February 2021

HAPPY VALENTINE'S DAY
Amendment to protect babies born alive fails to advance, foreshadowing larger fights over abortion

By Jennifer Popik, NRLC Federal Legislative Director

Last Friday, in the early morning hours, pro-abortion Senate Democrats approved a budget resolution, in the process defeating an amendment to protect babies born alive during an attempted abortion.

The party-line vote was 51-50, with all Democrats voting in favor and all Republicans voting against. Vice President Kamala Harris cast the tie-breaking vote in her role as President of the Senate. The budget resolution is the first step towards passage of a possible coronavirus relief package.

Despite calls for “unity,” Senate Democrats used budget reconciliation, a tactic which permits narrow spending legislation, in the process bypassing the 60-vote legislative filibuster. The budget, a shell bill, authorizes $1.9 trillion and includes instructions to congressional committees for drafting the coronavirus relief legislation.

Sen. Ben Sasse (R-Neb.) took to the floor to offer an amendment to protect babies born alive in an attempted abortion.

Congressional Republicans express “unified opposition” to pro-abortion Democrats’ efforts to repeal the Hyde Amendment

By Dave Andrusko

With the Biden/Harris administration signaling its strong opposition to the lifesaving Hyde Amendment, on January 26, 200 House Republicans, firmly supported by pro-life organizations such as National Right to Life, sent a letter to Congressional leadership today “to express our unified opposition to Congressional Democrats’ efforts to repeal the Hyde Amendment and other current-law, pro-life appropriations provisions.”

On February 5th, 48 Senate Republicans sent a letter to Senate majority leader Chuck Schumer (D., N.Y.), in which they “pledged to oppose any spending bill that does not contain the Hyde amendment or other pro-life protections.”

The letter from 200 House Republicans, released by the the Republican Study Committee, went on to charge that “As part of their pro-abortion crusade, Democrats have taken direct aim at these long-standing, bipartisan protections that generally prevent the
I wrote these remarks on Monday but given the haste with which the pro-abortion team of President Joe Biden and Vice President Kamala Harris are implementing Planned Parenthood’s agenda, something else may come down before you read this. They thirst after more abortions like a man wandering in the desert without a canteen thirsts for water.

With 50 years of experience under their belt, the Abortion Industry and its legion of media minions have long since mastered the art of bubble wrapping abortion-enhancing proposals in totally misleading, innocuous language. Perhaps even better than we do, they grasp that the American people must always be kept in the dark about their real intentions.

They are to transparency what a drunken sailor is to sobriety. They are addicted to dealing death and see that not as a weakness to overcome but a strength to maximize.

No 12-Step Recovery program for them. It’s who they are, it’s what they do.

Consider, this, which took place January 28. Here’s how his schedule described what would take place at 1:30: “The President signs executive actions strengthening Americans’ access to quality, affordable health care.”

Let’s discuss what President Biden actually did at 1:30—one week and one day after he was inaugurated—and how the utter insincerity of this description is of a piece with the way pro-abortionists have acted since the 1960s when they talked about “abortion reform” when the actual goal was the abolition of all abortions laws, protective or very “liberal.”

National Right to Life is hardly the first or the only organization to observe that the actions of President Biden in his first two weeks are wildly at variance with the “unity” he mentioned nine times in his Inaugural Address.

For example, he has unleashed a barrage of pro-abortion initiatives that are popular with his base but not the American public.

When pro-abortionists control both Houses of Congress and the White House, most of what we will do will take the form of a rearguard action to protect as best we can the littlest Americans and the medically vulnerable from the likes of Joe Biden, Kamala Harris, Chuck Schumer, and Nancy Pelosi.

Their zeal for death is matched only by their unquenchable thirst to drown out our voices in smears and allegations breathtaking in their insincerity and viciousness. (See Laura Echevarria’s story on page ten.)

At the same time, we must and we will continue to remind the American public of whom, for a brief while, is in charge: fanatics whose obsession with abortion has bled over to ensuring that those babies that survive the abortionist’s best efforts to kill them are robbed of medical care.

I’ve often thought that the Pain-Capable Unborn Child Protection Act is the very best option to raise consciousness. I still do think it is #1.

But #1A, I believe, is the Born-Alive Abortion Survivors Protection Act. And once again the forces of death have, for a brief while, prevailed.

As National Right to Life explained last Thursday, by a vote of 52-48, the Born-Alive Abortion Survivors Protection Act failed as an amendment to the 2021 Budget Resolution in the Senate. (Sixty votes were required to pass.) Forty-eight Senate Democrats blocked the amendment, while all 50 Senate Republicans, along with Democrat Senators Joe Manchin and Bob Casey, Jr. voted in favor of the amendment.

Nothing about the thinking of either sides changed. Ours didn’t change because yesterday, today, and forever we will decry inhumanity so sick that it refuses to guarantee an abortion survivor the same care—no more, but no less—than another baby born under normal circumstances at the same gestational age would receive.

Thiers—the 48 Senate Democrats—wouldn’t change either, because it couldn’t change. Their only defense is to pretend that current law already protects these babies when—as everyone knows—there is no enforcement mechanism in the 2002 Born-Alive Infants Protection Act.

See “Refusing,” page 34
As expected, the Biden/Harris administration’s assault on preborn children has started. On January 28, a mere eight days after his inauguration, President Joe Biden signed an executive order to reverse the Mexico City Policy so that U.S. tax dollars will again be disbursed to international organizations that perform and promote abortion.

On the same day—the day before the virtual March for Life—Biden removed the U.S. as a signatory on the Geneva Consensus Declaration. The Declaration was a joint effort by the Trump Administration and 34 other countries to affirm that there is no international “right” to abortion and that sovereign states (countries) have the right to make their own laws on protecting children. President Biden apparently agrees with the likes of International Planned Parenthood that countries should not be allowed to protect these innocent little ones.

President Biden also began the process of restoring tax funding to Title X grantees that promote abortion as a method of family planning. Under the pro-life Trump administration, grantees were not allowed to refer for abortion, leading Planned Parenthood to forego $60 million in federal grants.

We know the abortion industry, pro-abortion Democrats in Congress, and their allies in the media will be pushing a radical policy that allows for no legal protection for unborn children at any time throughout pregnancy. And they want tax dollars or insurance policies to pay for the abortions.

To that end, Biden announced on January 22, the 48th anniversary of Roe v Wade, that his administration was “committed to codifying” that disastrous 1973 Supreme Court decision as federal law. In truth, the agenda goes far beyond Roe v. Wade, as we’ve discussed at National Right to Life News Today.

During her brief run for president, now-Vice President Kamala Harris introduced a proposal which would require states wanting to pass a pro-life law to get preclearance from the Department of Justice. If the proposed law did not comport with Roe v Wade and the so-called “Women’s Health Protection Act,” DOJ must object to the change.

If, for some reason, the Justice Department did allow a piece of pro-life legislation, abortionists would be given standing to challenge the approval in federal court.

In addition to the legislative battleground over protections for unborn children, there are efforts underway in Congress to severely limit our First Amendment right to speak, to advocate for our cause, up to and including criticizing the actions of elected officials.

At the same time we see this concerted effort to enact a federal law that legalizes abortion on demand throughout pregnancy and to eliminate any protections that currently exist for preborn children, we are seeing increased efforts to paint the pro-life movement as extremists, racists, and terrorists. Most of the major media happily joins Democrats in this smear campaign.

What’s the goal? To try to minimize the impact of the pro-life movement, to try to frighten people away from getting involved, and to try to prevent pro-life people from speaking up and speaking out on behalf of our defenseless brothers and sisters.

I say “try” because it won’t work. This struggle for Life is too important. Almost 900,000 babies are killed by abortion every year. These littlest members of the human family need us. And it is deeply offensive to suggest that speaking in favor of the right to life will somehow cause violence.

Hard-core pro-abortion advocates will cynically push this false and ugly narrative simply because we are a roadblock. For those journalists or public officials who naively believe the pro-life movement will abandon peaceful, legal efforts to achieve our goals, I would encourage them to spend time with pro-life people.

I have often said that the pro-life movement is the Movement of Love. We seek to help and protect others simply because those others exist.

We are also a movement of Hope. We offer hope to women who are considering abortion, helping them through a difficult time in their lives, and to women who have had an abortion, helping them find peace in their future.

We offer hope to the elderly and those with disabilities, advancing the truth that all human beings, regardless of capacity or disability, are valued members of the human family.

Nobel Peace Prize winner, Bishop Desmond Tutu, once stated, “Your ordinary acts of love and hope point to the extraordinary promise that every human life is of inestimable value.”

Everything we do to protect preborn babies and those vulnerable to assisted suicide and euthanasia encourages others. We offer hope through our acts of love.

And we do everything with love in our hearts and a smile on our face. Let’s keep on keeping on.
A tribute to pro-life President Trump on the last day of his Administration

By Dave Andrusko

This is my third pass on this post. It needs to be as close to just right as I can make it. So here goes.

We’ve discussed the substantive accomplishments of the President’s four years in office—and rightly so!—many times before. When we do so, we always begin with the appointment of three Constitution-loving justices to the Supreme Court and hundreds of other similarly minded jurists to the federal courts.

But that’s just part—an important part, to be sure—of what President Trump accomplished.

Two and a half weeks into the New administration of the pro-abortion team of Joe Biden and Kamala Harris, I’d like to talk about a part of the legacy of President Trump that grew out of his administration’s unyielding commitment to the sanctity of unborn life.

Like others who have toiled in the pro-life vineyards for over four decades, I know you can plant the same seeds over and over again without success. But while we would like instant success—the lives of flesh and blood unborn babies are being taken even as I write this story—I know the soil must be made receptive. That process can, and has, taken years and years before a crop can be harvested.

Consider how rocky the soil was in 1973. The ground was virtually impenetrable. But over time, your efforts cleared away the stones just as it did the thorns. Now there are more and more patches of good soil.

With the perspective of history, President Trump will be remembered for his invaluable contributions to softening the soil and clearing away the debris.

With a hostile House controlled by genuine pro-abortion fanatics such as Democrat Speaker Nancy Pelosi, legislatively it was difficult-to-impossible to pass new legislation. But encouraged by President Trump, the Senate began a dialogue on what our legislature will never do. Now there are more and more patches of good soil.

The House leadership, of course, would not allow a vote on that. As anti-life as these Democrats are, they are smart enough to know they have to keep the public ignorant of their determination not to give abortion survivors the same level of medical care—no more, but no less—than any other baby born at the same gestational age.

Nonetheless, some of the rocks and more than a few of the thorns have been removed. When the “devoutly Catholic” Biden and Harris go after religious liberties full-throttle, as they will, there will be a record of what a genuine respect for freedom of conscience and religion means. The Trump administration created the Conscience and Religious Freedom Division within the HHS Office for Civil Rights, which has done yeoman work.

When Biden and Harris tell their UN representatives to work to create a worldwide “right” to abortion, they will be working in harmony with the many organizations (including International Planned Parenthood and Marie Stopes International) who know that those “backward” countries in South America and Africa who protect unborn babies must be brought to heel. Of course there can no limitation on this “right,” including babies who are aborted because they are girls.

By contrast, the Trump administration built a coalition of countries to make it a global health priority to protect women and children. As we’ve previously discussed, “The Trump Administration signed the Geneva Consensus Declaration, a historic document strengthening an international coalition to achieve better health for women, the preservation of human life, support for the family as foundational to a healthy society, and the protection of national sovereignty in global politics.”

When the nation gets its fill of Biden and Harris and their ilk, there will be this record of respect for women—born and unborn—to return to.

As someone once said, “Nothing is ever really lost to us as long as we remember it.”

Finally, in his Inaugural Address, President Biden focused on “unity.” I don’t have to tell you how hollow that sounds, but we will be told that unless we accept his “unifying” effort, we are, at best, obstructionists. In fact, we are just the opposite. We are The Rememberers who will remind the nation that abortion violates our founding ideas.

**Unity does not mean accepting the slaughter of over 800,000 unborn babies every year, let alone by ending the Hyde Amendment which has saved over 2 million lives.**

**Unity does not mean disrespecting/ignoring freedom of conscience and religion.**

**Unity does not mean funneling countless millions of dollars into the coffers of the likes of Planned Parenthood, whose raison d’être is to make sure every “unwanted” baby gets dead.**

**Unity does not mean treating the weakest and most defenseless as disposable but rather recognizing that they need our protection the most.**

We thank President Trump for all that he has done. We prepare ourselves to peacefully, lovingly, intelligently fight every anti-life initiative that we know is coming.

To quote the immortal Bambino (Babe Ruth), “You just can’t beat the person who won’t give up.”
Dear Members of Congress,

The popular and decades-long Hyde Amendment, which prevents taxpayer funding of elective abortion in federal programs, is at risk. President Biden supports using tax dollars to pay for abortion and now says that he supports elimination of the Hyde Amendment. Also, Speaker Pelosi has publicly endorsed the push to do away with the Hyde Amendment this year.

The Hyde Amendment is widely recognized as having a significant impact on the number of abortions in the United States saving an estimated two million American lives!

We believe that the Hyde Amendment has proven itself to be the greatest domestic abortion-reduction measure ever enacted by Congress. The Hyde Amendment and other critical spending amendments that prevent federal funding of abortion are at risk of being dropped or eliminated if Congress does not renew them.

We urge you to keep these life-saving provisions in the law and say NO to taxpayer funding of abortion!

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Biden/Harris statement on the 48th anniversary of Roe reminds us of exactly who they are and what they stand for

By Dave Andrusko

In his Inaugural Address call for “unity,” President Biden contrasted what he said he will do with the kind of behaviors virtually no one would defend. But if you listened carefully and read the transcript, you might wonder just how long his enemies list will stretch. Certainly commentators urged him to cast his net wide.

I didn’t expect much from President Biden and Vice President Kamala Harris—after all, they are embedded in the pro-abortion army—but the opening sentiments in their joint statement on the 48th anniversary of Roe was unnecessarily pugilistic and overtly hostile to those of us who mourn, not celebrate, a decision that has already cost the lives of over 65 million unborn babies.

In the past four years, reproductive health, including the right to choose, has been under relentless and extreme attack.

In today’s environment, words count.

For starters, it is not “extreme” to use the democratic process to elect pro-life legislators; to pass protective laws in many states; to try to open a honest dialogue over the injustice of refusing to treat equally unborn babies who survive abortions; to use family planning monies for genuine family planning; and to maintain the decades-long legislative practice of not paying for elective abortions (the Hyde Amendment, in particular).

Which, of course, is exactly what Biden/Harris oppose.

The next paragraph treats abortion as “access to care” and recycles the already trite (although oblique) criticism of Hyde: that everyone should have access to care “regardless” of “zip code,” as if a limitation on abortion funding designates certain areas but not others.

Then there is the mantra of being “committed to codifying Roe v. Wade.” You would think, but you would be wrong, that this would have been spelled out in public documents and pronouncements over the last year. What is “Codifying Roe”? It is the umbrella term which stands for sweeping away every protection for unborn children and which includes the threat to punish states which are intent on passing protective legislation.

In addition to opening the spigot for funding abortion domestically, the next to last statement is a precursor to what everyone knew was coming internationally:

This commitment extends to our critical work on health outcomes around the world.

Pro-abortionists are the ultimate anti-life proselytizers. They believe they have a mission to undermine every protective law in every part of the world where unborn children are currently protected by law.

As NRL Federal Legislative Director Jennifer Popik, JD, wrote in the January edition of National Right to Life News:

One of pro-life President Donald Trump’s first acts in office was to restore (and later expand) the Mexico City Policy, which prevents tax funds from being given to organizations that perform abortions or lobby to change abortion laws of host countries. The Trump administration also cut off funding to the United Nations Population Fund because of that agency’s involvement with China’s forced abortion program.

We can expect pro-abortion President-elect Joe Biden to move to undo these gains immediately.

Very immediately.

As a palate cleanser, read what President Trump said to the March for Life on the 47th anniversary of Roe v. Wade.

It’ll recharge your batteries and make your day.
Value Them Both Amendment Passes Kansas Senate, Voters Will Now Decide

By Kansans for Life (KFL)

On Thursday, January 28, the Kansas Senate approved the Value Them Both Amendment to the Kansas Constitution which will be on a statewide ballot in August 2022.

The measure, which had already passed the House, received 28 votes with 11 opposing.

The proposed amendment would state that “the constitution of the state of Kansas does not require government funding of abortion and does not create or secure a right to abortion.”

Value Them Both is needed to protect existing limits on the abortion industry that have been passed into law. Every one of these limits was approved with bi-partisan support and is a major factor in reducing the Kansas abortion rate by almost 50% since 1999.

All were put at risk in 2019 in the Hodes & Nauser v. Schmidt verdict in which the Kansas Supreme Court declared nearly unlimited abortion a “right” throughout our beautiful state. Now this “right” can defeat even the most broadly accepted pro-life laws and further threaten women and babies.

