TO MY FIRST TEACHER

Happy Father's Day

Thank you, Dad, for teaching me to value life!
Letter from 116 House members ask H.R. 6742, the Protecting Life in Crisis Act, be included in the next bipartisan COVID-19 relief package.

By Dave Andrusko

On June 5, Rep. Mike Conaway (R-TX) led 116 Members of the House in sending a letter to House and Senate leadership stating that it is essential that Hyde protections are applied to any funding or tax credits provided for the health care needs of unemployed Americans.

“Polling consistently shows that a majority of Americans do not support using tax dollars to fund abortion,” the letter explains.

The House Members emphasize that “Despite the longstanding congressional and public support for the Hyde Amendment, there are already efforts underway to undercut and bypass these long-held protections.”

The letter asks that H.R. 6742 — the Protecting Life in Crisis Act — be included in the next bipartisan COVID-19 relief package.

“This straightforward legislation extends existing Hyde Amendment protections to any COVID-19-related healthcare provision.”

Specifically, the letter explains, H.R. 6742 “prohibits any funds that are authorized or appropriated for the purposes of preventing, preparing for, or responding to the COVID–19 pandemic, domestically and internationally, from going towards abortions or abortion coverage. In addition, this bill also addresses any attempts to use refundable tax credits from being used to purchase coverage on the exchanges or for COBRA continuation coverage.”

The letter concludes with this powerful declaration:

“The respect for life is one of the founding principles of both our nation and of our healthcare system. No system that subsides abortion can be said to fully life up to that principle.”

To the pregnant woman in these tumultuous times: Circumstances can change in a baby’s heartbeat

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

I remember the instant I found out I was a mother. I had been volunteering at a local pregnancy resource center, assisting women who were facing challenging circumstances. I had been praying that I would conceive a child, but for months, the prayer seemed to go unanswered.

That day, I summoned up the courage to ask my supervisor for a pregnancy test. She gently took me aside and, after examining the test results, confirmed what I had felt in my heart: I was finally pregnant!

I began to love my baby at the moment of confirmation of her conception. While I have always been adverse to water, I guzzled it down, believing it was best for baby. I carefully monitored my daily diet to make sure I was consuming sufficient calories for myself and my little beloved one. Never an athlete, I began a pregnancy-friendly exercise routine to aid in my delivery.

See “Heartbeat,” page 28
Editorials

Joe Biden: One year after his flip-flop on the Hyde Amendment

As we wrote yesterday at NRL News Today, Saturday marked the one-year anniversary of one of the most revealing flip-flops in ages. In the space of a single day, pro-abortion former vice president Joe Biden, the Democrats’ by default presidential candidate, first affirmed his long-time support for the Hyde Amendment and then beat a hasty retreat.

Biden, multiple times an awful presidential candidate, apparently still hadn’t grasped that his party’s new orthodoxy is a bright green light on abortion on demand through all 40 weeks and a flashing yellow light (for now) on infanticide. So, suddenly his support for the Hyde Amendment, credited with saving over two million lives, was expendable— as will be the lives of the next two million babies whose deaths would be financed by the taxpayer.

As I re-read the gobbledygook that passed for an explanation of his somersault, I was reminded that fluency has never been Biden’s calling card. I remember (and then looked up the transcript) of the Democrats first 2008 Presidential debate.

As the Brits would say, I was gobsmacked when I read moderator Brian Williams’ question. Many were the kind real journalists would ask, not the softballs we see teed up nowadays when Democrats running for President are asked questions by an-in-the-tank media corps. Here’s what Williams said (it was obviously more a joke among buddies than a question) on April 27, 2007:

WILLIAMS: Senator Biden, words have in the past gotten you in trouble, words that were borrowed and words that some found hateful. An editorial in the Los Angeles Times said, “In addition to his uncontrolled verbosity, Biden is a gaffe machine.” Can you reassure voters in this country that you would have the discipline you would need on the world stage, Senator?

SEN. BIDEN: Yes. (Laughter.)

MR. WILLIAMS: Thank you, Senator Biden. (Laughter.)

See “Biden,” page 23

WHERE JOE BIDEN STANDS ON:

Taxpayer Funding for Abortion

- Joe Biden supports using tax dollars to pay for abortion.
- Joe Biden says he will overturn the Hyde Amendment.
- Joe Biden voted for taxpayer funding of overseas pro-abortion organizations.

An ex-abortionist declares, “I’m just glad that God is using me to do something good now.”

Even if they do not become public pro-life advocates, who can more persuasively make the case against abortion than women who now understand the full gravity of their decision to abort and wish with every fiber in their heart they could bring their child back to life? How can it not be so raw, so unmediated, the need for forgiveness so all-consuming?

Periodically, I visit sites where women are able to safely confess (no lesser word will do) their regret, remorse, and what can only be described as repentance. I read one account last month in which a woman wrote, “I pray every time for forgiveness to God and my child I even named my child ‘my Angel child’ may his/her little soul find peace and may he/she know that mommy loves him/her so so much and may he/she forgives mommy.”

Pro-lifers are above all else a forgiving lot. The irony is that so many pro-abortionists smirk at the very idea that we can condemn the unjust taking of the life of an unborn child without wishing ill to the mother. “Hypocrisy” they insist. They simply cannot understand that we understand how often a woman (or girl) finds herself in a situation where virtually every person in her circle of friends and family wish the child would just “go away.” It takes steely character to stand up for the little one when so many voices are shouting, “There is an easy solution. Take it!”

Likewise, that spirit of forgiveness extends to those abortionists who have come out of the darkness of death and destruction and into the light. Who would better know the ugly, monstrous reality of the slaughter of unborn children on an industrial scale?

Last week in NRL News Today, we reposted Sarah Terzo’s kind-hearted analysis of the journey of an ex-abortionist from a woman who saw performing abortions as a kind of “challenge” to a very effective pro-life advocate. Dr. Kathi Aultman said

I was challenged by the procedure and I really hate to say this, but the bigger the better. I cringe now when I

See “Ex-abortionist,” page 28
These past few months have shown me, once again, why our country needs the pro-life movement. As the NRLC mission statement reads, “America’s first document as a new nation, The Declaration of Independence, states that we are all ‘created equal’ and endowed by our Creator with certain unalienable Rights, that among these are Life....’ Our Founding Fathers emphasized the preeminence of the right to ‘Life’ by citing it first among the unalienable rights this nation was established to secure.”

The pro-life movement promotes the sanctity of life, recognizing the value, dignity, and worth of every human life.

The pro-life movement champions the principle that each human life is unique and unrepeatable, that he or she should be respected, cherished and protected.

My heart aches when I look at all that has happened in the last few months.

Lives have been lost in the demonstrations and riots that followed the cruel and tragic death of George Floyd. More than 112,000 of our fellow Americans have already died from the COVID-19 virus. There are already preliminary studies about the number of lives lost due to loneliness and subsequent suicide during the months-long shutdown that bound people to their homes. The eventual total of deaths will be staggering.

More than ever, during this time of depression, anger, and bewilderment, our nation needs to adopt the pro-life movement’s foundational philosophy: that each human being is important, unique, and awe-inspiring.

Of all that has happened, I am grief-stricken most of all by the roughly 40,000 of our elderly brothers and sisters who died in nursing homes and assisted living centers. I fully expect there will be investigations as to why and how so many residents in long-term care (LTC) facilities die. MCCL, our Minnesota state affiliate, has called for the resignation of the Minnesota Department of Health Commissioner.

A question that needs to be asked is: were the lives of these elderly COVID-19 patients deemed not as important as the lives of others?

What was alarming were the news articles about healthcare providers and “ethicists” frankly discussing the possibility of rationing care based on the age and ability of those affected by COVID-19. Others raised the possibility of instituting mandatory “do not resuscitate” orders for COVID-19 patients, even if doing so overrode a patient’s advance directive or the family’s wishes.

I was proud of the Trump administration for making very clear, through the Office of Civil Rights in the Department of Health and Human Services and through the Federal Emergency Management Agency, that such violations of civil rights were not acceptable and would not be tolerated.

The lives of the elderly and those with disabilities are not less valuable than other lives and should not be treated as though they were.

This is why we need the pro-life movement. Our mission of promoting the dignity of human life is critical at this time.

The pro-life movement focuses on abortion and euthanasia. We are a voice for those who have no voice. Our message—that each human life has value—needs not only to be heard but also to be incorporated into the way our culture treats everyone... born and unborn.

Whether our nation realizes it or not, it needs the pro-life movement to continue raising the banner for life.
"Baby Leah"—the ‘Miracle preemie’—leaves NY hospital after her mom gave birth to her while fighting COVID-19 in a coma

By Dave Andrusko

During this pandemic and its associated quarantine, we can use all the good news we can get.

Enter “Baby Leah”—known as the “miracle preemie” who is “pulling off a second surprise on her doctors,” according to WNYW.

Her birth was a double-barrel miracle. She was 11 weeks early and “her mom was in a coma during birth because she was battling the coronavirus at the time”!

Born on April 8th by C-Section, Baby Leah, of course, was small—2 pounds and 15-ounces. But when she was released from the hospital in Mineola, N.Y. May 27 (surprising early), she’d nearly doubled her weight!

Her mom, Adriana Torres, only found out that she had a baby girl after she emerged from her coma, WNYW reported.

“Two days after the baby was born, the mom was out of coma and she came back on her 41st birthday, so she came and saw the baby for the first time and things started to brighten up,” said NYU Winthrop Hospital Dr. Nazeeh Hanna.

“The baby is leaving the hospital way earlier than we thought it would be. We are very happy for Leah that she is going home to her family.”

To the pregnant woman in these tumultuous times: Circumstances can change in a baby’s heartbeat

I read the pregnancy book recommended by my mother-in-law and the breastfeeding guide published by the La Leche League. I devoted myself to my new cause: the cause of being the best mother I could be.

This coming week, my daughter celebrates another birthday. I am enchanted and amazed at the incredible person she has become.

But I knew she was a one-of-a-kind individual long ago, when I first learned of her presence in my womb. I could not deny her humanity any more than I could deny my own. She was precious from the start, loved from the beginning, and treasured throughout the trimesters.

While she was a cherished part of my heart, she was separate from me all along, with her own distinctive DNA. That DNA made her a blonde-haired, blue-eyed beauty, born of a dark-haired, brown-eyed Mama. She did not gain legitimacy at her birth—it was another, albeit highly important, stage in her already legitimate life.

To the pregnant woman in these tumultuous times, I offer you this wisdom, born of years of mothering: Circumstances can change in a baby’s heartbeat. The struggles you face today could be long gone a year from now. But one fact remains: that baby within you bears a beauty and dignity which cannot be erased. Yours is an awesome responsibility but also a bountiful blessing. You will never regret bringing that blessing into the world.

So happy birthday to all the June babies, and congratulations to all your awe-inspiring mothers! You truly make the world a brighter, more loving place.
Did you know just how radical Joe Biden’s positions are on abortion?

By Karen Cross, National Right to Life Political Director

Editor’s note. The following is a handy primer that you can share not only with pro-lifers but also all those millions of Americans who are not pro-abortion extremists like Mr. Biden.

