national RIGHT TO LIFE NEWS

April 2022

Florida Gov. DeSantis signs HB 5, prohibits any abortions after 15 weeks

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2022 Primaries are Underway: Let's Win for the Babies

By Karen Cross, National Right to Life Political Director

It is hard to believe 2022's primary season began on March 1, when Texas held the first in the nation primary. May and June will hold thirty more state primaries – setting the stage for many head-to-head pro-life vs. pro-abortion races nationwide.

Elections matter tremendously for the pro-life cause. This could not be clearer as we watched the slim pro-abortion Democratic House majority advance an appropriations bill without the Hyde Amendment, a longstanding rider that prevents our federal tax dollars from being used to pay for abortions in Medicaid and many other federal programs. The Hyde Amendment has saved an estimated 2.5 million lives since its first passage in 1976!

All who have a heart for the unborn and their mothers must give their all in the coming months.

See "Primaries," page 33

Start making your plans to attend NRLC 2022, National Right to Life's annual convention!

By Jacki Ragan

The upcoming National Right to Life Convention, June 24 and June 25, promises to be one of the best ever! Held in Atlanta, Georgia, this is an event you do not want to miss. For details, please visit nrlconvention.com.

We will host 48 workshops, 5 General Sessions, an opening Prayer Breakfast, a closing Banquet, a National Teens for Life Convention, Pro-Life Exhibits, and the opportunity to meet and talk with other pro-lifers from all across the nation. Childcare is, of course, provided.

Let me give an updated list of speakers which we are adding to constantly.

We open the convention with our Prayer Breakfast. Our speaker is Catherine Davis, the founder and president of The Restoration Project. She often partners with the National Black Prolife Coalition, the Network of Politically Active Christians,

See "NRLC 2022," page 42

Editorials

Results so encouraging they will make you want to work 10 times harder

The drip, drip, drip you hear is the sound of pro-abortion President Biden's job approval numbers sinking into the high 30s. And the sense of panic is impossible to ignore.

Take the headline that accompanies Niall Stanage's story (https://thehill.com/news/administration/3265986-the-memo-democrats-face-nightmare-scenario-biblical-disaster) in *The Hill*: "The Memo: Democrats face nightmare scenario, 'biblical disaster.' "

Here's his beginning. "Democrats are facing a nightmare scenario with about six months to go before the midterm elections. … The problems are compounded by Biden's weak approval numbers and the historical pattern whereby a president's party typically loses seats in the first midterms of his tenure. Some Democrats believe a turnaround is still possible, or at least that losses can be kept modest. But others, granted anonymity to speak candidly, sound a louder alarm."

What do the polls show? Rasmussen is often criticized as overly harsh on Democrats. Today they have Biden at 40% approval, 58% disapproval. But Quinnipiac is even worse: 33% approval, 54% disapproval!

Of course, the President is not up for re-election until 2024 but all of the House members and 1/3rd of the Senate faces the voters

See "Results," page 13

Partial-birth abortion and HHS Secretary Becerra's long track record of evasive answers

You have to hand it to HHS Secretary Xavier Becerra. He can go on and on and say less and less than just about any human being on Planet Earth.

Especially about abortion. Secretary Becerra has a track record a mile long of abortion advocacy. As NRLC has explained, Becerra poses a triple threat—to unborn babies, their public policy defenders, such as National Right to Life, and the Pregnancy Help Movement. That in a nutshell is his resume.

Last week Becerra appeared before the House Committee on Education and Labor to discuss the policy priorities of his department, according to Fox News's Anders Hagstrom. Rep. Jim Banks, R-Indiana asked him the same "simple question" over and over again: "Do you concede that partial-birth abortion, as defined in 18 U.S. code, section 1531, is illegal and punishable by fine, imprisonment or both?"

As he has done on numerous questions, Becerra bobbed and weaved. "Congressman, I'll try to respond to this as best I can," Becerra began. "And that's to say that having been a former attorney general, I know how important it is to not only follow the law, but enforce it. As secretary of HHS I will not only comply with the law, but enforce it, and when it comes to issues that sometimes we hold different and sometimes very deeply held beliefs I will respect where people's opinion is, but my job is to make sure I'm enforcing the law."

Okay, but "Do you concede that partial birth abortion is illegal per the law?" Banks pressed. According to Hagstrom, Becerra said

"Under the Supreme Court decision in Roe vs. Wade, women have reproductive rights that they are

See "Becerra" page 39

From the President
Carol Tobias

2022 proving to be an incredibly tumultuous, but pivotal, year

In 1976, when Henry Hyde, a new member of the US House of Representatives from Illinois, introduced an amendment to limit tax-funding of abortion, Democrats had a two-to-one advantage in the House and enough votes in the Senate to override a filibuster.

Yet the Hyde amendment was adopted in that Congress with strong bipartisan support. A federal district court enjoined the law but, about a year later, that decision was vacated by the US Supreme Court. Following a 1980 Supreme Court case, the Hyde amendment, with slight variations, has been continuously in effect.

Each party was more split on Life in those days. Many Democrats were pro-life and some Republicans were pro-abortion. For the next 18 years, Democrats controlled the House. They controlled the Senate for 12 of those 18 years. And every year, the Hyde amendment was enacted as part of the appropriations process.

In 1994, Republicans, with a huge wave in the election and heavy involvement by the National Right to Life Political Action Committee, took control of the House and Senate. Majority control has bounced back and forth between the parties since then. And still, the Hyde amendment was retained.

And over the years, other limits were placed on abortion funding, including funds appropriated for international aid (Helms Amendment), the federal employee health benefits program (Smith Amendment), the District of Columbia (Dornan Amendment), federal prisons, Peace Corps, and more.

Many Democrats in Congress who supported abortion also acknowledged that pro-life people should not be forced to pay for them.

But, also over the years, party positions on abortion became more polarized with almost all Republicans in Congress supporting legal protection for preborn children and virtually all Democrats supporting unlimited abortion throughout pregnancy.

After the 2020 election, Democrats in Congress, strongly allied with the abortion industry, said "no more." No more would they support reasonable measures like the Hyde amendment. No more would they allow limits to be placed on abortion or abortion funding.

President Joe Biden, for the second year in a row, has produced a budget that removes all limits on tax funding of abortion.

The House, with pro-abortion Speaker Nancy Pelosi setting the agenda, passed appropriations bills that allowed for the funding of abortion through various government programs.

The House passed a resolution which purports to retroactively remove the ratification deadline for the Equal Rights Amendment (ERA). The ERA would likely be used to invalidate virtually all limitations on abortion, and to require government funding of abortion.

And, the House passed the so-called Women's Health Protection Act, more accurately the "No-Limits-on-Abortion-Until-Birth-Act."

Thankfully, these measures ran into a pro-life brick wall in the Senate. Pro-life senators have held firm, using the filibuster to prevent Democrats, under the leadership of Majority Leader Chuck Schumer, from passing the bills and sending them to President Joe Biden for his signature.

Our pro-life friends in Congress have been relentless in their pursuit of pro-life legislation, introducing bills like the No Taxpayer-Funding for Abortion Act, the Pain-Capable Unborn Child Protection Act, the Dismemberment Abortion Ban Act, the Conscience Protection Act, the Child Interstate Abortion Notification Act, the Second Chance at Life Act (regarding Abortion Pill Reversal), and more.

Members have challenged the Food and Drug Administration regarding its decision to allow abortionists to mail chemical abortion pills directly into a woman's home without a physical exam prior to undertaking the abortion. They have introduced a resolution to stop federal grants to abortion providers; they have asked the Department of Justice to investigate illegal fetal tissue research, and more.

The contrast between parties could not be more stark. Republicans support protective measures for unborn children. Democrats support unlimited abortion on demand throughout pregnancy, and tax-funding of abortion.

That is what's at stake this fall. The election will determine if Democrats get enough votes to pass their rabid anti-life agenda, or if Republicans will have enough votes to bring some sanity back to the halls of the Capitol.

Make no mistake. Regardless of how the Supreme Court rules in its upcoming *Dobbs v Jackson Women's Health Organization* decision, if Democrats are in full control of the House and Senate, they will wreak incredible havoc when it comes to the future of unborn children.

Many of the Democrat Senators and Representatives of the 1970's and 1980's would no longer be welcome in the party. I daresay, they would not recognize their party in 2022.

You may know people who always vote Democrat, maybe because that's the way their parents voted. Ask them if they know how much the party has changed over the last 40 years. Does the party of today really represent them?

This is an incredibly tumultuous, but pivotal, year. Leave no stone unturned.

Make sure pro-lifers are registered to vote.

Make sure they know where candidates stand on Life.

And make sure they vote.

The "Year of the Unborn Child" continues in state legislatures

By Ingrid Duran, Director of State Legislation

State legislatures are off to a strong start in protecting unborn children and their mothers. These actions continue the pro-life momentum of 2021, which saw hundreds of pro-life bills introduced.

Here is an update.

A trend in pro-life legislation has been protecting unborn babies after 15-weeks. The most recent was last Thursday in Florida. Such bills have also become law in Arizona and Kentucky. (Kentucky's pro-abortion governor vetoed the bill, but the General Assembly promptly overrode it.) These laws are similar to Mississippi's Gestational Age Act which is being considered in the U.S. Supreme Court case *Dobbs v. Jackson Women's Health Organization*.

Most importantly, though, the unborn child's humanity is front and center in these laws, highlighted by Florida Governor Ron DeSantis: "… these babies have beating hearts, they can move, they can taste, they can see, they can feel pain, they can suck their thumbs, and they have brain waves…"

Bills such as the 2021 Texas Heartbeat Law, which has saved over 3,000 babies and reduced abortions by at least **60%,** continue to be a trend. Idaho's governor signed a heartbeat ban, though its implementation has been halted by a legal challenge.