“Value Them Both safeguards the bi-partisan supported limits on the abortion industry that protect both women and their babies,” stated Jeanne Gawdun, KFL Director of Government Affairs. “Thank you to the State Senators who backed the measure and struck down extreme amendments that would leave vulnerable women behind.”

Those interested in watching the State Senate debate can do so here. Notice that allies of the abortion industry keep using the same tired line of attack and offered some extreme amendments. The abortion industry has consistently opposed any reasonable limits on abortion and treats both women and babies like commodities.

As was the case in the House, an attempt was made to change the language of the Value Them Both Amendment so that even minimum health and safety standards for abortion clinics would not be required when a woman is a victim of sexual assault or if her life is in danger.

Senators Molly Baumgardner (R-Louisburg) and Kellie Warren (R-Leawood) both did an excellent job of pushing back against this radical concept that was being promoted by Senator Pat Pettey (D-Kansas City).

Gawdun continued, “There were many heroes who stood for mothers and babies. Special thanks to Senators Baumgardner and Warren for carrying the amendment during floor debate. Additionally, Senator Renee Erickson (R-Wichita)

See “Both,” page 17

Seeing in a snowfall a reminder of the fragility of life

By Maria V. Gallagher, Legislative Director, Pennsylvania Pro-Life Federation

Sometimes a crisp winter snowfall is a reminder of the fragility of life.

During a recent snowstorm which shut down much of the commerce in my community, I was reminded of what my parents had told me of the day of my birth. They informed me my appearance in the world was in the wake of a snowfall. They saw in my birth a precursor of spring—a sign of new life.

This year, I saw on social media where the snow had halted business at a Northeastern abortion facility. Mother Nature had had her say, and there would be no cessation of life at the abortion center that day.

Rather than looking at the snowfall as a nuisance, I suddenly saw it as a supreme blessing—a gift from above. Perhaps much of life is like that. We so often focus on the hardships and challenges that we forget to look for the multitude of gifts held within each life. Every human life is of powerful potential, worthy of protection. It is unrepeatable and non-transferable, and should never be abridged.

On a snowy day, it can be a good time to take stock of one’s life—and the life of our nation. Certainly we are at our best, in season and out, when we are willing to weather any storm to peacefully preserve the lives of the most vulnerable among us.
Grossman Refutes Grossman on Safety of Self-Managed Chemical Abortions

By Randall K. O’Bannon, Ph.D. NRL Director of Education & Research

Who is Daniel Grossman and why is he important? Dr. Grossman is one of the nation’s leading abortion researchers and activists, currently heading the University of California San Francisco’s premier reproductive health research group, Advancing New Standards in Reproductive Health (ANSIRH).

For the past 15 years, one of Grossman’s chief areas of interest, along with ANSIRH’s, has been a relentless promotion of chemical, or “medication” abortion, specifically telemedical or “webcam” abortion. In this scenario, a woman skips a visit to the clinic and instead meets with the abortionist online who, if satisfied with answers to a few screening questions, can send her the abortion pills in the mail.

When seeing studies in the medical journals or reading columns in newspapers purporting to prove that chemical abortions are safe, it is essential to remember that these are not the deliverances of objective, neutral, dispassionate researchers, but the strategically crafted spin and propaganda of long-time committed activists and advocates.

They are not simply reporting the latest scientific data – they are selling something. The product that Grossman has been promoting for at least a decade and a half is the “self-managed” chemical abortion where women can find the abortion drugs online, perhaps have some sort of telemedical consult, and then have those pills shipped to their homes where the women can administer these dangerous drugs to themselves.

In the paragraphs that immediately follow, you’ll read about several occasions where Grossman has taken his case to the media and the medical journals,angling for government authorization of telemedical abortion.

Yet in the midst of Grossman’s unwavering assurances to the public that mifepristone is safe, it is startling to discover a 2015 study published under his name with data that does not comport with that that rosy assessment.

Grossman argues webcam chemical abortions are safe, should be approved

In addition to numerous medical journal articles and interviews over the past dozen years or so arguing for the safety of these chemically-induced abortions, Grossman recently penned a column for the Washington Post. Grossman called on the newly installed Biden administration to jettison any regulations by the Food and Drug Administration (FDA) preventing abortionists from prescribing abortion pills over the internet. Grossman argued Medication abortion accounts for almost 4 in 10 abortions in the United States. The science overwhelmingly demonstrates that the abortion pill is safe and effective, can be prescribed via telemedicine and can be provided by mail.

It is not the first time Grossman has boldly made such an assertion. In a study appearing in the August 2011 issue of Obstetrics & Gynecology, Grossman concluded that “Provision of medical abortion through telemedicine is effective and acceptability is high among women who choose this model.”

A few years later, along with a group of other top abortion researchers and academic luminaries, Grossman argued in a February 2017 New England Journal of Medicine opinion piece that mifepristone was safe. They maintained that any risks could be managed by drug labeling and standard medical counseling prior to use, and that abortionists could evaluate patients and prescribe mifepristone (one of the two drugs that make up the chemical abortion technique) without having to physically pass out pills in their offices.

In one of his oddest defenses, Grossman claimed in a study appearing in the October 2017 issue of Obstetrics & Gynecology that “Adverse events are rare with medical abortion, and telemedicine provision is noninferior to in-person provision with regard to clinically significant adverse events.” The takeaway is obviously supposed to be that mifepristone is safe (“Adverse events are rare”) and that telemedical abortion is at least as safe as (is “noninferior” to) in-person provision with regard to those complications.

In a study of the telemedical abortion offered by Planned Parenthood in four states in from April 2017 to March 2018, Grossman was one of the researchers claiming in the August 2019 summary from Obstetrics & Gynecology that “There is consensus within the medical and scientific communities that induced abortion is a safe and effective health care procedure.” And they cite a 2018 report by the National Academies of Sciences, Engineering, and Medicine claiming that “medication abortion” has also been shown to be “a safe and effective way to end a pregnancy.”

Naturally, Grossman and his fellow researchers determined

See “Check,” page 39
Tenn. governor to Kamala Harris: “Abortion isn’t healthcare;” Urges support for pro-life pregnancy center instead

By Katie Franklin

On the 48th anniversary of Roe v. Wade, Governor Bill Lee of Tennessee responded to a tweet from Vice President Kamala Harris by taking a stand for life.

“On the 48th Anniversary of Roe v. Wade, we recommit ourselves to ensuring that everyone has access to care—including reproductive health care—no matter their income, race, zip code, health insurance status, or immigration status,” Harris wrote in a Twitter post.

Although Harris’s post was clearly about abortion, she didn’t actually use the word.

Pro-life Governor Lee cut right through her rhetoric with a blunt reply: “Abortion isn’t healthcare.”

Last July, Lee signed into law a pro-life bill prohibiting abortions after a fetal heartbeat can be detected. It also prohibited discriminatory abortions based on the child’s race or gender, or if the child was diagnosed with Down syndrome. The law was blocked by a federal judge less than an hour after the governor signed it.

In his reply to Harris, Governor Lee went a step further, inviting his followers to mark the anniversary of Roe

by donating $48 to Hope Clinic for Women, a Nashville-based pregnancy help center.

“Join me in supporting healthcare for Tennessee women and the unborn by donating $48 to @hopeclinic for pregnancies, access to women’s healthcare, relationship education, pregnancy loss (miscarriage, stillbirth, infant death, failed IVF/Adoption and abortion) and postpartum depression.”

Renee Rizzo, president and CEO of Hope Clinic for Women, says the governor’s involvement with her center goes back decades.

“Governor Lee has been a part of Hope Clinic for over 20 years and we are grateful for the many ways he has supported us directly, through his business Lee Company when he was the CEO there, and now in his current role,” she told Pregnancy Help News.

Rizzo’s center provides “medical care, professional counseling, education classes, case management, mentor-ship and practical support regardless of age, race, religion or ability to pay.”

Client surveys by Hope Clinic for Women demonstrate positive results.

Of the clients surveyed, 100% felt treated with respect and would return to the clinic; 96% would refer a friend to the clinic; 98% would make healthier choices; and 100% felt more informed.

“The spotlight is always a blessing to shine a light on the positive work pregnancy centers play in across the United States in helping women in a nonjudgmental, loving way,” Rizzo said.

Editor’s note. This appeared at Pregnancy Help News and is reposted with permission.
Deconstructing another pro-abortion media attack

By Laura Echevarria, NRL Director of Communications and Press Secretary

In a piece published in the January 31st Los Angeles Times Sunday edition, columnist Robin Abcarian proved that neither she, nor the establishment media, has any understanding of the pro-life movement—or shows any interest in a fair representation.

Writing under the headline, “Why we might soon see a surge in antiabortion violence,” Abcarian pronounced that the Biden-Harris Administration’s pro-abortion shift in abortion policy could be met with violence by the pro-life movement, although the implication is such behavior is inevitable.

Unfortunately, this was not the first time we had seen this idea floated in the press in recent days, but it was the first time we had seen it show up in a mainstream publication.

If we were to talk one on one with Ms. Abcarian, what would we say? That the pro-life movement is not a movement of violence and mainstream organizations such as National Right to Life have denounced violence for decades: you don’t meet violence with violence.

If Ms. Abcarian had done any research, she would have discovered that those who have engaged in violence against abortionists and abortion facilities in the past were not part of the mainstream pro-life movement, although the implication is such behavior is inevitable.

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If Ms. Abcarian had done any research, she would have discovered that those who have engaged in violence against abortionists and abortion facilities in the past were not part of the mainstream pro-life movement and, in fact, were found to be disturbed individuals.

Undeterred by fact, she warns the reader that she has “always believed” that there is a connection between violence against abortionists and when pro-abortion Democrats win the presidency. To add insult to injury, she quotes a Black pro-abortionist to present the argument that the Hyde Amendment itself—and by extension, the pro-life movement which supports it—is racist. Here’s how it works.

In her column, Ms. Abcarian quoted a press release issued by National Right to Life that praised the Hyde Amendment—which prevents the use of federal funds to pay for almost all abortions—and labels the amendment which has saved over two million lives as “dystopian.”

She could have (but of course wouldn’t) tell us where the public comes down on taxpayer funding of abortion. A Knights of Columbus/Marist poll released on January 27th, found that out of 1,173 respondents, overall 58% “oppose using tax dollars to pay for a woman’s abortion.” Sixty-five percent of Independents opposed public funding as did even 31% of Democrats.

An even larger majority of respondents—77% —oppose “using tax dollars to support abortion in other countries,” including more than six in ten (64%) of those who identify as pro-choice.

Saying that there may be violence or implying pro-lifers are racist is part of what appears to be a new variation on an old public relations campaign by pro-abortion groups. The goal? To undermine the credibility of the pro-life movement.

The facts, as always, are stubborn and demonstrate how wrong Ms. Abcarian is on both counts.

If she had done any research at all, she would have learned that while Black Americans make up approximately 13.4% of the population (according to the Census Bureau), they comprise approximately one-third of all abortions (according to the CDC’s 2018 numbers).

Who is it that seeks to prevent the killing of Black babies by abortion? Not Planned Parenthood. It is pro-lifers. The abortion industry is led by Planned Parenthood whose founder was enmeshed in eugenic and racist ideologies. In fact, only in this last year, did the New York affiliate of Planned Parenthood finally acknowledge that Margaret Sanger’s name should be removed from their offices because of her background and beliefs.

By contrast, the pro-life movement believes in the right to life—regardless of background, race, gender, orientation, religion, or creed. It is a fundamental human right that transcends cultures and politics. National Right to Life and its millions of supporters also oppose any use of violence as a means of stopping the violence that has killed more than 62 million unborn children since 1973.

Ms. Abcarian has the right to disagree with the pro-life movement’s goals as much as she wants. However, she does not have the right to imply that the movement will use violence to achieve those goals or that our motives are tinged with racism: that’s Planned Parenthood’s history, not ours.

Pro-life Americans are committed to peacefully achieving a world where all innocent human life is respected by our society and protected by our laws.
NRCL Honors Dr. Mildred Fay Jefferson, the first African-American woman to graduate from Harvard Medical School, and NRLC President from 1975-1978

“I am at once a physician, a citizen, and a woman, and I am not willing to stand aside and allow this concept of expendable human lives to turn this great land of ours into just another exclusive reservation where only the perfect, the privileged, and the planned have the right to live.” — Dr. Mildred Jefferson

February is Black History Month, a time at which National Right to Life especially honors the African-American pioneers of the pro-life movement such Dr. Mildred Fay Jefferson. Dr. Jefferson was the first African-American woman to graduate from Harvard Medical School and later served as NRLC president from 1975-1978.

Dr. Jefferson died October 15, 2010, at age 84. The video tribute linked to below was shown at the 41st Annual National Right to Life Convention June 23, 2011, in Jacksonville, Florida.

Please set aside a few minutes to watch this powerful presentation, brilliantly and lovingly put together by NRL’s Derrick Jones. You have to hear Dr. Jefferson in her own voice to appreciate why she was a powerful orator and debater.

Here is the memorable final paragraph from the letter Dr. Jefferson wrote for the 1977 NRLC Convention book:

“We are speaking for those who cannot speak for themselves; defending those who cannot defend themselves and fighting for those who cannot fight for themselves. We will win the battle for life because we must. But when we win, that victory will not be for ourselves—but for America, the world, and all mankind.”

The video can be seen at https://www.youtube.com/watch?v=UB3o-QazcNg
It is a bit surreal to see someone gracing the national stage who could have easily lost his chance at life. Such is the case with the acclaimed athlete and staunch pro-life advocate Tim Tebow, whose football and baseball careers would have been non-existent, if his mother had listened to misguided doctors.

At this year’s virtual rally prior to the March for Life, Tim repeated his commitment to the cause of life with his usual combination of passion and dry wit.

As many pro-lifers know, Tebow’s parents, Pam and Bob, were already the parents of four and were serving in the Philippines as missionaries. Tebow recounted how the doctors didn’t believe his mom was pregnant, thinking that it was a tumor.

“But then they realized that she was pregnant and she did have a baby in her womb. But all the doctors said, ‘You need to have an abortion. You need to get rid of him.’” Tebow shared.

However, his mother would not hear of it. In an act filled with compassion and courage, she gave birth to her Timmy against all odds. She survived, he thrived, and a medical miracle was recorded. Tim noted that a doctor said, “Of all my years, this is the greatest miracle I have ever seen...This is a miracle baby.” With the placenta detached, and with the difficulty of supplying nutrients to the baby, he was mystified as to how the little boy had survived.

With humility and grace, Tim inspired and educated with his first-hand account of being a walking miracle. As Tim so simply and eloquently said, “I’m so grateful that my Mom gave me a chance at life.” His very life is a testament to the rightness of the pro-life cause. “Because of her (his mother’s) pro-life story, I now get to share my pro-life story,” Tim said.

Tim offered some powerful messages to January 29th’s “virtual marchers.” For instance, he said, “We need to go on a rescue mission of truly loving people well.” In choosing to safeguard life, “We can choose the best interests of other people.”

Tim also praised pro-life advocates for their efforts to reach out to those in need. “I want to thank you for loving people and loving them well,” Tim said.

Tim Tebow is the ultimate survivor. Think about what amazing athletic feats would never have been completed, if he had been denied his very life.

We will never know how many of the more than 62 million children lost to abortion would have populated professional sports teams. What records would they have achieved? What achievements would they have accomplished? Their names may never appear in the record books, but they were precious persons all the same. Their loss diminishes us all.
“It is a scandal to have a president who proudly professes to be a devout Catholic and at the same time has, in essence, pledged to be the most pro-abortion president in our history”—Archbishop Joseph Naumann

By Dave Andrusko

On January 21 we reposted excerpts from a letter sent to the newly inaugurated pro-abortion President Joe Biden from Archbishop José Gomez in which the president of the United States Conference of Catholic Bishops (USCCB), offered his prayers to Mr. Biden and his family but also offered a reminder “that our new President has pledged to pursue certain policies that would advance moral evils and threaten human life and dignity.”

The first policy Archbishop Gomez cited was abortion.

Here, we’re reposting comments from a January 22 statement issued by Archbishop Joseph F. Naumann of Kansas City. Archbishop Naumann is chairman of the U.S. Conference of Catholic Bishops’ Committee on Pro-Life Activities. We are also reposting from a column Archbishop Naumann wrote for The Leaven, his archdiocese’s newspaper.

First, the statement, in response to President Biden’s and Vice President Kamala Harris’ statement describing the Roe v. Wade decision as “an advancement of women’s rights and health.”

“It is deeply disturbing and tragic that any President would praise and commit to codifying a Supreme Court ruling that denies unborn children their most basic human and civil right, the right to life, under the euphemistic disguise of a health service. I take this opportunity to remind all Catholics that the Catechism states, ‘Since the first century the Church has affirmed the moral evil of every procured abortion. This teaching has not changed and remains unchangeable.’ Public officials are responsible for not only their personal beliefs, but also the effects of their public actions. Roe’s elevation of abortion to the status of a protected right and its elimination of state restrictions paved the way for the violent deaths of more than 62 million innocent unborn children and for countless women who experience the heartache of loss, abandonment, and violence.