Did you know Biden supports the Democratic platform of unlimited abortion through birth? In 2019, Ilyse Hogue, president of NARAL Pro-Choice America, said, “At a time where the fundamental freedoms enshrined in Roe are under attack, we need full-throated allies in our leaders.” She added, “We’re pleased that Joe Biden has joined the rest of the 2020 Democratic field in coalescing around the Party’s core values — support for abortion rights…”

Did you know that last June, Biden changed his position on taxpayer funding of abortion? He now wants to overturn the Hyde Amendment, which, by eliminating virtually all federal funding of abortion, has saved well over two million lives. Once a supporter of the Hyde Amendment, Biden now vigorously endorses using taxpayer dollars to pay for unfettered abortion on demand. Read more about this here.

Did you know Biden pledges that his judicial nominees would “support the right of privacy, on which the entire notion of a woman’s right to choose is based.” [The Washington Post, 10/15/19.]

Did you know that in 2011, as Barack Obama’s vice president, Biden said of the Chinese government’s brutal one-child policy, “Your policy has been one which I fully understand—I’m not second-guessing—of one child per family.” The one-child policy was built around coerced abortions, late-term abortions, and infanticide.

Did you know Biden’s lack of respect for life includes surrounding himself with advisers who hold the vulnerable elderly in low esteem? Biden included Dr. Ezekiel Emanuel, a University of Pennsylvania bioethicist, in his team of advisers on the coronavirus. Dr. Emanuel has written explicitly that he “hope[s] to die at 75,” because “living too long” renders people “faltering and declining,” and “transforms how people experience us, relate to us, and, most important, remember us. We are no longer remembered as vibrant and engaged but as feeble, ineffectual, even pathetic.” Emanuel said that beyond age 75, he would refuse not only cancer screenings and advanced life-saving treatment, but also flu shots and antibiotics. Think of all of the vibrant people you know and love who are “living too long” past age 75! (Biden is 77, by the way.)

Did you know Joe Biden’s official campaign site includes the following on his list of priorities in his 2020 campaign?

- Working to codify Roe v. Wade (which means unlimited abortion on demand);
- Supporting the repeal of the Hyde Amendment (which means taxpayer funding of abortion on demand); and,
- Restoring federal funding for Planned Parenthood, including through Medicaid and Title X (which is taxpayer funding to the nation’s largest abortion provider and promoter).

Now you know.
Men don’t have a uterus. They can’t get pregnant. They don’t fully understand what it’s like to experience pregnancy, childbirth, or abortion. All of that is true.

And it’s why, when men express a pro-life view on abortion or offer an argument for that view, defenders of abortion often tell them they can’t have a say. They don’t have a right to speak to the issue because they are men. Their view is frequently dismissed on that basis.

“I don’t understand how any man thinks that he has the right to dictate to women what they should do with their body,” says Trevor Noah, host of The Daily Show. “Men know nothing about what it’s like to be a woman.” Former presidential candidate Pete Buttigieg says that if you’re a “male government official,” then you shouldn’t try to protect unborn children at all.

It seems like there are two ways to interpret this “men can’t have a say” dismissal. First, abortion defenders could mean that the fact that someone is a man (or lacks certain experiences) counts against the merits of his view on abortion—it’s a reason to think that his pro-life view is false or that his argument is faulty.

But this is a classic example of the ad hominem fallacy in reasoning. That’s when someone attacks or focuses on his opponent’s characteristics rather than dealing with the issue or argument under consideration. It’s a fallacy because, even if the claims about the person are accurate, it doesn’t follow that his position or argument isn’t correct. The truth of a statement (e.g., “abortion is unjust”) is independent of the characteristics of the person who happens to be making the statement.

That’s how reality works. In the case of abortion, the determine whether or not that view is true, we must assess it on its own merits, not dismiss it because of a particular person’s traits.

Abortion supporters may try to disregard the arguments of pro-life men, but doing so is not the same as refuting those arguments.

But there’s a second interpretation of the “men can’t have a say” dismissal. Maybe abortion defenders mean that because men can’t experience pregnancy and abortion, they aren’t in a position to know (or be justified in believing) their ethical view of it. This claim isn’t about moral reality but rather about epistemology—about knowledge. “Maybe it’s true that abortion is wrong,” the abortion supporter could say, “but you don’t know that. Because you’re a man. So your opinion isn’t worth listening to.”

In fact, many pro-life men do have a kind of personal experience with abortion—performing it, encouraging it, discouraging it, being hurt by it, surviving it. But the more fundamental problem is this: We can know the truth (or offer sound arguments in support) of a proposition about something without direct experience of that something.

We can know, for example, that spousal abuse is wrong even if we aren’t husbands who treat their wives terribly. We can know that infant abandonment is bad even if we can’t relate to the desperation of a teenage mother. We can offer cogent arguments for our views about social welfare policies even if we aren’t welfare recipients ourselves.

Indeed, defenders of abortion probably don’t want to disregard the opinions of infertile women or abortion-supporting men (such as the seven men who decided Roe v. Wade) even though they can’t experience pregnancy and abortion. And if those people can be justified in holding and advocating their views, then so—in principle—can pro-life men.

This doesn’t mean experience can’t be important and informative. And there’s a sort
“Miracle Baby” survives two potentially lethal conditions, parents ignored the advice from doctors that abortion “was the best option.”

By Dave Andrusko

When first-time mother Kimberley James said, “We had a very rocky start to our pregnancy,” it might qualify as the understatement of the year. Four times she was told abortion would be the best option. Mrs. James told Ellen Scott of Metro News. Each time Mrs. James and her husband, Nick, said no, and now they are the parents of “our miracle baby.”

Why the lethal advice? Kimberley’s unborn baby girl was diagnosed with two potentially lethal conditions: hydrops fetalis (severe swelling due to an abnormal level of fluids) and cystic hygroma (a fluid-filled sac, usually found in the area of the baby’s neck). The doctors’ counsel came when these conditions were first diagnosed, Kimberly told Scott. After she was diagnosed with hydrops (at 12 weeks), “I was offered a termination by two doctors but I refused.” When she was diagnosed with cystic hygroma a month later, “I was again told I could abort the baby but I just trusted that she would survive.” Kimberly added, “It must have been three or four people I was told, quite forcibly, that a termination was the best option.” They said no “because it was absolutely not what we wanted to do.” Instead they decided to pay to have private scans and blood tests, saying, “We were determined to go ahead with the pregnancy.”

On May 9, Kimberley and Nick welcomed 7lb 6oz Penelope at Worcestershire Royal Hospital, Scott wrote. “Penelope stunned doctors by arriving in perfect health, with both her life-threatening conditions disappearing by the time her mum went into labour.” Doctors were and are mystified (“gobsmacked,” as Kimberley colorfully described their reaction).

“Penelope defied all odds and the hydrops disappeared at 16 weeks and the cystic hygroma also disappeared after 20 weeks,” Kimberley told Scott. “The doctors all said it was unheard of for the hydrops to disappear and we still to this day don’t know what caused it or why it went away.”

As for little Penelope, Mrs. James said, “We are so in love with her and so thankful that we continued with the pregnancy despite the extremely poor prognosis at the start.” “She really is a little miracle.”
At first blush, you may wonder what voice synthesizers and a recent revealing documentary on the life of Roe v. Wade critic Justice Clarence Thomas could possibly have in common. Stay with me for a few paragraphs, and it will all come clear.

I ran across this awhile back on the Internet and it continues to absolutely fascinate me. Employing a voice synthesizer, someone has former President Barack Obama “reading” President Trump’s 2017 inaugural speech. What did we—or at least yours truly—learn?

That Mr. Obama could deliver a prepared speech. It was arguably his greatest strength. In 2004, the then largely obscure Illinois state Senator running to become a United States Senator delivered a speech to the Democratic National Convention which became by universal consensus the springboard for his eventual presidential run.

I also learned that in the hands of a gifted orator, President Trump’s speech soared. The contents didn’t change, the presentation did.

And while I did not learn this (it was hardly new information to me), I was reminded that the substance of what President Trump said three years ago was remarkable and genuinely historic in its challenge to the status quo.

Enter “Created Equal: Clarence Thomas In His Own Words” which aired on PBS May 18. Perhaps someone knows how in the world a documentary wholly sympathetic to Justice Thomas made it on PBS, because I sure don’t. But consider this:

“This film gives fascinating insight into one of the most important and yet enigmatic public figures in the country,” said Perry Simon, Chief Programming Executive and General Manager, General Audience Programming at PBS. “Michael Pack’s latest film continues PBS’s long tradition of airing point-of-view, biographical documentaries that empower audiences with new information and points of discussion that are both insightful and relevant.”

Justice Thomas’ journey to the Supreme Court (where he has served longer than any other current member of the Court) is the ultimate Horatio Alger story.

“It’s an incredible, inspirational saga. So why isn’t Thomas revered, held up as a shining example of how anyone can make it in America, even if they began their lives in a broken home living in a shack without indoor plumbing? Of course you know the answer. In Thomas’s terse words, he was “the wrong kind of black guy,” so “he has to be destroyed.”

There were not many reviews of “Created Equal: Clarence Thomas’ life is a remarkable journey, the quintessential American success story,” said executive producer Gina Cappo Pack. “He began life in Gullah-speaking Pin Point, Georgia, suffered poverty and privation in Savannah, dealt with the vicious iniquities of segregation, and yet rose to serve on the highest court in the land.”

“His intellectual journey is just as remarkable,” said producer/director Michael Pack. “He was raised by his grandfather with strict discipline, taught by Catholic nuns in parochial schools, yet he rebelled and became a ’60s radical who supported the Black Panthers, only to rethink his way back to his traditional beginnings. He went to work for Ronald Reagan as a rare African American conservative, and now serves as one of the most influential justices on the Supreme Court. We offer viewers a chance to hear Thomas’ story directly from the man himself, a unique opportunity.”
In spite of the spin, new CBS News survey holds very encouraging news for pro-lifers

By Dave Andrusko

So how does CBS News headline its latest survey on abortion? “Roe v. Wade: Most support keeping it in place.”

True, but fundamentally misleading, as we’ll discuss in a moment.

What would be a headline that better captures the important findings? “Four in 10 Americans [42%] say the issue is so important to them they could not vote for a candidate who disagrees with them on it.” That is a great many Americans.

Over and over, polls have shown that among these single-issue voters, there are many more who vote pro-life than who vote pro-abortion.

Guess what? Jennifer DePinto and Anthony Salvanto don’t bother to tell the reader the breakout.

Or, how about “Most white Evangelicals” think Roe should be overturned. Again no numbers. (They are likely huge.)

Or (the rare occasion CBS News provides specifics) that 55% believe abortion should be “available but with limits” [31%] or “should not be permitted” (24%) versus just 42% who say they believe abortion should be “generally available.”

These questions are maddeningly imprecise. When you get specific, as Gallup does, you find that a whopping 60% want abortion legal “only in a few circumstances” (39%) or “illegal in all circumstances” (21%).

Back to keeping Roe. How is the question posed to respondents? “What should the Supreme Court do about Roe vs. Wade, the 1973 decision that made abortion legal—keep it as is or overturn it?”

But besides “mak[ing] abortion legal,” what does Roe allow? Sex-selection abortions are legal. Targeting babies because they would have Down syndrome is legal. Slaughtering huge babies well into the second and third trimesters is legal.

Is the public buying into that? Of course not, which is why these questions are worded they way they are: to ensure that DePinto and Salvanto can lead their story with “Nearly two-thirds of Americans want Roe v. Wade kept in place.”