Alabama, Arizona, Louisiana, Minnesota, Missouri, and Oklahoma have introduced legislation that protects unborn babies from abortion when there is a presence of a heartbeat, unless there is a medical emergency.

Some of these bills contain the civil enforcement mechanism similar to Texas's. Oklahoma's governor signed a bill that is a total ban on abortion, with an exception for the mother's life.

Indiana and South Dakota have passed laws making it illegal to coerce a mother to abort her child, stressing the importance of protecting mothers and ensuring their welfare.

Wyoming's governor signed a bill protecting unborn children from abortion, which would take effect once the U.S. Supreme Court either overturns *Roe v. Wade*, or allows states to protect the unborn from abortion (so-called "trigger laws"). Iowa's legislature has a trigger bill pending.

A new West Virginia law prohibits abortion because of an unborn child's disability. This first of its kind protective and educational law requires that parents be given educational materials on support systems available to families raising children with disabilities.

A major pro-life priority is to regulate dangerous and deadly chemical "do-it-yourself" abortions and to inform women about the possibility of Abortion Pill Reversal (APR). The use of chemical abortions is on the rise—more than 50% of all abortions-- and is very-easily available for purchase through the mail.

Legislation should require these abortion pill "cocktails" be given to a woman in the presence of a doctor/or health care professional (not via "tele-medicine"), as well as requiring the reporting of complications. South Dakota's governor signed such a bill into law.

Alabama, Iowa, Kentucky, Louisiana, Minnesota, Mississippi, Missouri, Nebraska, Ohio, South Carolina, and Tennessee have pending legislation that either provides information on reversing the intended effects of a chemical abortion (APR), or regulates chemical abortions, or both.

Pro-life bills providing alternatives to abortion have become law or have been introduced. This year, Arkansas implemented a law to designate funding for pregnancy resource centers. Virginia expanded its "Safe Haven" law (this law allows the safe relinquishment of a newborn). In Georgia, Betsy's Law which funds maternity homes for homeless mothers and children, has been sent to the Governor. Iowa's proposed "More Options for Maternal Support" bill promotes adoption.

Pro-abortion forces, as expected, are responding with moves to enshrine abortion into state law and to expand abortion-on-demand until birth. New Jersey was the first state this year to enact a state law codifying abortion; Colorado followed suit. Maryland and Washington State expanded their abortion laws to allow non-physicians to perform abortions. California has eliminated out-of-pocket costs for abortion; Oregon will use public monies to cover abortion costs.

California and New York have bills to "protect" abortionists from out of state lawsuits. California and Washington State vow to be abortion "sanctuaries." Some states have declared war on life-saving pregnancy resource centers.

Pro-lifers must continue working to promoting life and being aware of laws that do not provide true "sanctuary" for vulnerable women and their unborn children.

Senator Mike Lee and Rep. Chris Smith lead letter demanding AG Garland investigate whether federal crimes were committed by a DC abortionist after grisly discovery of five dead babies

WASHINGTON—In a letter to U.S. Attorney General Merrick Garland today 69 Members of Congress demanded that AG Garland investigate whether federal crimes were committed by a DC abortionist after the grisly discovery of five dead babies.

Led by Senator Mike Lee (R-UT) and Rep. Chris Smith (R-NJ), the letter states: "We are gravely concerned by allegations brought forward that suggest a preborn baby underwent a partial birth abortion at the Washington Surgi-Clinic in Washington, D.C. We demand that you conduct a comprehensive investigation on the circumstances surrounding the deaths of each preborn baby.

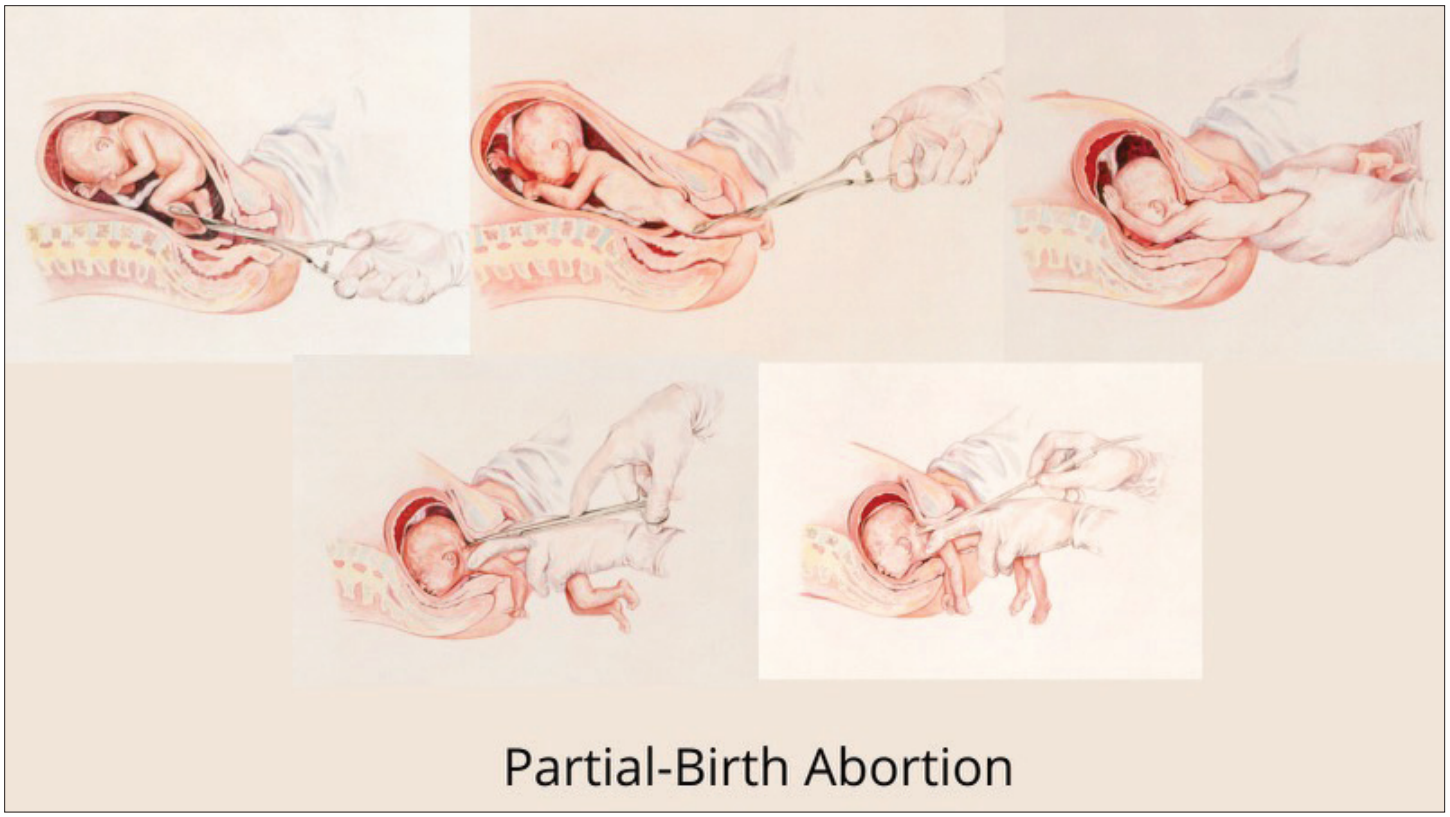
"Alongside passage of the Partial-Birth Abortion Ban Act of 2003, Congress declared that 'a moral, medical, and ethical consensus exists that the practice of performing a partial-birth abortion … is a gruesome and inhumane procedure that is never medically necessary and should be prohibited.

"We formally request that you direct the appropriate personnel at the Department of Justice and the Federal Bureau of Investigation to investigate whether these preborn babies were aborted in violation of federal law."

"Photos that have been publicly shared (and are enclosed in this letter) suggest that some of these babies may have been victims of partial-birth abortion or infanticide," the lawmakers wrote.

In the letter, the lawmakers cited neonatologist Dr. Kendra Kolb, who estimated that one preborn baby girl is "somewhere between 28-30 weeks gestational age, with evidence of deep lacerations to the posterior neck which presumably correlates to the method of abortion used to end her life."

Earlier this week, Smith joined 22 members of Congress in sending a letter to DC Mayor Muriel Bowser and Police Chief Robert Contee demanding an autopsy on the preborn babies. Neither Bowser nor Contee has yet to respond.



A Grisly and Gruesome Business

By Holly Gatling, Executive Director, South Carolina Citizens for Life

In 1977 when I was a newspaper reporter in Columbia, S.C., covering crime and courts (if it bleeds it ledes), I wrote about a U.S 4th Circuit Court of Appeals case involving the death of a baby who was aborted at 25 weeks but lived for 20 days. The court ruled that the abortionist could not be prosecuted for murder as the local solicitor intended to do.

At least the court had the decency to describe the case as "a grisly and gruesome business" and even expressed revulsion at what happened to the baby boy. Early abortions "may be little cause for revulsion" the court wrote, but continued, "It seems quite different when an abortion is performed when the child has long since quickened and comes into the world with a strong heart beat and its lungs functioning. Difference are aggravated when it takes the child three weeks to die."

Yet, the court went on to state that *Roe v. Wade* and *Doe v. Bolten* permits a woman "to rid herself of an unwanted fetus comparatively unfettered" and therefore the abortionist could not be prosecuted for murder.

It took thirteen years after that decision known as *Floyd v. Anders* for the South Carolina General Assembly to pass its pro-life law, the Parental Consent Act. Since then we have passed a total of 16 laws correlating with a 60 percent decline in abortions occurring in our state.

