July 2021

“There’s no such thing as ‘Just a Little’ Euthanasia.”

(left to right) Bioethicist Wesley J. Smith, Wayne Cockfield, NRL Vice President for Medical Ethics, and Jennifer Popik, JD, NRL Federal Legislation Director
Democrats seek to destroy 40 years of bi-partisan support against taxpayer funded abortion

By Jennifer Popik, J.D., NRLC Federal Legislative Director

For the first time in over 40 years, the bipartisan Hyde amendment was absent from the annual government spending bill. Pro-abortion President Biden and the Democrat congressional leadership have committed publicly to ending the Hyde Amendment and reestablishing taxpayer funding of abortion.

An action alert can be found here: https://cqrcengage.com/nrlc/action. Every Republican and Democrat member of the House and Senate should be reminded of the urgency of protecting the Hyde Amendment.

According to Nathanian Weixel’s July 12th article, “HHS spending bill advances without Hyde Amendment” A key House subcommittee on Monday cleared a spending bill for the Department of Health and Human Services (HHS) without including a decades-old rider prohibiting funding for abortions, kicking off what is likely to be a long and bruising fight. For the first time in 40 years, the Hyde Amendment was excluded from the spending bill introduced and then cleared by the House Appropriations labor and health and human services subcommittee.

The 50th National Right to Life Convention: “It was as close to perfect as any event can be”

An interview with Convention Director Jacki Ragan

By Dave Andrusko

Editor’s note. The 50th National Right to Life Convention took place June 25 and June 26 in Herndon, Virginia. The annual convention had been cancelled in 2020 because of Covid-19, so you can imagine how intense the desire was to make sure this did not happen a second consecutive year. The following interview took place last week with Jacki Ragan, the Convention Director.

NRL News: When did you finally make the decision to go forward and what went into that decision?

Jacki Ragan:

The time was just right. If we had decided not to go forward, I felt there was a chance we would never have the 50th convention. So with many, many unknowns, we decided to take the chance. I am happy
“A landmark case” must be close to the most over-used, over-hyped phrase in modern reporting. Not every case qualifies in any objective sense, of course, it only seems that way sometimes. Usually the phrase is a sign of reportorial disapproval—for example with respect to the challenge to the Mississippi abortion law that the Supreme Court has agreed to hear this fall which has the usual suspects’ knickers in a knot.

A legal definition is more precise; here’s an example. A landmark case is a court case that is studied because it has historical and legal significance. The most significant cases are those that have had a lasting effect on the application of a certain law, often concerning your individual rights and liberties.

With this as background, let me offer an example from Great Britain that qualifies on all fronts as potentially a landmark case. Heidi Crowter, a 25-year-old woman from Coventry who has Down’s syndrome, together with Máire Lea-Wilson from Brentford, West London, whose twenty-three-month-old son Aidan has Down’s syndrome, are challenging the UK Government over a disability clause in the current law.

What is the law they insist is an example of “discriminatory abortion”? Believe it or not, current law in England, Wales, and Scotland allows abortion up to birth for babies with disabilities—most often Down syndrome, but also

101 ways to avoid answering, “Is a 15 week old unborn baby a human being?”

When you’re Jen Psaki, the White House Press Secretary for pro-abortion President Joe Biden, you’re going to earn your money. You can’t help—at least I can’t help—feeling sorry for her on occasion because, given what clearly appears to be the President’s ever-diminished capabilities, Ms. Psaki is often hung out to dry. That would ordinarily be untenable; you look stupid. But the entirety of the Prestige Press (as it used to be called) has long since chosen not to push back when what Psaki says is patently absurd or when she answers her own questions rather than the ones asked by reporters. How could it be otherwise when the #1 priority is protecting a Democrat administration?

Yet, as Tim Graham of Newsbusters wrote this week, quoting from a report compiled by journalist Julia Ioffe, A young White House reporter, who asked for anonymity so they could speak candidly about their job, felt the White House beat had become unrecognizable. “The mechanics of reporting have changed so much,” the reporter said. “It was just this really aberrant period in which you could almost guarantee that, with enough effort, you could find out what’s going on in the Situation Room. Now you can’t—and it’s infuriating.” The reporter rushed to clarify. “Obviously, I’m not wishing that Trump was still president, but as a reporter that wants a story, it’s frustrating how disciplined they are. Kudos to them, they’re very happy with themselves. You can see it, the coverage across the board from everyone is very, very lame. You never get inside the room and hear how this sh**’s going down. Like, how are they managing this elderly man?” (White House Press Secretary Jennifer Psaki did not respond to a request for comment.)

So, Psaki’s job is to protect a man who already is essentially hermetically sealed off from a press that is desperate not to allow the light of day in.

What about our issue? Can we get a straight answer? Late last month Media Research Center’s Melanie Arter asked Psaki, “Does the president believe that a 15-week-old unborn baby is a human being?” “Are you asking me if the president supports a woman’s right to choose?” responded Psaki. “He does.”

But, of course, Arter wasn’t asking that. She was asking if President Biden believes a 15-week-old unborn baby is a human being? Psaki no doubt came prepared with her non-answer answer. The challenge to the constitutionality of the Mississippi law the Supreme Court has agreed to hear in the fall prohibits abortions after 15 weeks.
Plant a Tree

Sometimes pro-life people get frustrated, even discouraged, because “things aren’t moving fast enough.” We all experience that at some time or another. But we mustn’t give up. A steady push forward will win the battle.

The Roman poet Caecilius Statius is credited with the adage, “He plants trees, which will be of use to another age.” Although there are various versions of this saying, my favorite interpretation is, “Blessed is he who plants trees under whose shade he will never sit.”

The pro-life movement has been planting trees for more than 50 years. I’m speaking both of the efforts of the early pioneers in our movement and of those currently in the fight to protect innocent human life. Our collective efforts are both short-term—successes now—and long-term—laying the groundwork for ultimate success.

We plant a tree every time we bring a new advocate for life into the movement. We plant a tree every time we assure a pregnant woman or girl that her baby is a blessing—a joy to behold, not a “burden” to hold her back.

We plant a tree every time we pass legislation that will protect some, if not yet all, preborn children. We plant a tree every time we elect a candidate who will speak up for Life.

We plant a tree every time we help to raise funds so that the pro-life movement is able to do what needs to be done.

We plant a tree every time we defeat, or hold back, legislation that encourages those with disabilities or in failing health to seek “help” in killing themselves. We plant a tree every time we condemn practices that place a utilitarian value on human life and declare that some lives are not worthy to continue.

These trees are providing shade for the future. They leave a lasting impact on our communities and states. Consider the Hyde amendment, which the Biden-Harris administration and their fellow pro-abortion congressional Democrats seek to destroy.

Henry Hyde was a new member of Congress from Illinois when, in 1976, he introduced an amendment to the budget of the (at that time) Department of Health, Education, and Welfare. His intent was to prevent the use of federal tax dollars from being used to pay for abortions. His amendment was adopted and has been in place, with few changes, for 45 years.

Congressman Hyde knew abortion, and government funding of abortion, was wrong. What he couldn’t know those many years ago was that his effort would eventually save the lives of an estimated 2.4 million unborn children!

Rep. Henry Hyde planted a tree. Tragically, the Biden administration and radical pro-abortion Democrats in Congress are trying to cut down that tree. With your help, we at NRLC are doing everything possible to make sure that great big beautiful tree survives!

National Right to Life is planting trees by training leaders for the coming years.

Fifteen years ago, National Right to Life launched a pro-life Academy for college students. This five-week summer course, eligible for three college credits, prepares them to be effective advocates for the vulnerable.

National Right to Life also brings interns into the office to help them understand the work that makes NRLC such an effective advocate.

Likewise, many of our state affiliates organize youth camps, training and motivating pro-life young people to be leaders in their generation, equipping them to plant their own trees which will flourish for years to come.

National Right to Life just “celebrated” its 50th convention. Many of our state affiliates have or will soon “celebrate” their 50th anniversary of fighting for life.

I put “celebrate” in quotation marks because we do not rejoice that the battle has lasted so long. Rather, we are proclaiming to the world that, even after 50 years, pro-life people have not given up the fight. Indeed, we are incapable of giving up, which is precisely why we will see victory one day on behalf of the little ones.

Many early champions in the pro-life movement were so appalled by the Supreme Court rulings in Roe v Wade and Doe v Bolton that they assumed the abominable decisions would be, or could be, quickly overturned. However, the forces of death in this country were not easily overcome.

But that did not discourage those early champions of life or prevent them from organizing and educating—planting the trees that are providing shade even today.

We, as beneficiaries of those efforts, will continue to plant our own trees, even though we may not fully see the branches grow and the leaves spread.

My encouragement for you today is to plant a tree. When you do, future pro-life workers will benefit from your labors and add to the grove, providing shade for all those who are alive because of our trees.

“Blessed is he who plants trees under whose shade he will (may) never sit.”

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From the President
Carol Tobias
What every pro-life candidate needs to know about abortion

By Karen Cross, National Right to Life Political Director

You’re running for Congress! Congratulations! Undoubtedly, you’re going to be asked about your position on abortion by a constituent, in a debate, or by the media.

Are you prepared for the inevitable question? Or do you feel like a deer caught in the headlights?

Following are a few pointers to help you on your way to a successful campaign.

There’s an Advantage to being a Pro-life Candidate

Post-election polling conducted by National Right to Life in election after election since 1980 consistently finds that pro-life candidates enjoy a significant advantage over their pro-abortion opponents on the abortion issue. In the last presidential election cycle, a post-election poll taken in November 2020 found that 41% said abortion affected the way they voted. Of that 41%, 23% said they voted for candidates who oppose abortion compared to just 18% who voted for candidates who favor abortion—a 5-point advantage.

For additional information about the pro-life advantage, go to: www.nrlvictoryfund.org/latest/polling-shows-impact-of-abortion-in-2020-election/

Abortion/Roe v. Wade

Keep in mind that many people don’t understand some of the basics about abortion or what the U.S. Supreme Court’s 1973 Roe v. Wade decision actually did. If asked about their position on abortion, some people self-ID as “pro-choice” because they believe abortion should be available in the hard cases: the life of the mother, rape, incest, and fetal anomalies*. [See below for a fuller explanation.]

What they don’t understand is that Roe v. Wade, along with its companion decision Doe v. Bolton, essentially allows for abortion on demand throughout pregnancy. They also don’t understand that 93% to 97% of the nearly 900,000 abortions that take place in the United States every year are for social reasons: the woman doesn’t feel prepared to have a baby, can’t afford the baby or doesn’t feel she has support at home.

For more information on the reasons cited for abortion, go to: www.nrlc.org/uploads/factsheets/FS08Reasons.pdf.

So, what happens? The hard cases of rape, incest, and the life of the mother are brought up by your opponents (and the biased media) because they carry so much emotional weight. The goal is to prey on the fears of the general public, who don’t know the facts.

The Hard Cases

There are answers to the powerful emotional responses these cases evoke.

• To begin with, and most fundamentally, the circumstances surrounding the baby’s conception change nothing about the humanity of the unborn baby, the toll taken on the mother, and the inherent brutality of abortion.

• Rape (and incest) are brutal acts of violence against innocent women. A woman who has experienced such a horrible act of violence deserves to be treated with compassion. However, encouraging abortion (an act of brutal violence against her innocent preborn child) is pitting the woman against her own child. It can compound the violence of the rape, making her the aggressor in this case, and greatly increasing the potential for psychological and emotional harm to the woman.

Whatever the circumstances of her pregnancy, each woman deserves support and proper care to prevent more harm being done emotionally or physically. Sadly, many women suffer physical and psychological risks after their abortions.

For information about the physical, emotional and psychological risks after abortion, go to: www.nrlc.org/factsheets/

There are more than 3,000 pregnancy-help centers across the country offering life-affirming help free of charge to mothers in crisis. They offer truly compassionate solutions for both mother and her child.

Some people – and even doctors – suggest abortion when the baby has some sort of fetal anomaly. If I were a candidate, and asked my position, this would be my response:

“It sounds to me like you are prejudiced against people with disabilities! You are saying that those with disabilities are better off being brutally, painfully ripped apart in the womb than living with their disability? That’s terrible!”

I’d then share my magical nights as a volunteer with Special Olympics, where I’ve experienced unconditional acceptance and unbelievable joy.

• In cases where the prognosis is that the baby will inevitably die before or soon after birth, the baby doesn’t need to be killed. The families will benefit greatly from perinatal hospice – a life-affirming and healing response to families in need.

*See “Candidate,” page 5
What every pro-life candidate needs to know about abortion

From page 4

Babies with or without disabilities feel pain during abortion by 20 weeks, and even earlier. For more information, go to www.nrlc.org/uploads/factsheets/FS20UnbornPain.pdf and www.nrlc.org/abortion/fetalpain.

For more details discussing the hard cases, go to www.nrlc.org/uploads/WhenTheySayPacket.pdf.


Taxpayer Funding of Abortion

Most people – even those who consider themselves “pro-choice” – don’t support using tax dollars for abortion. According to a 2020 Marist poll, “Six in 10 Americans (60%) also oppose domestic taxpayer funding of abortion. This includes 89% of those who identify as pro-life, and 37% of those who identify as pro-choice.”

There’s a lot of misinformation about taxpayer funding for Planned Parenthood, the nation’s largest abortion provider. Planned Parenthood receives more than $1 million dollars a day of government funds under the guise that they are providing “healthcare for women.” But when the government again made clear that Title X family planning money recipients could not provide abortions or refer patients for abortion, Planned Parenthood opted out. When polled and asked the question whether the government should defund Planned Parenthood, many people – even some pro-lifers – say no, because of the false perception that they would be denying healthcare to women. Yet, in the same conversation, with the same people, when asked if the government should fund abortion providers, a majority say no. Clearly many people are unaware of PPFA’s deep involvement in abortion.

So, if I were a candidate and was asked if I would defund Planned Parenthood, I would answer: “I don’t believe our tax dollars should go to abortion providers. Instead, we should take the hundreds of millions of dollars that go to abortion providers and redirect that money to the local community health care clinics that are providing real health care services to families, closer to home.”

Advocates of Planned Parenthood claim that “not one dime of that money is used for abortion,” yet Planned Parenthood is the largest provider of abortion and money is fungible. Those millions of dollars build more buildings, hire more staff, do more advertising, and more little girls walk through their doors. And when those girls do walk through their doors for an abortion, our tax dollars don’t pay for it, the girl pays for the abortion, or their boyfriend or aunt or someone else pays for it.

Unsurprisingly, over the years, as Planned Parenthood has received more tax dollars, the numbers of abortions they commit have increased, even though nationally the abortion numbers have decreased significantly.

Meanwhile the number of genuine health care services they do provide continues to diminish. According to PPFA’s most recent annual report, the number of cancer screenings and prevention services they perform has actually decreased by 70%! Planned Parenthood does not provide mammograms and it’s rare to find one that provides prenatal care!

Remember the motto, “When you think of Planned Parenthood, think abortion.” Anytime Planned Parenthood is discussed, be sure to link them to abortion.


Being Pro-life is NOT Extreme

Finally, your pro-life position is NOT extreme. If your opponent supports abortion on demand through birth and wants taxpayers to pay for it, he or she is the extreme candidate – not you.

In fact, according to a February 2019 Marist poll, only 22% of Democrats, 10% of Independents, and 4% of Republicans supported the New York-style abortion on demand through birth and beyond policy. Actually 64% of Democrats, 92% of Republicans and 83% of Independents supported limits on abortion.

When your pro-abortion opponent attempts to paint you as extreme on abortion, be sure to point out their extreme position of abortion–through-birth and using your tax dollars to pay for them.

So be prepared, stay calm, and be proudly pro-life. It’s a winning issue.


**National Right to Life’s position is that abortion should only be allowed if it is necessary to prevent the death of the mother.

NRLC 50th Convention Sessions Available for Download

Senator Tom Cotton (R-AR)
Rep. Michelle Fischbach (R-MN)
Dr. Matthew Harrison
Abortion Pill Reversal
Patricia Sandoval

AND
MANY
MORE

nrlconvention.com
Pro-Abortion EMILY’s List Sets Targets for 2022 Senate Elections

EMILY’s List, a pro-abortion fundraising behemoth, wasted no time pivoting from the 2020 election to the 2022 midterms. After all, their name (EMILY) is an acronym that comes from the political adage, “Early money is like yeast.” A major part of the political action committee’s strategy is to recruit pro-abortion Democratic women and invest large sums of money into their primary campaigns.

So far in the 2022 cycle, EMILY’s List has endorsed Senate candidates in the competitive states of Florida, North Carolina, Pennsylvania, and Wisconsin, and announced their support for vulnerable incumbent senators in Nevada and New Hampshire. Each of these candidates is committed to extreme positions on abortion including support for abortions late in pregnancy and taxpayer funding of abortion.

EMILY’s List sinks millions of dollars into pro-abortion campaigns. However, despite being vastly outspent by EMILY’s List, pro-life candidates persevered in 2020. There were 58 races in which a candidate supported by National Right to Life was running against a candidate supported by EMILY’s List. Forty-one (or 71%) of the National Right to Life-supported candidates won.

In the perennial swing state of Florida, EMILY’s List is backing pro-abortion Congresswoman Val Demings in her challenge to pro-life Senator Marco Rubio (R). Demings will face at least 10 other Democrats in her primary.

The contrast between the candidates could not be clearer. Senator Rubio holds a 100% pro-life lifetime voting record with National Right to Life while Congresswoman Demings holds a 0%. Demings supports taxpayer funding of abortion and opposes legislation to protect unborn babies after 20 weeks (when they can feel pain). Her position is so extreme that she even opposed legislation to guarantee that infants born alive during failed abortions are afforded the same degree of care as other babies born at the same gestational age.

The Cook Political Report currently ranks the Florida Senate race as Likely Republican but like most statewide races in the Sunshine State, it will likely be hard-fought right up to the end.

In North Carolina, EMILY’s List has endorsed former state Supreme Court Chief Justice Cheri Beasley for the open seat left by pro-life Senator Richard Burr’s retirement. Beasley has affirmed her support for Roe v. Wade, the Supreme Court decision that legalized abortion on demand. In May, Beasley tweeted, “As a woman and a former judge, I know it’s time North Carolina has a Senator working in Congress to protect Roe v. Wade.” She faces two other major candidates in the Democratic primary.

Meanwhile on the Republican side, several pro-life Republican candidates have announced their campaigns, including Congressman Ted Budd, former Governor Pat McCrory, and former Congressman Mark Walker. The race for the open seat is considered a pure Tossup by the Cook Political Report. Many expect it to become one of the most expensive Senate races in U.S. history. (Excluding Georgia’s U.S. Senate runoff races, the most expensive of all time was North Carolina’s 2020 Senate race between pro-life Republican Senator Thom Tillis and challenger pro-abortion Democrat Cal Cunningham, according to OpenSecrets.)

