Abortions down 60% since passage of Texas Heartbeat Law

By Dave Andrusko

We knew from an earlier report out of the University of Texas that abortions had decreased in Texas since passage of S.B.8. But updated statistics from the Texas Health and Human Services Commission released a week ago Monday “offer a fuller picture of the sharp drop in patients that Texas doctors have described in their clinics over the past five months, during which time courts have repeatedly allowed the restrictions to stay in place,” according to the Associated Press’s Paul Weber.

Thanks to the Texas Heartbeat Law, there’s been a massive decline-- almost 60%-- “in the first month after new restrictions went into effect,” according to BeLynn Hollers of The Dallas Morning News.

“There were 2,197 abortions reported in Texas the first month after the new law went into effect Sept. 1, compared to 5,404 in August 2021,” Hollers reported.

An October report from the Texas Policy Evaluation Project at the University of Texas at Austin “showing that abortions fell by 50 percent in September was off by almost 10%.” Hollers quoted Texas Right to Life, which said “the success of the Texas Heartbeat Act
President Biden’s average job approval sinks to below 40%

Funny, how President’s Biden sinking job approval numbers sort of sneak up on you. Sure, you’re accustomed to polls having him floundering in the low 40s but look what Bryon York summarized in just one paragraph?

The president’s job approval rating is a key factor in midterm election results. And just today, Biden’s approval dipped below 40% for the first time in the RealClearPolitics average of polls: 39.8% approve, versus 54.4% disapprove.

Just remember this from a recent newsletter: “The Gallup organization has looked at midterm results going back to 1946. In elections where the president’s job approval rating was above 50%, Gallup said in a 2018 article, his party’s midterm losses in the House averaged 14 seats. But in elections where the president’s job approval rating was below 50%, the losses averaged 37 seats.”

A whopping minus 15 points! Ed Morrissey wrote

When was the last poll to show Biden with any kind of positive job approval rating? That would be a mid-December Reuters/Ipsos tracking poll, with IBD/TIPP giving Biden a tie a week earlier. (The latest IBD/TIPP

ACLU believes ad “reframing” abortion is persuasive, ignores unborn child

Well, if you believe the ACLU and Oberland—the “purpose-driven ad agency”—they have a humdinger of a strategy to make abortion more palatable. “Forcing people to rethink the language they use, how they empathize and understand who is being affected by these restrictions, might actually put pressure on legislation and these restrictive laws and help overturn them,” says Kate Charles. Oberland’s Chief Strategy Officer.

So what language are they proposing?

“I think getting people to say I’m pro-life is much easier to say than ‘I am pro-forced pregnancy,’”

It’s as simple as that? Get them to say “Forced pregnancy” and suddenly pro-lifers will be disarmed, falling into incoherence?

Sort of. The ad [titled “Disclaimer”] follows a pregnant woman who wants an abortion. She is stymied by “unnecessary restrictions and politically-motivated bans,” we’re told. It goes without saying that their ad campaign will not only totally ignore the unborn child, but also ridicule protective legislation that many, many states have enacted.

“We felt by changing the terminology [to “forced pregnancy”] we were highlighting the pregnant person’s life, and the cruelty and control that politicians are trying to enforce on people, which are very un-American, and these restrictive laws that are controlling bodies,” said Charles.

This is the Abortion Industry’s umpteenth iteration of isn’t-abortion-wonderful. This particular ad “reframes the issue as a battle between government-mandated forced
We Must Stay Focused

On December 1, the US Supreme Court heard oral arguments regarding a Mississippi law that protects preborn children after 15-weeks gestation. Both sides in the abortion debate have been talking about whether the Court will use Dobbs v. Jackson Women’s Health Organization to overturn Roe v. Wade.

Pro-lifers are, of course, excited about the possibility of protecting more babies and their mothers. The abortion industry is doing its best to scare women into thinking their lives will be forever ruined if Roe is overturned.

But pro-lifers must be prepared for however the court rules. What if they don’t overturn Roe? When agreeing to hear a challenge to the Mississippi law, the court said it would decide “whether all pre-viability prohibitions on elective abortions are unconstitutional.”

What if the court answers that question and goes no further?

We will be disappointed, of course, but I urge you to keep your eyes on the biggest battle we have this year – the election of pro-life US Senators. Let me tell you why these senate elections are so critical to the future of millions of unborn children, and just as important as what the Supreme Court does.

Pro-abortion Democrats in the U.S. House of Representatives have already passed their so-called “Women’s Health Protection Act” — one of the most pro-abortion bills ever considered in our country.

It is a bill that would strip protections from the most vulnerable members of our society, and from the very women these Democrats claim they want to protect. It would nullify virtually all federal and state laws that protect mothers and their unborn children from abortion. It would require us all to pay for unrestricted abortion for any reason with our tax dollars.

This bill should be called the “Abortion Without Limits Until Birth Act” because it isn’t about protecting women’s health. It’s about protecting abortionists and the abortion industry’s financial bottom line.

This single bill would undo virtually all our efforts to protect mothers and their unborn children from the tragedy of abortion. Even if the U.S. Supreme Court reversed Roe v. Wade, passage of this bill in Congress would mean nationwide abortion on demand throughout pregnancy!

If we don’t do everything we can to restore pro-life majorities in the U.S. House and U.S. Senate this November, this nightmare of a bill could become reality.

Right now, the only thing stopping Senate Majority Leader Chuck Schumer (D-N.Y.) from advancing the Women’s Health Protection Act in the Senate is the legislative filibuster that requires 60 votes to advance bills for a final vote. Right now, there are 48 votes to end the filibuster. With pro-abortion Vice President Kamala Harris ready to break a tie vote, Schumer only needs 50.

Imagine waking up on Wednesday, November 9, with pro-abortion Democrats having won 2 more Senate seats and retaining control of the U.S. House. Sen. Schumer would have the votes necessary to change the Senate’s rules and eliminate the filibuster, which would open the flood gates for a pro-abortion wish list to become reality.

In addition to passing the so-called “Women’s Health Protection Act,” Congress would pass a permanent repeal of the Hyde Amendment, leading to taxpayer-funded abortion.

And in order to protect abortion, Democrats are also determined to add at least four more radical pro-abortion justices to the US Supreme Court.

Then it wouldn’t matter what the Supreme Court did. If Senator Schumer gains majority control of the Senate, we won’t have just lost a battle. We will have lost the war.

So, yes, we all want the Supreme Court to overturn Roe v. Wade. We want the ability to fight state by state to protect babies. But we must keep our focus on the elections.

Our nation is once again at a crucial crossroads. We have the power and ability to ensure that on Election Day, our nation chooses the path that leads to a Culture of Life in America — a society that protects unborn babies and their mothers, a society that protects the medically vulnerable and disabled; a society that values the lives of the most defenseless.

We cannot, and we must not, allow an opening for President Biden, House Speaker Nancy Pelosi, and Chuck Schumer to do the abortion industry’s deadly bidding. We must be united and shout with one pro-life voice that their pro-abortion extremism has no place in America and will not be tolerated any longer.

It seems like every election in recent memory has been labeled “the most important election in a generation.” But this year, those words have never been more true.

Whatever the Supreme Court does, our real battle is in November.
49 solid reasons for pro-life optimism

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

It has been 49 years since the tragic U.S. Supreme Court decision Roe v. Wade went into effect. In light of that sobering milestone, I have come up with 49 ways that the pro-life movement is making a profound impact on our nation.

1. Women who have had abortions and who now regret them are speaking up about their traumatic decision.
2. Men who have suffered the loss of children through abortion are discussing their lost fatherhood.
3. Grandparents are recognizing the incredible gift they lost due to abortion.
4. Healing ministries such as Rachel’s Vineyard are providing hope to families impacted by abortion.
5. Pregnancy resource centers are providing comprehensive counseling and material support to pregnant women in challenging circumstances.
6. The Hyde Amendment, which bans taxpayer funding of abortion except in rare circumstances, is estimated to have saved more than two million lives.
7. Technology such as 4D Ultrasound has provided a window to the womb, helping to strengthen the bond between mother and child and saving lives.
8. Medical advances have allowed doctors to save premature babies at ever-earlier stages of development.
9. The movie “Unplanned” moved people’s hearts to embrace the pro-life cause.
10. The film “Gosnell” shed light on an abortionist’s horrific crimes against humanity.
11. The movie known as Roe v. Wade enlightened minds and touched hearts.
12. Pro-life marches and rallies in local communities are focusing renewed attention on the cause of life.
13. 40 Days for Life’s prayerful and peaceful presence has saved more than two million lives.
14. National Right to Life’s state affiliates are passing meaningful pro-life legislation that is holding the abortion industry accountable while saving lives.
15. Parental consent laws have helped to dramatically reduce teen abortions.
16. Websites such as TeenBreaks.com are providing meaningful information and resources to pregnant teens in difficult circumstances.
17. Events such as the National Right to Life Convention have helped to energize and focus the pro-life movement.
18. National Right to Life local chapters are educating people in their local communities about the development of the preborn child.
19. High school and college students are bringing vitality and a new perspective to the pro-life movement.
20. Informed consent laws are giving pregnant women the information they need about fetal development and alternatives to abortion.
21. Solid scientific research is educating Americans about the physical and psychological risks of abortion.
22. Compassionate assistance for pregnant women in challenging circumstances is only a text or phone call away.
23. Strict constructionist judges, dedicated to the Constitution rather than pro-abortion politics, were appointed to the Supreme Court in recent years.
24. Public opinion polls show the vast majority of Americans oppose taxpayer funding of abortion.
25. Polls also show that a majority of Americans oppose most abortions.
26. Pro-life marches and rallies in local communities are focusing renewed attention on the cause of life.
27. The pro-life movement has placed a spotlight on the tremendous potential of children with Down syndrome and other disabilities.
28. African-American leaders are drawing attention to the devastation abortion has caused in minority communities.
29. Dedicated volunteers are bringing vital pro-life education into schools across the nation.
30. Celebrities such as actress Patricia Heaton are using their platforms to promote a life-affirming message.
31. Pro-life advocates are educating the cause through social media outlets such as Facebook, Twitter, Instagram, and LinkedIn.
32. Pro-life podcasts are introducing a new generation to the cause of life.
33. Pro-life videos on YouTube are educating people throughout cyberspace.
34. Investigative journalists such as David Daleiden are exposing the atrocities of the harvesting of baby body parts.
35. The “word police” have yet to silence the phrase “pro-life.”
36. Disability rights activists are successfully stopping assisted suicide legislation in numerous states.
37. From diaper drives to parenting classes, the pro-life movement is proving itself as a “pro-love” movement.
38. The pro-life movement empowers women to make life-affirming decisions for themselves and their families.
39. Pro-life news outlets such as National Right to Life News Today publish daily updates about the successes of the pro-life movement.
40. So many one-time advocates of abortion, such as NARAL co-founder Dr. Bernard Nathanson, became pro-life.
41. The National Right to Life Oratory Contest is showcasing the rhetorical talents of young pro-life advocates.
42. The National Right to Life Essay Contest is helping students hone their pro-life argumentation.
43. The “pro-life advantage” helped to elect numerous state lawmakers in recent years.
44. A new contingent of pro-life women are gracing the halls of Congress as a result of the 2020 election.
45. The pro-life movement welcomes people of all faiths, or no faith at all, to join us in our mission of care and compassion.
46. The first-of-its-kind, state-funded alternatives to abortion program administered by Real Alternatives, has served more than 330,000 women and their families.
47. Abortion pill reversal is saving lives and saving women from the trauma of abortion.
48. Year after year, the pro-life movement gives voice to the voiceless in the halls of Congress and the corridors of state Capitols.
49. A reversal of Roe v. Wade is within sight.
MEDIA ADVISORY—Washington Post’s The Fact Checker Awards Four Pinocchios (“Whopper”) to Rep. Carolyn Maloney for claims that the Equal Rights Amendment has been ratified “and all that is needed is the approval of the archivist”


WASHINGTON (Feb. 10, 2022)—The Washington Post’s The Fact Checker Wednesday awarded the leader of ERA-revival forces in Congress, Rep. Carolyn Maloney (D-NY), “Four Pinocchios” (defined by the Post as “Whopper,” the maximum level of falsity) for her recent claims that the Equal Rights Amendment has been ratified and can be formally made part of the Constitution if published by the Archivist of the United States, David Ferriero.

As noted in a recent series of Media Advisories issued by National Right to Life, essentially the same ERA-related misinformation is being disseminated by other members of Congress, at the behest of advocacy groups such as the Equal Means Equal and the ERA Coalition. In many instances the highly distorted claims about the ERA’s status are being uncritically adopted by journalists in stories, explainers, and profilers that are manifestly narrow in their sourcing.

“Every time the issue has been litigated in federal court, most recently in 2021, the pro-ERA side has lost, no matter whether the judge was appointed by a Democrat or a Republican.” (This is a point documented in detail in the NRLC white paper “Advocates seeking to resuscitate the 1972 ERA are on a 40-year losing streak before federal judges of every stripe,” by Douglas D. Johnson, director of the ERA Project for the National Right to Life Committee. Jan. 5, 2022)

A March 2021 ruling by Judge Rudolph Contreras (appointed by President Obama) “indicated support for the idea that the deadline had passed.”

