

Burge identifies the three primary “stages” of development in a scholar’s career as follows (p. 23): Cohort 1 is made up of people who have finished their terminal degree and are working toward tenure (typically ages 28–38). Cohort 2 represents midcareer faculty who have been tenured or promoted and have acquired job security (typically ages 34–55). Cohort 3 represents senior faculty near the end of their careers (typically ages 50–70).

Burge identifies some of the most common opportunities and risks that are present within each cohort. The book is replete with stories of professors that exemplify certain patterns found within each of the cohorts (albeit with the disclaimer that the personal details have been changed). The characteristics he describes ring true to me, as I could frequently picture faculty I have encountered along the way who reflect several of the postures and situations he describes.

Burge identifies the traits of cohort 1 as core identity formation, developing peer relationships as well as student and college validation. He identifies the classic risks to this cohort as failures in teaching or scholarship, failing to assimilate into institutional mission and culture, being influenced by cynical peers, anxiety and loss of confidence, and failing to cultivate friendships. Burge wisely emphasizes the importance of a good mentor for those in this cohort. He also acknowledges some of the unique issues that can arise for women in academics. He identifies the primary goal for professors in cohort 1 as finding “security,” whether that be in tenure or in a multi-year contract.

Cohort 2 professors are marked by growing maturity and confidence. Burge identifies the traits for this cohort under the categories of developing as a teacher, evolving scholarship, and “finding your voice.” The risks he identifies for this stage include the cessation of professional development, egocentric behavior, and institutional dissonance. He also mentions issues that can arise with “hero development,” when certain professors are elevated by the college as marquee faculty while other faculty begin to feel less valued and excluded from the “inner ring.” Ultimately, he identifies the main goal for cohort 2 to be a sense of well-being, success, and ongoing validation.

Burge suggests that the main question characterizing cohort 3 is “will I find significance?” Some of the traits he discusses in this cohort include core identity issues, competency, and becoming a mentor or sage. He also talks about the importance of “embracing descent” as we end our careers and enter the last stage of life. Some of the pitfalls he identifies for this cohort include disengagement or disinterest, self-absorption, reclusive behavior, and technology anxiety. Burge also describes

the issue of the perpetual adolescent faculty member who never grows up—socializing with students as if they were one of them and dressing like a nineteen-year-old. He reminds us that students are seeking faculty to be friendly adults, not friends. He concludes that faculty in this cohort should endeavor to end well, content with our contributions and a sense that it has all been worth it. The chapter includes an addendum with some practical advice about retirement.

Burge’s references draw heavily from the field of psychology as well as reports, journals, and books on higher education. Burge is insightful in how he maps general principles in adult developmental stages onto the career trajectory of a professor. One thing that I found disappointing was the minimal time spent discussing a Christian perspective on the vocation of a professor. I suppose I was expecting more theological insights on vocation from Burge, a professor of New Testament at Wheaton College. While he does reference a few resources on the vocation of a Christian scholar, these could have been woven much more explicitly into the insightful discussions throughout the book.

As a midcareer professor who recently faced unexpected twists and turns in my career, I found the book quite helpful. Some of the opportunities and situations he described are ones that seemed to speak to me directly. I could imagine this book being one of the resources in a new faculty orientation program. In addition to new faculty, I suspect many faculty from other cohorts may find this a helpful resource as they reflect on their own academic careers.

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## ETHICS

**BEYOND THE ABORTION WARS: A Way Forward for a New Generation** by Charles C. Camosy. Grand Rapids, MI: Eerdmans, 2015. 207 pages. Hardcover; \$22.00. ISBN: 9780802871282.

In *Beyond the Abortion Wars*, Catholic ethicist Charles Camosy (Fordham University) looks unflinchingly at the apparent impasse in the US abortion debate between “pro-choicers” and “pro-lifers,” and as a solution proposes what he calls the Mother and Prenatal Child Protection Act. Camosy takes the concerns of opposing camps seriously, gleaning insights and skewering falsehoods wherever they occur, and he finds large swathes of common ground that respects both women and their unborn children. In spite of occasional shortcomings in Camosy’s arguments, I agree with reviewers who deem this short six-chapter book a “must read.”

