

NRLC 2009 Will Prepare You to “Stop the Abortion Agenda” “Oh, My Goodness, What Can I Do?”

By DAVE ANDRUSKO

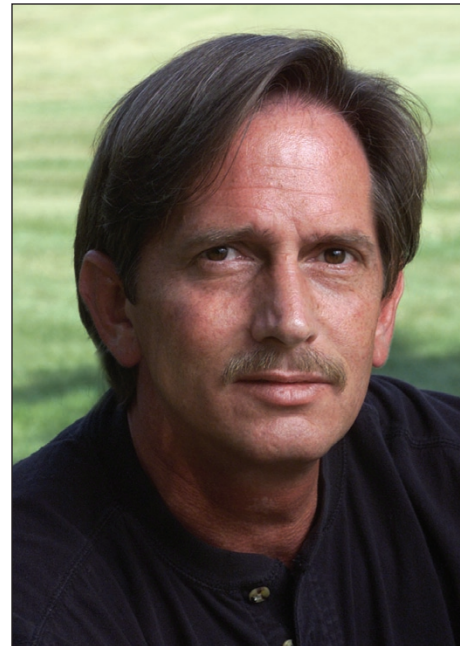
It took all of about 45 seconds for me to re-learn my lesson. Early in the day, late at night, the particular time matters no more than the particular topic under discussion. In the end it'll all come round to the same imperative: “Stop the Abortion Agenda.”

“We are going to have to deal with pro-abortion President Barack Obama for four years,” said a determined NRLC Convention coordinator Jacki Ragan, “and the better taught, trained, and motivated pro-lifers are, the more we can minimize the damage he intends to inflict to the cause of unborn babies.”

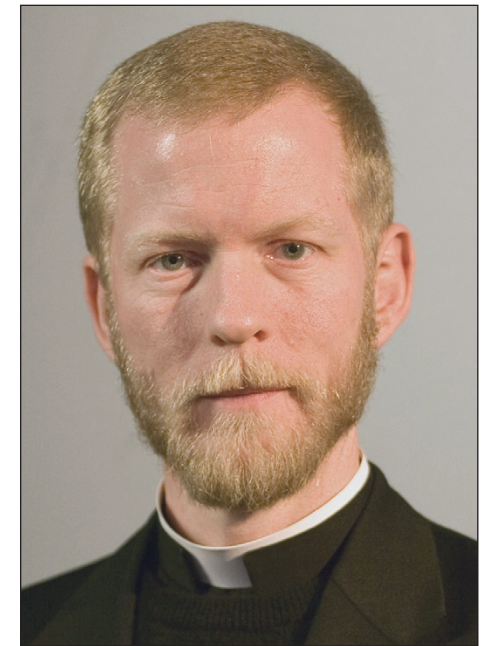
Thus it comes as no surprise that the theme of National Right to Life’s national convention in Charlotte, North Carolina, June 18–20 is “Stop the Abortion Agenda.” And what a thousand-plus grassroots proliferators will experience when they arrive at the Blake Hotel is the kind of total immersion they can find nowhere else.

On pages 14–15 you’ll find many of names of the speakers who have confirmed. Jacki highlighted just a couple, including bioethicist Wesley Smith; the Reverend Doctor Tadeusz Pacholczyk,

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Michael Clancy



Fr. Tadeusz Pacholczyk

Abortion “At the Heart” of Obama Plan

Obama and Democratic Leaders in Congress Hoping To Impose Sweeping Abortion Mandates In “Health Care Reform”

WASHINGTON (April 9, 2009)—Congressional Democratic leaders are currently at work crafting “health care reform” legislation that they, and President Obama, hope to ram through Congress on a fast track this summer.

Many details of the legislation have not yet been determined. But this much is clear: President Obama, with the help of some of the most powerful Democrats in Congress, will attempt to use “health care reform” as a vehicle to impose sweeping pro-abortion mandates on the American health-care delivery system.