Pennsylvania may live up to its nickname as the Keystone State as it may be the key to whether Republicans can retake the Senate or if Democrats hold on to control. Pro-life Senator Pat Toomey (R), who was elected to the seat in 2010 and then reelected in 2016, is retiring after pledging to only serve two terms. The Cook Political Report ranks the race as a Tossup.

While the other Democratic candidates in the field such as Lieutenant Governor John Fetterman and State Representative Malcolm Kenyatta have received most of the media coverage of the race, EMILY’s List has gone all-in for Val Arkoosh. She is a physician and currently

See “Targets,” page 11
Paying respect to the achievements of the past while forging a way forward to success in the future: the 50th NRL Convention

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

I walked into the National Right to Life Convention not knowing quite what to expect. After all, the nation is recovering from a worldwide pandemic which has dramatically altered just about every facet of life. I wondered if people would turn out, if our interactions would be awkward, and if this convention would measure up to the high bar set by conventions in the past.

What I found was a gathering of individuals on fire for life—perhaps even more so, having endured the Coronavirus crisis.

What I also discovered was that I was walking among heroes. For instance, there was the mother of 10 who brought with her one of the youngest convention-goers—a baby who delighted with his wide smile and pleasant demeanor.

I also encountered another mother of 10 who accompanied her son to the convention’s oratory contest. Hearing her talk about her amazing family, I knew I was face-to-face with a real American hero.

And then there was the young woman who ultimately won the oratory contest, boldly proclaiming the fundamental and inescapable truth that abortion does not empower women. Hers was one of the finest pro-life speeches I have ever been privileged to witness. On the other side of the spectrum, I looked with awe at the people who have poured 40 years into service in the pro-life movement, devoting themselves to defending the lives of people whom they may never have an opportunity to meet. They are completely committed to a cause greater than themselves—a devotion that I hope to emulate.

I also had the chance to witness an electrifying speech by Arkansas Senator Tom Cotton, who told the powerful story of standing vigil in the Neonatal Intensive Care Unit with his son Daniel. “Every life, born and unborn, is worthy of protection,” the Senator remarked.

The 50th National Right to Life Convention informed and energized, paying respect to the achievements of the past while forging a way forward to success in the future. I will never forget it, and I will always remember the heroes I met there, who inspire me to fight even harder for preborn babies, their mothers and fathers, the frail elderly, and people with disabilities. It is a heroic venture, and I am grateful to be part of it.
A quick 5-point primer on the Hyde Amendment

By Dave Andrusko

By now, readers of National Right to Life News are fully aware that the Biden-Harris administration, working in tandem with congressional Democrats, has set its sights on torpedoing the Hyde Amendment, which for 45 years has been a shining example of bipartisan consensus.

By contrast, National Right to Life occupies a front row in defense of this rider attached annually to the appropriations bill that includes funding for the Department of Health and Human Services (DHHS), and which applies only to the funds contained in that bill.

National Right to Life News Today is publishing a great many articles to help readers understand that, first and foremost, the “Hyde Amendment” means ensuring that the American public will not be forced to support abortion with their tax dollars. And that well over 2 million lives have been saved because of the Hyde Amendment named after the great pro-life hero, Rep. Henry Hyde (R-II).

Two great places to start are nrlc.org/hyde; and NRLC’s “State of Abortion, 2021,” beginning on page 13.

Drawing primarily on these resources, we could offer 50 bullet points. Today we’ll discuss just five.

As this battle heats up, it’s important that the public know it was Biden-Harris, Speaker Pelosi, and Senate Majority Leader Schumer who chose to initiate the confrontation. This intentionally divisive strategy comes from a President who in his inaugural address said, “Today, on this January day, my whole soul is in this—Bringing America together.”

They, not we, decided that the way of “bringing us together” is to launch a frontal assault on a policy that brought Republicans and Democrats together going back all the way back to the 1970s.

Our five points for today…

#1. “[B]y 1976, the federal Medicaid program was paying for about 300,000 elective abortions annually, and the number was escalating rapidly,” NRLC wrote in State of Abortion, 2021. “If a woman or girl was Medicaid-eligible and wanted an abortion, then abortion was deemed to be ‘medically necessary’ and federally reimbursable. It should be emphasized that ‘medically necessary’ is, in this context, a term of art — it conveys nothing other than that the woman was pregnant and sought an abortion from a licensed practitioner.”

These huge numbers illustrate why it is credible to argue that up to 2.4 million babies were saved, because of the Hyde Amendment.

#2. The first major victory for our Movement was the 1980 Harris v. McRae decision. The Supreme Court held “It simply does not follow that a woman’s freedom of choice carries with it a constitutional entitlement to the financial resources to avail herself of the full range of protected choices. . . . Although government may not place obstacles in the path of a women’s exercise of her freedom of choice, it need not remove those not of its own creation.” It is difficult looking back over four decades to understand what an important victory we won by the narrowest of margins, 5-4.

#3. One of the false fronts erected by pro-abortionists to make its attack on the Hyde Amendment seem more impressive than it is in reality is to allege that it discriminates against the poor. “Not at all,” says the United States Conference of Catholic Bishops’ Secretariat of Pro-Life Activities. “The

amendment covers all health programs funded through appropriations bills for the Departments of Labor, Health and Human Services, and Education — not only programs covering the poor. And Congress has enacted the same policy in programs for the military, federal employees, and others who are not poor. Moreover, low-income Americans have often been more likely than others to oppose abortion.’ [Boldface added.]

#4. One of most devious stratagems, even by pro-abortion standards, is to insist that if only people “really” understood the Hyde Amendment support for it would disappear into thin air. To attempt to manufacture opposition, pro-abortionists frontload questions in a manner that is both intentionally dishonest and and gleefully disingenuous. The simple truth is that support for limitations on federal funding of abortion goes back to the very beginning and extends through today.

Drawing on the latest Marist Poll, NRLC wrote back in January that “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. Note as well when it comes to support/oppose ‘using tax dollars to support

See “Primer,” page 10
Sen. Cotton: “The abortion industry can try to run from its past but it cannot erase it because cruelty and dehumanization are woven into the fabric of their movement”

Editor’s note. Pro-life Sen. Tom Cotton delivered these encouraging remarks at the Saturday night Banquet that closed the 2021 National Right to Life Convention.

Thank you, it’s an honor to address the National Right to Life Committee, the nation’s oldest pro-life organization and a true beacon of moral clarity.

I’d like to extend special recognition and thanks to [National Right to Life President] Carol [Tobias] for inviting me to speak this evening. I’d also like to recognize my home state’s chapter—where are you out there? There you are!, Arkansas Right to Life has helped turn Arkansas into one of the most pro-life states in the Union.

We regret that our legendary leader, Rose Mimms, couldn’t be here with us tonight, but we know that she’s watching at home. So, Rose, we love you and we’re praying for you.

Tonight we honor pro-life activists everywhere and especially at National Right to Life, which has been working to protect the unborn since before Roe v. Wade.

We’re here tonight because we know that abortion is not just a matter of choice—it’s a matter of justice and injustice, of life and death for millions.

Most of us here have a story, I think, about how we got involved in the pro-life movement. Perhaps it was a wise mentor or preacher. Perhaps it was seeing that first ultrasound. Or perhaps it was the birth of a precious child, who gave meaning to your life in a thousand different ways.

Those little kids especially have a way of putting old wisdom in new light. My six-year-old, Gabriel, loves to look at pictures of himself in my smart phone, including pictures of my wife Anna when she was pregnant with him. And then he remembers the pictures as if he’s remembering the moment itself.

He has remarkable recall of what he was doing at 18 months old. Just the other day, we were driving and he said, “Mommy, do you remember when I was in your belly?” After a long pause, which I suspect most of you have had to do in here in similar situations, she said, “yes, of course, honey, it was wonderful.” And he said, “yeah, it was. It was warm and cozy.”

And then he asked, “Mommy, how did I get in your belly?” To which I answered, as I bet most of you have in similar situations, “look, a squirrel!”

But those kids, they don’t let up, right? So, after he searched for that non-existent squirrel, he was back at it: “Where was I before I was in your belly? Was I with God?” An escape hatch! I jumped in and I said, “Yes Gabel, that’s exactly right, you were with God. Just like He says in the Bible, ‘Before I formed you in the belly, I knew you, and before you were born I set you apart.’”

Isn’t it telling, that even a small child knows he was alive inside his mother’s belly.

Our other son, Daniel, helped show some wisdom in his own way, when Anna was late in her pregnancy, she developed a condition that required the doctors to induce her early, at 37 weeks. And the birth and the labor went fine. And he seemed fine at first. After we had the chance to hold him for a few minutes, the nurses took him away for their routine checks.

But then the doctor came back and said that our son was struggling to breathe. And then later that night, in the middle of the night, the doctor came back again and said he’d taken a turn for the worse and that they were going to have to intubate him and put him in a pressurized bubble. And we would not be able to see him or hold him as he struggled for the breath of life.

So, we prayed, and we asked God to protect our son, and his doctors and his nurses. He still didn’t have a name at that time; we had narrowed down the list before going to the hospital, but as with our first son, we wanted to meet him before we gave him his name. So as we waited, we went through the names, one of which was Daniel, I re-read the story of Daniel in the Lion’s Den to my wife. And on the spot, she said, “his name is Daniel.”

So, as our Daniel went through his own lion’s den over the next few days, with some ups and downs, he ultimately prevailed. And after a few days, we were able to finally go into the NICU and see him, and hold him, and nurse him. We kept a near-constant vigil in that NICU for almost two weeks.

Now, of course, around us, there were many families and many babies, born much earlier and much smaller than Daniel and facing a much longer struggle. Adorning the walls in that NICU were posters showing a bright future ahead, with images of young children and teenagers running and playing and a note that said how prematurely they were born and how small they were when they were born.

We have seen those brighter days with Daniel since we left the NICU four and a half years ago. We have seen them as well at the reunion of that NICU, with all the babies who have passed through those doors. Reunions with bouncy houses and water slides and face painting. If that NICU was silent in hushed prayers, let’s just say the reunions were holy chaos.

But all those little—and not-so-little—kids were at one point vulnerable preemies.

See “Cotton,” page 43
WASHINGTON – On June 30, the Biden-Harris White House posted a fact sheet outlining the administration’s international commitments to be presented to the United Nations’ Generation Equality Forum which is taking place in Paris.

In July 2019, over 80 pro-abortion groups published a multi-year, multi-effort agenda they called the “Blueprint for Sexual and Reproductive Health, Rights, and Justice” that outlined the steps to achieving the goal of expanding abortion on demand domestically and internationally.

“The Biden administration is closely following the Blueprint established by pro-abortion groups and adhering to the goal of expanding abortion on demand domestically and internationally.

“The Biden administration is closely following the Blueprint established by pro-abortion groups and adhering to the goal of expanding abortion on demand domestically and internationally. The administration is determined to overrule the wishes of other countries, forcing an unwanted abortion policy on them.”

Polling through the years has shown that taxpayers oppose having their tax money used to pay for abortions. A 2019 Politico/Morning Consult poll found that 49% supported the Hyde Amendment while only 33% opposed it.

A 2020 Marist poll found that 60% opposed federal funding of abortions. And in a January 2021 Marist poll, 58% “oppose using tax dollars to pay for a woman’s abortion.”

In that same poll, 77% of respondents opposed using tax dollars to pay for abortions in other countries.

“These polls clearly show that the actions by the Biden administration go against the will of the people,” said Tobias.

A quick 5-point primer on the Hyde Amendment

From page 8

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%).” And

#5. Why are pro-abortionists obsessed—no lesser word will do—with eliminating the Hyde Amendment? They offer up the usual word salad but the explanation is strikingly simple: there are never—never—enough abortions.

NRLC put it perfectly when it wrote “There is abundant empirical evidence that where government funding for abortion is not available under Medicaid or the state equivalent program, at least one-fourth of the Medicaid-eligible women carry their babies to term, who would otherwise procure federally-funded abortions. Some pro-abortion advocacy groups have claimed that the abortion-reduction effect is substantially greater—one-in-three, or even 50 percent.”

All those deaths prevented. All those “unwanted” babies carried to term.

No wonder they hate the Hyde Amendment.
serves as the chair of the Montgomery County Board of Commissioners.

Arkoosh did, however, make headlines when she railed against the Unborn Child Dignity Act, a state pro-life bill, in May. Pro-life State Rep. Frank Ryan (R), the bill’s prime sponsor, said the legislation would give parents the right to provide for burial or cremation of a child “lost to miscarriage, ectopic pregnancy or stillbirth,” and require hospitals to keep those remains separate from medical waste.

Arkoosh falsely claimed the bill would fine women who miscarry and force women to fill out death certificates. Even the generally pro-abortion fact-checker Snopes rated Arkoosh’s claims as “Mostly False.” (www.snopes.com/fact-check/pennsylvania-miscarriage-fine/)

On the Republican side of the aisle, announced candidates include former Congressional candidate Sean Parnell, former Lieutenant Governor candidate Jeff Bartos, and former U.S. Ambassador to Denmark Carla Sands.

Wisconsin State Treasurer Sarah Godlewski (D) received EMILY’s List’s endorsement as she runs for Senate. She is seeking the Democratic nomination in an already crowded field of five candidates with more expected to announce.

Pro-life incumbent Senator Ron Johnson (R) has not announced whether he will seek re-election. Johnson holds a 100% rating with National Right to Life.

In May, when the U.S. Supreme Court announced it would take up Dobbs vs. Jackson Women’s Health, a case concerning a Mississippi law protecting unborn children after 15 weeks, Godlewski posted, “Yet another outrageous attack on a woman’s right to choose. These partisan crusades are flat-out dangerous to the health of women and would only undermine our reproductive freedom.”

In 2016, President Trump carried Wisconsin by a little more than 20,000 votes. In 2020, President Biden carried the state by 20,000 votes. The Wisconsin Senate race is labeled Leans Republican by the Cook Political Report but if Senator Johnson should opt to retire, the race could easily fall into the Tossup category or even Leans Democrat depending on which candidates emerge from each party’s primary.

EMILY’s List has endorsed four incumbent Democrat U.S. Senators in 2022: Senators Tammy Duckworth (Illinois), Patty Murray (Washington), Catherine Cortez Masto (Nevada), and Maggie Hassan (New Hampshire). Of those four, political observers are paying the closest attention to the races in Nevada and New Hampshire, two states which were competitive in the last two presidential elections.

In the 2020 presidential election, Nevada was decided by about 30,000 votes (a 2.39% margin). In 2016, Hillary Clinton narrowly carried New Hampshire by a 0.4% margin, making it the second closest margin of any state in the nation (after Michigan). Both Senators Cortez Masto and Hassan narrowly won their first terms in 2016-- Cortez Masto by 2% and Hassan by 0.1% (1,000 votes). The Cook Political Report rates both races as Likely Democrat but make no mistake about it -- both races are winnable for Republicans in 2022!

EMILY’s List is a formidable foe. In any given election year, they will spend more money than all the single-issue pro-life political action committees combined. But we have something even more valuable: The pro-life grassroots.

EMILY’s List spending can only do so much for their candidates. But we are emboldened by our belief that every child deserves the right to life. We are ready to roll up our sleeves and get to work to ensure the men and women we elect to office will stand up for the most vulnerable among us. That makes all the difference!
Memorials & Tributes

You, your family, and your friends may remember a deceased loved one by making a memorial contribution to National Right to Life. This memorial gift is a fitting way to remember a lifetime of love for the unborn at the time of death. Your contribution can also be made to commemorate birthdays, new arrivals, anniversaries, Mother’s Day, Father’s Day, or any other special occasion. An acknowledgment card in your name will be sent to the family or person you designate. The contribution amount remains confidential.

In Memory of

Joan P. Allgaier
Michael Allgaier

Jase Ian Barnhill
Gene & Christi Miller
Jim & Gayle Powers

Esther Hill Blanchard
Gary & Susan Kennon

Lee Fennell
Janet Koehler

Herm Hernandez
Wendy & Michael Birkeland

Del Hood
Melody Kunzli

Joel Kallman
Kara & Tom Bussard
Martin & Lisa DaVita
Duane Dietrich
Kenneth & Lori Jones
Gladys J. Kallman
David Kubala
John & Monica McGue
Paul & Ava Mullenhour

Kathleen Laake
Cathy Hamblen
Tom Horton

Dr Lurry David Lacour Jr
Vernal & Joan Comeaux
Carl & Becky Decker
Ronnie Guidry
Claire & Glenn Rivette
Dwight H. Smith
Ike & Dawn Thrash

Michael Llewellyn
Board of Concerned Citizens for America
Mr & Mrs D. Christman
Mr & Mrs S. Franzen
Mr & Mrs R. Hagerty, Jr.
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Mr & Mrs W. Ordway
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Brad & Caroline Wyman
Friendly Sons of St Patrick of Morris County, NJ

Lorraine Seguin
Marsha Gould
Michael Gould

Brian Clement Smith
Gary Rabine
James Ryan

Agnes Stakelbeck
Fred Stakelbeck

Jack Stechsulte
Glen & Elaine Buckley

Charles Uhlenkott
Jenny Kaye Kent

Audrey Wagner
Jennifer Gallagher

Memorials & Tributes

You can make your contribution in loving memory or in honor of someone online at www.nrlc.org/giving or by sending your contribution along with the form below.

Contribution amount $__________

Your name_____________________________________________________________________
In memory of_________________________________   In honor of_________________________
Your address___________________________________________________________________
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Make your check payable to National Right to Life Committee and return with this form to:
National Right to Life Development Office
1446 Duke Street | Alexandria, Virginia 22314

July 2021
Following the actual science leads inevitably to a pro-life conclusion

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

While the celestial heavens and the deepest pockets of the ocean remain mysterious to us on many levels, modern technology has made them less so, providing new and fascinating insights that we once lacked.

The same is true of another once baffling frontier: the womb.

Although it is the origination point of every human being who has ever walked this earth, for the greater part of history we’ve known little about our first home and how we came to be.

It was only in the late 1800’s, for example, that scientists understood that the union of male and female sex cells creates another human being. But beyond that, much remained a mystery.

Without any means to glimpse into the gestational cosmos, scientists could only speculate as to what occurs during pregnancy. Even well into the 20th Century, we possessed surprisingly little information about prenatal development.

As late as the 1969 edition of the *Cumulative Index Medicus*, a massive book listing every article published in every medical journal in the world, had just five articles under the heading of “fetus, physiology and anatomy of.”

The void of facts made the product of abortion-on-demand easier to market. After all, it (not he or she) was just a clump of cells.

That transformative tool was ultrasound which provided a window that revealed the miraculous process of human development. These scientific advancements, along with those arising from the study of genetics, sparked an abundance of research into life in utero.

The late Dr. Bernard Nathanson addressed this lack of empirical data on human development in his autobiography *The Hand of God*. And he discussed the technological lightning bolt that struck him in the late 1970’s which led him to abandon his lucrative abortion practice and leadership role in the pro-abortion movement to become a staunch pro-life advocate.