Key points in the Washington Post The Fact Checker analysis included these:

* The U.S. Supreme Court’s handling of a 1981 ruling by a different federal judge, holding that the ERA deadline was binding, “indicated support for the idea that the deadline had passed.”

* The Washington Post website under the headline “The ERA and the U.S. archivist: Anatomy of a false claim.” Chief Post fact checker Glenn Kessler examined several recent public statements by Rep. Maloney about the ERA, notably that the ERA is already part of the Constitution, and her insistence that Archivist of the U.S. is obligated to formally certify the ERA as part of the Constitution.

Maloney, the longtime leader of ERA-revival forces in the U.S. House of Representatives, also chairs the House Oversight and Reform Committee, which holds oversight authority over the National Archives and Records Administration, which the Archivist heads.

See “Advisory,” page 31
New Fact Sheet Spotlights Abortion Pill’s Safety, Efficacy Issues, Risks for Telemedicine

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

Last December, after an eight month investigation called for by the Biden administration, the U.S. Food and Drug Administration (FDA) officially authorized the telemedial prescription of abortion pills and there being delivered to women’s homes by mail. Implicit in that announcement was an FDA determination that they felt mifepristone and its accompanying prostaglandin misoprostol could be safely and effectively used by women who only met their prescriber online, got their pills by mail, and then managed their abortions at home by themselves.

This flies in the face of so much of what we know about the abortion pill and its troubling safety record. National Right to Life has taken that information and produced a new fact sheet “MIFEPRISTONE SAFETY & EFFICACY: Quick Facts about the Abortion Pill,” now available on the “Factsheets & Downloads” section of the www.nrlc.org website.

Using data from the FDA and from the abortion industry’s own studies, our fact sheet shows that, however they might be portrayed in the popular media, these abortion are bloody, painful, and dangerous. And that’s when they work as designed. In fact, they fail a lot of the time, leaving the dead or dying baby or other material in the uterus, requiring surgery to stop the bleeding or complete the process.

The fact sheet points out that there have been at least 26 American deaths and thousands of injuries associated with use of the abortion pill. According to the FDA, women taking these “safe” pills have suffered hemorrhages, required transfusions, contracted rare and sometimes deadly infections, or had rupturing ectopic pregnancies mistaken for chemical abortions in process.

Importantly, the fact sheet makes plain how the FDA’s new policy allowing the home use of pills prescribed by telemedicine and delivered by mail is very likely to increase the risk of failure or complications.

If, as the factsheet demonstrates earlier, the risk of complications and failure increases the farther along the woman is in her pregnancy, and if mifepristone does not work in circumstances of ectopic pregnancy (when the child implants outside the uterus), then a failure to adequately screen the patient, to do an in person ultrasound or physical exam, can mean more women past the FDA’s ten week gestational cut off period or missing the signs of ectopic pregnancy.

Women having these abortions remotely, at home, may be far from the sort of emergency care they need if and when they begin to hemorrhage or show signs of infection or ectopic pregnancy.

Without an in person follow up exam, they may have difficulty knowing whether or not their abortion is complete. Past experience has shown it is possible to bleed, even heavily, and go through all the painful cramping process, and yet not actually abort the baby. (This is one reason why many women have been able to successfully “reverse” their abortions.)

The FDA did not so much deny these risks as ignore them. It has, to date, maintained its certification system. That means requiring that any prescriber attest to an ability to date a woman’s pregnancy and check for signs of an ectopic pregnancy, though it apparently presumes (for the moment) that this can be adequately ascertained by an online or phone interview.

If adequate records are kept, and we eventually find out how many women are given pills past the cutoff date and suffer the consequences, how many ectopic pregnancies are missed, it is hard to see the FDA’s confidence in the safety of telemedial abortion bearing out.

Again, the utility and strength of this fact sheet is not that it merely points these important safety and efficacy issues out. An extended note section provides details and documentation for each of these claims, using data from the FDA’s own official documents, labels and reports and from studies put out and performed by abortion pill advocates themselves.

It may be surprising, but abortion advocates often unintentionally make the best case against the safety and efficacy of mifepristone.

The fact sheet also notes one thing that neither the FDA nor abortion advocates like to say a whole about: the psychological trauma faced by a woman encountering the tiny body of her aborted child, seeing his arms, her legs, the child’s face, eyes, and hands. It’s not something mentioned very often in the official documents, but personal accounts appearing in news and magazine articles combined with the basics we know about fetal development make these nightmares all too real for many mifepristone patients.

Those cases too, are documented on the fact sheet. National Right to Life hopes that this will not only be a useful tool for activists trying to find out more about these deadly drugs, but also that women considering chemical abortions will take the time to consider the actual facts about the safety and efficacy of these abortifacients.

This factsheet is a good place to start.
Every day is a battle to get the word out about abortion survivors

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

His reaction was stunning, but not necessarily surprising, given what little attention has been paid to babies who survive abortions.

After interviewing an abortion survivor for a podcast, I asked the producer if he had ever heard of babies surviving abortions. He answered “No.”

But the fact of the matter is, babies have been known to survive abortions. One of them is the subject of a recent episode of my podcast. Melissa Ohden is a beautiful woman who is the founder and director of the Abortion Survivors Network, an organization which advocates for individuals who, as babies, survived abortions.

Melissa has been in touch with more than 500 abortion survivors throughout the world. “My story is the story of so many people,” she says.

Melissa soaked in a toxic salt solution for several days. On the fifth day she was accidentally born alive. Melissa, who was adopted, learned about the circumstances of her birth as a teenager, and has since been reunited with her birth mother.

When addressing people who promote abortion, Melissa says, “It’s important that we lead with love.” She recognizes that people who have been impacted by abortion often experience profound emotional pain, a pain that can result in trying to silence abortion survivors.

Melissa notes that every day is a battle to get the word out about those precious human beings who have survived abortions. You can read her story in the book You Carried Me: A Daughter’s Memoir. Her second book, spotlighting the stories of other abortion survivors, will be published later this year.

Pro-abortion amendment to state Constitution passes last legislative hurdle, Vermont voters will have the last word in November

By Dave Andrusko

By a vote of 107-41, the Vermont House approved Proposal 5, sending the question of whether to amend the state Constitution to essentially permit abortion on demand to the voters come November.

The proposed amendment states: “That an individual’s right to personal reproductive autonomy is central to the liberty and dignity to determine one’s own life course and shall not be denied or infringed unless justified by a compelling State interest achieved by the least restrictive means.”

Also known as the Reproductive Liberty Amendment, proponents of Proposal 5 “overcame the final legislative hurdle in a years-long process,” said Sarah Mearhoff. “The final call now goes to voters in November.”

“Proposal 5 is reckless and irresponsible, dangerous and expensive as well as morally and ethically wrong,” says Vermont Right to Life. “The lives of countless unborn babies will be placed at further risk of abortion if Proposal 5 is adopted.”
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
- Douglas John Andriese
  - Brad Andriese
- Joseph & Dorothy Angelo
  - Craig Stamm
- Duane Browning
  - Teresa Browning
- Anthony (Jack) Dennison
  - Barbara Mulroy
- Michael Hall
  - Tom & Joanne Brady
  - Mary & Larry Broker
  - Pat & Kathleen Busek
  - Stephanie Galovich
  - Theresa Hall
  - Marie Koole
  - Schroer Family
- Roy McMillan
  - Michael & Patricia Artigues
- Daniel Mercer
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  - Larry & Rhonda Gordon
- Dorothy Wolfe
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**In Honor of**
- Margie Gass
  - Scott Gass
- Craig Haugaard
  - Debbie Asmus
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  - Paul Mersino
- Our Miscarried Grandchildren
  - Deacon Steve and Peggy VandeHey
- Linda & Mike Panther’s 50th Wedding Anniversary
  - Rick & Sue Dunlay
- Pennsylvania Pro-Life Federation
  - Michael Ciccocioppo
- Annie Schappert
  - Jeremy Schappert
- Henry & Kathie Steare
  - Henry Steare

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.

Memorials & Tributes

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<th>Your name</th>
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Your address:

Name/Address for acknowledgment card:

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
June may seem a long ways away, but it’ll be here before you know it. In that spirit, I hope you’re signing up early for NRLC 2022 to be held in Atlanta, Georgia June 24-25 [https://nrlconvention.com/product-category/register].

We already have two of our featured speakers lined up for this two-day pro-life educational event of the year at the Atlanta Airport Marriott Hotel. Super Bowl champion Matt Birk is our Friday evening, June 24 General Session while Focus on the Family President and CEO Jim Daly will speak at our Saturday night closing Banquet.

Matt is a super speaker and we have heard nothing but raves about his performance. He is a 15-year NFL Veteran and Super Bowl XLVII champion. A graduate of Harvard University, Matt was the recipient of the 2011 Walter Payton NFL Man of the Year award for his excellence on and off the field, including his commitment to emphasizing the importance of education through his H.I.K.E. Foundation.

Jim Daly hosts Focus on the Family daily radio broadcast which is heard by more than 5.6 million listeners a week. He has also been honored as Program of the Year by the National Religious Broadcasters. He will be joined by the winner of the National Right to Life Oratory Contest who will deliver his or her winning speech.

To make it easier for more people to attend the entire convention, the annual gathering of the pro-life family will be two days long. You will have your choice of nearly 50 workshops in addition to four general sessions, a Prayer Breakfast, in addition to the Banquet.

Please check back often as more speakers are confirming regularly! [nrlconvention.com]. Workshops will be posted as soon as we can get the schedule confirmed.

For sure hear and meet Matt and Jim and all the other superb speakers at NRLC 2022 in Atlanta, Georgia!
Another “year of the unborn child” in state legislatures

By Ingrid Duran, Director, Department of State Legislation

Last session, I described the tone of legislatures across our nation as the “year of the unborn child.” Judging by the momentum to protect the most vulnerable among us and their mothers, the 2022 legislative session will be no different. The State Legislation Department is monitoring hundreds of prolife bills. Below is a snapshot of some of the protective laws that state legislatures are considering.

Following in the footsteps of the Texas Heartbeat Law which has already saved well over 3,000 babies—driving abortions down by at least 60%—other states are also pursuing similar bills.

This session, Alabama, Arizona, Minnesota, Missouri, Oklahoma, and Wisconsin have introduced legislation that protects unborn babies from abortion when there is a presence of the baby’s heartbeat, unless there is a medical emergency. These bills also contain the civil enforcement mechanism that has been successful in Texas. Ohio has introduced a bill that is a total ban on abortion with a similar enforcement mechanism as Texas.

Other states are also passing heartbeat protection laws with criminal and civil penalties: Idaho, Nebraska, Oklahoma, and West Virginia have introduced laws protecting unborn babies when there is a heartbeat present. Iowa, Nebraska, and Wyoming have also introduced bills that protect all unborn children from abortion, which will take effect once the United State Supreme Court either overturns Roe v. Wade, or states are allowed to protect the unborn from abortion. These states are commonly known as trigger laws.

Since the United States Supreme Court is reviewing Mississippi’s Gestational Age Act, a law that protects unborn babies at 15 weeks gestation from abortion, other bills contain regulations prohibiting these dangerous pills from being sent through the mail—the so-called Do-It-Yourself abortion. These deadly cocktails must be provided by a qualified healthcare professional and in the presence of the doctor or health care professional; require the reporting of complications as well as other common sense protections. So far, Alabama, Iowa, Kentucky, Minnesota, Mississippi, Nebraska, South Carolina, and South Dakota, have introduced legislation that either provides information on reversing the intended effects of a chemical abortion or regulating chemical abortions or a mixture of both.

With chemical abortions steadily rising, another pressing matter for our movement are protective laws and regulations regarding abortifacients. These laws vary. Some require abortion facilities to inform mothers about the possibility of reversing the intended effects of abortion with Abortion Pill Reversal (APR) Information Laws.

There are also other important pieces of pro-life legislation such as the Born-Alive Infant Protection Act. This legislation requires healthcare providers to render aid to any infant that survives an abortion attempt equal to what they would give a preemie of the same age. Ohio enacted a bill in late December, and it has been introduced in five states: Illinois, Missouri, New York, Rhode Island, and Virginia.

Bills designed to help mothers choose life by providing funding for programs, or create resources for alternatives to abortion, have been filed in Georgia with Betsy’s Law and Oklahoma’s Every Mom Matters Act (EMMA). Missouri has several bills in consideration in order to get the government out of funding abortions. Virginia and West Virginia have introduced bills that protect unborn babies with disabilities from abortion and also provide educational resources for families that are given a diagnosis of Down syndrome, or any other disability, in the unborn child.

In retaliation to all of the positive bills that protect the unborn and their mothers, our opposition has filed a series of bills that would enshrine a right to abortion in their state and expand the abortion-on-demand strategy up until birth that is extremely detrimental to the unborn and their mothers. New Jersey was the first state to enact a dangerous law this session. So far, California, Maryland, Massachusetts, Michigan, and Vermont have filed these types of bills. Other states like Nebraska and Wisconsin have bills repealing existing pro-life protections. It is important to remain vigilant, connect with the NRLC affiliate in your state and help them defeat these deadly bills.

