion is “child killing” by the society, enacted by women, and to consider abortion as a woman’s right avoids confronting this important issue. Ultimately the Ribu-movement promoted the slogan “Toward a society where women want to give birth” and was therefore in general agreement with organizations such as Aoshiba no Kai.

Eventually while the movement against the revisions to the Eugenic Protection Law developed and took direct action, such as sit-in at the Ministry of Health and Welfare in 1973, in July 1974 the revisions
bill failed to pass a vote in the Upper House of Councilors. Several groups, including Nichibo (the organization representing the doctors authorized to perform abortions), disability groups, and women’s groups all considered this a political victory.\textsuperscript{87}

**Conclusion**

In West Germany after “68er movement,” the large-scale abortion legalization movement was free from gender, political and religious interests. They protested against the view of abortion of their parent’s generation and demanded self-determination for women. On the other hand, the anti-abortion movement opposed reform of the abortion laws, on the grounds of the human rights for unborn children, declining birthrates, and the corruption of morals and the social order. As a result in 1976, abortion for social reasons, where women were in a state of intolerable distress was legalized, but abortion within 12 weeks was not liberalized.

In East Germany in 1972, abortion for pregnancies of less than 12 weeks was allowed; despite this the social concern surrounding the legalization of abortion did not increase, as it had in West Germany. Publicly, this legalization was a response to the wishes of women asking for self-determination, and therefore was the duty of a socialist state in which the equality of men and women was a key aim. In fact, the legalization of abortion was a means of maintaining the female workforce while also creating the conditions where women could accomplish child-birth and child-care.

As discussed above, the process to the revision of abortion in both Germanies was very different as it was an expression of social and political differences. The unification of the two differing abortion laws after the 1990 reunification was not merely a formal problem, but was also a problem of the coexistence of the two Germanies and of the people’s differing lifestyles. It was therefore agreed to make a compromise until December 1992, where the abortion laws in each part of
Germany would remain as they were. Female activists in both Germanies made efforts to maintain the abortion laws and the circumstances of childbirth and child-care in East Germany. But the final abortion laws enacted in 1995 were in fact based on the West German system. Although abortions for eugenic reasons were excluded, they are still effective at present. Subsequently, “My body belongs to me,” the wish of many women in the 1970s, was never realized.

This stands in contrast to the movement and dispute over legalization of abortion in Japan, which although it also emerged just after the student movement it was developed under the leadership of women’s activists who protested against student movement. The abortion question in Japan was also strongly linked with the issue of disability. The same tendency appeared in West Germany since the 1980s. While in West Germany the Abortion Legalization Movement developed into a large-scale movement including many men and organizations, the movement against the revisions to the Eugenic Protection Law in Japan did not involve many men and the movement was not popular.

In terms of the regulation of the Pill, the difference between Germany and Japan was obvious. While in West Germany the Pill was introduced in 1961, while East Germany liberalized the Pill in 1972, the Minister of Health and Welfare in Japan prohibited a sale of the Pill on grounds of its side effect. Nevertheless activists of the Ribu-movement did not oppose regulation of the Pill. As although the Pill has the advantage of giving women the decision of birth control, the negative aspects of the Pill was highlighted: uncertainty of its effectiveness and side effect, excessive commercialization of the Pill, as well as its negative impact on the movement against the revisions to the Eugenic Protection Law. Hence, in Japan where abortion was the basis of birth control, it was never deemed necessary to legitimize the Pill. In contrast to this, the use of the contraceptive Pill spread rapidly in West Germany, where abortion was illegal, and the side effects were not taken that seriously.

Thus, in contrast to West Germany where the legalization of
abortion was realized by the “grass-roots movement”, it liberalized in Japan through the policy of state since 1949. This is similar to East Germany, although in Japan abortion was not regarded as a measure necessary for the security of women’s labor force. Hence, the issues surrounding birth control and abortion presented by the Ribumovement were not regarded as a social problem to be shared and debated by men and women, as it had become in West Germany. In Japan, despite the government, the industrial world, citizens’ groups, interest groups and medical doctors being deeply involved in the contraceptive Pill and abortion debate, there were few opportunities to broaden the arguments to the rights of women, human rights of embryo, abortion issues for men, the religious conflict and sexual emancipation. Many women therefore regarded it as a private issue. This was also formalized by the exclusion of abortion and contraceptive Pill costs from health insurance and by applying guilt to abortionists, calling them “child killer.” Furthermore, if the male partner was not sympathetic, the woman had to cope alone with repression through moral approbation. If the partner was not willing to contribute, the woman had to cope with the financial costs as well as the mental and physical burden.