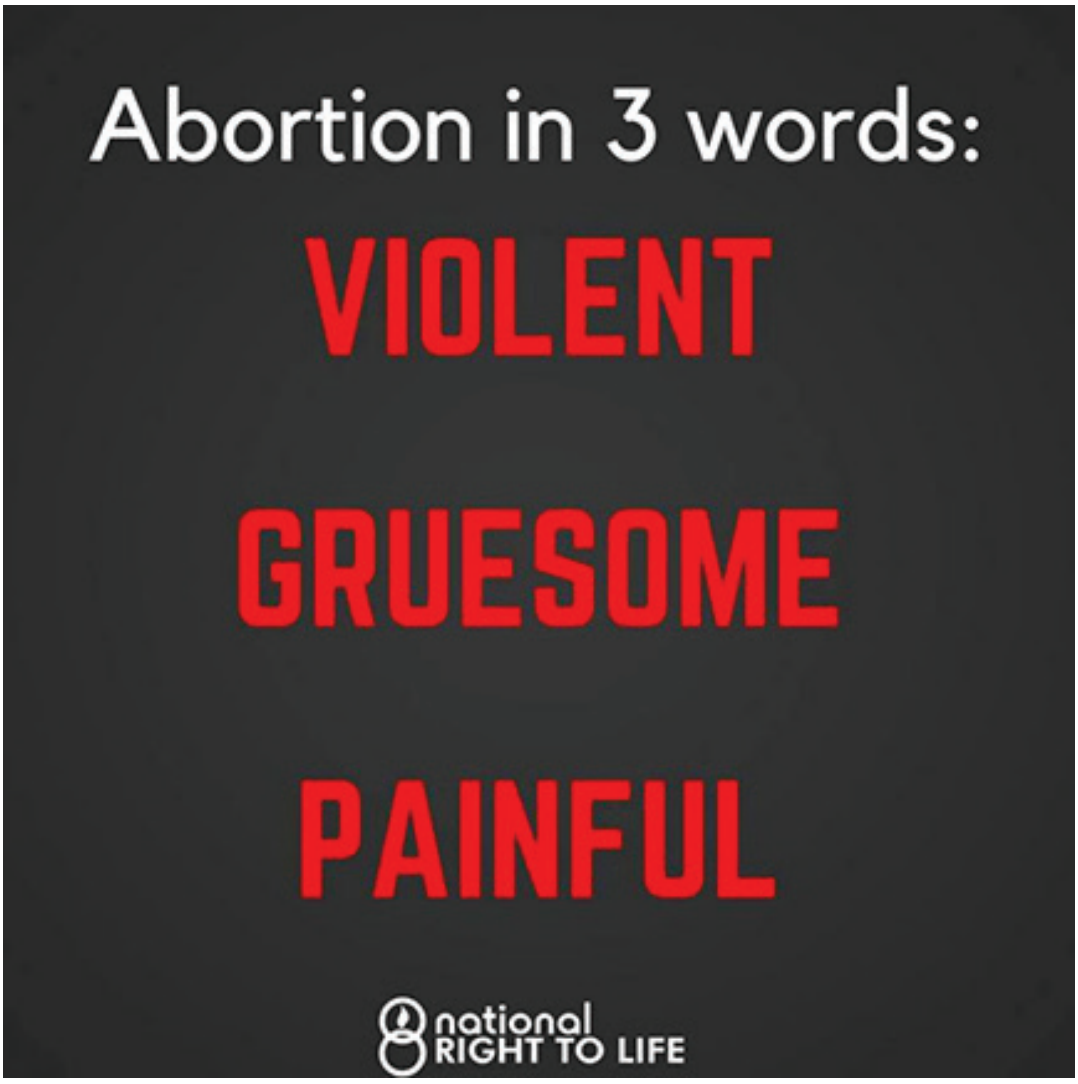
Years later it was interesting to me – no longer a reporter but now a pro-life activist – to see the prosecution of infamous abortionist Kermit Gosnell who was sentenced to life in prison for murdering three infants he aborted and who survived the abortions. That was 2013.

But at least there was justice in his case because the pro-life movement had worked tirelessly and effectively to pass laws regulating (to some extent) when abortion is legal killing and when it is illegal killing. Still, abortion remains a "grisly and gruesome business."

That brings me to the most recent grisly and gruesome business of the Washington, D.C. abortionist who is suspected of performing illegal partial birth abortions on five well-developed babies. Ironically, this time prosecutors are reluctant to even investigate whether a crime occurred.

Even with 69 members of Congress calling on U.S. Attorney General Merrick Garland to investigate whether crimes were committee, the silence is deafening. Yet once again, the grisly and gruesome business of abortion has bobbed to the surface leaving ordinary people who oppose abortion stunned and horrified.

Just today a friend called me to ask if it is true that abortionists kill babies who are born alive. I had to tell her yes, and I recommended that she sign up for *National Right to Life News* to follow these cases and to get involved with stopping these grisly and gruesome crimes against the unborn members of our human family no matter how small or how large they are.



Twin victories in Florida provide further protection for unborn babies

By Dave Andrusko

What a week for pro-life Floridians and unborn babies!

First, on April 8, Leon County Circuit Judge Angela Dempsey upheld a 24-hour waiting period, a law passed way back in 2015. She wrote

> **"The plain purpose of the Act is to enhance a pregnant woman's voluntary and informed consent by providing for a 24-hour window of opportunity for her to consideration the important information which Florida requires she be given. In passing the Act, Florida joined the majority of State which have similar requirements, include those that have recognized a right of privacy in their state constitutions. These laws have been upheld in numerous judicial decisions both state and federal.**
>
> **"In addition, as noted, the majority of other States have waiting period laws in place. Of those waiting periods, 17 are for 24 hours, on is for 18 hours, 4 are for 48 hours, and 6 are for 72 hours. Thus, with one exception, all waiting periods are for 24 hours or longer."**

As *NRL News Today* reported, DeSantis signed the "Reducing Fetal and Infant Mortality Act" (House Bill 5) into law. Gov. DeSantis said "It's a statement of our values that every life is important." DeSantis said being able to sign the bill prohibiting abortion after 15 weeks was "really meaningful."

"We are here today to defend those who can't defend themselves," DeSantis said Thursday on a stage in Kissimmee, surrounded by lawmakers, pro-life advocates and children. "This will represent the most significant protections for life that we have seen in a generation."

House Bill 5 "protects babies in the womb who have beating hearts, who can move, who can taste, who can see, and who can feel pain," said Gov. DeSantis. "Life is a sacred gift worthy of our protection, and I am proud to sign this great piece of legislation which represents the most significant protections for life in the state's modern history."

National Right to Life also lauded the governor's action. "We praise Governor Ron DeSantis, the pro-life members of the Florida state legislature, and Florida Right to Life for all of the hard work that went into seeing this legislation become law," said Carol Tobias, president of National Right to Life. "No unborn child should suffer and die from an abortion. Florida's law will protect unborn children and their mothers from the horrors of abortion."

Florida's Catholic bishops praised Gov. DeSantis for his "commitment to defend unborn children and their mothers" and for his leadership in encouraging the Legislature to take up the bill and pass it and for his own support of the measure.

HB 5 "includes provisions to improve infant health and to analyze and reduce fetal and infant mortality," the Bishops said in a statement.

The prelates also commended the state's legislative leaders, especially Sen. Kelli Stargel and Rep. Erin Grall who sponsored the bill.

"(They) courageously accomplished the difficult task of advancing the bill through the committee process and floor debate in the Florida House and Senate," the bishops said.

(left to right) Speaker Chris Sprawls; Lynda Bell, President, Florida Right to Life; Rep. Erin Grall, House sponsor; Lori Bontell, Faith and Community Coalition

The bill is modeled after, but is not identical to Mississippi's "Gestational Age Act." On December 1st, the Supreme Court heard oral arguments in that case. A decision is expected in *Dobbs v. Jackson Women's Health Organization* in June.

"Previously, Florida had allowed abortion through the second trimester of a pregnancy, making it one of the most permissive states for abortion in the southeast," according to *CNN's* Steve Contorno. "According to the US Centers for Disease Control and Prevention, Florida reported 71,914 abortions in 2019, or 18.5 per 1,000 women, the third highest rate in the country.

HB 5 passed the House by an overwhelming vote of 78-39 and the Senate by a 23-15. The bill goes into effect July 1. Similar bills have been passed in Kentucky and Arizona.

"Working within that infrastructure of 15 weeks gives Florida its best opportunity to save a significant number of babies, very quickly, after the court's decision," Rep. Erin Grall said last month. "The Supreme Court's weighing of the Mississippi law was a factor in the decision to propose the 15-week restriction."

"I never dreamed I'd be standing here today, but actually being able to save the life of babies," GOP Sen. Kelli Stargel told legislators. "God is so good."

"We at Florida Right to Life are absolutely thrilled with the bill's sponsors, Sen. Kelli Stargel and Rep. Erin Grall. They did great work and our wonderful pro-life Governor DeSanctis just signed the 15 week bill," said Lynda Bell, president of Florida Right to Life. "Florida Right to Life was proud to play a pivotal role in its passage."

Memorials & Tributes

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

In Memory of

Joan P. Allgaier
Michael Allgaier

Karen Apang
Frank Apang

Ruth N. Beach
William Beach

Lucy Chippewa
Kara Chippewa

Megan Corbridge
Reformation Baptist Church

Rose Degeneff
June Mueller

Gladys Erickson
Jo Anne & Dennis McKenna

Dorothy Gardner
Gerald & Judith Welte
Tina & Billl Zimpelman

Patricia Hougens
Marty & Lori Kehoe

Maureen Mirucki
John Miller
Keith & Cathy Gage

Baby Marie
Meg Boyer

Sherman E. Roodzant
Phillip Lestmann

Barbara Saindon
Stephen Saindon

Dr. Rebecca J. Shoden
Anna Tummelson

Ruth Tate
Lt Col David O. Tate (Ret)

Peter P. Vercillo Jr
Celia Roch

Barbara Weitekamp
Susan Weitekamp

Dorothy Wolfe
Wayne Wolfe

Mary Pascrall Wood
Harry Miller

Robert Young
Robert Fasching
Jim and Joyce Jerla
Lauren Jerla
Laurie Millls

In Honor of

Sarah Leinberger
Tammy Leinberger

Henrietta Massina
Paulette Albrecht
The Mondello Family

April 2022

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

Memorials & Tributes

Contribution amount $ _____

Your name_____

In memory of_____ In honor of_____

Your address_____

Name/Address for acknowledgment card_____

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Make your check payable to National Right to Life Committee and return with this form to:
National Right to Life Development Office
1446 Duke Street | Alexandria, Virginia 22314

Pro-abortion *Washington Post* offers keen summary of the status of pro-life legislation

By Dave Andrusko

A headline in the *Washington Post* deftly summarized what pro-lifers are busy adamantly promoting and pro-abortionists greatly fear: "States are readying abortion restrictions in case SCOTUS reconsiders Roe." Rachel Roubein, writing at "The Health 202," also brings into focus the pro-abortionists' crusade to legalizing abortion on demand through all of pregnancy. She draws her conclusions from the work of *WaPo* reporters Caroline Kitchener, Kevin Schaul and Daniela Santamariña.