## Book Reviews

Chapter one discerns common ground between the pro-choice and pro-life camps by examining US abortion rates and public opinion on abortion. It turns out that merely 2% of America's 1.2 million yearly abortions are due to the hard cases of rape, incest, or when a mother's life is threatened, whereas the remaining 98% are "qualitatively different," that is, as Camosy later argues, they are due to the very real inconvenience/burden of raising a child. (This inconvenience includes the shocking fact that 90% of children diagnosed with Down syndrome are aborted.) Significantly, polls reveal that many pro-choicers wish to restrict abortion in large measure, many pro-lifers are inclined to permit abortion in the hard cases, and both camps want to reduce social pressures on women to abort. In sum: "Though some find themselves on the extremes of the debate, more are in the complex middle"—a complex middle protective of women *and* prenatal children.

Camosy also shows that important US demographics favor this complex middle. More women than men are against legalized abortion. Hispanics (a majority ethnicity in California and growing in Texas and elsewhere) tend to be more pro-life than pro-choice. And the vast majority of Millennials are "trending" in the pro-life/pro-women direction. Contrary to abortion polarizations presented by popular political and news narratives, the "actual facts on the ground" are amenable to a more restrictive abortion policy protective of mothers and their unborn children. Camosy finds this hopeful. I do too.

Chapter two addresses the moral status of the unborn: what, or who, is the fetus? Camosy makes it clear that contemporary science—embryology, fetology, and biology—informs us that the human fetus is, in fact, a human being. The fetus is a genetically distinct, self-governing dynamic entity/individual organism that belongs to the human species. It is not feline or canine; it is human. It is not a cat or a dog; it is a human being. It is not a kitten or a puppy; it is a child. In addition, Camosy rightly points out, "it is simply biologically incorrect to say that [human fetuses] are 'mere tissue' or 'part of their mother.'" To pro-lifers, this is well known. For at least some pro-choicers and for newcomers to the abortion discussion, these facts need to be made clear. (In my native Canada, the Criminal Code mistakenly states that prior to birth the fetus is not a human being.)

Camosy also addresses the important objection that the unborn child, though a human being, is not a "person." That is, the unborn human being lacks some specific developmental feature which confers the right to life. But, as Camosy well argues, this approach to personhood is problematic. The allegedly decisive features fail because they weaken the personhood of many human beings who clearly already have the right to life. For

example, if self-awareness and ability to make moral choices are the crucial criteria of personhood, then the right to life of newborn infants as well as sleeping, stunned, or mentally disabled persons is jeopardized. As a result, the equality in equal rights gets ungrounded. Or, if a "low" trait such as the capacity to feel pain is chosen, then, oddly, personhood gets conferred on rats and mice. Camosy's solution is to ground the equality of equal rights in the capacities to know and love (which fits well with the theological notion of being made in the image of God). Helpfully, Camosy sets out a distinction between "the potential to become a human being" (a potential that does not yet have these capacities to know and love, i.e., sperm and egg prior to fertilization) and "the potential for a human being to become" in its subsequent developmental stages (a potential that does have the capacities to know and love, i.e., the union of sperm and egg). Camosy acknowledges that fertilization involves a process; therefore there is some gray area in which Camosy wisely urges caution.

In chapter three, Camosy makes a case for permitting abortion in the few-but-difficult cases, for instance, when pregnancy threatens the mother's life or is a result of rape. Here Camosy's arguments seem weak. He distinguishes between "direct abortion," wherein the aim is to kill the fetus/child, and "indirect abortion," wherein the aim is to refuse aid to the fetus/child, when one has no duty to aid, and so death is a foreseen but unintended result. He also distinguishes between the fetus's "formal" innocence and "material" innocence: the fetus may lack responsible agency (and thus have formal innocence) but be a threat causally (and thus not lack material innocence). For Camosy, these distinctions allow him to hold to the moral principle that "it is always wrong to aim at the death of the innocent" yet permit abortion to save the mother's life or, in the case of rape, cease to aid via an indirect abortion (here Camosy permits the abortifacient RU-486). The terms "direct" and "indirect" are a bit confusing (most abortions are pretty direct, it seems to me), but we can let that pass as Camosy's prerogative in setting out stipulative definitions. Nevertheless, serious problems remain. Doesn't the duty to aid a vulnerable person accrue to us—especially parents—from the very personhood of the unborn? And doesn't abortion violate this duty, intrinsically?