“We strongly urge the President to reject abortion and promote life-affirming aid to women and communities in need.”

Then this lengthy but very important section from his column for The Leaven:

Today marks the 48th anniversary of the Supreme Court decisions that legalized abortion on demand throughout the United States. More than 60 million American children have been killed by abortion over the past 48 years. The fathers and mothers of these aborted children are not unscathed by the deaths of their daughters and sons.

Just a year ago, Pope Francis in a meeting with the bishops of Kansas, Missouri, Iowa and Nebraska reminded us that abortion is not primarily a religious issue, but a human rights issue.

The Holy Father said that in his dialogue with those who support abortion, he always asked two questions: 1) Is it ever right to kill a child to solve a problem? 2) Is it ever right to hire someone to kill a child to solve a problem?

One of the positive achievements of the Trump presidency was the appointment of many well-qualified federal judges and three Supreme Court justices who recognize and respect the limits of the courts’ authority. Their responsibility is to judge cases based on their compliance with the U.S. Constitution, not to invent rights and/or impose their personal philosophical beliefs on the nation.

President Trump also accomplished much through his cabinet appointments, executive orders and the interpretation and implementation of regulations that resulted in protecting unborn children, religious freedom and conscience rights.

During the campaign, President Biden promised not only to keep abortion legal but even to force taxpayers to fund abortion. He promised to renew government efforts to

See “Scandal,” page 17
States Poised to Protect Unborn Babies and their Moms

By Ingrid Duran, Director, Department of State Legislation

The 2021 Session has started and pro-lifers have hit the ground running with one question in mind: how can we most effectively protect the most vulnerable members of the human family? That is the mission National Right to Life and its affiliates remain committed to: passing laws that protect unborn children and their mothers and educate the public about the humanity of the unborn child.

We are seeing State Legislatures nationwide promoting NRLC priority bills. For example, there is the Pain-Capable Unborn Child Protection Act which protects unborn children from abortion who are capable of feeling pain, around 20 weeks post-fertilization age. It is currently in effect in 15 states. So far this legislation has been introduced in five states (Florida, Hawaii, Montana, New Jersey, and Oregon). We are early in the legislative calendar, so we anticipate it being introduced in addition states.

The Unborn Child Protection from Dismemberment Abortion is another priority for NRLC. This prohibits a gruesome abortion procedure that kills a living unborn baby by ripping him or her apart, piece by piece in utero. Such laws have already been passed in 13 states.

In 2021, this legislation has been introduced in three states--in Missouri, Virginia, and South Carolina. We expect more legislatures to introduce the bill later in their session. The Born-Alive Infants Protection Act requires that health care personnel provide medical treatment to any child born alive following an attempted abortion. The bill been filed so far in 13 states: Hawaii, Illinois, Minnesota, Missouri, Montana (passed the House), New Hampshire, New Jersey, New York, Oregon, Rhode Island, South Dakota (passed House); Wisconsin, and Wyoming. Other popular legislative proposals that have the ability to save unborn life include the Abortion Pill Reversal (APR) bills. These laws give abortion-minded women information about possibly reversing the intended effects of chemical abortions, if they change their mind after taking mifepristone, the first drug of the two-drug cocktail. So far 5 states have introduced such bills: Indiana, Iowa, Montana (passed its House); and South Carolina. South Dakota is amending its existing law. We anticipate additional legislative action going forward.

The Kansas Legislature recently passed the “Value Them Both” constitutional amendment which will be on a statewide ballot in August 2022. This was necessary after a devastating state Supreme Court ruling found a right to abortion. This could prevent the state from enacting a law that protects unborn children from being dismembered during an abortion. The constitutional amendment clarifies that “the constitution of the state of Kansas does not require government funding of abortion and does not create or secure a right to abortion.” Iowa and Kentucky are also considering state constitutional amendments. Louisiana passed a similar measure last year.

The evidence is clear. It doesn’t matter if we face four years of a Biden-Harris Administration that is hostile to unborn life, the mission of NRLC and its state affiliates is to stay on the task of effectively protecting unborn babies and their mothers.
WASHINGTON – Each January, the Knights of Columbus (KOC) release their annual poll on Americans’ opinions on abortion. They did so again on January 27, and the results are not only very encouraging, the poll probes areas no other survey takes the time to check.

“This polling continues to show that a majority of Americans do not support the sweeping pro-abortion changes to law that are sought by President Biden and the Democrat Congress,” said Carol Tobias, president of National Right to Life. “Pursuit of this radical pro-abortion agenda shows just how out of touch they are with their constituents.”

There are multiple highlights:

One of the points of conflict between the new pro-abortion Biden/Harris administration and most of America is federal funding of abortion. The Hyde Amendment is a prime pro-abortion target. The baseline number in the Marist poll who “oppose using tax dollars to pay for a woman’s abortion”—58% —is solid and consistent with prior polling. What is noticeable is that 65% of Independents and even 31% of Democrats oppose federal funding of abortion.

When it comes to support/oppose “using tax dollars to support abortion in other countries”—another point of conflict – a majority of 77% opposes. That includes more than six in ten of those who identify as pro-choice (64%).

A new front in the abortion battle is banning abortion when the reason the child is targeted for death is a diagnosis of Down syndrome. Of the 1,173 adults surveyed, 70% “oppose abortion due to the expectation a child will be born with Down syndrome.”

Another issue on the radar of pro-abortion ideologues is that “overturn Roe v. Wade.” What is the public’s view? In summary, “65% want Roe v. Wade reinterpreted to either send the issue back to the states (48%) or stop legalized abortion (17%).”

Less than a third (31%) want to “allow abortion to be legal without restriction at any time.”

The importance of the following response would be difficult to overstate. The public, when given the option, believes in win-win solutions: 80% say “it is possible to have laws which protect both the health and well-being of a woman and the child.” Only 14% agree “it is necessary for laws to choose to protect one and not the other.”
Uprooting pro-abortion lies and planting truth in their place

By Dave Andrusko

“By looking for earthquakes to describe changes in the political landscape, the effects of erosion and drift are easily overlooked, even though the end results can be at least as substantial.” — Greg Adams: “Abortion: Evidence of an Issue Evolution.”

Imagine you are an archeologist working at a famous, well-excavated site. You’ve been there for some time, when, seemingly out of the blue, you start making significant finds every 15 feet or so.

First, you’d be pleased, then you’d think about the responses of most of the handful of specialists who were the only ones who were more than casually aware of the site. With monotonous regularity, they had insisted all along that what you’d found so far was trivial — and that if there was anything of significance in the locale, it would have long ago been unearthed.

But with the latest diggings, honeycombed with amazing artifacts, suddenly a larger, more comprehensive picture of the site came into focus. What you had discovered previously is now seen in a new light as well. Clearly, you are onto a major scientific discovery — clearly, that is to you, but not to the habitual naysayers who’d always insisted the expedition was a waste of time.

Wedded to a position that was growing more untenable by the hour, these “experts” reacted as they always had: by offering lame, beside-the-point excuses in an attempt to explain away what you had unburied.

You’d expect that from people whose thinking had long since fallen into an inescapable rut, or who may have had ulterior motives. But once news leaked out, what about those coming fresh to the evidence?

How would those not loaded down with the burden of defending an entrenched position for decades evaluate the discoveries, old as well as new? Would they be more receptive to the same old talking points (shouted perhaps a little bit louder), or to the discoveries’ soft but clear message?

This may, at first glance, seem a stretch, but I honestly think this is where the abortion controversy stands today.

In the abortion context, “insiders,” such as you and me, on one side, and the we’ve-never-met-an-abortion-we-wouldn’t-condone crowd, on the other side, have been privy to a thousand different discoveries made since 1973. Unbeknownst to most people, there are two dimensions to this, both damaging to anti-life forces.

On the one hand, there is a far greater appreciation of (and familiarity with) the marvelous sophistication medical tests or full-color four-dimensional ultrasounds were required to know that pregnant women carried living human beings. Those “discoveries” didn’t require a shovel to unearth. They were there, plain as day, for all to see.

But in the last few decades, an appreciation of what world-renowned geneticist the late Jerome Lejeune once called the “symphony of life” has increasingly become part of our common cultural literacy.

Not so long ago knowledge of the unborn’s shared humanity was limited to a select group, rather like the audience that could afford to attend a concert at Carnegie Hall.

Now, it’s akin to watching Great Performances on PBS. Thanks to medical technology, we can all enjoy the music. Not so long ago the little ones were dismissed in elite circles as little more than stowaways, if not pirates. We now know that the developmental journey of unborn children is as thrilling as any voyage to a South Sea island written by Robert Lewis Stevenson.

Which is merely to say that maintaining the old dismissive orthodoxy is a far tougher sell when a baby’s first picture is an ultrasound, held to the refrigerator door with a small magnet, and admired daily.

Seeing really is, if not believing, a way station to questioning pro-abortion propaganda.

You may know there was an entire school of thought that argued that a major reason the old Soviet Union fell was because computers, e-mail, and fax machines undermined the regime’s rigid control of information. Once the corruption endemic to the Soviet State could no longer be hidden, the empire collapsed.

This is precisely the fate befalling the Abortion Establishment.

The collective impact of numerous pro-life initiatives—especially the Pain-Capable Unborn Child Protection Act, the ban on the dismemberment of living unborn babies, and the sheer inhumanity of refusing to treat abortion survivors—supplementing by an almost magical medical technology, is uprooting lies and planting truth in its place.

Today, with a Biden-Harris administration in place, we can be forgiven if we miss all that is going on both on and beneath the surface.

Please don’t!
Kentucky General Assembly overrides Gov. Beshear veto of pro-life legislation

Means two new pro-life measures have already passed

By Dave Andrusko

The overwhelmingly pro-life Kentucky legislature made short work of a veto by pro-abortion Gov. Andy Beshear.

Two weeks ago, Beshear vetoed House Bill 2, which gives Attorney General Daniel Cameron “the power to seek civil and criminal penalties for any violation of Kentucky’s abortion laws,” The Associated Press reported.

A fuller explanation came from Kentucky Right to Life which explained that HB2 “adds additional health and safety assurances and protection for women seeking to terminate their pregnancy by allowing the Attorney General oversight and to act unencumbered to investigate abortion facilities and take action if violations of the law have occurred.”

AG Cameron tweeted, “Glad to see the General Assembly override the Governor’s veto of HB 2 today, allowing our office to ensure that abortion clinics follow the law.”

The General Assembly also passed SB 9 which supports the “human rights” of any child born alive during an abortion procedure to receive appropriate and ethically responsible medical attention. Additionally, SB9 legally formalizes that any born-alive infant shall be treated as a legal person in Kentucky statutes.

As NRL News Today reported, facing the certainty that this veto would be overridden, Gov. Beshear allowed the bill to become law. “I’m disappointed he didn’t sign it [SB 9], but I’m grateful he didn’t veto it,” said the bill’s sponsor, Sen. Whitney Westerfield. “I’ll take what I can get.” The bill became law on the 48th anniversary of Roe v. Wade.

In addition, a pro-life bill (HB 91) is being proposed in the current Legislative Session as a way to be sure abortion does not become law in Kentucky, if and when Roe is overturned.

A summary of the bill reads, Propose to create a new section of the Constitution of Kentucky to state that Kentucky’s Constitution does not secure or protect a right to abortion or funding of abortion.

Value Them Both Amendment Passes Kansas Senate

From page 7

and Senate President Ty Masterson (R-Andover) showed exceptional leadership throughout this whole process.”

The callous nature of the abortion industry knows no bounds. The idea that they would deny a young girl who has been sexually assaulted and dropped off at an abortion clinic the protections of parental notification and informed consent should outrage all Kansans.

The Kansas House had previously passed Value Them Both on Friday, January 22 by a vote of 86-38. In addition to the tremendous efforts of the House bill carriers and leadership, freshman Rep. Patrick Penn (R-Wichita), whose mother chose life, gave a stirring speech on the floor in support of Value Them Both.

KFL asks Kansans to take a moment to thank the state legislators who supported Value Them Both and express their disappointment to those who denied Kansans a voice in this process.

Now the real work begins as we strive toward the passage of Value Them Both at the ballot box in August 2022!

“It is a scandal...”

From page 13

force the Little Sisters of the Poor to provide abortifacients in their lay employee health plans.

I hope that these are promises our new president will fail to keep. We must pray for President Biden to have a conversion of mind and heart on this most fundamental of all human rights issues.

It is a scandal to have a president who proudly professes to be a devout Catholic and at the same time has, in essence, pledged to be the most pro-abortion president in our history.

We need to pray for our new president, Joseph Biden, and Vice President Kamala Harris, that the Lord will bless them in fulfilling their responsibilities to lead our country.

We need to pray for the good of our nation that the Lord will bring forth blessings from a Biden presidency.

Based on his proposed cabinet appointments and the promises he made during the campaign, I anticipate the next four years will be very difficult and I will have to disagree vigorously with several of President Biden’s policy initiatives.

In a democratic republic, we need to be able to debate vigorously and honestly important public policy issues.
Pro-lifers working to stave off pro-abortion legislation until the next election cycle

By Dave Andrusko

Speaking of double standards….

The pro-abortion tandem of President Joe Biden and Vice President Kamala Harris is busy, busy “undoing the damage” of the administration of pro-life President Donald Trump.

Their “repairs” include …

*Reversing the Mexico City Policy the day before the January 29 Virtual March for Life, commemorating the 48th anniversary of the appalling Roe v. Wade and Doe v. Bolton decisions. The impact will be to “force U.S. taxpayers to fund organizations that promote, lobby for or perform abortion on demand in foreign countries,” to quote Rep. Chris Smith (R-NJ).

*Beginning the process of acceding to Planned Parenthood. Once again, in violation of the original intent of Title X Family Planning dollars, the nation’s largest abortion provider will rake in tens of millions of dollars even though it co-locates with abortion clinics and will perform, promote, refer for, or support abortion as a method of family planning.

*Restoring US funding to the United Nations Population Fund which had been stopped under President Trump due to its complicity with China’s coercive population policy.

*Withdrawing from the Geneva Consensus Declaration which asserted that “there is no international right to abortion, nor any international obligation on the part of States to finance or facilitate abortion.” And they are just getting started.

Could you say they were “emboldened” by winning the presidency by a sliver, maintaining a tiny, tiny majority in the House, and not even having a majority houses of the state legislature and a Republican is governor. If anyone could be said to have a mandate—to be rightly “emboldened”—it would be Republicans in Texas.

Writing for the Texas Standard, Jill Ament & Shelly Brisbin told us Andrea Zelinski covers state politics

Andrea Zelinski covers state politics

President Biden, did not hide his strong convictions on abortion until he was safely elected. No one had to guess that the Republican controlled legislature would pursue legislation protecting mothers and their unborn babies.

There is a “conservative” — faithful to the Constitution—majority on the Supreme Court not because Republicans packed the High Court (as pro-abortion Democrats keep suggesting they will) but because they elected one of their own as President.

Pro-abortion Democrats, extremist by nature, cannot help but overshoot, aided by President Biden who is a willing accomplice and enabler of the Abortion Industry.

Pro-lifers will fight to stave off pro-abortion legislation until the next election cycle when we can anticipate restoring sanity.
Pro-Life Claudia Tenney wins by 109 votes in last 2020 congressional race to be decided

By Karen Cross, National Right to Life Political Director

On Monday, the New York State Board of Elections officially certified pro-life Republican Claudia Tenney as the winner in New York’s 22nd Congressional District. Tenney defeated pro-abortion Democrat Rep. Anthony Brindisi by 109 votes: 156,099 votes to Brindisi’s 155,989.

“The election board’s four commissioners unanimously certified the results Monday in a voice vote after a state judge overseeing disputed ballots in the recount issued a ruling Friday in Tenney’s favor,” The New York Post reported.

In a ruling released Friday, state Supreme Court Justice Scott Del Conte, who oversaw the recount, wrote, “Every single valid vote that was cast in New York’s 22nd Congressional District has been accounted for, and counted.”

During his two years in Congress, Rep. Brindisi had a 100% pro-abortion voting record. He had been endorsed by Planned Parenthood, the nation’s largest abortion provider.

Claudia Tenney’s first run for Congress was in 2014 when she challenged a pro-abortion Republican incumbent in the primary. Although that effort was unsuccessful, it laid the groundwork for her victory two years later when the seat was open.

During her term, she championed numerous pro-life bills and maintained a 100% scorecard from National Right to Life. She was defeated by Brindisi in 2018 during an election cycle many likened to a “blue wave.”

Tenney joins a group of over a dozen pro-life candidates who flipped pro-abortion seats in 2020. She also increases the roster of pro-life women in Congress, a number which more than doubled after the 2020 elections.