While it is still the beginning of session, I expect that in my next update there will be more news of states enacting laws that protect the unborn child.
Florida’s ban on abortions after 15 weeks is on its way to the House floor

By Dave Andrusko

Lawmakers on the Florida State House Health and Human Services Committee chose to devote their session Thursday to listening to constituents argue for and against a bill that would protect unborn children after the 15th week—HB 5. More than 100 people took the opportunity to speak. The bill had previously passed House Professions and Public Health Subcommittee.

“HB 5 now heads to the House floor for final discussion and debate in the coming weeks,” Forrest Saunders reported. “Senators would get it next, as they also near approval of a similar version.

Pro-life Gov. Ron DeSantis has signaled his support.

“I think there’s a lot of pro-life legislation, and we will be welcoming it,” DeSantis said during a press conference at the state Capitol, “Having noted, “DeSantis joined five other governors in signing a July amicus brief asking the Supreme Court to overturn Roe by supporting the Mississippi law.”

The pro-life legislation “would allow exceptions if the mother’s life is at risk or if the unborn baby has a fatal anomaly,” Isaiah Bilge explained. “It also would create new requirements for hospitals and abortion facilities to report data to the Florida Department of Health, including measures to help identify victims of human trafficking, to keep track of babies who are born alive in abortions and to reduce infant mortality.”

Rep. Erin Grall, a cosponsor, said, “The state’s interest in protecting unborn life is clearly compelling at 15 weeks when the child has fully taken the human form.” She added, “There is no right to an abortion in the federal constitution or the state constitution. There is a right to life.”

Forrest quoted Rep. Grall who had said previously that the bill is modeled after a Mississippi law currently under U.S. Supreme Court review, challenging the landmark Roe v. Wade decision.

She called her bill “an opportunity” to ready the state for change.

“We will be saving nearly 5,000 babies a year with this bill in place,” Grall said.
6th Circuit gives Biden administration what it wants: Access to Title X money

By Dave Andrusko

One of the first goals of the pro-abortion Biden Administration was to reopen the federal “Title X” family planning spigot, allowing Planned Parenthood to again receive millions of federal dollars.

Under the Trump administration’s “Protect Life Rule” these funds could not be utilized by facilities that commit or refer for abortions.

That rule brought the family planning program back in line with the program’s founding: to receive money, an entity could not co-locate with abortion clinics or refer clients for abortion as a method of family planning.

But Biden changed it back “to how it ran under the Obama administration, when clinics were able to refer women seeking abortions to a provider,” according to Julie Carr Smyth, of the Associated Press. But in actuality the Biden Administration went even further to mandate that recipients counsel and refer for abortions.

NRLC strongly opposed the “proposed rule change that would eliminate the requirement that Title X funding recipients maintain a physical and financial separation of family planning from abortion activities. In addition, the rule change would illegally mandate that Title X recipients counsel and refer for abortion.”

In other words, the rule change “would allow the creation of an accounting gimmick that enable Title X funds to support abortion services,” as NRLC President Carol Tobias explained in a letter to HHS Secretary Xavier Becerra. It also violated long-standing federal laws intended to protect the right of conscience.

Ohio Attorney General Dave Yost and 11 other attorneys general then sued last October. “Yost, in the statement, said the purpose ‘was to build walls to prevent the funding of abortion with taxpayer money – which remains illegal,’” John Caniglia for Cleveland.com reported.

“You can’t ‘follow the money’ when all the money is dumped into one pot and mixed together,” Yost said.

U.S. District Judge Timothy Black had no patience for that argument. Last month Black “denied a preliminary injunction that would have temporarily paused the rules,” Smith wrote. “The 12 states appealed his decision to the 6th Circuit, which said they failed to prove they’d be irreparably harmed by the rules going into effect.”

Last week the attorneys general from Alabama, Arizona, Arkansas, Florida, Kansas, Kentucky, Missouri, Nebraska, Ohio, Oklahoma, South Carolina and West Virginia received a second setback.

The federal appeals court said, for now at least, that federally funded family planning clinics can continue to make abortion referrals.

“The 6th U.S. Circuit Court of Appeals in Cincinnati denied a request by the 12 states to pause rules for the federal government’s family planning program while their case is heard,” Smith explained. “The states were eager to stop implementation before the next round of federal grants starts rolling out in March.”
AG Fitch optimistic about fate of Mississippi’s “Gestational Age Act”

By Dave Andrusko

We’ve reposted a number of items from Mississippi Attorney General Lynn Fitch.

She has brilliantly defended Mississippi’s “Gestational Age Act”– Dobb’s v. Jackson Women’s Health Organization—which extends legal protection to unborn children after 15 weeks. “These cases are complex and difficult but also fundamental to a functioning democracy, not just in Mississippi but across America,” she said. Earlier she asks for room for “the natural political discourse our Constitution envisions.” Roe and Casey squeeze this dialogue in unhealthy ways, allowing for changes only in the margins.

16WAPT sat down with Attorney General Fitch recently to talk about the case. She told Megan West, “When you looked at the majority of the court you could feel a good sense of they know it’s time to do something, and truly I don’t think they would have taken up our case if they weren’t prepared to make some type of overture against Roe v. Wade and for the Dobbs case.”

The way she approached the case was evident in her reply brief rebutting criticism of the law by the pro-abortion Center for Reproductive Rights (CRR).

Building on its earlier brief, Attorney General Fitch’s office begins their amicus by noting

For 30 years, no party has had to defend Roe v. Wade. No party has ever had to defend Planned Parenthood of Southeastern Pennsylvania v. Casey. Finally forced to defend those cases, respondents drive home the stark reality: Roe and Casey are indefensible. At each turn, respondents’ “effort to defend” office; it was and is inherently a function of improving medical technology which is constantly improving.

“Saying that a state’s interest becomes compelling at 15 weeks’ gestation is just as plausible as saying that it becomes compelling at viability,” said the brief. Such “line-drawing” is by nature a legislative task.

In a key section, the brief notes that an asserted fundamental right must be “deeply rooted in this Nation’s history and tradition, rather than in “the policy preferences” of judges.

“A right to abortion has no such roots. Like Roe, Casey cast the Constitution and precedent aside to recognize a unique due-process right that ends a human life.”

Fitch rebuts many standard pro-abortion talking points such as the “need” for abortion in order for women to advance in the professions. This is “demeaning” and

It is false, but not new. Roe’s author claimed that overruling Roe would “cast into darkness the hopes and visions” of “millions of women.” That claim, picked up by respondents, boils down to the view that millions of women have a meaningful life only because 50 years ago seven men in Roe saved them from despair—and that women’s success comes at the cost of ending innumerable human lives. That is the debased view that Roe and Casey have produced. It is time to get rid of them…

Women’s extensive political participation and share of the population ensure that they strongly influence public policy — and would do so without a judicially managed right to abortion.

What about fetal pain? “As respondents do with women’s health, so too with fetal development: they urge this Court to keep the people on the sidelines as knowledge of unborn life marches forward.”

Respondents invoke abortion advocates to claim a “medical consensus” against the view that the unborn can experience pain before viability. The unborn develop “neural circuitry capable of detecting and responding to pain” by 10-12 weeks’ gestation. And recent research has found that “the cortex is not required for either consciousness or suffering.”

This Court need not resolve who is right on fetal pain. It need only recognize that knowledge changes and that the Constitution does not bind States to a long-outdated view of the facts.

It is noteworthy that the studies on fetal pain cited by the Center for Reproductive Rights are old and outdated.

Finally, the brief makes the powerful case that the abortion issue is best left to the states.

“Not treating abortion as a fundamental right treats it as the Constitution does most important issues: for the people to decide. …When this Court returns this issue to the people, the people can debate, adapt, and find workable solutions. It will be hard for the people too, but under the Constitution the task is theirs—and the Court should return it to them now.”
The case against chemical abortion

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

Chemical abortions are on the rise. They provide a convenient way for the abortion industry to extend its reach—and are quickly becoming the most common method of abortion. These drug-induced abortions (called “medication abortions” by supporters) haven’t typically generated the same level of opposition as abortions later in pregnancy or those that use viscerally brutal methods like dismemberment.

But they should. Chemical abortions threaten to produce—indeed, have already produced—a large-scale destruction of children and a range of dangers to their mothers.

Here’s the case against them.

Chemical abortion isn’t ‘medication’

The first sign that something’s wrong with chemical abortion? It’s universally described by its proponents as “medication” even though it is demonstrably the opposite.

Medication treats or prevents disease, but chemical abortion doesn’t do that. It doesn’t restore health or save a life. On the contrary, it deliberately impairs healthy reproductive functioning in order to end a life. That’s its purpose.

Chemical abortion is usually a two-drug process. The first drug, mifepristone, blocks the pregnancy hormone progesterone, preventing the unborn child from receiving nutrients and support. It is literally a poison that causes death by starvation. The second drug, misoprostol, induces contractions to evict the child from her natural environment.

Whether that’s morally right or wrong, it’s not “medication.” It’s the death of a living, growing individual.

Chemical abortion takes a life that really matters

Many people think chemical abortions happen when unborn children are too small and undeveloped to really matter. These abortions remove amorphous “pregnancy tissue,” not babies, Planned Parenthood says.

But abortion practitioners offer chemical abortions as late as 11 weeks’ gestation. That’s long after an unborn child has a heartbeat. It’s well after she has detectable brain waves. It’s after organs and major body systems have formed and the child looks recognizably human.

The most important biological fact, though, is that the unborn child—not just at 11 weeks, but since coming into existence at fertilization or conception—is a distinct and living member of the species Homo sapiens. She isn’t mere tissue. She is, rather, a whole organism developing herself through the different stages of her life as a human being.

Those poisoned to death by chemical abortions are not a different kind of thing from us. They are what each of us once was.

And each of us—every single one—has value and human rights simply by virtue of being a human being. It doesn’t matter if we are small, or immature, or dependent on other people. After all, big humans don’t count more than small humans. Teenagers are physically and mentally superior to toddlers, but that doesn’t make them any more valuable. Infants depend entirely on their parents, but that’s no rationale for neglecting them.

Human embryos and human fetuses are our fellow human beings. And human beings are important. They deserve our respect, and they deserve the protection of our laws.

Chemical abortion risks genuine harm to women

Chemical abortion doesn’t just destroy a young human being. It poses risks to the mother’s health, too.

A large Finnish study found that chemical abortions produced “adverse events” in 20 percent of cases—almost four times the rate of immediate complications as early surgical abortions. That shouldn’t be surprising. Chemical abortions take longer than surgical ones. They cause more blood loss. They have a significant failure rate and can lead to infection. And, in some cases, they mask the presence of a deadly ectopic pregnancy because their expected symptoms are very similar.

The FDA reports 26 deaths of women in the U.S. (and thousands of other complications) connected to chemical abortion, and the inadequacies of U.S. reporting requirements mean that some complications go unreported.

And yet, in the years since these drugs first became available, proponents have succeeded in loosening or even removing important safety regulations. Now, following a recent change at the FDA under President Biden, abortion practitioners can send abortion drugs to women through the mail—with no in-person medical examination beforehand.

In-person screening can, among other things, verify gestational age (complications increase later in pregnancy) and rule out the possibility of ectopic pregnancy. The absence of such screening figures to only exacerbate the risks. One recent study found that 6 percent of patients visited an emergency room or urgent care center following a mail-order

See “Chemical,” page 16
Pro-abortio groups and their allies have a long history of obliterating the truth; this one is particularly cruel

By Laura Echevarria, NRL Director of Communications and Press Secretary

Going to the hospital to deliver a baby is exciting and stressful. Each delivery—just like each mother and baby—is different.

With each of my pregnancies, I had the added stress of having pregnancy induced hypertension and was placed on bedrest for several weeks. With my third delivery, my blood pressure reached life-threatening stroke levels and I was sent to the hospital to be induced. Despite the dangers, my husband and I were excited to meet our surprise baby—a boy—who was very wanted, but a still a surprise after we were told we would struggle to have children.

My sister and my parents had our five-year-old daughter and 17-month-old son well in hand while my husband and I were in the hospital room filling out paperwork. Shockingly, I was part way through the obstetrics intake form when I saw a question asking if in my previous pregnancy history if I had a history of abortion.

There was no option for a miscarriage.

I asked the hospital representative how I should respond since I lost my second baby through a miscarriage early in the pregnancy.

Her reply was to check the abortion box.

But, I argued, an induced abortion and a miscarriage are not the same thing.

She told me to check the box anyway.

After further futile argument, I wrote in “miscarriage” and noted that it was a spontaneous abortion, not induced, and circled my answer.

Yesterday, I checked the obstetrics intake form for the local hospital where my children were born (forms are now available online), and the hospital has since changed it to have mothers specify if they’ve had an abortion or miscarriage. But in 2004, I was deeply offended that the loss of my second baby was placed in the same category as an induced abortion.

This week, Rep. Katherine Clark (D-Mass.) used her miscarriage experience to question pro-life laws designed to protect living unborn babies from abortion. I was immediately reminded of my argument with patient records and the rebellious note I wrote on the intake form.

Rep. Clark argued that because her baby had died in utero, and she had an incomplete miscarriage, the surgical procedure she needed to remove her deceased baby could have been denied to her due to the wave of pro-life laws that have passed in the states in recent years.