Roubein lists four categories of pro-life legislative efforts. Their counts differ slightly from National Right to Life's Department of State Legislation's but are in the ballpark.

First, "Four states are pursuing 15-week bans mirroring Mississippi's legislation." The Supreme Court has already heard oral argument in *Dobbs v. Jackson Women's Health Organization*. Mississippi's "Gestational Age Act" protects unborn babies from abortion after 15 weeks. The thinking is if the High Court agrees this law meets constitutional muster, these states want to have a law in place.

Second "Thirteen states have proposed their own version of Texas's ban, which deputizes private citizens to enforce the law through civil suits." We've written many times about Texas's Heartbeat Law. To this date it has rebuffed numerous challenges both at the Texas Supreme Court and the United States Supreme Court. Under SB 8, abortions may not be performed after the unborn child's heartbeat is detectable, generally around the sixth week of pregnancy. States differ on who has standing to sue and whom they can sue.

Third, "Six states are currently considering new 'trigger laws.'" These are law passed in anticipation of the day *Roe* is overturned.

And fourth, "Eight states are reviewing bans on medication abortion, which now accounts for more than half of abortions nationwide." (Medication abortions are chemically induced abortions.) They are labeled "safe, safe, safe."

Christina Francis is chair of the board of the American Association of Pro-life Obstetricians and Gynecologists (AAPLOG). She has debunked the "safer than Tylenol and Viagra, and 14 times safer than childbirth" numerous times.

One of the largest studies to date, which analyzed high-quality registry data obtained from nearly 50,000 women in Finland, found that the overall incidence of immediate adverse events is four-fold higher for medical abortions than for surgical abortions. The same study showed that nearly 7% of women will need surgical intervention — a significant number when you consider there are nearly 900,000 abortions per year in the U.S., 40% of which are medication abortions.

On the pro-abortion side, "Seventeen states have homed in on protecting the right to abortion or strengthening existing statewide Protections."

This is followed by questions asked of Caroline Kitchener. Here's the first: "States are pursuing a ton of abortion bills ahead of the Supreme Court's ruling on Mississippi's 15-week ban this summer. What's really stuck out to you this year?"

The Washington Post

Kitchener replied

We see a lot of antiabortion bills every session, but the stakes feel really different this year. When Republican states have passed these wildly restrictive laws in the past, they've always been blocked by the courts, ruled unconstitutional as a clear violation of Roe v. Wade, which protects the right to abortion until a fetus is viable outside of the womb.

But this year, all bets are off. Texas found a way to ban abortions after six weeks. The Supreme Court could overturn Roe in June. Antiabortion lawmakers are watching all this — and they're excited.

Correct. We are excited!!

Tinslee Lewis, Child Given 10 Days to Live, Defeats Odds and is Released from Hospital

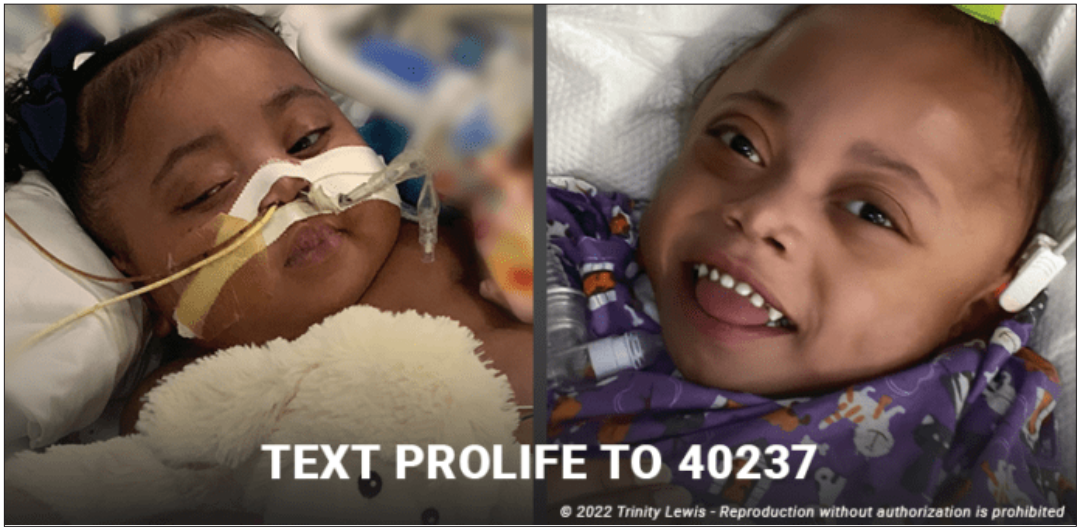
By Texas Right to Life

Tinslee Lewis, the toddler given 10 days to live under an anti-Life Texas law, was released from the hospital Thursday, April 7, to go home with her family.

In November 2019, Tinslee became a victim of the deadly Texas 10-Day Rule, which places a 10-day countdown on patients' lives after a hospital's internal committee authorizes the withdrawal of life-sustaining treatment against one's will. Texas Right to Life's patient advocacy team intervened on the ninth day of the 10-day countdown. Now, over 800 days later, Tinslee is alive, thriving, and growing. A happy and strong toddler, Tinslee's health has so steadily improved that the hospital released her to go home.

Trinity Lewis, Tinslee's mom, responded:

"We are so thankful for everyone who pulled together to help my daughter, including the doctors at Cooks, Texas Right to Life, our attorneys at Daniels & Tredennick law firm, Joe Nixon, Kassi Marks, and Protect Texas Fragile Kids. We have been cherishing and enjoying Tinslee being home, and we appreciate everyone who stepped up to help in any way as well."



Tinslee Lewis' story gained national attention when the deadly Texas 10-Day Rule was imposed on her at nine months old. Under the 10-Day Rule, hospitals may legally impose a countdown on patients' lives against their own and their family's will. So long as the hospital's own ethics committee approves imposing the countdown, hospitals are legally allowed to end basic life-sustaining care (like a ventilator) to the patient. The sheer inhumanity, injustice, and cruelty of this Texas law was brought to light when the 10-Day Rule threatened the life of an innocent nine-month-old little girl.

Tinslee's success story shows that in the absence of an anti-Life countdown, families and hospitals can work together for the benefit of the patient. Tinslee has received excellent care from Cook Children's Medical Center. It is with their efforts that Tinslee will now transition to home health care. Meanwhile, Texas Right to Life is committed to doubling our efforts in the Capitol and with our full time patient advocacy team to combat and stop the deadly 10-Day Rule from destroying the lives of more vulnerable patients like Tinslee.

Thank you for standing with Tinslee, and please continue to pray for the Lewis family and all patients victimized by the 10-Day Rule.

Two babies abandoned at birth, only one survives

By Dave Andrusko

Two weeks after a woman walked away having just given birth to a baby on a sidewalk in Omaha, Nebraska, another newborn baby was abandoned in Memphis, Tennessee. Baby Boy #1 was lucky. Witnesses were present when the mother gave birth and cared for him.

Baby Boy #2, tragically, was not so fortunate. Called by a woman who found him naked and not breathing, soon after they arrived "Southaven Police soon realized the baby was dead," Anders Anglesey reported.

The woman, a critical care nurse, "told local news media the placenta was still connected and that she did not hear anyone knock on her door, or have any idea why the baby was left outside her home."

Reporting for the *Western Journal*, Amanda Thomason wrote that "Trinity Shakespeare, 27, of Omaha, is charged with felony child abuse in the Feb. 13 incident, according to the Omaha Police Department."

Sheila Allee described how horrified onlookers were. She

was one of the people who stepped in that morning near the intersection of 24th and P Street, though she says the whole thing was "traumatizing" and "wrong."

"She came up over here, right?" Crane told KETV-TV. "She was cold. She, she was in pain. She was crying and I know her."

The woman refused medical treatment, and the medics who arrived with the ambulance left, but thankfully enough people realized what was going on that they were able to gather blankets and wait for the baby.

Allee told the *Omaha World-Herald* that she went over and spotted the "beautiful baby boy." But Latrell Crane knew something was seriously wrong and not only because it was 15-degree weather.

"I come over and then the baby is on the sidewalk," Crane said. "Like, just in the fetal position, not breathing. Still her umbilical cord still attached, know what I'm saying? And then … it's just my instinct because I have two kids in my own, right? I grabbed the umbilical cord and wrapped around my hand.

"And I shook his chest. 'Come on, baby. Come on, come on, come on.' And he said, 'Wah, oh, wah.'

"I have two kids. My own two boys. That she just left him on the sidewalk … it's not cool. It's not cool at all, man. I was the one that saved him."

"Many have wondered what could cause a mother to abandon her newborn infant in such a shocking way," Thomason wrote. "According to the *Omaha World-Herald*, Shakespeare told a friend she'd been using marijuana and meth."

When she was released from the hospital, Shakespeare was arrested on a charge of felony child abuse and taken to jail.