“The pro-abortion movement sees federal ‘health care reform’ legislation as a golden opportunity to force-feed abortion into every nook and cranny of the health-care delivery system,” explained NRLC Federal Legislative



President Obama:
Abortion “at the heart” of health care



Cecile Richards
President, Planned Parenthood

Director Douglas Johnson. “Their goal, as they sometimes put it, is to ‘mainstream’ abortion. They hope to use the structure of a federal health-care law to make abortion on demand accessible in every region of every state, paid for by taxes and by government-mandated private insurance premiums.”

Johnson warned, “**If these people succeed, the result will be a very large increase in the number of abortions performed in America.**”

President Obama’s Position

Throughout his political career as an Illinois state senator and as a U.S. senator, Barack Obama was a strong supporter of the entire agenda of the pro-abortion lobby. He led the opposition even to bills

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that won support from many other pro-abortion lawmakers, such as the Partial-Birth Abortion Ban Act and the Born-Alive Infants Protection Act. He consistently opposed any limitations on government funding of abortion on demand.

On July 17, 2007, during Obama’s campaign for the Democratic presidential nomination, he appeared before the annual conference of the Planned Parenthood Action Fund. Speaking of his plans for “health care reform,” Obama said, “in my mind, reproductive care is essential care, basic care, *so it is at the center, the heart of the plan that I propose.*” [emphasis added]

Under his plan, Obama explained, people could choose to keep their existing private health care plans, *but* “insurers are going to have to abide by the same rules in terms of providing comprehensive care, including reproductive care ... that’s going to be absolutely vital.”

Regarding Obama’s statements, the *Chicago Tribune* reported: “Asked about his proposal for expanded access to health insurance, Obama said it would cover ‘reproductive-health services.’ Contacted afterward, an Obama spokesman said that included abortions.” (“Democrats Pledge Support for Wide Access to Abortion,” by Mike Dornig, *Chicago Tribune*, July 18, 2007.)

This position was later elaborated on in the written response that the Obama presidential campaign sent to a pro-abortion group, www.rhrealitycheck.org, in December 2007, which said: “Senator Obama believes that reproductive health care is basic health care. His health care plan will create a new public plan, which will provide coverage of all essential medical services. **Reproductive health care is an essential service—just like mental health care and disease management and other preventive services under his plan. And private insurers that want to participate will have to treat reproductive care in the same way.**” [emphasis added]

NRLC’s Johnson commented, “In Obama’s vision, federal law should *require* employers to provide health insurance coverage for their employees,

and the same law should *require* coverage of abortion on demand, which Obama regards as basic ‘preventive’ medicine, in all such plans.”

In addition to imposing mandates on private employers and insurers, Obama and many congressional Democratic leaders also want all Americans to have the choice of enlisting in a health plan run entirely by the government. Obama consistently has opposed (as an Illinois state senator, U.S. senator, and presidential candidate) all limits on the funding of abortions in Medicaid and other government-run health programs.

Democrats Map Out Stealth Strategies

The pro-abortion forces know that the pro-abortion policies they hope to impose do not have broad public support. A national Zogby poll conducted in late November of 2008 asked if “a bill that would force many employers to provide health insurance to their employees” should “require insurance plans pay for abortions when the abortions are performed as a method of birth control,” to which 71 percent said no while 20 percent said yes.

NRLC’s Johnson said this public opinion is one reason why Democratic congressional leaders hope to leave as little time as possible between the time that they unveil the actual “health care reform” legislation, which might occur in May, and the time that the House and Senate hold votes on the legislation, which is currently planned for June or July.

“In 1993, the Clinton health-care scheme failed in Congress partly because people had time to study it and to react to its radical implications,” Johnson said. **“This time, the Obama Administration and congressional Democratic leaders hope to succeed with a combination of speed, deceptive terminology, expensive propaganda and attack ads by the pro-abortion groups, and sympathetic coverage by the mainstream news media, in order to ram their ‘reforms’ into law. Anyone who doesn’t like that had better start speaking up, right now.”** (See “Action Request” at the end of this article.)

Johnson noted that a detailed analysis of the Democratic “reform” proposals must await the unveiling of the actual legislation, which is currently being written by congressional Democratic committee chairmen in collaboration with Obama Administration officials. However, he warned, crafters of the legislation may try to camouflage the pro-abortion mandates.