This is not true.

Rep. Clark was trying to equate the treatment for an incomplete miscarriage with surgical abortions. But nothing about abortion is natural.

Rep. Clark does a serious disservice to the millions of women, like me, who grieved and still mourn the loss of our babies after a miscarriage.

Just like that moment in the hospital room when I realized that the hospital didn’t care to classify a spontaneous abortion separately from an induced abortion, I was deeply, deeply offended.

Rep. Clark was willing to mislead American women in order to score political points which was reminiscent of another time in the pro-life movement.

In 1995, Congress held hearings on the Partial-Birth Abortion Ban Act, which was based on a model law developed by National Right to Life. The debate over the bill led to over a decade of work by NRLC and its affiliates to see the law passed on the federal level and in many states which the Supreme Court later ruled to be constitutional.

At one point in the Congressional hearings over the partial-birth abortions, pro-abortio groups and affiliated “experts” testified that anesthesia administered to the mother crossed over the placental barrier and killed the unborn baby before a partial-birth abortion procedure was done.

This alarmed anesthesiologists who were

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The case against chemical abortion

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abortion. And research into such “telemedicine abortions” in the United Kingdom (where they have been legal for the last two years) has shown increases in post-abortion emergency care.

But the dangers don’t end there. Some rural women who receive abortion drugs live far away from the help they would need in the event of serious complications. Moreover, these at-home abortions make it much harder to detect and prevent pressure and coercion.

A 2021 survey found 82 percent of British general practitioners were concerned about individuals falsely obtaining abortion drugs; 87 percent were concerned about the possibility of unwanted abortions coerced by domestic abusers.

Chemical abortions—especially when sent through the mail and ingested at home without supervision or in-person evaluation—raise serious worries about the health and safety of women. We should not ignore them.

Chemical abortion isn’t good for anyone

The reality is that chemical abortions aren’t good for anyone. They aren’t medicine. They are a poison that kills unborn human beings and, too often, harms their mothers as well.

So, as these abortions spread, what can pro-lifers do?

We can inform others about the dangers to women and about the humanity of unborn children. We can advocate legislation to protect against chemical abortions and to require safety standards. We can support positive alternatives for pregnant women facing difficult circumstances. And we can promote abortion pill reversal (APR), an important new option that allows women who change their minds midway through an abortion to counteract the effects of mifepristone and save their baby.

The battle against chemical abortion has never been more important, and every pro-lifer needs to be part of it.

Pro-abortion groups and their allies have a long history of obliterating the truth; this one is particularly cruel

From page 15

hearing from pregnant mothers who were terrified that their babies were going to die if they had to have a surgical procedure involving anesthesia. In a January 1996 memo to members of the media, NRLC’s then-Legislative Director, Douglas Johnson, wrote:

However, the American Society of Anesthesiologists (ASA) recently became so distressed by these claims [that anesthesia administered to the mother killed the unborn baby] that the ASA requested the opportunity to testify before the Senate Judiciary Committee. In its testimony, the ASA said that (a) the claim that anesthesia kills a fetus/baby has “absolutely no basis in scientific fact,” and (b) the claim is “misleading and potentially dangerous” to pregnant women, since it may deter them from consenting to be anesthetized for medically necessary procedures for fear of harming their babies.

Pro-abortions groups and their allies have a history of rewriting the truth to bend it to their will but trying to draw lines equating miscarriages with abortions is a guaranteed way to offend millions of American women.

Women just like me.
Biden-Harris administration launches task force to ‘protect and bolster’ abortion

By Bridget Sielicki

The Department of Health and Human Services (HHS) has launched a Reproductive Healthcare Access Task Force designed to “protect and bolster reproductive health, rights, and justice,” which includes expanding abortion access. The initiative is just the latest move by the Biden administration to promote the abortion agenda.

The task force was announced on January 21. In a press release announcing the initiative, HHS Secretary Xavier Becerra declared that “more must be done to protect and bolster sexual and reproductive health.” The task force is said to consist of senior-level members in the HHS who will “identify and coordinate activities across the Department to protect and bolster access to essential sexual and reproductive health care.”

In describing the need for the task force, the press release states that “(the) Supreme Court’s decisions in three reproductive health care cases this term could both impact the right to abortion and have a chilling effect on the provision of other essential reproductive health services.”

After outlining the task force’s objectives, which include eliminating policies that could stand in the way of reproductive rights, and expanding reproductive healthcare — i.e., abortion — both nationally and globally, the HHS statement reiterates that it is fighting back against those states that have passed abortion restrictions, saying, “Domestically, more state abortion restrictions were passed in 2021 than any other year since Roe v. Wade was decided... Such barriers have had implications for access to reproductive health care and can have far-ranging consequences.”

The statement goes on to make several wild claims, including one that says that restrictions like parental notification laws and gestational age restrictions lead to an increase in infant mortality. As Live Action News has previously explained, killing a child in the womb does not solve the problem of infant mortality, and it will not save the lives of newborns. Other claims say that abortion restrictions compound existing racial and socioeconomic health inequities in infants, and that women who are denied an abortion are more likely to face economic hardships. But abortion is not the solution for poverty, and it will not and has not led to more economic equality.

While the statement does point out some obvious facts — infant mortality is a problem, economic instability is real, and the cost of pregnancy is high — abortion is not the solution to any of these problems. A White House task force designed to expand abortion as a kind of blanket fix to these and other issues completely misses the mark. The taking of innocent human lives will never solve any of society’s problems.

Editor’s note: This article was published by Live Action News and is reprinted with permission.
Study finds ‘significant’ gap in FDA’s reporting of abortion pill complications

By Nancy Flanders

Just one month after the FDA loosened safety restrictions on the dispensing of the abortion pill, the American Association of Pro-Life Obstetricians and Gynecologists (AAPLOG) said a study has found a “significant” gap in the federal government’s reporting of complications associated with the abortion pill.

In December, the Food and Drug Administration loosened REMS (Risk Evaluation and Mitigation Strategy) safety rules that had been in place regarding the abortion pill for 20 years, no longer requiring an in-person visit with a doctor, and allowing the drug regimen to be distributed by mail. The FDA said that its data from adverse events (AE) reporting is what led to the decision. However, AAPLOG has said there is a “significant discrepancy” between the FDA data and reporting from the very sources that gave the FDA the data it is citing.

According to Fox News, the FDA used adverse events reporting from Danco Laboratories, which manufactures and dispenses the abortion pill and uses AE reporting from Planned Parenthood. This means Planned Parenthood would report adverse reactions from the abortion pill to the company that makes the abortion pill, which then would report those reactions to the FDA.

Dr. Donna Harrison, co-author and CEO of APPLOG, told Fox News that 2009-2010 allowed the best opportunity to compare the data sources because a “situation which allows a direct comparison does not exist outside of 2009 [and] 2010.” In fact, the reporting of any abortion pill complications except for death has not been required of the abortion pill’s manufacturer at all since 2016. In comparing the 2009-2010 data from the FDA’s online reporting system, actual adverse event reports obtained via the Freedom of Information Act [FOIA], and data from previous studies utilizing Planned Parenthood information, including one by researcher Kelly Cleland, researchers were able to find that the numbers don’t add up.

According to the study, Cleland found that 1,530 adverse events from the abortion pill were reported from Planned Parenthood alone in 2009 and 2010 (which was admitted to possibly being a low number). The FDA Adverse Event Reporting System [FAERS] online dashboard includes — from all abortionists — 664 adverse events. Yet, the FDA released only 330 adverse events through FOIA.

The number of adverse events published in Cleland’s study is significantly higher than those reported in FAERS, which is the opposite of what the numbers should look like. If the Planned Parenthood adverse events reported by Cleland are being reported to the FDA, they should also appear in FAERS.

“Our analysis shows significant discrepancies between the number of AERs identified by Planned Parenthood as reported in Cleland’s study and the number in the FAERS database, and the number received under FOIA,” the authors of the study wrote. “There are also discrepancies in the number of hospitalizations, ectopic pregnancies, and ongoing pregnancies.”

If it is true that Planned Parenthood reports AEs to Danco and Danco then reports them to the FDA, then either Danco did not report a significant number of those AEs to the FDA, or the FDA did not include them in FAERS. This raises the question of whether FAERS includes any or all complications reported by the other 63% of abortionists, which in turn, raises the question of whether or not the FDA ignored data that clearly showed the dangers of the abortion pill and the need for the safety rules it chose to do away with.

Regardless of the FDA’s 2016 decision to no longer require abortion pill AEs aside from death, FDA Commissioner Janet Woodcock said that the FDA’s decision to end the REMS safety rules surrounding the abortion pill was based on AEs from January 2020 to January 2021 — when reporting was not even required. Therefore, it appears the FDA used faulty and lacking data to allow the abortion pill to be dispensed via telemedicine, putting women’s lives at risk and propping up the abortion industry.

Dr. Nisha Verma of the pro-abortion American College of Obstetricians and Gynecologists (ACOG) told Fox News that the group supports the FDA’s decision, claiming it used “[d]ecades of rigorous scientific data” that proves the abortion pill “is safe and effective.” The abortion pill has been found to be four times more dangerous than first-trimester abortion, and without safety rules in place, women are even more at risk from complications.

Editor’s note. This appeared at Live Action News and is reposted with permission.
Almost four out of five babies born prematurely between 22 and 28 weeks gestation survive to discharge from the hospital according to a recent study.

The study, “Mortality, In-Hospital Morbidity, Care Practices, and 2-Year Outcomes for Extremely Preterm Infants in the US, 2013-2018,” by Dr. Edward F. Bell of the University of Iowa, found that from 2013 to 2018, with infants born between 22 and 28 weeks gestation, “survival to discharge occurred in 78.3% and was significantly improved compared with a historical rate of 76.0% among infants born in 2008-2012”.

This means that almost four out of five extremely prematurely born babies survived and were able to be assessed at 22-26 months corrected age (22-26 months from their due date) for a number of health and functional outcomes.

In the UK it is legal to have an abortion up to 24 weeks. Many of the babies in this study were born under the current abortion limit in the UK. In the UK, it is legal to abort a baby up until birth if that baby has a disability.

In October 2020, a severely premature baby was born in Scotland almost 2 weeks below the abortion limit. Sofia Viktoria Birina weighed only 500g, but by February last year, she was healthy enough to be sent home with her parents.

Right To Life UK spokesperson, Catherine Robinson, said: “Four out of five babies born between 22 and 28 weeks gestation survive to be discharged from the hospital. This is incredible and casts an extremely negative light on our cruel abortion laws”.

“Part of the rationale for setting the abortion limit in the UK at 24 weeks concerns the alleged fact that babies born before the point cannot survive. But as we have known for a long time now, and as this study confirms, babies as young as 22 weeks (and even younger) can survive and go on to thrive. It’s time our Government gets with the times, follows the science, and changes abortion law to reflect the obvious humanity of these young babies”.

In the UK it is legal to have an abortion up to 24 weeks. Fewer than half of patients who have an abortion in the UK do so in the first trimester. Many of the babies in this study were born under the current abortion limit in the UK. In the UK, it is legal to abort a baby up until birth if that baby has a disability.
“Countless families with children with Down syndrome have lives marked by love and joy, lives that have been changed for the better”

By Dave Andrusko

Amy Julia Becker is a name known to many of our readers. We’ve commented on several of her terrific essays in this space. Her webpage says she is an “Award-winning writer and speaker on personal, spiritual, and social healing.” She writes with great eloquence stories about children with Down syndrome—including her own now 16-year-old Penny, who has Down syndrome.

I will talk about her brilliant essay that appeared recently in the New York Times in a moment. First I’ll quote from a piece she wrote that appeared eleven years ago at Patheos.com.

I hate the thought that there will be fewer people with Down syndrome in the world as a result of advances in prenatal testing. As I’ve written before, it impoverishes us all when we selectively abort babies based upon particular characteristics (gender, for instance, in China and India… disabilities here in America). But I also hate the thought that mothers of children with Down syndrome think they are alone. Yes, some women choose abortion when they see a karyotype with three 21st chromosomes. But many other choose life.”

Her February 1st essay touches on many aspects, but I would like to focus on the prejudicial manner in which too many doctors still respond to a prenatal diagnosis of Down syndrome and Ms. Becker’s observation about mothers of children with Down syndrome feeling “alone.”

She is not, let me make clear, guilt tripping the “67 percent of American women who received Down syndrome diagnoses on prenatal tests [who] had abortions.” She is writing non-judgmentally:

I understand the fear many women feel in facing a prenatal diagnosis. I wish more of them knew that countless families with children with Down syndrome have lives marked by love and joy, lives that have been changed for the better. While I see every abortion as a tragic loss of life, I am especially saddened for the families who have chosen abortion because they feel scared or alone at the thought of raising a child with a disability.

Too many pediatricians offer too much bad news too early—most often prenatal but also shortly after birth. Becker writes:

According to the National Council on Disability, 86 percent of medical providers talked about termination of the pregnancy after a prenatal diagnosis, whereas only 37 percent discussed continuing the pregnancy. Furthermore, genetic counselors and doctors who offer information overwhelmingly relate biomedical concerns without describing the social supports available for families, or the self-reported happiness of most people with Down syndrome.