Geez.
Couple welcomes ‘miracle’ premature identical quadruplets during pandemic

By Nancy Flanders

Jenny and Chris Marr were shocked to learn last year that they were expecting identical quadruplets – a one in 11 to 15 million chance. There are only 72 such births known to have ever been reported in the world, and though today they are thrilled with their bundles of joy, when they first learned they were having four babies at once, they were more scared than anything.

“It sounds horrible to say, but I don’t know if it was necessarily tears of joy,” Chris told the Washington Post. “We were completely overwhelmed and, frankly, terrified.”

Initially, the couple was told they were expecting triplets, but after getting used to the idea, they learned from their maternal fetal medicine department that there was actually a fourth baby. Neither Jenny nor Chris had any siblings, and had no knowledge of multiples on either side of the family, so they were floored.

“The tech – who was doing the initial (scan) – she gave me a funny look,” Chris told TODAY. “We were like, ‘Oh what’s going on now?’ We got worried again. She was really cute. She said, ‘I’m not supposed to say this, but y’all got four babies.’”

The news was further complicated by the fact that all four babies were sharing one placenta, which can make it difficult for all the babies to grow properly and at the same rate. If one baby was stronger, he could take all the nutrients and leave the others weaker. But doctors reassured the couple that if that did indeed happen, they could attempt surgery to help all the babies thrive. Thankfully, the issue never arose.

“The babies shared incredibly well,” said Dr. Lauren Murray, the couple’s OB-GYN at Texas Health Presbyterian Hospital Dallas, who called the babies a “miracle.” She added, “There were no incidents on the sonogram even leading up to where we were worried that one of them, or two or three of them, would be significantly smaller.”

Labor began early, as is often the case with multiples, at 28.5 weeks gestation at the start of the COVID-19 pandemic.

“For my first time (during my pregnancy) I anticipated the worst,” said Jenny. “Maybe we were going to have sick babies and they were going to be in the NICU.”

She underwent a C-section and on March 15, babies Harrison (2 pounds, 6 ounces), Hardy (2 pounds, 10 ounces), Henry (2 pounds, 6.7 ounces), and Hudson (1 pound, 15 ounces) were born within three minutes.

“It’s incredible,” said Jenny. “We called them our baby birds because they really looked like baby birds.”

All of the boys spent about 10 weeks in the neonatal intensive care unit, according to TODAY, with three of them needing oxygen support. They were discharged in May, and their parents have special ways of telling them apart.

“They each have little bitty characteristics,” explained Chris. “When we sit down and look at them we can figure out who they are but if you just look at them from a distance, they all look the same.”

But if that method fails, the babies each wear an ankle bracelet so they never get mixed up. The family of six is settling into their new life at home amid social distancing and quarantine. They hope their story can bring joy to people during this uncertain time.

“It was kind of hard to wrap our head around but we’re doing good with it,” said Jenny. “It’s fun, it’s exciting. To be able to share these little miracles… it’s just been really special.”

Editor’s note. This appeared at Live Action News and is reposted with permission.
Female Republican politicians were the most vocal about defunding Planned Parenthood

By Secular Pro-Life

On May 18 the Journal of Women, Politics, & Policy published “Standing Up For Women? How Party and Gender Influence Politicians’ Online Discussion of Planned Parenthood.” In this study, researcher Morgan Johnstonbaugh analyzed tweets by members of the 114th House of Representatives regarding Planned Parenthood. She narrowed the focus to tweets made between July 1 and November 1, 2015, during a heated debate on whether to defund PP in response to the CMP videos suggesting PP sells fetal organs.

Johnstonbaugh hypothesized that women would write more tweets about Planned Parenthood than men, and Democrats would write more than Republicans.

For her hypothesis about gender, Johnstonbaugh theorized that “men may be disinclined from discussing and addressing women’s issues because feminine issues are perceived as having lower status.” (If she is aware of the “no uterus, no opinion” factor — the vocal and persistent insistence that men have no right to speak about abortion — she doesn’t mention it.) Johnstonbaugh’s analysis did find that female Democrats are more vocal about this issue than male Democrats, and female Republicans are more vocal about the issue than male Republicans.

For her hypothesis about political party, Johnstonbaugh theorized that there would be more PP-related tweets from Democrats than Republicans because Democrats focus more than Republican’s on women’s issues. To her surprise, though, her analysis found the opposite to be the case.

Female Republicans constituted 5% of the House and wrote 12.6% of the tweets about Planned Parenthood while male Republicans made up 51.7% of the House and wrote 68.6% of the tweets about Planned Parenthood.

This unexpected finding may be related to the ease with which provocative pro-life propaganda can be spread on Twitter by incorporating videos, images, and only 140 characters for each message, compared to regulations or statistics meant to support Planned Parenthood, which may require a greater amount of text or explanation.

Female Republicans were the most vocal group, followed by male Republicans, female Democrats, and lastly male Democrats.

As I read these results I wondered if they reflect the “intensity gap” between pro-choice and pro-life people: the idea that those of us against abortion are more likely to feel passionately about the issue than those who support the status quo. For example, according to PRRI, “Americans who oppose the legality of abortion (27%) are significantly more likely than those who support the legality of abortion (18%) to say they will only vote for a candidate who shares their views on the issue.”

Apparently Johnstonbaugh didn’t entertain the intensity gap theory, though. Instead she speculated that Republicans wrote more PP-related tweets because pro-life ideas are simplistic, whereas the pro-choice perspective is too nuanced to convey over Twitter.

Johnstonbaugh points out that previous research found female Democrats are traditionally the most vocal about women’s issues, suggesting an apparent contradiction with this study’s finding. However the contradiction exists only if we view Planned Parenthood solely through a “women’s issue” lens. Johnstonbaugh’s additional analysis confirms that many people see more factors in the PP controversy.

For her hypothesis about political party, Johnstonbaugh theorized that there would be more PP-related tweets from Democrats than Republicans because Democrats focus more than Republican’s on women’s issues. To her surprise, though, her analysis found the opposite to be the case.

While it is clear that women write more tweets about Planned Parenthood than men within their political party, female Republicans are the most active members in the online discussion.

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This unexpected finding may be related to the ease with which provocative pro-life propaganda can be spread on Twitter by incorporating videos, images, and only 140 characters for each message, compared to regulations or statistics meant to support Planned Parenthood, which may require a greater amount of text or explanation.

This theory is so transparently biased I actually laughed a little when I read it. I expect pro-lifers will continue to mystify researchers who can’t see past their own worldviews.

Not all pro-choice tweets require a lot of nuance.

Johnstonbaugh points out that previous research found female Democrats are traditionally the most vocal about women’s issues, suggesting an apparent contradiction with this study’s finding. However the contradiction exists only if we view Planned Parenthood solely through a “women’s issue” lens. Johnstonbaugh’s additional analysis confirms that many people see more factors in the PP controversy.

She examines how often House members framed the Planned Parenthood discussion in the following ways:

1. Women’s Issue: defunding PP is important particularly to women
2. Planned Parenthood Healthcare: defunding PP will harm people who rely on the org for healthcare
3. Alternative Healthcare: there are better healthcare options than PP

See “Female,” page 18
One of the greatest attributes of the pro-life movement is the concern it shows to pregnant women facing serious challenges in their lives. There is no woman in Pennsylvania—or across the country—who should feel as if she is being forced into abortion. Help is as close as the nearest cell phone or Internet connection.

The Pennsylvania Pro-Life Federation has the most comprehensive list of PA pregnancy care centers on the World Wide Web. Chances are you or a friend can find a center within driving distance of home. You can find the complete list here.

You can also call the toll-free hotline at 1-888-Life-Aid. Compassionate, caring individuals are ready to take your call.

To be pro-life is to be pro-woman...both supportive of the woman carrying a child...and of the daughter inside her mother’s womb.

A portrait of an American hero:
"Created Equal: Clarence Thomas In His Own Words"

From page 8

Thomas In His Own Words” as opposed to the Niagara of complimentary reviews of “RBG,” a hugely flattering “portrait of an unlikely rock star: Justice Ruth Bader Ginsburg.”

There were some that understood that Thomas is (in Kathleen Parker’s words) an “American hero” for what he had overcome.

And, yet, because he’s a conservative, a sin especially grave to some because he is black, and because he opposes Roe v. Wade, he is reviled by the many who, were he ideologically otherwise, would herald him as a triumph of individual will and grace over seemingly insurmountable odds.

“Were he ideologically otherwise”—four words that explain everything.

Most reviews were snide, harshly critical, and many read as if they had not (to be polite) done their homework. One particularly vicious critic (on the grounds that Thomas insisted during his hearings that he had not had a conversation about Roe v. Wade) concluded that Thomas was “incurious.”

He’s a go-along-to-get-along kind of guy, a man who worked hard and achieved something and enjoyed a steady rise without ever being driven to explore things. He was a bureaucrat.

I don’t think it is humanly possible to be more wrong. Let’s count the ways.

As Jeffrey Toobin wrote back in 2007, with his “effusive good nature,” Thomas is “universally adored.” As another critic of the documentary conceded in the first few paragraphs, “Unlike most of his colleagues, he learns everyone’s name, from the janitors to each justice’s law clerks.”

But he is more than a good man whose “booming laugh fills the corridors.” Thomas is a powerful and deeply underrated intellectual force.

Thomas has written more than 600 opinions, “30 percent more than any other sitting justice,” as one of his former law clerks remarked.

“He wrote the most concurrences, dissents, and opinions of any justice during each of the past five terms, according to data from SCOTUSblog,” Emma Green, writing in the Atlantic, tells us.

“Should Thomas remain on the high court until his 80th birthday, as has become common, he would become the longest-serving justice in U.S. history,” adds Kyle Smith.

And, as we’ve written on other occasions, “At long last, Justice Thomas’ enormous influence is beginning to be recognized.” He has moved the High Court in his direction even as he has created a stable of young conservatives who are found everywhere in the pro-life Trump Administration and in the federal courts.

Justice Thomas is a remarkable man who has suffered more slings and arrows in his nearly 72 years than most armies.

But he endured, he persevered, he refused to give in when 99.9% of the rest of us would have buckled. How?

Parker concluded her column with this insight:

Audiences will learn why Thomas rarely asks questions and why he never gives up. A clue can be found inscribed on a bust Thomas keeps of his grandfather, who often said to the young Clarence: “Old Man Can’t is dead. I helped bury him.”
The acting administrator for the US Agency for International Development (USAID), John Barsa, sent a strong message to United Nations Secretary General António Guterres (SG) letting him know that the United States stands with nations that have pledged to protect the unborn.

In the letter, Barsa expressed the Trump administration’s concern that during the pandemic the SG, his staff, and the UN’s funds, programs, and specialized agencies need to stay focused on life-saving interventions and not seek to advance abortion in countries with pro-life laws.

The letter reminds the SG that the U.S. is the world’s largest donor of global health and humanitarian assistance with USAID disbursing over $3.5 billion to the UN in fiscal year 2019, $650.7 million to combat the pandemic globally with $45.3 million of that to UN agencies. It expresses U.S. belief that the “delivery of essential health care is the first priority around the globe during this time” and secondly that the U.S. believes severe food shortages which “could represent a second, deadly impact of the pandemic in many countries” must be prioritized.