By 1979, he accounted for twenty-eight hundred articles on fetology in the *Index Medicus*, but by 1994 close to five thousand. Now, almost 30 years later, how much more research has been done and articles written on human life in its earliest stages?

How little we knew then. How much more we know now.

It might be easier to understand someone’s support of abortion back in the “Dark Ages” when so little of fetology was known.

But how can anyone today, especially those who seemingly espouse “science” as their barometer of all things true, justify abortion?

They would have to be blind to facts.

Deaf to a heartbeat.

Indifferent to an innocent life moving right before their eyes.

Numb to dismemberment.

Desensitized to a violent death.

Callous to the crude disposal of human life.

They would be and, in fact, are the ultimate science-deniers.

So let us be relentless messengers of the beautiful biological truths we have learned in the last half century.

Let us incessantly proclaim the fact that every human life begins at the moment of fertilization.

Let us truly follow the science to build a culture of life.
Choice42 produces another pro-life masterpiece, “So, You’re Pregnant”

By Dave Andrusko

On June 30, we reposted a story from the Canadian pro-life organization “We Need a Law.” (Canada has no abortion law.) It was titled “Wantedness and the abortion debate.” If you didn’t read it, I would highly recommend you do.

The post links to an incredible 1 minute, 50 second long video, titled, “So, you’re pregnant.” I have watched hundreds of pro-life videos, many of them so powerful I think about them to this day.

But this one—produced by the magnificently creative Choice42 (also out of Canada) led by founder and director, Laura Klassen—is, in my opinion, the best yet.

Katie Yoder, our fellow pro-life colleague over at Catholic News Agency, recently wrote about the video with her customary grace and insight. Let me quote her first two paragraphs before putting in my two cents worth:

A viral video is challenging society and the media for pressuring women to choose abortion. Its message is simple: Women have an incredible Wonder Woman-like ability to choose life for their unborn baby – and succeed. They can, in other words, choose life for two.

I transcribed the whole video. Let me quote just the beginning. Note two things. There is nothing about this video, or others from Choice42, that suggests that the woman (or girl) eagerly embraces the news that she’s pregnant. But that is juxtaposed against a fundamental truth: there are now two people involved and one is utterly dependent on the other for protection.

So you’re pregnant. You didn’t plan this. You didn’t want it. And now you have a choice to make. Take a breath. You can do this.

I’m going to be real with you, though. The choices that our society and the media are going to present you with, they’re not all equal. Right now, your baby’s heart is already beating. That started about 21 days after conception. We’re talking about another human being here, and not just any human being. Your baby.

For whatever reason, this baby was given to you. You were chosen to be this child’s mother. And no matter what’s going on in your life, you can rise up and take this on. You can rock this.

“We’re talking about another human being here, and not just any human being. Your baby.”

Much of the remainder of the video exquisitely lays out all the rationalizations, justifications, and excuses others (including “those closest to you”) will offer the woman to convince her now is not the right time. But…

You’re the only one who can protect this child. You.

The conclusion repeats the empowering message:

Fight for your baby and reach out for help if you need it. We’ll help you. Choose your baby. You’ve got what it takes.

And you won’t regret it. Fight for your baby…choose your baby…You’ve got what it takes.

Watch “So, You’re pregnant” again and again and be sure to share it with your family and friends.
Aborted in Minnesota declined significantly in 2020, according to a report released Thursday by the Minnesota Department of Health.

Last year’s total of 9,108 abortions marked an 8% decrease and the lowest figure since 1974.

“Many pregnant women have faced difficult situations, especially during the last year. Yet more and more have met those challenges without the tragedy of abortion,” says MCCL Executive Director Scott Fischbach. “The work of pregnancy care centers, which compassionately offer alternatives to abortion, has been instrumental. And pro-life laws in Minnesota, such as Woman’s Right to Know and Positive Alternatives, continue to empower women and save lives. Today’s report is very positive news for mothers and children.”

Abortions have dropped 52% since their peak in 1980. The abortion rate in 2020 fell to an estimated 7.6 (abortions per 1,000 Minnesota women of reproductive age), a decline from 8.4 in 2019 and the lowest rate since 1973, the year abortion became legal.

Abortions performed on minors dropped to 217 last year, the lowest number on record.

Despite the decline, Planned Parenthood saw a startling 16% single-year increase in its abortion total, reaching a record-high 7,491 abortions in 2020—a record-high 82% of the overall number (up from 65% in 2019). Planned Parenthood has grown its abortion total for nine straight years—a 108% jump since 2011—even as abortions at other facilities in Minnesota have fallen 78% over the same period.

In addition, chemical abortions in 2020 reached an all-time high of 4,964, a 34% increase and—for the first time—more than half of the overall total. The jump comes after a new Minnesota organization began sending chemical abortion drugs to women through the mail, and after Planned Parenthood started providing chemical abortions at an additional one of its locations.

Especially during the COVID-19 pandemic, abortion supporters have sought to make chemical abortions more widespread, even at the expense of women’s safety,” says Fischbach. “Both women and unborn children deserve better.”

Chemical abortions pose risks to women that are exacerbated when, as in mail-order abortions, they receive no in-person medical examination beforehand. A large Finnish study found that chemical abortions led to “adverse events” in 20 percent of cases—almost four times the rate of immediate complications as surgical abortions.

The following is additional information from Induced Abortions in Minnesota January – December 2020: Report to the Legislature:

• A total of 251 abortions took place at 20 weeks gestation or later (there were 253 in 199). The latest abortion took place at 35 weeks.

• The suction abortion procedure accounted for 39 percent of all abortions (down from 55 percent in 2019). Chemical abortions accounted for 55 percent (up from 37 percent). Dilation and evacuation (D & E) dismemberment procedures numbered 580 and accounted for 6 percent (690 in 2019).

• Rape or incest was a reason given for less than one percent of abortions (consistent with past years). 57 percent of women cited “does not want children at this time” (compared to 68 percent in 2019). 18 percent cited “economic reasons” (21 percent in 2019). In 30 percent of cases, no reasons were known or given.

• 40 percent of women had undergone one or more previous abortions (39 percent in 2019); a total of 676 women had undergone three or more previous abortions.

• Complications: 109 complications were reported occurring at the time of the procedure, including cervical laceration, hemorrhage, and uterine perforation (there were 114 in 2019); 89 complications were reported occurring following the procedure, including 45 cases of “incomplete termination of pregnancy” (up from 38 post-operative complications in 2019).

• 0 abortions resulting in a born-alive infant were reported (three in 2019).

• 11,398 women received the Woman’s Right to Know informed consent information—2,281 more than the number of those who underwent abortion.
Editor’s note. These are excerpts of remarks delivered by Rep. Chris Smith (R-NJ) during the House of Representatives floor debate on H.R. 18—No Taxpayer Funding for Abortion Act.

More than twenty peer-reviewed studies show that more than 2.4 million people are alive today in the United States because of the Hyde Amendment—with about 60,000 babies spared death by abortion every year.

Over 2.4 million people who would have been aborted instead survived because taxpayer funds were unavailable to effectuate their violent demise.

Growing numbers of Americans continue to be shocked to learn that the methods of abortion include dismemberment of a child’s fragile body including decapitation, and that drugs like RU 486 starve the baby to death before he or she is forcibly expelled from the womb.

The multibillion-dollar abortion industry cleverly markets the sophistry of choice while going to extraordinary lengths to ignore, trivialize and cover-up the battered baby-victim.

By reason of their age, dependency, immaturity, inconvenience, fragility and/or unwantedness, unborn children have been denied justice—and the most fundamental of all human rights, the right to life.

The right to life is for everyone not just the planned, the privileged or the perfect.

Ultrasound has not only been an amazing diagnostic tool for treating disease and disability before birth but it has also made the unborn baby more visible.

Today, for many expectant moms, first baby pictures aren’t of their precious newborn baby but ultrasound imaging photos and videos chronicling the amazing miracle of their child’s journey before birth.

The Hyde Amendment Democrats want to eliminate has saved over 2.4 million lives. Senator Biden wrote to a constituent: “those of us who are opposed to abortion should not be compelled to pay for them.”

Years ago, then Senator Biden wrote to constituents explaining his support for the Hyde amendment and said it would “protect both the woman and her unborn child…” He said: “I have consistently—on no fewer than 50 occasions—voted against federal funding of abortions...those of us who are opposed to abortion should not be compelled to pay for them.”

I absolutely agree—those of us opposed to abortion should not be compelled to pay for them.

Madame Speaker, someday future generations of Americans will look back and wonder how and why such a seemingly smart, enlightened and compassionate society could have enabled and facilitated the extermination of over 62.5 million children—a number of child deaths that equates with the entire population of Italy.

With deep respect for my colleagues, I believe unborn children need the President of the United States and Members of Congress on both sides of the aisle to be their friends and advocates—not powerful adversaries.
The headline to the June 25 AP-NORC poll should be very discouraging to pro-abortionists: “Most say restrict abortion after 1st trimester.”

For context, bear in mind the poll comes in the wake of the Supreme Court’s decision to hear a Mississippi abortion law which bans abortion after the 15th week.

First, the top drawer conclusions:

- 61% of Americans say abortion should be legal in most or all circumstances in the first trimester of a pregnancy. However, 65% said abortion should usually be illegal in the second trimester, and 80% said that about the third trimester.

Breaking out the numbers further we find:

- Second trimester abortions—34% say they should usually [19%] or always [15%] be legal, and another 30% say they should be illegal in most but not all cases.

- Another 35% say abortion in the second trimester should be illegal in all cases, making for a total of 65% who think abortions should be illegal in all cases are most cases.

- Third trimester abortions—19% think most [11%] or all [8%] abortions should be legal, and another 26% say they should be illegal only in most cases.

The accompany chart explained at another 54% say it should be illegal in all cases!

So, to go back to the nub of the paragraph, 80% believe third trimester abortions should be illegal either in all cases [54%] or most cases [26%].

The AP story addresses the number of abortions in the second and third trimester.

Abortion after the first trimester are not rare, but they are exceptions to the norm. The Centers for Disease Control and Prevention, in its most recent report on abortion in the U.S., estimated that 92% of the abortions in 2018 were performed within the first 13 weeks of pregnancy.

Guttmacher found there were 862,320 abortions performed in 2017, the latest figures it has.

11% equals 94,855 abortions
1% equals 8,623 abortions
Remember there are a host of reasons to believe these numbers under-represent the real figures. In all likelihood, there are well over 10,000 abortions after the 13th week.

Ten or eleven thousand is not a “rare” incidence.

One other thing—the annual Marist poll taken for the Knights of Columbus—gives us another look at public opinions. What do their numbers published in January 2021 tell us?

The question asked of 1,173 adults: Abortion should be…

- allowed only during the first three months of a pregnancy [25%]
- allowed only in cases of rape, incest or to save the life of the woman [mother] [28%]
- allowed only to save the life of the woman [mother] [11%]
- never be permitted under any circumstance [12%]

That is a total of 76%.
Stories about abortion can tell the truth—or spread a fiction

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

Storytelling moves people. It changes hearts and minds. But it can be used in two very different ways. It can illustrate the truth about the way things really are—or it can sway people to accept false beliefs about reality.

We need to be able to discern the difference.

Stories play a huge role in the debate surrounding abortion. Consider campaigns like “Shout Your Abortion” and “We Testify.” They specialize in “abortion storytelling,” promoting the personal experiences of women who had abortions and don’t regret them.

The problem is that the message doesn’t match reality. The reality of embryology is that unborn children are living members of our species. The reality of equality is that every human being counts. Everyone has human rights and deserves protection from lethal violence. This is why killing unborn humans through abortion, no matter its perceived benefits, isn’t a humane and loving answer to the difficult circumstances women often face.

Yet abortion supporters see stories as key to persuasion. A recent Cosmopolitan article quotes one woman saying, “A lot of my friends and family have literally told me, ‘I have changed my view because you had an abortion. In hearing your story and you telling me what you went through, there was just no way I could be pro-life.’”

This is the kind of storytelling that employs feelings and obscures facts.

Stories can be used in a much better way. They can show the way things really are.

Look at groups like the Silent No More Awareness Campaign and Abortion Changes You. These are post-abortive women and men who recognize abortion for what it really is. They mourn their abortions. They were wounded by their abortions. They are parents who lost children. That’s the reality, and their personal accounts powerfully illustrate it.

Take Bettina’s story. Under pressure from her partner, she underwent two abortions, then experienced years of struggles, culminating in a suicide attempt. Eventually, she says, she “accepted the reality of preborn humanity”—that “if a baby is a human being deserving of life and protection after birth, it must be the same essential creature beforehand, since birth does not cause any real change, except that of location.”

Like so many others, Bettina began to process her grief, and found healing.

Stories like this are so moving because they paint a picture we’d all like to emulate. They show what it looks like to live with courage and compassion.

We need to tell stories about abortion. But in doing so, we must tell the truth—about biology, about human equality, about strength and love, and about the tragedy of abortion.
Federal Appeals Court Unanimously Upholds Dismissal of Lawsuit Claiming Equal Rights Amendment Was Ratified; Extends Unbroken 40-Year Losing Streak For ERA-Resuscitation Legal Claims

On June 30, a three-judge federal court of appeals panel unanimously upheld the dismissal of Equal Means Equal v. Ferriero, one of two ongoing lawsuits that implausibly claim that the federal Equal Rights Amendment (ERA) has been ratified and is part of the U.S. Constitution.

“Today’s ruling continues an unbroken, 40-year losing streak by advocates of the ERA-is-alive cult in the federal courts, before federal judges of every stripe of judicial philosophy and political background,” said Douglas Johnson, director of the National Right to Life Committee’s ERA Project.

The lawsuit ruled on today was brought by Equal Means Equal, a pro-ERA advocacy group, with several allied plaintiffs. EME sued the Archivist of the United States for declining to certify the ERA as part of the Constitution after the Virginia legislature purported to “ratify” the ERA in January 2020, ostensibly thereby crossing the 38-state ratification threshold (a dubious claim widely accepted by the news media). The lawsuit argued that the 1979 ratification deadline that Congress included in the 1972 ERA Resolution was constitutional, and the ERA therefore expired more than three decades ago. The legislative actions by Nevada (2017), Illinois (2018), and Virginia (January 2020) were not real ratifications because they “came too late to count,” Contreras ruled. Contreras also said that the Archivist of the U.S. was justified in refusing to certify (“publish”) the ERA as part of the Constitution, and indeed that the claim (made by the three attorneys general) that the Archivist should ignore the deadline was “absurd.”

On May 3, 2021, the attorneys general of Virginia, Nevada, and Illinois (Virginia v. Ferriero), U.S. District Judge Rudolph Contreras (an appointee of President Obama) on March 5, 2021 ruled that the deadline included by Congress in the Constitution, objective examination of the judicial history suggests something more akin to a political hoax. Devotees of the ERA-is-alive cult have suffered an unbroken, 40-year string of defeats before federal judges of every stripe of judicial philosophy and political background. The two current lawsuits claiming that the ERA is alive have now been rejected by a total of five federal judges, four of whom were appointed by Democratic presidents. Over a 40-year period, 23 federal judges and justices have taken adverse actions on various ERA-is-alive legal claims, and not a single judge has accepted any one of the ERA-is-alive movement’s grab-bag of legal theories.”

See “Dismissal,” page ??
Federal Appeals Court Unanimously Upholds Dismissal of Lawsuit Claiming Equal Rights Amendment Was Ratified

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An article by Johnson summarizing the 40-year string of defeats for ERA-revival advocates in the federal courts was published by NRLC on March 18, 2021. (“Federal judges of every stripe have scorned legal theories intended to resuscitate the Equal Rights Amendment”).

In Congress, the focus of pro-ERA forces is currently on a legislative measure, approved by the House of Representatives on March 17, 2021 on a near-party-line vote, that purports to retroactively “remove” the ERA ratification deadline. In remarks to a virtual “Townhall” on June 26, 2021, Equal Means Equal attorney Wendy Murphy called “the silly deadline removal” measure “a complete joke,” said that would be “struck in a minute, in a heartbeat, by a federal judge, because you cannot retroactively remove an expired deadline.” Murphy said that the measure serves only as a fundraising tool for members of Congress.

In any event, only two Senate Republicans have endorsed the “deadline removal” measure (S.J. Res. 1), and they are the same two who supported such legislation in the previous Congress (Senators Murkowski and Collins). The measure cannot advance without at least 60 supporters in the Senate.

The Archivist of the United States did not certify the ERA in January 2020 because a legal opinion by the Office of Legal Counsel of the Department of Justice, issued January 6, 2020, found that “the ERA would reinforce the constitutional right to abortion…[it] would require judges to strike down anti-abortion laws….” A National Organization for Women factsheet on the ERA states that “…an ERA — properly interpreted — could negate the hundreds of laws that have been passed restricting access to abortion care…” The ACLU, in a March 16, 2021 letter to the House of Representatives, said that the ERA “could provide an additional layer of protection against restrictions on abortion…[it] could be an additional tool against further erosion of reproductive freedom…” Five pages of such footnoted quotes from leaders and attorneys associated with prominent abortion-rights organizations are found at www.nrlc.org/uploads/era/ERA-AbortionQuotesheet3-5-20.pdf

Douglas Johnson is NRLC’s subject matter expert on the Equal Rights Amendment, an issue on which he has written and worked for 40 years. Mr. Johnson is available for interviews or email exchanges to discuss the congressional and ratification histories of the ERA, to comment on the legal and political aspects of the issue, and to discuss the ERA-abortion connection.

@ERANoShortcuts is a non-NRL but recommended Twitter account dedicated exclusively to tracking ERA-related legal and political developments in the courts, Congress, Executive Branch, and state legislatures, from an “ERA-skeptical” perspective.
Clearly, the Guttmacher Institute, formerly a “special affiliate” for Planned Parenthood and now the highbrow apologist for the Abortion Industry, does not fear crying wolf. Once again (is there a pattern here?) we learn that as bad as 2020 was for pro-abortionists, 2021 is worse. For example, in April, the headline to Guttmacher’s update read, “2021 Is on Track to Become the Most Devastating Antiabortion State Legislative Session in Decades.”

If April’s ticker tape was the legislative equivalent of the 1929 stock market crash, could the news be more awful in July? Of course. Here’s the headline for Elizabeth Nash’s latest lamentation released July 1: “State Policy Trends at Midyear 2021: Already the Worst Legislative Year Ever for U.S. Abortion Rights.”

Can you even imagine October’s report?! Here are five bullet points. Remember, Guttmacher’s numbers never match up with ours. They are always larger because they break out any given law’s components and add them up. So one law counts as four “abortion restrictions.” It’s the same technique, only in reverse, that allows Planned Parenthood to pretend that abortion is “only 3% of its services.”