Prenatal testing, in the hands of an unhelpful medical staff, obviously tilts a prenatal decision in a frightful direction. But it also rests on a terrible assumption:

Testing rests on an assumption that desirable children conform to a norm of development, alongside a corresponding thought that undesirable children deviate from that norm cognitively or physically. You can see the result of these assumptions in the high abortion rates for fetuses with Down syndrome.

The assumptions behind our prenatal testing programs also condition parents — and society as a whole — to see our kids as valuable according to their physical strength, intellectual capacity and social acuity rather than setting us up to receive their lives as they are given.

She ends with a very important insight:

These decisions appear to be individual ones, and yet every decision about whether or not to bring a child with a disability into our world is made within a social context. Women who choose to continue or to terminate pregnancies after receiving a prenatal

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Abortion down 60% since passage of Texas Heartbeat Law

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is embodied by every child saved.”

“For over 150 days, our work has saved an estimated 100 babies per day,” director of media and communication Kimberlyn Schwartz said in the statement. “Our impact is only just beginning as more states seek to replicate our success and as we look to the Mississippi case that could overturn Roe this summer.”

S.B.8.—Texas’s Heartbeat Law—has been up and down the legal ladder ever since it took effect September 1. U.S. District Judge Robert Pitman in Austin, the trial judge, briefly blocked S.B.8. in October. His order was quickly put on hold by the 5th Circuit Court of Appeals.

The appeals court in turn “sent the case [Whole Woman’s Health vs. Jackson] to the state Supreme Court for certification, saying they couldn’t answer the enforcement question, which they say is a matter of state law,’” Eleanor Klibanoff wrote. Pro-abortionists desperately wanted the case send back to Judge Pitman.

The narrow issue before the Texas Supreme Court is “whether the state officials specified in the U.S. Supreme Court’s decision last month have the power to enforce the abortion law,” The New York Times’ Adam Liptak reported. The Supreme Court, in its December 10th opinion, said the legal challenge could continue but only against Texas licensing officials who oversee nurses, physicians and pharmacists.

“[T]he U.S. Supreme Court threw out most challenges to the law and left only state medical licensing officials as possible lawsuit targets because they can revoke a doctor, nurse or pharmacist’s license if they violated the law,” according to Klibanoff.

Rep. Bryan Hughes, author of SB 8, said in a message to The Dallas News, “these numbers are proof that the Texas Heartbeat Law is working. Texas is now the first state to effectively stop most abortions.” He added, “There is still more work to do, and in Texas we will continue to save the baby and support the mother.”
Kenyan Teen forced to abort eight month old unborn baby

By Dave Andrusko

A 14-year-old girl is in a Kenyan hospital after being forced to abort her eight-month-old unborn baby boy. The girl is an orphan and the suspected father is the husband of her maternal aunt with whom she was staying. The Standard, a Kenyan newspaper, reported that the girl was victimized both before and after she became pregnant.

“Since the girl is a total orphan and had nowhere to seek asylum, she was obliged to comply with the directives of the guardians,” according to James Omoro.

“According to the girl’s headteacher who was in a team that took her to the hospital, the abortion came after the minor’s aunt threatened her that she would not live with the expected baby in her house,” Omoro wrote.

Her predicament began last Friday when she was given a drug that she chewed.

The girl suffered more pain on Sunday when she aborted the baby boy.

“The girl has said she aborted a foetus aged eight months. The foetus was carried by the aunt’s husband in a basin, walked out of the compound and discarded it at an unknown place,” the headteacher said.

After the abortion, the girl was taken to the man’s maternal uncle’s home at a village in the neighbouring Suba sub-county on Monday morning to disguise what had happened.

The headteacher told authorities, “The girl has said she aborted a foetus aged eight months. The foetus was carried by the aunt’s husband in a basin, walked out of the home compound and discarded it at an unknown place.”

Omoro added, “After the abortion, the girl was taken to the man’s maternal uncle’s home in a basin, walked out of the home compound and discarded it at an unknown place.”

The Standard. “Even neighbours had raised the concern. His wife doesn’t live with him together.”

The DEVLINK Executive Director Esther Soti called on the government authorities to accord the girl justice.

“The man suspected to have defiled this girl disappeared after realizing that the girl is in the custody of the police,” said Soti said.

Soti said they want the girl to be protected and enabled to go to school.

“The prime suspect in this matter is the minor’s guardian. This means she cannot be part of that household again,” Soti added.

Mbita Sub-county Police Commander Stanley Atavachi said they had apprehended the girl’s aunt after her husband disappeared.

The lady has been detained at Mbita Police Station.
NRLC Honors Dr. Mildred Fay Jefferson, the first African-American woman to graduate from Harvard Medical School, and NRLC President from 1975-1978

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

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

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

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

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

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

The video can be seen at www.youtube.com/watch?v=UB3o-QazcNg

"The doctor who willingly accepts destroying life will have no grounds on which to object if the state should compel that doctor to destroy life."
—Dr. Mildred Jefferson
Major British newspaper admits what pro-lifers already know: back-alley abortions are a myth

By Jonathan Van Maren

A recent correction by the British publication *The Telegraph* is rather shocking — not because it got abortion numbers wrong, but because it bothered to admit it.

Major abortion corporations such as Planned Parenthood and Marie Stopes have been pushing to legalize abortion in developing countries for years, a fact exposed in Nigerian pro-life activist Obianuju Ekeocha’s brilliant book *Target Africa: Neo-Colonialism in the 21st Century*.

Backed by billionaires such as Bill Gates, as well as powerful organizations such as the United Nations, the European Union, the Biden administration, and the World Health Organization, poor nations in Africa, Latin America, and South America are under almost constant pressure to remove their protections for pre-born children and allow the bloody carpetbaggers of Big Abortion across their borders.

The playbook is almost always the same. Rich nations dangle foreign aid in front of poorer nations, demanding that they conform to post-Christian values or face being cut off. The Western media works to paint these countries not as family-oriented nations that love and value children, but as bitter hellscapes where untold millions of women die in back alleys. They never claim that they are seeking to legalize abortion for their own profit, or because their values demand it — they always claim it is for the good of the people they are demanding accept it. No lie is too large not to find its way into print.

This makes a recent correction by the British publication *The Telegraph* rather shocking — not because it got abortion numbers wrong, but because finding were relied on and in which they stated that 12,000 women die from back street abortions annually.

However, a closer examination of the joint report, which is publicly available, shows that this estimate of 12,000 women dying from backstreet abortions annually is unsupported by the data contained in the report. In fact the number of deaths from back street abortion in Malawi is likely to be far lower. For example, a report published by the World Bank Group in conjunction with the WHO, UNICEF, UNFPA, and the United Nations Population Division in 2019 estimated 2,100 maternal deaths in total in Malawi each year, and only a small proportion of these are attributable to unsafe abortion. An analysis of the varying data by Dr Calum Miller can be found in this published report ...

We are happy to draw wider debate to our readers’ attention.

Again, this is a staggering admission because it directly contradicts the propaganda constantly pumped out by the media in the service of Big Abortion. Western nations, as Ekeocha put it in *Target Africa*, are waging “war against the bodies of African women,” and misinformation about back-alley abortions are an essential part of this war.

Abortion must be presented as in the best interests of the women who are being told that they need it, paternalism be damned. This is happening, it must be pointed out, in countries where statistics regularly indicate that the desired number of children is, at a minimum, six.

Some years back, I was in Tanzania and spent an evening having drinks and chatting with one of the locals. He asked me about my job, and I told him that I worked for a pro-life organization. He wanted to do more, and I explained that in Canada, three hundred babies are killed in the womb each day.

He was stunned. How is it, he asked, that in countries that were so modern and so rich, we could do things that the poorest of his own countrymen would know was obviously murder.

I had no good answer for him. I still don’t.

*Editor’s note. This appeared at Life Site News and is reposted with permission.*
President Biden’s average job approval sinks to below 40%

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rating is 38/48). CNN had Biden at +1 back in October, but that’s as good as it’s been for Biden.

York does a masterful job adding two other key indices. First, the direction of the country:

Another poll staple is the question of whether one believes the country is on the right track or whether it has gotten off course. Most of the time, most people believe the country is off course in some way or another. But the number has gotten quite high recently — about two-thirds believe the country is on the wrong track. That points toward change.

Then, the generic ballot:

This is the classic question on a poll: If the election were held today, would you vote for the Republican or the Democrat to represent you in Congress? Over the years, Democrats have almost always had the lead in the generic ballot question. But about three months ago, the GOP took the lead and is now up by four points, 47.6% to 43.6%, in the RealClearPolitics average.

Going from bad to worse, read this from CNN. It is a real signal that this fading cable news outlet understands how much trouble he—and by extension vulnerable Democrats—are nine months out from the mid-term elections.

In their opening sentence, Jennifer Agiesta and Ariel Edwards-Levy write

Nearly 6 in 10 Americans disapprove of how Joe Biden is handling his presidency, with most of that group saying there’s literally nothing Biden has done since taking office that they approve of.

When asked to name a single thing Biden had done they approved of, 56% of those who disapproved of Biden’s overall performance said things such as “I’m hard pressed to think of a single thing he has done that benefits the country.”

It’s not just the blunt numbers, bad as they are, that jump out at you.

“Biden also continues to have more strong detractors than he does fervent supporters: 41% of Americans disapproved strongly of his performance as President versus 15% who strongly approved,” Agiesta and Edwards-Levy wrote. “Some of the shift in Biden’s numbers comes from a change in Americans’ partisan tilt: Republicans and Democrats were about at parity in the new poll, with fewer identifying as Democrats than in other recent CNN polling.”

(Notice how they slip in the parity between self-identified Democrats and self-identified Republican. Democrats virtually always have an edge.)

“The President’s ratings have fallen across the board, the survey found,” according to Agiesta and Edwards-Levy. “Just 41% approved of the way he’s handling his job while 58% disapproved, a significant drop from his approval numbers in CNN polling last year. Just 36% of independents and 9% of Republicans approved.”

Stay tuned. We will keep you up to date on the latest numbers all the way up until the mid-term elections on November 8.
WASHINGTON – The National Right to Life Committee (NRLC), the federation of affiliates in all 50 states and the District of Columbia praised a report published by Texas Health and Human Services Commission showing that abortions in the Lone Star State dropped by 60% in the first month after the state’s Heartbeat Act went into effect. The law was championed by National Right to Life’s state affiliate, Texas Right to Life.

According to the Commission, in August 2021, there were more than 5,400 abortions statewide. In September, after the Texas Heartbeat Act was allowed to go into effect, the number of abortions dropped to just under 2,200.

“Nearly 3,200 children were saved in just one month following enactment of the Texas Heartbeat Act and more have been protected in the months since,” said Carol Tobias, president of National Right to Life. “We applaud Texas Right to Life for leading the charge to protect Texas mothers and their unborn children from the tragedy of abortion.”

Under the Texas Heartbeat Act, abortions may not be performed after the unborn child’s heartbeat is detectable – generally around the sixth week of pregnancy. Fetology textbooks show that the heart begins to beat in the developing child between 18 and 21 days after fertilization.

Since 1990 when the original artwork was unveiled at the “Rally for Life,” National Right to Life’s long-running Media Impact Campaign has continually worked to educate Americans that “Abortion Stops a Beating Heart.” That simple truth has appeared on bumper stickers, billboards, television, and radio ads, print ads, t-shirts, and countless other places in the intervening 30 years.

“Our nation’s laws need to follow the science, and the science tells us that abortion stops the heartbeat of a living, unborn baby,” said Tobias. “We look forward to the day when the heartbeats of all unborn children are protected by our laws.”

The report from the Texas Health and Human Services Commission can be found at https://www.hhs.texas.gov/about/records-statistics/data-statistics/itop-statistics

“Countless families with children with Down syndrome have lives marked by love and joy, lives that have been changed for the better”

From page 20

Diagnosis are not making solely personal decisions. They are making decisions that reflect their communal and social reality.

And then

These decisions both create and advance a less diverse world, a world less tethered to the limitations and vulnerabilities that invite us into relationships of mutual care and concern for one another.

What would an example be of the correct use of prenatal testing?

Done right, prenatal testing could allow parents to prepare well for the birth of their children. But without broad social acceptance of people with disabilities, without a medical establishment that conveys the positive social situations of many people with disabilities, and without funding for accurate and up-to-date information in the face of a prenatal diagnosis, more and more women will face decisions about their pregnancies without the support they deserve. And the more we assume that prenatal diagnoses of Down syndrome will result in abortion, the more we will send a message to all our children that their worth depends on their ability to achieve. Instead of reinforcing structures that welcome only homogeneous bodies and minds as units of production, we need a system that supports and welcomes a diverse range of humans with their particular limits and struggles and gifts.

“We need a system that supports and welcomes a diverse range of humans with their particular limits and struggles and gifts.” You are valuable because you are you, not what you can do or not do, or whether you are “convenient” or not.

Becker’s final paragraph on an earlier essay was the perfect conclusion:

“Penny was not the ‘perfect baby’ that I expected, but she was exactly the baby I needed.”
“Take your time” can be like a healing balm to a woman facing a crisis pregnancy

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

In a society that often runs on microwaveable meals, fast food, and click-of-the-mouse shopping, we are accustomed to obtaining solutions at lightning speed.