While Democrats currently hold the majority in the House, they currently have the slimmest majority in modern history.
Of course, push on to Allow Expanded Human-Embryo Research

By Wesley J. Smith

Back when embryonic-stem-cell and other types of experimentation on early embryos commenced, “the scientists” promised they would always limit their activities to embryos in Petri dishes to the maximum of 14 days in development. Just a collection of undifferentiated cells, they sophistically maintained. We’ll stop when the nervous system begins to develop.

It was all a ruse. The “14 day rule,” as it came to be known, only prevented that which could not be done. You see, the state of the science was such that embryos could not be maintained for longer. But it assuaged the peasants. Besides, the scientists knew that the boundary wasn’t intended to be permanent. It was just a way station until embryos could be maintained outside a woman’s body for more than two weeks.

That time is now arriving, and so, of course, the push is now on to expand the limit to 28 days.

How is that justified, based on past assurances? Well, first deploy relativism.

Scientifically, an embryo is an embryo, wherever it might be located. But we’ll pretend that what really matters regarding moral value is geography. From “The Time has Come to Extend the 14-Day Limit” [which appeared in the British Journal of Medical Ethics]:

Elsejin Kingma considers the idea that the ‘location of an embryo—whether it is in a pregnant woman or in a petri-dish—may affect its moral status and/or value’. She argues that it is not just the stage of the embryo that is relevant to its moral status or value, but whether it is, or will be, in an environment that promotes its further development.

She concludes that this means there is (further) good reason for a moral distinction between ‘research’ embryos and ‘reproductive implanted embryos’.

Given that almost all — if not all — of these bioethicists believe in abortion on demand, this is a load of hooey. Yes, that is the logic, and the paper goes there:

Notwithstanding the importance of the scientific basis for human embryo research, there are ethical and philosophical reasons why this rule is now ready for amendment.

In the UK, in line with the Abortion Act 1967, an abortion is legally permitted up to the 24th week of pregnancy. Conventionally, a human embryo is termed a fetus from 9 weeks after fertilisation. It is legal to abort an embryo or fetus substantially ‘older’ than 14 days, and, with appropriate consent, to do research on its tissues, yet it is illegal to experiment on an embryo beyond 14 days that was never to be implanted.

Why stop at 28 days? What are the limiting principles? What is the permanent principles? What is the permanent line with regard to unborn life beyond which science will never be allowed to go regardless of the potential knowledge to be attained — especially in the U.S., where some states have removed gestational limits on abortion and that is the goal of the national Democratic Party and Biden administration? I can’t see any.

How is this excused? Princeton’s Peter Singer — the New York Times’ favorite moral philosopher — and other bioethicists claim that human life, per se, is morally irrelevant. What matters are capacities — such as self-awareness — that earn that human being the label of “person.”

Embryos are not conscious. Neither are fetuses. They are, hence, human non-persons. So why not permit experimentation and body-part harvesting through the ninth month since, in essence, unborn life are mere things? Indeed, before that time arrives, why not pay women to gestate longer before obtaining an abortion so we could get the parts — an odious idea already proposed in the bioethics literature.

This isn’t just philosophical musing. We may soon have the ability to maintain fetuses in artificial wombs. Once that happens, what is to prevent scientists from creating embryos, implanting them in artificial wombs and treating fetuses as a mere natural resource to be exploited and harvested?

Live fetal experimentation was conducted in the late ’60s, after all, and was only stopped (pre-Roe) because people still believed in the sanctity of human life. That great moral principle no longer holds sway over great swaths of society. The important thing now is preventing suffering by almost any means necessary.

I could go on and on, and probably will. But the bottom line for this post is this: When scientists and bioethicists promise to draw ethical lines about experimenting on unborn life, they don’t really mean it. It’s all a big con. They will only agree to forbid that which they cannot — yet — do. And once they can “go there,” the lines will be redrawn to permit them to do whatever they want.

And then they wonder, “Where is the trust?”

Editor’s note. Wesley’s columns appear at National Review Online and are reposted with permission.
Planned Parenthood wins last minute reprieve from local Texas Judge

By Dave Andrusko

At the eleventh hour, another judge rescued Planned Parenthood yet again.

Late last Wednesday night, Travis County Judge Maya Guerra Gambala granted three Planned Parenthood affiliates operating in Texas a temporary restraining order blocking the state from removing Planned Parenthood from the state’s list of eligible Medicaid providers. Judge Gambala set a hearing for February 17 to determine “whether a temporary injunction should be issued to keep Planned Parenthood in Medicaid,” Chuck Lindell of the Austin American-Statesman reported.

Planned Parenthood argued “that Texas failed to issue a “proper termination notice” under state law governing which providers are covered by Medicaid,” according to The Hill’s John Bowden. Planned Parenthood argued in January 2016 — kicking off years of litigation — complied with all necessary state laws and Medicaid regulations,” the Austin American-Statesman reported.

“Texas officials, however, have argued that Planned Parenthood’s attack on the Jan. 4 notice of termination was misguided because a notice sent in January 2016 — kicking off years of litigation — complied with all necessary state laws and Medicaid regulations,” the Austin American-Statesman reported.

“Texas officials, however, have argued that Planned Parenthood’s attack on the Jan. 4 notice of termination was misguided because a notice sent in January 2016 — kicking off years of litigation — complied with all necessary state laws and Medicaid regulations,” the Austin American-Statesman reported.

NRL News Today has reported on the battle between Texas state officials and Planned Parenthood going back to 2016. Planned Parenthood was notified of the final decision to terminate contracts in December of that year, more than a year after Texas officials first moved to remove Planned Parenthood from all Medicaid programs. The following month, after three days of testimony and arguments in the U.S. District Court in Austin, Judge Sam Sparks, a reliable Planned Parenthood ally, issued the initial injunction.

“Texas appealed, leading ultimately to a December ruling by the 5th U.S. Circuit Court of Appeals that backed Texas in the Medicaid fight,” Texas Right to Life explained.

A win for the state would have enormous implications. As Townhall’s Karen Townsend wrote Wednesday, “Houston has the largest Planned Parenthood abortion center in the United States. Planned Parenthood facilities in Texas receive about $3.1 million in taxpayer funding from Medicaid annually. An estimated 8,000 Texans use its facilities every year in the state.”

Inoculating the public against the sickness of abortion

By Bonnie Finnerty, Education Director, Education Director, Pennsylvania Pro-Life Federation

At an intersection of both history and numbers, that is where we are. Historically, we mark one year since coronavirus surfaced in the United States, while also observing the 48th anniversary of the plague of legalized abortion.

Numerically, we mourn the more than 400,000 lives claimed by the pandemic of 2020, while also grieving more than 800,000 lives that perished last year in a much more enduring plague.

While applauding extraordinary efforts to save lives touched by a hostile virus, we lament everyday efforts to take smaller, completely helpless lives.

While eagerly welcoming a COVID vaccine produced in record time, we yearn for a long-awaited vaccine that will end prenatal dismemberment.

What we need is a cure for the sickness that has caused the premature demise of 62.5 million unique individuals.

For decades, the pro-life movement has been working toward a “vaccination” of sorts. One that fights not against a petri dish viral culture but instead an airborne culture of death that has gone viral.

What is our antidote to abortion? It is comprised of scientific facts, fundamental civil rights, respect for natural law, abundant compassion, practical resources. We inoculate the public with our witness and testimony, dialogue and debate, passion and prayers.

And the more we inject the culture with truth, the more we build an immunity to the lies that feed the abortion virus. The more we combat the insidious belief that any one life is disposable, the healthier we become as a human family.

Our efforts strengthen women and men who feel weakened by distortions and deceptions, empowering them to choose life.

Our pro-life “vaccine” creates a society welcoming to life no matter the circumstances because even the most difficult circumstances do not erase our humanity.

Once through your efforts we achieve a different kind of herd immunity, we will realize that there is no crisis that calls for killing and no crisis that can’t be overcome with love and understanding, help and hope.

We will have made abortion unthinkable.

That is the medicine we need to administer in ending the deadliest pandemic our country has ever known. That is the vaccine for abortion.
Amendment to protect babies born alive fails to advance, foreshadowing larger fights over abortion

From page 1

The amendment received a bipartisan majority vote of 52-48, but failed to meet the 60-vote threshold required to advance.

All Senate Republicans, along with Democratic Senators Joe Manchin (D-W.Va.) and Bob Casey, Jr. (D-Pa.), voted in favor of the amendment. Forty-eight Senate Democrats, including newly seated Georgia Senators Raphael Warnock, and Jon Ossoff, blocked the amendment, which required 60 votes to pass.

Sen. Sasse stated, “Protecting newborns ought to be the easiest thing in the world. This legislation isn’t red vs. blue, it is simply about giving every baby a fighting chance. Every baby deserves care. This isn’t about abortion, it’s about human rights. I am going to continue to fight for these babies because love is stronger than power and we will win.”

Sen. Sasse first introduced the Born-Alive Abortion Survivors Protection Act in 2015 and recently reintroduced the legislation for the 117th Congress.

The Born-Alive Abortion Survivors Protection Act (S. 123) would enact an explicit requirement that a baby born alive during an abortion must be afforded “the same degree” of care that would apply “to any other child born alive at the same gestational age,” including transportation to a hospital. In addition, the bill applies the existing penalties of 18 U.S.C. Sec. 1111 (the federal murder statute) to anyone who performs “an overt act that kills a child born alive.” The bill also empowers women with a right to sue their abortionists and others for harm caused by violations of the act.

National Right to Life strongly supports the Born-Alive Act, while only 4% of Senate Democrats voted in favor of the amendment. Democrats are truly pandering to left’s most pro-abortion radicals.

In the last Congress pro-life House Republicans worked hard to try to bypass pro-abortion leadership, led by Speaker Nancy Pelosi (D-Ca.), in order to force a vote on this legislation. It is anticipated that they will attempt to do so again.

In 2002, Congress enacted the Born-Alive Infants Protection Act. Under this law, babies who are born alive, whether before or after “viability,” are recognized as full legal persons under federal law.

The 2002 Born-Alive Infants Protection Act became law without a single dissenting vote. Since then, the legal landscape has changed. There is evidence that some abortion providers, despite the clear language of the statute, do not regard babies born alive during abortions as persons. As a result, they do not provide babies born alive with the same appropriate care that would be provided to premature infants of the same gestational age.

Hyde Amendment

The same day the budget resolution passed without a single Republican vote, Sen. Steve Daines (R-Mt.) who chairs the Senate Pro-Life Caucus, sent a letter signed by 48 pro-life senators to Democratic Leader Chuck Schumer pledging to vote to block any bill that would undermine the Hyde Amendment or any other pro-life protections.

The letter states in part, “We are united in our resolve to guard against any changes to Federal law that would unsettle nearly half a century of bipartisan consensus against taxpayer funding for abortion on demand, or otherwise threaten the lives of unborn children. Accordingly, we are committed to vote against the advancement of any legislation that would eliminate or weaken the Hyde Amendment or any other current-law pro-life protections.

The fact that even the common-sense Sasse Amendment, which would essentially prevent infanticide, failed to advance, is a grim foreshadowing of even larger fights on preserving pro-life policy to come.
Have you had the chance yet to read “The State of Abortion in the United States, 2021”?

By Dave Andrusko

National Right to Life produces great quantities of invaluable materials for everyone from someone who happens across our webpage to the most dedicated pro-life veteran who consumes every item.

I say that by way of reminding our faithful readers of an annual resource whose importance can be lost in the swirl of events surrounding the anniversary of Roe v. Wade and (in this case) the inaugural of the pro-abortion tandem of President Joe Biden and Vice President Kamala Harris.

I’m referring, of course, to “The State of Abortion in the United States, 2021” which you can read at www.nrlc.org/stateofabortion

If you haven’t started, or just tipped a toe in, let me explain why the 8th annual report really is must reading.

To be sure, the daily National Right to Life News Today and the monthly NRL News provide important updates on current events—and if you are not a subscriber, please take 30 seconds out and sign up at https://mailchi.mp/nrlc/emailsignup

However, “The State of Abortion in the United States” brings together a wide variety of topics written about in depth, found nowhere else in one place.

The report begins with an Introduction by NRL President Carol Tobias and 69 pages later ends with a summary of the presidential records on abortion going back to Ronald Reagan.

In between NRLC experts offer

• A terrific explanation of the total number of abortions since 1973 and how that figure of over 65 million was arrived at.

• A history of the Hyde Amendment. Once through, you will readily understand why it is among the principal targets of the Abortion Industry.

• An in-depth examination of the abortion-promoting ERA, aptly described as a “Constitutional Stealth Missile.”

• A superb overview of the anti-life mission of Planned Parenthood whose insatiable thirst to increase the number of abortions is unappeasable. PPFA continues its ongoing campaign to increase its already huge “market share” (over 40% of all abortions already) and enhance its political power.

• A summary of the deeply entrenched pro-abortion mindset of President Biden and Vice President Kamala Harris and what they have in mind.

• Back to back digests of federal and state policies on abortion. You will want to bookmark these sections.

• Looking back at the role abortion played in the 2020 elections, you’ll learn, “Nationally, 23% of voters said that the abortion issue affected their vote and voted for candidates who oppose abortion. This compares to just 18% who said abortion affected their vote and voted for candidates who favor abortion, yielding a 5% advantage for pro-life candidates.”

• An extremely helpful Synopsis of Supreme Court abortion cases and the aforementioned “Presidential Record on Life.”

Take a few minutes out each day this week and read the report. You’re be a very informed pro-lifer after you do.
WASHINGTON, DC — Senator James Lankford (R-OK) Wednesday delivered an impassioned speech on the Senate floor to ask a simple question: Is that a baby? His speech comes ahead of the annual virtual March for Life on Friday. Lankford pressed that some in our nation want to avoid the question of whether a child in the womb is in fact a human baby and instead ask whether or not a legislator supports programs that help children and mothers after the baby is born. Lankford shared his “shock” at some of the work the current nominee to lead the Department of Health and Human Services, Xavier Becerra, has done to actually promote and allow for abortions of the most vulnerable humans among us. Lankford encouraged those attending the March for Life virtually this year to continue to speak up for the lives of the unborn.

If you buy a new GM car, a Nissan, Honda, Kia or Toyota, even a Hyundai, you’ll notice they started installing a new feature in their cars. It’s a reminder when you turn off your engine to check your back seat. Quite frankly, I rented a car not long ago, and it started dinging, and I tried to figure out what I had done. I kept looking around until I saw the little monitor on the dashboard, and it said check the back seat, which I thought was great. Because the makers of those cars all believe every child is precious, and they shouldn’t be harmed.

We’ve all heard stories like this, but I distinctly remember last summer seeing in the news the story about an infant who died because they were left in a hot car. That’s why these carmakers are making this feature now. I remember as I saw the story on the news and just the reports and how angry people were in the community, and they were angry at the store and they were upset on the news. And they couldn’t believe that a mom had left a child in the back seat of a car, and they had slowly died in the heat, because no one wants to see a child harmed. Everyone believes that every child is precious.

But I remember when I saw the story on the news last summer, I remember turning to my wife and saying, ‘I can’t figure out our culture sometimes, because that same mom and that same baby could have gone into an abortion clinic just a few months before, and that child’s life could have ended, and it wouldn’t have made the news. In fact, no one would have flinched.’ In fact, the very same people that were furious at that mom for leaving her child in a hot car to die would have argued for her right to destroy that exact same child, and in fact would have called it her reproductive right or even the new euphemism out there reproductive ‘care.’ Same child, same mom, nothing was different but a few months in time.

“Reproductive care” seems like such a nice little euphemism, but what it really means is paying someone in a clinic to reach into the womb with a surgical instrument to pull the arms and legs off of a child in the womb so that they will bleed to death in the womb and then suction out the little boy or girl’s body parts one at a time. That’s what reproductive care means. And I don’t understand why that’s normal, but leaving a child in the back seat of a hot car is a tragedy. Maybe it’s because as a nation, some people are afraid to answer the most obvious question: is that a baby? That’s the most obvious question. That face, that nose, those two eyes, that mouth, that chin, those fingers—is that a baby?

That’s really the only question. Is that a child? Maybe there’s a second question that needs to be answered: are all children valuable, or are only some children valuable? We seem to have a great deal of debate today in our society—and we should—about facts. People say we can’t seem to agree on the same set of facts and truth. You can’t have your facts and my facts. We just only have facts. The media, big tech, activists have all decried of our...
loss of our ability as a nation to just accept clear facts in front of our face. The obvious truth.

So let me ask a question again: is that a baby? Yes or no?

Because if we’re all supposed to say let’s at least agree to the most basic of facts, how about that one? Is that a human child with a future and a purpose and a name? Are all children valuable, or are only some?