#1. In the first six months, “More abortion restrictions—90—have already been enacted in 2021 than in any year since the Roe v. Wade decision was handed down in 1973.” Guttmacher, as has the Abortion Industry in general, hitched its wagon to a larger train of “progressive” issues which are now their bailiwick but not ours. But the message is clear: state legislatures are continuing to pass legislation to protect unborn babies and their mothers.

#2. “The 90 abortion restrictions enacted this year already surpass the count from 2011, previously the worst year on record, when 89 restrictions were enacted. In total, state legislatures have enacted 1,320 restrictions in the 48 years since Roe was decided, including 573 restrictions enacted since 2011. This year, 90% of the enacted restrictions were adopted in states already considered to be hostile toward abortion rights.” Pro-life states continue to erect walls against encroachments by the Abortion Industry, including amendments to state constitutions, and passing new laws and measures that put teeth in existing legislation.

#3. “The 2021 abortion restrictions amplify the harm of earlier ones: Each additional restriction increases patients’ logistic, financial and legal barriers to care, especially in regions where entire clusters of states are hostile to abortion.” The Multiplier Effect.

I like the idea of “entire clusters” of pro-life states. Our goal is to expand existing clusters and create new ones.

#4. There’s the dreaded Mississippi law that bans abortions—saves babies-after the 15th week. “The Mississippi ban is unconstitutional according to almost five decades of existing Supreme Court rulings, which prohibit a state from banning abortion before viability (generally at 24 to 26 weeks of pregnancy). Although lower courts struck down the ban, this fall the Supreme Court will consider whether a previability abortion ban is constitutional.”

First of all, the age of viability is earlier than 24-26 weeks. Second, even the most ardent pro-abortionists understand that the point of “viability” is totally arbitrary and subject to advances in perinatal care. Third, the Supreme Court is always being challenged to rethink its wholly irrational abortion jurisprudence. And

#5. What Guttmacher labels “Proactive Efforts,” for example, “Abortion protections. Although abortion restrictions took center stage in 2021, policies that protect and expand abortion rights and access have been enacted in a handful of states.”

These are not tinkering around the margins. In states like New York and Vermont, they have thrown all caution to the wind, legalizing abortion throughout all nine months of pregnancy, and removing requirements, limited as they may have been, to treat abortion survivors. But pro-lifers never give up and never give in. We will continue to fight pro-abortionists at every step, seeking to protect what we have and roll back anti-life advances.

Meanwhile, I just can’t wait for Guttmacher’s October Update.
“Make this week of learning count for the unborn, the elderly and those with disabilities”

By Carol Tobias, President

Editor’s note. These are the closing remarks for the 2021 NRL Convention delivered at the Saturday night banquet.

For the last year and a half, things have been a bit strange—shutdowns, masks, stay-at-home orders, social distancing, vaccines, etc. We never really knew what was coming next; or when or if it would end. And through it all, we persisted. Because of all the uncertainty, we didn’t know if anyone would show up to the convention, but you did. And we had a wonderful convention! Thank you for being a part of it.

I enjoyed seeing your smiling faces. It’s encouraging to know that behind the smiles and the loving eyes also lie intelligent minds and determined hearts. I know you will do it all with love in your heart and a smile on your face because, as we address issues of death, we celebrate LIFE.

Take the knowledge you’ve gained, and the motivation hopefully generated here, back to your local area and share it with your chapters. Make this week of learning count for the unborn, the elderly and those with disabilities.

Next year’s convention will be in Atlanta. I look forward to seeing you there!
to say that the very first day we made the announcement, people registered. Not many that first day, but enough to fuel the fire and get excited that the right decision had been made. We never looked back.

**NRL News:** As we wrote in *NRL News Today*, the attendance was larger than you would’ve expected, given how late the go-ahead decision had to be made, and the enthusiasm level was very high. To what do you attribute that?

**Jacki Ragan:** People were ready. I was mildly concerned about a few things, not a single one of which turned out to an issue. People were ready to get together and we did. We had almost twice the attendance we had thought we would get. People were upbeat, hugs were plentiful, and, as the late Dr. Jean Garton often said, “The National Right to Life Convention is the family reunion for the pro-life movement.”

**NRL News:** This was second time NRL decided to have a two-day convention rather than three day. Every NRL Convention has a chemistry of its own. Was that altered by compressing the schedule and, if so, how?

**Jacki Ragan:** It has not altered the chemistry of the convention and while every session was exciting and both the Prayer Breakfast and Banquet were sold out days before the event. We had packed rooms for workshops, for the General Sessions and for every event hosted by NRLC 2021. I always take a look into the rooms about midway during any/all sessions to see. For the General Sessions there was standing room only, every seat was filled the Prayer Breakfast, and Banquet, and attendance at the workshops showed the same commitment. The evaluation forms say that far better than I can.

**NRL News:** Every year we ask you what is your “takeaway.” What will you remember most about the 50th National Right to Life convention?

**Jacki Ragan:** In many ways, even though it was the 50th, it was the first. The first time in months that folks had ventured out, flown on an airplane, driving across country, stayed in a hotel, been in group settings. And the attendees loved it. We were a family coming together again.

There were MANY new faces that we have been talking to for months via email and phone, but NRLC 2021 offered the opportunity to meet in person and get to know each other. It was as close to perfect as any event can be.

We are excited to ask you today to Hold/Save the Date for NRLC 2022 in Atlanta, Georgia – June 24, 25, 2022! Watch the NRLC website for coming details: [www.nrlconvention.com](http://www.nrlconvention.com). Also, you can purchase any sessions for downloading that you may have missed during NRLC 2021. And there are some great ones!

Finally, thanks to all those who joined us in the Commonwealth to make the 50th conventions the success.
Only 17% of respondents to consultation want ‘DIY’ home abortions in Scotland

By Right to Life UK

On June 23, the results of the Scottish Government’s consultation on whether to allow ‘DIY’ home abortions permanently were published, showing that only 17% of submissions supported making ‘DIY’ home abortions available permanently in Scotland.

61% of those who responded expressed support for the temporary ‘DIY’ home abortion services being ended. 21% submitted other suggestions for how to proceed, which they provided in a free-text response box.

An analysis of these responses by Right To Life UK showed that the vast majority of the free-text ‘other’ responses wanted to either end ‘DIY’ abortion services or introduce more restrictions to abortion services in Scotland.

Furthermore, 74% of respondents outlined that they felt ‘DIY’ home abortion services are having a negative impact on the safety of women accessing abortion services.

Strong public opposition

This strong public opposition to making ‘DIY’ home abortion permanent is also reflected in polling undertaken by Savanta ComRes that shows the overwhelming majority of the general Scottish public, especially women, are concerned about the safety, quality and legal issues arising from ‘DIY’ home abortion.

Over 600 medical professionals have signed an open letter to the Scottish, Welsh and English Governments calling for an end to ‘at-home’ abortion due to concerns that it has led to a number of abortions occurring over the ten-week limit and that it fails to protect women and girls from being coerced into an abortion against their will.

Significant problems have arisen

Abortion statistics released by Public Health Scotland show that the number of abortions carried out in Scotland reached the second-highest number on record in 2020.

This significant rise in abortions has accompanied the Scottish Government introducing the temporary measure in March 2020 allowing ‘DIY’ home abortions in Scotland.

Since ‘DIY’ home abortions were introduced, a number of significant problems have arisen.

According to a leaked “urgent email” sent by a regional chief midwife at NHS England and NHS Improvement on the “escalating risks” of ‘DIY’ home abortions, several women attended Emergency Departments for incidents including significant pain and bleeding, ruptured ectopics, and resuscitation for major haemorrhage. The email leak also revealed police opened a murder investigation into the death of a baby who they believe was born alive despite her mother taking ‘DIY’ home abortion pills.

A nationwide undercover investigation found evidence of abortion providers putting women at significant risk by not carrying out basic checks before sending them ‘DIY’ home abortion pills.

A spokesperson for Right To Life UK, Catherine Robinson, said: “It is clear from the responses to this consultation that there is very little public appetite for making these dangerous ‘DIY’ abortion services available permanently in Scotland”.

“The results of this consultation show that only 17% of submissions supported making ‘DIY’ home abortions available permanently in Scotland. 61% supported ‘DIY’ home abortion services being ended and 21% submitted alternative suggestions for how to proceed, which they provided in a free-text response. Our analysis of this 21% of the submissions shows that the vast majority of the responses categorised as ‘other’ wanted to either end ‘DIY’ abortion services or introduce more restrictions to abortion services in Scotland”.

“We are also very concerned about clear bias shown in the reporting of the consultation results. In the reporting of the results, the Scottish Government has separated responses from members of the public that came from a Right To Life UK campaign encouraging the public to make a submission. A number of pro-abortion groups ran similar campaigns, but their responses were not separated in the reporting, while those using information provided by Right To Life UK were. This is highly inappropriate”.

“Thousands of women have been put at risk from these ‘DIY’ home abortion schemes and we are calling on the Scottish Government to end them immediately. Every day that these services continue, more women are put at risk”.
A deeper look at NARAL’s “deep dive” in abortion coverage

By Laura Echevarria, NRL Director of Communications and Press Secretary

National Right to Life’s recently concluded 50th convention was a resounding success. Workshops were filled with pro-lifers wanting to learn about the latest issues affecting the pro-life issue as well as absorbing tips and techniques attendees could take home to make them more effective at protecting the right to life.

In the press room, NRL Communications’ staff was kept busy helping reporters with interviews and workshop information so they could cover relevant issues. Naturally, press coverage varies from convention to convention and depends on what issues are of particular interest to the pro-life movement in the weeks leading up to the convention.

Sometimes coverage is heavy—such as during an election year when we may have several camera crews. And in other years, the press members who attend represent mostly print or online publications.

Contrary to how the pro-life issue is often portrayed, this year press coverage was fair and balanced with reporters accurately portraying both the pro-life movement and our issues. Most but not all of the reporters covering the convention were from friendly outlets, but it was still a nice change to see our issue covered without hostility.

This makes abortion groups particularly unhappy: fair and balanced coverage will never do. They pressure news reporters to report the pro-abortion viewpoint exclusively.

Take groups such as National Pro-Choice America. NARAL will settle for nothing less than favorable light and abortion stories that show abortion in a favorable light and abortion supporters are the heroes. To them, neutral coverage of the other side—us—is bad coverage.

Consider a report released on June 15th in which NARAL lamented the print media’s abortion coverage in the U.S. With a report that purportedly took a “deep dive” (only 20 pages long, BTW) they suggested four ways of “changing the conversation”—aka turn already favorably coverage into even more favorable coverage.

They point out that abortion is largely covered as a political and legislative issue, not a “health issue,” their preferred angle. Their suggestion to “fix” this issue is to have reporters talk to “experts” in the field of abortion.

Of course, “experts” to them means abortionists and those who advocate on behalf of abortion. They also suggest that reporters speak to “people who’ve experienced pregnancy or abortion”—by this they mean speaking to women who have had abortions.

They conveniently ignore the many women and men who make up the pro-life movement who have experienced difficult or life-threatening pregnancies or who have had abortions. NARAL’s position is that only individuals who speak favorably about abortion after having one have the “lived experience” that reporters should turn to.

NARAL also suggests that reporters should note that “Americans support… maintaining Roe.” As we have pointed out many times, this statement is false and based on faulty polling data where pollsters assume the average American understands the scope of Roe.

A recent poll on abortion conducted by the Associated Press (AP) shows that support for abortion after the first trimester drops significantly. In a World Magazine article written shortly after AP released its poll results, NRLC’s Executive Director David N. O’Steen, Ph.D. made this observation: “[The poll] produced results that most people are not aware of: There has never been majority support for what Roe v. Wade and Doe v. Bolton actually did.”

One other way NARAL suggests that reporters can change their stories to be even more biased in favor of abortion is to “Add context and intentional clarification around charged rhetoric”—and they don’t mean adding clarification to vague pro-abortion rhetoric. They assert that examples of “inflammatory” pro-life rhetoric include: heartbeat bill, infanticide, born alive, partial-birth abortion, abortion industry/lobby, abortion on demand, abortionist, crisis pregnancy center/women’s health center, late-term abortion, unborn child/preborn child, pro-abortion, dismemberment abortion, chemical abortion, and DIY abortions.

Not surprisingly, we often see reporters go to extremes to accommodate pro-abortion rhetoric and arguments, but this is never enough for groups such as NARAL. Pro-abortion groups use euphemisms, dodge questions that would require them to admit that the unborn child is a living human being, and will even outright lie—especially about who makes up the pro-life movement—if it furthers their goals.

NARAL’s “deep dive” on media bias would be laughable if they were ineffective and with little influence. Their report is just another way for them to forward an agenda that encourages reporters to use the language and sentence construction that favors abortion. All of this is part of a campaign to promote NARAL’s goal of having the mainstream media report the “facts” as they see them.
Counteracting the Abortion Pill: One Life at a Time

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

Editor’s note. Dr. O’Bannon was joined at a General Session at NRLC Convention 2021 by Ingrid Duran, NRL Director of State Legislation, and Matthew Harrison, a pioneer of the Abortion Pill Reversal process which has already saved over 2,000 babies. Dr. O’Bannon’s presentation included slides.

Good afternoon! I am here to give you the Statistical & Background Portion of our discussion. This is a good news/bad news story, and I’ve been tasked with giving you the background, the bad.

Are chemical [“medication”] abortions Safe and Effective?

*Holly Patterson had just turned 18 and was working to earn money for college. The first time her father heard that she was pregnant and had taken the abortion pill was when he was called to the hospital and found her hooked up to a ventilator. She died later that day when a rare infection overwhelmed her body.

*Orianne Shevin was a 34 year old attorney, a mother of two. The same rare infection that killed Holly Patterson two years before took Shevin’s life in June of 2005, shortly after she had taken the same medication.

*Rebecca Tell Berg, a 16 year old Swedish teen, collapsed and bled to death in her boyfriend’s shower after receiving the abortion pill at her local hospital.

*Manon Jones, another teenager from Britain who took the abortion pill, died on a gurney in a hospital hallway in Bristol, England, waiting for a transfusion.

*Brenda Vise, a pharmaceutical representative from Chattanooga, TN, died when an ectopic pregnancy missed by the abortion clinic ultrasound ruptured. Staff at the clinic thought she was just experiencing the normal cramps and bleeding that accompany a standard chemical abortion.

Those are just a few of the names of the women who died or suffered complications at the hands of this abortion pill that they tell us is “safe and effective.”

“Adverse Events”

A 2018 document from the U.S. Food and Drug Administration (or the FDA) tells that there have been at least 24 known deaths associated with use of the abortion pill.

Also note that there were nearly 100 ectopic pregnancies like Brenda Vise’s. RU-486, or mifepristone, doesn’t work in circumstances of ectopic pregnancy.

And that document also tells that thousands of others have faced significant, potentially deadly “adverse events” or complications similar to the ones encountered here — infections, hemorrhages, rupturing ectopic pregnancies, and more.

As troubling as these statistics are, there is reason to believe they may be just the tip of the iceberg.

Chemical abortions are normally a multi-drug, multi-step process taking several days to complete.

In their first encounter, women are screened for potentially serious conditions or allergies, counseled about how to use the pills and risks associated with the procedure, and only then are they to be given the drugs. They are supposed to only the first drug, mifepristone, right away.

This starts the abortion process, shutting down the baby’s life support system, depriving the unborn child of the essential nutrients needed to survive.

The powerful cramps and sometimes torrential bleeding needed to force the child out of the womb don’t typically start until a couple of days later when the prostaglandin misoprostol – the second drug of the process — is taken.

Whether she started that abortion back at the clinic or after she received those pills in the mail, either way this means that she is now days past and possibly miles away from any clinic when the abortion starts in earnest and the most severe reactions kick in. She may have no interest in further contact with the folks who sold her the pills.

She could call and try to return to the clinic where they came from, where they may give her more pills to begin the cramping and bleeding all over again, or maybe they’ll offer to do a surgical abortion. Many women will simply decide to visit their own personal doctor or opt for the nearest ER, where she knows that they should be equipped to handle cases that might be beyond the clinic’s capabilities.

Several abortion pill advocates have advised her that she need not tell the ER staff that she has taken the pill, that they cannot tell the difference between a miscarriage and a “medical abortion,” so she can keep this secret.

If so, information on any complications, or even of a patient’s death, may never be reported to manufacturer or to the FDA, giving a false impression of the drug’s safety.

New rules requiring only the reporting of patient deaths – or should I say, “known” patient
Democrats seek to destroy 40 years of bi-partisan support against taxpayer funded abortion

The HHS bill also does not include the Weldon Amendment, which has been in place since 2005 and prohibits denying federal funding to entities that do not want to cover or provide abortion services. The legislation now goes to the full Appropriations Committee for a markup and eventual vote.

On Thursday July 15th, the full Appropriations committee will work on the bill. While pro-life members of Congress are expected to object, they are outnumbered on the Democrat-controlled committee.

The House needs only a simple majority to advance the appropriations package. However, the 60-vote threshold for passing spending bills in the Senate means that the fight to save Hyde and prevent taxpayer-funded abortion will depend on a great deal on pro-life senators holding firm against voting for any final appropriations package that doesn’t contain the pro-life language.

September 30th is the deadline for funding the government, at which point a stopgap measure would be necessary to keep the government open.

Hyde Amendment background
After Roe v. Wade was handed down in 1973, various federal health programs, including Medicaid, simply started paying for elective abortions. By 1976, the federal Medicaid program was paying for about 300,000 elective abortions annually, and the number was escalating rapidly.

That is why it was necessary for Congressman Henry Hyde (R-Ill.) to offer, beginning in 1976, his limitation amendment to the annual Health and Human Services appropriations bill. The Hyde Amendment prohibits the use of funds that flow through that annual appropriations bill from being used for abortions. In a 1980 ruling (Harris v. McRae), the U.S. Supreme Court ruled, 5-4, that the Hyde Amendment did not contradict Roe v. Wade.

In the years after, the Hyde Amendment was attached to Labor-Health and Human Services appropriations. The remaining appropriations bills, as well as other government appropriation measures, were brought into line with this life-saving policy.

National Right to Life believes that the Hyde Amendment has proven itself to be the greatest domestic abortion-reduction measure ever enacted by Congress, saving an estimated 2.4 million American lives.

Additionally, a majority of Americans have consistently opposed taxpayer funding of abortion.

There is abundant empirical evidence that where government funding for abortion is not available under Medicaid or the state equivalent program, at least one-fourth of the Medicaid-eligible women carry their babies to term, who would otherwise procure federally-funded abortions. Some pro-abortion advocacy groups have claimed that the abortion-reduction effect is substantially greater—one-in-three, or even 50 percent.

More information can be found here: www.nrlc.org/hyde.

American Tax Payers should not be forced to pay for abortions!

"The Hyde Amendment doesn't 'target' anybody. The Hyde Amendment protects people."