But, as the old saying goes, good things take time. Assisting a pregnant woman facing challenging circumstances falls in that category. It takes time to listen to her concerns and to aid her as she discovers the best ways to address them. Compassion and care are not rapid-fire responses, but require careful thought and attention to detail.

A trusting relationship is not developed in an instant, but rather over time. This is why pregnancy resource centers are so vitally important. A caring counselor can visit with a pregnant woman a number of times, helping her to navigate her journey over a period of weeks. The counselor can become a trusted companion, assisting the woman throughout her pregnancy and beyond. She can fill in the gap when a pregnant woman is abandoned by her mother, the father of her child, or her friends, giving her the support needed to make life-affirming decisions.

Whenever my parents needed to provide me with reassurance as I faced a daunting task, they said “take your time.” This encouraging phrase can be like a healing balm to a woman wounded by life. It takes time to make a decision to parent or to place a child for adoption. It takes time to adjust to living for two rather than living only for oneself.

Time + care equal love. Pregnancy center staff and volunteers genuinely love the women they serve, offering hope at a time which can be marked by much darkness.

Protecting life, cherishing life, and preserving life all take time. And in that space of time, true miracles can occur. Hearts can be healed. Doubts can be erased. The endless possibilities of life can once again be recognized, and a child can be saved.
Huge updates on the Georgia’s Women’s Health & Safety Act!

By Elizabeth Reed, Leadership Director

As you know, Georgia Life Alliance and a coalition of pro-life Senators led by our good friends Senator Bruce Thompson and Senator Butch Miller introduced historic legislation that will halt the Biden Administration’s radical expansion of abortion access.

I wanted to reach out and let you know that we have been coordinating with our national and state partners and have reintroduced that bill as SB 456, which is a new version of the same bill that now has 31 Senate Sponsors – more than the required number to pass a bill on the floor of the Senate to let them know we need them to stand against the Biden Administration’s radical expansion of abortion and protect Georgia women.

Miller introduced historic legislation that will halt the Biden Administration’s radical expansion of abortion access.

I wanted to reach out and let you know that we have been coordinating with our national and state partners and have reintroduced that bill as SB 456, which is a new version of the same bill that now has 31 Senate Sponsors – more than the required number to pass a bill on the floor of the Senate it is upheld by the 11th Circuit Court of Appeals this Summer. But it accomplishes our goal of ending telemedicine and direct mail delivery of the abortion pill and requires an in-person visit with an ultrasound prior to any abortion in Georgia.

We will be in the Senate HHS Committee this week and need your help!

Now we need your help to reach out to the members of the Senate HHS Committee.

Once you do that, be sure to contact all of the bill sponsors by phone or email to thank them for their courageous support!

Thompson, Bruce
Kirkpatrick, Kay
Miller, Butch
Gooch, Steve
Hatchett, Bo
Dugan, Mike
Albers, John
Hickman, Billy
McNeill, Sheila
Cowsert, Bill

Robertson, Randy
Hufstetler, Chuck
Summers, Carden
Jones, Burt
Brass, Matt
Mullis, Jeff
Anavitarte, Jason
Payne, Chuck
Burns, Max
Beach, Brandon
Walker, III, Larry
Dolezal, Greg
Harbin, Marty
Strickland, Brian
Burke, Dean
Dixon, Clint
Goodman, Russ
Anderson, Lee
Watson, Ben
Kennedy, John
Tippins, Lindsey

We are proud to stand on the frontline as the leading pro-life group in Georgia and the only statewide organization working with national partners to build a culture of life. Be sure to follow us on social media and watch your inbox for opportunities to help pass this historic pro-life legislation!

Together for Life.
BIDEN HYPOCRISY: Biden Sends Millions of Dollars to Planned Parenthood, then Attends National Prayer Breakfast

By Peter Pinedo

Still claiming to be a “devout Catholic,” Joe Biden headlined this past week’s National Prayer Breakfast in Washington, D.C. His remarks included a call for “unity,” in which he stated, “in a moment of a great division, our democracy is at grave risk. I pray that we follow what Jesus taught us: to serve rather than be served.”

Biden’s remarks at the National Prayer Breakfast come days after he renewed his pledge to push codification of “abortion rights” in Congress. Additionally, the Biden administration recently announced awarding over one million federal tax dollars to Planned Parenthood of South and Greater Texas in direct response to the Texas Heartbeat Act.

Biden has stood vehemently opposed to the Texas Heartbeat Act since the law passed and took effect in 2021. A recently published study by the Texas Health and Human Services Commission (HHSC) confirmed that the Texas Heartbeat Act is saving 100 babies per day and a total of over 14,000 lives since the law took effect. Responding to the Texas Heartbeat Act’s passage, the Biden administration called Texas “backward” and accused the state of launching an “assault on women’s rights.”

In United States v. Texas, Biden immediately lobbed a sloppy lawsuit against the Texas Heartbeat Act that was quickly thrown out by the Supreme Court. The president has yet to explain what exactly about using tax dollars to fund abortion businesses, hatefully attacking Texas Pro-Life values, and attempting to undermine Texas’ defense of the preborn is in any way “unifying” or following “what Jesus taught us.”

Biden went on, “I pray to keep the faith (in) the very promise of America: believing that there’s nothing we can’t do, where every person is created equal in the image of God, no matter where we come from, who we are, what our color or how we choose to pray — or whether or not we choose to pray — (they) deserve to be treated equally throughout their lives.” (Emphasis added)

Biden’s utter hypocrisy has almost never been on fuller display than at the National Prayer Breakfast. Mr. Biden, if you believe that every person is created equally in the image of God, then how can you possibly support the brutal destruction of preborn Life in the womb?

How can you say, on one hand that all humans “deserve to be treated equally throughout their lives,” yet viciously target for murder human beings at their earliest stage of Life?

Biden’s participation in the National Prayer Breakfast was a disgrace.
Protection for unborn children is at the tipping point

By Rep. Chris Smith (R-NJ)

Editor’s note. This appeared in the Washington Times and is reposted with the author’s permission.

Pro-lifers are marching for life in Washington D.C. and throughout the country with fresh hope and heightened expectation. By at least affirming the constitutionality of Mississippi’s law to prohibit elective abortion after 15 weeks— the Supreme Court may finally take a powerful step towards inclusion, respect and justice for the weakest and most vulnerable nearly fifty years after Roe.

In 1973, the Supreme Court abandoned women and babies to what is now the multi-billion-dollar abortion industry and almost 63.5 million unborn children have been killed—a staggering loss of children’s lives that is more than the entire population of Italy.

Today, after decades of noble struggle and sacrifice, pro-life Americans are hopeful that government sanctioned violence against children and the exploitation of women by abortion is nearing an end— although in a very real way, the struggle to defend innocent human life now enters a critically important new phase.

The federal government and the states may soon have new authority to protect.

In 2022, the Supreme Court can begin dismantling the culture of death it has imposed on America.

For decades, right up to this very moment, abortion advocates have gone to extraordinary lengths to ignore, trivialize, and cover up the battered baby victim.

With stolid resolve, they defend the indefensible.

Why does dismembering a child with sharp knives, pulverizing a child with powerful suction devices, or chemically poisoning a baby with any number of toxic chemicals—one method euphemistically called medical abortion—fail to elicit so much as a scintilla of empathy, mercy or compassion from the so-called pro-choice crowd?

Have the physical and emotional consequences to women been underreported?

Why are children born alive during some late term abortions not given the same standard of care and respect as premature infants born at the same age?

President Biden understands the gruesome reality of abortion—this injustice—or at least he once did.

As Senator, Biden wrote to constituents explaining his support for the Hyde Amendment prohibiting taxpayer funding for elective abortion and said that it would “protect both the woman and her unborn child...”. He stated at the time, “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.”

Today, a radically different almost unrecognizable President Biden has weaponized the entire federal bureaucracy to aggressively promote abortion on demand at home and overseas including a full court press to force taxpayers to fund abortion on demand—including repeal of the Hyde Amendment.

Last September, Biden said “it has never been more important to codify this constitutional right” and conveyed to Congress a Statement of Administration Policy (SAP) pledging to sign a House-passed bill which would not only codify abortion on demand until birth but would nullify nearly every modest pro-life restriction ever enacted by the states, including women’s right to know laws in 35 states, parental involvement statutes in 37 states, pain-capable unborn child protection laws in 19 states, waiting periods in 26 states, and more.

By his words and deeds, President Biden is the “Abortion President”.

All of this, however, comes at a time when ultrasound imaging has made unborn babies more visible and with greater clarity than ever before and when breakthrough research has now found that unborn children can feel pain at 15 weeks gestational age—and maybe earlier.

Today, modern medicine treats an ever-increasing number of unborn children with disability or disease as patients in need of diagnosis and life-enhancing treatments before birth.

Unborn babies are society’s youngest patients and deserve protection, not death by abortion.

Science informs us that birth is merely an event—albeit a very important one—in the life of a child. It is not the beginning of her or his life.

The right to life—the first human right—must be guaranteed to everyone regardless of race, age, sex, disability, stage of development, or condition of dependency. Life is not just for the planned, the privileged, and the perfect.

Editor’s note. Chris Smith of New Jersey is serving his 21st term in the House of Representatives and is Co-Chairman of the Congressional Pro-Life Caucus).

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of Justice Office of Legal Counsel arguing that the ERA was long expired and had not been ratified “has not been rescinded by the Biden Administration Justice Department.” A White House official told The Fact Checker, “The role of the archivist is a matter subject to litigation, and we would defer to the Justice Department on such issues.”

*The Washington Post* analysis concluded, “Maloney is offering false hope about the archivist’s role — and falsely putting words in Ferriero’s mouth…. Moreover, two major court rulings have concluded that the ERA’s ratification deadline, as set by Congress, has expired — a position embraced by both the Trump and Biden Justice Departments. The Supreme Court in 1982 also indicated support for the idea that the deadline had passed. At this point, pending further court or congressional action, it is simply wrong to claim that the ERA already has met constitutional muster and all that is needed is the approval of the archivist.”

It would be only fair if Congresswoman Maloney would share her award with others equally deserving. For example, *The Atlantic* today (Feb. 9) published an essay by Russell Berman, titled “The Biden Appointee Who Could Change the Constitution,” that promoted most of the same points of misinformation refuted in The Fact Checker analysis. In the very first paragraph, Berman embraced the proposition that the Archivist, the government’s librarian, has the power to “make an even more immediate and direct change to” the Constitution than the next Supreme Court nominee. Although Berman’s piece was 1800 words long, and mentioned President Trump five times, he did not find room to quote a single word from the ruling by Judge Contreras, the Obama-appointed judge who upheld the ERA ratification deadline and who said that it would have been “absurd” for the Archivist to disregard the deadline.

Archivist Ferriero has already announced that he will retire in April. In recent weeks, Congresswoman Maloney, Congresswoman Jackie Speier (D-Ca.), ERA Coalition legal task force chair Linda Coberly, and other ERA advocates in and outside of Congress have openly called for Ferriero to certify the ERA before he leaves office. In addition, Berman reported that “some Democrats want to insist, as a requirement for confirmation, that the next Archivist publish the ERA.”

“That should be a litmus test for whoever is appointed,” Maloney told Berman, who also quoted Sen. Richard Blumenthal (D-Ct.) as saying he would have trouble voting for a nominee who did not commit to certify the ERA.

“The statute that created the office of Archivist specifically requires that it be filled without regard to partisan considerations, based purely on professional qualifications,” noted NRLC’s Douglas Johnson. “Yet we now hear sitting members of Congress and influential advocacy groups demanding that the Archivist or his successor ignore both a federal judge’s ruling and the Justice Department, and unilaterally declare that a long-expired amendment is part of the Constitution. This is an attack on the rule of law. Yet many of the recent journalistic treatments are rendered in tones of hopeful expectation or palpable cheerleading, rather than skepticism or outrage.”

(See “Advisory,” page 32)

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of the ongoing litigation. “It is longstanding OLC policy not to opine on the legality of government action presently being challenged in litigation,” Ferriero wrote. “Accordiingly, it is my understanding that OLC would not reconsider the question now if I were to ask again.”

Whomever President Biden nominates to succeed David Ferriero as Archivist, the nomination will go first to the Senate Homeland Security and Governmental Affairs Committee. On February 8, Senator Rob Portman (Ohio), the ranking Republican on that committee, and two other Republican members of the committee, Senator Ron Johnson (WI) and Senator Mitt Romney (Utah), sent Archivist Ferriero a letter noting statements by Rep. Maloney and others on the January 27 ERA Coalition virtual press conference. The letter concluded, “The office of the Archivist of the United States...has always been regarded as a nonpolitical office...your handling of the matter of the Equal Rights Amendment from 2020 to date has conformed to this expectation by making clear that you would respect the formal DOJ opinions on the matter. In light of the calls for you to disregard your duty and certify the ERA, we write to ask for your commitment that you, and the acting Archivist who will take over in April, will not certify or publish the ERA, which failed to achieve ratification by the states and is no longer pending before them.”