On the other hand, the social system and support was not improved in any way to encourage women to bear children. Hence, while the official abortion rate per 1,000 women was falling, the total fertility rate was also declining, too. The decline of the total fertility rate was no longer regulated purely by the liberalization of abortion. So in Japan, the country that first legalized abortion, it remained a highly contentious issue.

Notes
Outline of article 218 of the Criminal Code in 1871: a pregnant woman who deliberately aborted her child was for whatever reason to be imprisoned for a period of between six months and five years. To assist in the performance of an abortion is through article 219 illegal. Cf. Reinhard Frank, *Das Strafgesetzbuch für das Deutsche Reich*, Leipzig: Hirschfeld, 1901, S. 272–274.


Ebenda, S. 7.

Schulz, *Der lange Atem*, S. 155.


See Table 2; *Allensbacher Berichte. Presse Korrespondenz des Instituts für Demoskopie Allensbach*, Nr. 15, 1971; cf. *Frankfurter Rundschau* (22.9.1971).


dpa (1.4.1974), S. 10–11.

CDU Bundesgeschäftsstelle (Hrsg.), *Argumente Dokumente Materialien* (879) 287
Paulo VI. considered the contraception as a sin, because it was inconsistent with a triune of sexuality, reproduction and marriage. See Osamu Kawagoe, Sexuality, in: Toshiko Himeoka and Osamu Kawagoe (ed.), *German Gender in Modern Germany: An Introduction*, Tokyo: Aoki Shoten, 2010, p. 195. (Japanese)


See Table 1

Notz, Die autonomen Frauenbewegung, S. 138.


*Süddeutsche Zeitung* (11.3.1974).


dpa (1.4.1974), S. 16; cf. Gante, *§218 in der Diskussion*, S. 143

Eبدا, S. 165, 174.


*Süddeutsche Zeitung* (20.4.1974).


Harsch, Society, p. 58.

See Gesetz über den Mutter- und Kinderschutz und Rechte der Frau vom
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39 Harsch, Society, p. 64.
40 Ibid., pp. 74–75.
42 Harsch, Society, p. 65.
44 The number of female workers in 1971 who had infants was 387,400 (49.7 percent of the total number of workers), of which 29 percent worked part-time. Bericht über die Entwicklung der Beschäftigung der Frauen in der Produktion, in: Thietz, Ende, S. 140–141.
47 In 1970, 44.6 percent of people in West Germany belonged to the Catholic Church, and 49 percent to the Protestant Church. According to statistics from 1986 and 1988 in East Germany, the population consisted of 30.6 percent Protestants, only 6.6 percent Catholics, and 61.5 percent atheists. This strong Catholic influence in West Germany was the reason why East-German type abortion laws were not enacted in West Germany. Statistisches Jahrbuch der Deutschen Demokratischen Republik, Berlin: Staatsverlag der Deutschen Demokratischen Republik, 1990, S. 451; Statistisches Jahrbuch für die Bundesrepublik Deutschland, Wiesbaden: Statistisches Bundesamt, 1991, p. 68.
49 dpa (5. 4. 1974), S. 5.
50 Cf. Harsch, Society, p. 82.
51 Ibid.
52 See Table I; The number of legal abortions in 1965 was about a half the number in 1966, while the number in 1964 was about 1/30 th of those in 1966. Cf. Harsch, Revenge of the Domestic, p. 268, 271.
53 Harsch, Society, p. 78.
54 Chizuko Ueno et al., The Invisible Wall in Germany: Women Rethink Reunification (Doitsu no Mienai Kabe: Onna ga Toinaosu Tōitsu), Tokyo:
Iwanami, 1993, p. 191. (Japanese)

55 Neues Deutschland (23. 12. 1971); Harsch, Society, pp. 80–82.


57 dpa (5. 4. 1974), S. 3; Vorwärts (20. 2. 1975); Harsch, Revenge, p. 268.


61 Norgren, Abortion, p. 48.

62 Cf. Ibid., p. 52.

63 See Table 3

64 See Table 3; Ogino, The Way to Family Planning, pp. 216–217, 256–257.

65 Norgren, Abortion, p. 48.

66 Japan became known as an “abortion paradise” because so many women from the United States and Europe, where abortion was illegal, traveled to Japan to get abortions. Ibid., p. 183.


