



National RIGHT TO LIFE NEWS

October 2024

NRLC Holds Briefing on Aborted Babies Born Alive



Left to right: Cathy Blaeser, co-executive director of MCCL, Sarah Zagorski, communications director for Louisiana Right to Life, Melissa Ohden, CEO Abortion Survivors Network, and Carol Tobia, president, NRLC.



National RIGHT TO LIFE NEWS

Baby Survives Abortion, Dies Almost an Hour Later Under the Weight of Dirty Towels and Sheets

By Rai Rojas, NRLC Director of Outreach

I became Executive Director of Miami Right to Life in June of 1989. A small, but well-funded an incredibly organized group affiliated with Florida Right to Life. I was in my 20s and it was my first foray into pro-life advocacy. On Thursday, September 14, 1989, I was alone at the office when I received a call from a labor and delivery nurse working at Miami's Baptist Hospital.

She began the conversation by emphatically stating, "I'm pro-choice, but what I witnessed last night was wrong." She went on to explain that she had seen a live birth during an abortion attempt, and that the abortionist had then placed towels and sheets over the moving baby's face and left the



room, and that shortly thereafter, the child was found to be dead. She provided me with the patient's name, the abortionist's name, and that at the time of the abortion, and noted the aborted baby's grandmother was also in the room and that she'd had a strong reaction to seeing the baby flailing after the botched abortion.

I advised her to notify the Miami-Metro Police Department, but she said that she couldn't and abruptly hung up. Initially, I thought the call had been a prank. I called information (411) and asked for the phone numbers and addresses of Baptist

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NRLC Holds Briefing on Aborted Babies Born Alive

By Carol Tobias, President

National Right to Life hosted a congressional briefing on Capitol Hill on Tuesday on the tragedy of babies who survive an abortion but are not provided treatment and care necessary for life.

This is a tragedy that must be addressed.

Joining me in the presentations were Melissa Ohden, founder of the Abortion Survivors Network, Cathy Blaesser, co-executive director of Minnesota Citizens Concerned for Life, and Sarah Zagorski, communications director for Louisiana Right to Life and also an abortion survivor.

In my remarks, I pointed out that, during the recent presidential debate between Donald Trump and Kamala Harris, Linsey Davis,

one of the moderators, falsely told a national audience that "There is no state in this country where it is legal to kill a baby after it is born."

She was wrong. Some babies do survive the abortion but are left to die on a table or in a corner of some out-of-the-way place.

This isn't a new phenomenon. An investigation by the *Philadelphia Inquirer* in 1981 said a baby surviving an abortion was a "dreaded complication."

Nineteen states have laws requiring that a baby born alive during an abortion be given the same treatment and care as any other child born alive at the same gestational age. Unfortunately, many state laws, including federal

law, only declare that a baby who survives the abortion is a human being; there are no consequences

only because a nurse rushed her to the hospital's Neonatal Intensive Care unit.



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for the medical staff if they do nothing to help the baby.

Melissa shared her story. Her mother was pressured by family to have an abortion. After surviving several days and more than one attempted saline abortion, she was born alive and then treated

Melissa also shared with our audience that statistics from other countries are easier to find as many of the countries have

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Editorials

33 days until the November 5 elections. What's new and what might that tell us?

In my daily missive about the upcoming elections, ordinarily I do a wide sweep. But since last Tuesday was the first and likely only vice presidential debate between pro-life Sen. J.D. Vance and pro-abortion Minnesota Gov. Tim Walz -- and I'm composing this for the monthly edition of *National Right to Life News* -- I'll try to give the debate it's proper attention but not neglect the bigger issue: who the nation will choose as its 47th President.

But, first, the debate.

National Review Online's Jeffrey Blehar is no fan of former President Donald Trump but, having said that, I would agree he did a workman-like assessment of the debate. Under the headline "Can We Please Finally Dispense with the Ruse of 'Fact-

Checking'?", Blehar wrote
I hate spin, so I will level with you: The overall polling is irrelevant, even though it is still quite

good for Vance. What matters most is that he did everything strategically that he needed to last night for the campaign:

He completely rewrote the media caricature of him (as reflected in

See 33 Days, Page 35



Georgia attorney general appeals a judge's rollback of the state's Heartbeat Law to state Supreme Court

As promised, Georgia Attorney General Chris Carr's office has asked the Georgia Supreme Court to reinstate the Heartbeat law struck down for a second time by Superior Court Judge Robert McBurney while the court considers the state's appeal.

Kara Murray, a spokesperson for state Attorney General Christopher Carr, said on Monday, "We believe Georgia's LIFE Act is fully constitutional, and we will immediately appeal the lower court's decision."

"Carr's office noted in its notice of appeal filed Tuesday that the case goes straight to Georgia's highest court because it involves a challenge to the constitutionality

of a state law," according to the *Associated Press*.

"Some Georgia clinic officials said they would begin accepting patients whose pregnancies are past six weeks' gestation, though they're aware the ban could be reimposed quickly."

The law protects preborn children after a fetal heartbeat can be detected, approximately at 6 weeks. There are exceptions for rape, incest, and to save the life of the mother.

Judge McBurney 26-page decision means that the state must now allow abortions up to 22 weeks of pregnancy. His decision was filled with hyperbole and pro-abortion talking point, including



Superior Court Judge
Robert McBurney

a reference to *The Handmaid's Tale*.

"For these women, the liberty of privacy means that they alone

should choose whether they serve as human incubators for the five months leading up to viability," he wrote just warming up. "It is not for a legislator, a judge, or a Commander from *The Handmaid's Tale* to tell these women what to do with their bodies during this period when the fetus cannot survive outside the womb any more so than society could — or should — force them to serve as a human tissue bank or to give up a kidney for the benefit of another."

Later he added, "When a fetus growing inside a woman reaches

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From the President Carol Tobias

Will the next four years be the best of times or the worst of times for unborn babies?



"It was the best of times, it was the worst of times, it was the age of wisdom, it was the age of foolishness, it was the epoch of belief, it was the epoch of incredulity, it was the

season of Light, it was the season of Darkness, it was the spring of hope, it was the winter of despair; we had everything before us, we had nothing before us, we were all going direct to Heaven, we were all going direct the other way—in short, the period was so far like the present period, that some of its noisiest authorities insisted on its being received, for good or for evil, in the superlative degree of comparison only."

With that sentence, Charles Dickens opened *A Tale of Two Cities*, one of the most popular novels ever written. The story revolves around the French revolution and independence in the late 1700s, shortly after America claimed its independence.

The story itself may not match what is happening in America today, but the opening sentence does. Depending on your political leanings and what your favorite candidate does or says, this country has two ways of looking at everything.

Depending on who you listen to, former President Donald Trump is either amazing or he is an overbearing caveman. Depending on who you listen to, Vice President Kamala Harris is either a breath of fresh air or she is a cackling airhead. Whatever one candidate says, supporters cheer, opponents jeer. If one candidate says something is green, the other candidate's supporters say it is purple.

I'm not sure the country has been this divided since protests over the Vietnam war 60 some years ago. And since the divide has reached practically **every** issue, the discord isn't about to end any time soon.

That polarization on either side can be confounding. Each side wonders how the other can really believe what they're saying.

What do we do as pro-lifers? We remember that we are in this because ours is the movement of love. We respond by being tenacious and being confident in what we believe. Our job is to persuade and persist as we seek to protect the most vulnerable among us against the onslaught of pro-abortion Democrats.

I hope voters will look at each candidate and consider the effect of their policies should they win. For any pro-lifers uncomfortable with Donald Trump, I encourage them to imagine the future after four years of a Harris-Walz administration. Ask yourself, will 2025 be a season of Light or a season of Darkness, the spring of hope or the winter of despair?

We've already seen what the Biden-Harris administration has done or is trying to do in their quest for absolutely unlimited abortion. They are expanding abortion into military departments, pushing emergency rooms to become abortion facilities, withholding funds from states who protect preborn children, using our tax dollars to support abortion in other countries, and much, much more.

The Biden-Harris administration has, through determination and the use of executive orders, pre-empted congressional activity and ignored long-standing statutes in order to advance abortion throughout our country.

If we have four years of a Harris-Walz administration, the last four years will look pretty tame by comparison.

Harris has already expressed her desire to "restore the protections of *Roe*" into federal law. But the only legislation on the table for Harris and Democrats is the so-called "Women's Health Protection Act," (WHPA) which goes much further than *Roe*. Does the public understand that the WHPA would enshrine unlimited abortion until birth in federal law and policies, and eliminate existing state-level protections for unborn children and their mothers such as parental involvement measures for minors?

Her vice-presidential running mate, Tim Walz, outright lied to the American public during Tuesday night's vice-presidential debate. As Governor of Minnesota, he did advocate for, and sign, a bill that does, in Minnesota, what the WHPA would do nationally. He also signed legislation that removed legal protections for babies who survive an abortion, moving from abortion into infanticide. When Sen. J.D. Vance called him on this, Walz flatly denied the effect of both laws.

Every federal judge nominated by a President Harris will be committed to upholding abortion rather than the constitution.

Abortion will become just another routine procedure mandated throughout all

government programs. Hospitals will be required to perform abortions in order to receive federal funding. States will have to allow abortion in order to receive federal funds for any program.

Pregnancy centers will face an onslaught of fictitious charges and attacks. They will be accused of providing false and misleading information, even as they seek to help pregnant women through a difficult time.

Being present in front of an abortion facility or posting pro-life information on a social media site will be disallowed.

I am painting an extremely dark picture of a possible future. But, I assure you, a Harris-



Walz administration will not stop until every pro-life law is wiped off the books, and they will attempt to see every pro-lifer crushed for speaking out. The full force of the federal government will be trying to block us every step of the way.

Of course, if Harris does win, we will continue to fight for life—pro-lifers don't give up-- but the deck will definitely be stacked against us. To visit an abortion clinic was a symbolic gesture that speaks volumes about Harris and her priorities. Clearly a Harris administration would come after pro-lifers with a vengeance.

Donald Trump views pro-life people as allies, as he should. We have worked hard to elect him on three separate occasions. The choice in this election is clear.

When it comes to protecting unborn babies, will the next four years be the best of times or the worst of times?

Poll shows a winning position for pro-life candidates

By David N. O'Steen, Ph.D. and Dave Andrusko

Several polls, including an August North Carolina poll for North Carolina Right to Life taken by the McLaughlin Group, have shown that over 70% of the public would allow abortion to save the life of the mother, in cases of a medical emergency, and in cases of rape or incest.

account for the vast majority of abortions.

These results raise the question of how well a pro-life candidate, who based their public stand on the above results, would fare against a typical pro-abortion candidate who favored allowing abortion for any reason.

cases of rape, incest and a medical emergency. This candidate also opposes using tax dollars to pay for abortion and says their opponent's support for unlimited abortion paid for with tax dollars, even as a method of birth

tax dollars to pay for abortion and says their opponent's position of opposing abortion is too extreme and dangerous to women.

Results? 50% chose the pro-life candidate (A) while only 38% chose the pro-abortion candidate (B)!

(In a September 2022 national poll using essentially the same question the pro-life candidate also won 50% to 42%.)

We have seen that pro-life political figures who have fashioned their position around limits based on weeks are portrayed by the media as supporting a "ban" or "near total ban," even if their position would allow the vast majority of abortions to continue.

Most, if not most, pro-life candidates support allowing abortion for the exceptional reasons discussed above. Those candidates need to state that upfront.

A candidate who says they believe abortion should be allowed only to save the life of the mother, in cases of rape or incest, or in case of a medical emergency represents a majority view. They can reach voters who do not support unlimited abortion but feel abortion for those reasons must be allowed. And while those voters are turned off by a "ban," they are precisely the ones needed to reach a majority.

The pro-life position properly articulated can be the winning position!



This would prevent about 95% of all abortions.

The North Carolina poll also once again found strong opposition to using tax dollars to pay for abortion (62%) and opposition to allowing abortion as a method of birth control (64%). Abortion as a method of birth control is just another way of describing elective abortion for personal or social reasons, which

The North Carolina poll posed just this question:

Which of the following candidates would you be more likely to vote for in the general election?

1. Candidate (A) who believes abortion takes the life of an unborn child and opposes abortion except to save the life of the mother, in

control and even late in pregnancy is too extreme.

or

2. Candidate (B) who believes a woman has a right to have an abortion with no restrictions and says the decision should be left to the woman. This candidate supports using

Dead Georgia Woman a Victim of Biden-Harris Abortion Pill Deregulation, Not State Law

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

By now, you've heard the tragic story of Amber Thurman, the Georgia woman whose death Democratic presidential candidate Kamala Harris blamed on that state's abortion laws. The bitter, ironic truth is that Thurman was not a casualty of Georgia's protective law but was a victim of ill-considered changes the U.S. Food and Drug Administration (FDA) made to abortion pill regulations under Biden-Harris and earlier Democrat administrations.

Pro-Publica broke the story on September 16. The story misrepresented many important details and left out a lot of critical context but pro-abortionists latched on to it nevertheless because they felt the tragedy could be twisted to fit their preferred narrative of dangerous abortion limits.

A Tragic and Unnecessary Death

In the summer of 2022, Amber Thurman, pregnant with twins, sought a surgical abortion at nine weeks. Because Georgia had a law in place protecting an unborn child with a detectable heartbeat about six weeks gestation (measured from a woman's last menstrual period or LMP) from abortion, Thurman sought an abortion in North Carolina, where there was no such limit in place at the time.

Running late because of traffic, she was unable to make her appointment for a surgical procedure. She was talked into taking mifepristone and misoprostol instead, two drugs that make up the "abortion pill," which press accounts always stress is safe, safe, safe!

Except that they weren't. Over the next few days, after taking the pills and traveling home

she began to experience painful cramping, vomiting and heavy bleeding. Thurman, who had previously been the picture of health, was transported to a local hospital there in her home state of Georgia. She was found to be still holding "tissue" from the pregnancy and was eventually diagnosed with "acute severe sepsis."

The standard treatment for a significant infection and an incomplete abortion (once the baby or babies have died, but material still remains in the uterus) is an emergency D&C (dilation and curettage). However, doctors kept monitoring the situation and giving antibiotics, discussing the possibility of a D&C the next day. By the time the doctor arrived the following afternoon and performed the surgery, Thurman had deteriorated to the point that she died on the operating table.

Blaming the Law

Abortion advocates and their media allies made it sound as if the delay was due to doctors being afraid of violating Georgia's abortion law by performing the D&C. However there is no direct indication that the law had anything to do with the delay.

The law is clearly written to allow for surgery to remove already dead children (as was the case here) or even abortion whenever the mother's life or health was at risk, which also clearly applied in these circumstances.

This was clearly not a failure of the law to accommodate the situation. And nothing in the *Pro-Publica* story gives us any reason to believe that doctors were sitting around waiting for some legal ruling to proceed from the hospital lawyer.

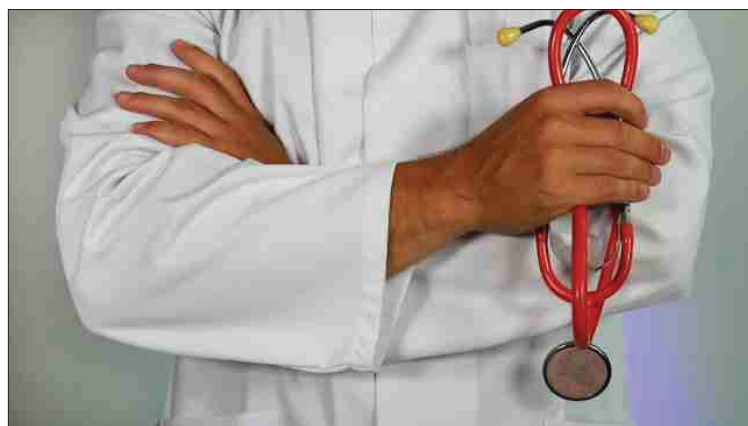
They simply observed the

situation, made the call that a D&C might be warranted, but then just didn't move fast enough.

Clearly, the story told by Vice President Kamala Harris and members of the press has been to spin a false narrative about women's lives being put at risk

(LMP) owing to the fact that safety and efficacy dropped off after that point.

Neither safety nor efficacy had demonstrably improved by 2016 when the Obama administration extended the deadline to ten weeks LMP. The FDA was anxious to



by harsh, rigid, unrealistic laws that keep even the most basic medical emergencies from being addressed.

But what this false narrative obscures is not just the careful legislation that exists to protect both unborn children and their mothers, and the wise safeguards it puts in place for medical situations like these, but also what the real cause of these medical crises is.

A victim of Biden-Harris FDA negligence

While we don't know all the details about Amber Thurman's getting the abortion pill, we do know she wouldn't have been given it if the original FDA distribution rules had been in place and were enforced.

Thurman was pregnant with twins and was at nine weeks gestation when she went in for her abortion. The original abortion pill protocol from 2000 specified that use was limited to women no more than seven weeks pregnant

placate the abortion industry who wanted to expand the market to make the pills available to women with later gestations.

The FDA also broadened the prescriber pool to include any "certified healthcare provider." That meant that nurses, physician's assistants, or maybe even med techs could prescribe and give out pills. The FDA also dropped required follow up visits to monitor the woman's health and the progress and completion of her abortion.

Complications like Amber's – hemorrhage, infection, incomplete abortion with retained tissue – were more common at these later gestations and knowledgeable, responsible doctors would have known to watch out for signs and treat these before things got desperate.

When Biden and Harris came into office, rather than restore these important safeguards, they

Please help us shine a bright light on the radical, pro-abortion voting record of Kamala Harris and Tim Walz—lives are at stake!

Pro-Life Friends,

Abortion extremism is all the rage right now, and **Kamala Harris** and her running mate, **Tim Walz**, are all in!

After the overturning of *Roe v. Wade*, some states restored protections for unborn children. But those protections have enraged supporters of unlimited abortion like Vice President Kamala Harris and Governor Tim Walz.

Years ago, many elected officials who considered themselves “pro-choice” would say that abortions should be safe, legal, and rare. Those days are over. Now abortion supporters want the procedure legal up to birth, for any reason, and they want it funded by us, the taxpayers!

Vice President Harris served in the U.S. Senate from 2017 – 2021, and during that time she had a zero percent pro-life voting record. Zero percent of the time she found the compassion to protect unborn children and their mothers! Instead, she voted for abortion without limits, taxpayer funding of abortions, late-term abortions, and abortions in our military.

And while these votes were horrible, **there is another vote that she cast that tops them all.** On February 25, 2020, then-U.S. Senator Harris was asked to vote in favor of a provision that would have ensured that an infant born alive during an attempted abortion be given medical care like any other newborn. **She said no!** These are little babies who survive their abortions and are then left to die. **It’s so cruel, so heartless.**

Governor Walz of Minnesota also served in Congress and **always** cast pro-abortion votes. As Governor, he signed an abortion until-birth bill that strips all protections from the unborn and their mothers. He even killed the Positive Alternatives programs that provided parenting classes for new moms and diapers and cribs for their babies.

Harris and Walz’s abortion extremism is way out of line with the views and values of the people in our country. Kamala Harris and Tim Walz have made promotion and funding of abortions a top priority – in fact, a couple of months ago, **they even held an event at an abortion**

facility in Minnesota! Despite their constant promotion of abortion, polling shows very little support for the radical views they hold.

But their extreme record does earn them the political support of the abortion crowd. Groups like Planned Parenthood Action Fund are pouring money into the Harris-Walz campaign coffers to make sure they win and can continue to push for unlimited abortions.

I am confident Americans will reject abortion extremism when they know the voting records of their elected officials. **Life will prevail when the truth is known!**

That is why I have included the Record on Life fact sheets that we want to share with every citizen in the USA. People must have the truth in their hands, in their homes, and in their churches. **Will you help us?**

I am asking all pro-lifers to help us get the word out with a one-time \$50 donation so we can continue our educational efforts.

Please know that every contribution helps—whether \$10, \$150, \$25, or \$50—and that all will be spent wisely to have the biggest impact possible for Life! You can make your donation at <https://secure.anedot.com/nrlvictoryfund/donate>

It is up to people like you and me to ensure that the new abortion extremism we see is stopped. Lives truly hang in the balance, and we all must do what we can.

Thank you in advance for any donation you can share to support our lifesaving work. God bless you.

For Their Lives,



Carol Tobias

National Right to Life President



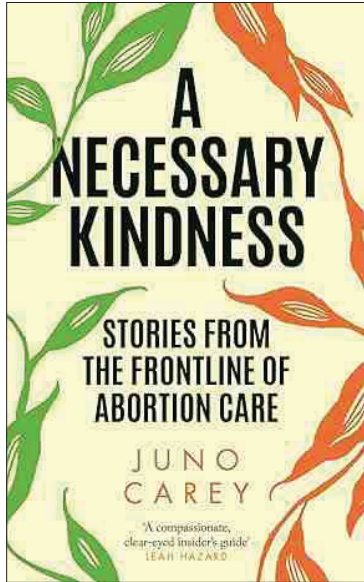
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Later-Term Babies Aborted By Pill: Clinic Worker and Women “Shocked”

With no ultrasound to date pregnancies, the women aborted babies further along than expected.