Douglas Johnson, director of the National Right to Life ERA Project, is NRLC’s subject matter expert on the Equal Rights Amendment, an issue on which he has worked directly, and written, for 40 years. Mr. Johnson is available for telephone 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.
“Unity” and President Biden’s speech at the National Prayer Breakfast

By Dave Andrusko

When I read the text of the remarks President Biden delivered to the National Prayer Breakfast on February 3, it was impossible to ignore the contrast between President Biden and President Trump. “As part of our commitment to building a just and loving society, we must build a culture that cherishes the dignity and sanctity of innocent human life,” President Trump said in 2019. “All children, born and unborn, are made in the holy image of God.” He continued “Every life is sacred, and every soul is a precious gift from Heaven [great applause]. As the Lord says in Jeremiah, ‘Before I formed you in the womb, I knew you… Before you were born, I set you apart.’”

A few days later, in his State of the Union address, President Trump said “There could be no greater contrast to the beautiful image of a mother holding her infant child than the chilling displays our Nation saw in recent days. Lawmakers in New York cheered with delight upon the passage of legislation that would allow a baby to be ripped from the mother’s womb moments before birth. These are living, feeling, beautiful babies who will never get the chance to share their love and dreams with the world. And then, we had the case of the Governor of Virginia where he basically stated he would execute a baby after birth. To defend the dignity of every person, I am asking the Congress to pass legislation to prohibit the late-term abortion of children who can feel pain in the mother’s womb. Let us work together to build a culture that cherishes innocent life. And let us reaffirm a fundamental truth: all children — born and unborn — are made in the holy image of God.”

Of course the Washington Post took the opportunity to trash President Trump and slap President Biden figuratively on the back for his desire for “unity.” Amy Wang began her 887 word ode to President Biden with this: “At the National Prayer Breakfast on Thursday, President Biden repeatedly pondered an objective so important to him that it drove him to run for president, became a recurring theme of his campaign, has inspired his approach to problems political and legislative — and ultimately has eluded him still: uniting the country.”

Not even President Biden’s speech writer would compose an opening that was that shamelessly self-serving. Of course the Washington Post took the opportunity to trash President Trump and slap President Biden figuratively on the back for his desire for “unity.” Amy Wang began her 887 word ode to President Biden with this:

“How do we unite us again?” Biden said. “Unity is elusive, but it’s really actually necessary. Unity doesn’t mean we have to agree on everything, but unity is where enough of us, enough of us believe in a core of basic things: The common good, the general welfare, of faith in the United States of America.”

You don’t achieve the “common good” on the backs of nearly 900,000 babies a year. “Unity” is not achieved by demonizing millions of Americans who find President Biden’s search for new ways (and new sources of money) to finance the deaths of unborn babies revolting.

President Biden ended with this: Every time I’d walk out of my Grandpa Finnegan’s house up in Scranton — some of you heard me say this before — he’d yell, “Joey, keep the faith.” My grandmother would yell, “No, Joey, spread it.”

What faith has he spread? Not historic Catholicism, that’s for sure. His has built his public policy on abortion and religious freedom on a different kind of faith, a different Rock. And millions of unborn babies have, and will, pay the awful price.
ACLU believes ad “reframing” abortion is persuasive, ignores unborn child

From page 2

pregnancy and reproductive freedom.” Where have we heard that before?

They all have in common the same basic lie: Just ignore who it is that you are getting rid of. In this case, it’s just the same-old, same old:

Mariah Cooper writes

The campaign will follow up with a second spot, titled “Forced,” in February, which will air digitally and on streaming services. The spot shows what people seeking abortions are forced to deal with, including paying for care, hours of travel, taking unpaid leave from work and oftentimes, staying pregnant.

The campaign will also include digital ad units, which are geographically targeted to states where abortion access is restricted.

Only the willfully blind will fall for “forced pregnancy.” You can “reframe” abortion six ways from Sunday but it remains a cruel, brutal, unnatural act.
Study finds men are often the main influence on women who have an abortion

By Jonathan Van Maren

A just-released 2021 study of 1,000 men by LifeWay Research has confirmed what pro-lifers have long known: That men are generally the primary influencers when it comes to abortion decisions. Nearly four in ten post-abortive men with a partner (wife or girlfriend) told researchers that they had been the main influence when it came to deciding whether or not to abort their baby.

The study was sponsored by Care Net, a well-known Christian network of crisis pregnancy centers, and CEO Roland Warren noted that the findings were consistent with a 2015 survey on the same subject. “In 2015, when we surveyed women who had an abortion, they indicated men were the most influential factor in their decision,” he observed. “Care Net recognized that despite this influence, the role of men had not yet been explored. This new study directly examines their feelings and experiences when the decision to have an abortion was made.”

According to the study’s findings, 74% of men said their partner talked about abortion with them before making the decision, with 48% reporting that their partners talked to a medical professional and 38% indicating that the woman considering an abortion talked to her mother. (Incidentally, a mere 4% of men said that their female partner discussed the matter with an abortionist, indicating that the decision is generally made before they arrive at the abortion center.)

The study also reaffirmed that it is often men who are pushing for abortion in the first place. A full 42% of men “suggested” or “strongly urged” that their partner abort their baby, with a mere 8% “strongly urging” against abortion. This means that less than 10% of men are willing to stand up for their baby in a life and death scenario when a decision is being made. Another 31% said they gave their partner no advice whatsoever. We know from other surveys that women often interpret this silence as an indicator that they are supposed to “take care of it,” and that they are waiting for men to stand up and promise support.

The reasons men push for abortion are unsurprising. Forty-six percent told researchers that they couldn’t afford a baby at the time, with another 29% saying that “there were already enough kids in the picture,” and 24% noted that they didn’t think they would be in a long-term relationship with the mother. Thirty-nine percent said they weren’t ready to be a father, 17% said they hadn’t completed their education, and 14% simply didn’t want to pay child support.

Unsurprisingly, less committed relationships increase the frequency of abortion. Of the unmarried men surveyed, 40% indicated that they didn’t want to get married in the future and another 24% said that either they or their partner didn’t want marriage. Thirty-four percent of surveyed men were married when their partner got an abortion, and another 29% were cohabiting and another 29% were “seeing each other.”

The stability of these relationships contributed to how men felt when discovering that they were expecting a child with their partner. Just over half said they felt nervous when they found out, with 42% saying they were scared, 30% being happy, and 28% saying they were excited. Relatively low numbers were “embarrassed” — only 14% — and only 14% said they were “angry.”

These numbers emphasize once again how essential it is that men understand the fact that they are fathers not at birth, but at conception. Once their partner is expecting a baby, it is their son or their daughter as much as it is hers. Abortion culture has given many men the impression that they still have an “out” prior to birth if they can only persuade their wife or girlfriend to visit an abortion clinic or take an abortion pill. In other words, they are man enough to do the baby-making act but not man enough to take care of the baby.

Men like that should be avoided at all costs.

Editor’s note, This piece was first published on LifeSiteNews.
West Virginians for Life held its annual Pro-Life Rally Day on Monday, February 7, in the lower rotunda of the State Capitol in Charleston. A day when attendees are encouraged to visit their legislators, the crowd was large and exuberant. Pro-life Men, women, and children of all ages came to show support for the Unborn Child with Down Syndrome Protection and Education Act (SB 468/HB 4337) and the Health Care Decisions Act Amendments (SB 470).

The main event was the noon Rally where Dadvocate for “Embrace Don’t Erase Down Syndrome” Kurt Kondrich spoke. Many of the legislators got to meet his precious daughter Chloe, who has Down syndrome. Kondrich granted many interviews to the media, who were plentiful. He was heard to tell them, “Identifying, targeting, and terminating a human being who receives a prenatal Down syndrome diagnosis because they do not meet the misguided cultural mandate for attainable perfection represents the ultimate, extreme form of discrimination, prejudice, profiling, bigotry, intolerance, exclusion and hatred, and it is something none of us should accept or tolerate.”

Nearly 50 lawmakers, including all but one of the five Public Board of Works figures, attended. As many as possible were introduced at the mic as time allowed.

Bishop Mark Brennan of the Wheeling-Charleston Diocese gave the invocation. Special music also added much to the event.

After talking about the regret of her necessary, lifesaving abortion, Delegate Margitta Mazzochi received her emotional healing Monday morning. She said, “You never forget about it. I was able to hold a 14-week baby model this morning. I will hold my baby in Heaven one day.”

Delegate Caleb Hanna said, “There is a sign here today saying Abortion Bans are Racist. Let me tell you something. Abortions kill more black people than anything else in the United States.”

Delegate Kayla Kessinger, Lead Sponsor of HB 4337 said, “In the last 15 years, I’ve been coming to these rallies. This is the first time I’ve seen counter protesters. You know what that tells me? We are winning!”

The crowd also got an update from Missy Ciccarello on God’s Battlefield, the campaign to purchase the property across from the lone abortion clinic in WV. In less than two months over $310,000 was raised, well over the amount needed. As Ciccarello looked up at the protesters in the upper rotunda, she said, “We are going to speak life. They hate us but we love them. We love you, WHC (Women’s Health Center)! We love you, escorts! We love you, abortion providers! We love you…”

To see pictures from the successful day, go to https://www.facebook.com/media/set/?set=a.4804109896292455&type=3
‘Unjust law’: EU bishops torch Macron over proposed ‘right to abortion’ in European law

Enshrining a ‘right to abortion’ would be ‘an unjust law, devoid of an ethical foundation and destined to be a cause of perpetual conflict among the citizens of the EU,’ the European bishops wrote.

By David McLoone

BRUSSELS — The Commission of the Bishops’ Conferences of the European Community (COMECE) has spoken out against French President Emmanuel Macron after he called for a “right to abortion” to be included in the European Union (EU) Charter of Fundamental Rights.

The COMECE, a supranational body representing the bishops’ conferences of EU member states, released a statement Tuesday condemning Macron’s push to have abortion recognized as a right in European law, describing the move as running “against fundamental European beliefs and values.” If successful, the bishops said the change to the Charter would constitute “an unjust law.”

The Catholic Church has always taught the “moral evil of every procured abortion,” with the Catechism of the Catholic Church (CCC) stating that “[t]his teaching has not changed and remains unchangeable.”

“Direct abortion, that is to say, abortion willed either as an end or a means, is gravely contrary to the moral law,” the CCC reads.

Despite being a baptized Catholic, although admittedly a lapsed one, and after France took control of the rotating presidency of the Council of the EU last month, Macron told the European parliament during a January 19 speech that he wished to update the Charter of Fundamental Rights “to make it more explicit on [issues like] environmental protection and the recognition of the right [sic] to abortion.”

He added that he considers abortion to be a part of “European values,” the codification of which forms “the basis for our unity, our pride, and our strength.”

However, as things stand, under the title “Dignity,” article 2 of the Charter states, “Everyone has the right to life.”

Asserting that abortion is part of the rule of law, Macron suggested that some EU member states which severely restrict the killing of the unborn, like Poland and Malta, have “distanced themselves” from this rule.

“Let us open up this debate freely with our fellow citizens … to breathe new life into the pillar of law that forges this Europe of strong values,” Macron stated.

Accordingly, the European bishops stressed their “deep concern and opposition” to Macron’s proposition.

The episcopal group, headed by liberal Cardinal Jean-Claude Hollerich of Luxembourg, made pains to “point out that one of the main values” in European law “is the respect for the dignity of every human person in every stage of his or her life, especially in situations of complete vulnerability, as is the case of an unborn child.”

“Caring for women who are in a difficult or a conflict situation because of their pregnancy is a central part of the diaconal ministry of the Church and must also be a duty exercised by our societies,” the COMECE bishops wrote. “Women in distress should not be left alone, nor can the right to life of the unborn child be ignored. They both must receive all necessary help and assistance.”

Arguing against the legality of enshrining a “right” to abortion, the bishops said that “there is no recognized right to abortion in European or international law. Attempting to change this by introducing a supposed right to abortion in the Charter of Fundamental Rights of the European Union, not only goes against fundamental European beliefs and values, but would be an unjust law, devoid of an ethical foundation and destined to be a cause of perpetual conflict among the citizens of the EU.”

“European integration should always foster and promote respect for different
George Will pushes the hemlock

By Wesley J Smith

In recent years, George Will has been writing columns on contentious cultural issues that have, to put it mildly, unpleasantly surprised many of his social-conservative admirers. Perhaps first and foremost among these was his coming out in 2015 as a believer in assisted suicide.

He’s now taken his relatively quiet support a step further, writing two recent columns for the Washington Post that not only boosted nationwide legalization but also sought to normalize suicide as a means of dying for the terminally ill.

Alas for the usually factually fastidious Will, much of what he has written in these columns is false or, at best, half-true. Perhaps even worse, the facts he omits prevent his readers from attaining a true understanding of breadth, depth, and scope of this radical and dangerous social agenda.

In one of his columns, Will peddles the false idea that legalized assisted suicide is limited to preventing an agonizing death. He writes:

“Cruelly, MAID [medical aid in dying] is for those who are already dying and want help for preventing a hideous death, not for truncating an unhappy life. MAID — the medical management of a natural process — should be considered a supplement to hospice (palliative) care.

Where to begin? First, people who commit assisted suicide are very rarely in intractable pain. Rather, the reasons usually involve fears of “being a burden,” worries about “losing dignity,” and the prospect of being unable “to engage in enjoyable activities.”