68 Seichō no Ie assimilates the beliefs of many different religions including Shintō, Confucianism, Christianity, but its philosophy centers around

Depend on the *Summary of the 6th Fertility Survey in 1972* of Institute of Population Problems, the Ministry of Health and Welfare, which targeted 9,561 pairs and collected 9,355 questionnaires (97.8 percent, possible answer 9,182), the average practice rate of birth control in Japan was 62.4 percent (30–34 age, 70.3 percent), 56.6 percent of women had experienced multiple miscarriages and abortions, and over 70 percent of them had aborted at least once. See pp. 108–109, 110–112. Depend on the *Summary of the 7th Fertility Survey in 1977*, which targeted 15,097 pairs, collected 14,734 (97.6 percent, possible answer 14,064), the average practice rate of birth control of women under 50 age was 81.9 percent (1972, 74.5 percent). Cf. pp. 4–5.

See Figure 1, 2; The realistic number of abortions in 1970s was estimated three or four times of the official number of abortions. The abortion rate has definitely declined over time, there are still between 750,000 and 1.5 million abortions performed per year. Norgren, *Abortion*, pp. 5–7, 161.


At the beginning of 1980s, the victims of thalidomide were estimated to reach c. 7,000 in total worldwide, 45 percent of them had died, leaving c. 3,700 affected people. The most of them were in West Germany (2,722), where thalidomide developed, England (350), Japan (309), Sweden (120), Canada (120), Italy (80). Though in West Germany, where the abortion was illegal, the Pill remained a main method of birth control. Yasutaka Ichinokawa, Politics over Sexuality and Reproduction: A German History (Sei to Seishoku wo Meguru Seiji: Aru Doitsu Gendaishi), in: Ehara Yumiko (ed.), *Technique of Reproduction and Gender (Seishoku Gijutsu to Gender)*, Keisō Shobō, 1996, p. 200. (Japanese); Mitsushiro Kida, *Medical Science of Congenital Anomaly: for Understanding of Hereditary Disease and Embryo-Anomaly (Senten Ijō no Igaku: Idenbyō, Taiji Ijō no Rikai no Tameni)*, Chûkô Shinsho, 1982, pp. 162–163. (Japanese)

Immediately after that, Seichô no Ie stepped up its lobbying activities, this revision campaign might have succeeded at this time, in part because it was receiving support from powerful politicians, all of whom were members of a Diet member’s group (Seiseiren Kokkai Giin Renmei) affiliated with Seichô no Ie’s political action group, Seiseiren had actually grown more influential since then (Seichô no Ie Seiji Rengo). Norgren, *Abortion,*


76 Shigematsu, Scream from the Shadows, p. 89.

77 Akiyo Mizoguchi, Yōko Saeki, Sōko Miki (eds.), Documents of the History of Women’s Liberation Movement in Japan 2 (Shirō Nihon Ūman Ribu Shi 2), Shōkadō, 1994, p. 198, 218. (Japanese)

78 Shigematsu, Scream from the Shadows, pp. 255–256.

79 Ibid., p. 88.


81 Norgren summarizes Coleman’s views, as to why the contraceptive Pill was not approved until 1999, as follows: according to Coleman the Minister of Health and Welfare did not approve the Pill as contraceptive, firstly, because of scares over the side effects of drugs like Thalidomide and Quinoform; secondly, because of concerns that the Pill might be sold without prescription at Japanese drugstores and misused; thirdly, because of fears that the increased availability of the Pill to young unmarried women would encourage premarital sexual activity; and fourthly, and most importantly, because the Minister of Health and Welfare would not authorize the Pill without the approval of the medical community; and the Japan Association for Maternal Welfare (Nihon Bosei Hogo Sanfujinka Ikai, Nichibo), which was composed of the politically powerful association of obstetrician-gynecologists, who were designated abortion providers group, opposed approval. Nichibo’s official position was that the Pill was medically unsafe; its real concern, however, was that Pill use might lower the demand for abortions, a mainstay of Nichibo member’s incomes. Coleman also points out that family planning organizations and midwives had little incentive to promote the Pill, since they derived most of their income from the sales of condoms and diaphragms, whereas the Pill, if approved, could only be prescribed and sold by doctors and pharmacists. Incidentally, Vaiagra was approved after only six months council debate in 1999, thus much faster than the Pill. Norgren, Abortion, pp. 103–104, 203; Samuel Coleman, Family
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The fee charged for a patient’s first visit is c. 10,000 Yen, for the Pill c. 3,000 Yen and extra for examination.


Mizoguchi, Japanese Úman-Ribu 2, p. 42.