The acting USAID administrator explained that the Trump administration’s concern is based in part on the UN’s Global Humanitarian Response Plan (Global HRP), and its $6.71 billion coordinated appeal. Mr. Barsa writes,

**Therefore, the UN should not use this crisis as an opportunity to advance access to abortion as an ‘essential service.’**

Unfortunately, the Global HRP does just this, by cynically placing the provision of ‘sexual and reproductive health services’ on the same level of importance as food-insecurity.

The U.S. seeks removal of the controversial term “sexual and reproductive health” from the UN’s humanitarian plan. According to Mr. Barsa,

“Therefore, I ask that you remove references to and its derivatives from the Global HRP, and drop the provision of abortion as an essential component of the UN’s priorities to respond to the COVID-19 pandemic.

The SG is also reminded of the controversy that exists at the UN over terms that reference abortion:

“Member States are deeply divided over the use of the term ‘sexual and reproductive health’ and its derivatives, and it is among the most polarizing issues raised in UN negotiations. The Global HRP, and the activities of UN agencies and bodies moving forward, should use clear language and take clear action to address the real needs of vulnerable people around the world without promoting abortion. Now is not the time to add unnecessary discord to the COVID-19 response.

President Trump’s strong pro-life message to the 74th UN General Assembly is quoted in the letter to underscore U.S. commitment to saving all lives:

“Under the leadership of President Donald J. Trump, the United States has made clear that we will ‘never tire of defending innocent life.’ President Trump said in his address to the 74th UN General Assembly that the UN simply has ‘no business attacking the sovereignty of nations that wish to protect innocent life.’ Indeed, the UN should not intimidate or coerce Member States that are committed to the right to life.”

In conclusion, Barsa objected to UN use of the pandemic to advance access to abortion, an act opposed by many countries which seek to protect the unborn:

“To use the COVID-19 pandemic as a justification to pressure governments to change their laws is an affront to the autonomy of each society to determine its own national policies on health care. The United States stands with nations that have pledged to protect the unborn.”
The inclusive Old Pledge is still the Best Pledge

By Jean Garton

Editor’s note. May 25 was Memorial Day. I often asked Jean, who passed away in December 2016, to write about commemorative dates, the kinds of days where Americans are encouraged to think about who we are as a people.

Jean, my friend of more than 30 years and the author of the pro-life classic “Who Broke the Baby?” sent me this post just prior to Memorial Day, 2016. I am re-running her great message as a tribute to her and an inspiration to us all.

On May 30, 2016, the United States again observed Memorial Day.

First called Decoration Day, it is a date set aside in 1868 to remember the men and women who lost their lives in wars fought in the then short history of our beloved country.

While always a poignant day, it also a grateful day. Together, as a nation, we remember the freedoms we enjoy because of the valor and sacrifice of the members of our military services.

Memorial Day is marked with parades, services of all sorts, singing of patriotic songs and, of course, citizens reciting the Pledge of Allegiance.

Those key words – With Liberty and Justice for All – have long been taken at face value. However, in practice today, they have been amended and revised and revamped.

There is the Pompous Version. With Liberty and Justice for All: that is, the perfect, productive, and planned.

There is the Elitist Version. With Liberty and Justice for All, except for those who are “inconvenient” or “unwanted.”

There is the Materialist Version. With Liberty and Justice for All, but not for the poor, dependent, or those who existence some deem too costly to preserve and defend.

There is the Escapist Version. With Liberty and Justice for….

It all depends.

There is the Pro-Abortion Version. With Liberty and Justice for All women who have a right to control their own bodies and because a fetus is not a person and because a woman has a right to choose and because, and because, and because….

It is an anti-democratic version of the Pledge that has become one, long run-on sentence that evades the Pledge’s core meaning.

But, then, there is the Pro-Life Pledge. It comes without exceptions but with quotation marks because the words of the Pledge are not ours to change: “With Liberty and Justice for All.” Period!

That phrase speaks of an inclusive, not an exclusive, society. It is that great and historic truth to which Pro-Lifers pledge themselves.

Men shouldn’t be silent on abortion or be silenced

From page 6

of experiential knowledge that we can’t possess without the relevant experience. Just as civilians don’t know what it feels like to engage in military combat, men don’t know what it feels like to undergo pregnancy or childbirth or abortion. Yet claims about the morality of war and abortion are not matters of experiential knowledge but of propositional knowledge. We can determine whether they are true or false using evidence and logic.

Consider the pro-life view. It’s based on (1) the fact established by embryology that human embryos and fetuses are members of the species Homo sapiens and (2) the principle that all human beings have human rights and should not be subjected to unjust acts of lethal violence.

Countless women in the United States and around the world embrace this argument—including women who have personally experienced unexpected pregnancy, childbirth, abortion, the placement of children for adoption, poverty, abuse, and pregnancy resulting from sexual assault. And pro-life men embrace the very same argument. The argument is accessible and knowable by people of all backgrounds.

What matters is whether or not it’s sound. What matters is whether or not the pro-life position is true.

And if it is, then men shouldn’t be silent. They should join with pro-life women to advocate and defend the rights of children in utero, to support their mothers, and to help bring an end to the injustice of abortion.
By Dave Andrusko

Malcolm Gladwell is the author of many best sellers, The Tipping Point perhaps the best known. A one-sentence grabber on Amazon reads, “The tipping point is that magic moment when an idea, trend, or social behavior crosses a threshold, tips, and spreads like wildfire.”

Wikipedia provides a more technical definition: “In sociology, a tipping point is a point in time when a group—or many group members—rapidly and dramatically changes its behavior by widely adopting a previously rare practice.”

However, we understand the idea, Van Gordon Sauter, former president of CBS News, believes the media’s long-standing “liberal tilt” has moved to a dangerous new posture.

Writing in the Wall Street Journal, Sauter argues, “Much of journalism has become the clarion voice of the ‘resistance’ dedicated to ousting the president, even though he was legally elected and, according to the polls, enjoys the support of about 44% of likely 2020 voters.”

A news industry stocked with pro-abortionists who are liberal on a host of issues is nothing new. Nor is the willingness to toss overboard standards of journalistic integrity that would have been unthinkable not so long ago unique.

What is different is that much of the prestige media—such as the New York Times—has so thrown their lot in with “the resistance,” they couldn’t draw back even if they wanted to. Their audience would rebel. But that’s not in the cards anyway. “The news media seems very comfortable with its product and ability to sell it,” Sauter writes.

Their loathing of Mr. Trump has accelerated the pace. The news media is catching up with the liberalism of the professoriate, the entertainment industry, upscale magazines and the literary world. Recent arrivals are the late-night TV hosts who have broken the boundaries of what was considered acceptable political humor for networks.

Put another way, it is acceptable to lace even the straightest of straight news story with heaps of the reporter’s hostility to President Trump. A flood of Fire “X” tweets immediately washed over the Internet.

Two other points. First, Sauter writes News organizations that claim to be neutral have long been creeping leftward, and their loathing of Mr. Trump has accelerated the pace. The news media is catching up with the liberalism of the professoriate, the entertainment industry, upscale magazines and the literary world. Recent arrivals are the late-night TV hosts who have broken the boundaries of what was considered acceptable political humor for networks.

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ACLU opens second front in war against FDA-mandated protections for women undergoing chemical abortions

By Dave Andrusko

During the COVID-19 pandemic, among the most significant objectives of the Abortion Lobby is to eliminate FDA-mandated requirements that safeguard the health of women who undergo chemical—“medication”—abortions.

Such abortions involve two drugs: mifepristone and misoprostol. The long-sought objective is to allow mifepristone to be dispensed by pharmacies and (better yet from their perspective) through the mail. The ultimate goal is highly-dangerous Do-It-Yourself abortions.

NPR tells us, “In a federal lawsuit filed in Maryland on behalf of the American College of Obstetricians and Gynecologists (ACOG) and other groups, the American Civil Liberties Union requests an emergency order lifting regulations requiring patients in the United States to pick up the drug at a hospital or medical facility,” an allusion to the FDA’s Risk Evaluation and Mitigation Strategy (REMS).

The ACLU has targeted REMS for years. Under its provisions, as summarized by Patrick Adams of the News York Times, “mifepristone can be dispensed only in clinics, medical offices and hospitals; only by, or under the supervision of, a doctor certified to prescribe the drug; and only to patients who have signed an F.D.A.-approved patient agreement.”

And as always, the ACLU tells us none of this is necessary, in fact is discriminatory.

In its May 27 filing, the ACLU opened a second front in its war on REMS. Going back to 2017, it said it wants REMS eliminated for medication abortions.

The new suit is “more narrow,” NPR’s Sarah McCammon tells. Paraphrasing the ACLU’s Julia Kaye, McCammon writes that the ACLU is “asking the court to suspend the rules during the pandemic only.”

Cynically trading on attempts during the pandemic to “forego unnecessary in-person visits,” the ACLU lawsuit “asks for an emergency order allowing the mifepristone to be dispensed through the mail or by pharmacies.”

Through all this, the FDA has held firm in its requirements, supported by pro-life elected officials and pro-life organizations, such as National Right to Life.

In a letter sent to FDA Commissioner Stephen Hahn, M.D., thirty-eight Senators and 121 Representatives urged “robust enforcement” of the REMS involving the mifepristone abortion-drug process. The members of Congress wrote, Despite claims that medication abortion is safe and easy, research proves that as many as five to seven percent of women who take abortion drugs will require follow-up surgery, and three percent could end up in the emergency room. Self-managed abortions from home are especially dangerous; in fact, half of abortion providers do not consider them safe, according to a 2019 survey published in the journal Contraception. Further, medication abortion becomes even more dangerous in situations where women cannot access emergency medical care. This is especially concerning during the COVID-19 pandemic as emergency rooms are currently being overwhelmed.

In addition, as NRL News Today reported, National Right to Life joined more than four dozen pro-life and pro-family groups in a letter sent to the U.S. Food and Drug Administration asking the FDA to take action against the illegal sale of abortion-inducing drugs.

“Internet sales of mifepristone have the potential to multiply the inherent dangers of the drug combination, further endangering women’s lives which are already at risk in the abortion procedure,” said Carol Tobias, president of National Right to Life.
Pro-abortion publication goes into full hysteria mode because pro-life group is “Incredibly Effective—and Dangerous”

By Dave Andrusko

When a pro-abortion down to the last metatarsal publication like Mother Jones describes you as “Incredibly Effective—and Dangerous—Anti-Abortion Activists,” it is the ultimate compliment, but in a backhanded way. So we shouldn’t be surprised that Marisa Endicott is not content just to smear the American Association of Pro-life Obstetricians and Gynecologists (AAPLOG) for its public policy initiatives; she warns her reader ominously, “Your OB-GYN could be one of them”!

Endicott’s story is plenty long (over 5,000) words, but allow me to summarize her main points.

*By definition—and I do mean by definition—whatever comes out of AAPLOG is suspect—“fringe science,” “scientifically suspect anti-abortion research.” This is to be contrasted with the impeccable work done by American College of Obstetricians and Gynecologists (ACOG) routinely undertakes? It doesn’t, of course. Dr. Christina Francis, president of the American Association of Pro-life Obstetricians and Gynecologists, cut to the chase in an op-ed that appeared in the Wall Street Journal on March 4:

ACOG routinely puts politics ahead of medicine by adopting the most extreme positions on abortion. It has lobbied and briefed against parental notification of minors and informed-consent laws, and in favor of taxpayer-funded abortion. It has advocated for laws restricting speech around clinics and compelling pro-life pregnancy centers to tell women where they can go to obtain state-subsidized abortions. ACOG’s work has gotten so political that in 2008 it added a lobbying arm. I was refused when I asked if I could direct our dues only to the organization’s nonlobbying arm.