Gold is valuable. It doesn’t matter its size. I have gold in my wedding ring. Many people have gold in their wedding rings. If we found a small piece of gold on the floor, it would be valuable. It wouldn’t matter its shape, wouldn’t matter its size, small or large. We don’t discriminate. Gold is valuable because everyone recognizes its worth. Every single senator in this room recognizes the value of gold. It’s around $1,800 an ounce right now to get gold. No matter how small gold is valuable, but we can’t seem to agree that all children is valuable.

Literally gold is more precious to some people in this room than children are. Children aren’t valuable only sometimes, or only certain children. Children are valuable. It can’t be just if a mom or dad wants a child they’re valuable, and if they don’t want a child, they’re not valuable, they’re disposable. The mom or dad gets to choose who’s precious and who’s medical waste.

Is that a child? That’s really the only question that has to be answered, because everything else flows from that.

There are political conversations in this room about the value of children, and every time it comes up, it gets noisy. People will say, ‘Well, you don’t fund enough money for education or child care or health care in communities, so you don’t love children.’ I would say I voted for the exact same bill you did last year for billions of dollars for assistance in child care, billions of dollars for early childhood education, elementary and secondary education, higher education. We did additional assistance for SNAP benefits last year and assistance of benefits of moms in need, increased health care for all communities, for federally qualified health centers to make sure we get health care to every single community. I voted on those exact same things multiple other people did in this room. I care about children outside the womb.

But those questions really aren’t the question. They are distractions to the question, and I get it. Because if I ask: is that a child, people respond, ‘Well do you spend enough for child care or health care?’ And I still say, ‘Stop, answer my first question. Is that a child?’ Maybe I should ask a more basic question: does everyone in this room believe in the principle we should do unto others as we would want done unto us?

What would you want done to you when you were in the womb?

Listen, I don’t want to address this issue lightly. This is a difficult issue for some people. I don’t think an abortion is a flippant thing that anyone walks into an abortion. I don’t meet anyone that had an abortion is somehow gleeful about it. Quite frankly, I can’t imagine that anyone who had an abortion would ever forget the sights and the sounds and the smells of an abortion. Knowing that a helpless child is dying at that moment. I grieve for moms and dads who will never, ever forget that they went into a clinic and paid someone to get rid of their child in the name of ‘reproductive care.’ I can’t imagine what their emotion is. But we as a society have to answer this question still for every child that is yet to come.

Forty-eight years ago last week, the Supreme Court made a decision that has now resulted in the death of 62 million children in America—sixty-two million. That is hard to fathom. And like so many other Supreme Court decisions, America has not forgotten about this one. Our culture has not just moved on and accepted it.

Every year since 1974, the first year after the Roe v. Wade decision, individuals from across the country have gathered in Washington, DC, in defense of the unborn. Friends, families, church leaders, community folks, they have all marched in the rain, the sleet, the snow. It’s cold every year this week in January. But they come. This year will be different due to COVID-19 and the ongoing security concerns in Washington, DC, Marchers are staying home, and they are engaging virtually. Maybe this is one more moment where even more people can get involved online because I expect the rally this year will draw an even larger number of people. Students and families and people, quite frankly, from all over the world, just to ask a question is on the motion: will we recognize the most obvious thing in front of our face? That’s a baby.

President Biden this week celebrated the passage of Roe v. Wade by declaring that he wants to pass a federal law requiring abortion to be provided in every single state in America. Not just trust a court decision from 1973. He wants us to proactively require in statute that every state demands abortion in their state. And that the federal taxpayers with hard-earned tax dollars should actually be required to pay for those abortions all over America. It wasn’t long ago that Senator Biden was saying things like ‘taxpayers shouldn’t be required to pay for abortion. They shouldn’t be required to pay for something that they find so morally objectionable.’

It wasn’t that long ago, Senator Biden was talking about abortion being safe, legal, and rare.

Now as president, within the first week, he’s moving as fast as he can to promote abortion and demand taxpayers pay for it. In fact, painfully so, President Biden’s nomination for the Secretary of Health and Human Services has actually no health care experience at all. It’s a little surprising to a lot of us when we saw it because we are used to seeing the leader of Health and Human Services be a physician or scientist. Which would make sense in the time of enormous global pandemic to have a physician leading health and human services, but he actually nominated someone that his biggest qualification is he is one of the most radical advocates for abortion in the country. He did as a House member. He did as an attorney general in California. And clearly, the promise was made

See “Lankford,” page 41
I suppose the timing could have been more of a poke in the eye of pro-lifers. Pro-abortion President Joe Biden could have reversed the Mexico City Policy and once again allowed Planned Parenthood to co-locate with genuine health care services while receiving Title X monies on January 22, the 48th anniversary of the awful Roe v. Wade decision, or January 29, when there would be a virtual March for Life in Washington, DC.

Instead he split the difference—he chose January 28th—just as an unborn baby is split apart in a dismemberment abortion. The President said of his executive orders (which also “shored up” ObamaCare), “The best way to describe them, is to undo the damage Trump has done.”

In a moment we will talk about the damage President Biden’s executive orders will do on the domestic front. First, here are some comments from pro-life Members of Congress about the international ramifications.

Senate Republican Leader Mitch McConnell (R-Ky.) described rescinding the Mexico City as “running over the consciences of American taxpayers” and “putting them back on the hook for funding foreign abortions.

In a moment we will talk about the damage President Biden’s executive orders will do on the domestic front. First, here are some comments from pro-life Members of Congress about the international ramifications.

American people. But the radicalism of the modern Democratic party seems dug in.

“Fortunately, political dynamics change, but the moral truth doesn’t. Executive orders can’t alter the basic science of human life.”

Sen. Steve Daines (R-Mt., the founder and chairman of the Senate Pro-life Caucus, told Fox News, “President Biden’s decision to reverse critical pro-life policies at home and abroad shows a complete lack of respect for the sanctity of human life. These actions will enrich Planned Parenthood and the abortion industry at the taxpayers’ expense, while endangering the most vulnerable. The United States should not be promoting a radical abortion agenda throughout the world, we don’t want taxpayer dollars to fund foreign abortions.

“This and many other common-sense pro-life policies enjoy broad support from the American people. But the radicalism of the modern Democratic party seems dug in.

Fortunately, political dynamics change, but the moral truth doesn’t. Executive orders can’t alter the basic science of human life.”

Pro-abortion President Joe Biden

Of course, these actions are a mere down payment. President Biden and Vice President Kamala Harris have pledged their complete support to the full range of anti-life proposals. For example, PPFA and its phalanx of allies have shouted loud and clear they want the Hyde Amendment ended. Before it was enacted, over 300,000 abortions were paid for by the taxpayer each and every year. Conservatively, the Hyde Amendment has saved two million lives!

Pro-lifers knew this was coming. They are rolling up their sleeves and digging in for the long haul.
WASHINGTON, D.C.—The Ethics and Public Policy Center (EPPC) has announced the appointment of Roger Severino as a Senior Fellow focused on health care policy, the administrative state, religious liberty, and civil rights. Mr. Severino will direct EPPC’s new “HHS Accountability Project,” which will monitor the Biden administration for actions that threaten quality healthcare and civil rights for all Americans, from conception to natural death. Mr. Severino will also work on a book exploring lessons learned from his groundbreaking work in the federal government on how conservatives can harness the power of the administrative state for conservative ends long sought by the American people.

Mr. Severino joins EPPC after nearly four years as Director of the Office for Civil Rights at the U.S. Department of Health and Human Services, which followed previous positions at The Heritage Foundation, the U.S. Department of Justice Civil Rights Division, and the Becket Fund for Religious Liberty. Mr. Severino holds a J.D. from Harvard Law School, a master’s degree in public policy, with highest distinction, from Carnegie Mellon University, and a bachelor’s degree in business from the University of Southern California, where he was a National Merit Scholar.

“No one has done more than Roger Severino over the past few years to protect good healthcare and authentic civil rights. His work during COVID ensuring that the elderly and people with disabilities were not placed at the back of the line, and that all patients had access to both physical and spiritual care, was heroic. The same is true of his work combatting Obama-era regulations that violated religious liberty. I couldn’t be happier to have him be my first hire as EPPC’s president,” said Ryan T. Anderson, who became EPPC president on February 1, 2021.

“As a government official, I advocated for timeless principles protecting the most vulnerable among us from discrimination, and will continue this work with gusto alongside top-notch colleagues at EPPC,” said Mr. Severino. “I spent nearly four years building government institutions to ensure that conscience, life, and religious freedom would never again be treated as second-class rights. I will not stay silent as the Biden Administration threatens to undo that legacy by indulging the secular Left’s worst impulses.”

Editor’s note. This appeared at LifeSiteNews and is reposted with permission.
federal government from using taxpayer dollars to support abortion procedures. Repealing these pro-life provisions would destroy nearly half a century of bipartisan consensus.”

National Right to Life President Carol Tobias offered the nation’s largest and oldest grassroots organization’s strong support for the Hyde Amendment which bans the use of federal dollars to pay for Elective abortions with narrow exceptions:

The impact the Hyde Amendment has had cannot be overstated: It has proven itself to be the greatest domestic abortion-reduction measure ever enacted by Congress. The Hyde Amendment has enjoyed bipartisan support for over 40 years and is widely recognized as having saved over two million American lives since it was first passed in 1976.

Republican Study Committee Chairman Jim Banks said in a statement, “Despite decades of consensus on this issue, radical Democrats have signaled they no longer have an interest in protecting the conscience rights of millions of Americans who do not want their hard-earned money used to pay for abortions. My colleagues and I demand congressional leaders protect the ban on taxpayer-funded abortions and save the Hyde Amendment.”

Pro-abortion Vice President Kamala Harris has always been a steadfast opponent of the Hyde Amendment, named after the late pro-life champion Rep. Henry Hyde (R-II).

Last year, during the intra-party battle to secure the Democrat Party’s presidential nomination, Biden flip-flopped in a single day from support for the Hyde Amendment to opposition.


Rep. DeLauro’s position is that choosing not to pour taxpayers dollars into elective abortions “is a discriminatory policy.” By contrast, Sen. Shelby told NBC News, “The Republican caucus would resist it,” adding, “We’ve had the Hyde Amendment a long time. And I think it’s pretty clearly embedded in the fabric of our legislation. I support the Hyde Amendment.”
Expressive Individualism: How a shallow view of the self underlies arguments for abortion

By Paul Stark, Communications Director, Minnesota Citizens Concerned for Life

“Expressive individualism,” writes Notre Dame law professor O. Carter Snead, is “the conception of human identity and human flourishing” that “[anchors] the American law of abortion.”

That term, coined by sociologist Robert Bellah, is probably unfamiliar to most people. But the ideas it represents are everywhere. Expressive individualism defines the human self by her inner psychology and her will—her ability to choose in accordance with her own desires and plans. And her flourishing (i.e., what’s good and right for her) consists in uncovering those desires and manifesting them in the world. This view tells us, as a popular expression puts it, “You do you.”

In his 2020 book The Rise and Triumph of the Modern Self, historian Carl Trueman traces the centuries-long development of this way of thinking about the self. Snead, in his own recent book, What It Means to Be Human, critiques the idea and ties it to public policies and court decisions governing abortion and other issues in bioethics.

There is truth to expressive individualism. Values like autonomy, authenticity, and self-expression are important. But this view misses out on much of, as Snead says, “what it means to be human,” and the consequences can be disastrous. Indeed, many of the arguments for abortion, in one way or another, seem to reflect the influence of expressive individualism. They elevate choice over the rights over the vulnerable, they dismiss our responsibilities to those who need us, and they dehumanize human beings who can’t yet express themselves.

Seeing that connection can help us understand the mindset of those who defend abortion—and how their arguments go wrong.

Autonomy arguments

Consider, first, arguments that appeal to autonomy. Autonomy is at the core of the expressive individualist ethic, and it’s easy to spot in the rhetoric surrounding abortion. Defenders of abortion invoke the “right to choose” and “reproductive freedom.” They affirm moral agency and self-determination. They tout the freedom of a woman to chart the course of her own life.

Autonomy is a real ethical principle. But it can’t work on its own as a rationale for abortion. After all, we have a “right to choose” to do lots of things, but not everything. We don’t have a right to harm innocent people, for instance. If that’s what abortion does, then autonomy doesn’t justify abortion. We should have the freedom to determine many facets of our life’s journey, but not the freedom to have others killed so that we get what we want.

Expressive individualism, though, often treats autonomy as an end in itself. The mere fact that we choose something makes the choice good. Willie Parker, a prolific practitioner and advocate of abortion, calls the act of choosing “sacred.” U.S. House Speaker Nancy Pelosi says abortion should be permitted because “we are all endowed with a free will.”

Yet no one consistently subscribes to this understanding of autonomy. The ability to choose an action doesn’t entail that we should choose that action (or that it should be permitted by law). Free will doesn’t mean that every choice we make is right or just. Some choices obviously aren’t. In fact, this view of autonomy gets it backwards. An action isn’t good because we choose it; we choose it because we think it’s good, valuable, or worthwhile.

Some people push unbridled autonomy even further. In a landmark 1992 abortion case, the U.S. Supreme Court reaffirmed its prior holding that the Constitution’s protection of “liberty” requires states to allow the killing of unborn humans. Why think that? “At the heart of liberty,” the Court explained in a widely quoted passage, “is the right to define one’s own concept of existence, of meaning, of the universe, and of the mystery of human life.”

Carl Trueman calls the Court’s argument “a concise articulation of ... expressive individualism.” Similar claims can be found elsewhere in the abortion debate. Cecile Richards, the former president of Planned Parenthood, says the lives of her children began “when I delivered them” because “that’s my own personal decision.” ÉtiennÉ Émille Baulieu, the French doctor who developed the mifepristone abortion drug, puts it this way: “It is up to each person to define whether there is, or is not, a person developing in the uterus. The definition ... may change for each pregnancy.”

This is the idea that reality is whatever we decide it is. Again, though, no one can really buy into it. “Serial killers and child molesters still (thankfully) do not have the right to ‘define their own concept of existence,’” quips Trueman. Feminist scholar Sidney Callahan notes that, just as unborn children today are “measured by the parent’s attitudes and ... defined by the parent’s feelings,” so too throughout history “men have ‘wanted’ women. ... The unwanted woman could be cast off when she was no longer a desirable object.”

There’s a reality outside of our own choices, desires, and self-definition. We don’t get to choose that other human beings don’t matter. They matter whether we like it (or “want” them) or not. That, indeed, is what it means for people to bear human rights. Such rights can’t exist in the reality-inventing world of expressive individualism.

See “Shallow,” page ??
Pro-abortion researchers try to discredit abortion pill information from pro-life groups

By Cassy Fiano-Chesser

A study from the University of California Berkeley School of Public Health has attacked Live Action’s Abortion Procedures website along with other pro-life sites, claiming they are medically inaccurate and misleading in the information they provide regarding the abortion pill. The researchers (unsurprisingly) claimed that Planned Parenthood — the nation’s number one abortion provider which commits 40% of the country’s abortions — presented the most accurate information.

The Daily Californian, UC Berkeley’s student-run newspaper, publicized the findings of the study, which examined the five most presented websites on Google for searches on the abortion pill. “Abortion is a particularly contentious and polarized topic in (the United States), and that makes it particularly susceptible to disinformation online,” claimed Betsy Pleasants, the lead researcher and a first-year doctoral student. “There are a lot of organizations that have a strong presence online that are anti-abortion.”

And yet, Pleasants would do well to realize that being “anti-abortion” does not make an organization untrustworthy on providing information about the abortion pill. In fact, it seems more logical to distrust information from organizations which directly profit from the sale of those drugs — to the tune of $200 million annually.

According to Pleasants, Planned Parenthood’s abortion pill information was over 80% accurate, with “factual information related to medication abortion side effects, how one can access these medications and presented that information and more, in a ‘usable format.’” Pro-life sites, however, were accused of spreading misinformation.

But let’s take a look at the problems with this study. First, here’s a screenshot showing how Planned Parenthood describes the abortion pill procedure:

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What happens during a medication abortion?
The abortion pill process has several steps and includes two different medicines.

First, you take a pill called mifepristone. This medicine stops the pregnancy from growing. Some people feel nauseous or start bleeding after taking mifepristone, but it’s not common. Your doctor or nurse may also give you antibiotics to take to prevent infection.

The second medicine is called misoprostol. You’ll either take the misoprostol right away, or up to 48 hours after you take the first pill — your doctor or nurse will let you know how and when to take it. This medicine causes cramping and bleeding to empty your uterus.
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Clearly, the Abortion Procedures description gives more detail about how the abortion pill regimen actually functions. Yet Planned Parenthood’s vague description is considered by the study’s authors to be more accurate? (Maybe researchers simply disliked the use of the terms “mother” and “baby”…)

Planned Parenthood admits there are potential side effects from taking the abortion pill, but repeatedly assures readers that the risks are extremely rare, and that the abortion pill is safe. Abortion Procedures likewise lays out the risks and side effects of taking the abortion pill, but without wrapping it up in fluffy language. And unlike Planned Parenthood, Abortion Procedures cites sources for its information.