Shigematsu, Scream from the Shadows, p. 91; Mizoguchi, Japanese Úman-Ribu 2, pp. 201–202.

Ichinokawa, Politics over Sexuality and Reproduction, p. 203.

* I’d like to acknowledge the support of the School of Information and Communication and School of Political Science and Economics at Meiji University, who have funded this study.
<table>
<thead>
<tr>
<th></th>
<th>Population</th>
<th>Number of Birth</th>
<th>Total Fertility Rate</th>
<th>Number of Legal Abortion</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>West</td>
<td>East</td>
<td>West</td>
<td>East</td>
</tr>
<tr>
<td>1950</td>
<td>50,958,125</td>
<td>18,388,172</td>
<td>812,835</td>
<td>303,866</td>
</tr>
<tr>
<td>1955</td>
<td>53,517,683</td>
<td>17,832,232</td>
<td>820,128</td>
<td>293,280</td>
</tr>
<tr>
<td>1960</td>
<td>55,958,321</td>
<td>17,188,488</td>
<td>968,629</td>
<td>292,985</td>
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<tr>
<td>1965</td>
<td>59,296,591</td>
<td>17,039,717</td>
<td>1,044,328</td>
<td>281,058</td>
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<tr>
<td>1966</td>
<td>59,148,000</td>
<td>17,071,380</td>
<td>1,050,345</td>
<td>267,958</td>
</tr>
<tr>
<td>1967</td>
<td>59,286,000</td>
<td>17,089,884</td>
<td>1,019,459</td>
<td>252,817</td>
</tr>
<tr>
<td>1968</td>
<td>59,500,000</td>
<td>17,087,236</td>
<td>969,825</td>
<td>245,143</td>
</tr>
<tr>
<td>1969</td>
<td>60,067,000</td>
<td>17,074,504</td>
<td>903,456</td>
<td>238,910</td>
</tr>
<tr>
<td>1970</td>
<td>61,001,153</td>
<td>17,068,318</td>
<td>810,808</td>
<td>236,929</td>
</tr>
<tr>
<td>1971</td>
<td>61,502,503</td>
<td>17,053,699</td>
<td>778,531</td>
<td>234,870</td>
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<tr>
<td>1972</td>
<td>61,809,378</td>
<td>17,011,343</td>
<td>701,214</td>
<td>200,443</td>
</tr>
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<td>1974</td>
<td>61,991,475</td>
<td>16,890,760</td>
<td>626,373</td>
<td>179,127</td>
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<tr>
<td>1975</td>
<td>61,644,624</td>
<td>16,820,249</td>
<td>600,512</td>
<td>181,798</td>
</tr>
<tr>
<td>1976</td>
<td>61,441,996</td>
<td>16,767,030</td>
<td>602,851</td>
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<tr>
<td>1977</td>
<td>61,352,745</td>
<td>16,757,857</td>
<td>582,344</td>
<td>223,152</td>
</tr>
<tr>
<td>1978</td>
<td>61,321,663</td>
<td>16,751,375</td>
<td>576,468</td>
<td>232,151</td>
</tr>
<tr>
<td>1979</td>
<td>61,439,342</td>
<td>16,740,324</td>
<td>581,984</td>
<td>235,233</td>
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<tr>
<td>1980</td>
<td>61,657,945</td>
<td>16,739,538</td>
<td>620,657</td>
<td>245,132</td>
</tr>
<tr>
<td>1985</td>
<td>61,020,474</td>
<td>16,655,219</td>
<td>586,155</td>
<td>227,648</td>
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<tr>
<td>1989</td>
<td>62,679,035</td>
<td>16,433,796</td>
<td>681,537</td>
<td>198,922</td>
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</table>

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**Table 2** Survey of the Allensbach Public Opinion Research Institution