*Endicott laments that policy makers in the Trump administration listen to AAPLOG. Again, that is precisely what the American College of Obstetricians and Gynecologists and the equally pro-abortion American Medical Association habitually does when pro-abortion Democrats hold the White House. And, by stark contrast, whatever ACOG and the AMA say is treated by the media as if it came down from Mt. Sinai.

As I mentioned, this story goes on and on and on. Just one other of the many reasons Endicott is so angry: AAPLOG testifies and lawmakers listen respectfully. Worse yet, it’s what they testify about, for example, the capability of unborn babies to experience pain as they are torn apart. In full snark mode, Endicott tells this is part of “the recently renewed hysteria around infanticide.”

When talking about fetal pain in front of a congressional committee, the group’s executive director “even [took] out a small model of a fetus and a medical clamp to mimic pulling its limbs off one by one as she gave a play by play of the procedure,” an irate Endicott complains. To talk about tiny arms being yanked off or heads crushed is “both extremely graphic and full of falsehoods about so-called fetal pain,” Endicott reports to her readers.

Finally, the credentials of pro-life organizations, whether they be medical, like AAPLOG, or educational/legal/political like National Right to Life, will inevitably be caricatured and minimized by the Abortion Industry, backed up by pro-abortion medical organizations, and echoed by pro-abortionists’ media enablers.

But all of us persevere for the simple reason our cause is just and our analyses accurate. Mother Jones may hate us, but millions of mothers love what we do for them and unborn babies.
Why It’s Wrong I Was Aborted (Unsuccessfully)

By Melissa Ohden

1. Because I was then and am now a human being with inherently dignity and value.

Editors note. This appeared on Melissa’s blog. In 1997 she survived a saline abortion.

Female Republican politicians were the most vocal about defunding Planned Parenthood

From page 11

1. Fetal Rights Issue: defunding PP will help protect unborn children
2. Condemn Planned Parenthood: defunding PP is a way to condemn PP for immoral treatment of fetal tissue

Unsurprisingly, she found almost exclusively Democrats used the frame “Planned Parenthood Healthcare,” while Republicans used the frames “Alternative Healthcare,” “Fetal Rights Issue,” and “Condemn Planned Parenthood.” Both parties used the frame “Women’s Issue,” though Democrats used it more. But here’s the important part: While both female Republicans and Democrats discussed Planned Parenthood as a women’s issue and healthcare issue, Republican women also discussed it as a fetal rights issue.

If you have any understanding of the pro-life perspective, this finding should be predictable. Pro-life people recognize the fact that abortion kills humans. We view those humans as children (morally relevant young humans deserving protection). So we view abortion first and foremost as a human rights violation. Of course pro-life politicians are going to discuss Planned Parenthood in the context of fetal rights. That’s basically another way of saying pro-life people will discuss abortion from a pro-life perspective.

Johnstonbaugh’s finding about Republicans vs Democrats is mystifying only if you view PP solely through the “women’s issue” framing, but I don’t know why anyone would do that. You don’t have to be that involved in the abortion debate to know that many people view PP as a more complicated and controversial organization. Huge swaths of the country — including countless women, btw — see abortion as an issue that affects not only women but also preborn children. Pro-life Republican women might be less vocal about women’s issues generally, but Planned Parenthood is not simply a “women’s issue” topic. It goes well beyond that.

Johnstonbaugh called her findings about Republicans vs Democrats “unexpected,” “counterintuitive,” and “surprising,” but they shouldn’t be. Pro-lifers have been quite vocal, for decades, about the facts that we view abortion as a human rights issue and we care deeply about the problem. If pro-choice people could internalize our most basic premise — not agree with it necessarily, just recognize it’s what we think — they would be caught off guard less often.
Latest numbers show fewest abortions in Arkansas since 1977

By Rose Mimms, Executive Director, Arkansas Right to Life

The provisional data released last week by the Arkansas Department of Health on the number of induced abortions in the state in 2019 reported the lowest total number of abortions in the state since the state began reporting in the mid-70s—2,963. One abortion is too many but that drop is a very good thing and a reminder that pro-life education pays off.

Since the 1990s when legal abortion reached the highest of 1.6 million, both the abortion rate (the number of abortions per thousand women of child-bearing years) and the total number of abortions have continued to drop consistently. However, because we never lose sight of the truth that each and every abortion takes a human life, all who call themselves pro-life agree that the new numbers will rally all of us to continue educational and legislative efforts to make the abortion decision unthinkable for any mother in a crisis pregnancy situation. So we have much work to do.

One of the most compelling numbers in the data tells us that chemical abortion is soaring as a preferred method to stop the beating heart of the unborn child.

In Arkansas, Planned Parenthood’s one clinic in Little Rock is the leading provider and responsible for most of the 1,237 deaths by this method, though the other abortion clinic provides surgical and chemical as well. That’s up from 979 in 2018, accounting for more than 40 percent of the total number of abortions in Arkansas.

RU-486 (“medication abortion”) involves two drugs taken 72 hours apart. The first kills the baby up to 10 weeks; the second expels the dead baby.

It’s remarkable (and a cause of great consternation to pro-abortionists) to note that a mother can change her mind after taking the first pill and possibly save her baby if she does not take the second drug but take progesterone to try to counter the effects of the first drug.

According to the report, 1369 suction abortions were reported in the first trimester and 355 dismemberment (D&E) abortions at 12-plus weeks. And one “other” for a total of 2,963.

Another interesting statistic is the 13 judicial bypasses that were granted for teenagers up to 17 years old that allowed a likely surgical abortion without their parent’s knowledge or consent. It was a repeat of the same exact statistic in 2018. The possible physical, emotional and spiritual consequence of abortion on a child who is making a life and death decision without the input of a parent is incomprehensible. An advocate should be appointed to speak for the minor child and her unborn child in those court proceedings.

A particularly shocking number is the Induced Abortions by Race. There were 1,317 White, 1,373 Black, 221 to other, and 52 unknown. This graphically reveals a disproportionate abortion choice by women of color based on the population of our state. While this number fluctuates from year-to-year, it is always disproportionate when compared to population, a pattern that is repeated in most if not all states.

Unmarried women age 20-29 account for 1,793 of the 2,963, or roughly 60 percent of legal abortion in Arkansas. (Unmarried women of all ages had 2,575 accounted for 87 percent of all abortions. In addition, 338 women came to Arkansas from surrounding states to obtain an abortion, up from 321 in 2018. Very disturbing is the continued increase in the number of repeat abortions reported 1,048 were having their second or more abortion, a whopping 35 percent.

These numbers tell a story about women. Some, when faced with the life and death decision of abortion, are provided a free ultrasound or the opportunity to hear the beating heart of their baby, and find support from a pregnancy help center, friend or parent, and choose life instead of abortion. By contrast there were other girls who felt that their only choice was to go to a judge instead of their parent or to an abortion provider whose only option was to stop the beating heart of their baby as the solution to their crisis.

Yes, fewer women chose abortion in Arkansas. But for the 2,963 who did, the pro-life movement offers love, help and healing if you want it and the promise that abortion does not have to be your only choice should you face another crisis pregnancy.

The work to end abortion won’t stop until the demand for abortion is no more. Much work to do.
Healthy Baby Boy Safely Surrendered at Arkansas’ First Safe Haven “Baby Box” Location

BENTON – A baby has been saved in Arkansas via the first surrender at a Safe Haven Baby Box in Benton, Arkansas Right to Life Executive Director Rose Mimms announced May 28.

On Sunday, May 24, at approximately 5:01 p.m. a newborn infant was placed in the Safe Haven Baby Box located at Benton Fire Station No. 3, 2717 Edison Ave., said Mimms. The Safe Haven Baby Box location in Benton was dedicated Sept. 18, 2019.

“We are grateful that the Safe Haven Baby Box provided this mother with a safe, anonymous surrender alternative for her and her child. I applaud her bravery and the sacrificial gifts of life and adoption that she has given her son through the Safe Haven Baby Box program,” said Mimms.

To announce additional details of the surrender, a press conference will be held at 10:30 a.m. Friday, May 29, at the location of the surrender in Benton, and will feature Monica Kelsey, founder of Safe Haven Baby Boxes, said Mimms.

Arkansas Senator Cecile Bledsoe applauded the Arkansas Legislature for supporting the Safe Haven Law and the impact it is having on saving children.

“I am so grateful to my colleagues in the Legislature who joined with me to add the baby boxes to the Safe Haven law. A few days ago, instead of leaving a baby by the side of the road or on a doorstep, and healthy baby boy! What a miracle! Jeremiah 1:5,” Bledsoe said in a statement.

Arkansas Right to Life has promoted the Safe Haven Law counties. Mimms stressed the importance of the billboard campaign and the importance of mothers knowing about the Safe Haven Law and the Safe Haven Baby Box hotline number (1-866-9922291) listed on all billboards.

“The Safe Haven Law can help a mother to safely surrender her child to an official location, hospital, law enforcement or manned fire department in Arkansas or anonymously in a Safe Haven Baby Box,” Mimms said.

The Safe Haven Law, enacted in Arkansas in 2001, is designed to protect babies from being hurt or killed from abandonment by parents who are unwilling or unable to provide parenting. Under the law, a parent may surrender an infant 30 days or younger at a hospital emergency room or law enforcement agency, but in 2019 the law was amended to include manned fire stations as a surrender location. The amended law, sponsored by Arkansas Sen. Bledsoe and Rep. Rebecca Petty, also approved the installation of Safe Haven Baby Boxes at surrender locations.

Arkansas Right to Life is the state affiliate of National Right to Life.
ST. PAUL — On June 4, Minnesota Citizens Concerned for Life (MCCL) called for the resignation of Minnesota Department of Health (MDH) Commissioner Jan Malcolm and an immediate end to the state’s policy of placing infected COVID-19 patients in long-term care centers—especially centers with known infection-control problems. About 80 percent of Minnesota’s coronavirus deaths have occurred in long-term care or assisted living facilities, according to MDH.

“Other states have learned not to transfer infected patients into nursing homes. They have found alternatives in order to better protect people. Minnesota still hasn’t,” says MCCL Executive Director Scott Fischbach. “There are no excuses. We are simply failing the most vulnerable members of our state. A change in leadership and policy at the Minnesota Department of Health is now long overdue.”

MDH’s policy has generated significant media attention and criticism from elder advocacy groups, lawmakers, the families of nursing home residents, and others. “As it stands,” noted a Star Tribune report, “even nursing homes with poor infection-control standards, as well as large and deadly clusters of the virus, have been allowed with on the phone are not in compliance with infection-control standards. MDH has declined to publicly disclose the number of deaths in each

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infected patients to the rates in facilities that have not.

“The grave dangers to residents of long-term care facilities—and the need to keep the virus out of such facilities—have been clear from the beginning. That was months ago,” says Fischbach. “This is an emergency, and Commissioner Malcolm and her team are not getting the job done. Minnesota deserves better. No category of humanity is expendable. No group of human beings should be forgotten.”