House Bill 3, the Humanity in Healthcare Act, our 6 Pro-Life Bills in 1, has passed and will be signed into law

By Addia Kathryn Wuchner

Serving as a voice for the unborn and prolife Kentuckians, Kentucky Right to Life commend the Kentucky House and Senate members for their outstanding work this sessions and especially for their override of Governor Beshear's veto of HB 3!

Kentucky women deserve better than risky do-it-yourself, mail-order-abortions. Women facing an unplanned pregnancy deserve the opportunity to learn about their options other than abortions, but also they deserve their reproductive health be respected, rather than offered an online do-it-yourself at home abortions, and a mail-order remedy for such a serious life impacting decision, as terminating the life of her child.

House Bill 3 is the results of over a years' work! It has been an honor to work with prolife leaders in the House and Senate. We want to thank the entire Kentucky ProLife Caucus, and especially Representatives Tate, King, Prunty and Bechler in the House along with Senators Max Wise for his work on SB 321 and the 15 week abortion restriction and Sen Alvarado.

The risky business of mail-order abortions was the result of the FDA's decisions to stop enforcing their longstanding health regulations and guidelines for prescribing and dispensing RU486, a two-pill regimen for medical/non-surgical abortions, and the in-person meeting with a medical provider.

Kentucky Right to Life and your legislators believe Kentucky women deserve better than risky do-it-yourself, mail-order-abortions!

While House Bill 3 will not end abortion in Kentucky completely, it is another bold and comprehensive Prolife measure.

HB 3 reflects the General Assembly's commitment to Kentucky's most vulnerable citizens(comma) and General Assembly's dedication in advocating for justice and safe healthcare practices for the child and their mothers.

HB 3 reflects the General Assembly's commitment to Kentucky most vulnerable citizens and their dedication in advocating for justice and safe healthcare practices for the child and their mothers.

A special thank you to you for your calls asking your Legislator to vote "YES" to override the Governor's veto on HB 3!

It has been a long session and your legislators have worked extremely hard. When the final vote is cast and the gavel falls declaring Sine Die later today the 2022 Legislative Session will be a wrap.

I have one more favor to ask, please take a moment to call Frankfort one more time, just to say thank-you for the vote on HB 3 to override the veto! Please call the Legislative Message Line at 1-800-372-7181

As always, thank you for your support of Kentucky Right to Life and for being the voice of the smallest and most vulnerable.

Great news: Delta Hospice Society elects Board of Directors who oppose euthanasia

By Alex Schadenberg, Executive Director, Euthanasia Prevention Coalition

Great news: More than 75% of the members of the Delta Hospice Society voted to elect a new board that oppose euthanasia (MAiD) and also supported a revised constitution and bylaws to ensure that Delta Hospice Society provides palliative care that affirms life to its natural end. Many supporters of the Euthanasia Prevention Coalition are also members of the Delta Hospice Society.

In February 2021, the British Columbia Ministry of Health defunded the Delta Hospice Society (DHS) and expropriated its 10 bed hospice building because the DHS refused to participate in euthanasia.

On Saturday, March 26, an online meeting was held for the Delta Hospice Society members to vote on a new board of directors and a revised constitution. However, the March 26 meeting was not finished and was completed last weekend.

There were issues with the online platform but everyone who joined the meeting was able to vote online or by phone.

I was elected to the DHS Board of Directors. The Euthanasia Prevention Coalition supports the direction and goals of the Delta Hospice Society.

The Delta Hospice Society will soon initiate its plans to create an independent hospice that is privately funded and does not provide euthanasia. The DHS is committed to creating safe places for people to die.

Editor's note. This appeared on Mr. Schadenberg's blog and is reposted with permission.

Results so encouraging they will make you want to work 10 times harder

From page 2

come November 5. And, even by normal first mid-term jitters, Democrats are plenty scared. While each incumbent retires for a different set of reasons, by a two-to one margin, 29 Democrats have announced their intention to not run for reelection, compared to just 14 Republicans, It's enough to shake even the staunchest Democrat.

So what do Democrats do? Jennifer Rubin is a pro-abortion *Washington Post* columnist and as partisan as they come. "President Biden's approval ratings remain a deeply worrying sign for congressional Democrats' midterm prospects," she wrote in the understatement of the year. "If voters are mad at Biden, they will likely take out their anger on anyone with a 'D' after their name.

The first of her four suggestions for how "Biden can help these Democrats" is to "venture beyond the White House more than he has." Of course that is political suicide. You simply don't know the President will say when he goes off script.

Jon Levine was brutally candid.

A November poll by Punchbowl news found that 76% of Democratic Hill staffers believe the party will lose the House this year. Some polls show President Biden's approval ratings in the low 30s.

"I think the midterms are going to be bad for Democrats," said pollster Carly Cooperman. "Biden's job approval continues to grow increasingly negative and he has negative ratings on the economy and his handling of the pandemic."

Multiple Democratic staffers confirmed the situation seems grim and goes beyond the normal historical headwinds that typically beset a president's party during midterms.

There are many, many stories filled with quotes from panicky Democrats. Here's one from *Meet the Press* host Chuck Todd. On March 2, "Todd openly panicked over the Republican Party's lead in his network's poll of the generic congressional ballot on Sunday, calling it a 'huge red flag,' and remarked how the GOP hasn't led in NBC's generic congressional ballot poll since September 2014. …"

To quote Stanage, "But right now, the picture is grim, and getting grimmer, for Democrats."

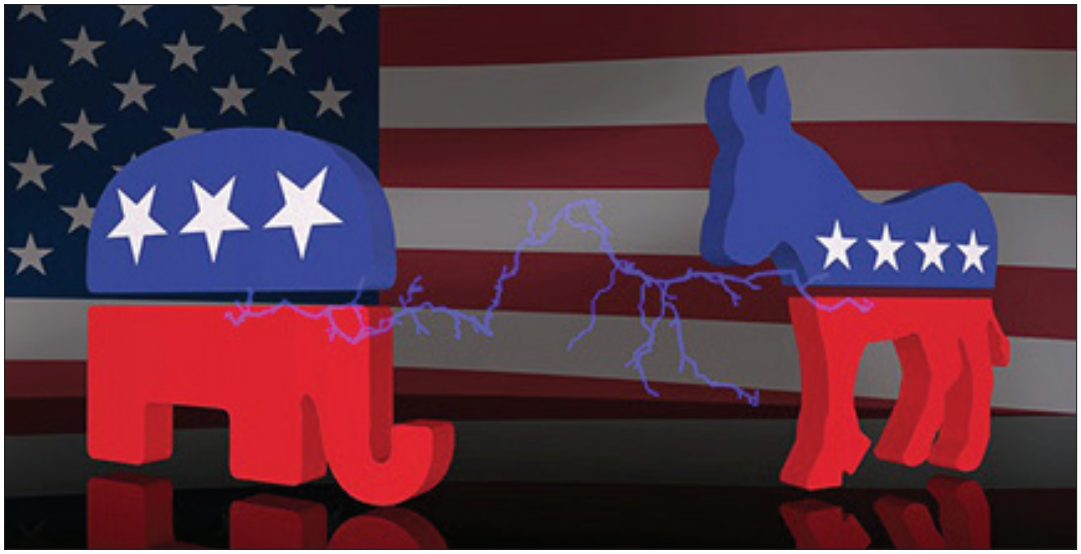
This should both encourage pro-lifers and motivate us to work harder than ever

In Pennsylvania, Republicans have converted four Democrats for every Republican who has switched to the Democratic Party

By Dave Andrusko

Pennsylvania is a pivotal state and key to the outcome of any presidential race. While 2024 (a presidential year) is a long ways off, 2022 (when a Senate seat and all 18 House seats is up for grabs) is staring every candidate in the face.

That's why "Republican Registrations Surge in Pennsylvania in Warning Sign for Democrats" is so telling).



Here's the lead from Nathan Layne and Jason Lange:

> **PHILADELPHIA (Reuters) – Republicans are registering formerly Democratic voters at four times the rate that Democrats are making the reverse conversion in the battleground state of Pennsylvania, a warning sign for Democrats as they try to keep control of the U.S. Congress.**
>
> **The Republican gains in Pennsylvania, home to a critical U.S. Senate race, follow a pattern seen in other states that could have competitive contests in November's elections, as high levels of disapproval with President Joe Biden's handling of his job are helping narrow the long-held advantage held by Democrats in numbers of registered voters.**

Democrats have counted on Philadelphia, a traditional stronghold, but even there the advantage has shrunk. "Voter data shows that 1,315 Democrats in the city have filed forms this year to change their party registration to Republican, more than four times the number of Republicans making the opposite switch," according to Layne and Lange,

In other words, what is happening in The Keystone State is not unique. It is emblematic of larger trends.

Layne and Jason Lange write that

> **Nowhere is the Republican advance in voter registration more evident than in Pennsylvania, where so far this year Republicans have converted four Democrats for every Republican who has switched to the Democratic Party, according to data published by Pennsylvania's Department of State. That's on track to be the highest conversion rate in at least a decade and well above 2016, when Republicans took the White House, House of Representatives and Senate.**

Conclusion? "This is bad news for the Democrats," said Kevan Yenerall, a political scientist at Clarion University in Clarion, Pennsylvania."

The issues that resonate everywhere—led by worries about inflation and crime—are not the only reason for Republican gains:

> **[A] growing number of Pennsylvania voters have become disillusioned with the Democratic Party over its perceived shift leftward on cultural matters, said Terry Madonna, a senior fellow in residence at Millersville University, a longtime political analyst in the state.**
>
> **Madonna pointed to Republican Glenn Youngkin, who won the governorship of Virginia last year after campaigning on a promise to ban the teaching of critical race theory in schools, as an indicator of what will resonate with Pennsylvania voters.**

One other thing to emphasize. *Reuters* "examined registration data in six states that could see tight U.S. Senate races in November and which generally require voters to be members of a party to participate in nominating contests." Reuters added, "While each state tracks voter registration differently, the review pointed to Republican gains in four of those states, and no substantial difference in two of them."