<table>
<thead>
<tr>
<th></th>
<th>Pro Repeal of Paragraph 218 (%)</th>
<th>Pro Ban of Abortion (%)</th>
<th>Without Opinion Other</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Total</strong></td>
<td>46 (m. 50, f. 41)</td>
<td>39 (m. 32, f.45)</td>
<td>15 (m. 18, f. 14)</td>
</tr>
<tr>
<td><strong>Age</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16–29</td>
<td>64 (m. 65, f. 62)</td>
<td>21 (m. 18, f. 25)</td>
<td>15 (m. 17, f. 13)</td>
</tr>
<tr>
<td>30–44</td>
<td>50 (m. 53, f. 48)</td>
<td>34 (m. 28, f. 39)</td>
<td>16 (m. 19, f. 13)</td>
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<tr>
<td>45–59</td>
<td>42 (m. 48, f. 37)</td>
<td>44 (m. 37, f. 49)</td>
<td>14 (m. 15, f. 14)</td>
</tr>
<tr>
<td>over 60</td>
<td>25 (m. 30, f. 21)</td>
<td>58 (m. 50, f. 64)</td>
<td>17 (m. 20, f. 15)</td>
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<tr>
<td><strong>Academic Career</strong></td>
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<td></td>
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<tr>
<td>National School</td>
<td>44</td>
<td>41</td>
<td>15</td>
</tr>
<tr>
<td>Over N.S.</td>
<td>54</td>
<td>30</td>
<td>16</td>
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<tr>
<td><strong>Religion</strong></td>
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<tr>
<td>Protestant</td>
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<td>35</td>
<td>15</td>
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<tr>
<td>Catholic</td>
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<td>46</td>
<td>1</td>
</tr>
<tr>
<td>Other/No</td>
<td>71</td>
<td>17</td>
<td></td>
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<tr>
<td><strong>City and Region</strong></td>
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<td></td>
</tr>
<tr>
<td>Village</td>
<td>34</td>
<td>52</td>
<td>14</td>
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<tr>
<td>Small City</td>
<td>45</td>
<td>39</td>
<td>16</td>
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<tr>
<td>Middle City</td>
<td>46</td>
<td>40</td>
<td>14</td>
</tr>
<tr>
<td>Big City</td>
<td>54</td>
<td>29</td>
<td>17</td>
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<tr>
<td><strong>Political Party</strong></td>
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<tr>
<td>CDU • CSU</td>
<td>34</td>
<td>52</td>
<td>14</td>
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<tr>
<td>SPD</td>
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</tr>
<tr>
<td>FDP</td>
<td>54</td>
<td>31</td>
<td>15</td>
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</table>

Table 3  Number of Birth and Abortions (1947–2011)

<table>
<thead>
<tr>
<th>Year</th>
<th>Number of Birth</th>
<th>Total Fertility Rate</th>
<th>Number of Abortions</th>
<th>Abortion Rate per 1,000 women</th>
<th>Number of Birth</th>
<th>Total Fertility Rate</th>
<th>Number of Abortions</th>
<th>Abortion Rate per 1,000 women</th>
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<tbody>
<tr>
<td>1947</td>
<td>2,678,792</td>
<td>4.54</td>
<td></td>
<td></td>
<td>1980</td>
<td>1,576,889</td>
<td>1.75</td>
<td>598,084</td>
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<tr>
<td>1948</td>
<td>2,681,624</td>
<td>4.40</td>
<td></td>
<td></td>
<td>1981</td>
<td>1,529,455</td>
<td>1.74</td>
<td>596,569</td>
</tr>
<tr>
<td>1949</td>
<td>2,696,638</td>
<td>4.32</td>
<td>101,601</td>
<td>4.9</td>
<td>1982</td>
<td>1,515,392</td>
<td>1.77</td>
<td>590,299</td>
</tr>
<tr>
<td>1950</td>
<td>2,337,507</td>
<td>3.65</td>
<td>320,150</td>
<td>15.1</td>
<td>1983</td>
<td>1,508,687</td>
<td>1.80</td>
<td>568,363</td>
</tr>
<tr>
<td>1951</td>
<td>2,137,689</td>
<td>3.26</td>
<td>458,757</td>
<td>21.3</td>
<td>1984</td>
<td>1,489,780</td>
<td>1.81</td>
<td>568,916</td>
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<tr>
<td>1952</td>
<td>2,005,162</td>
<td>2.98</td>
<td>798,193</td>
<td>36.3</td>
<td>1985</td>
<td>1,431,577</td>
<td>1.76</td>
<td>550,127</td>
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<tr>
<td>1953</td>
<td>1,868,040</td>
<td>2.69</td>
<td>1,068,066</td>
<td>47.7</td>
<td>1986</td>
<td>1,382,946</td>
<td>1.72</td>
<td>527,900</td>
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<tr>
<td>1954</td>
<td>1,769,580</td>
<td>2.48</td>
<td>1,143,059</td>
<td>50.2</td>
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Dispute over Abortion Laws and Women’s Protest Ethics immediately

**Figure 1** Number of Birth and Abortions (1947–2011)

1) Induced abortion rate per 1,000 women aged 15–49.
2) Excluding Okinawa before 1972.

**Figure 2** Number of Abortions in Japan (1948–1998) Official Figures and Estimates (two and three times official figures)