By Sarah Terzo



Juno Carey is a midwife who works in the abortion industry. In her 2024 book *A Necessary Kindness: Stories from the Frontline of Abortion Care*, she describes different things she witnessed or experienced at the two abortion facilities where she worked.

Giving the Abortion Pill Without an Ultrasound

Carey is as pro-abortion as they come and is still an abortion worker today.

Carey is British and the abortion facilities in the book are in England. However, the two facilities operate similarly to

abortion facilities in the US and provide the same “services.”

An abortion facility where Carey worked sold the abortion pill until the 10th week of pregnancy. In the US, some abortion pill providers, such as 199 Abortion Telemedicine (which does telehealth abortions—the pregnant person never sets foot in a clinic, has no ultrasound or pregnancy test, and is never seen by a doctor) offer the abortion pill up to 13 weeks.

Carey’s abortion facility also gave pregnant people the abortion pill without examining them. A pregnant person could have the abortion pill shipped to them after a phone call.

Even those who came to the facility weren’t usually given ultrasounds. Carey says that her facility only did ultrasounds in special cases, such as when the pregnant person said they didn’t know when their last period was and didn’t know how far along they were, or when the pregnancy occurred in someone with an IUD.

Women Shocked by Seeing Their Aborted Babies

Carey says that although she would tell people taking the abortion pill what their aborted babies would look like afterward, seeing the aborted baby “can be shocking for some, and women have called me quite distressed.”

Carey says:

I try to be clear in both medical and relatable terms: ‘From your scan, you’re about six weeks, so you’ll probably pass some blood clots and tissue. You might see a sac approximately the size of a baked bean, which is the pregnancy itself.’

When the woman gets closer to ten weeks, I explain that she ‘might see something recognizable. This could be tiny limbs. It will only be the size of a strawberry.’

Here is an ultrasound picture of a baby 10 weeks after conception from the Endowment for Human Development:



At this stage, a preborn baby has had a beating heart for seven weeks. The baby has a brain that is giving off waves. He or she shows a startle reaction if touched by something. The baby can have the hiccups.

A 10-week-old preborn baby is already right or left handed. If biologically female, she has ovaries and a uterus of her own. He or she not only has hands and fingers, but also fingerprints.

“Something recognizable” hardly covers it.

Babies Aborted Further Along in Pregnancy

Carey says that sometimes, people having abortions were wrong about how far along they were, and their babies, when they came out, were beyond 10 weeks and more developed. She says:

In the clinic, there are rare instances when a woman will be adamant about the date of her last period and will be wrong.

This possibility is always made clear to them when they fill out their consent form, in the hope that they will be as prepared as possible for what may occur during their termination.

Of course, they could just do an ultrasound to eliminate this problem. But that is apparently too inconvenient.

Carey goes on to say:

[I]t’s sometimes these women, at a slightly later stage of pregnancy, who will call the helpline and will send me a

National Right to Life Releases A Special Report on Babies Born Alive Following Abortions

WASHINGTON— On Tuesday, National Right to Life (NRLC) released a special report, *Checking the Fact-Checkers: “After-Birth” Abortions*, about babies born alive following abortions. The document was released at a congressional briefing on the “Born-Alive Abortion Survivors Protection Act.”

The document comes at a crucial time when pro-abortion groups have promoted false narratives about babies who are born alive during abortions. Additionally, vice presidential candidate and Minnesota Governor Tim Walz is under scrutiny and criticism for his actions in reversing state protections for babies born alive following abortions.

“The abortion industry and its sympathizers want to make this about abortion. It’s not. It’s about infanticide,” said Carol Tobias, president of National Right to Life. “It is barbaric that newborns who have the temerity to survive an abortion are considered the ‘dreaded complication’ by abortionists.”

Tobias continued, “The baby who survives an abortion deserves the full protection of the law.”

The “Born-Alive Abortion Survivors Protection Act” would

require that when a baby is born alive following an abortion, health care practitioners must exercise appropriate care, health care workers must transport the child

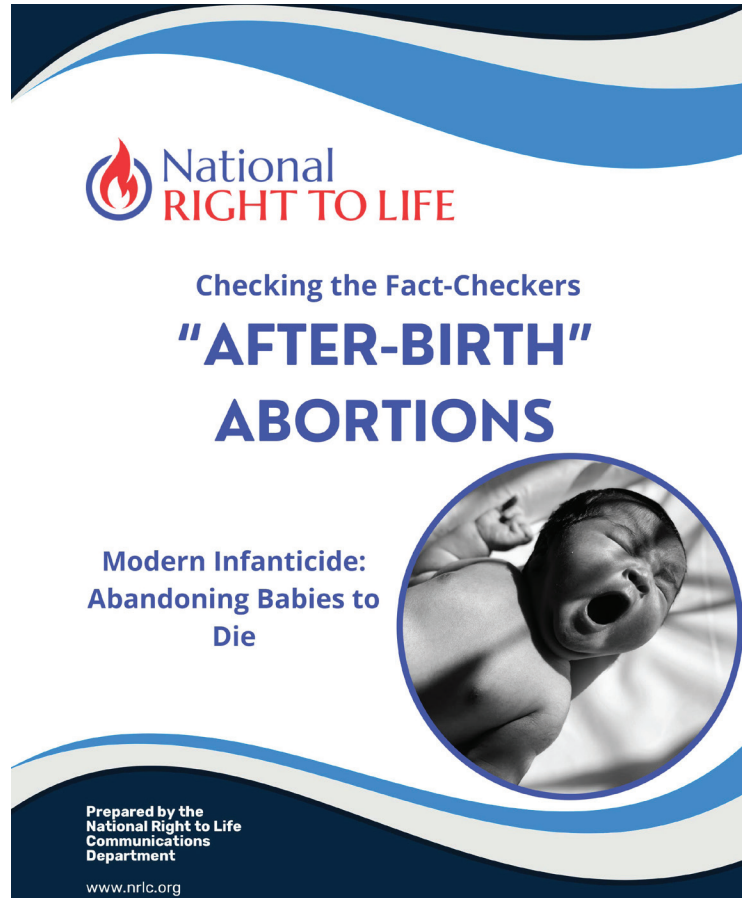
Life, Sarah Zagorski, director of communications for Louisiana Right to Life and a survivor of abortion, Cathy Blaese, executive director, Minnesota Citizens Concerned for Life, and Melissa Ohden, founder of The Abortion Survivors Network and a survivor of abortion.

Checking the Fact-checkers: “After-Birth” Abortions or Modern Infanticide: Abandoning Babies to Die can be found <https://nrlc.org/wp-content/uploads/2024/09/Checking-the-Fact-Checkers-After-Birth-Abortions.pdf>

The record of Governor Tim Walz of Minnesota can be found <https://nrlc.org/uploads/records/TimWalzRecordonLifeVP.pdf>

The record of Vice President Kamala Harris can be found <https://www.nrlc.org/uploads/records/KamalaHarrisRecordonLifeVP.pdf>

The materials distributed at the briefing can be found <https://nrlc.org/national-right-to-life-2024-congressional-briefing/>



the same degree of professional skill and care that would be offered to any other child born alive at the same gestational age. immediately to a hospital. Speakers at the congressional briefing included Carol Tobias, president of National Right to

Are Abortion Pills Going to Be on the Ballot?

Unresolved issues with mifepristone heading into the election

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

Earlier this year, pro-lifers had high hopes for the Supreme Court as the justices considered the legality of the government's 2000 approval and subsequent protocol changes in *FDA v. AHM*. (The *Food & Drug Administration versus the Alliance for Hippocratic Medicine*.)

They hoped that the Court would finally recognize the irregularities associated with the original approval of mifepristone—the “abortion pill”—and would also address serious safety issues the FDA had swept under the rug as the Obama and Biden administration sought to deregulate distribution and make the pills more widely available.

It was not to be.

Though some important issues were raised in oral arguments in March, ultimately the court ruled in June that the pro-life doctors lacked legal “standing” to bring the case. The court held that they were not directly or financially injured by the agency's decision, no matter the effects on their patients.

Many in the press and the political community acted as if this ended the matter. They acted as though the High Court had given the FDA's decisions its full blessing; that all scientific and medical issues had been resolved; and that the drug could be shipped and sold all across the country without any restrictions.

Thus, the view of many was that this had taken the issue of chemical abortion off the table for the fall election. Sure, there were state referenda that would still be held and the fate of “reproductive rights” was still going to be a major issue in presidential campaigns. But the thought was that mifepristone's fate really wasn't going to be on the ballot this November.

Not so fast, folks. There's still a great deal yet to be resolved with mifepristone in the coming months and the election is going to have quite a lot to say about the final outcome.

Open Questions

In truth *none* of these issues have been resolved. The legality of the FDA's original approval and issues about whether protocol changes making mifepristone

high numbers of complications and failures accompanying pharmacy dispensing and home delivery.

The Biden administration asserted that the 1873 Comstock Act which forbade the mailing and shipping of abortifacients was no longer in force. While a press report said a Trump administration would generally not use it to restrict abortion, that law is still on the books and

mifepristone in 2016 (when Obama dropped all but one required visit, extending cut off to 10 weeks after a woman's last menstrual period, expanding prescribers to any certified health care provide, etc.), and in 2021 and 2023 (when Biden dropped all required visits, allowing pharmacy and mail order distribution), many states passed laws continuing to require physician visits and exams and disallowing virtual prescriptions, sales, or home delivery.

Generic mifepristone manufacturer GenBioPro sued West Virginia for its ban on mifepristone as part of its general abortion legislation. An abortion pill prescriber in North Carolina challenged state law there that maintained limits on prescription and distribution of abortion pills that the FDA no longer required.

The West Virginia case was *GenBioPro v. Sorsaia* (now *GenBioPro v. Raynes*) and the North Carolina case was *Bryant v. Stein*, both heard in their area federal district courts. Both cases were decided earlier this year, but appeals are ongoing, moving up the judicial ladder in federal courts.

Basically, the outcome was that, given *Dobbs'* overturn of *Roe*, the state of West Virginia could prohibit the sale and use of mifepristone whenever and wherever they generally prohibited abortion, but could not otherwise prohibit the sale or use of abortion drugs. So, prohibition as part of a general law protecting unborn children and their moms was upheld. However, when and where the state allowed abortion, e.g., for medical emergencies,



easier to get were ever appropriately considered were never directly addressed. Safety was still very much a problem. Women were still hemorrhaging, suffering infections, and were seeing ectopic pregnancies go undetected and rupturing. Women were dying in the U.S., in Canada, in Europe as access and use expanded virtually unchecked.

While studies by the U.S. abortion industry were touting the safety of virtual prescriptions and mail order mifepristone, studies from other countries were showing

several states have cited it as a possible basis for limiting the distribution of abortion pills in their states.

Cases Still in the Courts

Two other cases are currently working their way through the federal courts, challenging the ability of states to impose restrictions on the distribution and prescription of abortion pills in their states.

Once Democrat administrations began trying to water down protective regulations on



COMPARE THE CANDIDATES FOR PRESIDENT



Donald Trump

Kamala Harris

Taxpayer Funding of Abortion

Donald Trump opposes using tax dollars to pay for abortions. He pledged to sign the *No Taxpayer Funding for Abortion Act* which would limit federal funding for abortion on a government-wide basis. President Trump's Administration issued a rule to ensure Title X funding did not go to facilities that perform or refer for abortions.

Kamala Harris supports using tax dollars to pay for abortions. As a Senator, Harris voted against the *No Taxpayer Funding for Abortion Act* which would limit federal funding for abortion on a government-wide basis. The Biden-Harris Administration directed Title X funding to facilities that perform or refer for abortions.

Unlimited Abortion Until Birth

Donald Trump opposes the *Women's Health Protection Act*, a bill that would enshrine unlimited abortion until birth in federal law and policies and eliminate existing state-level protections for unborn children and their mothers such as parental involvement measures for minors.

Kamala Harris voted for the *Women's Health Protection Act*, a bill that would enshrine unlimited abortion until birth in federal law and policies and eliminate existing state-level protections for unborn children and their mothers such as parental involvement measures for minors.

Funding Abortion Providers Abroad

Donald Trump issued the "Protecting Life in Global Health Assistance" policy which limited federal funding for organizations that provide or promote elective abortions in other countries.

Kamala Harris supports President Biden's reversal of the "Protecting Life in Global Health Assistance" policy which limited federal funding for organizations that provide or promote elective abortions in other countries.

Born-Alive Abortion Survivors

Donald Trump supports the *Born-Alive Abortion Survivors Protection Act*, which would ensure that infants born alive during attempted abortions are afforded the same degree of medical care as any other newborn of the same gestational age.

Kamala Harris voted against the *Born-Alive Abortion Survivors Protection Act*, which would ensure that infants born alive during attempted abortions are afforded the same degree of medical care as any other newborn of the same gestational age.

The U.S. Supreme Court

Donald Trump pledges to nominate qualified individuals to the Supreme Court who will interpret the U.S. Constitution as written and not legislate from the bench. He appointed Justices Neil Gorsuch, Brett Kavanaugh, and Amy Coney Barrett.

Kamala Harris pledges to nominate only individuals who share her view that unlimited abortion should be a constitutionally protected right. She applauded the appointment of Justice Ketanji Brown Jackson and voted against the confirmations of Justices Neil Gorsuch, Brett Kavanaugh, and Amy Coney Barrett.

Later-Term Babies Aborted By Pill: Clinic Worker and Women “Shocked”

From Page 7

photo from their phone of what they can see.

This can include eyes, fingers, and toes, and even I can sometimes still find these images shocking.

Carey worked for years at an abortion facility that did surgical abortions all the way up to the 24th week. Earlier in her book, she describes watching a 20-week abortion and seeing arms, legs, and other recognizable body parts being pulled from the pregnant person's body.

What would shock someone like her? How far along are these babies?

Carey doesn't say.

Downplaying Women's Emotional Reactions

She also seems to downplay the emotional impact of seeing the bodies on the callers. She says, “Often, [the callers] just need reassurance that they are going through a normal abortion.”

Carey worked in a late-term abortion facility for years where she's seen (and assisted in) many abortions throughout the first two trimesters. If she finds the pictures of aborted babies shocking, one can only imagine how the women feel.

It's hard to believe that the callers are comforted just by being told that what they're going through is normal. Is that enough to ease their trauma and make them feel good about taking the abortion pill?

Most people aren't used to seeing dead babies—especially

their own. And these post-abortive people have to carry that memory for the rest of their lives.

They also have to dispose of the bodies somehow. Carey doesn't mention telling them what to do with the babies' bodies. Are some of them too big to flush down a toilet? We have no way of knowing because Carey says nothing else about it.

What we do have is an admission that without ultrasounds, pregnancies are being aborted later than they are supposed to be. Post-abortive people are very upset at seeing the bodies, and a seasoned abortion worker is shocked by them, too.

Overall, a pretty damning indictment of the abortion industry.

Source: Juno Carey *A Necessary Kindness: Stories from the Frontline of Abortion Care* (London: Atlantic Books, 2024) 244, 245

Editor's note. Sarah's great posts appear on her substack at <https://sarahterzo.substack.com/>



AS A SENATOR, KAMALA HARRIS VOTED ON FEBRUARY 25, 2020, AGAINST THE *BORN-ALIVE ABORTION SURVIVORS PROTECTION ACT*, REFUSING MEDICAL CARE TO BABIES BORN ALIVE DURING FAILED ABORTIONS.

Inspiring, energizing, and empowering—only some of the adjectives to describe Pennsylvania’s March for Life

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

A steady, merciless rain did not deter the thousands of Pennsylvanians who came to the state Capitol in Harrisburg to march for life.

From babies in strollers to grandmothers with canes, they crowded downtown streets to send a message to lawmakers: public policy should honor both mother and child.

This year’s march comes as pro-abortion lawmakers in the

state legislature push for radical measures which would wipe out protections for preborn children and their mothers from the harm of abortion.

These political extremists want to remove such time-tested provisions as protections against brutal late-term abortions...24 hour waiting periods for abortion...parental consent and informed consent.

They are led by Democrat

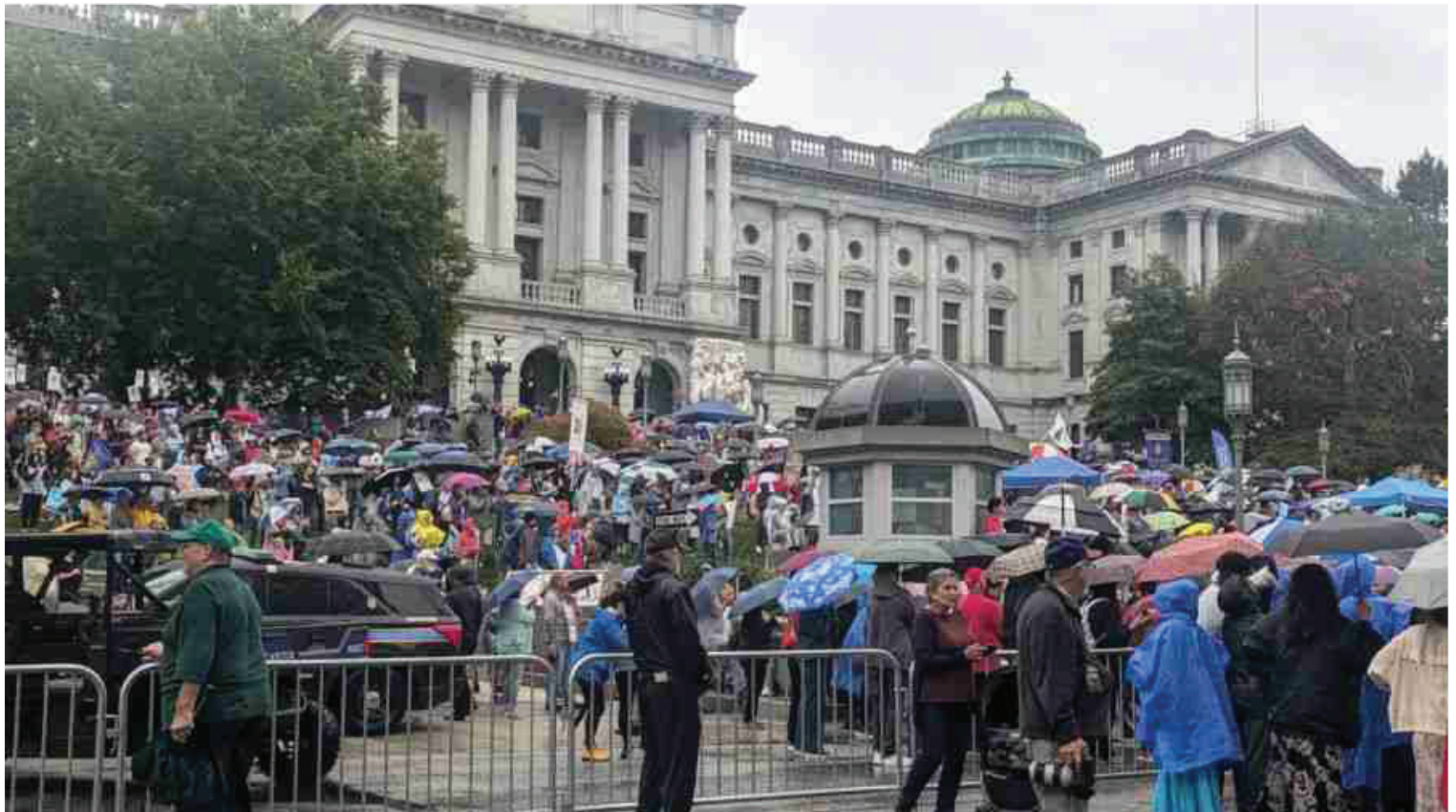
Governor Josh Shapiro, who last year broke with bipartisan tradition and cut off funding for pregnancy resource centers throughout the Commonwealth.

The move came as a shock to center staffs, who provide comprehensive counseling and support to pregnant women facing challenging circumstances.

I had the privilege of addressing the Lutherans for Life breakfast that preceded the march. The

attendees were enthusiastic and dedicated to letting lawmakers know they stand for mothers and babies.

Inspiring, energizing, and empowering—those are some of the adjectives I would use to describe this year’s march. In this critical year, marchers sent a message that they will strive to defend vulnerable human life at all ages and stages of development.



Kentucky Right to Life Statement Our Victory in the Courts... Victory for ProLife Advocates, and Free Speech in Louisville

By Kentucky Right to Life

Louisville, KY – Friday marked a monumental victory for pro-life advocates, the First Amendment, and the sanctity of free speech, particularly for mothers and their unborn children. After a three-year, hard-fought legal battle, a motion for summary judgment was granted by District Judge Rebecca Grady Jennings of the United States District Court, providing a permanent injunction on the 2021 Louisville Metro Council buffer zone ordinance.

This ordinance infringed upon the First Amendment rights of sidewalk counselors and pro-life advocates who peacefully prayed and offered counsel to women entering the EMW Abortion Facility in Louisville.