Michael New, Ph.D.
“We are better than this”–pro-life MPs tear into failed pro-abortion amendment sunk by a “Tsunami of opposition”

By SPUC—the Society for the Protection of Unborn Children

July 5th was one of celebration for pro-life supporters, as Diana Johnson’s extreme abortion amendment was not added to the Police, Crime, Sentencing and Courts Bill.

After fierce opposition in and outside of Parliament, neither her amendment, New Clause 55, which would have decriminalised abortion up to birth, nor that of her Labour colleague Rupa Huq, on introducing buffer zones, were selected by vote by the Speaker.

Rattled by the strength of opposition

Diana Johnson, who was clearly taken aback by the level of public opposition to her proposed law change, began the debate by insisting that her amendment was only a “probing” one, to hear the view of Government. She accused opponents of spreading “much misinformation”, and said, “The behaviour of some hon. Members and national organisations, particularly on social media, is not helpful to the proper scrutiny and debate in this place of serious issues.”

“Changing the law means changing regulations”

Ms. Johnson insisted that decriminalising abortion would not mean deregulation. However, as Bob Blackman MP pointed out,

“Changing the law means changing regulations. The central and implacable legal fact of new clause 55 is that repealing the relevant sections of the Offences Against the Person Act 1861, and relevant offences under the Infant Life (Preservation) Act 1929, will immediately undo all the safeguards provided by the Abortion Act 1967…new clause 55 would sweep away all current legal safeguards and protections, not only for the unborn child, but many that protect women. The 1967 Act would, in effect, be void, leaving England and Wales with one of the most extreme abortion laws in the world.”

“No place in a compassionate, civilised and humane society”

No MP fully supported Ms Johnson’s proposal, and many pro-life MPs spoke out against it. Fiona Bruce MP said

“The proposals are shocking; a viable human being could have his or her life ended up to the point of birth, with no one held accountable, and yet a day later similar actions against a child outside the womb would constitute murder. If, as has happened, the abortion procedure goes wrong, what then? Is the child to be left alone, crying and uncomforted, until it breathes its last? If new clause 55 were put to a vote, I am confident that it would be soundly defeated.”

She concluded

“No clause 55 has no place in a compassionate, civilised and humane society. If, as I now understand, the proposers tabled it as a probing amendment, then I hope, given the strength of opposition that has gathered in just a few days within and outside this House, they will never contemplate reintroducing it. We are better than this.”

“Tsunami of opposition”

Many MPs highlighted how much public opposition there was to New Clause 55. Ms Bruce said: “Our inboxes have been flooded with calls to oppose new clause 55. I have had over 150 constituents email urging me to vote against new clause 55—not one constituent has asked me to support it.”

Bob Blackman said he had “received more emails and calls about new clause 55 than I have about any other measure since I was elected to the House 11 years ago” while Steve Brine MP spoke of a “tsunami” of responses.

Voice for the Voiceless

Pro-life MPs also spoke up for the rights of the unborn baby. Sally-Ann Hart, Conservative MP for Hastings and Rye, said:

“Abortion would be available on demand for any reason. Evidence shows that after a few weeks, unborn babies are sentient beings in the womb. Who gives them a voice? We should ask ourselves what kind of a society we are that we would condone that.”

Danny Kruger, MP for Devizes, summed up the horror of abortion: “It says a very, very terrible thing about the value that we place on an unborn life

See “Tsunami,” page 29
Gov. Edwards Signs HB 578, Offering Hope to Women Who Regret Their Chemical Abortion

On July 2, Gov. John Bel Edwards announced that he has signed HB 578, the Abortion Pill Reversal Disclosure Act, giving every woman the right to change her mind after her chemical abortion and possibly save her baby.

The bill was authored by Rep. Beryl Amedee (R-Houma) and carried in the Senate by Sen. Beth Mizell (R-Franklinton). The bill easily passed both chambers before going to the governor’s desk.

The bill requires that when a physician or agent thereof administers mifepristone (the first abortion pill in the chemical/medical abortion process) to a pregnant woman, he must provide a disclosure statement letting her know that if, after taking the first pill she regrets the abortion, she should consult a physician or healthcare provider immediately to determine if there are options available to help sustain her pregnancy.

The statement can be stapled to the bag, envelope, or other package that contains misoprostol (the second abortion pill) for the pregnant woman to take at home or attached to the patient’s discharge instructions if the prescription for misoprostol is sent directly to a pharmacy.

Benjamin Clapper, Executive Director of Louisiana Right to Life, said: “We are excited that the Abortion Pill Reversal Disclosure Act is now law. Every woman receiving a chemical abortion will now know that she can talk to a doctor if she regrets her abortion to see if options are available to help her continue the pregnancy and save her baby. More than 2,000 babies have been saved across America thanks to the Abortion Pill Reversal protocol, and we expect even more babies to be born thanks to this legislation.”

“We are better than this”—pro-life MPs tear into failed pro-abortion amendment sunk by a “Tsunami of opposition”

From page 28

if we simply say that it should be determined by whether or not the mother would like to keep it—by whether that baby is wanted or not.”

In the end, the Home Office Minister, Victoria Atkins, did not even mention the abortion amendments in her summing up, and they were not selected by the Speaker for separate votes, meaning they fell.

“We will not tolerate such extreme and barbaric practices” Writing to supporters, SPUC’s director of Campaigns Antonia Tully, said: “Thank you so much to all of you who contacted your MP at very short notice to oppose Diana Johnson’s deadly proposal. Many MPs have received the message loud and clear that we will not tolerate such extreme and barbaric practices. “We hope that being defeated again will prove to Diana Johnson that there is no appetite for such extreme abortion legislation in this country. But if she or another pro-abortion MP do try to decriminalise abortion again we will be ready to take action to protect unborn babies and their mothers.”
Computer Program Developed in Canada to Predict When Seniors Have 6 Months to Live

By Wesley J. Smith

As if we needed further evidence that medicine is growing increasingly impersonal, the Canadian Medical Association Journal has published a study that claims a computer program can predict when seniors have six months to live. From the Global News story:

Amid a lack of proper support for Canadians receiving home-based support towards the end of their lives, a new risk calculator is helping predict how long seniors have left to live.

The Risk Evaluation for Support: Predictions for Elder-Life in the Community Tool — dubbed ‘RESPECT’ for short — can predict death within six months, and was developed using data from more than 491,000 community-dwelling adults aged at least 50 years who used home care between 2007 and 2013.

Always with the acronyms to hide utilitarian protocols and procedures. Euthanasia in Canada is called MAID (medical assistance in dying), and now, RESPECT.

Good grief.

“The RESPECT calculator allows families and their loved ones to plan,” said Dr. Amy Hsu, investigator at the Bruyère Research Institute and lead author of the study.

“For example, it can help an adult [or] child plan when to take a leave of absence from work to be with a parent or decide when to take the last family vacation together.”

Or it could be used to restrict care and/or push euthanasia. As one Canadian bioethicist noted: If the calculator would ever be introduced to Canada’s healthcare system, Bowman believes that it would be interfaced with the country’s medical assistance in dying (MAiD), and could possibly shape the attitude of palliative care and end of life decisions.

“It will also shape the attitude of health care workers and it also raises a deeper question of who will interface with the broader question of what types of life are worth living and who decides, which is profoundly important stuff,” he said.

Ya’ think?

People don’t die by the numbers. Much depends on the kind of care they receive, their mental states, and individual differences that can be immeasurable. Even the study’s authors note a very big problem.

As with many prediction models, RESPECT is less well-calibrated at the extremes of the distribution. In particular, we found that RESPECT overpredicted the mortality risk of patients in our top 3 risk bins.

Oops.

The idea that crucial and intimate decisions about patient care could soon be driven by a computer-modeling system — rather than individual assessments — is very alarming. And it will often be wrong.

I know of several patients given six months or less to live who got kicked out of hospice because their health improved unexpectedly. This includes the humorist Art Buchwald, who left hospice when he didn’t die from kidney failure and lived long enough to write his last book.

But then, with the quality-of-life ethic taking hold in medicine throughout the West, a “follow the science!” approach would make it much easier for clinicians, socialized-medicine bean counters, and family to abandon frail patients to comfort-care-only regimens — or worse — and still get a good night’s sleep.

Editor’s note. Wesley’s great columns appeared at National Review Online and are reposted with his permission.
The indescribable joy of meeting someone whose life a pro-lifer helped save

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

If you would like something uplifting to brighten your day, you need to read this.

This true story begins in a pizza shop. It’s a favorite destination for the staff of Real Alternatives, which administers pregnancy and parenting support programs which assist pregnant women in their time of need.

In Pennsylvania alone, the organization has helped more than 320,000 women and their families since the Keystone State’s Alternatives to Abortion program began 25 years ago.

The staff has been coming to the restaurant for years but, on this particular day, a gentleman there asked Real Alternatives President and CEO Kevin Bagatta what he did for a living.

Kevin explained how Real Alternatives aids pregnant women. The gentleman responded that his wife had been helped by Morning Star Pregnancy Services, one of Real Alternatives’ service providers.

And then it happened. A young man served Kevin his slice of pizza. The young man who had once been a preborn baby in his mother’s womb. The unrepeatable, unique individual whose life had been supported and validated, thanks to a caring counselor at a Real Alternatives center. Eighteen years after the challenging pregnancy, Kevin met the man whose life he had helped save.

Those who labor in the pro-life movement do so on behalf of children they may never have a chance to see face-to-face, let alone speak with. It is a privilege and an honor to advocate for these precious babies.

But every once in a while, a pro-life advocate has an opportunity to meet a person whose life was saved by his or her efforts. And the unbridled joy from those meetings is indescribable.

To those who heroically devote their lives to the pro-life movement, I say “Bravo!” Your labor of love is not in vain.

When you least expect it, someone may tap you on the shoulder and thank you for helping to save his or her life. And, in that moment, you will experience first-hand the power of your love.

101 ways to avoid answering, “Is a 15 week old unborn baby a human being?”

From page 2

You heard echoes of that evasive answer when, asking the same question, MRC’s Gabriel Hayes conducted a man on the street interview with a number of people in Old Town Alexandria, just outside Washington, D.C.

To be clear, many said, “yes,” or “without a doubt” or “absolutely. that’s a human being.”

But others said “No” because it’s a “fetus.” Asked by Hays “what’s the big difference for you?” this man had no response.

Another woman said the question is a “nebulous thing… it’s not a black and white thing…It’s not a viable human being.”

Another answered.“That’s up to each individual person. …I can’t say what’s good for one person is good for the other.”

But the most illuminating answer was one young woman who responded “Depends.” On what exactly, Hays asks “Does it have heartbeat?” Yes. “How many vital organs?” All of them.

Now what, you wonder?

Hays in a piece he wrote for MRC about his experience made a very important point. “Granted none of this makes the baby any more alive than it was at the moment of conception – where the life processes that will continue throughout its life, directed by the child’s unique DNA, begin.”

It’s amazing, is it not, how evasion remains the coin of the pro-abortion realm? That shown a picture of a 15-week-old unborn baby—as Hays did for the people he interviewed—they switch to viability…how many organs…does it have a heartbeat?

Anything rather than answer the question: is this baby a human being?
Freedom. A cherished word. A sacred right.

The older I get, the more I value freedom and the more I desire others to know true freedom. I desire it particularly for women who find themselves facing an unexpected pregnancy.

Those who do not feel free to choose life. Those who feel coerced by the baby’s father, or parents, or friends.

Those who feel stifled by society’s lingering stigma regarding unplanned pregnancies and adoption.

Those who feel imprisoned by fear of an unknown future.

Those held hostage by an abusive relationship.

And those whose vulnerability is preyed upon and exploited, trapped into ending their own child’s life.

Two-thirds of post-abortive women report feeling explicitly or implicitly forced into abortion.

That is not freedom.

We must set them free.

We must embrace every opportunity to help women be free to choose life.

Free to parent a child or free to lovingly place him for adoption.

Free to pursue their dreams, even in the midst of pregnancy or parenting.

When we empower women, whether through our laws, our words, our material support, or whatever is needed to walk with them on their journey, we offer them true freedom. We give them what they need to make the best choice possible for themselves and their child. That choice can never be death.

I am so grateful that my own family gave me the freedom to choose life when I was just 18 years old.

My mother, relieved that I did not have a terminal illness, assured me we could deal with a baby.

My oldest brother, a new father himself, told me that all babies, at all times, are a blessing.

My youngest brother embraced me and thanked me for not getting an abortion.

Does not every young woman deserve such support so that they have the freedom to choose life?

As we celebrate our many freedoms, let us renew our commitment to giving every human being, without qualification, the freedom to live first and foremost, for without life, no other freedoms can exist.
Pushing, polling, and push polling

By Dave Andrusko

National Right to Life News Today posts many stories about what public opinion polls supposedly reveal about Americans’ views on abortion. Why?

For many reasons, but primarily (a) to reinforce the truth, hidden in plain sight because it is obscured by the major media, that we are much closer to where the public is than are pro-abortionists; and (b) that even when surveys are conducted in good faith—which is assuredly not always the case—the slightest tweak can distort the reality.

Heads up and kudos to Leah Hickman, writing for World Magazine whose Monday’s post last week is subtitled “Survey data reveal the public has nuanced and sometimes uninformed views on life issues.” [wng.org/roundups/pushing-and-polling-on-abortion-162516965]

To her great credit Hickman conducted interviews with Lydia Saad, a veteran analyst for Gallup, and with David N. O’Steen, Ph.D., who is NRLC’s Executive Director and an expert in understanding and explaining survey data.

You’ll be doing yourself a huge favor if you read her story in its entirety. Here are a few important highlights.

Hickman’s jumping off point is the recent AP-NORC poll on abortion about which we’ve written about several times. We emphasized what we called their “top drawer” conclusion: 61% of Americans say abortion should be legal in most or all circumstances in the first trimester of a pregnancy. However, 65% said abortion should usually be illegal in the second trimester, and 80% said that about the third trimester.

The key for the remainder of Hickman’s story follows this: The results, released last month, conflicted with other recent polling on similar issues but affirmed what pro-lifers have long observed about the views of Americans, revealing a nuanced public perspective on the politically polarizing topic.

Why the “conflict”? What is the conflict?

Gallup released data from similar questions last month but with different results. It showed 56 percent of respondents said they would oppose “a ban on abortions after the 18th week of a pregnancy,” which falls within the second trimester. In contrast, 66 percent of respondents in the AP poll said abortion should be illegal in all or most cases during the second trimester, and 81 percent thought it should illegal in the third trimester.

Those results also differed from a similar Gallup poll from 2018, as March for Life president Jeanne Mancini pointed out last week. According to the 2018 results, only 28 percent of respondents said abortion should be generally legal in the second three months of pregnancy and only 13 percent said it should be generally legal in the last trimester.

And here we go, courtesy of Gallup’s Saad:

How can the same public that doesn’t support “second trimester” abortions also oppose “18-week” bans? Lydia Saad, director of U.S. social research at Gallup, said the differences come down to wording. She said the language of a “ban” could be “more onerous to people,” eliciting stronger responses, whereas wording like “generally legal” or “generally illegal” is a little less provocative.

On top of that, Saad added, “We’re not saying ‘trimester.’ We’re saying 18th week. And I don’t know if people know what trimester that refers to.”

That doesn’t mean one set of survey results are invalid, though. “It’s just telling you that people are very sensitive depending on the framework and what are the factors that trigger those feelings,” Saad said.

“Feelings,” “triggers,” “frameworks…” All this interacts with (or is distorted by) a lack of background information to color the way people respond.

“You want to find out how people feel relative to what they’re going to hear from the press or the other side,” O’Steen said. “But you also want to find out how they’re going to feel if the question is framed absolutely accurately.”

Then, perhaps, the most interesting exchange. Saad tells Hickman, “We try to stick very closely to how is the public hearing about this issue from leaders, from the news media.” Hickman writes, “But to O’Steen, that’s just the problem: Many Americans

See “Pushing,” page 50
babies prenatally diagnosed with cleft lip and club foot.

We’ve posted and reposted about Crowter and Lea-Wilson multiple times. As Right to Life UK writes

Ms. Lea-Wilson has spoken frequently about how she was “placed under intense pressure” to have an abortion after a 34-week scan revealed her son had Down’s syndrome.

Ahead of the court case she said: “I have two sons that I love and value equally, but the law does not value them equally. This is wrong and so we want to try and change that...We proclaim that we live in a society that values those with disabilities, that everyone deserves a fair and equal chance at life, regardless of their ability status. This law undermines that narrative, does it really have a place in 2021

Often, a movement for social justice may not take flight until it has a “face.” That is, when attempting to motivate the public to battle an injustice, it can make an enormous difference if someone comes to represent the evil that needs to be overcome.

Heidi Crowter is illustrating the power of a single determined woman. The 25-year-old woman is a tireless advocate for disability rights.

When she helped launch the lawsuit, Crowter told journalists, “At the moment in the UK, babies can be aborted right up to birth if they are considered to be ‘seriously handicapped.’ They include me in that definition of being seriously handicapped – just because I have an extra chromosome. What it says to me is that my life just isn’t as valuable as others, and I don’t think that’s right. I think it’s downright discrimination.”

As hard as it may seem to believe, Crowter is not exaggerating in the least. The UK has some very lax late-late abortion guidelines. As the advocacy group “Don’t Screen Us Out” writes, “Currently in England, Wales and Scotland, there is a general 24-week time limit for abortion, but if the baby has a disability, including Down’s syndrome, cleft lip and club foot, abortion is legal right up to birth.”

Speaking of Don’t Screen Us Out,” Jonah McKeown of the Catholic News Agency (CNA) explains, “The “Don’t Screen Us Out” campaign in the United Kingdom has, for the past four years, been drawing awareness to and seeking to change the UK’s abortion laws, seeking to amend Abortion Act of 1967 so that abortions for non-fatal disabilities are outlawed in the third trimester, which starts around 28 weeks of pregnancy.”

Which, of course, is why pro-abortionists so passionately defend even abortions based on disability, race, or sex. They fear that the United Kingdom’s laissez faire abortion laws would be tightened up ever so slightly—which to them is unthinkable.

As the trial unfolded this week, Crowter told reporters, “This law makes me feel I am better off dead, I know I’m not, but that’s how it makes me feel.” She told supporters

“There is no difference between me and someone who doesn’t have Down’s syndrome, like my nephew. Life is good for people like me and abortion law needs to show that. Everybody is equal, and doctors shouldn’t tell women that they will be sorry if their child is born. They should be supporting them.”

The Guardian’s Haroon Siddique reported

Jason Coppel QC, representing the claimants, told the high court in London on Tuesday that Crowter, who has her own flat, recently got married and has pursued studies up to NVQ level, “has been the subject of abuse because of her disability and believes that the existence of a law allowing abortion up to birth for babies with DS [Down’s syndrome] is a contributory cultural cause of this type of abuse”.