As of June 4, 896 of Minnesota’s 1,115 coronavirus deaths have taken place in long-term care or assisted living facilities. The COVID-19 death rate in Minnesota’s nursing homes is worse than the rates in the neighboring states of Wisconsin, Iowa, North Dakota, and South Dakota, according to data from the federal Centers for Medicare and Medicaid Services.

MCCL has previously sought to draw attention to this ongoing crisis and to the importance of protecting elderly, sick, and disabled members of our society.

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Appeals court panel uphold injunction of Kentucky abortion law

By Dave Andrusko

As we wrote back in January, although the line of questioning does not always indicated what a judge is thinking, it seemed clear that two of three judges of a 6th U.S. Circuit Court of Appeals panel were going to uphold a permanent injunction granted by U.S. District Judge Joseph McKinley, who, in 2019, found House Bill 454 unconstitutional.

Sure enough, on June 3 Judges Eric Clay, an appointee of Bill Clinton, and Senior U.S. Circuit Judge Gilbert Merritt Jr., a Jimmy Carter appointee, concluded that it was “unduly burdening the right to elect abortion” to require fetal demise before the baby is torn apart in a dismemberment abortion.

John Bush, appointed by President Donald Trump, offered a brilliant 10-page dissent in which he systematically dismantled the majority opinion.

The suit was brought by Louisville’s EMW Clinic, which challenged the law right after it was signed by former Gov. Matt Bevin. As NRL News Today wrote previously, the parties agreed to suspend enforcement of HB 454 pending the outcome of the federal court trial.

Deputy Solicitor General Matthew Kuhn told the judges in January,

“We, Kentucky, can change how abortion procedures are performed to make them more humane,” adding that the state of Ohio already has a similar law on the books. “If doctors in Ohio are already doing it, why can’t doctors in Kentucky do it?”

Clay was unpersuaded, arguing fetal demise has no benefit for the mother and poses potential dangers to her.

Writing for Courthouse News, Kevin Koeninger did a very fair job summarizing Judge Bush’s dissent.

In the dissent, Bush said it was odd that “not a single person whose constitutional rights are directly impacted by the law is a party to the case,” and argued the case should have been dismissed for lack of standing.

While physicians and abortion providers are generally granted third-party standing to sue on behalf of their patients, Bush was skeptical that the providers in this case could satisfy the “closeness requirement” of such a position.

Bush cited expert testimony from the trial that showed a large percentage of women seeking second trimester abortions prefer to have a fetal demise procedure before the abortion, and said this created a conflict of interest between the abortion providers and the patients they represented in the suit.

“At the very least,” he wrote, “the proof at trial reflects a potential conflict between the interests of the EMW physicians and some, perhaps the majority, of the patients that they seek to represent. All of the evidence presented at trial about patient preference c i r c u m s t a n t i a l l y supports a finding that at least some – and potentially, most – of patients seen by plaintiffs would favor the effect of H.B. 454 because those patients would want fetal demise before a D&E.”

He added, “The statute essentially requires that abortion providers at EMW receive the necessary training, which in turn would allow those women who prefer fetal demise to obtain it before the D&E procedure is performed.”

To amplify a couple of points…

“There is the contention that learning to administer one of the techniques that ensure the poor baby has passed before ripped apart is practically brain-surgery. It’s not, as expert testimony at the trial illustrated. Moreover, as Judge Bush noted, “Dr. Davis—whom EMW called as an expert but did not hire as one of their physicians—acknowledged that an intrafetal or intraamniotic digoxin injection is within the standard of care for an OB/GYN to perform; indeed, she herself had performed such injections. Likewise, the National Abortion Federation states in its 2018 Clinical Policy Guidelines for Abortion Care that an intraamniotic or intrafetal digoxin injection is a permissible option for accomplishing fetal death before a D&E procedure.”

Judge Bush wrote that “The reasons why a woman would make the choice for fetal demise” prior to an abortion” were “demonstrated at trial. Dr. Anthony Levantino testified that in a D&E procedure, the “[f]etus dies from dismemberment from literally having arms and legs pulled off”; “[it] bleed[s] to death.” Another physician, Dr. David Berry, described a D&E procedure in which the doctor “pulled out a spine and some mangled ribs and the heart was actually still beating.” It is not difficult to understand why a majority of women would want the heart to stop beating before the fetus undergoes such an ordeal.”

Pro-life Kentucky Attorney General Daniel Cameron
Doctors now assist suicide by Zoom

By Wesley J. Smith

We are always told that “strict guidelines will protect against abuse.”

It’s always been baloney. As sold, assisted suicide was supposed to only be engaged between doctors of long-standing and patients well known to the prescriber.

That was violated in the very first legal assisted suicide in Oregon. The doctor in that case — referred by an assisted-suicide advocacy organization — only met the patient two weeks before she received her poison pills.

Very quickly, death doctors began to assist the suicides of patients they have never treated. In California, a part-time ER doctor — who spent most recent years as a photojournalist — quickly set up a suicide practice after assisted suicide was legalized. There have also been many cases of oncologists assisting the suicides of ALS patients, and other similar out-of-specialty death facilitations.

Now, death doctors are assisting suicides of patients they may never have met via Zoom and other telehealth — talk about an oxymoron in this circumstance! — means of communication. From “Dying Virtually,” published in The Conversation:

[Dr. Carol] Parrot says she sees 90% of her patients online, visually examining a patient’s symptoms, mobility, affect and breathing.

“I can get a great deal of information for how close a patient is to death from a Skype visit,” Parrot explained. “I don’t feel badly at all that I don’t have a stethoscope on their chest.”

After the initial visit, whether in person or online, aid-in-dying physicians carefully collate their prognosis with the patient’s prior medical records and lab tests. Some also consult the patient’s primary physician.

Did you catch the last bit there? Some “consult” the patient’s primary physician. That also means some don’t. And that means some people are assisted in suicide by doctors they have never met in the flesh and who have never examined them.

This is a breach of all the assuring promises that were made when assisted suicide was legalized. But those promises were never meant to be kept. Only to give false assurance.

It is amazing to me how legalizing assisted suicide transforms peoples’ thinking. Making people dead quickly becomes the overriding imperative and suicide prevention for the seriously ill goes into total eclipse. The easier it is to get people dead, the better.

Those with eyes to see, let them see.

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

Joe Biden: One year after his flip-flop on the Hyde Amendment

Joe Biden: One year after his flip-flop on the Hyde Amendment

The Biden Gaffe Machine, of course, is in full throttle. In speaking off the cuff (and also off of teleprompters, for that matter), Biden’s language is a stranger in a strange land. But for all his verbal malapropisms and baffling sentences in search of an elusive predicate, Biden’s message is crystal-clear to the Planned Parenthoods and NARALs.

He is with them with all the enthusiasm of a convert to the cause of death. You can count on Biden through thick and thin.

You will hear supporters/reports offer many reasons why Biden is not such a bad guy. He may be a prince of a fellow at home, for all we know.

But what we can know for sure is that as sturdy and unwavering a champion of unborn children President Donald Trump has been, Joe Biden will match him with a lethal discipline to multiply the number of dead babies at home and abroad.
What are you afraid of?” Pregnancy center helps women overcome fear

By Kim Hayes

“What are you afraid of?”

During the challenges of 2020, Care Net Pregnancy Center of Central Texas is helping its clients process this question, leading to life-changing pregnancy help.

Helping clients choose life while walking with them toward independence is the focus at Care Net of Central Texas which works as well to turn clients’ fear into freedom.

The center has had such a significant positive impact on Waco, Texas and the surrounding communities such that it has drawn recent attention from the media for its work in meeting clients’ needs during the current pandemic.

Speaking with Deborah McGregor, her passion to serve and inspire others to serve is apparent.

McGregor is an attorney and has been the CEO of Care Net of Central Texas since 2006.

The Guesthouse, the center’s residential outreach for homeless mothers, is perhaps the most unique component of this multifaceted pregnancy care center.

This program expands the center’s impact with clients, addressing core needs such as housing, childcare, employment, transportation, education and medical care, as clients live on site for up to six months. It is an opportunity for homeless mothers to face off with all their fears and find a solid path toward independence.

Care Net of Central Texas highlights the services provided by the Guesthouse in a video.

McGregor has strong passion for the issue of homelessness, along with great hope for more pregnancy centers to take on the issue among their clients in the future provided they are able.

In addressing the benefits as well as the challenges of a residential outreach McGregor stated, “I wish other centers would take the risk and address this issue.”

The Guesthouse was started in 2014 and completed in 2016 with 14,000 square feet, complete with kitchen area, seven guest rooms, administrative area and accommodations for at least 28 women and children.

The name is intentional, this is not a permanent home, but a place where “guests” will gravitate toward a stable home for themselves and their children (or expected child).

This facility, built on donated land, took $2.8 million to complete, and the goal to meet core needs of clients is no less ambitious. Yet donors have come alongside these efforts once they see how it results in changing clients’ lives.

To maintain the safety of the Guesthouse’s residents and be assured they are ready to work toward independence, all clients undergo drug testing and background checks. Clients would only be deemed ineligible from housing should there be a case of false identification. Next, a plan is laid out to begin working through the challenges unique to the client and her situation.

Part of McGregor’s strategy is focusing on more long-term services to assist clients, referring them to state and local services, rather than duplicating them, such as STD testing. The center gives vouchers to clients to go for testing and treatment when needed. This has been effective in reducing the center’s expenses.

The center uses the opportunity of negative pregnancy tests to offer clients abstinence education, and encourages them to take the 21-day love challenge (abstinence dare/trial to demonstrate the positive effect of control over one’s choices as a single person).

Another area where Care Net of Central Texas has pivoted resources, came after experiencing “no-shows” of clients for one-on-one classes. Utilizing other agencies’ expertise, bringing in trainers for parenting and other classes has enhanced the center’s curriculum, and freed up staff and resources to focus elsewhere.

The center’s mobile outreach program has energized the staff this spring in the midst of the pandemic.

What is obviously another great opportunity to get clients’ needs met through the distribution of vital resources (baby items, formula, hand sanitizer, toilet paper, cleaning supplies, face masks, etc.) has opened up a mini mission field...
During the pandemic, “Hercules” to the rescue of pregnant women

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

The star of “Hercules” is coming to the rescue of pregnant women at the epicenter of the Coronavirus pandemic.

Actor Kevin Sorbo co-hosted an online event May 28 to benefit the life-saving work of the Good Counsel maternity homes in the Northeastern United States.

You can learn more about the organization and the online event at www.goodcounselhomes.org/

The non-profit organization operates five maternity homes in New York and New Jersey, areas especially hard hit by the COVID-19 crisis.

Outspokenly pro-life, Sorbo last month stated on the social media platform Twitter: “In a nation where liquor stores, marijuana dispensaries, and abortion clinics are deemed ‘essential’ by government bureaucrats during the Coronavirus outbreak, and church attendance is judged non-essential, we don’t have to study long to diagnose the morbid condition of America.”

Following the revelations about West Philadelphia abortionist Kermit Gosnell’s “House of Horrors,” Sorbo and his wife stated that they were offering prayers that “the thousands of babies slaughtered are never forgotten.”

Meanwhile, the online fundraising event was entitled, “Pregnancy Help for the Pandemic & Abortion Epicenter.” It verified how Good Counsel homes are reaching out to mothers and babies during these especially trying times.