The buffer zone ordinance, passed in May 2021 and signed by then-Mayor Greg Fischer, prohibited individuals from entering or obstructing a 10-foot-wide “buffer zone” around facilities like the EMW Abortion Facility. This directly impacted pro-life sidewalk counselors who have long provided life-saving resources, quiet emotional support, prayers, and alternatives to abortion for women entering the facility.

“This decision is not just a victory for those who stand for life on the sidewalks, offering compassion, resources, and alternatives to abortion—it is a profound First Amendment victory for all who believe in the fundamental right to free speech,” said Addia Wuchner, Executive Director of Kentucky Right to Life – joint plaintiff in

the case. “Pro-life advocates have long stood as a beacon of hope for women, offering support and encouragement during the most difficult moments.”

Christopher Wiest, the attorney representing Kentucky Right to

counsel to young girls and women entering a Louisville abortion facility. This is a victory for faith and free speech, a justice for the moms and the babies, and we give thanks to all who have stood firm in this fight for life.”



Life and Sisters for Life, led the charge. “We are thrilled with this victory after a years-long battle that vindicates important First Amendment rights for our clients and their ministries,” Wiest stated. “Today’s decision is a blessing for moms, babies, and the truth that our ministries have strived to present to mothers and pregnant women.”

Angela Minter, President of Sisters for Life and a joint plaintiff, said, “With the court issuing a permanent injunction, the unconstitutional buffer zone ordinance has been struck down, restoring the right of pro-life advocates to pray and offer quiet

Ed Harpring and Mary Kenney, both longtime pro-life advocates, also joined the legal challenge, representing the countless men and women who have prayed and stood alongside women entering abortion facilities over the years. “We are blessed by advocates like Joe Lynch, Sisters for Life, Ed, and Mary, who are the quiet yet powerful face of pro-life advocacy,” said Wuchner. “Joe testified that he visits EMW once per week to pray in and around the buffer zone because he believes he is in a ‘spiritual battle over abortion.’”

Wuchner also expressed her deep gratitude for those who

supported this long-standing legal fight, stating,

“I thank our attorney, Chris Wiest, for his skillful and unrelenting pursuit of justice on our behalf. We are also grateful to Kentucky’s former Attorney General Daniel Cameron and his team for their briefs and continued support, and to Kentucky Attorney General Russell Coleman and his team, whose assistance helped secure this victory.”

The legal journey to victory was arduous. After the ordinance was passed in 2021, Wiest quickly filed for an injunction, challenging its constitutionality on First Amendment grounds. Following setbacks, including a 2022 District Court ruling denying the injunction, the case saw a turning point with the U.S. Supreme Court’s *Dobbs v. Jackson Women’s Health Organization* decision, which led to Kentucky’s abortion ban.

The Sixth Circuit Court of Appeals reversed the previous decision, granting a preliminary injunction in December 2022. This paved the way for Friday’s permanent injunction.

While the EMW Abortion Facility has since closed following the *Dobbs* decision, this case remained critical to protecting free speech and the rights of pro-life advocates. Kentucky Right to Life, Sisters for Life, and their partners remain unwavering in their defense of the unborn and the fundamental rights of those who minister on the sidewalks, offering love, hope, and life-affirming support.

Fact-checking the Fact-checkers infuriates pro-abortionists

By Laura Echevarria, Director of Communications and Press Secretary

"Well, I guess I'll have to speak up for the babies, they're not here to speak for themselves. Lord, have mercy."
- Scott Jennings on CNN

CNN's panel following Tuesday night's vice-presidential debate featured panelists Alyssa Farah Griffin, David Axelrod, Scott Jennings, and Ashley Allison. When the panel discussed the exchange between J.D. Vance and Tim Walz over Minnesota's abortion law, Scott Jennings, a former special assistant to President George W. Bush, fact-checked the panel on the abortion law.

In 2023, Governor Walz signed legislation to enshrine a "fundamental right" to abortion for any reason throughout pregnancy in Minnesota and invalidated existing protections like the state's parental involvement law. Walz also repealed Minnesota's version of the Born-Alive Abortion Survivors Protection Act which required doctors to take measures to "preserve the life and health" of born-alive infants.

Under Walz, the law was changed to require "care," which the bill's author described as "comfort" care. Under the new legislation, any infant could be denied lifesaving treatment and then allowed to die.

According to the *Daily Caller*, during the post-debate discussion on CNN:

"The View" co-host and former Trump administration official Alyssa Farah Griffin bemoaned Republicans accusing Democrats of supporting infanticide, after which Axelrod and Jennings dove into a debate over the impact of the [Minnesota] legislation.

On CNN, Jennings talked about the impact of Walz repealing a

law that protected babies born alive following an abortion.

[T]his thing in Minnesota. There were eight deaths among infants who survived abortion attempts during Tim Walz's tenure as governor.

line with what I think most Americans want and I think Harris and Walz have proven they cannot discuss even a single restriction that they want...I can tell you what Republicans

Harris / Walz



Radicalized Pro-Abortion Zealots

- Support for unlimited abortion until birth
- Support for taxpayer dollars to pay for abortion
- Support for eliminating all existing protection for unborn children and their mothers



National
RIGHT TO LIFE

It happened. They don't want to talk about the fact that it happened but there were children...

David Axelrod's tone was mocking when he pushed back and asked Jennings, "Since you 'deeply' researched this, what were the condition of these... babies when they were born?"

Axelrod also wanted to know about the "participation of the family" in the abortions and Jennings responded with the facts.

They tried to abort the babies and they survived the abortion and they died...Tim Walz can't [inaudible] the truth about this...[Trump's & Vance's] position is moderate, and it is in

believe...I get it. I would attack if -- I didn't -- if I couldn't articulate a single restriction, I would attack Trump too...Well, I guess I have to speak up for the babies. They're not here to speak for themselves. Lord, have mercy.

In Minnesota, under Walz's term as governor, eight babies survived following abortions and, of those babies, we know that all eight died. In 2021, Minnesota recorded 5 babies who were born alive and all five died. Walz repealed the requirement that abortionists report cases of babies born alive during an abortion which makes 2021 the last year for which we have numbers.

From Minnesota's report,

For the calendar year of January 1, 2021 through December 31, 2021, 5 abortion procedures resulting in a born-alive infant were reported.

- In one instance, fetal anomalies were reported resulting in death shortly after delivery. No measures taken to preserve life were reported and the infant did not survive.
- In two instance, comfort care measures were provided as planned and the infant did not survive.
- In two instances, the infant was previable. No measures taken to preserve life were reported and the infant did not survive.

For two of these babies, we don't know if they had any medical conditions because none are mentioned. Contrary to the pro-abortion talking points parroted by Axelrod and Ashley Allison, not all babies aborted later in pregnancy have a fetal anomaly or severe fetal abnormality incompatible with life. In fact, the Abortion Survivors Network, founded by abortion survivor Melissa Ohden, notes that there are over 700 abortion survivors who have been located.

Once he was chosen by pro-abortion Vice President Kamala Harris to be her running mate, Walz described his own extreme record as "so pro-choice Nancy Pelosi asked me if I should tone it down."

Tim Walz and Kamala Harris are so radical, they have no problem opposing a law that would protect babies who are born alive following an abortion.

Scott Jennings is right. We should all pray, "Lord, have mercy."

Memorials & Tributes

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

In Memory of

Father Thomas Ungashick
from Christ Kauffman

In memory of Robert Teeple
from Anne Bechtel

In memory of Delores Ann Kaiser
from Sheila Pearson

In memory of E. Carter Bullard
from Julie Bullard

Baby Holsonback
from Matt Thomas

Baby Sophia
from Sneha Tharayil

Diana Lee Ranier
from Kathryn Gruben

Rose Marie Gallagher
from Pat Goldstein

Joseph Edmund Daly
from Terrance Daly

Eleanor Ruth Bothun
from Michelle Harris
Mary Barron O’Neil
Andrea Alter

Louise Cormier
from Hayley Adolphson

E. Carter Bullard
from Julie Bullard

Joseph Edmund Daly
from Jacqueline Boyd
Robert Luschenat

My unnamed son, who died at 7 months
in the womb
from Anonymous

Joan Zippay
from Maureen Niese
Cleophas Kukeya

In memory of Sara Schad
from Autumn Raw
Kathy Talken
James Barta

Everly Rose Kidd
from Teresa Williams
Sara Schad
James Barta

In Honor of

Mary Theresa Flynn
from Peter Flynn

Jacki Jones
from Robert Jones

Phil and Colleen Wiedermann
from Joe Schmidt

Leo James
from Margaret Huckabee

October 2024

You can make your contribution in loving memory or in honor of someone online at donate.nrlc.org or by sending your contribution along with memorial and tribute information to the address below.

Memorials & Tributes

Contribution
amount \$ _____

Your name _____

In memory of _____ In honor of _____

Your address _____

Name/Address for acknowledgment card _____

**Send with a check payable to National Right to Life Committee to:
National Right to Life Development Office | 1446 Duke Street | Alexandria, Virginia 22314**

Stories of Prenatal Diagnosis: L. E.

By Guest Blogger

Editor's note. This appeared at Secular Pro-Life and is reposted with permission.

A prenatal diagnosis is often accompanied by the pressure to abort, leaving most parents feeling unsupported by the medical community and society at large. In our series "Stories of Prenatal Diagnosis," we share testimonies of parents who received a diagnosis while pregnant and their personal experience in handling it. Today's story is from "L.E."

What conditions did your screening results indicate?

Down Syndrome.

Did it turn out to be the case that your child had these conditions?

No.

Please tell your story of your experience in your own words.

I was pregnant and living in Florida in 2019. Screenings were no surprise to me, as this was my fourth child. I didn't mind screenings, because if there was any issue I'd love to know and prepare sooner rather than later. Also, I enjoyed the perk of knowing the gender of my child as soon as possible.

An early screening pinged for potential Down Syndrome. This was a little stressful, but I was going to be fine with the results. I just hoped that any associated issues like heart murmurs wouldn't be too difficult

to address. However, when I pressed for more information/further screenings to know what the needs of our child might be, the nurse said to me, "Yes, you'll want to find out sooner rather than later so that you can have options."

This made my stomach fall to my feet. Are you kidding me? Options? What that really means is abortion. I can't remember

and knowledge in this situation, would be the ones to bring it up. If I had been vulnerable, or a single mother, or less informed, or just didn't know the reality of abortion, I might have had a "What do they know that I don't know? Maybe I should listen to them." response.

After many many many tests and follow-up ultrasounds with a MFM, it turned out that the

None, and I left that practice as soon as I possibly could.

What aspects, if any, did you dislike about the way your medical team handled the situation?

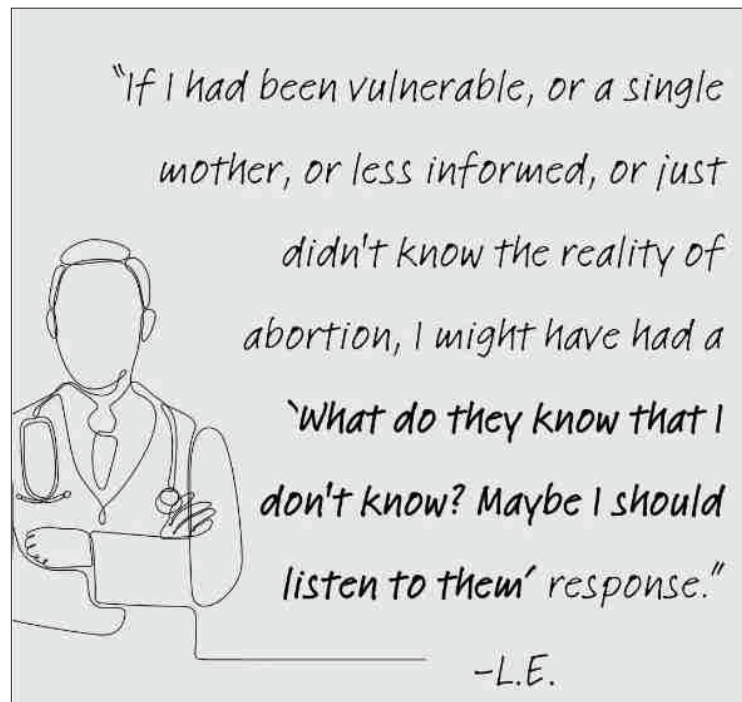
I was horrified that a medical provider was the one who suggested I kill my child if they had a completely survivable condition like Down Syndrome. Rather than wanting to help my child, they introduced the idea of ending his life. I had given no indication that I was in any way considering abortion, or even believed in abortion as an option at all.

What recommendations do you have for medical providers who are giving parents prenatal screening results?

Do not ever, ever, ever suggest an abortion. Even if providers are pro-abortion, they MUST be explicitly told or asked by the parents before discussing it. Providers have the knowledge and the upper hand. If they abort a healthy baby, it will be the fault of the providers who introduced the idea. And it's just against the Hippocratic Oath to discard a baby and "try again," rather than looking at supportive care first.

What recommendations do you have for parents who are receiving prenatal screening results?

Keep pushing for answers, get second opinions if you get a screening result that indicates something negative.



how I pushed back, but it was something along the lines of, "No, I'd rather just find out any health issues sooner rather than later so we can be prepared."

I immediately lost all faith in my health providers. I had never given any indication that I would be okay with abortion, and I was horrified and angry that they, the ones with all the power

screening that indicated Down Syndrome was entirely due to a LAB ERROR. My child was in danger because someone misplaced a decimal, or added a zero.

What aspects, if any, did you like about the way your medical team handled the situation?

Researchers: Mom's brain is 'sculpted' during pregnancy, revealing 'underlying beauty'

By Laura Nicole

An amazing new study from the journal *Nature* shows the profound effects of pregnancy on a woman's brain – some of which last years after birth – are even more extensive than previously thought.

In the study, neuroscientist, co-author of the study, and first-time mom Liz Chrastil scanned her brain 26 times – before, during, and after her pregnancy with her son. What the authors found when mapping and analyzing the data was a detailed picture of the changes of the brain, inside and out, throughout pregnancy and into the postpartum period.

"It's the first detailed map of the human brain across gestation," said senior author Emily Jacobs from the University of California, Santa Barbara, according to the BBC. "We've never witnessed the brain in a process of metamorphosis like this. We are finally able to observe changes to the brain in real time."

But what are these changes for? Chrastil distilled a portion of the study in a tweet:

"Brain changes during pregnancy are likely an evolutionarily-tuned suite of adaptations to help maternal behavior and bonding. We hope to find out more about mechanisms and what it means for things like

postpartum depression in the coming years."

"There is so much about the neurobiology of pregnancy that we don't understand yet, and it's not because women are too complicated. It's not because



pregnancy is some Gordian knot," Jacobs said according to the *AP*. "It's a byproduct of the fact that biomedical sciences have historically ignored women's health."

The brain consists of both gray matter and white matter. Gray matter is the wrinkly exterior part of the brain that's responsible for things like thinking, learning, memory, and emotions. White matter is the interior part of the brain that helps process information, helps focus, plays

a role in balance and in sending and receiving nerve signals. The study found that most (80%) of the regions they looked at had reductions in the gray matter of the brain – up to 4% on average – similar to changes that take place in the brain during puberty. They

also found that white matter was able to transmit signals throughout the brain more efficiently.

Interestingly, while the scans showed that white matter returned to its original condition on childbirth, the gray matter changes lasted around two years postpartum. Although a reduction in brain matter sounds alarming, Jacobs said it's actually nothing to worry about, as it allows the brain to become more streamlined and specialized to the task of becoming a parent.

Jacobs likened these changes to the carving of Michaelangelo's David. "The artist starts off with this big block of marble and the underlying beauty is revealed through the art of removal, carefully honing and fine-tuning the material," she said, according to the *New York Times*. She added that in the study, "you can see the sculpting of the brain unfold week by week."

Other neuroscientists around the world have already benefited from the research Chrastil and Jacobs have done, whose efforts have become the springboard for the international Maternal Brain Project to gather similar scans.

Of note, Elseline Hoekzema of Amsterdam University Medical Center, who heads the Pregnancy and the Brain Lab, has done other brain scans on pregnant women. She told the *New York Times* that the changes were such that they could tell who was pregnant simply by their brain scans.

Hoekzema said that the research "suggests that brain changes during pregnancy relate to the way a mother's brain and body react to infants" and that changes correlated with "maternal-fetal bonding, nesting behavior and the way a woman's heart rate reacts to seeing an infant."

Editor's note. This appeared at Live Action News and is reposted with permission.

We Asked, You Answered: Responding to “Parasite” Rhetoric

By Kelsey Hazzard

We asked our followers on social media:

You're hanging out at a party with 3-4 casual friends and the topic of abortion comes up. One guy says "I can't believe people get this worked up over basically a parasite." How do you respond?

Here are a few of your top answers:

Katie S.: “They don’t. They get worked up because abortion ends the life of a human being, and some people think that shouldn’t happen unless the other person is threatening their life.”

Maria G.: “Abortion is definitely a difficult thing to talk about. I think we can have a meaningful discussion about the value of a fetus, but I really think we should avoid words like ‘parasite’ for a whole bunch of reasons. For one thing, think of women who have gone through the devastating loss of miscarriage. I don’t think any sane person would say that those women are crazy or stupid for getting ‘worked up over a parasite’. They’re clearly grieving something that has way more value than that.”

Gabriela O.: “Hold my Carnegie stages!”

Kristen R.: “I’m not sure how I’d respond in that moment... but newborn infants are perhaps more dependent upon their mothers for life. And require conscious, active care... yet we don’t consider them parasites. Why is that? My

Mandalynn: “Crack my knuckles and break out my biology textbook. I live for the parasite argument.”

Kristin M.: “They aren’t parasites. That’s just what

because it has human DNA and everyone were a fetus once. (3) Many people are dependent on other people, e.g. small children, the elderly, disabled and the intellectually disabled. But they still have the right to life. (4) The bodily autonomy argument is flawed for pro-choicers to have if they support abortion rights to first trimester, but not in the other ones. They do support some restriction of bodily autonomy, but the line is blurry. So I ask them why they draw the line on X week, but not in Y or Z week.”

V.: “You were one once, so was I, neither of us is disposable.”

Rachel C.: “I can’t believe that in an age of unprecedented access to factual information, there are still people who think that a human fetus in utero is a parasite.”

Selenite: “Ask him if he wants to feel my 27 week baby kick. Then tell him to be very careful how he refers to my children in the future.”

Michelle B.: “Reading these answers is refreshing. So many times, I was silent when I shouldn’t have been.”

Editor’s note: This appeared at Secular Pro-life and is reprinted with permission.



3-week-old newborn was much easier to care for during gestation“

Margie M.: “I’m sarcastic. I’d ask if he believes the earth is flat, too.”

Dermot K.: “I give him the opportunity to elaborate by asking him what exactly does he mean.”

abortion clinics tell people to sell them abortions.”

Sara N.: “(1) An embryo and a fetus is an age stage part of the human development like infant, toddler, child, teenager and adult. It’s a normal human development. (2) An unborn is part of the human species



COMPARE THE CANDIDATES FOR VICE PRESIDENT



J.D. Vance

Republican Vice Presidential Nominee

Senator J.D. Vance of Ohio is Donald Trump's running mate for the 2024 presidential election.

Tim Walz

Democratic Vice Presidential Nominee

Governor Tim Walz of Minnesota is Kamala Harris's running mate for the 2024 presidential election.

Taxpayer Funding for Abortion

J.D. Vance opposes using our tax dollars to pay for abortions. Vance is a cosponsor of the *No Taxpayer Funding for Abortion Act*, a bill that would prevent tax dollars from being used to pay for abortions on a government-wide basis.

Tim Walz supports using our tax dollars to pay for abortions. While serving in Congress, Walz voted against the *No Taxpayer Funding for Abortion Act*, a bill that would prevent tax dollars from being used to pay for abortions on a government-wide basis.

Unlimited Abortion Until Birth

J.D. Vance opposes the *Women's Health Protection Act*, a bill that would enshrine unlimited abortion until birth in federal law and eliminate existing state-level protections for unborn children and their mothers like parental involvement and right-to-know laws.

Tim Walz supports the *Women's Health Protection Act*, a bill that would enshrine unlimited abortion until birth in federal law and eliminate existing state-level protections for unborn children and their mothers like parental involvement and right-to-know laws.

Pregnancy Help for Mothers and Babies

J.D. Vance supports the work of the 3,000+ pregnancy help centers currently operating nationwide that provide comprehensive services, counseling, parenting classes, housing assistance, diapers, and other material resources for mothers and babies in need.

Tim Walz repealed Minnesota's *Positive Alternatives Act*, which had offered funding for programs that provide adoption services, housing assistance, counseling, childcare, parenting education, medical attention for mothers and babies in need, and more.

Protecting Born-Alive Abortion Survivors

J.D. Vance is a cosponsor of the *Born-Alive Abortion Survivors Protection Act*, a bill which would ensure that an infant who survives an attempted abortion is afforded the same degree of medical care as any other newborn of the same gestational age.