Additionally, Abortion Procedures gives more information, such as the failure rates and facts about fetal development. Those facts may not encourage a woman towards abortion, but that doesn’t make them any less factual.

To see even more evidence of Planned Parenthood’s vague descriptions of what happens when a woman takes the abortion pill, see its video in which a preborn child of up to 11 weeks is depicted as a dot and compare to Live Action’s Abortion Procedures abortion pill video here along with actual photos and footage showing what preborn children look like in their first 10 weeks of life.

Researchers with staunch pro-abortion bias

Pleasants has a website where she describes herself as “a public health practitioner and research [sic] invested in exploring and addressing sexual and reproductive health inequities.” Karen Weidert, a co-author, is the executive director of the Bixby Center for Population, Health, and Sustainability; her biography cites “15 years of experience in international and domestic program management to the Bixby Center’s ongoing efforts to increase access to family planning and safe abortion in sub-Saharan Africa.” Another co-author, Sylvia Guendelman, is chair of the

See “Discredit,” page 45
New book dispels myths about Pregnancy Help Movement

Editor’s note. Now an associate professor of political science at the University of Maryland, Baltimore County, Laura S. Hussey, Ph.D., a one-time board member for NRLC and a research assistant for the NRL Education department, has written an excellent new book on the history, organization, and impact of the pregnancy help movement. The book, The Pro-Life Pregnancy Help Movement: Serving Women or Saving Babies, can be bought on Amazon or from the publisher, University Press of Kansas.

The author sat down with NRL News to answer a few questions about her research and what it found.

NRL News: Tell us what got you interested in a research project on pregnancy care centers.

Laura Hussey: The seeds were planted when I first learned about pregnancy centers through my college pro-life group in the 1990s. The women from the center near my campus talked about and acted on abortion differently from what I encountered before in my previous pro-life involvement, and that intrigued and inspired me. I eventually started volunteering there.

The idea for the book came years later into my academic career. The more I read of others’ research on pro-life activism, the more I appreciated how little was known about pregnancy help.

NRL News: In your book, you talk about pregnancy care centers having to “compete” with abortion clinics. What did you mean by this, why is this the case and exactly how is this done?

Hussey: Pregnancy centers offer information, resources, and support that they hope will persuade women to choose life. The impact of this strategy on abortions depends on abortion-minded women being aware of pregnancy centers and willing to come through their doors. So pregnancy centers have expanded and innovated over the years. They’ve been working on how to offer services abortion-minded women value, in settings they’ll find inviting, and then to market that effectively.

NRL News: What did your research tell you about the location, staffing, and services of these centers?

Hussey: There are nearly 3,000 pregnancy centers, plus other pregnancy help service providers, in the U.S., and the movement has been growing worldwide. U.S. pregnancy centers are in all types of communities and greatly outnumber abortion clinics, but there is a mismatch in where pregnancy centers and abortion clinics are found. Abortion clinics are increasingly concentrating in urban areas, while pregnancy centers are sparser there.

Pregnancy centers depend heavily on volunteers, but today most centers also have paid professionals on their staff. Virtually every center provides free baby-related goods like diapers and formula, and often much more. Most now offer free ultrasounds, in addition to pregnancy tests and options counseling. Other health services, like prenatal care, are becoming more common. Pregnancy centers run various classes and groups, and they do individualized referral work to connect people with community resources for just about any need that might arise, like housing, child care, or health care.

NRL News: What are some of the false impressions about pregnancy resource centers that you think your research enabled you to correct?

Hussey: One is that pregnancy centers are only about talking women out of abortions. Sure, there’s talk, but their scale of goods and services is substantial. My research found that the typical pregnancy center actually seems to spend more of its resources on families where the woman isn’t planning an abortion, or the baby has already been born.

Another is the popular belief that pregnancy centers grew out of pro-life activists’ failures at politics and protest. But pregnancy centers have existed from the pro-life movement’s beginning. They seem to attract different people than politics and protest do; usually people who might be less comfortable with traditional “activism,” though my research found that many become more politically active as they continue in the pregnancy help movement.

See “Book,” page 40
When any of the legion of pro-abortion columnists set out to demonize pro-lifers, there is no need for evidence to “prove” that we are up to [fill in the blank]. For example, just by supporting the life-affirming Hyde Amendment we are, as veteran pro-abortion columnist Robin Abcarian wrote in the Los Angeles Times, “celebrating forced childbearing. Don’t they write dystopian novels about that?”

And, not to miss a tiresome trick, she quotes Marcela Howell of In Our Own Voice: National Black Women’s Reproductive Justice Agenda, who pronounces that the Hyde Amendment is “one of the most racist policies.”

But those were just the usual slurs, verbal ticks. The headline was “Why we might soon see a surge in antiabortion violence.”

Evidence? Don’t be petty. With the kind of six degrees of separation logic Abcarian specializes in, we’re told it’s only a matter of time before some “anti-abortion activist” engages in violence.

What source does she have? Nothing short of that objective scholar Katherine Ragsdale, an Episcopal priest, who is president and chief executive of the National Abortion Federation, a kind of Chamber of Commerce for abortionists. “I don’t anticipate a reduction of violence,” she told Abcarian. “I have been in the movement for over 35 years, and I have watched this roller coaster, this increase in violence during Democratic administrations. It has to do with desperation and not feeling they can go through the regular channels — as you saw when they stormed the Capitol. It’s the same level of craziness.”

Pardon?

There is zero evidence that pro-lifers “stormed the Capitol” on January 6. But since the pro-abortionists control virtually all the major media, everyone they don’t like is lumped into the same “threatening” pot, the better to smear them all.

Abcarian quotes “an evangelical Christian woman who attended Trump’s rally outside the White House” who told the Christian Chronicle, “I wanted to be here because I feel like the Democrats are slapping our Creator in the face,” adding “Also, my Lord wants me here to fight for the unborn.”

Notice how anything—even to “fight for the unborn”—in the hands of the likes of Abcarian (and House Speaker Nancy Pelosi and Democrat Senate Leader Chuck Schumer), is freighted with ominous overtones.

In case you haven’t got the message, they are desperate to silence us. When we don’t react with violence, the public will be told, “Just wait.”

The irony is (where are the copy editors?) that Abcarian complains the mail, as you can with most drugs.

Given the two dozen or so abortion-related cases in the legal pipeline, it’s inevitable that the court will weigh in again, and probably soon.

Wouldn’t that make pro-lifers less, not more, “desperate”? Of course, but that is at odds with the narrative.

She manages to miss all the state action, which is where pro-lifers will continue to pass legislation to protect women and their unborn babies.

Abcarian’s hysterical babble notwithstanding, pro-lifers are peaceful women and men and children who seek win-win solutions.
President Biden to Fund International Abortion Industry

By Parliamentary Network for Critical Issues

In a January 28 Executive Order, President Biden began fulfilling the pro-abortion Blueprint for his administration beginning with elimination of President Trump’s Protecting Life in Global Health Assistance (an expansion of the Mexico City Policy.)

Reversal of this policy means that the US, as the world’s largest health donor country with total global health funding for last year of $11.2 billion, can and will, now distribute funds to foreign NGOs working in population control and health that perform and promote abortion—most often in developing countries.

Sadly, Biden confirmed his deep pro-abortion position calling President Trump’s actions to provide life-affirming healthcare as “damaging”. Speaking from the Oval Office, he said his actions will “reverse my predecessor’s attack on women’s health access” and “undo the damage that Trump has done.”

Under Biden, the U.S. will now use taxpayer dollars to fund abortion industry giants International Planned Parenthood Federation (IPPF) and Marie Stopes International (MSI). Last year IPPF stated that under President Trump’s pro-life policy it lost $100,000,000 in U.S. funding. MSI is seeking donations claiming that it “faces a funding shortfall of $13.5 million”.

According to President Biden, abortion is part of “healthcare” and he directed that all agencies in the US government advance abortion as “healthcare” through foreign assistance. His memorandum states, “The Secretary of State, the Secretary of Defense, the Secretary of Health and Human Services, the Administrator of USAID, and appropriate officials at all other agencies involved in foreign assistance shall take all steps necessary to implement this memorandum…”

Biden claims he seeks “to ensure that adequate funds are being directed to support women’s health needs globally, including sexual and reproductive health and reproductive rights”—terms that include abortion—a word that he appears reluctant to say.

Rep. Chris Smith, chair of the House Pro-Life Caucus commented that President Trump’s Protecting Life in Global Health Assistance was critical to “ensuring U.S. taxpayers were not complicit in promoting abortions abroad, especially in countries with pro-life laws.”

He said, “Many countries throughout the world have been besieged by aggressive and well-funded campaigns to overturn their pro-life laws and policies. The Protecting Life in Global Health Assistance Policy was designed to mitigate U.S. taxpayer complicity in global abortion.”

Smith pointed to a new Marist poll showing that more than three-quarters of Americans oppose their tax dollars funding abortions in foreign countries. “Americans overwhelmingly oppose using U.S. foreign aid to subsidize abortion,” he stated.

U.S. Senator Steve Daines, chair of the Senate Pro-Life Caucus, stated, “President Biden’s decision to reverse critical pro-life policies at home and abroad shows a complete lack of respect for the sanctity of human life. These actions will enrich Planned Parenthood and the abortion industry at the taxpayers’ expense, while endangering the most vulnerable. The United States should not be promoting a radical abortion agenda throughout the world, we should be leading the fight to protect the unborn and all life.”

The U.S. Catholic bishops were swift with a response decriing Biden’s Executive Order. Archbishop Joseph F. Naumann of Kansas City, chairman of the U.S. Conference of Catholic Bishops’ Committee on Pro-Life Activities and Bishop David J. Malloy of Rockford, chairman of the Committee on International Justice and Peace, responded:

“It is grievous that one of President Biden’s first official acts actively promotes the destruction of human lives in developing nations. This Executive Order is antithetical to reason, violates human dignity, and is incompatible with Catholic teaching. We and our brother bishops strongly oppose this action. We urge the President to use his office for good, prioritizing the most vulnerable, including unborn children. As the largest non-government health care provider in the world, the Catholic Church stands ready to work with him and his administration to promote global women’s health in a manner that furthers integral human development, safeguarding innate human rights and the dignity of every human life, beginning in the womb. To serve our brothers and sisters with respect, it is imperative that care begin with ensuring that the unborn are free from violence, recognizing every person as a child of God. We hope the new administration will work with us to meet these significant needs.”

Biden also restored US funding to the United Nations Population Fund which had been stopped under President Trump due to its complicity with China’s coercive population policy. Another key pro-life action taken by the Trump administration was overturned as Biden ordered that the US withdraw from the pro-life “Geneva Consensus Declaration” led by the Trump administration and signed last year by 33 other countries, which asserted that “there is no international right to abortion, nor any international obligation on the part of States to finance or facilitate abortion.”

On the domestic side, Biden directed the Department of Health and Human Services to review and consider eliminating the Trump administration’s rule on Title X federal family planning program that removed tens of millions of dollars in grants to Planned Parenthood and other abortion providers. Legal constraints reportedly prevent Biden from rescinding the rule immediately.
Not missing a beat, the Biden-Harris Administration begins its pro-abortion siege

From page 2

people. In a nutshell, he wants to subsidize millions of abortion at home and abroad and to secure an international “right” to abortion. More about that in a moment.

In his Inaugural Address, the President talked a lot about truth—“There is truth and there are lies. Lies told for power and for profit”—and about being frank—“Before God and all of you I give you my word. I will always level with you.”

Can we not all agree that these are admirable qualities in any individual, particularly the Chief Executive of our nation?

Where is the truth, however, in folding in “As we continue to battle COVID-19, it is even more critical that Americans have meaningful access to affordable care” (as an White House fact sheet said, referring to “shoring up” Obamacare) with underwriting the Abortion Industry?

This is a shameless attempt to give cover to promoting abortion, particularly egregious at a time of a pandemic which is already responsible for over 400,000 deaths.

However, there is a profit—for the Planned Parenthoods of this word—when truth takes a backseat to power.

Did President Biden “level” with us? Did he even hint that every poll not taken by the Abortion Establishment shows the American people do not want their pockets picked to pay for abortion?

Did President Biden not understand that the Geneva Consensus Declaration strengthened “an international coalition to achieve better health for women, the preservation of human life, support for the family as foundational to a healthy society, and the protection of national sovereignty in global politics?”

Sure, he did, but the pro-abortion bloc that helped put him in office would never stand for the United States supporting such a genuinely historic accord, so he pulled the United States out of it in a blink of an eye.

President Biden couldn’t level about that, either.

These are just a few of the many examples we will see going forward.

It’s what they do, it’s who they are.

We knew what we were in store for, even if Biden-Harris did their best to obscure how genuinely radically pro-abortion they are.

Please read NRL President Carol Tobias’ column on page three of the February edition of National Right to Life News. She goes into much detail about many components of the Biden-Harris anti-life agenda.

But rest assured, we are already battling back, at both the national and the state level, as you can see on page one. We will go all-out to thwart pro-abortion initiatives, and we will be relentless in passing pro-life legislation.

It’s what we do, it’s who we are.

What refusing to treat abortion survivors tells us about today’s Democrat Party

From page 2

As a consequence, these helpless babies are twice victimized—they are aborted and they are abandoned—and Senate (and House) Democrats are busy polishing their medals from Planned Parenthood.

After all, you don’t abort kids only to turn around and try to salvage their lives, right? How irrational, how counterproductive, how at odds with the core principles of the Culture of Death.

Pro-lifers must be nuts. These babies—sorry, “fetuses”—are supposed to be dead. If it takes one act of commission—abortion—and one act of omission—failure to offer equal medical treatment—so be it.

I’ve often written about pro-abortion Democrats who piously profess to “wrestle with their conscience” over abortion. And their conscience, of course, always loses. After all, WWNS: What Would NARAL Say?

To pin your conscience into submission over abortion, horrible as that is, is one thing.

But to suffocate your conscience so you can stand idly by while abortion survivors die untreated off in a corner is quite another thing.

This is barbarism on a scale so undeniable that we are firmly convinced it would be cause for pause for any morally sentient human being—if only they knew.

And if they did know, they might—just might—ask themselves. “Do I really want to be on the side of a political party that stands for that?”
Abortion chain lies to women about potential risks to future pregnancies

By Sarah Terzo

Whole Woman’s Health [WWH], a chain of abortion facilities, posts misleading information on its website for women considering abortion. This deception could impact women’s future fertility. Listed below are some of the claims made on the abortion chain’s site:

There are lots of myths about the effects of an abortion.

But here are some facts:

- Unless there is a rare serious complication that was left untreated, there is no risk to future pregnancies or overall health...
- Abortions do not affect fertility.
- Having an abortion will not cause problems for future pregnancies like birth defects, miscarriage, infant death, ectopic pregnancy, premature birth, or low birth weight.

WWH misspelled “ectopic,” but that’s not the only error here. Let’s examine some studies.

Pelvic inflammatory disease

Having an abortion puts a woman at risk for Pelvic Inflammatory Disease (PID). If a woman has an STD, abortion can cause the STD to worsen and turn into PID, or infection can result directly from the abortion. One study listed abortion as one of the main risk factors of PID.1

Another study, published in the prestigious British Journal of Obstetrics and Gynaecology, control studies showed a 70% increased risk of subsequent tubal pathology after abortion. The Royal College of Obstetricians and Gynaecologists, the UK’s foremost society of OBGYNs, is forthcoming about the risk of abortion, placenta previa, intrauterine growth retardation, preterm deliveries, and low birth weight babies.2

Problems with subsequent pregnancies weren’t limited to ectopic pregnancy.

Infection, damage to the cervix, and placenta previa

A study found that if a woman had an infection after an abortion, her chances of a subsequent pregnancy ending in a stillbirth increased by 379%.

Premature birth or miscarriage after abortion can be caused by a condition called an incompetent cervix. This is when a woman’s cervix, the muscle at the bottom of the womb that must be opened in abortion, is damaged. Since the intended function of the cervix is to hold the baby in the womb, if it fails during pregnancy, it can trigger premature birth or miscarriage. Multiple studies (too many to list here) show a link between abortion and subsequent premature birth.

One study found that D&E abortions trauma of 2.1%. This means that one woman out of 50 might suffer a damaged cervix. This would make one woman out of 50 at risk for a future premature birth or stillbirth. The Royal College of Obstetricians and Gynaecologists gives the number as one out of 100, but their statistic includes first trimester abortions.

See “Lies,” page 44
Advocates for children with Down syndrome in the UK are lamenting the latest step whose impact will ensure that the number of babies born with Down syndrome continues to shrink.

“Public Health England announced that the non-invasive prenatal testing (NIPT) technique called ‘cell-free DNA’ (cfDNA) will be available as an additional test in all health boards in England,” the advocacy group Don’t Screen Us Out reported.