“We will not shut out women in need during this most critical time,” said the CEO of Good Counsel, Sandra Jones. “As people are staying home, as they should, tensions will heat up. For those who are now unemployed, depression and anxiety will rise. Domestic violence will escalate the longer this goes on. Good Counsel will respond with immediate help for women and children who need us.”

Research has shown that as many as 60 percent of abortions are coerced, meaning that women are being pressured by boyfriends, husbands, parents, and others to abort their children. Pro-life advocates are concerned that some individuals may use the pandemic to prey upon the fears of vulnerable pregnant women.

Leading medical professionals have confirmed that COVID-19 cannot be transmitted from a mother to her preborn child through the placenta.

As Good Counsel’s website notes, since 1985 the organization has “helped more than 7,800 homeless women and children move from a crisis situation to receive concrete help and build a brighter future.”

“What are you afraid of?” Pregnancy center helps women overcome fear

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you need? How can we pray for you?”

It is their normal policy to follow clients for three years, which blesses clients and enables the center to track births and other successes for keeping their supporters up to date.

Additionally, in these times making these follow-up calls has been yet another opportunity to remind clients of the hope and compassion offered by the center.

“The response has been huge,” McGregor said, “and the need proven to be immense, but the staff presses on, trusting in God’s provision for what will be needed in the days ahead.”

McGregor considers the center to be a conduit for individuals to serve. She believes people want to help and often don’t know how. Care Net of Central Texas continues to find ways for people to come together and also bless women in need by positively affecting clients and their children.

Prenatal care is not just suggested to clients. Prenatal care providers are contracted to provide care at the Care Net of Central Texas facility, providing essential care for mother and child, enabling center staff to continue working with clients on an ongoing basis. This arrangement allows clients to get immediate prenatal care should Medicaid coverage need to be established.

The broad range of services, utilizing experts from the community to provide prenatal care and conduct classes, along with case management services, has helped Care Net of Central Texas provide the best comprehensive services and opportunities for clients.

This wide focus on client needs has been instrumental in the center effectively serving the communities in and around Waco.

With all this support, clients at the center experience solutions where fear is exposed to the truth that resources and encouragement open up possibilities.

Editor’s note. This appeared at Pregnancy Help News and is reposted with permission.
What will newest Gallup poll tell us about abortion and public opinion?

By Dave Andrusko

Each year, typically in June (or at the very end of May), Gallup releases its most up-to-date assessment of where the American people are on abortion. With a presidential election coming up November 3 that will feature pro-life President Donald Trump against pro-abortion former Vice President Joe Biden, this year’s results will be more important than ever.

Let’s review what Gallup told us in 2019. The results were very encouraging.

On May 29, Gallup gave us the results of what it calls its “Values and Beliefs poll.” People are asked straightforwardly whether a given behavior is “morally acceptable” or “morally wrong.”

Although she conspicuously did not point it out, in the story written by Gallup’s Megan Brenan, we discover that the percentage of Americans who believe abortion is morally acceptable is tied for its lowest point in six years—42%.

Conversely, the percentage of Americans who believed abortion is morally wrong was at its highest point in seven years—50%.

One month later (June 25, to be exact) Gallup published the results of a survey with this let’s-minimize-the-significance headline: “Majority in U.S. Still Want Abortion Legal, With Limits.”

Talk about burying the lead! Our headline was much more representative: “Latest Gallup poll shows strong increases in pro-life sentiment.” Here’s what the results actually showed us.

1. We have frequently praised Gallup for asking more discerning questions about abortion and for asking follow-up questions. In 2018, Gallup found that a total of 53% wanted abortion legal “only in a few circumstances” (35%) or “illegal in all circumstances” (18%).

In 2019, Lydia Saad casually observed, a total of 60% want abortion legal “only in a few circumstances” (39%) or “illegal in all circumstances” (21%).

That is a big, big jump of 7 points.

2. What about voting based on a candidate’s position on abortion?

We cautioned NRL News Today readers last June not to get lost in the fact there is more overall interest in abortion. That is important but secondary. Look at which side has the largest increase in the percentage of people who will only vote for candidates who agree with them on abortion.

Here are three long passages from Saad’s account.

Consistent with all prior Gallup trends on the subject, most Americans say that abortion is not critical to their vote, but the percentage saying they would only vote for a candidate for major office who shares their views on abortion has been inching up over the past decade. The figure is now 29%, compared with 20% when Gallup last asked this in 2016 [Note—an increase of 9 points in just three years], and a low of 13% in 2008.

Meanwhile, the percentages saying a candidate’s position on abortion is just one of many important issues they take into account when voting, or that abortion is not important to their vote, have been trending down — currently at 44% and 26%, respectively.

Not only is the overall percentage of Americans saying that abortion is key to their vote at a record high, but the percentage continues to be more important at all) and more say a candidate must agree with them on abortion.

So, who does this benefit? Saad wrote

Currently, 26% of pro-choice adults say they will only vote for a candidate who shares their views on abortion, up from 17% in 2016.

However, the matter continues to be more important as a voting issue to pro-life than pro-choice adults, as it has in every Gallup measure since 2004.

Thirty-five percent of pro-life adults now say they will only vote for like-minded candidates on the issue, an increase from 23% in 2016.

Just to be clear, in 2016 more pro-life adults than pro-choice adults said “they will only vote for a candidate who shares their views on abortion”—23% to 17%—a 6 point advantage.

But in 2019 the gap is even larger—35% to 26%—a nine point advantage.

3. What about self-identification? This bounces around, but the overall point is that in 1996, 56% self-identified as pro-choice to only 37% who self-identified as pro-life. As recently as 2015, 50% identified as pro-choice to 44% who identified as pro-life, Gallup reports.

In 2018, 48% said they were pro-life, 48% said they were pro-choice. Even-steven.

But in 2019, 49% identified as pro-life to 46% who identified as pro-choice.
Planned Parenthood’s abortion propaganda is essential...for skyrocketing profits

By Ryan Scott Bomberger, co-founder, Radiance Foundation

Editor’s note. This is excerpted from a post that appeared at the Radiance Foundation and is reposted with permission. No one exposes the lies the Planned Parenthood spews better and more adeptly than Mr. Bomberger.

Somehow the “My Body My Choice” crowd doesn’t understand the difference between an elective “choice” and essential healthcare. Likewise, federal judges who defend the supremely wrong Roe v. Wade decision also confuse the difference between constitutional and unconstitutional.

If abortion is “essential healthcare” then slavery was “essential job care.”

Pandemics don’t change a lie.

Why is Planned Parenthood so religiously devoted to abortion? It’s not merely some fake feminist principle. It’s profit. Despite serving hundreds of thousands less clients and delivering over a million less critical medical services than ten years ago, Planned Parenthood’s profits (“excess of revenue over expenses”) skyrocketed 600%.

Number has drastically fallen by 600,000 individuals to 2.4 million.

Breast cancer exams (which are essential) plummeted from 830,312 to 265,028 between 2009 and 2018; PAP tests plunged from 904,820 to 255,682 in the same time period at Planned Parenthood. That’s a massive drop of 68% and 72% respectively. Prenatal care barely even exists, falling 76% to a mere 9,798 services or less than 0.1% of Planned Parenthood’s total services.

Considering the majority of women become mothers by the age of 44—86% to be exact—how does a self-proclaimed “leading women’s healthcare provider” provide so little for mothers?

Planned Parenthood can hide behind the facade of “abortion is essential healthcare” all they want. Abortion is essential revenue. Without it, they’d fold. It’s why they gave up Title-X funding. The new president of Planned Parenthood made it abundantly clear in a CBS interview that the federation was fully devoted to abortion.

In response to being asked if they would “change their abortion model to comply with Title X regs,” Planned Parenthood president Alexis McGill-Johnson stated emphatically: “Absolutely not. I was on the Board when we voted to ensure that abortion was one of our core services that every center affiliated with Planned Parenthood would provide.” Despite providing far less healthcare and having an astonishing number of fewer clients, Planned Parenthood alarmingly increased their forced taxpayer-funding from $487 million in 2009 to $617 million in 2018. And guess which “service” didn’t decrease? The violence of abortion, of course. In that ten year time period, Planned Parenthood upped the number of abortions committed from 331,796 to their highest number to date: 345,672 precious human lives wiped out.

They’re not going to let a pandemic stop them from profiting.

Abortion activists have fully relied on lies for decades while euphemisms mask the violence they advocate.

“Essential healthcare” is essentially the new “choice.” And they’ll keep playing semantics while an industry profits from any crisis, whether global or individual.
To the pregnant woman in these tumultuous times: Circumstances can change in a baby’s heartbeat

I read the pregnancy book recommended by my mother-in-law and the breastfeeding guide published by the La Leche League. I devoted myself to my new cause: the cause of being the best mother I could be.

This coming week, my daughter celebrates another birthday. I am enchanted and amazed at the incredible person she has become.

But I knew she was a one-of-a-kind individual long ago, when I first learned of her presence in my womb. I could not deny her humanity any more than I could deny my own. She was precious from the start, loved from the beginning, and treasured throughout the trimesters.

While she was a cherished part of my heart, she was separate from me all along, with her own distinctive DNA. That DNA made her a blonde-haired, blue-eyed beauty, born of a dark-haired, brown-eyed Mama. She did not gain legitimacy at her birth—it was another, albeit highly important, stage in her already legitimate life.

To the pregnant woman in these tumultuous times, I offer you this wisdom, born of years of mothering: Circumstances can change in a baby’s heartbeat. The struggles you face today could be long gone a year from now. But one fact remains: that baby within you bears a beauty and dignity which cannot be erased. Yours is an awesome responsibility but also a bountiful blessing. You will never regret bringing that blessing into the world.

So happy birthday to all the June babies, and congratulations to all your awe-inspiring mothers! You truly make the world a brighter, more loving place.

An ex-abortionist declares, “I’m just glad that God is using me to do something good now.”

Say that, but I wanted to do the biggest ones I could. It was a challenge, and my whole focus was being good at what I did and stretching the limits.

Aultman passed stops (such as having a baby of her own) that you might think would surely persuade her to instantly get out of the killing trade. But it didn’t.

The tipping point was a particular woman and her companion. Then the next woman came in with a friend, and sometimes people did want to see the tissue. And the friend said, “Do you want to see the tissue?” And she said, “No. I just want to kill it.” And it just hit me, like cold water in the face. And I thought, “What did this baby do to you?” It’s not the baby’s fault.

Exactly. What did this poor hapless baby, who did not will his or her own existence, do to you?

But the power of words on paper, no matter how eloquent (or graphic) cannot take the place of watching the interview Aultman gave to Lisa Rose of Live Action [www.youtube.com/watch?v=3-u6v8jp_yx&feature=emb_rel_pause] out of which Terzo posted her synopsis.

In just 22 emotional minutes, we come to understand the reasoning Aultman employed to justify to herself performing abortions. Unable to see unborn children—only fetuses and embryos—Aultman threw herself into becoming a superb technician. Her conversion was slow in coming, but the tipping point of no longer performing abortions (becoming a pro-life advocate came later) came about when she saw the utterly cavalier way some women would undergo multiple abortions.