Tim Walz opposes the *Born-Alive Abortion Survivors Protection Act*, a bill which would ensure that an infant who survives an attempted abortion is afforded the same degree of medical care as any other newborn of the same gestational age. As governor, Walz repealed similar state-level protections for newborn babies in Minnesota.

Dead Georgia Woman a Victim of Biden-Harris Abortion Pill Deregulation, Not State Law

From Page 5

pushed to water these down even further. They dropped all required visits, allowed for abortion pills to be sold online or in pharmacies and shipped directly to women's homes without any in-person screening or counseling or follow up.

Stories appear to indicate that Thurman got her pills from the North Carolina abortion clinic and that she received some sort of counseling about the risks. Exactly how extensive or serious this was is unknown at this time.

We also don't know how much, if at all, the clinic followed up with Thurman once she left the clinic.

We know they told her to go to the emergency room if complications developed. But we do not know if they gave her the name of someone who had an arrangement with the clinic or someone from her own area that was specifically trained to treat these sorts of complications. We don't know whether the hospital she eventually went to was on any list recommended by the clinic.

The point is, under the new regulations, the "provider's" direct obligations after delivering the pills ended with the provision of the advice and the name of someone to call. The only thing that the prescriber is required to do after providing these pills and this information is to contact

the distributor and report if the patient dies.

Though we presume that the clinic passed on news of Thurman's death to the distributor who then reported it to the FDA, we have no information that they followed up their patient once she left the clinic. A spokesperson for the clinic told ProPublica that they would have performed a D&C for free as soon as Thurman followed up, but being four hours away, she went to a hospital near her.

Part of the paperwork still required by the FDA is a patient guide and prescriber agreement to be signed by each certifying that risks have been made known. But recent modifications have made these less effective.

At one point a few years ago, the patient guide told women to tell emergency room personnel that they had taken the abortion pill so that they could provide appropriate treatment. However, the most recent agreement no longer gives such an instruction, allowing emergency room physicians to think they are merely treating an ordinary miscarriage.

The new regulations from the Biden-Harris administration put the burden on the patient to recognize signs of danger and get appropriate help, not the prescriber of the abortion pills.

This left open the possibility of fatally delaying treatment and then leaving her fate in the hands of someone probably unfamiliar with how mifepristone and misoprostol work and how to treat complications that arose.

Biden-Harris: Promoting Abortion Market Rather than Abortion Safety

It cannot be overemphasized that before taking the abortion pills, Amber Thurman was a healthy woman with a healthy, natural, normal pregnancy. Her body was working as it should and there was no special, imminent danger.

Her life was put at risk and her situation deteriorated once she took the abortion pills, abortion pills that the government told her were safe and effective when used as the FDA directed. She and her prescriber followed those instructions, instructions that the FDA under Biden-Harris decided were adequate to address persistent safety and efficacy concerns with the drug.

They were clearly not adequate in Thurman's case.

Risk of failure and complications were greater for someone at her gestation. Under the circumstances, it would have been helpful if someone who understood that stayed in touch

with her and monitored her situation.

It might have saved her life if the doctors treating her had known she had taken the pills and understood more about how they worked and where things were headed.

But Biden and Harris's FDA no longer thought those regulations were necessary.

The FDA, the administrations of Clinton, Obama, and Biden-Harris, and much of the abortion sympathetic medical establishment have decided that a certain number of deaths (32 in the FDA's last count); a certain number of significant complications or serious adverse events (a couple of thousand hemorrhages, hospitalizations, serious infections, ruptured ectopic pregnancies, etc.) are acceptable.

In their calculations, a few Amber Thurmans, Holly Pattersons, Brenda Visers, etc., can be sacrificed for the greater cause of expanded chemical abortion access.

The law in Georgia tried to protect Thurman and her babies, and never got in the way of saving her life. The regulations put in place by Biden-Harris tried to protect the abortion industry and market and ended up costing both Thurman and her babies their lives.

Gallup sees favorable terrain for Trump

By Dave Andrusko

Every once in a while it's nice to be able to publish unabashedly good news, even better if we can publish two such stories.

As per usual, I ran my daily update on the election contest between former President Donald Trump and pro-abortion Vice President Kamala Harris: "42 days until the November 5 elections. What's new and what might that tell us?" What it told us was Democrats are plenty nervous.

The second item is from Gallup. Written by Jeffery M. Jones, the headline was music to our ears: "2024 Election Environment Favorable to GOP: Party affiliation, GOP issue advantages, economic pessimism among key factors."

The headline does not exaggerate. Here's the first paragraph of Jones's story:

WASHINGTON, D.C. — Nearly all Gallup measures that have shown some relationship to past presidential election outcomes or that speak to current perceptions of the two major parties favor the Republican Party over the Democratic Party. Chief among these are Republican advantages in U.S. adults' party identification and leanings, the belief that the GOP rather than the Democratic Party is better able to handle the most important problem facing the country, Americans' dissatisfaction with the state of the nation, and negative evaluations of the economy with a Democratic administration in office.

I'd like to dig in on them all, but in the interest of brevity, I'll just go through three and choose just the highlights. I'll also will write briefly about Jones's "bottom line."

First, Party Identification and Leaning.

More U.S. adults

identify as Republican or say they lean toward the Republican Party (48%) than identify as or lean Democratic (45%). ...

Party affiliation and voting are strongly predictive of individuals' vote choices, with the vast majority of identifiers and leaners voting for the candidate of their preferred party. ...

Key Measures of the 2024 Presidential Election Environment			
Measure	Current rating	Party measure favors	Relationship to past presidential election outcomes
Party identification and leaning	48% Republican/Lean Republican 45% Democratic/Lean Democratic	Republican	Strong
Party better able to handle most important problem	Republican Party 46% Democratic Party 41%	Republican	Strong
U.S. satisfaction	22% satisfied	Republican	Moderate
Economic confidence	-28 index score	Republican	Moderate
Party better able to keep America prosperous	Republican Party 50% Democratic Party 44%	Republican	Moderate
Presidential job approval	39% approval	Republican	Moderate
Party favorable ratings	Republican Party 43% Democratic Party 42%	Neither	Moderate
Party better able to keep America safe from international threats	Republican Party 54% Democratic Party 40%	Republican	Weak
Preference for government activity	55% do less 41% do more	Republican	Weak
Congressional job approval	20% approval	Neither	Weak

All measures are taken from a Sept. 3-15 Gallup poll except for party identification and leaning, which is an average of July-September Gallup polls.

Get the data • Download image

GALLUP

Republicans previously have not had an outright advantage in party affiliation during the third quarter of a presidential election year, and they have rarely outnumbered Democrats in election and nonelection years over the past three decades.

Second, Party Performance on Issues

Three separate measures of party performance on issues favor the Republican Party by at least a modest margin. ...

By 46% to 41%, Americans say the Republican Party is better able than the Democratic Party to address what they think is the most important problem

facing the country. The top issues Americans currently name as the most important are ones that tend to favor the GOP, including the economy (24%), immigration (22%), the government (17%) and inflation (15%).

This measure has been highly predictive of election outcomes in

Gallup trends dating back to 1948. ...

Republicans hold a more substantial advantage of 14 points (54% to 40%) as the party Americans believe is better able to keep the nation safe from terrorism and other international threats. Republicans have led on this question all years it has been asked (dating back to 2002) except 2007 and 2012.

Third, National Satisfaction

Twenty-two percent of Americans are satisfied with the way things are going in the United States at this time. Satisfaction levels this low have been associated with incumbent presidents losing their reelection

bids in 1980 (19%), 1992 (22%) and 2020 (28%).

Bottom line

The political environment suggests the election is Trump's and Republicans' to lose. Nearly every indicator of the election context is favorable to the Republican Party, and those that aren't

are essentially tied rather than showing a Democratic advantage. Nevertheless, the two major party presidential candidates have similar favorable ratings in Gallup's September poll, echoing presidential preference polls that suggest a neck-and-neck race between Trump and Harris.

HotAir's David Strom concludes

He [Trump] may not look as good as we would like in the polls, but he is actually polling better against his Democrat opponent this year than in the last two elections. Harris is underpolling Biden by a lot. That's a bad sign for her.

Why do pro-abortionists love Harris so much more than Biden?

By Dave Andrusko

Can you imagine a pro-abortionist stomping on poor old pro-abortion President Joe Biden? What's a guy have to do to win their affections?

As of September 1, Biden has appointed and the Senate has confirmed 205 federal judges, outpacing even President Donald Trump. In his only opportunity to appoint a justice to the Supreme Court, he chose reliably pro-abortion Ketanji Brown Jackson. His administration is loaded with abortion zealots, starting with the Department of Health and Human Services and the Department of Justice, to name just two.

So why did *USA Today* columnist Sara Pequeño write that "In the June presidential debate, President Joe Biden's answer on the abortion issue made me feel hopeless"? Because his answer "failed to capture the gravity of the situation."

Luckily for Pequeño, the Democratic power brokers forced Biden out, making it possible for Vice President Kamala Harris to be the party's presidential nominee. That, in turn, made it possible for her answer in the September debate to "make up for" Biden's "incoherent" response.

For Pequeño, Harris's "answer is exactly what I was hoping to hear from the Democratic presidential nominee."

"I pledge to you when Congress passes a bill to put back in place the protections of Roe v. Wade as president of the United States, I will proudly sign it into law"

There's much more that made Pequeño giddy. Harris "talking about abortion in all the correct ways"—for the Abortion Establishment, one of Biden's signature weaknesses.

Furthermore, Trump "continued to push the idea that abortions

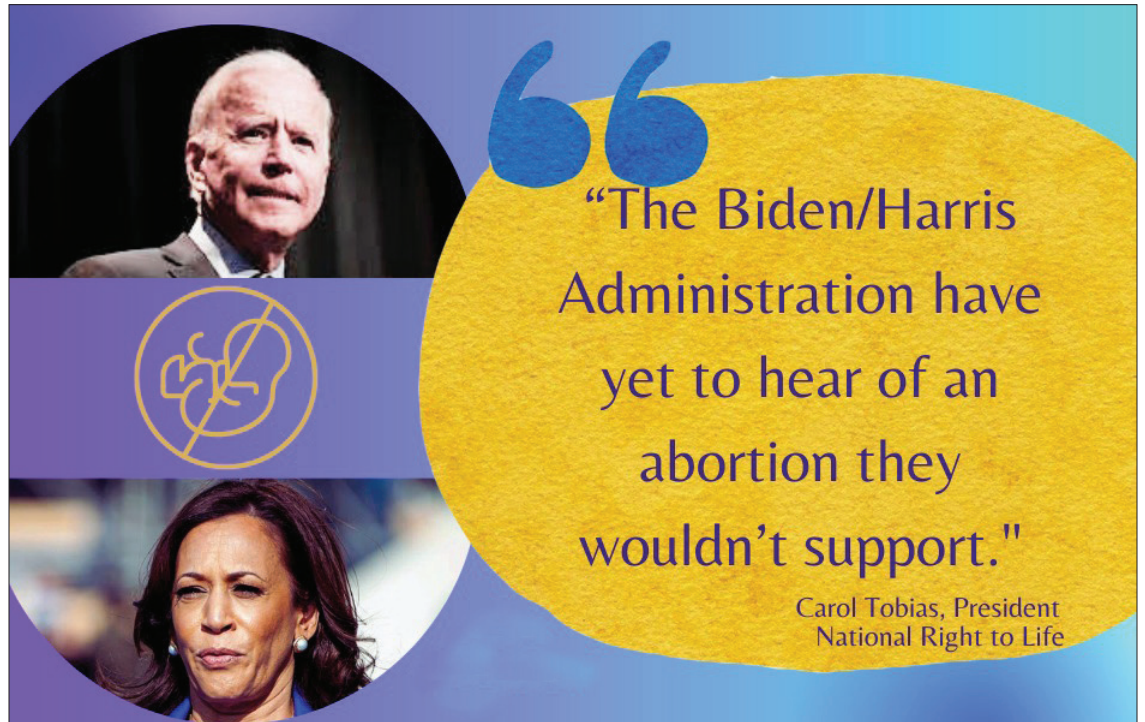
are occurring late in pregnancy — an idea that Harris pushed back on," according to Pequeño. "To be clear, abortions at or after 21 weeks make up only 1% of all abortions in the United States."

During the debate, Harris countered Trump, saying "Nowhere in America is a woman carrying a

movement that her/his mother can feel, and is pain capable—to name just a few qualities.

Second, Pequeño writes that "Trump even said that Minn. Governor Tim Walz, Harris' running mate, supports 'execution after birth.' It is not legal to kill a child who has been born in any

and at any time during pregnancy. But he went even further: He also signed a bill (SF 2995) repealing a requirement to provide medically appropriate lifesaving care to born-alive infants. Under Walz's



Carol Tobias, President
National Right to Life

pregnancy to term and asking for an abortion That is not happening. It's insulting to the women of America."

There are two separate issues. First, Pequeño argues that Trump was wrong to continue "to push the idea that abortions are occurring late in pregnancy" only to admit in the next sentence that "abortions at or after 21 weeks make up only 1% of all abortions in the United States."

One percent is in the neighborhood of 9,000 to 10,000 abortions per year performed on babies who have lips, with ears developed enough that she can hear you talk, vocal cords, sleep wake cycles, coordinated limb movements and bone marrow,

state, something that Davis [she means Harris] also pointed out during the debate."

This blurs a key distinction pro-abortionist use to avoid admitting what they are doing. There are ways to kill a baby after they are born that does **not** require a deliberate act of violence. The child can be killed by medical neglect—passive euthanasia.

Following the Trump versus Harris debate, Minnesota Citizens Concerned for Life immediately pointed out how wildly anti-life Walz is. MCCL Co-Executive Director Cathy Blaeser clarified:

"In 2023, Gov. Walz signed a bill (HF 1) creating a right to abortion for any reason

legislation, viable babies could be set aside, with only comfort care, and allowed to die. Babies with disabilities, whose lives are often devalued, are especially at risk. Minnesota's abortion policy is now as extreme as any in the world—and serves as an ominous sign of what a Harris-Walz administration would pursue in the White House."

No, Harris and Walz are every bit as out of the mainstream on abortion as you can possibly be. To point that out is—to coin a phrase—fact checking.

An Abortionist in Congress?

There is no question that the abortion industry's stranglehold over the Democratic Party has grown tighter during the 2024 election cycle. Abortion extremism took center stage at the Democratic National Convention (DNC) in Chicago. It was hard to miss. Speaker after speaker promoted abortion without limits.

(Planned Parenthood even offered free abortion drugs in mobile units outside the convention. At least 8 unborn babies were killed at the DNC, according to numbers reported by the abortion giant.)

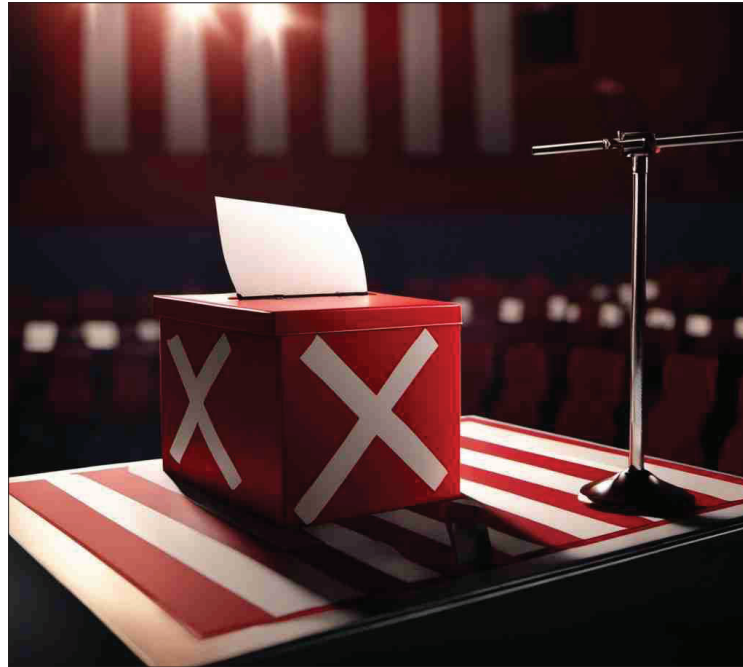
The DNC culminated in the nomination of Kamala Harris for President and Tim Walz for Vice President, *the most pro-abortion presidential ticket in our nation's history.*

At the presidential debate, Kamala Harris reminded voters that she unabashedly supports abortion without limits throughout pregnancy. She opposes protections for unborn babies as well as protections for babies who are born alive during attempted abortions.

When she served in the Senate, Harris voted against legislation to ensure babies who survive attempted abortions receive medical care like any other newborn of the same gestational age. We're talking about babies who are **born alive!** Caring for these newborn babies should be

common sense. It underscores just how extreme Kamala Harris is on the issue of life.

Get the facts about Kamala Harris's record on life: <https://www.nrlc.org/uploads/records/>



[*KamalaHarrisRecordonLife.pdf*](#)

Sadly, Kamala Harris is not alone. Democratic candidates up and down the ballot are embracing abortion extremism like never before.

In the race for the open seat in Wisconsin's 8th Congressional District, Democrats have nominated Kristin Lyerly, a candidate who actually boasts about performing abortions.

Kristin Lyerly is an OB/GYN who *specializes* in abortions, operating in both Wisconsin and Minnesota. She says she is running for Congress because she believes "it is pivotal to have a

she failed to properly monitor a woman in labor and delayed a C-section when the baby was in distress. The report also notes that Lyerly voluntarily suspended her hospital privileges in 2019 due to an ongoing investigation by her employer for providing "substandard or inadequate care."

In 2022, Kristin Lyerly was a plaintiff in the lawsuit brought by pro-abortion Governor Tony Evers and Attorney General Josh Kaul against Wisconsin's pre-*Roe* law protecting unborn babies from abortion. The pro-life law went back into effect following the U.S. Supreme Court's ruling in *Dobbs v. Jackson* in June 2022, but as a result of the pro-abortion legal challenge, it is currently not in effect.

Taking away legal protections for unborn babies and their mothers in Wisconsin is not enough for Kristin Lyerly. If elected to Congress, she will fight to tear down protections for unborn babies and their mothers *nationwide*. She will champion the radical pro-abortion agenda that Kamala Harris is eager to push as president.

We must stop pro-abortion Democrats like Kamala Harris and Kristin Lyerly!

Compare the Candidates: Donald Trump vs. Kamala Harris: <https://www.nrlc.org/uploads/records/POTUS-Trump-Harris-Comparison2024.pdf>



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Walz's record on life: Elderly, newborns, and others pay the price for absolutism and neglect

Editor's note. This appeared on Minnesota Citizens Concerned for Life webpage on August 6th.

MINNEAPOLIS — Tim Walz, Kamala Harris' choice as running mate, brings to the presidential race a long track record of abortion-up-to-birth extremism, opposition to protection for vulnerable newborns, and policies that harm elderly and disabled patients.

"Tim Walz isn't like your favorite grandpa," said Cathy Blaeser, co-executive director of Minnesota Citizens Concerned for Life (MCCL), Minnesota's largest pro-life organization. "He's a threat to your grandpa—and to unborn and newborn children, too. He's a strident ideologue, an abortion absolutist, and an ominous sign of what a Harris administration would portend."

As governor during the pandemic, Walz allowed the transfer of Covid-infected patients back into long-term care centers, even centers with known infection-control problems, despite the risks to the most vulnerable patients. Walz's administration also gave nearly \$100,000 of Covid relief money to a non-profit specializing in "abortion doulas," and it temporarily suspended all elective medical procedures (to conserve resources and reduce transmission of the virus)—but made a conspicuous exception for

elective abortion.

Later, Walz—who has described his record as "so pro-choice Nancy Pelosi asked me if I should tone it down"—signed into law the PRO Act to establish a "fundamental right" to abortion for any reason and at any time during pregnancy. He then signed a bill repealing numerous longstanding and commonsense abortion policies, including informed consent for women and Minnesota's Positive Alternatives program that had supported pregnant women and new mothers.

Walz also repealed Minnesota's requirement that reasonable measures be taken to "preserve the life and health" of born-alive infants, replacing it with a requirement for "care," which the bill's author described as "comfort" care. Under the new language, an infant could be denied lifesaving treatment and allowed to die.

In recent years, five born-alive abortion survivors were reported in 2015, five in 2016, three in 2017, three in 2018, three in 2019, and five in 2021, according to the Minnesota Department of Health. This information, however, will no longer be available; Walz repealed the requirement that practitioners of abortion report cases of born-alive infants and the measures taken to care for them.

"Abortions in Minnesota are increasing sharply under Gov. Walz," said Blaeser. "He even

recently visited an abortion facility with Kamala Harris to promote the center's work. All throughout his time in

pain. He co-sponsored legislation that would invalidate nearly all state and federal limits on abortion. And he voted against the



Pro-abortion Minnesota Gov. Tim Walz

Photo: Gage Skidmore

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government, Walz has shown his commitment to making our state and our nation a haven for unlimited abortion. Women and children deserve better."