Aidan was diagnosed with Down’s syndrome at 35 weeks’ gestation in 2019 and his mother was repeatedly offered an abortion. “The pressure she was put under, the lack of support offered to her, the guilt she was made to feel for not having undergone screening, the impression conveyed that by going ahead with the pregnancy she would be going against medical advice, the negativity about DS and the fear engendered about having a child with DS all conveyed the message to her that a life with DS was of no value,” said Coppel.

Some 90% of all babies diagnosed with Down syndrome are aborted. And the number of targets can only mount as improved prenatal diagnostic techniques are used more widely.
EU parliament passes non-binding resolution referring to abortion as human right

By Right to Life UK

On Thursday 25 June the European parliament voted in favour of a non-binding parliamentary resolution that refers to abortion as a human right.

The resolution passed by 378 to 255 votes and came on the same day that a referendum in the British Overseas territory of Gibraltar voted to legalise abortion.

The European Parliament Women’s Rights and Gender Equality Committee (FEMM) approved the ‘report on sexual and reproductive rights’ and the draft resolution submitted by Croatian MEP Fred Matić, on 11 May.

The resolution also called on EU member states to recognise access to abortion “in line with international human rights standards”. Matić’s report also criticises the so-called “conscience clause” of many abortion laws, which permits medics to refuse to facilitate abortions, often “on grounds of religion or conscience”. It also ‘urges’ member states to ‘decriminalise abortion, as well as to remove and combat obstacles to legal abortion’, of the resolution.

The centre-right European People’s Party and the European Conservative and Reformists (The ECR Group) offered two alternatives to Matić’s text, both of which said rights to abortion and reproductive services are the responsibility of individual countries to decide on, not the EU.

The ECR group explained that abortion “does not have the status of a human right under international law […] and the case law of the European Court of Human Rights and the Court of Justice of the European Union”.

Spanish MEP Rosa Estarás Ferragut said during the debate a frightening text because it presents abortion as something that is good, something we wish for, something desirable like a type of freedom”.

On 17 June Slovakian MPs passed a resolution affirming to MEPs and MPs in EU countries their stance that “issues concerning health policies and education are in the competence of nation states”.

Maltese group ‘Doctors for Life’ also criticised the report for failing to safeguard conscientious objection, and for interfering with “Member States over the definition and management of their domestic health systems or their national health policy choices”, and represented a “totalitarianism of values”.

They also argued that the report “[…] attempts to introduce the recognition of a “right to abortion”, although no such right exists, nor can it be derived from the Universal Declaration of Human Rights or the Charter of Fundamental Rights of the European Union. On the contrary, since the 1994 Cairo Conference, states have committed themselves to “reduce the recourse to abortion” and to “take appropriate steps to help women avoid abortion”.

They explained how the report intentionally misleads politicians and the public by “repeatedly conflating gender equality and basic human rights with abortion”, adding that “This rationale makes the rejection of abortion equivalent to an unwillingness to grant equality or essential human rights and is a strategy employed repeatedly to compel others to accept such proposals”.

A spokesperson for Right To Life UK, Catherine Robinson said: “The attitude of the MEPs who supported this resolution is abysmal, and mirrors precisely Westminster’s aim in imposing radical abortion laws on Northern Ireland. It is clear that many EU politicians wish to impose abortion on countries such as Poland and Malta, despite the fact that the overwhelming majority of their voters are against such a change. Moreover, it is a blatant attempt to designate abortion as beyond debate, by enshrining it as a fundamental human right that cannot be violated. This is outrageous. Abortion is not a human right, but is in fact the violation of the unborn child’s right to life”. 
The importance of being an “Encourager-in-chief”

By Dave Andrusko

Editor’s note. This was my contribution to a three-person workshop at the 2021 National Right to Life convention workshop titled “Communicate, Convert, and Commit: the art of pro-life persuasion.”

Each year I begin with the same disclaimer: Rai Rojas and Lori Kehoe are superior speakers—funny, energetic, knowledgeable, and inspirational—so I will talk for no more than 10 to 15 minutes. For those who’ve joined us in the workshop over these last five years, you might notice that I am taking a different tact. Let’s see how it works (fingers crossed). Let me address two points.

Number One. How any of us identify ourselves can often be very revealing. Off the top of my head, I am a dad, a husband, a grandfather, a brother, a father-in-law, a cousin, an adult Sunday school teacher, and an editor who also writes a lot—hundred and hundreds of thousands of word since 1981. But the one I like to think is true—and the description that I hope and pray extends beyond what I do at National Right to Life—is “Encourager in Chief.”

What do I mean, why do I begin this way, and what could that possibly have to do with “Communicate, Convert, and Commit”? Glad you asked. I’m going to talk about us—pro-lifers—not the people outside whom we are trying to Communicate, Convert, and Commit. We also need some tender loving care, don’t you think?

Whether you’ve toiled in the pro-life vineyards—as my wife Lisa and I have for over 40 years—or, like the workers in Jesus’ parable, you joined late in the afternoon, you are indispensable and deserve to be equally rewarded. In fact, because of who you are and/or because of your personal experiences and your talents, you may be the one who brings in a bumper crop of new converts into our Movement.

You need to know that. We all need to know that. Just as there are no insignificant people—each of us is God’s handiwork, unique and irreplaceable—there is no pro-lifer whose contributions is not genuinely significant. When times are tough—as for example in the still hard to believe elevation of the likes of President Biden and Vice President Harris—you and I need to shore one another up. We are in this together and we know—however dark it may be some days—that the ultimate victory has already been won.

In his famous 1965 Commencement Address at Oberlin College, the Rev. Dr. Martin Luther King Jr. said, “Yes, we shall overcome because the arc of the moral universe is long, but it bends toward justice.” And justice is not obliterating the defenseless because they are powerless to stop us.

In his very next sentence, Dr. King added something that is not remembered as well, but is hugely important: “We shall overcome because Thomas Carlyle is right: ‘No lie can live forever.’”

That’s point #1. You are part of the greatest Movement for Social Justice of our time and there is nothing those who toil in darkness can do to change that. I believe the primary reason they hate us so is not that we pass laws but rather because we hold up a mirror, forcing them to confront their own unforgiving consciences.

Point #2. Perhaps the fundamental irony (and there are many) of the major media’s absurd caricatures of our Movement is that they think, to borrow from Max Lucado, we are most concerned “in condemning exteriors”—in acting (horror of horrors) “judgmental.”

But how could that be when our Movement is filled with Pauls who were once Sauls. That transformation speaks volumes to the uncommitted. And nobody—and I do mean nobody—has a more powerful testimony than a woman who has gone through an abortion and whose soul was ravaged in the process. I would add that once his eyes are open, the man who did nothing—or worse—to help the woman in his life face a crisis pregnancy—exists in his own special hell.

And it’s hard to act high and mighty when there so many women (and many, many men) who can honestly say, “There...
An article that appeared last week in the British publication, *The Guardian* titled, “Progressive groups urge US media to ‘prioritize accuracy’ in culture war topics” led me to something I had missed: a preposterously inaccurate, turning truth on its head report, funded by NARAL Pro-Choice America.

*The Guardian* story, written by Jessica Glenza, need not detain us long. It's a puff piece whose purpose is to give attention to a coalition of “progressive” groups that supported the laughable findings of the NARAL report: that the major print media are—unintentionally—in cahoots with “right wing” groups (which, of course, in their political galaxy includes pro-lifers).

What is the danger and why do they need to be corrected? Because they risk “amplifying misinformation” by using unapproved “rhetoric.”

All this apparently grew out of the aforementioned NARAL report which found, according to Glenza, that “just 11% of news reports about abortion featured a real woman’s story.”

So how to “counter the volume of misleading statements” from the likes of, say, National Right to Life? Adhere to four “recommendations to help close this dichotomy between coverage and the lived experiences of those closest to the issue.”

“With the Supreme Court gearing up to hear a direct challenge to Roe, we must ensure that the media has the tools necessary to accurately cover this case, and the issue of reproductive freedom in top-tier print outlets excludes the voices of medical experts and pregnant people,” said Kristin Ford, NARAL Pro-Choice America’s acting vice-president of communications and research, about the landmark 1973 case *Roe v Wade*.

The “tools,” of course, will be provided by that wellspring of unbiased analysis, NARAL Pro-Choice America.

So I clicked on the link and, presto chango, I was reading a press release about “Accurate and Unbiased? A deep dive into how the media covers abortion in the US.”

Just reading the title makes you laugh. The implication is clear: pro-abortionists are getting the short end of the stick from the “mainstream media” which is peopled with one pro-lifer for every 99 pro-abortionists. (By the way, how deep a dive can it be when the report is just 20 pages long?)

The press release’s opening two paragraphs tell all:

“A new media analysis released by NARAL Pro-Choice America found that coverage of abortion overwhelmingly tracks abortion litigation and legislation, and parrots disinformation-based rhetoric, often using medically inaccurate or inflammatory language such as ‘heartbeat’ bill without context or explanation.”

The analysis, which was conducted by Global Strategy Group, assessed who writes about abortion, what drives abortion coverage, how disinformation-based, anti-choice rhetoric is often adopted as seemingly neutral or descriptive terminology, and what types of voices are included in coverage.

Talk about ingrates. Most media coverage reads as if it came hot off the presses of NARAL and Planned Parenthood and the Democrat party. They gripe that too much coverage is devoted to politics and legislation and litigation, short-shrifting the real experts: “pregnant people” (aka pregnant women) and their “doctors.” Abortion is, in their unbiased mind, first and foremost a “health issue.”

Not only that, NARAL complains (they complain a lot in this report) that not enough attention is paid to “majority support for *Roe v. Wade*” and waaaay too much attention is given to “charged rhetoric from anti-choice advocates… oftentimes with minimal context.” By that they mean, reporters should challenge every syllable that comes from a pro-life source instead of being content with just disputing every word.

There is an old phrase but a good one, about not biting the hand that feeds you. It is simply difficult to imagine how “top-tier print outlets” could be any more slavishly pro-abortion.

But NARAL is smart enough to know there is nothing they could possibly say that would deter “top-tier print outlets” from “the swift completion of their appointed rounds”—shilling for the Abortion Industry.
Missouri AG asks Supreme Court to uphold 2019 law banning “discrimination-based” abortions

By Dave Andrusko

On June 9, after a three-judge panel of the 8th Circuit Court of Appeals upheld U.S. District Judge Howard F. Sachs’s injunction of “Missouri Stands For the Unborn Act,” pro-life Missouri Attorney General Eric Schmitt immediately vowed to appeal.

On July 1, Schmitt’s office asked the Supreme Court to uphold the 2019 law which bans abortions when the sole reason is a prenatal diagnosis of Down syndrome and also limits most abortions after eight, 14, 18, and 20 weeks of gestation.

In a statement accompanying his request for a writ of certiorari in Schmitt v. Reproductive Health Services of the St. Louis Region, Schmidt said “My son Stephen [who has a rare genetic condition called tuberous sclerosis] has shown me the inherent beauty in life, and he brings immense joy and love to his loved ones and those around him. Since taking office, I've fought to protect all life, including the unborn. A pre-natal diagnosis of Down syndrome should not be a death sentence.”

According to the Attorney General’s office, the Petition presents three questions for the Supreme Court’s review:

• Whether Missouri’s restriction on abortions performed solely because the unborn child may have Down syndrome is categorically invalid under Casey and Roe v. Wade, 410 U.S. 113 (1973), or whether it is a valid, reasonable regulation of abortion that seeks to prevent the elimination of children with Down syndrome through eugenic abortion?

• Whether Missouri’s restrictions on abortions performed after eight, fourteen, eighteen, and twenty weeks’ gestational age are categorically invalid, or whether they are valid, reasonable regulations of abortion that advance important state interests?

• Whether the “penumbral” right to abortion recognized in Roe v. Wade, 410 U.S. 113 (1973), and partially reaffirmed in Planned Parenthood of Southeastern Pennsylvania v. Casey, 505 U.S. 833 (1992), should be overruled?

As NRL News Today reported when the 8th Circuit panel voted to uphold Judge Sach’s injunction, a number of states passed laws against “discrimination-based” abortions, including those based solely on a prenatal diagnosis of Down syndrome, during the 2021 legislative session.

“Governors in Arizona and South Dakota recently signed such bills into law,” Jim Salter of the Associated Press reported. “Meanwhile, a federal appellate court said Ohio could begin to implement a 2017 law that has been on hold.

During the September 24 hearing, which took place via videoconferencing, Missouri State Solicitor General John Sauer told the panel, “A radical reduction in the number of the class of people with Down syndrome would inflict an incalculable loss in our society.”

Sauer also told Circuit Judges Jane Kelly, Roger Wollman, and David Stras, “People with Down syndrome are literally one generation away from complete elimination.”

Planned Parenthood attorney Claudia Hammerman maintained that HB 126 is incompatible with the 1992 Casey v. Planned Parenthood decision. Judge Kelly, who wrote the opinion and who was joined by Judge Wollman, “agreed with Planned Parenthood that the Down syndrome provision is a ban rather than a restriction,” according to Joe Harris of Courthouse News.

Judge David Stras, who concurred in part and dissented in part, began by noting that A preliminary injunction is hard to get, all the more so when the target is a democratically enacted state law. The court makes it easy, however, by relaxing the rules to let Reproductive Health Services have one, despite its failure to show a “threat of irreparable harm” from Missouri’s Down Syndrome Provision. I would apply the usual rules and vacate the injunction.

Later Judge Stras elaborates on the key requirement of the law — that the abortionist has “knowledge that a Down Syndrome diagnosis is the sole reason for an abortion.” [Dr. Colleen McNicholas is a Planned Parenthood abortionist who testified against the law.]

Dr. McNicholas all but admits in her declaration that she has no idea how many women, if any, seek an abortion solely for that reason. Consider her words carefully. In addition to never identifying any women who sought abortions “solely because of” a Down Syndrome diagnosis, she goes on to say that “there is

See “Missouri,” page 50
The enduring need for real regulation of Human Embryo Experiments

By David Prentice, Ph.D.

As we expected, the International Society for Stem Cell Research (ISSCR) issued its revised guidelines on stem cells and embryo experiments at the end of May 2021, and as expected, the ISSCR recommendations are rife with proposed experiments on young human beings.

The new guidelines discard the 14-day limit on human embryo experiments in favor of no limits whatsoever, and they allow virtually unrestricted manufacture of human-animal chimeras of any type, as well as creation of genetically altered human embryos and lab constructed human embryo “models.” Very little is left in the category of “currently not permitted.”

The ISSCR overreach is telling when bioethicists with widely-divergent views on embryo research ethics label the new recommendation for no limits a “grave omission,” and when well-known supporters of human-embryo research say they are “troubled by the recommendations,” especially removal of the 14-day limit.

The ISSCR’s self-serving guidelines even reminded a senior scientist of a letter written long ago, with currently-applicable sage advice about experiments: “If it is dangerous, or wrong, or both, and if it doesn’t need to be done, we just ought not to do it.”

While ISSCR advocates for human embryo exploitation, we do need to remember that this is a self-appointed group of scientists, acting without public input, proposing self-regulation for other scientists. Of course, the real purpose of these guidelines is that they are trying to fend off any government regulations or public outcry that could hinder their research desires. But as the letter writer mentioned above notes: “the right experiment to do should not be determined by scientists alone.”

In the United States, a key federal law has provided a barrier against a great deal of human embryo exploitation: the Dickey-Wicker amendment.

A human embryo is also defined, to include “any organism, not protected as a human subject under 45 CFR 46…that is derived by fertilization, parthenogenesis, cloning, or any other means from one or more human gametes or human diploid cells.”

In short: No federal funds for creating, destroying or risking harm to human embryos for research experiments.

The language comparing research on embryos to “research on fetuses” and defining embryos as humans “not protected as a human subject under 45 CFR 46” comes from the fact that federal regulations define, and protect against research on, young human beings in the womb, but do not protect younger human beings who are not in the womb. This despite the fact that the beginnings of human life and embryological stages of human development (Carnegie Stages) have been accepted since 1942 and reaffirmed by leading embryologists since then.

Hence the great need for the Dickey-Wicker amendment, to protect these very young and most vulnerable humans. Moreover, the language anticipated the ever-increasing ways to create human embryos using laboratory techniques (more on this below.)

The Dickey-Wicker amendment was originally put in place in response to proposals to allow human embryo experimentation. The story sounds hauntingly familiar to the situation today. The NIH Human Embryo Research Panel (HERP) was appointed in 1994 (in lieu of a formal Ethics Advisory Board) supposedly to debate the ethics of human embryo research.

But at the first meeting, the panel chairman announced that the panel’s mission was not to debate embryo research but to recommend types of experiments for federal funding. He went on to tell the group that anyone who disagreed with that goal had been appointed by mistake and should resign. The biased panel proceeded to lay out a series of recommendations for taxpayer funding of various experiments using human embryos, including creation of human embryos specifically for destructive research. But while praised by scientists and administrators at NIH, even President Clinton rejected the proposals from the panel. Passage of the Dickey-Wicker...
Loving unborn babies came so naturally to this toddler

*We are all born pro-life*

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

Her spirited bounce down the path to our display got my attention. Her wispy curls pulled into a ponytail and ample rosy cheeks melted my heart. As she got closer to us and saw the treasure that awaited, her big brown eyes twinkled. I was completely enchanted. She picked up the fetal model and her delight became palpable. She knew this truth even before her mother spoke a word. Life is precious. It is a gift to be celebrated and cherished. And protected. She needed no prompting. Her affection was genuine and unlimited. Loving this baby came so naturally, even to a toddler.

Cradling the 30-week “fetus” in her arms, she listened as her mother softly whispered that this is what mommies grow in their bellies, a beautiful precious human life.

She’s only three years old, but she instinctively knows a truth that many adults and our world at large have long forgotten. She’s the very last person with whom I interacted at Creation Music Fest, where we had shown the humanity of the preborn to thousands of people with our fetal model display, witnessing their fascination with life within the womb and their sadness at how disposable it has become. Our table was steadily busy for three days, and we had many productive and informative exchanges with passersby.

This sweet little girl was the last to visit before we closed up. How perfectly profound, as she left me with a beautiful truth to take home and ponder.

We are all born pro-life.

Show a small child a fetal model or a picture of an ultrasound and ask him or her what it is. Do the same with an older child. They readily identify a baby, a living human being in its earliest form of development.

It is so clearly self-evident to those who have not had the world un-teach this to them. It is so clearly self-evident because it is nature’s beautiful plan, and the most innocent among us honor what is natural.

Abortion is the most unnatural thing in the world. It violates what all of us, especially children, know to be right, true, and good.

We are all born pro-life, but some allow themselves to be corrupted by a confused world, becoming defenders and promoters of abortion. I think of this little girl and wonder how did these people get so very far away from a self-evident truth, one that is written on our very hearts?

Is it doubt, fear, desperation, misguided compassion, greed, rationalization, de-humanization or a combination of these that steal this basic truth from them? I don’t know the answer. What I do know is life begins at conception. Life is precious. Life is to be treated with dignity and protected from harm.