One mechanism for such concealment would be to use the legislation to create a board or commission within the federal Executive Branch, on which Congress would confer future authority to declare specific “health services” to be mandated. Or, the bill could be written to confer such blank-check authority on the Secretary of the Department of Health and Human Services.

“Pro-life Americans should vigorously oppose any federal ‘health care reform’ legislation that does not explicitly exclude abortion from the scope of any government-defined or government-mandated package of health care services,” Johnson explained. **“A bill that delegates authority to some committee to require abortion coverage is simply a covert, two-step method for imposing sweeping pro-abortion mandates on all employers and all citizens.”**

The actual legislation might turn out to contain pro-abortion mandates even more sweeping than those already outlined.

The “health care reform” legislation pushed by President Clinton in 1993, which failed in Congress after being strongly opposed by NRLC and many other groups, would have required access to abortion in every region of every state (referred to by pro-life forces as the “abortion clinic mandate”). The Clinton-backed legislation would also have invalidated all state laws that interfered with access to abortion—for example, parental notification laws.

“A health care bill that mandates access to abortion, and that invalidates all state laws that impede such access, would be basically the so-called ‘Freedom of Choice Act’ under a different title,” Johnson commented.

Republican congressional leaders have already expressed objections to some elements of the anticipated Democrat-crafted legislation, including the concept of creating a government-run insurance plan that would be open to all Americans, regardless of income level, which would compete with private insurance plans. Many observers believe that the creation of such a “public option plan” would be a stepping stone towards a complete takeover of health-care financing by the government—that is, a “single-payer” system such as that found in some European countries.

Pro-life Senator Charles Grassley (R-Iowa), who is the ranking Republican on the Finance Committee, which has jurisdiction over some aspects of health care legislation, said at a March event hosted by the Kaiser Family Foundation that the question of whether to create a government-run insurance option is “a deal-breaker for Republicans if it’s in, and it’s a deal-breaker for Democrats if it’s not.”

But, Grassley added, “I told you that abortion is about the only issue I know of that’s not compromisable.”

Abortion Mandates Top Priority For PPFA and Other Pro-Abortion Groups

The imposition of sweeping pro-abortion mandates as part of “health care reform” is currently the top priority of many pro-abortion organizations, such as the Planned Parenthood Federation of America (PPFA).

These organizations are pushing for the abortion mandates both in public statements and in less visible lobbying efforts.

In a “wish list” memorandum signed by PPFA and over 60 other pro-abortion organizations and submitted to the Obama transition team in November 2008, the groups said, “It is imperative that the President put forward a health care reform plan that guarantees access to comprehensive, high-quality, affordable health care for all. ... Comprehensive

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benefits must include access to the full range of reproductive health services, including contraception, maternity care, and abortion care.” (See “Pro-abortion Alliance Submits 55-Page Wish List Memo to Obama Transition,” January 2009 **NRL News**, page 17.)

PPFA President Cecile Richards participated in a “health care summit” held at the White House on March 5, and used the opportunity to argue that the legislation must expand “access” to the services provided by her organization.

(PPFA clinics provided over 300,000 abortions in 2007, making the organization the nation’s largest abortion provider. At going rates, it appears that over one-third of PPFA-affiliated clinic income is generated by abortions.)

In a press release issued the same day, Richards said, “We must develop a health care reform plan, which ensures that every person has access to affordable, high-quality health care, including comprehensive reproductive health care, from a provider of their choice.”

Recently, the school of public health at Columbia University issued a report, co-authored by the immediate past board chair for Physicians for Reproductive Choice and Health, that openly called for inclusion of abortion in a national health care system.