When Walz served in Congress, he repeatedly voted in favor of taxpayer funding of abortion and repeatedly voted against protecting unborn children later in pregnancy when they can feel

Born-Alive Abortion Survivors Protection Act, which would ensure that newborn babies who survive abortion be treated with the same degree of care as other babies born at the same age (so that they are not neglected, abandoned, or killed). Walz also made clear his strong opposition to protecting abortion survivors on Twitter (now X).

‘New York Times’ hit piece on maternity homes highlights pro-death obsession

By Paul Batura

For many, many years, Christians have been ministering to unwed mothers in countless ways, and especially via the most practical of methods.

Whether providing room and board, job assistance, spiritual teaching, or parenting and personal counseling, mothers carrying their preborn children have long been welcomed with open arms by women and men who love Jesus Christ.

In fact, one of the most common and vicious lies spread near and far is that pro-life advocates only concern themselves with the baby, ignoring the many needs of mothers. But homes for mothers have been around a long time, and there remains strong and vibrant outreach to these women.

Laura C. Morel of *The New York Times* acknowledges as much in today’s edition, but as the Old Grey Lady in general is apt to do, she also attempts to question, criticize and even demonize the heartfelt effort.

“These Maternity Homes Offer Sanctuary,” reads the headline. “But It Can Feel Oppressive.”

For her report, the *Times*’ writer spoke with “48 current or former residents, employees and volunteers.” It’s always impossible to know what a writer chooses to leave out of a story, or how they might have otherwise shaded or framed the narrative. But this particular telling is clearly looking to leave the reader with a negative impression of a heroic mission.

Right out of the gate, Morel jumps into a litany of negative accusations aimed at ministries and organizations in Florida which are serving mothers and their preborn babies.

We read of “Sunlight Home” in Naples requiring moms to download a tracking device on

their phones. Hannah’s Home features mandatory morning prayers and asks its residents to get permission from a pastor before getting into another romantic relationship.

There’s no mention of Sunlight Home’s pledge and promise to

Morel then writes:

For decades, maternity homes were institutions where unmarried pregnant women could give birth in secret and put their babies up for adoption. Most shut

abused and are often the target of angry men who want them to have abortions.

The New York Times hit piece is but one more example of the (not so) soft bigotry of abortion activists who aren’t interested in solutions or finding ways to save



Photo credit: Hannah’s Home of South Florida

“Embrace, Empower, Embark, Enrich” the women entrusted to their care.

When it comes to describing Hannah’s Home, there’s no mention of its inspirational founding. Over 20 years ago, Carol Beresford, wife to pastor Paul Beresford, met with a young, frightened, unwed mother, and felt the Lord’s nudge to minister to her and others who found themselves in similar situations.

The “dream” eventually became a home on five acres with capacity to help up to 23 mothers. Ever since, they’ve helped mothers and their babies.

Instead, *The New York Times* decries the rules, regulations and restrictions placed on mothers who live at Hannah’s Home and various other facilities.

down by the 1970s, when access to birth control had widened.

Curiously, the writer doesn’t correlate the legalization of abortion in all 50 states [with the 1973 *Roe V. Wade* decision] with contributing to the decline in such ministries and organizations – unless she considers abortion to be birth control.

But the cynicism running through the “expose” is cruelest of all. The reader is left with the distinct impression the groups are highly restrictive, overly controlling and downright dictatorial. Even a reference to the homes having security cameras hints that such monitoring is a bad thing – despite the fact that many of the women served have been

lives. If these facilities didn’t have security cameras, they’d be called reckless. If they’d didn’t have strict rules, they’d be criticized for being careless. When it comes to radical abortion zealots, they’ve never found a pro-life outreach they like because they’re wholly committed to being pro-death.

We give thanks to the Lord for the courageous and sacrificial acts of countless individuals who serve women and their preborn babies in maternity homes. Let’s hope and pray they ignore the critics and maintain their focus on the mothers and babies in their care.

Editor’s note: This article was published by the Daily Citizen and reposted with permission at Pregnancy Help News.

This assisted suicide machine is not a joke

By Michael Cook

Although she discourages it, crowds at Kamala Harris's rallies chant: "Lock him up. Lock him up." Crowds at Trump's rallies had the same chant for Hillary Clinton.

I wish the media and the police had a similar fervour about locking up Philip Nitschke, the world's best-known assisted suicide activist. Dr Nitschke is an Australian doctor and physicist who has dedicated his life to promoting "rational suicide". The most recent casualty of his obsession is an unnamed 64-year-old woman from the American mid-West. She became the first person to use Sarco, the latest of his suicide inventions, to kill herself in Switzerland.

Nitschke's organisation explained that she "had been suffering for many years from a number of serious problems associated with severe immune compromise." Was the pain which drove her to suicide physical or mental? We don't know.

Sarco is a sleek airtight pod. The client – or is he or she a patient? or a suicidee? or a victim? – gets comfy inside. The lid is closed. The client pushes a button and the capsule fills with nitrogen gas. The client goes to sleep and never wakes up.

The lid is transparent and the base is elevated and tilted, so the patient can take a last look at the world. Afterwards, the pod can also be used as a coffin – a seamless transition from smelling the roses to pushing up daisies.

No one could question Nitschke's energy and ingenuity. Sarco is only the most sophisticated of his efforts to help people to shuffle off this mortal coil. In 1996, he created "the deliverance machine", a laptop computer connected to a syringe driver filled with a lethal drug. In 2008, he created a suicide bag

which kills with nitrogen. In 2009, he invented a barbiturate testing machine so that people could ensure that their lethal drugs were still active. In 2012, he launched a beer-brewing company, Max Dog Brewing, for legally importing nitrogen canisters into Australia.



Photo: Ratel
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He has also published an online guide on how to kill yourself, *The Peaceful Pill eHandbook*, which updated regularly on methods involving barbiturates, over the counter drugs, gases, and poisons. (It is banned in Australia.) He travels around the world giving DIY workshops on how to top yourself. His message? Anywhere, anytime, anyone rational should be allowed to commit suicide.

"You must be able to control the time at which you die," he told Guardian Australia in 2015. "That should be an essential human right. In other words, you don't have to be sick to qualify for voluntary euthanasia. Everybody qualifies. I see too many people now who want to die for social reasons, not medical reasons. They may not be my reasons. They may not be yours. But they are certainly the individual's."

How many people has Philip Nitschke killed?

Technically, none. In 1996, when voluntary euthanasia was legal in Australia's Northern Territory, he assisted four people to die by suicide. Since then, he has confined himself giving advice and encouragement. After the Medical Board of Australia

jurisdiction in which he is active. In his latest triumph, the first Sarco death, he wasn't even present. The woman's final moments in a Swiss forest were filmed and he observed them from over the border in Germany in a live-streamed snuff video.

"We saw jerky, small twitches of the muscles in her arms, but she was probably already unconscious by then. It looked exactly how we expected it to look," he commented.

Nitschke never kills anyone – he encourages people to kill themselves. How many of these have there been? No one knows. Scores? Hundreds? Nobody seems too interested in counting them.

Swiss police arrested four people after the American woman's death, and may charge them with conspiracy to incite suicide. But my guess is that no one will be fined or jailed, least of all the man most responsible for inciting her.

What is he guilty of?

Legally, nothing. He's a cunning bastard. But morally, apart from these deaths, he is guilty of an offence for which we don't lock people up nowadays – blasphemy. But it's not the old-fashioned kind of blasphemy, which was insulting God. It's blasphemy against life itself. It's the worship of nihilism. In Nitschke's worldview, life has no special value. It's not worth fighting for; it's not worth treasuring; it's not worth defending.

No society which treats a man like Nitschke as an endearing eccentric – as the media has done – can survive.

If there is anyone on God's earth who deserves to be locked up, it is Philip Nitschke.

Editor's note. This appeared at MercatorNet and is reposted with permission.

restricted his ability to practice medicine in 2015, Nitschke upped sticks and moved to the Netherlands with his partner, Fiona Stewart. From there he runs Exit International, a network of rational suicide acolytes. He has also established a group in Switzerland – where assisted suicide is legal – called "The Last Resort" to promote Sarco.

"The day you die is one of the most important days of your life," Nitschke explained to a Dutch newspaper. "When it becomes inevitable, why don't we embrace it? With this machine you can die anywhere you want: with a view of the mountains or of the waves of the ocean. And apart from this device, you don't need much: no doctor putting a needle into your veins, no illegal drugs that are difficult to obtain. This demedicalizes death."

How many people has Nitschke killed is the wrong question. He is careful enough to abide by the letter of the law in every

ACOG, Abortion Advocates Overanxious to Dispute Fetal Development Video

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

The word “abortion” is never mentioned. There is no political advocacy, no pictures of mangled bodies, no discussion of elaborate claims about the unborn composing symphonies or leaping buildings in single bounds. Rather just clean, clear computer generated images of unborn children growing in the womb and displaying the physical characteristics and capacities recognized medical texts say they do at those particular stages of human development.

And yet the medical establishment and its pro-abortion allies have sounded the alarm and mounted a campaign against *Baby Olivia: A Never Before Seen Look At Human Life In The Womb*. This is the video prepared by the pro-life group LiveAction in August of 2021 that is now being considered for use by some state legislatures as part of their state’s public school family life educational curriculum.

For people who are at all familiar with fetology, or even expecting moms with popular baby development books, none of this is controversial or surprising. But to guardians of the abortion establishment, such information constitutes a real threat

The video in dispute

The offending video starts with fertilization, as sperm joins ovum and “Olivia’s” new life begins. The video notes that she implants in the uterus about a week later and her cells began to organize as an embryo. At 22 days after fertilization, the video shares that Olivia’s heartbeat can be detected.

Consistent with what many medical texts tell us, the video shows the appearance of arms and legs by 4 weeks and movement can be seen between 5 and 6 weeks. In the 6th week post-

fertilization, the video relates that brain activity can be recorded and that bones begin forming.

The short video continues, showing how the child will suck her thumb, swallow, touch her face, stretch, how she is playing in the womb at 11 weeks, how

‘Baby Olivia’ video is designed to manipulate the emotions of viewers rather than to share evidence-based, scientific information about embryonic and fetal development.”

Without specifying, ACOG said “Many of the claims made

ACOG, like the medical establishment has done for years, relies on a method of dating pregnancy and calculating due dates developed in the early 19th century by a Dutch doctor named Franz Naegle that calculates the due date based on a woman’s last



mom will sense her movement between 14 and 18 weeks. The video mentions how at 20 weeks, with a lot of help, some babies have survived outside the womb.

At 27 weeks, not only are her eyes responding to light, but the video tells how she can recognize her parents’ voices and even recognize songs and stories.

Abortion advocates of ACOG object

The American College of Obstetricians and Gynecologists (ACOG), a medical society that has become increasingly pro-abortion over the past few years (see here), was one of the groups labeling this video misleading and manipulative.

In a statement given to CNN, ACOG said “Like much anti-abortion misinformation, the

in this video are not aligned with scientific fact, but rather reflect the biased and ideologic perspectives of the extremists who created the video. ACOG is strongly opposed to the spread of misinformation about reproductive health” (CNN, 4/6/24).

ACOG didn’t detail its complaint to CNN, apparently satisfied with simply raising nebulous concerns and relying on the organization’s presumed expertise to dismiss it outright. But elsewhere the group argued that the video makes fetal development seem more advanced by using a different method for calculating gestational age than is standard (Chalkbeat, 3/28/24). But the more you study this complaint, the more it becomes apparent that it is ACOG and not LiveAction that is clouding the issue and misleading the public.

menstrual period, or LMP. Before doctors had access to ultrasound or fully understood the process of ovulation or fertilization, Naegle found that adding 40 weeks or 280 days to a woman’s LMP generally gave a good estimate of when the baby would be born. His method has generally been followed since, though ultrasounds and other testing help doctors pinpoint that date more accurately.

There is nothing wrong with using the forty week Naegle metric. But every good doctor knows that the ovulation and then the sexual act that brings man and woman together are not going to happen until several days after the LMP. The fertilization that is actually responsible for the

Pro-abortion Governor Tim Walz and his Democrat legislative leaders are taking Minnesota back to the peak numbers of abortions we saw in 1980

Blaeser Testifies in Congressional Briefing on Born-Alive Infant Protection Act.

By Cathy Blaeser

Good afternoon. My name is Cathy Blaeser, and I serve as Co-Executive Director of Minnesota Citizens Concerned for Life. Organized in 1968, we are the oldest and largest pro-life organization in Minnesota and one of the oldest and largest in the nation.

Our focus from the beginning has been solely on protecting innocent human life from conception to natural death, focused on abortion, infanticide, euthanasia, assisted suicide, and healthcare rationing. We're not a religious organization nor are we a partisan organization.

We have worked over our 56 years to pass common-sense laws that protect women and children from a profit-seeking, largely unregulated abortion industry. Over those years, we have lowered the number of annual abortions in Minnesota by almost 50%, from a high of just over 19,000 in 1980 to a consistent low of about 10,000 abortions annually between 2012 and 2021.

We did this through common-sense legislation like Parental Notification, Women's Right to Know, Safe Place for Newborns, protections for viable unborn children, Abortion Reporting Requirements, Positive Alternatives Grant funding, protections for Unborn Victims of Violence, and many other laws.

The 2022 elections gave Governor Tim Walz and the Minnesota democrats a very slim "trifecta." They had a four-vote majority in our House of Representatives, 1 vote in our Minnesota Senate, and Tim Walz

in the Governor's Mansion.

They took that slim trifecta and decimated Minnesota's common-sense abortion laws, giving us not only one of the most extreme abortion laws in the nation, but state-sanctioned infanticide for survivors of abortion and disabled newborn babies.

In Minnesota, through the passage of the PRO Act in January 2023, every individual now has a fundamental right to abortion throughout all nine months of pregnancy for any reason and for no reason. We now have abortion up to birth in our state law, with no protections for women or for babies at any gestational age.

The law doesn't say "a fundamental right to abortion up to so many weeks or through a given trimester or only in certain cases." It is open-ended with no protections for viable babies. It wiped out our viability protections passed decades ago. We truly now have abortion up to birth. There is no one saying that this is not true. They simply say no one would do that. Yes, they would. Yes, they do.

Minnesota has had almost 30 years of robust abortion reporting. Every abortion facility is required to report their data to the Minnesota Department of Health, which publishes an aggregate report on July 1 of each year.

In 2022, there were 12,175 abortions reported in Minnesota, a 20% increase for the first time in 10 years. Of those abortions, 294 were done between 20-32 weeks of gestation. Two hundred ninety-four viable babies. 60% of women in Minnesota abort

because they simply don't want children at this time. Less than 1% of abortions in Minnesota are due to rape, incest, or threat to the life or physical health of the mother.

likely have seen between 15,000 and 18,000 abortions in 2023 in Minnesota. That will be at least a 25% increase in the number of abortions over the 20% increase we saw in 2022.



Yes, they would abort perfectly healthy viable late-term babies. And they do.

And now there are absolutely no laws stopping them in Minnesota.

You might ask why we're talking about 2022 abortion statistics instead of 2023 abortion numbers.

That same slim democrat trifecta that passed and signed the PRO Act also changed our abortion reporting requirements. They will not report on 2023 abortion statistics until after the election. "Vote us back in and then ... maybe ... we'll tell you what happened because of the abortion laws we repealed, the abortion laws we changed, and the abortion law we passed."

We do know based on numbers being shared by abortion advocacy groups that we will

Minnesota, because of the extreme pro-abortion absolutism of Governor Tim Walz and his democrat legislative leaders, is headed back to the peak numbers of abortions we saw in 1980. Legal, but not rare.

In a June 2023 article on Minnesota's PRO Act in the Sahan Journal, Susan Robinson, a late-term abortionist who has practiced in Kansas and in New Mexico, discusses her previous hesitancy to practice late abortions in Minnesota and how that has now changed due to Minnesota's passage of the PRO Act. Prior to the PRO Act, she stated she "would not feel comfortable opening a third-trimester practice in Minnesota."

Liz Carr Speaks at Capitol Hill on the Dangers of Assisted Suicide Laws

This week, read our recap on the week our staff spent in Washington DC. Our team at PRAF meets together in person once a year, so we gathered in DC and spent time together celebrating the last year, planning ahead for year ahead, and attending various events around the city.

As you may know, we also hosted two screenings of Liz Carr's documentary, *Better Off Dead?*, alongside several partner organizations. One of these events was on Capitol Hill for legislators, and another for the disability community at the DC Public Library. We are grateful for the success of these events and the impact of Liz Carr's documentary on audiences all over the world.

The incredible and talented Liz Carr, famous actress and disability activist, joined us all the way from the UK to speak at Capitol Hill and screen her documentary, *Better Off Dead?*

This was an exclusive event for Members of Congress, their staff, government officials, journalists, and host partners.

We are incredibly grateful to Not Dead Yet and DREDF for co-sponsoring the event! Liz spoke boldly about the ways assisted suicide laws target people with disabilities. Additionally, Rep. Lou Correa (D-CA) and Rep. Brad Wenstrup (R-OH) spoke to the attendees sharing their bipartisan opposition to assisted suicide laws. Emily Voorde, Vice Chair of the National Council on Disability, introduced Liz Carr and shared figures from the National Council on Disability's report on the ways assisted suicide harms people with disabilities.

Again, we are grateful for the support of our partners and the participation of the speakers for this monumental event.



Medical Journal Pushes Conjoining Euthanasia and Organ Harvesting

By Wesley J. Smith

Back in 1993, my first anti-euthanasia piece, published in *Newsweek*, warned that if we legalized assisted suicide, organ harvesting would eventually be included as a “plum to society.” “Alarmist!” my hate mail screeched. “Slippery slope fallacy!” etc. Even those who agreed with my overall critique assured me it would never come to pass.

And yet it did. Conjoining organ harvesting with euthanasia is now deemed so respectable it is even boosted at the highest levels of the medical establishment.

JAMA Surgery just assured us that



kidneys harvested from patients killed in hospitals — as happens in the Netherlands, Belgium, and Canada — work better and sooner. And remember, many of these

killed donors were not terminally ill.

“Kidney Transplant Outcomes Following Donation After Euthanasia” concludes that organ donation after euthanasia “is a safe and valuable way to increase the kidney donor pool”.

In other words, harvesting the organs of people killed by doctors could be a “plum to society.”

What next? Organ harvesting as the means of euthanasia — which will produce even better organs? Is that hysteria? A slippery-slope fallacy? Perhaps, but it has already been proposed in a major bioethics journal.

Meanwhile, there are repeated calls to allow people to sell one of their kidneys and/or sell their organs after death. Well, if we ever allow that, why would it not also be okay to be paid to be killed and “donate”?

This much is clear: We are far down the road of objectifying the bodies of suicidal people to permit unethical acts.

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

Baby Survives Abortion, Dies Almost an Hour Later Under the Weight of Dirty Towels and Sheets

From Page 1

Hospital, the abortionist, a florist near the hospital, and the police department's homicide division.

I first called the abortionist's office and verified that he performed abortions and that he had privileges at Baptist Hospital. Then, I called the hospital and pretending to be a delivery driver from the nearby florist who needed to drop off flowers, the nurses' station where the mother was recovering verified that a patient by the name given to me by the whistleblower was still admitted there. I followed up with a call to the morgue, and after careful maneuvering, they too verified that they were "in possession of a pre-term baby."

It was evident that the call from the nurse was not a hoax. Thirty minutes after that initial exchange, I contacted the police. Mercifully, I spoke to a detective who was pro-life. He carefully listened to my account, requested more details, and assured me that he would immediately call the morgue to prevent the incineration of the baby without an autopsy.

Following this, I reached out to every pro-life pastor and leader in my network. We collectively decided to hold a press conference in front of Baptist Hospital on Sunday, September 17th. Nearly 2,000 outraged and mournful pro-lifers gathered, prompting the Hospital to finally agree to a meeting. During the meeting, the Hospital's Vice President neither confirmed nor denied the occurrence of a late term abortion but pledged that an investigation would be launched.

Months of discussions ensued involving Miami Right to Life, the police department, the state attorney, and Baptist Hospital ensued.

Finally, in early December, once the autopsy report was completed and all involved had

been interviewed, we received notice from the detectives that the state attorney reviewed the file and decided that no crime had been committed. His last words to me were, "I'm sorry, the case is closed."

But before he hung up, I asked if I could now review the file. He said that everything was in the coroner's report and that I just had to pay for the printing cost.

I called the morgue, asked for the file and was told that I could pick it up the next day. I wasn't prepared for the autopsy pictures, this beautiful little boy on a cold metal slab and the subsequent pictures of his being taken apart by scalpels and scissors and saws. I regrouped and began to read.

At first perusal I noticed how often the abortionist had called for an update. He was worried, and he should have been – the report was full of contradictions.

The first of many of these contradictions was about how far along the pregnancy was. The abortionist and hospital both claimed that it was a 2nd trimester abortion, but the Medical Examiner determined the baby was well into his 7th month in the third trimester. The ME determined that because of the child's size, he weighed more than 2 pounds and was 14 inches long.