Even a 3 year old knows that. May she never allow the world to un-teach her that fundamental truth.
If not for love…and a helping hand…

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

I gazed at the photo, overwhelmed by the sight.

It was a picture of a precious newborn baby girl—a girl who could easily have not been here, were it not for a woman who was willing to reach out to a pregnant woman with love, compassion, and hope.

The girl’s mother had scheduled an abortion. Her baby girl is alive because the appointment was never kept. Why? The woman had changed her mind. Why? She’d been empowered to make a life-affirming decision by the support offered by another mother at a crucial juncture.

The photo captured the baby girl sleeping peacefully, unaware of the drama that led to her birth.

We often focus—and rightly so—on the number of abortions which take place in a given year. Nearly 900,000 unborn babies in the U.S. were not as fortunate as this little one. But today I celebrate the lives that have been saved by courageous mothers who stared death in the face, said, “Not today,” and turned the other way. I salute these nameless moms who have braved the uncertainty represented by crisis and who gave birth in an act of personal and family triumph.

I commend the people who have accompanied them along their journey, whether they be husbands or boyfriends, mothers or siblings, or strangers who become fast friends.

I applaud the pregnancy resource centers which supply the diapers and day care referrals, formula and friendship, to make the days brighter, the path easier.

Whenever a new child enters the world, it is cause for celebration. As the poet Carl Sandburg once wrote, “A baby is God’s opinion that life should go on.”

Today, two days before Independence Day, let us think of mothers and babies and those who stand by them as the model of mutual interdependence. I am grateful for those who work tirelessly to ensure that mothers and their babies have a chance for their own photo shoots, with a lifetime of grace-filled times to follow.

The importance of being an “Encourager-in-chief”

From page 36

The 1963 assassination of President John F. Kennedy made her husband Chic take another look at his career as a successful businessman. A year later, at age 40, Chic entered the seminary.

Jean and their three children followed with what seemed like a “healthy bank account” which was soon depleted by the many hospital stays and medicines needed to treat their oldest daughter’s severe rheumatoid arthritis. Some days they subsisted on oatmeal, some days on nothing. But thanks to God’s providence and the help of local churches, they made it through Chic’s four years in seminary.

No sooner were they ready to begin their “service as full-time church workers” in Pennsylvania than Jean found herself pregnant at 40.

“This fourth child wasn’t wanted,” Jean wrote in a Lutheran Woman’s Quarterly essay, “so the obvious solution was to abort the pregnancy. Our course, the human mind is never more clever or resourceful than when it is engaged in self-justification.”

But this was prior to Roe v. Wade and she could not find a doctor to “terminate” her pregnancy. In her essay, Jean went on to explain how she joined an activist group “seeking to promote abortion-on-demand.”

I spent six months studying the abortion issue from numerous perspectives in an attempt to find confirmation that abortion, as its advocates claimed, helps women, doesn’t take a human life, and is a choice God allows us to make. I came out the other end of that exhaustive research with a changed heart and mind and with a commitment to be a voice in defense of the unseen, unheard, unborn child.

In 1969 Donn was born, the same Donn who would be riding with them in 1979 when police tracked them down to tell them their older son Dean had been murdered...in Dallas.

Jean wrote

He had just completed four years in the Air Force during the Vietnam War and was beginning a management training program. Dean, our first son, our planned son, our wanted son, dead, while seated between us bringing great comfort was Donn, our second son, our unplanned son, our unwanted son, whom I had wanted dead.

Over the many decades that followed her pro-life rebirth, Jean wrote and testified and spoke on behalf of that “unseen, unheard, unborn child.” Few were as articulate, fewer still who could write as well, fewer yet who could move an audience to “see” abortion in a new light.

What Jean was about, what you and I are about, is not “judging exteriors” but transforming interiors.

Thank you.
Not much has changed in the abortion debate? Everything has changed!

By Dave Andrusko

Off the top of your head, what would you say to sentiments (accurately) captured in the headline, “Not much has changed in decades’ long debate over abortion”?

You’d know, of course, that a pro-abortionist would have written the piece that, as it happened, appeared in a Missouri publication, because there has been enormous change since 1973.

And, if correct (and you would be), you’d anticipate the writer would rummage around in the attic and pull out justifications covered in cobwebs. Given the writer’s age, you would suspect he’d lead with an abortion that took place prior to Roe.

The writer? He tells us he was the woman’s “confidant.” She found a “competent doctor,” doubtless due to her daddy having lots of money, and went away for a weekend.

Nobody suspected anything because “After all, just about everyone had skipped on a Friday and taken a long weekend.”

Get it? Some went home. Some went to the beach. She went to the abortionist. What’s the dif?

Besides, the abortion, it is implied, made it possible for the woman to rise “high in state and federal government” and the man to become a “stellar reporter.”

Opposition? The only opposition is rooted in religion of which we can safely gauge the writer is not a devout fan.

Tiresome, cliché-ridden but great defense against thinking.

But is he right? Is it true that “Not much has changed in decades’ long debate over abortion”? How about…

*The massive growth of women-helping centers, now numbering over 3,000.

* Astonishing advancements in pre-natal and perinatal care which, year in and year out, has lowered the age at which preemies can survive.

*A flotilla of sophisticated critiques of a leaky Roe v. Wade

I could go on and on. But what matters is not a litany of change but the truth that because your devotion to the little ones has never waxed, the cause of life has never waned. What was once received wisdom—that the unborn was little more than a “clump of tissue”—is now laughable, embarrassingly out of date.

Planned Parenthood and its cadre of fellow travelers are the hosts for the anti-life virus. Their manically pro-abortion agenda in Congress speaks for only a sliver of the public, indeed I suspect only a sliver even of most Democrats who, had they any backbone, would stand up.

Final thought. I am reading a biography of economist and author Thomas Sowell, who is pro-life, written by Jason Riley of the Wall Street Journal, titled “Maverick.” What Prof. Sowell said of his mentors is also true of the way pro-lifers present the case for life: with “intellectual integrity, analytical rigor, respect for evidence—and skepticism towards the fashions and the enthusiasms that come and go.”
Sen. Cotton: “The abortion industry can try to run from its past but it cannot erase it

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Many could not have survived without the grace of God and the miracles of modern science. To give you just one example, JFK’s fourth child died of the exact same condition that my son had just a few hours after his birth. In 1963, not even the entire resources of the presidency and the United States government could save that young child’s life. But our doctors, guided by God, were able to save Daniel’s life. And to save so many other lives just like him. Yet so many of those young children would have had no recognition and no protection under our laws until the moment of their premature birth.

And I think we all know just how wrong that is. Every life, born and unborn, is worthy of protection. And every child is made in the image of God, and especially, especially the most vulnerable deserve the fullest love and every effort to protect them.

The unborn, though, have been an endangered group in our society ever since seven lawyers in robes discovered a so-called “right” to abortion in our Constitution in 1973. But now we’re living in an especially perilous time. Not only is abortion-on-demand still the law of the land, but our opponents are advancing on several fronts, emboldened by the most pro-abortion White House in American history.

The problem starts at the very top—President Biden. Now, the president claims to be personally opposed to abortion while publicly in favor of the so-called “right” to choose. Now this is a strange position to me, to say the least. President Biden would have us believe that he’s personally against an abortion and personally believes that it’s a grave injustice. Yet, he simultaneously commits to do nothing to stop this injustice—and in fact he works to do everything in his power to advance it in law, making a common cause with those who enthusiastically support and even profit from abortion.

This craven position calls to mind Stephen Douglas’s infamous claim in the Lincoln-Douglas debates that he “don’t care” if the people of the territories vote to extend slavery into the territories. Which also brings to mind the words of his great rival, Abraham Lincoln, addressing Democrats of his day who claimed to oppose slavery personally, personally yet resisted any attempts to curtail its spread. Addressing these Democrats, Lincoln said, “Is there anything else that you think wrong that you are not willing to deal with as a wrong?” I think we might say the same thing to Democrats in our days.

Because Joe Biden has already achieved the most pro-abortion record of any president. He practically began his campaign for president by renouncing his own decades-long position that your tax dollars should not be used to pay for abortion. During his first days in office, President Biden ended the Mexico City Policy and eliminated the Trump administration’s expanded rules preventing taxpayer funds from going to Planned Parenthood and NGOs that perform abortions and sterilizations overseas. The Biden administration is even working behind the scenes to gut health and safety regulations governing chemical abortion, which is part of the abortion industry’s long-term plan to make the dangerous abortion pill widely available through the mail.

And of course, the Biden administration isn’t the only threat to unborn babies today. In Congress, Democrats are maneuvering to eliminate the Hyde Amendment which prevents tax dollars from going to pay for abortions. The Biden administration is now conspiring with extremists in Congress to remove this long-standing and formerly bipartisan bulwark for the unborn from the federal budget.

And right here in Virginia, pro-abortion Democrats—Ralph Northam and Terry McAuliffe—are pushing even more radical proposals that would eliminate the few remaining restrictions on late-term abortion. Governor Northam’s blackface scandal may have gotten all the attention, but don’t forget that he went live on air to defend infanticide—and of course he got a pass from the liberal media for it.

You know, it wasn’t too long ago that Bill Clinton would say that abortion should be “safe, legal, and rare.” What Democrat today would concede that abortion should be “rare”? They’d sooner rather defend infanticide than adopt Bill Clinton’s formula.

But outside the realm of politics, pro-lifers must also contend with what Pope John Paul the Second called the “culture of death”—the various technological, scientific, and commercial currents that, in the false name of progress, encourage the most hideous abuses against mankind.

We see these forces at work in the world of science, which, in a potentially stunning act of hubris, may have just unleashed a pandemic on the world through its reckless research. A reckoning may soon be coming in the field of virology, but it is richly deserved in other fields, as well.

For many decades, scientists in the field of embryology have created human beings in test tubes to use in their experiments, only to destroy them after 14 days. Researchers have ironically described this 14-day rule as an “ethical” guideline. But now even that rule may be going away. The International Society for Stem Cell Research has recommended eliminating the rule to allow experiments on human beings at even later stages of development. The wholesale, industrial destruction of human life will go on, pushing toward grim new frontiers made all the more sinister, to paraphrase Winston Churchill, by the lights of perversive science.

Meanwhile, technologies like prenatal genetic testing have created new threats to entire groups of vulnerable people. The abortion industry uses and abuses genetic testing to screen for supposedly undesirable or merely unwanted traits and then target the babies who have them for elimination. This weeding out of the supposedly “unfit” should be called what it
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is: eugenics. And it targets one group in particular: babies with disabilities.

Let me give you one grotesque example. A few years ago, mainstream news articles trumpeted a stunning fact out of Europe: Iceland was close to eliminating Down syndrome. Eureka! Another miracle of modern science, right?

Because if you read beyond the headline, you discovered that there was no scientific breakthrough, there was no miracle cure. Iceland was not eliminating Down syndrome. Iceland was eliminating babies with Down syndrome. Between 2008 and 2012, Iceland reportedly aborted 100% of babies diagnosed with Down syndrome. Total elimination.

Sadly, Iceland is not alone. In Denmark, 98 percent of babies diagnosed with Down syndrome are aborted. In Britain, that figure is 90 percent. And while America is more welcome—due in large part to the tireless advocacy of the pro-life movement—sadly, our country still aborts roughly two-thirds of babies diagnosed with this genetic condition.

This New Eugenics operates with ruthless efficiency. While the movement cloaks itself in the language of science and even compassion, it is as barbaric as the ancient Spartans who used to dispose of “ill-born” babies on the mountainside.

Thankfully, the people in this room and activists all across the country are fighting back against this evil. Thanks to the passionate advocacy of our Right to Life chapter in Arkansas, my home state of Arkansas, passed a law in 2019 to prohibit abortions motivated by a Down syndrome diagnosis. Of course, activist judges blocked that law from going into effect, but I promise you this: Arkansas is ready for a fight, we are prepared to take them all the way to the Supreme Court if that’s what it takes—because we know, as everyone here knows, that every child is a precious gift from God, and that every baby with Down syndrome deserves love and protection under our laws.

That’s why a few weeks ago, with several dozen of my colleagues, I submitted a legal brief to the Supreme Court asking them to take up Arkansas’s case and uphold our law to protect babies with disabilities. In this brief I also made a basic but important point: while the threats we face today may seem strange and novel, there’s really nothing new under the sun. The technology and rhetoric has changed but the old serpent is the same. Before there was the New Eugenics of today, the pro-life movement heroically fought against the Old Eugenics of yesteryear.

In this age of cancel culture, the abortion lobby has grappled recently with an embarrassing problem, namely, that the founders of their movement were deeply racist and deeply committed to the pseudoscience of eugenics.

You may have heard of a pro-abortion group called the Guttmacher Institute, named after Alan Guttmacher. Guttmacher is the closest thing to a hero for the pro-abortion lobby. He was a doctor at Johns Hopkins and at Mount Sinai. He was the president of Planned Parenthood and chairman of the International Planned Parenthood Federation. And Alan Guttmacher was also vice president of the American Eugenics Society, who believed, to borrow their own words, “it should be permissible to abort any pregnancy … in which there is a strong probability of an abnormal or malformed infant.” Guttmacher’s dark legacy is evident today at Planned Parenthood and the organization that bears his name, both of which support abortion for any reason, including the disability status of a baby.

You may also have heard that last year Planned Parenthood unceremoniously cancelled its founder, Margaret Sanger, due to her virulent racism. Those of us who have been in the pro-life movement for a while know what a strange plot twist this is. For many years, Planned Parenthood’s highest honor was known as the Margaret Sanger Award. It was given away at an event affectionately and glamorously called “The Maggies.” It even named its flagship Manhattan abortion clinic the Margaret Sanger Health Center.

But no more. Planned Parenthood has quietly conceded at least a few of the uncomfortable facts about its matron saint, facts that members of the pro-life movement have been citing for decades: Sanger’s involvement in the American Eugenics Society, alongside her old pal Dr. Guttmacher; how she dabbled with the Ku Klux Klan; how she promoted contraception and sterilization in order to, her words, “weed out the misfits”; how she denounced large, religious families as the source of, her words, “disease, poverty and feeble-mindedness” and asserted that they were contributing to “race deterioration.” Her words.

My friends, that is what they call a “PR problem,” though when you hear they have a PR problem, what they probably have is a reality problem, and that’s exactly what the pro-abortion industry has here. But, you know, there’s also one more uncomfortable fact about Margaret Sanger that Planned Parenthood neglected to mention. I suspect it played a large role in why they actually decided to throw her under the bus. Namely, Margaret Sanger wasn’t nearly as radical on the question of abortion as Planned Parenthood is today.

For all her contemptible views, Margaret Sanger stopped short of advocating for abortion. In fact, she denounced “quacks and abortionists” who preyed on vulnerable women and their unborn children in much the same way that Planned Parenthood does today.

Now, I mean, Margaret Sanger is no one’s idea of a prolifer; the methods of eugenics and population control that she championed are indisputably the precursors for the modern abortion movement. But it speaks volumes that the abortion movement has become so radical that it had to cancel its founder. Margaret Sanger the sexual revolutionary has suffered the same fate as so many other radicals before her: the revolution eats its own.

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The abortion industry can try to run from its past but it cannot erase it because cruelty and dehumanization are woven into the fabric of their movement. Abortion is based on the idea that the right to life is not given by God but granted by the state only under certain conditions. Abortion is based on the idea that some groups of people are more deserving of life than others. Abortion is based on the idea that there are entire classes of innocent human beings who may be exterminated for any reason—or for no reason at all.

To advocate for abortion, one must believe and advocate the toxic idea that there is such a thing as “life unworthy of life.”

The pro-life movement stands against this evil ideology. In sharp contrast to the Culture of Death, the men and women of the pro-life movement proclaim that the right to life isn’t earned and it isn’t particular to any group—it is a God-given right to us all. The message of the pro-life movement is simple, it is clear, it is written down in no less an authority than our nation’s founding charter. Our nation’s bold, pro-life declaration is this – that “All men are created equal” and we all have a basic “right to life.”

And this is that unassailable truth to which generations of brave reformers have rallied as they battled against the Culture of Death.

This was the message of respected physicians in the nineteenth century like Dr. Horatio Storer, the father of modern gynecology and a resolute witness for the humanity and dignity of the unborn. “Fetal life ever is, and ever has been, held sacred by all respectable physicians,” Dr. Storer said.

This is the very same message proclaimed by opponents of eugenics around the turn of the next century, like the great writer G.K. Chesterton, who wrote that eugenics is “terrorism by tenth-rate professors” who seek out life “in order to take it away.”

This was the same message proclaimed by the pro-life activists of the Roe generation, like Dr. Mildred Fay Jefferson, the first black woman to graduate from Harvard Medical School and the former president of this very organization. “I am not willing to stand aside,” Dr. Jefferson said, “and allow this concept of expendable human lives to turn this land of ours into just another exclusive reservation where only the perfect, the planned, and the privileged have the right to live.”

And that brings us to the present generation. God willing, it will be known as the post-Roe generation.

We are the heirs of the activists who came before us. We’ve made great strides toward our goal in recent years, despite the furious and feverish opposition of the abortion lobby.

We’ve passed many pro-life laws in the states, as a shield for the unborn and to curb the worst abuses of the abortion industry.

We’ve raised up hundreds of pro-life crisis-pregnancy centers around the country, staffed by men and women who are filled with love and compassion for the pregnant women who pass through their doors—and as they are for their unborn children.

We’ve built a diverse movement of millions, millions who show up every year at the March for Life, or show up every Saturday at the local clinic, or say a prayer every night for the end of abortion—because they know, they know as we do, that every life is precious and every life is indeed a gift from God.

And yes, in Washington, yes, we’ve moved heaven and Earth to confirm hundreds of prolife judges and three Supreme Court justices who may hope may soon one day call Roe v. Wade what it was and what it remains: a moral and constitutional travesty.

Winning in the courts and in Congress is of course a part of an essential path to victory. When Roe falls, a great injustice will be rectified, a great rebuke to our nation’s values will be reconciled, and millions of innocent souls will be saved.

But even on that day, our work as a movement will not be complete.

We of course started before Roe v. Wade itself. We will not have truly won until we build that Culture of Life that is powerful enough to defeat that Culture of Death, so that every child is welcomed into this world and treated with love and compassion—not just because the law commands it, but because it is acknowledged that it is written on every human heart as the only just thing to do.

That will require a fairly sweeping change in the culture of death. There is much work left to be done. But can anyone doubt that it’s worth it?

I will close from a short story from the Army, back in basic training.

Drill Sergeant Norton used to tell all of us privates that you have “to do the hard right over the easy wrong.” Many times the wrong thing will be easy, it will be convenient, it will be comfortable, it will be safe. But you have to do the hard thing, even when its hard or inconvenient, or uncomfortable or dangerous—precisely because it is the right thing.