For Camosy's argument to work, the unborn person's alleged lack of "material innocence" requires an equivocation on the notion of innocence in the moral principle that "it is always wrong to aim at the death of the innocent." But, surely, the relevant notion of innocence in the moral principle is wholly "formal." A better way is to recognize the truth that abortion is an evil. Abortion destroys an innocent who is not a responsible agent and clearly is not at all morally ("formally") respon-

sible for its material/causal threatening to the mother in the first place. I sympathize with permitting abortion as “self-defense” if the unborn’s continued life materially threatens the mother’s life. Still, even in this hard case, the unborn remains a person who is the epitome of innocence and vulnerability and whose deliberate destruction is wrong. So, *contra* Camosy, I think the above moral principle is violated when an abortion occurs to save a mother’s life, but this abortion may (i.e., perhaps) be justified, if justified at all, as a lesser of two evils. A case-by-case assessment would be needed. Also, in the case of rape, it seems odd and unjust to punish an innocent for his/her violent conception by another party. It may be politically prudent to permit abortion in the hard cases in order to gain restrictions for the 98% of abortions (I understand and favor this), but we should also continue to think carefully about the lives of all innocents—for their sake and for the sake of truth.

Camosy addresses the challenge of public policy on abortion in chapter four. He argues that the criminalization of abortion in general need not lead to increased deaths of women due to illegal “back alley” abortions because abortion has become a relatively safe procedure (due to advanced medical technology) and there is evidence that previous high estimates of such abortions were fabricated (as admitted by ex-abortionist Dr. Bernard Nathanson, cofounder of the National Abortion Rights Action League). Moreover, because law serves as a teacher, public policy restrictions on abortion can encourage a culture (as illustrated in Ireland and Poland) in which prenatal children are protected, women seeking abortion are not punished as murderers, and illegal abortion providers are, for the sake of political prudence, found “guilty of something less than felony murder.”

In chapter five, Camosy argues that “we should consider both prenatal children and their mothers as vulnerable populations,” but, and significantly, current abortion “choice” favors neither. As mentioned, over 1.2 million prenatal children are killed annually in the US, whereas only 2% are due to the hard cases. But evidence also shows that large numbers of post-abortive mothers face guilt and increased health problems. Moreover, pregnant women face immense social pressures to “choose” abortion without real options to handle the inconvenience/burden associated with child-rearing. These pressures arise not only from the boyfriend/husband, parents, family, and friends, but also from larger social structures. Significantly, Camosy argues, workplaces are geared to treating all employees as men. Here all of us should take note: “Our social structures force women to choose between (1) honoring their roles as the procreators and sustainers of the earliest stages of human life and (2) having social and economic equality with

men.” To protect prenatal children and their mothers, Camosy rightly argues, we should protect them from this dilemma.

In the last chapter and conclusion, Camosy proposes, as a way forward, his Mother and Prenatal Child Protection Act. This act would protect the vast majority of prenatal children, allowing abortion in the small percentage of hard cases; as well, it outlines support for women to enable them to keep and raise their babies. Readers from all political stripes, whether “pro-choice” or “pro-life,” should consider Camosy’s proposal. If the proposal does not end the abortion wars, it may at least reduce the number of casualties.

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**CHRISTIAN BIOETHICS: A Guide for Pastors, Health Care Professionals, and Families** by C. Ben Mitchell and D. Joy Riley, MD. Nashville, TN: B&H Publishing, 2014. 207 pages. Paperback; \$24.99. ISBN: 9781433671142.

Patients, their supporters, and their caregivers are regularly confronted with new ethical issues or new variations of older ones in the light of new medical technologies. A variety of professionals and academics engage in bioethical reflection, expressing their views through the language of their own expertise. Gifted professionals with differing expertise do a valuable service to nonprofessionals by translating and articulating those reflections and positions into language and themes helpful to nonprofessionals directly affected by these issues. *Christian Bioethics* is cowritten by a theologian and a physician who directs a center for bioethics and culture. Organizing most chapters according to a specific case, the authors lead the reader through multi-dimensional aspects of each case as they apply to more general ethical concerns and realities. In so doing, they open up these dimensions by showing how Christian theology, ethics, and modern medical science interplay in real-life decisions that need to be made in clinical medicine.

All but the first two chapters are grouped following the rubric of Nigel Cameron wherein he distinguishes bioethical issues as those involved in taking life, making life, or remaking/faking life. In an effort to appeal to a broad target audience, including pastors, family members, chaplains, physicians, students, and patients, the authors’ case-focused approach risks losing “the roots that sustain the trees” by giving less attention to the underlying beliefs and theories that ground ethical reflections and decisions in their clinical situations. The authors are attuned to this risk to some extent, providing, in very basic terms, their worldview-level starting points. Both authors are committed to the basic