Another huge inconsistency was regarding what precisely happened at the moment of birth. The nurse claims that, "I saw the baby's head emerge and within a second the whole body. The doctor immediately put it under linens at the foot of the bed." But the abortionist countered with, "She (the patient) pushed, and the fetus came out, and at that time I realized — well, she had told me that she did not want to see the fetus -so, what I did is that I covered the fetus with a sheet we have there. I put the sheets and

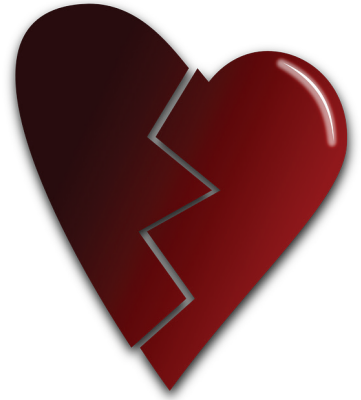
blanket or whatever it was on top of the fetus." But was the baby breathing and moving?

The abortionist says no to both of those questions, the nurse however said, "the baby was moving quite a bit." And she goes on to say that the baby's grandmother who was in the room during the abortion, also noted that she had seen the baby "wiggle." On the question of whether the baby was breathing, the abortionist adamantly says no, but the Medical Examiner's report states that, "X-rays found pockets of air in the stomach and the lungs were aerated, the fetus was breathing at birth."

Contrary to the abortionist's and the Hospital's claims that the baby was born dead, the nurse, the baby's grandmother and the Medical Examiner all claim that the baby was born alive, the Medical Examiner goes further to say that the baby struggled for breath outside the womb for nearly an hour. The abortionist repeatedly claimed the baby was stillborn, yet he told the police that 30 minutes after delivery he was waiting to see if there was "any more fetal activity."

The State Attorney stated that there was no reliable testimony that indicated the abortionist actively smothered the baby. OK, but certainly malpractice happened because no medical assistance was provided to the baby as required by Florida Law. There is a preponderance of evidence in this case that the child survived the abortion attempt and was born alive. In his statements to the police, and when questioned about babies who survive abortions the abortionist said that his usual procedure is to "not do anything and let the fetus expire, don't do anything immediately." His usual procedure? How many babies had he killed?

The abortionist may not have actively smothered the baby, but he willfully let the baby die under a pile of dirty towels and



sheets placed on the baby's face by him. But the State attorney found nothing wrong with his which begs the question, what kind of state attorney reads this report, looks at the preponderance of evidence that there was a clear disregard for Florida law and concludes that no crime was committed? A pro-abortion zealot who was later labeled the Butcher of Waco, that's who. The State Attorney for Miami-Dade County in 1989 was Janet Reno.

Despite recently renewed and boisterous attempts by pro-abortion advocates to dismiss the reality, late-term and after-birth abortions happen. They always have, and at an alarming rate. The Democrats' gaslighting of the American public on this issue is reprehensible and the willful underreporting of these blatant lies by the mainstream media is disgraceful.

We must and we will continue to shine as much light on these barbaric practices, and we will always think of that little boy, blonde-haired and blue-eyed who died under the weight of dirty towels and sheets. We, at Miami Right to Life named him Baby Special, and he is always in our hearts.

NRLC Holds Briefing on Aborted Babies Born Alive

From Page 1

better reporting methods and requirements than the US.

One study in Canada, based on information from Quebec hospitals, found that 11% of

abortion are also struggling, having to face a child that they try to kill.

Cathy Blaeser explained how the law has drastically changed

born alive, every person in that room is wanting and working to kill her. They may also have been planning to profit from that baby's organs and tissue. There

year who survived the abortion. An additional requirement was that a medical report be filed detailing the kind of care the baby received.

However, after Democrats took control of the legislature and Tim Walz was elected governor in 2022, things changed for the worse. The law requiring medical treatment for these babies born-alive in the attempted abortion was repealed, along with many other pro-life laws.

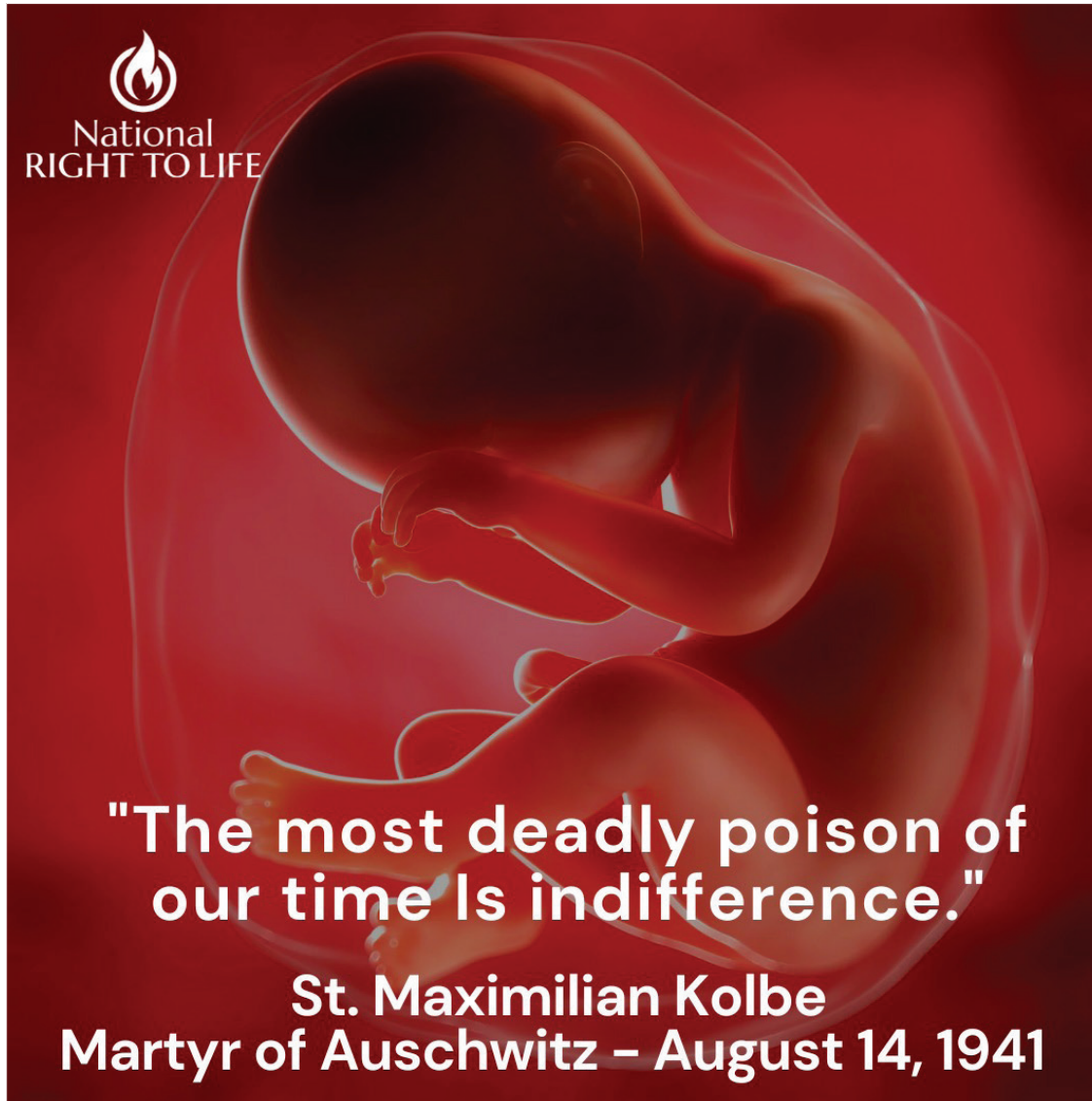
Apologists for Walz say he doesn't support infanticide and that it is illegal. Infanticide via active killing is indeed illegal, but Walz signed legislation repealing a guarantee of lifesaving treatment for born-alive infants. Intentionally leaving viable babies to die is allowed under Walz's policy.

In addition, the births no longer have to be reported to the state, so there will be no way of knowing how many babies lived through the abortion.

Sarah Zagorski shared the circumstances of her birth, following an induction abortion. She shared the story of how her mother challenged the abortionist, insisting that he take care of the baby. Against the abortionist's counsel, Sarah was taken to the local hospital and her life was saved.

She also encouraged us to consider the difficult circumstances in which women making these life and death decisions find themselves.

The response from those in attendance was very positive. We've already been asked when the next briefing will be. Stay tuned!



abortions performed on preborn children 15-29 weeks gestation resulted in a live birth.

She pointed out that there are more children who survive the abortion than we know about. Mothers who attempted the

in Minnesota. State law used to require that babies who survive an abortion be given medically appropriate life- and health-preserving treatment. She included a chilling reminder that, "...moments before that baby is

is no one advocating for that baby to live."

The state also required that these cases of live births be reported to the state health department. For the past several years, there were 3-5 babies each

Pro-abortion Governor Tim Walz and his Democrat legislative leaders are taking Minnesota back to the peak numbers of abortions we saw in 1980

From Page 28

Now, she feels “Minnesota would be a good location for a clinic.”

Robinson also says that in late-term pregnancies, often “nothing’s wrong” except that it’s an undesired pregnancy. Healthy mom, healthy baby.

Yes, they would. Yes, they do.

Governor Walz and the democrat abortion leadership also repealed and defunded any vestige of real choice for Minnesota women and families.

Minnesota has had a Positive Alternatives grant program in effect for about 15 years that provided a small stream of funding for organizations offering “positive alternatives” to abortion – just 3 million dollars annually, but it provided for car seat programs and parenting classes and continuing education programs and life coaching and fatherhood classes across the state in urban and rural communities.

The 2023 legislature under the leadership of Tim Walz not only defunded the program mid-year, stopping immediately all funding promised to grant recipients mid-stream, but they also repealed the program entirely so that another legislature will have to both re-pass the program itself and then fund it once again.

At the same time, they increased the funding of abortion procedures through medical assistance programs by 20% in 2023 and 20% again in 2024.

Lots of money for abortion. No money for alternatives. That’s not choice. That’s coercion.

Tim Walz and his democrat abortion leadership want one choice and one choice only for the women of Minnesota. Abortion and only abortion.

No longer are women receiving information from abortion providers on the resources available to them should they

choose to have their child.

No longer are they receiving information on adoption services.

No longer are they receiving information on the biological science of fetal development nor on the real health consequences

part of our annual abortion report.

Our Born-alive Infant Protection law, like the federal bill before you in Congress, required medically appropriate life- and health-preserving treatment for these born-alive infants.



Pro-abortion Minnesota Gov. Tim Walz

Photo: Gage Skidmore

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both short term and long term in regards to their reproductive health or their mental health. Informed consent – our Women’s Right to Know law – was also repealed by the 2023 legislature.

And women are walking into abortion facilities that are not licensed or inspected. Abortion facilities in Minnesota – which are basically outpatient surgical centers – are exempted from state licensing and inspection. Legal, but not safe.

Finally, I want to share with you the changes Governor Walz and the democrat abortion trifecta made to our Born-Alive Infant Protection Law, which protected babies born alive as a result of a failed abortion. Minnesota passed the Born Alive Infant Protection Act in 2015, and along with it a requirement to report the number of babies born alive and the treatment provided to them as

Because if a baby is born alive during an abortion, there are quite obviously two patients in the room. There is a mother and a baby. A newborn baby. And both the mother and the newborn baby deserve medically appropriate life- and health-preserving treatment

Our law did not require everything at all costs. It simply required that any baby born alive during an attempted abortion be given the same treatment any other baby born alive at that gestational age would receive. Exactly as the federal bill requires.

So if a baby is born alive at 15 weeks, the appropriate treatment is comfort care simply because we do not yet have the technology to save that baby. Yet.

But if a baby is born alive at 24 weeks or 26 weeks or 22 weeks or even 21 weeks, that requires a completely different level of

treatment. We can save those babies. Babies born prematurely at those ages are saved everyday by our incredible NICU teams and technology.

But the 2023 Minnesota legislature under the leadership of Governor Tim Walz devastated that law.

First of all, they changed “life- and health-preserving care” to just “care,” and in every committee hearing and in the floor debate, “care” was defined as “comfort care” – wrapping the baby in a blanket and setting her aside to die.

Perhaps not execution, but purposeful neglect to cause her death. Any newborn baby wrapped in a blanket and set aside will die. Every newborn baby, even the healthiest newborn baby, needs more than just comfort care to survive.

And remember, moments before that baby is born alive, every person in that room is wanting and working to kill her. They may also have been planning to profit from that baby’s organs and tissue. There is no one advocating for that baby to live.

The 2023 Minnesota legislature under the leadership of Tim Walz also deleted from our Abortion Reporting Requirements the requirement that abortionists report the number of babies born alive in the course of an abortion and the requirement to report what treatments were given to that born-alive baby.

We know that between 2015 and 2021, with the exception of 2020, there have been 3-5 babies born alive in the course of an abortion each year in Minnesota.

That information will no longer be reported. They don’t want anyone to know about those

Third-Trimester Abortionist Warren Hern and Abortion for “Health” Reasons

A reporter said most of Warren Hern’s late-term abortions are for health reasons. Here’s what that really means.

By Sarah Terzo

Recently, *Los Angeles Times* reporter Robin Abcarian interviewed abortionist Warren Hern.

A Creative Definition of “Health”

Abcarian says:

Almost all his procedures are in the late stages of pregnancy, usually because the fetus has a catastrophic medical condition, or the pregnancy endangers the woman’s health.

This is likely what Hern told her, and she seems to have accepted it uncritically.

But what Abcarian doesn’t say (and probably doesn’t know) is that Hern has a very different definition of “health” than the average person.

In another article about Hern in *The Atlantic* reporter Elaine Godfrey asked Hern if he would commit a late-term abortion on a healthy woman. The article says:

‘So, if a pregnant woman with no health issues comes to the clinic, say, at 30 weeks, what would you do?’ I asked Hern once.

The question irked him. ‘Every pregnancy is a health issue!’ he said. ‘There’s a certifiable risk of death from being pregnant, period.’

Since Hern believes every pregnancy threatens a pregnant person’s health, and therefore any abortion is done because of health, the claim that most of his

abortions are done for “health” is meaningless.

Abuse of the Health Exception

The “health” exception has been widely abused. This is why pro-lifers often say that abortion amendments that allow third-

language of the Amendment and think it protects most third-trimester babies. They will believe that abortions in the third trimester will only be done for pregnant people who are experiencing severe health problems. Some pro-choice people who support

using a pregnant person’s threat of suicide (regardless of how sincere it is) to legitimize third-trimester abortions when there is a “life of the mother” exception.

Pro-lifers then, must walk a fine line when crafting abortion bans. On the one hand, we need to make sure the “life of the mother” doesn’t become a loophole. On the other hand, we need to ensure that people whose lives are legitimately threatened by pregnancy can have their pregnancies ended.

After all, sometimes the baby cannot be saved, and both mother and baby will die without intervention. (Some examples are pre-eclampsia before viability and infections caused by premature rupture of the membranes.)

These pregnancies can be terminated by inducing labor or doing C-sections. One pro-life group argues that this isn’t an abortion because the baby isn’t directly killed, and the primary goal of the procedure isn’t the death of the baby, although the baby dies from prematurity.

For a procedure to qualify as an abortion, in their view, its intent must be to kill the child. If the procedure is meant to save the mother’s life, and the baby’s death is an unavoidable consequence, it is an early delivery, not an abortion. Motive, then, matters more than the outcome.

However, this definition is not widely accepted, and doctors need to know what they can legally do and what they can’t.

Also, it does not address what can be done when the woman’s life



trimester abortions only in cases when a woman’s “health” is endangered really allow abortion on demand until birth.

For example, Florida’s proposed Amendment 4, which will be on the ballot in November, states:

[N]o law shall prohibit, penalize, delay, or restrict abortion before viability or when necessary to protect the patient’s health, as determined by the patient’s healthcare provider.

The “patient’s healthcare provider” is the abortionist.

Yet voters will look at the

the Amendment may believe so as well.

Planned Parenthood and the abortion industry, of course, know exactly what the proposed Amendment means.

The Life of the Mother Exception

Hern took things a step further when he commented on a proposed law with a “life of the mother” exception.

He said, “I will certify that any pregnancy is a threat to a woman’s life and could cause grievous injury to her physical health.”¹

In a previous article, I wrote about how some abortionists are

Prime Minister intends to fast-track assisted suicide vote before Christmas, according to reports

By Right to Life UK

Despite a deeply divided Cabinet, a vote on making assisted suicide legal could be held before Christmas as the Prime Minister backs plans to fast-track the legislation, according to *The Mail* on Sunday.

While those at the end of their lives currently have the same legal protections as everyone else against assisted suicide, *The Mail* on Sunday has revealed that a “divisive vote” on legalising assisted suicide “could be held within weeks”. If a Bill on the issue became law, this would usher in one of the greatest social changes since the Abortion Act in 1967.

A source in the Labour Party told the paper “The wheels are turning. It has been made clear to the MPs at the top of the ballot that the PM backs a change in the law”.

While newly elected Labour MP Jake Richards has already made clear his intention to introduce a bill to make assisted suicide legal after he came eleventh in the Private Members’ Bill Ballot earlier this month, Keir Starmer is reportedly engaged in accelerating the process.

Since Richards is too low in the ballot to guarantee time for a debate, Labour MPs higher up are being encouraged to take the proposal forward. *The Mail* on Sunday reports that, last Friday night, one Labour MP on the ballot admitted to being offered two additional staff to assist him in drafting a bill if he proposed legalising assisted suicide.

Opposition to assisted suicide within the Labour Cabinet

However, the Prime Minister’s own Cabinet remains deeply divided on the issue. Justice

Secretary Shabana Mahmood has said “I don’t intend to support it”.

“I know some MPs who support this issue think, ‘For God’s sake, we’re not a nation of granny killers, what’s wrong with you’... [But] once you cross that line, you’ve crossed it forever. If it becomes the norm that at a certain age or with certain diseases, you are now a bit of a burden... that’s a really dangerous position”.

Health Secretary Wes Streeting has also expressed serious reservations about the idea, declaring himself “conflicted” on assisted suicide.

The Health Secretary discussed the importance of making sure “people aren’t coerced into exercising their right to die” because of a lack of support in end-of-life care.

“Candidly, when I think about this question of being a burden, I do not think that palliative care, end-of-life care in this country is in a condition yet where we are giving people the freedom to choose, without being coerced by the lack of support available”, he added.

A Government spokesperson said “Successive governments have taken the view that any change to the law in this sensitive area is a matter for Parliament. This Government will not stand in the way of any debate and votes”.A

The most recent substantial attempt to legalise assisted suicide in the House of Commons was in 2015 when former backbench Labour MP Rob Marris introduced the Assisted Dying (No. 2) Bill as a Private Members’ Bill. This attempt was soundly defeated at the Bill’s second reading by 330 votes to 118. Starmer was one of

the 118 MPs who voted in favour of assisted suicide at that time.

Since 2015, several other Private Members’ Bills have been introduced to Parliament with

partisan selection of people who took extreme positions on the issue of assisted suicide and euthanasia that are not widely supported by the public.



none of them progressing past Second Reading.

Lord Falconer, who has failed to change the law on assisted suicide on six previous occasions since 2009, has introduced another assisted suicide Bill, which awaits Second Reading in the House of Lords.

Biased Citizens’ Jury

These latest developments come at the same time as an extreme ‘Citizens’ Jury’ on assisted suicide found more participants supported the inclusion of child euthanasia than opposed it. It has been revealed that the Citizens’ Jury was funded by a major donor to the assisted suicide lobby and commissioned by a research body whose director used to head up a pro-assisted suicide pressure group.

The results of the Citizens’ Jury, organised by the Nuffield Council on Bioethics, allegedly showed “broad support for a change in the law in England” on assisted suicide. However, it has since been revealed that the ‘jurors’ appear to have been a highly

Spokesperson for Right To Life UK, Catherine Robinson, said

Making assisted suicide legal, including the clear threat it poses to people with disabilities and people who are otherwise vulnerable, is a very dangerous idea. As the Prime Minister’s own Cabinet realises, in the context of a struggling healthcare system, the notion that assisted suicide would be freely chosen rather than a result of coercion cannot be taken seriously.

“Evidence from Canada and Oregon clearly show that, for many people who end their lives by assisted suicide (or euthanasia in the case of Canada), concerns about being a burden are very real. We would be naive to think, in our highly atomised society, that such trends would not be operative in our own country too”.

33 days until the November 5 elections. What's new and what might that tell us?

From Page 2

the sharp change in his favorables overnight), he spoke with relentless focus about the primary issues persuadable voters — not partisan ones, meaning not you or me — care about (immigration and the economy), and by all snap measures won those conversations overwhelmingly. ...

But one thing that stood out in the run-up to the debate is how CBS News announced to the rest of the media in advance that its moderators, Norah O'Donnell and Margaret Brennan, would not "fact-check" or correct misstatements by one candidate or another in real-time, as they spoke. Per the Associated Press: "CBS said the onus will be on Vance and Walz to point out misstatements by the other, and that 'the moderators will facilitate those opportunities' during rebuttal time." ...