Don’t believe me? Just ask George Will. Here’s what he wrote when he endorsed assisted suicide in 2015:

To request a prescription for lethal medications, the DWDA requires that a patient must be:

• An adult (18 years of age or older),
• A resident of Oregon,
• Capable (defined as able to make and communicate health care decisions), and
• Diagnosed with a terminal illness that will lead to death within six months.

That’s it. No untreatable pain, unrelievable anguish, or hideous end-of-life prospects required.

And with the crass way assisted suicide is sometimes practiced these days, the entire process of obtaining the poison pills might happen impersonally via Zoom.

Not only that, but some people live well beyond expectations. Take the late humorist Art Buchwald. He entered hospice after being told he had weeks to live. But he didn’t die. He eventually left hospice care and wrote his last book — extolling hospice — before succumbing to his kidney disease almost a year later.

Some patients don’t die from their “terminal” illness at all. A friend of mine was diagnosed with lung cancer more than 15 years ago. He’s not dead yet.

Nothing pushes assisted suicide like fear-mongering. That is why “hideous deaths” are raised like a bloody flag. Will does this in excruciating detail in his two columns. In one, he describes the god-awful experience a cancer patient named Chris Davis experienced with cancer pain. But that doesn’t seem to be — as Will describes the case — because Davis’s suffering couldn’t have been treated. Rather, it was because he was misdiagnosed and deprived of proper care.

Surely the way to ameliorate that kind of crisis is to improve end-of-life care, rather than allowing the same doctors who failed to properly treat a patient to “fix” the problem by assisting in a suicide. In this regard, a study was just released finding that the U.S. ranks 43rd out of 81 countries studied in providing good care at the end of life. Legalizing assisted suicide wouldn’t be a means of ending this travesty but of surrendering to it.

Will generally disdains sophistry. But not on this issue. Rather than call the process “physician-assisted suicide” — an accurate and descriptive term — he falls back on the pretense that it is not really “suicide” when terminally ill people kill themselves with the aid of a doctor, but “medical aid in dying.” He writes:

Suicide connotes despair and perhaps derangement. Dying is a facet of every life. An anticipated death, in the presence of loved ones, a death chosen after reflection about predictable, unavoidable pain.

See “Hemlock,” page 42
Doctor banned from providing abortion reversal
treatment takes legal challenge to High Court in England

By Dave Andrusko

It was in June 2021 that Dr. Dermot Kearney was banned by the Medical Practitioners Tribunal Service from helping women to reverse the effects of their chemical abortions—Abortion Pill Reversal (APR). Now, at last, represented by the Christian Legal Center [CLC], Dr. Kearney will appear before the Royal Courts of Justice on February 24th to appeal his medical suspension.

“The decision [to suspend] came after a complaint by abortion provider MSI Reproductive Choices, formerly known as Marie Stopes International,” Christian Today reported.

Before he was suspended, Dr. Kearney, a former president of Catholic Medical Association, said 32 women who received the Abortion Pill Reversal were able to save their babies. According to Abortion Pill Rescue® Network over 3,000 babies have been rescued in the U.S.

CLC chief executive Andrea Williams told Christian Today that Dr. Kearney should be free to help women save their pregnancy:

“Women who immediately regret taking the first abortion pill,” she said. “Abortion providers are putting women on a conveyor belt which means once they start the abortion process, they have to go through with it and are pressured to do so or left with no alternatives.

“Women should be properly informed, as a matter of course, that the baby’s death is not inevitable after the first pill is taken.

Women who immediately regret taking the first abortion pill who urgently need support to try and save the pregnancy are being denied access to care due to this ban.”

Women start a chemical abortion by taking mifepristone and, having realized what they did was wrong, do not take the second pill, misoprostol. Instead they take progesterone, the natural occurring hormone in a woman’s body that sustains pregnancy, a treatment that has been used for decades to prevent miscarriages.

If used expeditiously, APR can save as many as 64% to 68% of babies.

“Many women feel unbelievably grateful to Dr. Kearney for helping them to save their babies,” said Williams. “Even where the babies were not saved, or where they decided to decline the progesterone treatment, they feel that he has cared for them and helped them when they most needed it. He steps into the breach where the abortion providers are manifestly failing.”

Williams captured the irony. “In any other area of medicine, treatment would be stopped if consent was withdrawn. Is ideology and the vested interests of abortion providers in the UK getting in the way of the woman’s right to choose?”
With the Supreme Court hearing two abortion cases, liberal pro-abortion theologians make the case that having an abortion is “holy”

By Dave Andrusko

I get it—pro-abortion sites exist to “normalize” abortion, to make it nothing more than a “rite of passage” for women. But when “mainstream” publications, such as the Washington Post, print their most egregious assertions without qualm, you know they have descended into mere shills for the abortion lobby.

Take Michelle Boorstein’s “The threat to Roe v. Wade is driving a religious movement for reproductive choice”

The subhead to the story which appeared in the Washington Post reads

“Americans who see a religious case for abortion access try to shift the narrative.”

“Shift the narrative” and how! The lead to her account is the story of Rev. Kaeley McEvoy. When she began at Westmoreland Congregational in 2018, she didn’t know if she should tell her congregation that she’d recently had an abortion. She knows her congregation was “liberal,” but not to worry. McEvoy was already a reproductive rights advocate, and to her the experience wasn’t in conflict with her faith. When the pastor and her then-boyfriend learned in 2016 that she was pregnant, the first place they went was to a cathedral, to pray — and to call doctors’ offices in search of one to do the abortion.

Other visitors to the cathedral happened to try to enter the small chapel where McEvoy was on the phone, but her boyfriend turned them away, she remembers, saying “something holy is happening here.”

That’s some inversion. Praying in her church at the same time she is seeking a handy-dandy abortionist is “something holy.” And this “holy” experience didn’t stop in 2018.

In November, McEvoy, a 29-year-old with a melodic preaching cadence, took the high, white pulpit at Westmoreland and said she had “never felt more known and heard and loved by God than when I entered the doors of a Planned Parenthood.” Then last month she addressed a group of Christian abortion access activists meeting in a D.C. church: “Something holy is happening here, friends.”

It’s a lengthy story but the gist is with two abortion cases before the Supreme Court, “liberal” people of faith need to be on the move.

Pro-abortion law Professor Mary Ziegler confides to Boorstein

“Even for ministers who say: ‘I don’t support abortions, but I can’t condemn people for having them.’ Those people are feeling the need to speak up more because things are coming to a head,” Ziegler said. “It’s easy for a lot of people to talk about what you should do when it’s not illegal. Now states can really punish people. I think for people of faith, ethical and religious arguments will be really central to that. Criminal law is intersecting with questions of morality and faith.”

In a sense this is returning to their “roots,” according to Boorstein.

Many of the new public perspectives in favor of abortion rights are simply giving new voice to old teachings and beliefs that went underground in recent decades as the religious right won the public narrative war. For many, abortion became a black and white issue and the topic was cloaked in shame.

And the new pro-abortion voice and the old pro-abortion voice sing out of the same hymnal: Abortion discussion should be more “nuanced.” It’s “theologically wrong to uniformly choose a fetus over a woman.”

At a gathering of activists at the end of January, we’re told that “Like SACRED’s [the name of the gathering] curriculum about the biblical story of creation in Genesis as a process with steps — not a light switch moment as to when ‘life’ begins.”

Finally, the big takeaway is that “[Religious advocates for

See “Theologians,” page 41
Pro-Life Women Blaze Path to Retaking Congress

5th Congressional district, becoming the first Republican woman to ever represent the state of Louisiana in Congress. Winsome Sears made history when she became the first woman and first woman of color to serve as Lieutenant Governor of Virginia.

This year, pro-life women have filed to run in virtually every corner of the country. The National Republican Congressional Campaign Committee estimates that more than 253 women are running as Republicans across the House map. The vast majority of these Republican women are pro-life. Their presence in these races and their leadership while in office provide a strong rebuke to the tired, inaccurate pro-abortion talking point that “all anti-abortion leaders are men.”

Traditionally, midterm elections have been a referendum on the sitting president. Polling trends point to a strong position for Republicans with pro-abortion President Biden and Vice President Harris clocking historically low approval ratings. According to the FiveThirtyEight average of polls of the generic Congressional ballot, Republicans currently lead by 2 percentage points (44.5 percent to 42.6 percent). A week ago, Republicans led Democrats by 1.9 points (44.3 percent to 42.4 percent), and at this time last month, voters preferred Republicans by 0.5 points (42.4 percent to 41.8 percent). Pro-life women candidates are ready to seize upon those political winds. In 2020, pro-abortion Democrats were expected by many political observers to pick up as many as 20 seats in House, cementing their majority for years to come. Yet, pro-life candidates, mostly women, triumphed at the ballotbox and flipped over a dozen seats. (National Right to Life PAC was involved in every one of these races.)

Pro-life women were able to turn districts previously considered noncompetitive into battlegrounds. After the election, some even labeled 2020, “The Year of the Pro-Life Woman.”

Could 2022 be another “Year of the Pro-Life Woman?” The sheer number of pro-life women running for Congress this year is astounding. Pro-life women are challenging stereotypes, making history, and blazing a path to retaking Congress. And they are doing it all while being unapologetically pro-life.

With the Supreme Court hearing two abortion cases, liberal pro-abortion theologians make the case that having an abortion is “holy”

abortion rights] have given up the public square, letting the dominant narrative be based on some readings of Bible verses. And that doesn’t represent real people, real lives, real faith,” said The Rev. Angela Williams, a Presbyterian USA pastor and lead organizer of SACRED.

In some ways, the most important conclusion that Williams wants us to accept is that “a few years ago she considered herself ‘pro-choice’ but was taken aback by people in her seminary who said they were ‘pro-abortion.’”

No ifs, ands, or buts about it. Abortion is “holy” and “pro-choice” is a cop-out. Indeed, the Rev. McEvoy “never felt more known and heard and loved by God than when I entered the doors of a Planned Parenthood.”

What is God’s thinking when one of his creations is “lovingly” torn apart?

Talk about taking the Lord’s name in vain.

Pray for them.
George Will pushes the hemlock

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should not be proscribed by society’s laws or condemned by its mores.

The word “suicide” describes what was done — a self-killing — not why it was done. If one must hide a policy agenda behind deflecting euphemisms, there is probably something wrong with the agenda.

Will also supports what are sometimes called “suicide parties.” These are gatherings of friends and loved ones to pay a final goodbye to the soon-to-be departed before watching as the suicidal person consumes lethal drugs. Never mind that attending such a gathering makes one complicit in the suicide. It can also send the unintentional message that, “Yes, you are a burden,” “Yes, your life is not worth living,” “Yes, we will remember you better if you don’t cause us to suffer through your final days.” Sometimes, intended kindnesses can actually be cruel.

Finally, Will acknowledges the dangers of legalizing assisted suicide to the weak, vulnerable, and despairing, but sniffs, “Life is lived on a slippery slope.”

Sorry. That is just not good enough. Once suicide via euthanasia becomes an acceptable answer to human suffering — which is the fundamental principle underlying the right-to-die movement — there is virtually no limiting principle. Over time, as people get used to the death agenda, “protective guidelines” are redefined as “obstacles” to “death on your own terms.” And the laws loosen. Indeed, Will celebrates the ongoing relaxing of eligibility standards in states that have already legalized assisted suicide.

It’s even worse in cultures that more widely accept euthanasia than we do in America. In those places, the terminal-illness standard has been abandoned altogether. In Canada, euthanasia is now available for people with disabilities, the frail elderly, and those with chronic conditions. In Germany, there is now a fundamental right to commit suicide — and receive assistance — for any reason the suicidal person may want to die. No illness or pain required.

My recounting of these (what I consider to be) horrors — which is very partial — isn’t a slippery-slope argument. It’s an accurate depiction of facts already on the ground. Will needs to grapple with these truths if he is going to be an honest advocate.

Which brings us to the real question at hand. Should people have a fundamental right to be made dead — for whatever reason they think necessary to end suffering that they believe they cannot bear? Because — as Germany proves — planned or not, that is the logical destination of this movement. This is the debate we should be having. Not one that hides behind the reassuring false premise that assisted suicide is only for the rare case of hideous deaths from terminal illness. Because it can’t be “just” that. It won’t be. It isn’t.

Editor’s note. Wesley’s great columns appear at National Review Online and is reposted with permission.

‘Unjust law’: EU bishops torch Macron

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identities and avoid ideological impositions,” they continued. “In this sense, the proposal of President Macron of inserting this supposed right can in no way be seen as ‘breathing new life into our basic rights.’”

LifeSiteNews columnist Jeanne Smits noted that beside breaching the natural law, abortion has never been a right under international law “and over the years has been explicitly shown not to be a part of the European Union’s area of competence,” contradicting Macron’s claims and showing him to have overstepped his authority in suggesting such a change to the Charter.

Smits quoted Gregor Puppinck of the European Centre for Law and Justice, who explained, “The European Court has stipulated that the Convention guarantees neither the right to have an abortion nor the right to [perform] one.” Puppinck stated that the court “does not even grant the right to have an abortion in another country with impunity,” and that it has ruled “that the prohibition of abortion does not violate the Convention.”