A press release from Don’t Screen Us Out warned that an already terrible situation will soon get worse:

An investigation by The Sunday Times found that the number of babies born with Down’s syndrome has fallen by 30% in the small number of NHS hospitals that have already introduced the new form of screening.

Furthermore, The Telegraph recently reported that “the number of British babies born with Down’s syndrome has halved as more parents opt for a controversial blood test to identify the condition during pregnancy”. This coverage was based on recently published research by Frank Buckley, Brian Skotko and Gert de Graaf.

This situation is set to get worse as the Government proceeds with the rollout of the test across England.

The National Institute for Health and Research RAPID evaluation study projects that the proposed implementation will result in more babies with Down’s syndrome being identified each year and based on the current 90% of parents that terminate a pregnancy following a positive result for Down’s syndrome, this is projected to result in more terminations where babies have the condition.

The screening tests are set to be available across the National Health Service beginning June 1. Don’t Screen Us Out called on the Government “to assess the impact that the introduction of the test will have on people in England living with Down’s syndrome and to introduce reforms, such as guidelines on antenatal care for women found to be carrying a baby with Down’s syndrome,” adding, “Without corrective action, NIPT may only worsen the culture of informally eugenic anti-disabled discrimination that exists in the Fetal Anomaly Screening Programme.”

Lynn Murray, a spokesperson for the Don’t Screen Us Out advocacy group, said

As a mother of a daughter who has Down’s syndrome, I see every day the unique value she brings to our family and the positive impact she has on others around her”.

While the screening itself is being heralded as a move to reduce the number of miscarriages associated with invasive amniocentesis, the figures published in the Sunday Times revealed that the number of babies born with Down’s syndrome fell by 30% in NHS hospitals that have already introduced the new test. When this test is rolled out across the country, we can expect to see this situation replicated elsewhere. Such outcomes are likely to have a profoundly negative impact on the Down’s syndrome community.

There also needs to be greater support for parents who are expecting a child with Down’s syndrome.

Despite Nuffield Council of Bioethics’ 2017 call for RCOG [Royal College of Obstetricians and Gynecologists] to take immediate action and introduce professional guidance to cover the continuation of pregnancy after a diagnosis of fetal anomaly there are still no guidelines to support women who choose to continue their pregnancies after finding that their baby has Down’s syndrome.
Abortionist Jen Gunter: ‘The unborn are zombies’ and a human embryo is ‘not a human’

By Cassy Fiano-Chesser

Abortionist Jen Gunter, known for freely expressing her pro-abortion opinions on Twitter, recently posted more tweets ignoring the scientific reality of fetal development. In one tweet, Gunter sneered at pro-lifers who frequently refer to children in the womb as “unborn” by claiming that “unborn” refers to “zombies.”

Gunter, who recently was given a lifetime achievement award from Planned Parenthood Illinois, tweeted, “An embryo isn’t a human, it’s a human embryo. And don’t f***ing tell me what I know as a doctor.”

Pro-abortion and pro-life activists chimed in, with some arguing that an embryo is a stage of human development, while others said that because a fetus does not have legal protection, it cannot be human.

One of the pro-life advocates pointed out that Gunter denies the humanity of preborn children, to which Gunter responded by calling them “zombies”:

Gunter’s point was to illustrate how supposedly ridiculous the term “unborn” is, but even pro-abortion advocates found her comment distasteful. “Dr. Jen, love your work, but this ‘zombie’ comment was a terrible take,” one person tweeted. “I understand you’re trying to equate the ludicrousness of using the term ‘the unborn’ to ‘the undead’ but you’re a big voice for choice, and this is going to be weaponized against the movement.”

Yet the argument meant seemingly nothing to Gunter, who responded, “Unborn is not a medical term, it has no meaning. I refuse to lower myself to their level.” She later added, “I refuse to stoop to the level of forced birthers by using their made up terms. They do not get to choose the language, there are medical terms. They should be used.”

But as someone who prides herself on being a doctor, Gunter seems blithely unaware of how many medical organizations do, in fact, use the term “unborn” to refer to human children in the womb. These include University of California San Francisco Health, Woman’s Hospital in Baton Rouge, Louisiana, the Children’s Hospital of Philadelphia, Barnes-Jewish Hospital, Children’s Hospital Los Angeles, and even the NHS in the United Kingdom. Additionally, a search of PubMed for the term “unborn baby” in scientific literature yields over 700 results.

Gunter further argued that while a preborn child is a fetus, it still isn’t a human being, oddly claiming that “human” is the adjective, with “fetus” serving as the noun. Yet this, again, is a seemingly unscientific take at odds with the medical community. The Cleveland Clinic, for example, lists both “embryo” and “fetus” as stages of human development. And Gunter’s anti-science takes don’t end there; her argument that the heart isn’t truly beating is easily disproven, with video of a preborn baby’s heart beating available to view online. Far from being a meaningless pulsing of muscle, the video shows the heart actually pumping blood throughout the preborn baby’s tiny body.

As the Endowment for Human Development (EHD) explains, the heart is the preborn baby’s, or embryo’s, first working body system. And it’s necessary, because without blood and nutrients flowing, the child’s body could not grow.

The complexity achieved by the embryo in just the first 3 weeks of development is incredible. Considering the importance of distributing nutrients to the emerging brain and spinal cord, as well as the rest of the embryo, the early completion of this body system – the first system to begin functioning – is remarkable. By 3 weeks early blood cell precursors appear in the yolk sac. This process of blood cell formation is called hematopoiesis. Also by 3 weeks, early blood vessels form throughout the embryo as the network of the early circulatory system begins to take shape.

In the middle of week 3, only 18 days after fertilization, the embryo’s heart appears. Only 3 weeks and 1 day after fertilization – the heart begins to beat. By 4 weeks, the heart typically beats between 105 and 121 times per minute.

Gunter has lied before about preborn children’s heartbeats, and tried to claim that “life” is something based solely on what the parents want it to be. She has also mocked those in the pro-life movement for trying to help women experiencing unplanned pregnancies by giving homeless women a place to live.

Gunter tries to present herself as someone who is based in logic, science, and reason — yet her repeated outbursts towards the pro-life movement make it appear that she is led more by her pro-abortion agenda than by scientific fact.

Editor’s note. This appeared at LiveAction News and is reposted with permission.
“Right to choose” is a smokescreen for perpetuating an entire industry that profits from one of the most heinous evils imaginable – San Francisco Archbishop Salvatore J. Cordileone

By Dave Andrusko

On February 1 we posted remarks from the homily for the annual March for Life Vigil Mass held on January 28 delivered by pro-life champion Joseph F. Naumann, Archbishop of the Archdiocese of Kansas City in Kansas, and chairman of the U.S. bishops’ conference (USCCB) pro-life committee. Archbishop Naumann was blunt in his criticisms of President Joe Biden but also encouraged us to “pray and fast that the President will cease attempting to confuse people about Catholic teaching by trampling on the sanctity of human life while presenting himself as a devout Catholic.”

I thought of that—especially the part about sowing confusion—as I listened to portions of a January 18 podcast titled “You and Me Both with Hillary Clinton.” The “Me” in this case is Hillary Clinton, a pro-abortion United Methodist, with Speaker of the House Nancy Pelosi (D-Ca.), a pro-abortion Catholic.

It is impossible to exaggerate how self-important and dismissive both women are or how much they have contributed to ending the lives of over 62.5 million unborn babies. It is also nearly impossible to appreciate how much they truly hate “deplorables” in general, pro-lifers in particular from just their words. You have to hear the scorn dripping from their voices to really understand.

In the podcast, they argued that pro-lifers (as Pelosi put it) “were willing to sell the whole democracy down the river for that one issue.” She went on to say, “I think that Donald Trump [was] president because of the issue of a woman’s right to choose.”

And for good measure, Pelosi added that pro-lifers’ support for President Trump “gives me great grief as a Catholic.” Pelosi and Clinton seem to take the position that because they are mothers (and grandmothers), somehow that gives them the last—and definitive—word on abortion. It is impossible to exaggerate how self-important and dismissive both women are or how much they have contributed to ending the lives of over 62.5 million unborn babies. It is also nearly impossible to appreciate how much they truly hate “deplorables” in general, pro-lifers in particular from just their words. You have to hear the scorn dripping from their voices to really understand.

In the podcast, they argued that pro-lifers (as Pelosi put it) “were willing to sell the whole democracy down the river for

It’s nearly impossible to live up to your ‘God-given potential’ when a doctor intentionally ends your life while you’re still in the womb.”

Salvatore J. Cordileone of San Francisco, Pelosi’s own Archbishop was not happy with her comments. Here are portions of a statement Archbishop Cordileone made in response on January 21:

To begin with the obvious: Nancy Pelosi does not speak for the Catholic Church. She speaks as a high-level important government leader, and as a private citizen. And on the question of the equal dignity of human life in the womb, she also speaks in direct contradiction to a fundamental human right that Catholic teaching has consistently championed for 2,000 years.

Christians have always understood that the commandment, ‘Thou shall not kill,’ applies to all life, including life in the womb. Around the end of the first century the Letter of Barnabas states: “You shall not slay the child by procuring abortion; nor, again, shall you destroy it after it is born” (#19). One thousand, eight hundred and sixty-five years later, the Second Vatican Council affirmed: ‘Life must be protected with the utmost care from the moment of conception: abortion and infanticide are abominable crimes’ (“Gaudium et spes,” n. 51).

Pope Francis continues this unbroken teaching. Addressing participants in the conference “Yes to Life! – Taking Care of the Precious Gift of Life in Its Frailty” on May 25, 2019, he condemned abortion in the strongest possible terms: ‘is it licit to eliminate a human life to solve a problem?...”

See “Smokescreen,” page 44
Grossman Refutes Grossman on Safety of Self-Managed Chemical Abortions

From page 8

that chemical abortion by telemedicine was “comparable” to those provided in person. Making clear where all this is headed, Grossman was one of those in a June 2020 commentary piece that appeared in Contraception advocating for the “No-Test medication abortion.” The authors outlined a protocol for a patient self-managed abortion in which patients could order pills online without having to visit a doctor’s office.

These in-person visits to the clinic or doctor’s office were previously thought to be crucial to a patient’s having her pregnancy verified and dated (mifepristone’s effectiveness declines with increasing gestation), to having an ultrasound or exam to eliminate the possibility of a potentially deadly ectopic pregnancy, to being tested for Rh factor (women lacking it could form antibodies that attack the baby in future pregnancies), or to later confirming the abortion’s completion.

Citing his own earlier studies, Grossman, along with other authors, gave assurances that “research and experience have demonstrated that these tests, which inherently involve physical contact between patient and health care worker, are usually unnecessary for safe and effective MA [medication abortion].”

Grossman himself offers a different view

Given Grossman’s statements adamantly defending the relative safety of chemical abortion, data published under his name (and later cited in other studies of his) in a January 2015 study from Obstetrics & Gynecology is somewhat shocking.

That study, looking at the “Incidence of Emergency Department Visits and Complications After Abortion,” took data from over 50,000 abortions performed on women covered by “Medi-Cal” (California’s Medicaid program) from 2009 and 2010. Grossman’s conclusion—that “Abortion complication rates are comparable to previously published rates even when ED [Emergency Department] visits are included and there is no loss to follow-up”--is obviously meant to validate earlier studies, like his own, claiming these abortions’ relative safety.

But claims of chemical abortion’s safety, particularly that they are comparable to surgical or aspiration abortion, are not borne out by the data in this study.

The California Medi-Cal data showed that there was a 1.26% complication rate for first trimester aspiration abortion. Second trimester abortions, which Grossman and others have pointed out are more risky, showed just a slightly higher complication rate of 1.47%.

“Medication” abortion, or chemical abortions with abortifacients such as mifepristone, had a complication rate of 5.19%, considerably higher than that for other abortions -- more than four times higher what it was for first trimester aspiration abortions, more than three times higher than even second trimester and later surgical abortions.

Grossman and colleagues claim that most of these complications are minor and may be “overestimated” because of “aspirations performed presumptively or to alleviate bleeding or cramping symptoms.” But they otherwise admit that “this rate is consistent with intervention rates found in other studies.”

In other words, yes, they admit that these complication rates are higher, but claim only some of those are serious. The numbers could be artificially high, they argue, perhaps partly because women and trained ER doctors panicked when they encountered the persistent, heavy bleeding or severe cramping and intervened unnecessarily or “presumptively.”

But don’t worry, these are the sort and rate of complications they’ve encountered before.

One suspects that this was of little reassurance to those who endured these frightening episodes.

Elsewhere in the same paper, Grossman admits that 770 chemical abortion patients visited the ER, a figure that represents 6.8% of California’s Medi-Cal patients who had those type of abortions in 2009 and 2010.

Grossman is thus admitting that an abortion method he has long championed as “safe” drove one of every 15 patients in his study group to visit the Emergency Room.

Despite all that, given his continued advocacy of telemedial and “no-test” abortion since then, Grossman is apparently blind to the obvious and increased likelihood of problems when women follow his recommendations and have those “self-managed” abortions. In these situations, women would not have their pregnancies professionally dated, would not be ultrasonically screened for ectopic pregnancy, and would not undergo the in-person screening, examination, and instruction they should get with chemical abortions initiated at the clinic.

Either this data stands in conflict with other declarations made by Grossman in other studies, columns, and interviews, or Grossman has a much different understanding of the word “safe” than most people.

Why the difference?

It is worth noting that in this 2015 study of California Medi-Cal patients, Grossman and his fellow abortion advocates did not have as much control over the selection and management of the data as they did in many of other studies with which Grossman was associated. Grossman had to take the results the state of California gave him, which should have listed every encounter each registered Medi-Cal patient had with the California medical system. The results from California, taken directly from records, should have been more robust, more complete, and more reliable.

This is in obvious contrast to studies of his own where he relied on data he got from abortion clinics. There Grossman had to depend on the cooperation, the record keeping, the tracking, the memory, the integrity, and the objectivity of abortion clinics or their patients. His own data shows that many of those patients simply disappeared after picking up their pills, taking any of the problems they encountered elsewhere where they might not be recognized or recorded.

When you lose track of patients who instead return to their own private physicians for help or take their hemorrhaging or infection to their local ER, and then confine your scientific attention to just those patients who returned to the clinic or responded to a clinic phone call with assurances of their health and satisfaction, the pills are going to look a lot safer than they actually are.

Compromising the sales pitch

For the FDA to agree to jettison protective regulations, Grossman and his colleagues have to make the case to a sympathetic administration that this method of delivery is safe. This is what he has spent most of the last decade attempting to do.

But as his 2015 study of Medi-Cal patients shows, some of the negative data cannot be easily spun away.
New book dispels myths about Pregnancy Help Movement

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**NRL News:** Is the effectiveness of a pregnancy care center simply a matter of how many abortion-minded women change their minds or is there more to it than that?

**Hussey:** Pregnancy centers want to save babies, of course, but most have a broader measure of success, judging themselves in terms of how staff has served the people in front of them. They care deeply about women considering abortion, but they also value helping women who aren’t abortion-minded. It’s part of a culture-change mission and they say it could prevent future abortions.

**NRL News:** You mention a survey question you asked women at an abortion clinic where a large percentage said that they would abort even with access to a more generous European style safety net. Is there any way to change those women’s minds?

**Hussey:** I don’t know. Clues might come from thinking about how attitudes and plans about pregnancy and parenting, including men’s, develop, even before a pregnancy happens.

This includes thinking about what daily life might look like for a woman who continues with an unintended pregnancy – at work, school, and home, and in key relationships like with the baby’s father. Her daily life will likely involve a lot of challenges even before adding economic insecurity, and while I find evidence that public benefits can help and I personally think they are worthwhile, it’s hard to disentangle the complex factors in millions of abortions to reach a single concrete solution.

While there are similarities, each woman’s individual situation and circumstances are different, which is why centers invest so much time in getting to know and build relationships with each woman who comes through their door.

**NRL News:** How do different state laws and federal policies impact the ability of pregnancy care centers to do their work?

**Hussey:** A recent wave of state laws has attempted to require pregnancy centers to refer for abortion-related resources, which centers see as violating their consciences and undermining their missions. Centers also say that specific disclaimers some state and local governments have tried to require them to advertise create logistical design problems, portray them as inferior service providers, and compel speech. So far, such policies have not fared well in court, but fighting them diverts resources from pregnancy centers’ work.

On the other hand, several states fund pregnancy centers, and there is some federal grant money too. Some center leaders say government funds have helped them expand and professionalize, while others don’t want them.

**NRL News:** Ultimately, what role do pregnancy care centers play in the pro-life movement?

**Hussey:** They enable the movement to more fully express what it means to be “pro-life,” learn from the people its actions affect, and offer more ways in which people of different personalities, talents, and life situations can help the cause.

Laura Hussey, Ph.D.