But of course, they still couldn't help themselves last night. They had to try to fact-check Vance. And predictably, they got it wrong and, in so doing, humiliated themselves. Perhaps the single most memorable individual moment of the entire debate last night was when the moderators silenced J. D. Vance's microphone mid-sentence, and the reason they did it is because Vance didn't miss a microsecond in calling out Margaret Brennan for both her hypocrisy in breaking her network's own rules, but for the fact that she did so with such partisan dishonesty. ...

Margaret Brennan was so unable to control her need to shape the conversation that she broke into one despite haughtily claiming in advance that CBS would be above the format. That she fell on her face so badly doing so — and let

Pennsylvania, Wisconsin, Georgia, North Carolina, Arizona and Nevada.

According to *Newsweek's* James Bickerton, a poll of 1,398 likely Pennsylvania voters finds Harris up by three points. However, "An average of a dozen recent Pennsylvania polls, which were

is 'underwater' in Michigan, according to a video clip obtained by Axios."

Why does that matter? According to Kight,

"Winning Michigan, Wisconsin and Pennsylvania is Harris' simplest path to victory. If



Vance make a fool out of her for it — should be a cautionary lesson to all.

Without a drop of venom, Vance mopped the floor up with Walz and the moderators. As many observers conceded, in one fell swoop his performance last night illustrated why Trump had selected him to be his running mate.

Meanwhile, the polls are steady. Harris is up roughly 2 percent points in the popular vote, and they also are even-steven in the electoral college, which is how the winner will be determined. Trump has a razor thin lead in the swing states—Michigan,

conducted between September 11 and 29, by election website RealClearPolitics, gave Trump a 0.2 percent lead with 48.1 percent of the vote to Harris' 47.9 percent. This was the first RealClearPolitics polling average to give Trump the lead since September 16."

For example, *The New York Times/Siena College* survey finds Harris up by only one percent.

As we talked about earlier this week Michigan Democrats are plenty worried. Axios's Stef W. Kight reports "Rep. Elissa Slotkin (D-Mich.) warned donors last week that internal polling for her Senate campaign shows Vice President Kamala Harris

former President Trump sweeps the Sun Belt, he'd only need to pick off one of those Blue Wall states to win the election.

"Fifty Eight's average of polls has Harris up by about 2.4 points in Michigan. The latest New York Times/Siena College poll has her up by just one."

Please keep reading our Monday through Friday updates. If you are not a subscriber, please sign up at <https://nrlc.org/maillinglist>. And, of course, it's free!

Federal Judge Sinatra Blocks NY Attorney General Letitia James from Censoring Pregnancy Help Ministries while their lawsuit goes forward

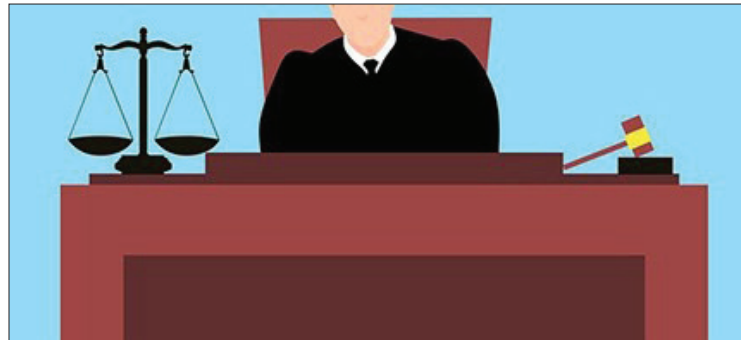
By Dave Andrusko

Chalk one up for freedom of speech. And a defeat for a bully. A week ago this past Monday U.S. District Court Judge John L. Sinatra, Jr. issued a preliminary injunction blocking New York Attorney General Letitia James from silencing the constitutionally protected speech of Summit Life Outreach Center and the Evergreen Association while their lawsuit moves forward.

James has long been a thorn in the side of pro-life organizations using her powers as attorney general to harass them unmercifully.

The lawsuit brought by the Thomas More Society argued “that James’ targeting of pregnancy help organizations with threats and prosecution unconstitutionally chills their speech about the safety and efficacy of Abortion Pill Reversal,” according to *National Review Online’s* Brittany

Bernstein. “James filed lawsuits against eleven pregnancy resource centers in May, accusing the centers of giving ‘false and misleading statements to



advertise an unproven treatment they call ‘abortion pill reversal [APR].’”

The preliminary injunction order “mirrors one issued by the district court in a related case, *National Institute of Family and Life Advocates v. James*,” according to the Thomas More

Society. “The court order protects Summit and Evergreen in their sharing of information about Abortion Pill Reversal—a protocol that can reverse the

Pill Reversal.”

Peter Breen, Thomas More Society Executive Vice President & Head of Litigation, said, “This injunction marks a critical victory for New York’s pregnancy help organizations and another blow to Letitia James’ unconstitutional witch-hunt against pro-life ministries.” Breen added, “This court order makes clear Ms. James cannot censor pro-life speech purely because she dislikes it. We are hopeful that this injunction will buttress our case in New York state court, where we proudly continue to defend the host of pregnancy help organizations unjustly targeted and sued by Ms. James as part of her unconstitutional campaign to silence pro-life ministries. These pro-life ministries have a constitutional right to share information about Abortion Pill Reversal, and their message is saving thousands of lives.”

Pro-abortion Governor Tim Walz and his Democrat legislative leaders are taking Minnesota back to the peak numbers of abortions we saw in 1980

From Page 32

babies. No one in the abortion facility is advocating for that baby's newborn life.

And now this lowered standard of care applies to every newborn in Minnesota, not just those born during an abortion.

They removed the reference to babies born alive as the result of an abortion and simply replaced it with "any infant who is born alive," with no reference to abortion anywhere in the law.

Every baby born alive in Minnesota is now only guaranteed comfort care, not medically appropriate life- and health-preserving care.

Of course, this is not a threat to healthy newborns in Minnesota. Certainly, babies that survive abortions don't stand a chance. They will be left to die with no

one to advocate for them or report on them.

But we know that parents of unborn children with prenatal disability diagnoses are already under tremendous pressure to abort, and if they do decide to carry the baby to term, they are under pressure to not treat aggressively. This pressure will only increase because there is no longer a legal standard to treat these babies with more than comfort care.

There are many, many families in Minnesota and across our nation who are fighting everyday for simple healthcare interventions for their disabled children. Commonly, parents of trisomy-13 and trisomy-18 babies are pressured not to use proven surgical treatments for

their child's common VSD heart defect, despite the fact that these treatments work with a survival rate of 94% and commonly extend their child's life.

Children seen by the medical establishment as not worth our medical resources are routinely denied common life-preserving treatments by doctors and by insurers.

Again, this callous disregard for our most vulnerable newborn babies will only increase in Minnesota now that there is no longer a legal standard to treat these babies beyond what they consider to be "comfort care." Comfort to whom? Not the child. Not the parents. For them, it is an unjust death sentence.

Minnesota, under the leadership of Governor Tim Walz, has gone

from cutting our abortion figures by almost 50% to increasing them by 20% in 2022 and most likely another 25-30% over that in 2023. We have gone from laws that protect women, families, newborns, and unborn children to zero protection for these vulnerable populations and every protection for the abortion industry.

Women, families, unborn children, and vulnerable newborns need protections. Minnesota pleads with you to pass the federal Born-Alive Infant Protection Act. Our governor Tim Walz and the democrat-controlled legislature he leads have completely abandoned them. Please do not follow their lead. Pass this crucial common-sense legislation now.

Thank you.

Third-Trimester Abortionist Warren Hern and Abortion for "Health" Reasons

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is in danger in the first trimester of pregnancy, when the only options are a surgical aspiration abortion or the abortion pill.

Warren Hern Will Do a Late-Term Abortion For Any Reason

Warren Hern's website openly advertises third-trimester abortions and puts them in a separate category from those done for fetal anomaly or disability.

Nothing in his advertising suggests that he will turn away anyone seeking an abortion in the third trimester.

And then he admits to doing abortions for sex-selection in the article in the Atlantic:

Hern had told me about a woman who'd sought an abortion because she didn't want to have a baby girl. I thought he had refused.

But, when I followed up to ask him why, I learned that I had misunderstood. Hern said he had done abortions for sex selection twice: once

for this woman; and once for someone who'd desperately wanted a girl. It was their choice to make, he explained.

Attacking the Motives of Pro-Lifers

Abcarian quotes Hern describing his views as well as attacking those who disagree with him:

The treatment of choice for pregnancy is abortion unless the woman wants to carry the pregnancy to term and have a baby.

That is a view that is abhorrent to those who believe that the purpose of women, aside from giving men pleasure and doing the housework, is to have as many babies as possible.

I've been involved in the pro-life movement for well over thirty years, and I have never met a pro-life person who believes that the only purpose women have is having many babies, pleasing men, and doing housework.

In fact, most pro-lifers I know are women themselves. They certainly don't feel that way about their lives or their purpose.

A Horrified Abortionist-in-Training

Later in the article, Hern gives another possible reason why people might oppose late-term abortion when he admits:

Our whole entire evolutionary experience is to take care of small helpless creatures, including human babies. That's the core biocultural problem with this.

He then describes a time when he was training another doctor to be an abortionist. The abortion was being done at 34 weeks. The abortionist in training was so horrified by what she witnessed, that she had to leave the room.

Hern says, "This was rather disconcerting to her, and I told her there

was nothing wrong with feeling that way."

He seems to be able to understand that some other doctors find his work horrifying, but he assumes all pro-lifers are motivated by misogyny.

Incidentally, Abcarian doesn't say why the 34-week abortion was done, or whether the woman or child was unhealthy. Perhaps she didn't care enough to ask.

Regardless, though, it's clear that Hern is willing to do a third-trimester abortion for any reason, despite what Abcarian claims. Her article is just one more example of a seemingly endless stream of misinformation about late-term abortions.

Footnotes

1. Frank J. Murray "Daschle Bill May Not Ban Anything; Abortionists Could Use Own Judgment" Washington Times May 15, 1997

Editor's note. This appeared on Sarah's substack and reposted with permission.

Reporters Concede Sloth on Covering Biden's Age: We Need to Do 'Soul-Searching'

By Tim Graham

Fox News media reporter Joseph Wulfsohn found a confessional tone among liberal national reporters at the *Texas Tribune* Festival in Austin as they assessed how they under-covered President Biden's age and cognitive decline.

The September 7 panel included Peter Baker of *The New York Times*, Laura Barron-Lopez of *PBS*, Jonathan Lemire of *Politico* and *MSNBC*, and David Smith of *The Guardian* (U.K.).

Baker called Biden's age a "hard issue" to cover, but suggested journalists broadly need to do some "soul-searching" on how they handled it after the election. He claimed the *Times* had presented this issue, but when they did, "The editors, our writers got massive complaints from the White House about it. The campaign took after the reporters who did focus on this. And yet it was our responsibility to do so."

Team Biden's "massive complaints" surely worked for quite a while, even after special counsel Robert Hur said he wouldn't indict Biden for possessing classified documents because a jury would find him to be "an elderly man with a poor memory."

Baker added: "I can sit down and make the case that we did

too little about it. I can make the case we did too much. I can play it either way. But the truth is, it's an important issue. And President Biden himself said it was a



legitimate issue. And when he was asked about this, his answer was, 'Well, watch me.' Well, people did ultimately. And that, of course, came back to haunt him in a severe way in June," at the disastrous *CNN* debate.

Smith conceded the possibility of bias: "There was perhaps, even on an unconscious level, the notion that if you focus so much on Joe Biden's age, you are somehow helping Donald Trump."

"We weren't relentlessly covering, the way some of my peers were, Biden's age necessarily, even all the way

up until the debate," Barrón-López said. "It is and was a valid question. Many times when I was on the trail, even before the debate, voters would bring it

up. Almost every single voter I spoke to would bring it up, even if they were planning to vote for President Biden. Compared to now, I definitely think that Donald Trump's age could be covered more by the press."

Smith asserted, "the further you were away from Washington... the clearer you can see the problem," telling the panel how his fellow British colleagues at *The Guardian* were saying "What on earth are the Democrats playing at here? The nominee is too old! Why is he the nominee?"

"And then the closer you got to Washington, the White House

in particular, the more caveats, the more ambiguous it became," Smith said. "You had all sorts of people – Democratic insiders and White House officials playing this down... It took a while for Washington to catch up and in a sense, the media as well."

Lemire called the issue of Biden's age a "persistent story line" and suggested Biden brought it upon himself after he previously suggested during the 2020 campaign that he would be a transitional one-term president," saying it "couldn't be avoided."

"I think that even though that led to the, shall we say, unhappiness of some of the *MSNBC*'s viewing public who felt like, 'Hey, why are you focusing on this? It shouldn't matter. He's doing a great job.' And I think our job is to simply call it like we see it," Lemire said.

Wulfsohn didn't mention that Lemire was sitting there at the table when his morning bro Joe Scarborough responded to the age questions in March with a profane tirade: "I'm about to tell you the truth. And F-you if you can't handle the truth. This version of Biden intellectually, analytically, is the best Biden ever."

Editor's note. This appeared at Newsbusters and is reposted with permission.

Georgia attorney general appeals a judge's rollback of the state's Heartbeat Law to state Supreme Court

From Page 2

viability, when society can assume care and responsibility for that separate life, then – and only then – may society intervene.”

Background

The law was first passed in 2019 but went into effect in June 2022 when the Supreme Court overturned *Roe v. Wade*. In November 2022, Judge McBurney's decision barred state officials from enforcing the “Living Infants Fairness and

Equality Act” [LIFE Act]. A year ago the Georgia Supreme Court overturned *McBurney* 6-1.

Edward Whelan, writing at *National Review Online* picks up the narrative from there.

In a follow-on ruling today (in *Sistersong Women of Color Reproductive Justice Collective v. Georgia*), McBurney continues his wild rampage. In an opinion replete with

screeching rhetoric (yes, even *The Handmaid's Tale* makes an appearance), McBurney holds that the Georgia heartbeat law violates the rights to privacy and to equal protection under the state. ...

There's so much more wild stuff in McBurney's opinion: The law's exception for medical emergencies, he holds,

violates equal protection by not applying to diagnoses of mental or emotional conditions. Laws against abortion have “an uncomfortable and usually unspoken subtext of involuntary servitude.” Georgia's heartbeat law, he suggests, could also be a “sweeping bill of attainder.”



**"You may
choose to look
away, but
you can never
say again that
you did not
know."**

William Wilberforce

August 24, 1759 - July 29, 1833



The heartwarming story of a newborn left at firehouse with a handwritten “I love you” note who is adopted by couple who had fostered 17 children and adopted two

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

It’s the type of story that could serve as the inspiration for a script for a movie.

A mother surrenders her newborn child at a fire station in Louisville, including a handwritten note with the poignant message, “I love you.”

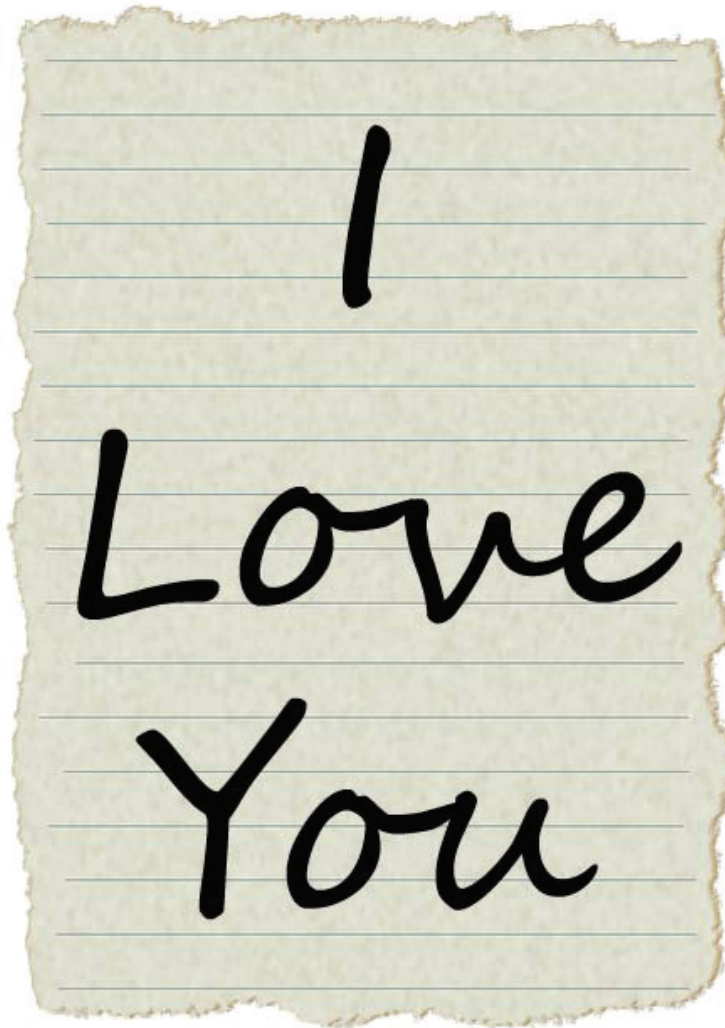
A couple who had fostered 17 children and adopted two wait in anxious anticipation for the phone call that would set the stage for them to welcome this child into their home.

A little more than three pounds when he was discovered, the baby boy lived in the NICU for a number of weeks before the couple were able to take him in.

In the *Washington Post* report on the case, Chris and Brittany Tyler express their profound gratitude for Baby Samuel. “I can’t even really put words behind how exciting it was,” Chris is quoted as saying.

Samuel will be two years old in May and enjoys a loving relationship with his two elder brothers, eight-year-old Judah and five-year-old Calvin.

“When we first brought him home, they were so excited,” Brittany is quoted as saying. “It’s



really special to bring a new baby home. They were like, ‘Can we keep this one?’”

In Kentucky, when a newborn is surrendered in a fire station, police station, hospital, or place of worship, the procedure for ending parental rights starts following a period of 30 days. After that time had elapsed, the Tylers knew that the baby boy would have a forever home with them. Meanwhile, Baby Samuel will soon have a sister—a medically fragile child whom the Tylers are also adopting.

“If we can help even one person, then we’re going to continue to share our story,” Brittany told WDRB, a Louisville station.

The story shows that, in the midst of difficulty and pain, beautiful things can happen. One mother’s decision had a ripple effect, which has led to the formation of a new family—one born not of blood, but of the heart. The Tylers will be forever grateful for that mother who gave life to their adopted son and surrendered that boy in a safe environment where he could get the care he needed. It’s the ultimate happy ending.

The power of abortion survivors and their mothers to educate the public is profound

By Melissa Ohden

Editor's note. For most of us, Melissa Ohden is the face of a "failed abortion." You may be aware of the CliffsNotes version of Melissa's utterly breathtaking story, one that amazes me to this day. In 1977 she survived a saline infusion abortion, a technique that was so dangerous (to the mother) that it is virtually no longer used anywhere. She was adopted by a loving family who raised her as their own.

Sylvester Stallone's most famous roles may arguably be as "Rocky" or "Rambo," but in a recent Unwaxed podcast interview Sistine and he admitted to what I would argue is the defining role of his life—abortion survivor.

As Nancy Flanders of Live Action reported in her article on August 28th, Stallone's daughters, Sophia and Sistine, were questioning him about his relationship with his mother, Jackie Stallone.

"You had said that your mom was nervous to have you," said Sistine. "She didn't want you, right?"

"Not at all," replied Stallone. "My mother would say, 'The only reason you're here is because the hanger didn't work' or 'bouncing down those steps didn't cause you to get lost.'"

I concur with Nancy's statement: "Based on these remarks, it sounds as if Stallone's mother had tried to kill him in at least one, perhaps multiple, DIY [Do-It-Yourself] abortions."

Honestly, I shouldn't be surprised by the "unsuccessful" abortion experiences admitted by famous figures like Stallone. He's not alone in his experience, joining well-known figures like Cristiano Ronaldo and Pastor Jack Hibbs. But even more importantly, as a fellow abortion survivor and

leader of The Abortion Survivors Network, stories like Stallone's, Ronaldo's, and Hibbs' are being lived out by everyday people like you and me.

Earlier this week, I met two women at an event who survived

our culture by abortion survivors is significant.

The secretive, isolative experience of surviving any attempt to abort you, coupled with the cultural misunderstandings about us, lead survivors to believe

more often than not, especially in the U.S., survivors are raised in their biological families.

With the cultural focus on the political fight over abortion, those who survive at-home attempts have often felt like they had no one who would listen to or care about their story.

The story of Michelle Lyman, included in my book, *Abortion Survivors Break Their Silence*, highlights the thoughts, feelings, and experiences of those who survived illegal or at-home attempts before *Roe* legalized abortion.

Where there are abortions, there is "unsuccessful" abortion—the baby survives. Abortion supporters turn their survival into an argument that these extremely late abortions are "always going to happen," so abortion must be legal.