The report, endorsed by the deans of 38 university public health schools, complained that “federal and state laws prohibiting the use of public funds for abortions spill over into private-sector financing as well. Four states prohibit private insurance policies sold in the state from covering abortions unless the mother’s life is in danger, while 11 states either restrict, or prohibit abortion coverage under policies sold to public employees. **A new national health care plan should provide the full range of family planning services, medications and devices, and assure confidentiality so that women seek needed care in a timely way.**”

The report also implied that such federal legislation should override state laws requiring parental notification or consent for abortions performed on

minors, asserting that “almost all health care workers support the notion of confidentiality, particularly for adolescents ... ”

The Columbia report served as a basis for a non-binding resolution (H. Con. Res. 48) that was introduced in the House of Representatives in February by Rep. Jan Schakowsky (D-Ill.), the co-chair of the Congressional Caucus on Women’s Issues, that calls for the enactment of health care legislation that “guarantees a level of benefits and care, including comprehensive reproductive health care,” which is code language that encompasses unrestricted abortion coverage. As of April 9, 2009, this resolution had 37 House co-sponsors.

A similar Senate resolution (S. Con. Res. 6), introduced by Senator Debbie Stabenow (D-Mi.), had five cosponsors as of April 9.

ACTION REQUEST: What You Can Do Now

Please take a few minutes to communicate with your two U.S. senators and with your representative in the U.S. House of Representatives, to urge them to oppose any federal “health care reform” legislation that does not explicitly exclude abortion.

Here are two of the ways that you can communicate with your federal representatives on this important issue:

(1) Go to the Legislative Action Center on the NRLC website, at <http://www.capwiz.com/nrlc/home>.

There you will find a tool that makes it easy to send an appropriate message to both of your U.S. senators and to your U.S. House representative, urging them to vote against any “health care reform” legislation that does not explicitly exclude abortion. When you fill in your mailing address, your messages will automatically be sent by e-mail to your representatives in Congress.

(2) Telephone the U.S. Senate switchboard at 202-224-3121, and ask to be connected to the office of one of your two U.S. senators. Once connected with the senator’s office, say that you want to be recorded as urging the senator

to oppose any “health care reform” bill unless abortion is explicitly excluded. Tell the staff person that you wish to receive a letter explaining how the senator will vote on this issue, and make sure that the staff person takes down your mailing address for this purpose.

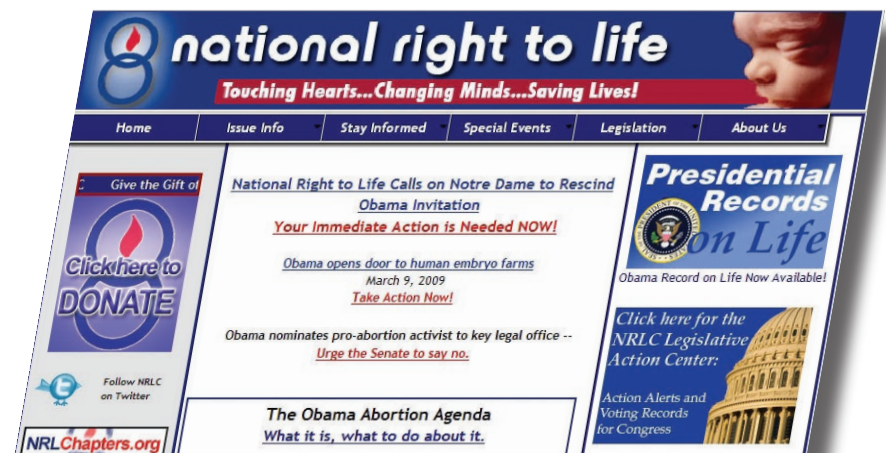
Then, hang up and repeat the process for your second U.S. senator. Finally, repeat the process for your representative in the U.S. House by calling 202-225-3121. If you don’t know who represents you in the U.S. House, just give the operator your zip code and you will be connected to the office of the correct House member.

NOTE: If you receive a letter or an e-mail or any other communication from one of your representatives in Congress regarding this matter, please forward a copy of that communication to:

National Right to Life
Federal Legislation Department
512-10th Street, N.W.
Washington, D.C. 20004
Legfederal@aol.com
Fax: 202-347-3668

For updates on this and other congressional issues, keep an eye on www.nrlc.org.

Visit our NRL Web Site www.nrlc.org



Your Place to Find:

- How You Can Help Stop Obama’s Abortion Agenda;
- Information on NRL 09 Convention June 18-20;
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