But there were many more miles to do. Along her path, she became a Christian and at one point in her life, went to a Christian healing center where a woman from her church worked. She prayed with Aultman, and Aultman said, “It really took God asking me, “Are you more powerful than I am? That I can forgive you and you can’t forgive yourself?”’

“I never understood what crying your eyes out meant until that point,” Aultman said. She felt “forgiveness.”

Aultman ends the interview with this remarkable conclusion: “I’m just glad that God is using me to do something good now.”
Learning the ropes as a pro-life intern and making an impact on behalf of life

By Mary Kate Griffin

Editor’s note. Mary Kate is an intern at South Carolina Citizens for Life, NRLC’s state affiliate. Internships are crucial to rearing up the next generation of pro-life leaders.

Today marks my ninth day interning with South Carolina Citizens for Life. I am soaking up all the information I can about managing social media accounts, best practices for writing press releases, and for engaging with constituents and political candidates.

As an aspiring public relations professional, all these skills will be applicable regardless of where I end up. But there is something particularly rewarding about conducting public relations on behalf of a pro-life nonprofit that educates, advocates, and lobbies for unborn children and the medically vulnerable.

Already I have the opportunity to publish press releases for our email tree and launch a marketing campaign for the Choose Life S.C. Department of Motor Vehicles license plates. The campaign launched May 25, 2020, and I am excited to see its effect over the next few months.

We have had the “Choose Life S.C.” license plate tag option since 2004. But with the advent of social media and its enormous reach, SCCL is gearing up to promote purchases by reaching a cyber audience.

The campaign’s goal is to raise $100,000 in 100 days from the sale of the Choose Life S.C. Department of Motor Vehicles license plates. Proceeds will help fund the South Carolina Association of Pregnancy Care Centers in encouraging advocates to purchase Choose Life S.C. license plates and share via social media how they demonstrate care for themselves and others while driving.

There is a reason we are doing this right now beginning in late May.

The 100 days of the campaign coincides with what is known as the “100 deadliest days.” According to AAA Carolinas, there is a 14% increase in crash fatalities involving teens between Memorial Day and Labor Day. The Choose Life S.C. car tag campaign promotes the right to life message and encourages safe and courteous summer driving.

Pro-life advocates who purchase a plate can share their pro-life story and automobile safety habits on social media using the hashtag #ChooseLifeSC. Those who already own a Choose Life S.C. license plate are also encouraged to share their stories using the hashtag. The social media component of the campaign enables and empowers advocates to share pro-life testimonies and connect with other members of the pro-life community.

The Choose Life S.C. car tag has a long history. In 2000, the South Carolina General Assembly passed a Choose Life tag. It was signed into law by then Governor Jim Hodges but immediately challenged in federal court by the mega abortion business Planned Parenthood. Ultimately, the U.S 4th Circuit Court of Appeals struck down the Choose Life tag in South Carolina on the grounds that the “Choose Life” message was unconstitutional because the general assembly did not provide a “Choose Death” message.

In the next South Carolina General Assembly, lawmakers responded by passing legislation giving the South Carolina Department of Motor Vehicles the authority to assign specialty tags for qualifying nonprofit organizations. That is how South Carolina Citizens for Life was able to acquire the tag.

My hope for this campaign is that the South Carolina Association of Pregnancy Care Centers receives the funds it needs to offer the best care available to women in troubling pregnancies and that the public agrees it is better to “Choose Life.”
Editor’s note. National Right to Life Vice President Tony Lauinger and his brother Joe were classmates in the Georgetown University Class of 1967. Joe was killed in combat in Vietnam on January 8th, 1970. Tony spoke at a commemoration at Georgetown on the 50th anniversary of Joe’s death this past January. His words are a testimony to the beauty, value, and dignity of every human life.

One of the more realistic movies about Vietnam was based on a book with the poignant title, We Were Soldiers Once, and Young. It seems so long ago, now — that period when so many in our class went off to join the military. But when we think of those who died, it’s as if they are frozen in time.

In thinking about Joe, nothing has really changed over these 50 years since his death: not our love for him, our sense of loss, our pain at his absence… In some ways, his presence among us is as strong and real today as it was then. And just as he was in life, Joe continues to be a catalyst for bringing together those he loved — and who loved him — in friendship, fellowship, and love.

One of the most meaningful things that can be said about someone is that she or he had a positive impact on others while passing through this life. Your presence here tonight is testimony to Joe’s having had such an impact.

Joe touched so many lives during those brief, fleeting years when he was with us. He continues to touch so many lives today…

Joe was born on July 5th, the day after Independence Day. As it happened, Joe was home on leave for a few days before heading to Vietnam, and it was after Mass on the Fourth of July — where the recessional hymn that day was “America the Beautiful” — that Joe left home for the last time.

I once read a beautiful essay which concluded with these words:

“Few of us have earned the freedoms we enjoy; we’ve received them by bequest, as gifts of grace. The freedoms we celebrate on Independence Day were made possible by the sacrifices we commemorate on Memorial Day. To the valiant few who paid the price, we owe an incalculable debt.”

Last June, on the 75th anniversary of D-Day, I heard an interview with former Education Secretary Bill Bennett from the American cemetery at Normandy. The cemetery there is one of many around the world where America’s honored dead have been laid to rest. Secretary Bennett related a poignant bit of history:

“Thirteen years ago,” he said, “there was a conference in England. A prominent European leader commented that, ‘This Iraq thing is just another effort to expand the American empire.’ A retired American General who was there heard the comment and responded: ‘We have sent many young men and women abroad to fight for the freedom of others. The only land we have ever asked for in return was land to bury those who were not able to return home.’”

By the world’s measure, we members of the Class of ’67 are old, while Joe, and several others of our classmates, are forever young. May we benefit from the wisdom of age and from God’s good grace to live out our lives in such a way that we might all one day be reunited forever in the loving arms of the Lord…
Teenager stabbed to death after she refused to abort

By Dave Andrusko

Last week, 18-year-old Brendah Atuhaire, who was three months along in her pregnancy, was found lying in a pool of blood with a knife next to her in a house in a city in Western Uganda.

Two publications, the *Face of Malawi* and *The Daily Monitor* reported that her unnamed boyfriend allegedly stabbed her to death after she refused to abort.

“According to residents of Bukwali village, East Division where the incident happened on Thursday, the couple has had several fights as a result of misunderstandings since the virus-induced lockdown was announced by the president,” Alex Ashaba reported.

Vincent Twesige, the spokesperson for the Rwenzori West Police, “said the suspect was found trying to commit suicide” and that “he has been admitted to Fort Portal regional referral hospital,” according to Ashaba.

ABORTION is not a “human right” when another HUMAN’S RIGHTS are taken away.
Northern Ireland Assembly rejects radical abortion law imposed on the country which includes abortion until birth for babies with disabilities

By Dave Andrusko

On June 2, by a vote of 46-40, the Northern Ireland Assembly voted “in favor of a motion rejecting the ‘imposition’ of abortion legislation by the Westminster parliament,” The Catholic News Agency [CNA] reported. “The Abortion Regulations 2020, imposed by the British Parliament during a governmental crisis in Northern Ireland, permits the unrestricted killing of unborn babies until the 14th week of pregnancy and until birth if the child is suspected of having a fetal anomaly, such as Down syndrome.

Previously, abortion was strictly limited to cases where the “mother’s life was at risk or if there was risk of long-term or permanent, serious damage to her mental or physical health,” according to the CNA.

While non-binding, “the vote will send a signal to MPs in Westminster who are due to vote on the regulations and give a boost to those campaigning for abortion laws to be determined by the Northern Ireland Assembly,” the CNA reported.

The new law took effect

March 31. According to the Society for the Protection of Unborn Children (SPUC), 129 unborn babies were killed in Northern Ireland between March 31 and May 22.

Heidi Crowter illustrated the power of a single determined advocate. The 24-year-old woman, who has Down syndrome, is a tireless advocate for disability rights.

Assembly members voted in favor of a motion which read: “That this Assembly welcomes the important intervention of disability campaigner Heidi Crowter and rejects the imposition of abortion legislation that extends to all non-fatal disabilities, including Down’s syndrome.”

The day before the vote, the Catholics bishops of Northern Ireland urged members to reject the new abortion regulations, that abortion to birth for non-fatal disabilities and Down’s syndrome is not acceptable,” said Nola Leach, chief executive of the pro-life group CARE NI.

“The Northern Ireland Assembly has effectively voted against the imposition of extreme abortion legislation and the UK Government must now withdraw the Regulations.

“It cannot ask the Westminster Parliament to pass regulations on a devolved matter when the Assembly has not only been restored but also voted to indicate that it does not support the Regulations.

“It would also involve asking MPs and Peers to vote for a form of disability discrimination which belongs not only to another century but another millennium.

“If the Government proceeds that then MPs and Peers must vote to reject these Regulations.”

She concluded, “We must remember that laws send social signals and we believe the regulations proposed by Westminster will harm, not help, women and babies across Northern Ireland.”

By Dave Andrusko

It’s not as if we needed another reminder of the nearly infinite difference it makes to have a pro-lifer residing at 1600 Pennsylvania Avenue, but it can never hurt to remember all that the administration of pro-life Donald Trump has done and continues to do, for the cause of unborn babies.

It’s no secret that the UN is not exactly a hothouse of pro-life sentiment. It is also no secret that more than once, the Trump Administration has admonished various UN Agencies and the UN itself to back off. For example, in his address to the 74th UN General Assembly, President Trump has said the UN “has no business attacking the sovereignty of nations that wish to protect innocent life.”

Put the two together, add the desire of pro-abortionists to exploit the COVID-19 pandemic, and you get these opening sentences from a story written by Stefano Gennarini, J.D.

The head of the U.S. Agency for International Development told the UN Secretary General how the UN has already gone off course:

[T]he UN should not use this crisis as an opportunity to advance access to abortion as an “essential service.” Unfortunately, the Global HRP [the UN’s Humanitarian Response Plan] does just this, by cynically placing the provision of “sexual and reproductive health services” on the same level of importance as food-insecurity, essential health care, malnutrition, shelter, and sanitation. Most egregious is that the Global HRP calls for the widespread distribution of abortion-inducing drugs and abortion supplies, and for the promotion of abortion in local country settings.

The way the UN all-too-often works is to strong-arm pro-life countries into compliance, which Barsa denounces in no uncertain terms.

The UN should not intimidate or coerce Member States that are committed to the right to life. To use the COVID-19 pandemic as a justification to pressure governments to change their laws is an affront to the autonomy of each society to determine its own national policies on health care. The United States stands with nations that have pledged to protect the unborn.

Near the end of his letter, Barsa again reminds Guterres that it is essential that the UN’s response to the pandemic avoid creating controversy. Therefore, I ask that you remove references to “sexual and reproductive health,” and its derivatives from the Global HRP, and drop the provision of abortion as an essential component of the UN’s priorities to respond to the COVID-19 pandemic.

Member States are deeply divided over the use of the term “sexual and reproductive health” and its derivatives, and it is among the most polarizing issues raised in UN negotiations. The Global HRP, and the activities of UN agencies and bodies moving forward, should use clear language and take clear action to address the real needs of vulnerable people around the world without promoting abortion. Now is not the time to add unnecessary discord to the COVID-19 response.

Congratulations to Mr. Barza for again reminding us “that under the leadership of President Donald J. Trump, the United States has made clear that we will ‘never tire of defending innocent life.’”