Pro-life activists like all of you have chosen through the years to do the ‘hard right over the easy wrong’ as you fight for the unborn in the face of an often uncarrying and hostile culture.

All across this land, pro-life Americans live out our beliefs every day through prayer, through service, support for the vulnerable, through tireless activism, and through our own families, by having and raising kids who love America, love God, and love one another.

If we continue to do these noble deeds, I am confident God will bless all of our efforts. And “If God is for us,” as the Scripture says, “who can be against us?” So ladies and gentlemen I leave you tonight with the highest confidence and greatest hope—that God will indeed bless each and every one of you and bless every unborn child and continue to bless the United States of America.

Thank you all.
Counteracting the Abortion Pill: One Life at a Time

From page 26

...make it even less likely that we have an accurate accounting of the drug’s actual safety profile.

It doesn’t help things that scientific literature typically avoids the notion of “cause,” preferring instead to use the language of “association” — that use of a given drug or product is “associated” with a certain number of deaths or injuries.

Technically speaking, for example, what killed Holly Patterson was not the abortion pill, but the Clostridium sordellii bacteria that seems to have entered her system when she inserted the misoprostol into her vaginal canal to launch the final phase of her chemical abortion.

Clearly, even if that doesn’t count as “causation” though, there was a reason for the sudden rash of these deadly infections specifically among chemical abortion patients and the deaths wouldn’t have occurred absent the initiation of the chemical abortion. They are very clearly connected – one doesn’t happen except for the other. This unusual notion of causality may provide a way for the manufacturer or distributor to avoid some liability, but it offers little protection to patients from this very real danger.

A growing death toll

Of course, read the promotional literature of the abortion industry and the abortion pill promoters and you won’t find the names of Holly Patterson, Orianne Shevin, Chanelle Bryant, Vivian Tran, Rebecca Tell Berg, Manon Jones, Brenda Vise, Nadine Walkowiak, or any of the others. In fact, you’ll see very little about these deaths or injuries, even in the vaguest, most general, abstract terms.

What you will see on those websites and advertisements are confident, smiling faces, comforting language, and the claim that “more than four million have used these pills safely.”

Maybe it’s unnecessary to state the obvious, but those pills were obviously not “safe” for the 4 million babies who lost their lives.

And given what we know about what the chemical abortion experience is really like, perhaps it is more accurate to talk about the women who “survived” their chemical abortions rather than calling these “successful” or “safe” abortions.

Yet given the hype, it should surprise no one that even while these pills worked as planned, as designed.

Gushing blood, paralyzing cramps, nonstop vomiting – I’m not sure that’s what anybody means by the word. “safe”

And this doesn’t even get into the psychological repercussions of a woman encountering her own child, having the memory of her child’s fists, her child’s eyes, her child’s tiny body swirling in the toilet bowl or the shower drain, haunting her memory, visiting her dreams for years to come.

Frequent “failure”

The truth, of course, is that these pills often don’t work. For example, they aren’t going to work in situations of ectopic pregnancy, which is one reason why it’s so dangerous to take these without first having an ultrasound to see where the baby is located.

Even if there isn’t an ectopic pregnancy, they’re only going to work in situations of ectopic pregnancy, which is one reason why it’s so dangerous to take these without first having an ultrasound to see where the baby is located.

Even if there isn’t an ectopic pregnancy, they’re only going to work 93% of the time and that’s only if women take both pills and use them before they hit their 10th week of pregnancy.

According to the official FDA label, “2-7% of Patients” “will need a surgical procedure because the pregnancy did not completely pass from the uterus or to stop bleeding”

This means, even at its maximal effectiveness, when “used as directed,” these pills are going to fail every 50th woman who walks through the clinic door. And the FDA is granting that maybe it’s not every 50th, but every 14th patient [7%] for whom the pills won’t work. Moreover, “effectiveness” falls off with gestational age, and we know that many in the abortion industry are prescribing these to women weeks past the 10 week deadline. The number and seriousness of complications increases with time as well.

Now this high “failure” rate does come with a somewhat of a silver lining. If a woman takes the first pill, mifepristone, but not the second, misoprostol, her child may survive, and a boost of progesterone may be able to counteract the action of mifepristone. You’ll hear more about that in a minute.

But if the abortion fails and the woman is determined to go through with it, it means more pills, more pain, more bleeding, or maybe even a surgical abortion with all of its own added risks.

But what does the abortion industry care? They get their money and the outcome they’re after either way.

Regulated because found dangerous

Abortion pill advocates want people to believe that the government put controls on the distribution and prescription of mifepristone because it was bowing to pro-life pressure to make the abortion pill harder to get. But if we had our way and the ordinary medical, legal, and ethical standards had been followed we don’t think it ever would have been approved at all.

Remember that thing from the Hippocratic Oath about “Do no harm?” And that line about not prescribing any deadly drugs? What about that commandment “Thou Shalt Not Kill!” And isn’t the “right to life” the first one mentioned in our founding documents?

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No, the truth is that the FDA imposed significant safeguards on mifepristone because it had proven itself dangerous. They saw the death of Nadine Walkowiak in France and they saw the near death of the woman in Iowa who participated in the American trials of the drug. They received reports of multiple complications and high rates of failures among women who tried the pill under the heavily monitored conditions of the U.S. trial.

That’s why that even when the Clinton era FDA approved the abortion pill in September of 2000, it did so under a special provision of the drug law called “Subpart H,” allowing its distribution and use to be restricted.

That’s why, once they saw the deaths of Holly Patterson, Brenda Vise, Manon Jones, and the others, when they received thousands of reports of hemorrhage, dangerous infections, ruptured ectopic pregnancies and the like, they sent warning letters to doctors and directors of E.R.s. And they put a special “Black Box Warning” on the label telling doctors to watch for common signs of these chemical abortions gone wrong.

It’s why, even when President Obama’s FDA relaxed certain elements of the mifepristone protocol in 2016, it still kept the drug under its special REMS regs, or “Risk Evaluation and Mitigation Strategy” regulations, to minimize these dangerous incidents and ensure that prescribers carefully monitored the health and safety of their patients.

**Never Satisfied**

Despite getting the FDA to approve this dangerous, deadly drug that cures no disease, saves no patient’s life, the abortion industry continues to complain about each and every safety measure placed on the drugs, angling to make these pills easier to get and cheaper to use.

Before approval, for instance, they fought against ultrasound requirements date the pregnancy and determine the baby’s location in the uterus, which, as we’ve seen, could help avoid risks of ruptures or impact effectiveness. They rejected requirements that the prescriber have surgical training to treat complications or incomplete abortion if the process went awry or the abortion failed, which we’ve also seen happens frequently.

Now it is only necessary that they claim that they can accurately estimate the baby’s age by whatever method they wanted, and can refer the patient to someone with surgical skills if those are needed.

They complained about dosages, wanting to use less of the more expensive mifepristone pills, more of the cheap misoprostol. They didn’t want women coming back to the clinic to be administered the misoprostol. They chafed at the seven week gestational limit.

They got most of these elements changed in the new 2016 protocol. And they still complained.

They didn’t like the paperwork involved in ordering the pills and certifying that they understood how the pills worked and what the risks were. They wanted to be able to sell them at pharmacies or make them available online. They wanted to skip all the patient testing and examinations.

Turns out, they didn’t like having the women come to the clinic at all for the in person screening, physical examination, testing, or counseling. They tried to use the pandemic as an excuse to drop the FDA’s safety regulations and just let them interview patients online and ship their pills in the mail.

**An Agenda Exposed**

All these moves by the abortion industry have made their intentions clear.

It’s not making abortion safer. Their own studies show chemical abortions to be almost four times more likely to send a woman to the emergency room than a surgical abortion.

It’s making abortion easier, and more profitable. Not easier or more economical for women, obviously, but for the abortion industry.

A chemical abortion, particularly if done at home, means less clinic space, less staff and abortionist time are required. More abortions can be done, in less time, with less clinic mess, and abortionists make more money.

Maybe the abortionist has a short five minute video chat with a woman over a computer monitor, but he doesn’t have to deal with the blood and mess of a surgical procedure, and doesn’t have to encounter the horror of her mutilated baby. At most, maybe the clinic staff takes a call in the middle of the night and sends the woman off to her local ER. Somebody else’s problem.

Clinic safety regulations, checking the patient’s age on an ID, performing an ultrasound and letting the woman see her unborn baby, doing testing to see whether the woman is even pregnant, are all no longer an issue provided that she has a functioning credit card or PayPal account.

With the telemedicine option, an abortionist can sell abortions to women hundreds of miles away and never have to worry about them showing up hemorrhaging on the clinic doorstep.

They never have to be in the same room as these women, maybe never even look them in the eye, and never have to clean up the blood and callously collect and cast away the corpses of these precious tiny human beings.

More than once, activists have pointed to these telemedical and Do-It-Yourself [DIY] chemical abortions as a way to keep the business humming if and when Roe v. Wade is overturned, a concept that got a test run during the pandemic.

These are clearly their intentions for mifepristone. But we’re not just going to roll over and let them destroy the lives of these women, these mothers and their unborn children.

We believe that when women find out how difficult and dangerous these abortions really are …

- when they discover that there are ways to reverse these abortions …
- when there are laws that hold abortionists accountable for the risks these abortions pose…
- when they are convinced that there are life-affirming options that are better for both them and their babies…

We believe women will choose LIFE for themselves and their babies!
The enduring need for real regulation of Human Embryo Experiments

From page 39

amendment was a stern repudiation of the overreach of scientists who considered human embryos nothing more than experimental resources to be used and discarded.

Since 1996, the Dickey-Wicker amendment has been passed and signed into law every year, by both Republican and Democrat Congresses and Presidents. This demonstrates a consensus that taxpayer funds should not be used for controversial research with embryos, despite debate on the propriety of the research itself. Denying access to the large cache of federal funds weighs against such research and dissuades scientists from pursuing embryo-destructive experiments.

The role of the Dickey-Wicker amendment in regulating the uneasy tension regarding funding controversial embryo-destructive research has come to the fore in regard to embryonic stem cell (ESC) research. Human embryonic stem cells were first successfully cultured in the lab in 1998 and excited the imagination of many scientists due to the flexibility of the cells to form the range of body cell types (termed “pluripotency”), but deriving ESC requires destruction of young human embryos.

When pushed to allow federal funding of the research, the General Counsel of Health and Human Services in 1999 issued a memo that parsed the words of Dickey-Wicker to a new interpretation: while federal funds could not be used to create or destroy embryos, once the embryos were destroyed, federal funds could be given for research with embryonic stem cells from disaggregated embryos. NIH developed guidelines for funding such research and issued a call for grant proposals late in 2000.

However, when the grant proposals were about to be reviewed and funds given in spring 2001, a lawsuit citing Dickey-Wicker was filed that created a moratorium on ESC research funding. This forced NIH to withdraw the Clinton-era guidelines and led to President Bush’s first address to the nation, on August 9, 2001, on the topic of stem cell research. Funding of ESC research proceeded but under tight restrictions.

When President Obama discarded restrictions on ESC research and his NIH put forth new, loosened guidelines on ESC research and his NIH put forth new, loosened guidelines on ESC research, another lawsuit (Sherley v. Sebelius) citing Dickey-Wicker shut down all federally-funded ESC research. Eventually the legal stay on funding the research was lifted, based not on congressional intent or a clear reading of Dickey-Wicker language but on NIH’s interpretation of the meaning of “research in which” an embryo is destroyed, and the Supreme Court declined to weigh in to clarify the law.

Nonetheless, the Dickey-Wicker amendment still prevents taxpayer funding of embryo-destructive experiments.

The new ISSCR recommendations present new challenges, and Dickey-Wicker will play an important role again against unethical research. A plain reading of this prohibition suggests that most, if not all, of the embryo research experiments allowed by ISSCR could not receive federal taxpayer funds. As the previously-mentioned letter noted, it should help determine “the right experiment” apart from the scientists’ desires.

Ethical research alternatives do exist, such as adult stem cells, and these alternatives are already helping patients, while the embryo-destructive research has failed.

Sen. Roger Wicker (Mississippi), testifying at a stem cell research hearing on September 16, 2010, pointed out the realities of the critical need for continuing the Dickey-Wicker amendment:

“I am proud to say that for a decade and a half, the Dickey-Wicker amendment has protected life. This debate involves profound ethical and moral questions. This is a matter of conscience for me, but more importantly, it is a matter of conscience for millions of Americans who are deeply troubled by the idea that their taxpayer dollars may be used to destroy another human life when there are other proven techniques available.”

According to a Talmudic saying: “Whoever saves a life, it is considered as if he saved an entire world.” The Dickey-Wicker amendment has saved millions of worlds.

Editor’s note. This appeared on the webpage of the Christian Medical & Dental Associations and is reposted with the author’s permission.
Her husband left after a Down syndrome diagnosis, but she chose life anyway

By Cassy Fiano-Chesser

Corina Gander already had four daughters, ranging from 16 to 4, when she and her husband found out they were expecting their fifth baby. Initially, it was a “happy surprise” for the couple, but when they learned daughter had Down syndrome, Gander faced an uphill battle with very little support — but chose life anyway.

At her 12-week ultrasound, Gander told the Daily Mail she was full of excitement. Then, a nurse called her to say her baby had a one in five chance of having Down syndrome. “I’m not sure how she thought I’d react,” Gander said, explaining that the nurse asked her what she wanted to do. “I knew what she meant. Did I want to abort? My mind fast-forwarded to when I was old and unable to care for a child with a disability.”

Gander chose to have diagnostic testing done, and went for the test by herself. As she saw her daughter on the ultrasound, her doubts began to ease. “As I looked at the grainy image on the screen, emotion swept over me. There was my baby doing somersaults in my belly,” she said. “In that moment I knew the result would be irrelevant.”

Resolved to keep her daughter no matter what, Gander received a call a few days later confirming the Down syndrome diagnosis. The nurse who notified her told Gander she was “so sorry,” Gander, however, said she was fine. She began letting people know — her husband, her family, and her friends — that her new baby would come with an extra chromosome. And her support quickly crumbled around her.

Not only did Gander’s husband leave her, but her friends and family also pushed her to have an abortion. “You have four normal children, why have this one?” and ‘I seriously doubt your ability to cope with a disabled child,’” she recalled people saying. But she refused to let it faze her. “The love I had for the little girl I was yet to meet was so strong. They made me want to have her more and prove to the world she deserved her place as much as anyone.”

Despite the lack of support from others, Gander’s four older daughters were thrilled, and her little girl — named Daisy — was born at 37 weeks. While Daisy was initially able to come home, she became gravely ill later, sick with bronchitis and chronic lung disease.

“All the time I kept thinking I’m going to lose her, as I split my time between the hospital and trying to keep things normal at home for the girls,” Gander said. “I don’t know what I’d have done without Mum and Rhianna. The girls’ dad helped out too.”

As Daisy struggled, Gander said doctors dismissed her concerns because she has a disability. “I would ask people, medical professionals, ‘is this right?’” Gander recalled to the Hertfordshire News. “And they would say ‘yes this is normal, because she has Down’s syndrome.’ Any child with special needs gets dismissed because they have a condition. For those first few weeks of Daisy’s life it was ‘this is her normal, this is normal for her.’”

But things only got worse. Daisy, it turned out, also had epilepsy, and was having seizures, in addition to struggling to breathe on her own. Yet Daisy still smiled at her mother, grabbing her fingers and responding to her voice.

Then, doctors told Gander the medication to treat Daisy’s epilepsy would mean it was “unlikely she’ll ever feel emotions, smile or feel pain.” And they were right, for the moment. “When I spoke to her she gave me nothing. In a room on her own she just lay there, day after day,” she said. “My heart breaking, I felt like I’d lost her. I couldn’t let her go on like this.”

So Gander took her home — but instead of getting worse, Daisy got better, with Gander crediting her other daughters.

“Slowly but surely over the coming weeks she came back through being with her sisters,” she said. “They literally brought her back to life, as they played with her, cuddled her. It was a miracle.”

Inspired by her daughter, Gander launched Daisy’s 21 Wishes to help new parents like her who receive a Down syndrome diagnosis.

“Daisy’s first wish is that support will be offered to new parents receiving a pregnancy diagnosis of Down syndrome,” Gander explained. “I have done this by doing a pack that will be handed out by screening nurses in antenatal departments. This includes a personal letter written by me telling the story of my journey. For the parents that give birth to a child that has Down syndrome but weren’t aware, myself and my friends are writing a book individually telling our stories hoping to give positivity and hope.”

Today, Daisy doesn’t need to be on oxygen and can talk, surpassing the expectations placed on her by her doctors. “She loves playing school with her sisters and every day she astounds us all,” Gander said. “Her smile would certainly melt the hardest of hearts.”

Editor’s note. This appeared at Life Action News and is reposted with permission.
Pushing, polling, and push polling

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don’t know crucial information that could help them see the problems with the pro-abortion position, and they won’t get it from mainstream culture. In its next term, the Supreme Court will hear a case about a law that protects babies from abortion after 15 weeks of gestation. O’Steen pointed out the results from the AP-NORC poll “would indicate majority support for that Mississippi bill that’s being considered.” [Emphasis added.]

To reiterate,…

#1. The language of a “ban” could be (to quote Saad) “more onerous to people,” eliciting stronger responses, whereas wording like “generally legal” or “generally illegal” is a little less provocative.

#2. As we’ve discussed for 4 decades+, not only does a majority of people oppose abortions except in the “hard cases,” a very strong majority of people are opposed to almost all abortions in the second and third trimester.

#3. But, to quote Saad again, Gallup is “not saying ‘trimester.’ We’re saying 18th week. And I don’t know if people know what trimester that refers to.”

Exactly, which is why Dr. O’Steen is absolutely correct when he says “the results of the AP-NORC poll ‘would indicate majority support for that Mississippi bill that’s being considered’” by the Supreme Court.

Fascinating piece. I hope you read it and share with family and friends.

Missouri AG asks Supreme Court to uphold 2019 law banning “discrimination-based” abortions

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generally no medical need for [her], or any other physician providing abortion care at [the clinic] to know a patient’s reason for seeking an abortion or to distinguish between one particular fetal diagnosis or another in order to provide compassionate, safe abortion care.” If there is no medical reason to ask, and no evidence that the reason for seeking an abortion is routinely volunteered, then the statute itself cannot create the “threat of irreparable harm.”

Judge Sachs initially allowed the state to enforce the provision banning abortions based on a pre-natal diagnosis of Down Syndrome but later reversed his ruling. Schmitt’s office then appealed to the Eighth Circuit Court of Appeals, which affirmed that ruling. On Thursday, the Missouri Attorney General’s Office asked the Supreme Court of the United States to hear the case. “Previously, Attorney General Schmitt led a 22-state coalition in filing an amicus brief in support of a similar law banning abortions based solely on a pre-natal Down syndrome diagnosis in Arkansas.”