We will keep you updated.

Yelp will help employees pay for out-of-state abortions

By Dave Andrusko

Starting next month, Yelp, the online search and review platform, will "offer employees and their dependents financial assistance through their insurance if they need to travel out-of-state for abortion care," the *New York Times* reported.

According to Miriam Warren, the company's chief diversity officer, employees will be able to submit receipts for travel expenses directly to their health insurance company. "So no one else at Yelp is ever going to know who is accessing this, or how or when, and it will be a reimbursement that comes through the insurance provider directly," she said. Yelp employs over 4,000 people.

Yelp joins companies including Citigroup Inc., Bumble Inc., Match Group Inc., Apple and Levi Strauss & Co., Uber, and Lyft, in defraying expenses incurred in traveling out of state to abort.

Texas's Heartbeat Law is often cited as the reason for companies to take sides on abortion. S.J.8 protects unborn children whose hearts have begun to beat, usually around six weeks. Three other states have passed laws which protect unborn children at the end of the 15th week with more expected to pass.

"Last month, Citigroup became the first major bank to disclose that it will pay travel costs for employees affected by the law in Texas, where it has over 8,000 workers," according to Alisha Haridasani Gupta and Lauren Hirsch.

Yelp, and perhaps others, not only will facilitate abortion, they will also direct women away from Pregnancy Help Centers.

"Yelp's travel benefit is part of its longer-term efforts on abortion access," the *New York Times* reported. "In 2018, the company said it would do more to make sure Yelp users clearly understood the difference between abortion clinics and 'crisis pregnancy centers,' which aim to steer people away from terminating a pregnancy."

The pro-abortion Guttmacher Institute applauded the activism.

"It does feel like there is an opening here for companies to really step in and step up," said Elizabeth Nash, principal policy associate on state issues at the Guttmacher Institute. "You need a real groundswell of support."

Meanwhile, "State Rep. Briscoe Cain said he sent a cease-and-desist letter to Citigroup's chief executive in March over its policy," Jennifer Calfas and Allison Prang of *The Wall Street Journal*. "In his letter, the Republican said he would introduce legislation that would prevent Texas localities from working with companies that provide coverage for abortion or pay for abortion-related expenses, like travel."

Life is a good which should always be cherished, protected, and loved

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

Something always strikes me in the days leading up to Easter. It is a passage from Scripture that is often repeated as Christians mark the crucifixion and death of Jesus.

The line is a question uttered by Pontius Pilate, who stands in judgment of Christ. It is just a few words, but it's a quotation that could be the hallmark of our age: "What is truth?"

People who consider themselves agnostic when it comes to abortion policy frequently claim that they do not know when life begins—as if the truth is unknowable. But, in fact, each human life has a beginning and an ending. A 4D Ultrasound clearly shows us that the beginning is long before birth. The only logical conclusion is that life begins at conception.

Once that truth is accepted, it is difficult to deny the humanity of the preborn child—especially when that face appears on a screen. It is one thing to talk theoretically about "choice"—it is quite another to hear the heartbeat of "choice's" victim.

What is truth?

Truth is that a heartbeat can be detected 24 days after conception. Brain waves are apparent 44 days after conception. At 12 weeks in utero, the preborn child can move her arms and legs and suck her thumb.

Truth is that abortion takes the life of an innocent, unrepeatable human being.

Truth is that abortion destroys the physical bond between mother and child.

Truth is that each abortion changes the world forever, because it ignores the uniqueness of every baby.

The truth may seem inconvenient, but it is nonetheless the truth.

In the end, as has been often quoted, the truth shall set us free. Living in the truth will help us to rebuild a culture of life in our communities and in our country.

Instead of asking, "What is truth?" let us boldly ask, "What can I do to promote life?" For the truth of the matter is that life is a good which should always be cherished, protected, and loved.

Biden's poor approval numbers help drag down vulnerable Democrats re-election chances

By Dave Andrusko

We check in two or three times a week to see what is happening with President Biden's approval ratings. Generally speaking, they are very much like what see today from Rasmussen (40%) and *Reuters* (42%). The average "spread" (the difference between his positive support versus his negative support) is a whopping 11.5%. Were it not for one outlier, the deficit would be closer to 14 points.

Of course, the President is not up for re-election until 2024 but all of the House members and 1/3rd of the Senate faces the voters come November 5. And, even by normal first mid-term jitters, Democrats are plenty scared. While each incumbent retires for a different set of reasons, a two-to one margin (29 Democrats have announced their intention to not run for reelection, compared to just 14 Republicans) is enough to shake even the most staunch pro-Democrat.

Jennifer Rubin is a pro-abortion *Washington Post* columnist and as partisan as they come. "President Biden's approval ratings remain a deeply worrying sign for congressional Democrats' midterm prospects," she wrote yesterday. "If voters are mad at Biden, they will likely take out their anger on anyone with a 'D' after their name.

Pro-abortion President Joe Biden
Photo: Gage Skidmore

What to do? The first of her four suggestions for how "Biden can help these Democrats" is to "venture beyond the White House more than he has." Of course that is political suicide. You simply don't know the President will say when he goes off script.

Jon Levine was brutally candid.

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"I think the midterms are going to be bad for Democrats," said pollster Carly Cooperman. "Biden's job approval continues to grow increasingly negative and he has negative ratings on the economy and his handling of the pandemic."

Multiple Democratic staffers confirmed the situation seems grim and goes beyond the normal historical headwinds that typically beset a president's party during midterms.

There are many, many stories filled with quotes from panicky Democrats. Here's one last one from *Meet the Press* host Chuck Todd. On March 2, "Todd openly panicked over the Republican Party's lead in his network's poll of the generic congressional ballot on Sunday, calling it a 'huge red flag,' and remarked how the GOP hasn't led in *NBC's* generic congressional ballot poll since September 2014. …"

This should both encourage pro-lifers and motivate us to work harder than ever.

Born at just 22 weeks with "zero chance of survival," twins Haley and Harry go home after 140 days of intensive care

By Dave Andrusko

Imagine how you would feel as a parent if doctors told you your very premature twins had zero chance to survive? That what parents Jade and Steve Crane were told when they checked in at Queens Medical Hospital in Nottingham, England.

"The doctors were saying the babies wouldn't survive at this gestation, "Jade told *The Mirror's* Antony Thrower and Kate Lally. "I was still two weeks away from what the UK classes as viable and the babies were given a zero per cent chance of survival."

They were "warned by doctors it could be a miscarriage as the tiny tots were so young, telling them to 'prepare to say goodbye."

What proved to be the crucial difference? "It was only because I was at a teaching hospital and that the babies were born with signs of life that they chose to intervene medically."

Now, after 140 days of intensive care, Harry and Harley have been cleared to go home!

But that's jumping way ahead in the story. From Thrower's and Lally's account, the twins' survival really was, in that overworked but in this case accurate description, miraculous.

The couple underwent eight cycles of IVF over 11 years as they tried to start their family, tragically suffering three miscarriages and an ectopic pregnancy before the twins' arrival.

Jade discovered she had an overactive immune system, causing her body to reject the pregnancies before the couple moved from a fertility clinic in Nottingham to one on Harley Street in London.

Jade was prescribed several types of medication in order to combat her immune system problems.

Jade added: "On our eighth cycle of IVF, we had two embryos transferred which both worked and we ended up with boy and girl twins.

"I couldn't let myself believe it, I was so fearful of a miscarriage or something going wrong. I was still in disbelief when we got to 20 weeks, and I hadn't even hit my third trimester when I went into labour so we hadn't bought anything.

"The few bits of clothes that I did buy made me think that I better keep the tags on just in case – you just don't want to let yourself believe."

Jade began leaking fluid on October 26 and did so for several days. She was just 22 weeks along. They checked in at Queens Medical Hospital in Nottingham.

In spite of all the very understandable gloom-and-doom prophesies, "I knew they were ok but was being told they wouldn't survive at this gestation," Jade said.

"It was only because the babies were born with signs of life that they chose to intervene medically. They were alive, moving around, and they cried. Their little cries sounded like a tiny kitten."

On March 21 the twins were allowed to home — just two weeks after their initial due date!

"The absolutely stunning doctors, nurses and surgeons have all been part of the making of this moment," Steve said. "It's hard to say goodbye to them but I hope I never see them again

Don't be fooled by pro-abortion spin

By Dave Andrusko

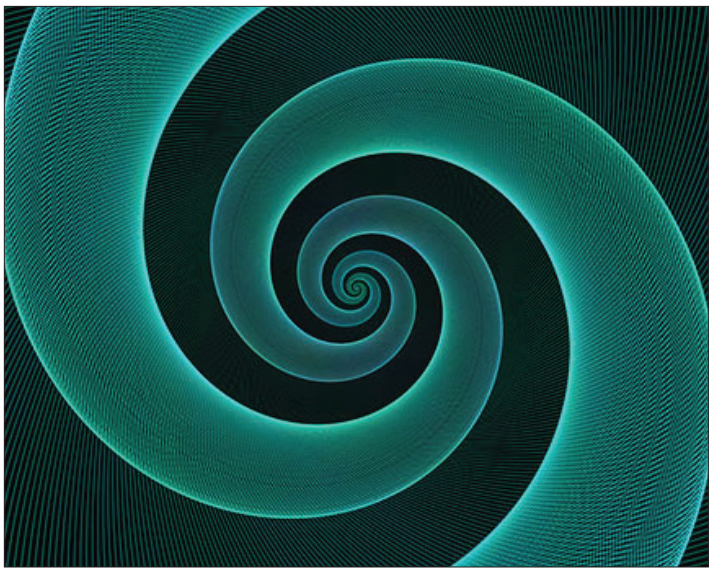
If you believe—and why should you?—anything about abortion from either the *Los Angeles Times* or the *Huffington Post*, you should be aware of what they are pushing nowadays. You are going to hear it repeated over and over again. But saying the same thing a thousand times doesn't make it any the less false.