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Difficult roads often lead to beautiful destinations.
Sen. Lankford Asks Senators and Americans: Is that a baby?

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he’ll do it if you put him into Health and Human Services.

Let me just give you an example of what I am talking about for Mr. Becerra. I just, I can’t process some of these things. Mr. Becerra, when he was the Attorney General for California, actually went to Mississippi to be able to lead a suit against Mississippi, another state, obviously, because that state was talking about limiting abortions, only the earliest days of abortion. Their belief was after a child feels pain, we should at least not tear a child limb from limb in the womb when their nervous system is developed.

Mr. Becerra led a coalition of state attorneys general to fight Mississippi and say, ‘You can’t protect children that way.’ He actually argued before the United States Court of Appeals in the Ninth Circuit against the Little Sisters of the Poor, trying to require that group of nuns to provide birth control services so the group of nuns literally attacking the Little Sisters of the Poor to kind of push this whole agenda.

When he was a Representative in the House of Representatives, he voted against the Born-Alive Abortion Survivors Protection Act so if a child is in a botched abortion, is actually delivered instead of destroyed, he wanted to say, ‘No, even after they are fully delivered, that child can still be destroyed, even though they are fully delivered,’ which would make sense because he also, as a representative, fought against the Partial-Birth Abortion ban. The procedure where they would—it was a rare procedure but it was a procedure—where they would deliver the child all but the head, and then penetrate the head with scissors and kill the child.

He fought against [banning] that.

He fought against the Unborn Victims of Violence Act, which really is odd to me. All it did was criminalize if someone attacked a pregnant woman and killed her child, they could also be liable for that death as well. He also didn’t want to recognize the child as a child, even if the mother saw the child as a child. He also fought against crossing state lines for minors and saying they shouldn’t have to get parents’ permission if they cross state lines to go get an abortion somewhere else.

As the Attorney General in California, he fought to require churches to pay for abortion care in their health care plans when it directly violated their religious belief. Unbelievably so, he also fought to be able to require pro-life medical clinics where you could go and say, ‘I don’t want an abortion, but I do want a sonogram. I want to be able to get some more information about this child.’ If you went into one of those pro-life centers and got a sonogram, he fought to require there to be a poster on the wall that would say, ‘If you would rather have an abortion, here’s the place that you would go.’

Now, this is beyond just protecting abortion. That has moved to promoting abortion, encouraging the death of children.

It got even so bizarre that in California, when there was a video taken of a Planned Parenthood group of folks that were trafficking the body parts of children and it was caught on video, instead of confronting the folks that were trafficking the child body parts, he went after the folks that took the video, the whistleblowers, and exposed them.

I have to tell you, this is not an attack on Mr. Becerra. It’s just a shock to me that all of those things seem normal. I don’t understand that, culturally. I don’t understand how the person who is being appointed to lead Health and Human Services can say that children are sub-human— I don’t have to recognize that as human, though I’m leading Health and Human Services. That’s apparently optional tissue, not a human child. I believe that children are human. We should honor every child’s life.

It should be baseline for us to be able to say, ‘If a child is actually delivered in a botched abortion and had been fully delivered outside the womb, we should help that child get medical care.’ I don’t understand why that’s so hard.

I don’t understand why it’s so hard to say, ‘Some people are absolutely appalled by the taking of a child’s life. Don’t force them with their tax dollars to pay for it.’ I don’t understand why that’s controversial.

I don’t understand why it’s controversial that when a child can feel pain in the womb, that we shouldn’t dismember a child in the womb. I don’t understand why that’s controversial.

I don’t understand why it’s controversial to some that if a health care provider who has sworn to protect life, that person shouldn’t be compelled to take life in an abortion procedure by their employer. I don’t understand why that’s controversial. But for some reason, it is.

Among our most basic rights in America, life, liberty, and the pursuit of happiness, one of the most basic things that come out of our founding documents is these things are referred to as self-evident. Facts are facts, especially when those facts have a face. How can you look at that picture and say, ‘That’s not a human child?’ How can we not acknowledge the simple facts? Now, I do understand for some people, this is very difficult because they fought for years for abortion, and they don’t want that to change, because if it changes, they would have to admit there have been deaths of millions of children on their watch. That is not a simple thing to admit.

But please do not tell me you’re following the science. Because that child has ten fingers and ten toes and a beating heart and a functioning nervous system. That child has DNA that’s different than the mom or the dad. That’s not random tissue. That is a separate person, and science would confirm that, so please don’t tell me you follow the science wherever it goes, because some facts are obvious. And the science is clear.

And this all gets resolved when we answer one simple question: is that a child or not? Because everything else goes from that.

For those of you joining the March for Life online this week, good for you. Keep going. Don’t give up. Defend the facts that are self-evident. Speak out for those who can’t speak for themselves because millions of future Americans are counting on it. And they’re watching for someone to admit the facts, the facts that have a face.
“Expressive Individualism”: How a shallow view of the self underlies arguments for abortion

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No-obligation-to-help arguments

Expressive individualism also influences more sophisticated arguments for abortion. In her well-known bodily autonomy argument, philosopher Judith Jarvis Thomson contends that a pregnant woman has no obligation to care for her child through gestation—that she has a right to refuse bodily support (via abortion) even though her child will die as a result. As Snead points out, Thomson makes the expressive individualist assumption that we have no obligations to others beyond those we voluntarily choose to accept.

One problem with Thomson’s view is that, even if women have no special obligation to help their unborn children, abortion isn’t a mere withholding of such help. It is intentional killing, often through a brutal process of dismemberment. So if unborn children have human rights (such as the right not to be killed and the right to bodily integrity), then abortion violates them.

But another problem is that we do sometimes have obligations to other people who need us—especially those whom we are responsible for bringing into existence.

Expressive individualism sees each person as an “unencumbered atomized will,” Snead explains. The truth, though, is that we are all subject to bodily limitations—to the limitations of age, disability, disease, and so forth. That makes us vulnerable and helpless during at least some periods of our lives, such as when we’re young and when we’re old. Sometimes we depend entirely on others for our flourishing; sometimes others may depend entirely on us. Human beings, of necessity, form “networks of uncalculated giving and graceful receiving” (as Snead quotes the moral philosopher Alasdair MacIntyre), and so we find ourselves embedded in these networks and assuming obligations to each other, not as a matter of choice but as a matter of relationship.

Thus parents (not just mothers, but fathers too) have a responsibility to their dependent offspring. And, as a society, we have obligations to pregnant women who too often face difficult and unfair circumstances. Both mother and child deserve protection and support.

Abortion, observed Mother Teresa, has “pitted mothers against their children” and “sown violence and discord at the heart of the most intimate human relationships. It has portrayed the greatest of gifts—a child—as a competitor, an intrusion, and an inconvenience.” No human relationship is more intimate or foundational to human flourishing than that between a pregnant woman and her unborn child.

Expressive individualism treats people like they are on their own, and—even worse—it treats mother and child like competitors. They’re not.

Exclusion arguments

Appeals to autonomy and bodily rights can’t justify abortion. They can’t justify a violation of human rights. Ultimately, the case for abortion depends, instead, on the exclusion of unborn humans from the community of those who have rights to begin with. Unborn children, according to this view, simply don’t count as valuable “persons” who deserve the care of others and protection from lethal violence. And here again we see the influence of expressive individualism—in at least a couple ways.

First, in the area of philosophy concerned with personal identity, many philosophers hold an explicitly psychological understanding of the self. On this account, I am not, strictly speaking, a human being (a human organism)—I am a consciousness or a bundle of mental properties (beliefs, memories, desires, and so forth) that came into existence long after my body (the human organism) came into existence. So I was never a fetus (or maybe even a newborn or a toddler). While abortion certainly kills a human being, it doesn’t kill a being like me.

Here’s how Princeton ethicist Peter Singer, a defender of infanticide as well as abortion, puts it: “I am not the infant from whom I developed. The infant could not look forward to developing into the kind of being that I am … I cannot even recall being the infant; there are no mental links between us.”

But this view defies both common sense and sound philosophy. “The truth … that you are the same individual living being as the fetus from which you developed,” writes philosopher Christopher Kaczor, “is a matter of observation and scientific data. You now, you at 10 years old, you at 10 days following birth, you 10 days after conception and you at all stages of your life in between stand in bodily continuity.”

Indeed, whatever else we may be, we are bodily beings, and the science of embryology shows that our bodies came to be at fertilization. We were all once embryos and fetuses, just as we were once toddlers and teenagers. We are, in fact, members of the species Homo sapiens. So to kill an unborn human is to kill one of us.

Second, most philosophers who defend abortion, even some who don’t think our psychology defines us, think that psychology is what matters morally. They think that, in order for someone to count as a person or to have rights, she must possess developed capacities for mental functions like sentience, self-awareness, rationality, choice, and self-expression.

Many ethicists contend, in particular, that what matters is the fulfillment of desires or the satisfaction of preferences. Killing someone, on this view, is only wrong if it thwarts such desires—if it deprives the victim of a life that she values. Since unborn children lack the cognitive functions necessary to have desires or to pursue their own life plans, killing them isn’t wrong.

“Only those currently capable of thriving when viewed through the lens of expressive individualism are persons,” explains Snead, describing the view at hand. “Those, like the human fetus, without such...
“Expressive Individualism”: How a shallow view of the self underlies arguments for abortion

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capacities do not qualify as a person.”

This approach faces all sorts of problems. Its standard for personhood excludes more humans than just unborn ones—it may also exclude newborns, people with severe cognitive disabilities, patients with advanced dementia, and others who are powerless and vulnerable. That’s why a number of leading pro-choice ethicists have no meaningful objection to infanticide.

“The moral status of an infant is equivalent to that of a fetus,” conclude Alberto Giubilini and Francesca Minerva in the Journal of Medical Ethics, “in the sense that both lack those properties that justify the attribution of a right to life to an individual.”

The argument also demolishes the concept of equal rights. After all, the relevant psychological traits vary in degree from person to person; some people have more, and some people have less. Some of us take a greater “interest” in living—and thus have a stronger right to life—than others. If expressive individualism is true, then equality is just a fiction. “It is hard to avoid the sense that our egalitarian commitments rest on distressingly insecure foundations,” acknowledges moral philosopher Jeff McMahan, a defender of abortion.

The underlying problem, though, is that this is too shallow and incomplete a view of human flourishing. Mental properties aren’t all that matters, and thwarting desires isn’t the only thing that can make killing someone wrong. Indeed, people can be harmed even when they don’t psychologically experience the harm. The exploitation and abuse of a man with Alzheimer’s, for example, harms and wrongs him whether or not he ever realizes it. He has a right not to be exploited or abused even if he currently lacks the ability to form desires. So, too, do children in the womb have a right not to be killed. The most fundamental harm of killing someone isn’t the thwarting of preferences. The most fundamental harm of killing someone is depriving her of the good that is her life as a human being. To kill someone is to attack and destroy her body and take her life.

That’s what abortion does, and that’s why it’s unjust.

A better understanding of the self

Expressive individualism—with its inward focus on individual psychology and autonomy—simply misses this. It dehumanizes and neglects vulnerable human beings, allowing the self-interest and wishes of the strong to trump the rights and needs of the weak. That, in essence, is the “pro-choice” position.

A better understanding of the self, by contrast, is what Snead calls “an anthropology of embodiment.” It recognizes that we are embodied human beings, that we depend on each other, and that every single one of us matters. We have rights not because of our cognitive abilities, or our independence, or the desires and decisions of others, but rather simply because we are human.

“An anthropology of embodiment,” concludes Snead, “does not reward the powerful with greater legal protection and withhold the benefits of the law from the weak. … [It] would follow Hans Jonas’s injunction that ‘utter helplessness demands utter protection.’”
Abortion chain lies to women about potential risks to future pregnancies

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A Danish study found:
If the cervix is dilated to 9 millimeters during an induced abortion prior to the evacuation of the fetus, there will be a fall in cervical resistance in 12.5% of patients. Dilating the cervix to 11 millimeters leads to decreased cervical resistance in two thirds (66.7%) of the women.

In a D&E abortion, the cervix has to be dilated enough to allow the passage of larger body parts. The potential risk to the woman’s cervix would be especially high at Whole Woman’s Health, because the abortion chain offers to do some D&E abortions in one day, meaning they do not use laminaria to dilate the woman’s cervix gradually overnight.

A study in the journal *Reproduction* found:
… a sharp increase in cervical insufficiency with each prior induced abortion over the baseline rate of cervical insufficiency: a 149% increase after one previous pregnancy termination, a 366% increase after two terminations, a 707% increase after 3 terminations, and an 1136% increase after four or more terminations.4

Another study found an increased risk of low birth weight after abortions.
Placenta previa is another risk from abortion. One study found that abortion could cause scarring and adhesions on the uterine wall which can “impede proper placentation in subsequent pregnancies.”

Another study which found a greater risk of placenta previa after a past abortion noted, “Placenta previa is the leading cause of uterine bleeding during the 3rd trimester of pregnancy. It increases the likelihood of preterm birth, low birth weight, and perinatal death.”

Another study showed a 30% increased risk of placenta previa after a past abortion. An analysis of multiple studies found an increased risk of 70%.
A review of eight American studies found an increased risk of 50%.

There is also the possibility that an infection acquired during an abortion could be transmitted to the baby in a future pregnancy. One study found that babies conceived after a mother’s abortion were 300% more likely to develop an intra-amniotic infection. A baby born with such an infection is twice and more than twice as likely to suffer sepsis, a severe systemic infection.

A case-control study of neonatal sepsis with the Washington State Birth Registry showed a “significant increase” in the risk of neonatal sepsis following an abortion, even though the researchers controlled for other factors.

This article only discusses some of the many studies showing increased risks for future fertility problems due to abortion. Whole Woman’s Health is deceiving women.

NOTE: Many of thes studies come from the book *Complications: Abortion’s Impact on Women*
1. IK Nielsen, E Engdahl, T Larson “[Pelvic Inflammation after Induced Abortion] Danish” Ugeskr Laeger September 28, 1992; 154 (40): 2743-6
4. Angela Lanfranchi, et.al. *Complications*

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“Right to choose” is a smokescreen…”

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It is not licit. Never, never eliminate a human life ... to solve a problem. Abortion is never the answer that women and families are looking for.’ And just yesterday (January 20, 2021) Archbishop Gomez, President of the United States Conference of Catholic Bishops, reiterated the declaration of the U.S. bishops that abortion is for Catholics the ‘preeminent priority.’ In doing so, he acted rightly and collaboratively in his role as USCCB President, and I am grateful to him for doing so.

Preeminent does not mean “only,” of course. There are certainly many evils we must confront and many goods we must pursue. ...

I myself will not presume to know what was in the minds of Catholic voters when they voted for the Presidential candidate of their choice, no matter who their preferred candidate was. There are many issues of very grave moral consequence that Catholics must weigh in good conscience when they vote. But one thing is clear: No Catholic in good conscience can favor abortion.

“Right to choose” is a smokescreen for perpetuating an entire industry that profits from one of the most heinous evils imaginable. Our land is soaked with the blood of the innocent, and it must stop.

That is why, as Catholics, we will continue to speak out on behalf of those who have no voice to speak for themselves and reach out to, comfort and support those who are suffering the scars of the abortion experience. We will do so, until our land is finally rid of this despicable evil.
World Health Organization’s panel on Reproductive Health for the Americas.

In other words, all of the study’s authors support abortion — and Guendelman specifically told the Daily Californian that she wants to see Planned Parenthood viewed more positively. “Organizations like Planned Parenthood … have been so discredited that it’s about time to bring back credibility and trust,” she said. “This organization is not only important in providing healthcare services, but also healthcare education around sexual and reproductive health. We want to be able to reduce abortions and reduce unwanted pregnancies.”

Weidert, meanwhile, complained of recent pro-life successes, claiming, “We have seen an onslaught of abortion restrictions in this country in the last decade, and the anti-choice movement is gaining momentum. It is critical that abortion-related information is accurate and can facilitate informed and responsible decision making.”

She followed that up in an e-mail to the Daily Californian, saying, “[I]t does seem like whenever there is pro-choice momentum, the anti-choice movement hijacks the conversation with hyperbolic rhetoric and disinformation to incite public outrage and gain support for policies which inhibit access to abortion care.” (emphasis added)

Some questions arise from this information: What clinical recommendations? Who was the unnamed colleague they worked with? What information was “deemed important” and by whom?

Vague methodology

The methodology listed by the Daily Californian is extremely vague. The researchers reportedly made their determinations based on unspecified “clinical recommendations from the American College of Obstetrics and Gynecology [a pro-abortion organization], clinical information from a colleague and other information deemed important for anyone who uses Google to learn about medication abortion.” (emphasis added)

It’s not unusual for pro-abortion activists to attack the pro-life movement with biased and misleading “research” and “fact checks.” Presenting this misinformation and prejudice as a legitimate study is an easy way to further mislead people and cloud the reality of the agenda at hand.

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