What a strange position to hold. It means ignoring that women are coerced and forced into abortions. Babies are the intended victims but survive more often than most understand. Whole families are affected, especially mothers who parent their surviving child, like Sylvester Stallone's mother, Jackie, did.

After an abortion attempt, more needs to be done to support women like Sylvester's mom so that family functioning can have better outcomes.

We see high incidences of abuse and neglect in homes like his. Again, that doesn't mean he or any survivor is "better off dead." It means we need to reach moms like Jackie and families like Stallone's so that support can be provided.

The suffering of his mother in her childhood was significant, as Stallone shared, which he



Melissa Ohden

at-home attempts to abort them; one before *Roe v. Wade* and one after. At another event, an attendee shared her experience meeting a pre-*Roe* survivor in her community. These survivor encounters don't even count the survivors who have contacted our team online.

Whether it's at the bank, the hair salon, the grocery store, everywhere I go and dare to mention who I am or what I do, or our organization's name is shared, it seems as if someone knows someone who survived an attempt to abort them. More often than not, it's an at-home or "DIY" attempt.

I do not doubt that when at-home attempt survivors see and hear Stallone's story, they see themselves in it. We often hear it said that representation matters. I can tell you that representation in

they must be the only ones this has happened to. The recent passing of Phil Donahue reminded me of the power of the stories and voices of abortion survivors and mothers in not only educating the public but also in reaching those with these experiences.

I can remember where I stood in my parents' living room all those years ago when Phil interviewed Ana Rosa Rodriguez's mother. Ana was 32 weeks gestation when her mother, Rosa, went to the New York City abortion chamber of Abu Hayat, the notorious "Butcher of Avenue A" in 1991. Ana survived but lost an arm in the process.

What may have been just another show to Phil, seeing another person like me was one of the turning points in my life.

Abortion survival experiences are diverse, and we have found that

Delaware Governor Vetoes Assisted Suicide Legalization

By Wesley J. Smith

Suprise! Governor John Carney has vetoed legislation that barely passed in Delaware that would have legalized assisted suicide. From the Governor's veto message:

During my time as Governor, and since this legislation was first introduced, I have consistently opposed a state law that would allow physician-assisted suicide. I have always recognized, and do today, that this is a deeply personal issue. Supporters and opponents alike have thoughtful views on the subject, in many cases informed by their own painful, personal experiences.

Over the past several years, I have listened to legislators, advocates, and constituents who have reached out to me and my team to share their views. I also followed the action of the Delaware General Assembly, where this legislation passed by just one vote in the House and the Senate. I appreciate the thoughtful consideration of the legislation, and I recognize that the bill's sponsors made compromises in an attempt to limit abuse and protect vulnerable patients.

I still don't believe a firm consensus has been reached on what is a very difficult issue- in Delaware or nationally.



Delaware Governor John Carney

Last year, the American Medical Association reaffirmed its view that physician-assisted suicide is “fundamentally incompatible with the physician’s role as healer.” And although I understand not everyone shares my views, I am fundamentally and morally opposed to state law enabling someone, even under tragic and painful circumstances, to take their own life.

A few thoughts:

1. That's two governor vetoes in a row against legalizing assisted suicide. This is the first

Democratic governor to issue such a veto. The other was by the Republican governor of Nevada, Joe Lombardo.

2. You wouldn't know it from the biased pro-assisted suicide reporting in the media, but opposing assisted suicide is bipartisan. A plurality of elected Democrats oppose legalization — demonstrated by very blue states such as New York, Connecticut, and Massachusetts, where repeated energetic attempts to legalize have been met with failure. (Support is also bipartisan, although to a far lesser degree.)

3. Opposition to assisted suicide is also culturally and religiously diverse. Opponents include pro-lifers and the pope, to be sure. But also witness the zealous opposition by the disability-rights community, whose members are generally secular in outlook, not pro-life on abortion, and in accord with many LGBT agendas. Notable atheists have opposed legalization also, including the late,

great civil libertarian Nat Hentoff, who saw legalization as a denial of human equality.

4. Doctors' resistance to legalization of assisted suicide still matters. The AMA's continued opposition is especially important in this regard. Medical associations should thus resist the constant pressure brought by assisted suicide to engage in a policy of “studied neutrality” (whatever that means).
5. For the moment, the assisted-suicide movement is stalled in the U.S. It will be back, for sure. But the longer the euthanasia movement continues to be held at bay, the more likely that America can avoid becoming a culture of death like that in Canada.

So, Bravo Governor Carney! You have done the vulnerable in your state — and those threatened by what bioethicist Charles Camosy calls “throwaway culture” generally — a great service.

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

Are Abortion Pills Going to Be on the Ballot?

From Page 9

for teen victims of rape or incest, etc., the state could not proscribe mifepristone or any particular method.

Similarly, in North Carolina, general state laws on abortion could be enforced, such as requiring an in-person visit to the clinic or the physician for informed consent. But regulations specific to mifepristone, put in place by the state for patient safety, were disallowed as overstepping the federal government's unique authority to determine the conditions under which approved drugs could be safely used and distributed.

Presumably, at this point, those rulings only apply to the federal jurisdictions where they were handed down. But if they ascend to the higher court, those rulings could have national implications, particularly for pro-life states which have either adopted similar state safety regulations or abortion pill specific regulations.

Other Chemical Abortion Laws Affected

Of course, concerns about these laws are in addition to whatever general protections that exist for the unborn in states where all abortions limits are being subjected to pro-abortion state referenda. Laws prohibiting or restricting distribution of abortion pills as part of a broader legislative system could be affected too.

There are also preemptive laws that have been put in place in several abortion-friendly states to protect distributors of the pills. The goal there was to protect online mifepristone sellers who ship abortion pills from states where these are legal to states where they are not. These so called "shield laws" say that those online pill merchants cannot be held liable or extradited for violating the laws of another state so long as the seller's home state has no such prohibitions.

This is legally suspect, as states are generally bound by the "full faith and credit" clause of the Constitution requiring that states honor and respect the laws of other states. But until tested in court, we may not know whether these shield laws will be recognized.

Some states, on the other hand, have laws mandating the sharing of information on abortion pill reversal (APR) or rescue for patients taking mifepristone who might change their minds. Depending on the language of the law or referendum, or a possible turnover in state political leadership, these could be at risk. It is already the case in some states that the sharing of such information is dismissed or discouraged as unsafe "junk science," despite over 5,000 successful and safe reversals nationwide.

Each and every one of these things stands to be affected by the upcoming election in some way.

The Election Will Have Consequences for Chemical Abortions

Even if an incoming Trump administration does not intend to actively pursue overturning or reexamination of the original mifepristone approval, appeals of the original approval and subsequent protocol changes made by Democrat administrations may yet be brought back to the court by states suing on behalf of citizens whose lives and health have been affected by the drugs.

Three states -- Kansas, Missouri, and Idaho -- have already filed suit to pursue the unresolved issues in the *FDA v. AHM* case.

Just having new personnel in key offices could prove significant. The appointment of a new Health and Human Services (HHS) secretary and a new FDA head no longer beholden to the abortion industry could itself lead to a fresh

look at earlier FDA decisions and perhaps an openness to more objective studies showing much higher complication and failure rates and higher numbers of lost patients than those being offered

If results go the other way, pro-life state attorneys general, citing the Comstock Act, may continue to try and keep those national pharmacy chains and online abortion pill merchants from



by the abortion lobby.

If science and safety resume their proper priority at the FDA, some reevaluation and re-regulation of mifepristone may be possible, if not expected.

Online Mifepristone and Retail Pharmacy Sales

If election results favor abortion advocates, some pro-abortion states will try to use recent FDA changes to pressure national retail chains and pharmacy corporations to offer abortion pills at as many locations in the state as possible. Emboldened by those same election results, more abortion friendly states will not only promote and fund abortion travel but will pursue those "shield laws" talked about earlier, welcoming and protecting online abortion pill entrepreneurs in their states.

shipping and selling mifepristone in their states, whether or not whoever is president decides to make it a federal issue.

Courts may have to decide whether mifepristone manufacturers and distributors have to comply with the plain and direct text of the law.

State versus Federal Determinations of Mifepristone Availability, Safety and Efficacy

Courts are eventually going to have to address whether (and how much or in what way) states can limit the sale, distribution, or use of mifepristone in their states under the authority granted under *Dobbs* to regulate abortion within their borders.

Are Abortion Pills Going to Be on the Ballot?

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Part and parcel of that is that the courts will have to decide whether or not the FDA's official designation of mifepristone's safety and efficacy amounts to a requirement that it generally be

protections flowing from that, but also how or whether these cases currently moving through the courts are going to be brought and argued and decided in the coming months and years.

deciding these cases?

Who are the Senators who will be voting on judicial appointments that will fill vacancies in federal courts hearing these cases? Who will be casting a vote on the

Which Congressional representatives will vote on whether to continue enforcing the Hyde Amendment or funding organizations like Planned Parenthood who are sending abortion pills through the mail and helping arrange for women to travel out of state for both chemical and surgical abortions?

Elections at the state level matter too.

State legislators will be deciding what protections exist for unborn children. Some of these will specifically deal with the legality and availability of chemical abortion in the state. Governors and state attorneys, along with local officials, will be deciding how seriously to enforce or defend those laws in the state and in the courts.

State officers can decide whether to make it easier or harder for women to obtain information on Abortion Pill Reversal. They can either require that information be shared, or like, in Massachusetts, mount an expensive public campaign disparaging the work of pregnancy care centers providing this life-affirming service.

There may or may not be a chemical abortion measure on your ballot this fall, but, in either case, your vote will still play a critical role in determining whether mifepristone continues to take the lives of unborn children in your state.



available, even in states where abortion is legally prohibited, or whether it only affects state laws or regulations directly or explicitly based on state concerns about abortion pill safety or efficacy.

Obviously, this makes federal court and agency appointments critical, not just to hold in place the *Dobbs* decision and all the

Who you vote for matters

More than just the president's personal or political position on abortion or mifepristone is at stake.

What will be the government's position when these cases come before the courts? Who will be arguing the FDA's position? Who will be appointing the judges and attorneys who will be bringing or

next Supreme Court nominee, a justice who could either solidify or undercut years of hard-fought progress and deal with ongoing repercussions of those decisions in years to come?

Will there be enough pro-abortion Democrats in Congress to term-limit pro-life justices off the court and replace them in a few years?

May I share an Incredible Pro-Life Story with you?

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

The clergyman had been telling me for weeks that he had an incredible pro-life story to share in an upcoming sermon.

He did not disappoint.

The story began some time ago, with a husband and wife who had a dream of building a strong family. While they struggled, they managed to care for a good-size family which was the culmination of their dream.

Then, at the age of 15, their daughter became pregnant.

This caused quite a bit of consternation for the man, the woman, the teenage girl, and other family members.

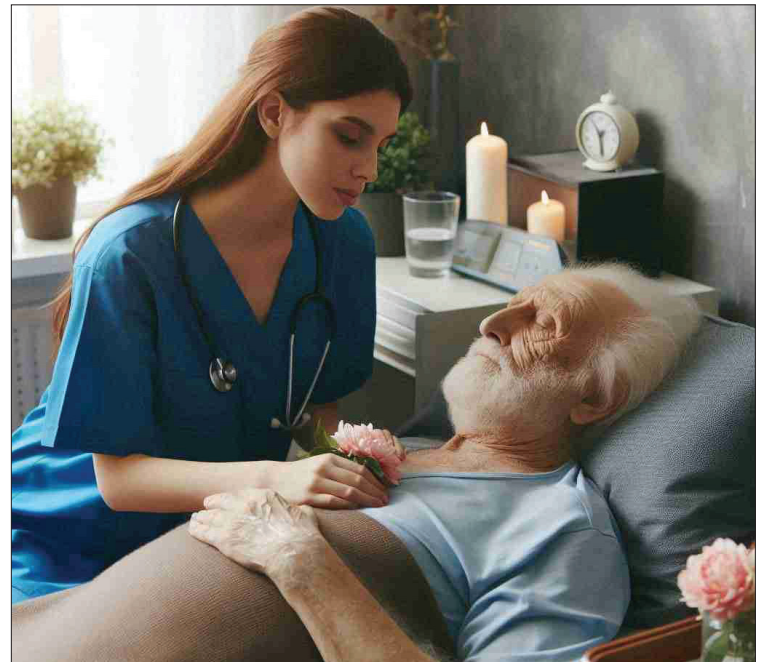
But once he got over the initial shock, the man counseled his

daughter to give birth to the unexpected child.

Years later, the man was on his deathbed. Who was it that provided round-the-clock care for him in the waning days of his life? It was the surprise granddaughter who pledged to provide him comfort and care.

When an unexpected pregnancy occurs, a range of emotions can grip a family. But if they can just hold on and weather the storm, they can learn an essential truth: that every human life is precious and should be protected.

The baby saved today could save someone else decades later. In providing support to a pregnant woman and her baby, the life you save may be your own.



The power of abortion survivors and their mothers to educate the public is profound

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compassionately connected to her difficulties throughout her lifetime, including emotional and relational. As we address the generational impact of abortion on abortion survivors and their families, these vulnerabilities in life are often shared.

I've heard so many similar stories to Stallone's family's—vulnerable women who have undergone a traumatic childhood that leads to unconscious decisions such as looking to be loved, which then can lead to more traumatic experiences like abortion.

Add in the shock of an abortion attempt not “working.” There is the stress of trying to figure out if

the baby will be okay. Add to this the guilt and shame over the years as you raise him or her which can lead to issues with attachment and bonding, and even abuse and neglect in families such as was the case with Stallone.

There's a lot more that can be unpacked from this bombshell interview between Stallone and his daughters. For now, I want us to acknowledge that he's not alone in this experience. If you are an at-home attempt survivor or a mother who experienced attempts “failing,” The Abortion Survivors Network has the resources and an online community where you can safely connect with others you can

relate to, reducing the pain of secrecy and shame.

Finally, with DIY abortions increasing being marketed, more mothers like Stallone's and babies like him will continue living out these stories. Ensuring that women are reached with information about resources available to them when they are experiencing crisis or fear during pregnancy is paramount to reducing attempted DIY abortions.

Additionally, training professionals, including medical professionals and social workers, can help to identify the emotional, relational, and familial signs that a failed at-home abortion attempt has impacted a mother and child.

With greater awareness, we hope that they can make referrals to helping professionals and to organizations like The Abortion Survivors Network.

Story-based educational campaigns centered on these various experiences, told through the voices of mothers like Jackie Stallone and survivors like Sylvester, are another important component to reach these families, heal generations like his own daughters, and reach the public with stories that highlight the human impact of abortion.

I'll share more about story-based advocacy and our new initiatives at The Abortion Survivors Network in an upcoming article.

ACOG, Abortion Advocates Overanxious to Dispute Fetal Development Video

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beginning of a new human life, and thus the pregnancy proper, does not occur until a couple of weeks into the count.

Though some doctors correlate the Naegle pregnancy scale to the developmental stages of the fetus, all know that to calculate the actual age of the child one subtracts two weeks from Naegle's LMP based scale to identify when fertilization—the actual beginning of that new life—occurs.

Thus a pregnancy measured at ten weeks on the Naegle scale, sometimes referred to as “gestational age,” actually involves a child about eight weeks old. If there is any confusion about this, it is because the medical establishment continues to use a pre-modern measurement and is unclear with patients about the way this is calculated relative to the development of the child.

The producers of Baby Olivia make clear from the very beginning that they are talking about the actual age of the unborn child.

On the page where the video is presented, after being asked “How is the age of baby Olivia calculated?” the response to this first FAQ (Frequently Asked Questions) is “We dated Baby Olivia's growth and development based on the moment her life began – fertilization.”

If that weren't clear enough, from the first moments of the video the make clear that they are beginning at fertilization. LiveAction states repeatedly, particularly with their first milestones, that these are measured “around 1 week after fertilization,” or “just 22 days after fertilization,” or “At 6 weeks after fertilization.” This is how the most reputable fetological texts mark the developmental timeline.

If anything, ACOG's complaint

seems to be more of a turf war, a dispute about who gets to control the narrative and women's perceptions. The information LiveAction shares is both clear and scientifically sound. Any confusion that remains is only there because ACOG wishes it so.

Abortion expert adds his complaints

ACOG has not publicly lodged other specific criticisms of the video of which we know. But one of their vaunted experts, Daniel Grossman, who ACOG uses to write their abortion clinical guidelines, chimed in with several criticisms of his own.

Grossman, a noted abortion researcher and promoter from the University of California – San Francisco, tries to argue that dates are off. He writes that a fetus depicted at 11 weeks is actually a 13 week old fetus, implying that some sort of deception or manipulation is involved.

“I think the danger of having biased and inaccurate information like this in schools is that it is being used to form and influence public opinion that ultimately affects the legality of abortion—and potentially IVF, contraception, and other medical care,” Grossman told *CNN*.

It is Grossman, however, that is being sloppy and deceptive with language here. An unborn child in the 13th week of pregnancy, measured according to LMP in the Naegle scale, would not really be 13 weeks old, but would actually be only 11 weeks old relative to the date of his or her conception. Clearly Grossman and the abortion establishment are the ones trying to manipulate public opinion here.

Attempting to throw shade on a most basic scientific fact, Grossman told *CNN* that “The claim that life begins at the moment of fertilization is not

a medical fact. In medicine, a pregnancy begins when a fertilized egg implants in the wall of a uterus.”



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Implantation is an important milestone, establishing the home where the child should be able to grow and thrive over the next nine months. But even if one wishes to follow what Grossman claims to be the current convention on “pregnancy,” it does not change the fact that a new genetically distinct human being who never existed before comes into being not when that child implants in the womb, but when sperm and egg join to become that new living, single celled human zygote.

That being's life clearly begins at conception, at fertilization, not implantation. To argue otherwise is spin, not science.

Grossman also complains about the video's mention of the baby's heartbeat at three weeks. Grossman claims that the heart does not fully form until nine weeks and that the most that can be said is that there are rhythmic contractions of the cardiac tube seen on ultrasound at 5-6 weeks.

Again, note that Grossman is still trying to use the old Naegle scale, measuring pregnancy from LMP, so all these dates have to be adjusted downward to account for fertilization occurring after two weeks. So his admission of “rhythmic contractions of the cardiac tube” at 5-6 weeks are actually in the third to fourth week of the child's life, precisely where the video puts them.

No one has asserted that the

heart is fully formed at three weeks or that the fetus is capable of writing a novel or a symphony at six or seven weeks because

of the presence of brain waves. But how does “cardiac” – which Mirriam Webster defines as “of, relating to, situated near, or acting on the heart” (emphasis added) – and “rhythmic contractions” – which are clearly the pulses a doctor hears on a stethoscope or a sonographer notes on an ultrasound – not simply a euphemism for “heartbeat”?

If Grossman is acknowledging “rhythmic cardiac contractions” at 5-6 weeks of pregnancy, then he is essentially admitting that the fetus has a measurable heartbeat at 3-4 weeks post-fertilization.

CNN also has Grossman disputing a claim from the video that a fetus born prematurely at 20 weeks can survive “with a lot of help.” Grossman counters that just 10% of babies born at 22 weeks live long enough to be discharged from the hospital.

Again, this is Grossman trying to use a different dating method to make a fully accurate statement from the video appear erroneous. A 20-week old baby measured by the Naegle scale Grossman is using would clock in at 22 weeks LMP. Both are acknowledging the same fact—that a certain, though admittedly small percentage, of babies born at this stage will survive at that point, we all grant, “with a lot of help.”

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Keeping women in the dark about fetal development

It is telling that there are a lot of statements by Grossman and ACOG about what is not the case, what capacities a baby does not possess or cannot do at a given stage of development and not a whole lot of acknowledgment of what amazing milestones the child is rapidly passing. ACOG has its own “How Your Fetus Grows During Pregnancy.” It is hard enough to find, but tucked away somewhere on the website, ACOG grants that somewhere between “weeks 1 to

8 of pregnancy” “Cardiac tissue” begins to develop and the brain and spine “begin to form” and “Webbed fingers and toes poke out from developing hands and feet.”

This is vague and a very broad range, but it would seem to be at least a tacit admission of the child’s rapidly appearing human organs and features. But does it mean that ACOG is ready to support legislation protecting those developing human beings or even making sure that women considering abortion are aware of these facts?

Sadly, no. They are too busy opposing any sort of limits on abortion, defending the killing of babies for any reason, at any stage of development.

If anything, they seem committed to fostering ignorance of fetal development among the general public, fearing that a woman who believes her baby’s heart begins beating at 3-4 weeks (from fertilization), or even 5-6 weeks (by the Naegle LMP-based pregnancy scale) might change her mind and forego a scheduled abortion.

This is clearly the aim of

Grossman and ACOG’s critique of the “Baby Olivia” video here. There is little genuine scientific dispute over the facts, but more of a complaint about the appropriate terminology and timescales. The medical experts prefer vaguer clinical euphemisms and dating conventions that mask the reality of the child’s humanity and worth over scientific and moral accuracy.

Science and truth aren’t threatened by *Baby Olivia*. But the abortion establishment sure is.