In a word, they are eager to peddle the line that the pro-life movement and many Republicans are "comfortable pushing bans without rape exception," to borrow the headline of Alanna Vagianos of the *Huffington Post.*

Jennifer Haberkorn of the *Los Angeles Times* draws the same conclusion in slightly different wordage. "Just as states may be on the verge of regaining expansive authority to outlaw abortion, eliminating rape and incest exceptions has moved from the fringe to the center of the antiabortion movement."

Really? I work at the "center of the antiabortion movement"—National Right to Life. Let's dig deeper into these deliberately misleading statements.

Their focus is on the laws that save unborn babies **after** the 15th week. These have already passed in four states and we will likely have a total of five states by the end of the session. We hear they have no "exceptions" for pregnancies resulting from rape.



But prior to the end of the 15th week, none of these laws have specific "exceptions" carved out for **any** circumstances. During the first 15 weeks of pregnancy, abortions for rape, or any other reason, are allowed and legal.

Likewise, Heartbeat laws are cited for having no exceptions for rape when in fact, abortions for rape or for any other reason, are allowed and legal prior to the baby having a detectable heartbeat.

Naturally, pro-abortionists want to portray pro-lifers and pro-life Republican officeholders as, to be polite, inconsistent. What to say?

#1. National Right to Life is committed to saving as many babies as we possibly can as soon as we can. Our ultimate goal is legal protection for all unborn babies.

#2. In addition, pro-abortion groups like to portray the pro-life movement as unconcerned about the women who have abortions but this isn't true. For example, NRLC would never support laws that would target women for punishment. They are abortion's second victim.

#3. Pro-abortionists want to talk about abortions earlier in pregnancy. But 15 weeks is already in the second trimester. Support for legal abortion drops dramatically in the second trimester and drops even more in the third trimester. Poll have shown majority opposition to abortion after the first trimester.

Attempt to Use War in Ukraine to Broaden Access to Abortion

By Marie Smith

The humanitarian crisis in Ukraine has brought governments and organizations together to save lives, relocate refugees and provide the necessities of life, especially food, to those who remain in Ukraine. Pro-abortion organizations, however, view the growing emergency as an opportunity to change sovereign laws restricting abortion, provide abortion-inducing drugs in humanitarian kits, establish free abortion, fund pro-abortion NGOs and block funding to groups working to help Ukrainian refugees if the organizations oppose abortion.

In a Call to Action, national and international pro-abortion organizations—including Amnesty International, the Center for Reproductive Rights, International Planned Parenthood Federation, and Women's Link Worldwide—address policy makers across Europe and the world. Their message has one purpose—to advance access to abortion and the entire sexual and reproductive health and rights (SRHR) agenda.

The groups make a number of demands. They want the European Union, donor governments and the broader international community to ensure that all humanitarian responses "prioritize the SRHR of all women and girls" beginning with reproductive health kits that include "mifepristone and misoprostol for medical abortion".

The groups seek to overturn laws restricting abortion in countries which have welcomed Ukrainian refugees and call for "urgent political support, guidance and technical assistance to the Governments of Hungary, Poland, Romania and Slovakia to facilitate the removal of legal and policy barriers that are impeding the provision of essential sexual and reproductive health care."

They seek "cross-border access to sexual and reproductive health care where necessary to overcome national legal barriers and severe restrictions in transit and host countries", with special emphasis on "swift and effective measures to facilitate and support urgent access to early medical abortion, through supporting cross-border and telemedical service-provision".

Funding receives special attention as the groups seek financial and political support for themselves and for like-minded pro-abortion organizations while they demand that "financial assistance is not provided to anti SRHR and anti-equality organizations and actors in Hungary, Moldova, Poland, Romania, Slovakia or Ukraine."

One wonders if this broad opposition to pro-life support includes denying financial support to faith-based organizations and churches which are providing much of the humanitarian aid and enjoy the trust of the Ukrainian people.

The organizations also address the Governments of Hungary, Moldova, Poland, Romania, and Slovakia with a message that ignores national sovereignty and the right of each country to determine their own laws regarding the protection of unborn children and their mothers from the violence of abortion.

The demand is made that the Governments provide urgent financial assistance to "those gender equality, SRHR and women's rights organizations who are providing frontline protection…and ensure this assistance includes coverage for the costs of…abortion care." They also demand that Governments issue "policy guidance clarifying that sexual and reproductive health care, including emergency contraception, contraception and abortion care…is essential health care that should be provided free of charge and that health-care providers will be fully reimbursed… for the provision of this care to all those fleeing Ukraine."

The obsession with the destruction of the lives of preborn children whose mothers have fled horrendous and dangerous conditions seeking peace and safety includes the demand that these Governments: "Ensure that medical abortion in early pregnancy is legal and accessible for all those fleeing Ukraine, including by removing barriers to abortion care and aligning national policies on abortion with WHO guidelines." The WHO guidelines oppose restrictions on abortion, including those based on viability of the unborn child.

Cheering When the 'Fetus' Dies In Darkness

By Tim Graham

Editor's note. This is excerpted from a column that appeared in Newsbusters. Alas, the legislature subsequently overrode Gov. Hogan's veto.

Abortions are violent acts ending in death. The badly named "mainstream media" love them.

The Washington Post, which claims to hate things "dying in darkness," recently boasted of a new pro-abortion law passed in Maryland over the veto of Republican Gov. Larry Hogan.

Reporters Erin Cox and Ovetta Wiggins gushed "The new law puts Maryland at the vanguard of abortion rights nationwide, expanding access and requiring most insurance policies to cover the entire cost of the procedure." The Post described this as "abortion protections."

Their Orwellian terminology betrays their love of abortion. These laws "protect" the murder of unborn children, and Maryland is a "vanguard for access." (The reporters also refer to "care for pregnant people," in case they weren't mangling the lingo enough.)

The same ideological sounds came in an April 6 *Post* story on the Metro front page. "Antiabortion activists said Tuesday they obtained five fetuses from a medical waste disposal driver," their story began. Two women with the group "Progressive Anti-Abortion Uprising" said they obtained a box that contained remains from 115 babies from a medical-waste disposal driver.

They reported to the D.C. police that they had kept five larger baby corpses in a D.C. apartment. They took photos and videos of the spectacle. Police took custody of the remains and seemed more interested in investigating the abortion opponents than the abortionists.

The three reporters on this story – Michelle Boorstein, Peter Hermann and Marissa J. Lang – characterized the testimony of the "antiabortion" activists but wouldn't stoop to quoting them, although they did quote a letter from congressional Republicans protesting the D.C. government's refusal to autopsy the babies.

But the *Post* offered florid quotes from the "abortion access advocates" — Melissa Fowler of the National Abortion Federation, Tarina Keene of Pro-Choice Virginia, and Rosemary Codding of the Falls Church Healthcare Center, an abortion clinic.

The New York Times had a story with similar lingo. The headline was "Anti-Abortion Activists Say They Were Allowed to Take 115 Fetuses." The word "fetus" is a dehumanizing word, which is exactly the point. At least the pro-lifers were quoted by the *Times*.

Maryland Gov. Larry Hogan

This focus on the disposal of unborn babies as medical waste is not a topic the media feminists want to discuss before the public. So the story hasn't aired on *ABC*, *CBS*, *NBC*, *MSNBC*, *CNN*, *PBS*, and *NPR*. The so-called "reality-based" networks think these grisly realities are not advantageous for national consumption. *NPR* offers a nightly newscast with the comedic title *All Things Considered*, but this taxpayer-funded "vanguard" routinely refuses to offer any air time for abortion foes.

The balance came from the *Fox News Channe*l, the network all these other networks despise. They provided interviews on this story with pro-life guests on *Tucker Carlson Tonight* and *The Ingraham Angle*.

Some liberals disparage using the term "pro-abortion" to describe those celebrating the energetic use of "abortion access." But the shoe fits. Our pro-abortion media don't treat abortion as a tragic end. They treat it like a precious new beginning…for some.

Iowa Senators pass bill pledging $1 million to pregnancy resource centers

By Bridget Sielicki

Lawmakers in the Iowa Senate have passed a bill that would allocate $1 million to pregnancy resource centers that provide help for women experiencing unplanned pregnancies. The bill also extends Medicaid coverage for the postpartum period. Senate Bill 2381 passed with a vote of 32-16 and now heads to the House for consideration.

Senator Mark Costello, the bill's sponsor, calls it the "More Options for Maternal Support," or "MOMS" bill. Costello said he had hoped that the bill would receive more bipartisan support, but instead abortion supporters saw it as an effort to restrict abortion. According to the *Des Moines Register*, the bill does stipulate that the funds may not be used to provide abortions, refer women for abortions, or encourage or counsel a woman to get an abortion.

"We're just trying to help make it rare, to help provide women with the support that they need to feel comfortable making that decision to have that baby," Costello said. "And so I think it makes a step forward."

According to *Iowa Public Radio*, the state currently offers Medicaid health insurance coverage for the first 60 days after childbirth. This bill extends that coverage to a full year. Senator Chris Cournoyer spoke in support of the bill and said that the extended Medicaid coverage provides more help for mothers who might experience postpartum depression or other health issues in the year following birth.

Despite the obvious efforts to help women in need, Planned Parenthood issued a statement against the bill with the complaint that pregnancy resource centers are deceptive simply because they do not offer abortions.

"Not only is this bill dangerous, but it also puts the health of Iowans, many of whom don't know about [crisis pregnancy centers'] deceptive practices and lack of actual health care," said Sheena Dooley, spokesperson for Planned Parenthood Advocates of Iowa. "And it diverts taxpayer dollars that could be used to expand affordable, high-quality reproductive health care during a time when Iowa faces multiple health crises."

While it's true that pregnancy resource centers do not offer abortions, they instead provide real, tangible help to women in need, for free — help that they won't find at Planned Parenthood. Most offer things like baby food, clothing, diapers, formula, furniture, car seats, and anything else a pregnant or new mother would need for her baby, in addition to the ability to connect young families with social support services. In 2019 alone, more than two million women took advantage of these services. Countless women have spoken of the way these pregnancy resource centers have helped them.

Cournoyer spoke of her optimism about how this bill will help mothers. "This bill helps provide support and resources so women don't think that abortion is their only option," she said.

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

New Study Claims, But Fails to Show, Physical Exams, Ultrasounds Unnecessary for "Safe" Chemical Abortions

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

It seems like there's a new study just about every week or so claiming that telemedical chemical abortions are "safe" and "effective." They take some aspect of telemedical protocol – the estimation of gestational age, the diagnosis of ectopic pregnancy, the side effects like pain and bleeding, the number of reported complications, etc. – and collect and publish data showing that, despite reasonable medical expectations and against all common sense, the number of "successes" is high, the number of complications is low, and the overwhelming majority of patients find the experience satisfactory.

The latest study by a few of chemical abortions biggest promoters – Ushma Upadhyay, Elizabeth Raymond, Beverly Winikoff, and others – is titled "Outcomes and Safety of History-Based Screening for Medication Abortion: A Retrospective Multicenter Cohort Study" and was published in the online version of *JAMA Internal Medicine* on March 21, 2022.

The study looked at data from 3,779 women having chemical abortions associated with 14 clinics in the U.S. between February 1, 2020 and January 31, 2021. Researchers in this study were specifically trying to determine whether women who were only asked to give their medical history (whether in person or over the phone or internet) to get the abortion pills fared as well as women having in person physical exams or ultrasounds as part of their screening for chemical abortion.

Not surprisingly, the abortion researchers, entrenched in the abortion industry, determined that just getting an oral medical history was sufficient. Women having these chemical abortions without physical exams or ultrasounds, they

claim, found them about as "safe" and "effective" as those of women who did have those exams. This was supposed to be the case whether the women came in to pick up the pills in person or had them mailed to their homes.

But, as usual, this involves a certain sleight of hand with the data, where hundreds of women disappeared between the time of the initial interview, the dispensing of the pills, and the time when it came for researchers to tally the results.

Most of the women for whom they had data did abort successfully without serious complications. However, the researchers couldn't honestly make that claim about the women who didn't return their calls, those who, if they had problems, were the most likely to have had them treated elsewhere.

Problems with even basic claims

Before even getting into some of the bigger problems the study had patients lost to the study, it should be noted that even the study's basic claims about safety and efficacy of a protocol without an in person exam reveal deficiencies with their proposed modifications.

The Kaiser Family Foundation, which bills itself as an independent and authoritative source of health care information (but also happens to be one of nation's biggest promoters of chemical abortion), claims that mifepristone and misoprostol are 99.6% effective when used at nine weeks gestation or less. (The U.S. Food and Drug Administration says it should only be used up to 10 weeks after a woman's last menstrual period.)

That said, researchers in this study claim only an overall 94.6% effectiveness rate. Though that might still sound high enough to casual observers, such a drop represents a considerable increase in the failure rate for women using the abortifacients.

If, as the Guttmacher Institute tells us, more than half of current abortions employ chemical means, then even this small percentage represents hundreds or thousands of women.

According to Guttmacher's most recent survey of abortionist, there were 862,320 abortions performed in the U.S. in 2017. If exactly half of those were chemical abortions, that would mean 431,160 such abortions.

If these were the "successful" abortions, with the Kaiser efficacy rate—99.6%– that would mean just 1,732 failed chemical abortions for the whole country.

But the numbers of failed abortions jump to 23,650 if we take instead the efficacy rate –94.8%– "reported by the researchers in this 2022 *JAMA Internal Medicine* study passing out or mailing abortion pills without a physical exam or ultrasound.

That's a lot of women rushing to the emergency room with an incomplete abortion or scrambling to find a clinic which can surgically address the issue.

The authors of this study assert that it showed that "screening for medication abortion eligibility by history alone was safe and effective with either in-person dispensing or mailing of medications" and claimed further that they "obtained outcomes similar to published rates of models

See "New Study," page 37

The Radiance Foundation gives NRLC Prayer Breakfast speaker Catherine Davis its inaugural Dr. Mildred Jefferson Trailblazer Award

By Dave Andrusko

NRLC is proud to announce that Catherine Davis, the Founder & President of The Restoration Project, will speak at the Prayer Breakfast which will open National Right to Life Convention in Atlanta June 24. Catherine, a public speaker and civil rights champion, is a Magna Cum Laude graduate of Tufts University who attended the University of Bridgeport School of Law.

Coincidentally, she was the first recipient of the Dr. Mildred Jefferson Trailblazer Award, given by The Radiance Foundation. Dr. Jefferson was one of NRLC first presidents and was the first black woman to graduate from Harvard Medical School. She also blazed a trail as the first female surgeon at Boston Medical Center.

Ryan Bomberger is an Emmy® Award-winning Creative Professional who founded The Radiance Foundation (TRF), a life-affirming 501c3, along with his wife, Bethany. The Radiance Foundation has been blessed to work with Davis for many years.

This past week they gave Davis her award which included a $5,000 grant (to further her work to help abort *Roe*) as part of the award.

Ryan writes

When the award was announced to Catherine this week, there were plenty of tears flowing from both the Radiance Foundation founders and the recipient. Davis wrote: "Words can sometimes fail to describe the depth of appreciation being felt. This is one of those occasions. To be considered a trailblazer in the order of Dr. Mildred Jefferson is a high honor indeed and I am grateful to the Radiance Foundation for considering my work worthy of this prestigious award. Thank you!"

Ryan said of Dr. Jefferson

She dedicated her life to caring for the poor and the sick. Her passion to defend the most marginalized led her to cofound the National Right to Life Committee and live a life devoted to fighting the violence of abortion.

Thanks to incredible donors, we have established a fund to honor the incredible legacy of Dr. Jefferson. Each year, during the week of her birthday, we will honor an individual who exemplifies her courage, eloquence and tenacity. The inaugural Dr. Mildred Jefferson Trailblazer Award has been given to a passionate defender of Life, Catherine Davis, Founder of The Restoration Project.

Dr. Jefferson's first name was Mildred, Ryan writes, and it **means "mild strength." How prescient of her parents! God knew he would use someone with such a gentle spirit in mighty ways. She was a warrior. And that fight inspired my wife Bethany and me to set up a fund and create the Dr. Mildred Jefferson Trailblazer Award to help keep her legacy alive. She was born on April 4th, 1926, so we felt it was fitting to illuminate her life this week and bless someone else who carries that fire.**

For information about NRLC 2022, please go to https://nrlconvention.com.

Woman has abortion at six months; fertility clinic had implanted wrong embryo

By Dave Andrusko

Having learned that a fertility clinic had inadvertently implanted someone else's embryo in "Jane Doe," the Massachusetts mother of three aborted the child at six months.

She and her husband are now suing the New York Fertility Institute [NYFI] and three of its specialists, accusing them of "subjecting their family to "physical and emotional pain and suffering."

"The Does say their nightmare began with a phone call to NYFI on April 28, 2020, that led to three egg retrievals and a successful IVF procedure in July 2021," Tracy Connor reported.

Ms. Doe's obstetrician recommended genetic testing to rule out chromosomal abnormalities, and the couple was stunned when the results that came back suggested she had used a donated egg instead of her own.

"This result did not make sense, since Ms. Doe was supposed to be carrying her own embryo," the suit says.

According to the complaint, NYFI repeatedly told the Does that there was no way embryos could have gotten mixed up, even after repeated testing showed the same results. At one point, it alleges, the clinic said the mother must have "mosaicism"—an extremely rare condition in which someone had two forms of DNA.

It was now October 2021 and to settle the matter she had an amniocentesis which Ms. Doe described as "humiliating, stressful and physically excruciating for Ms. Doe," according to the lawsuit. The results, which did not come back for nearly a month, proved the baby was not genetically related either to Mr. or Ms. Doe.

"Ms. Doe and Mr. Doe did not know what to do," according to the *Daily Beast*. "They had grown to love this baby, who had already begun kicking. On the one hand, they did not want to lose her even if she was not genetically related to them. On the other hand, they could not imagine carrying a stranger's baby to term, only to potentially lose her in later legal battles to her biological parents, which would be devastating to the entire family."

The lawsuit said the couple was "stonewalled" when they tried to get further information from the New York Fertility Institute. "Ultimately, Ms. Doe and Mr. Doe had to make the most traumatic decision of their lives. On December 1, 2021, Ms. Doe terminated the pregnancy," according to the lawsuit.

Tracy Connor writes

The mixup is all the more shocking, the lawsuit says, because in the late 1990s, NYFI's embryologist Michael Obasaju implanted the wrong embryo in a different patient, resulting in a white woman giving birth to one white baby and one Black baby.

"The Defendants have a history of mixing up, mislabeling, and/or outright losing their patients' genetic material," the couple in the current suit, referred to as Mr. and Ms. Doe, charged.

According to the lawsuit, "Defendants' misconduct robbed Ms. Doe of the ability to carry her own child. …Ms. Doe and Mr. Doe are haunted by questions about what became of their embryos. They have needed to worry about whether their embryos were transferred to another unwitting couple, and whether they have another child or children out in the world whom they have never met?"

While it is true they don't know what happened to their embryo, there was nothing in the news accounts that suggested the parents of the embryo Mrs. Doe was carrying knew what happened to their child.

Judge Ketanji Brown Jackson confirmed to a seat on the Supreme Court on a vote of 53-47

By Dave Andrusko

On April 7 the Senate voted 53-47 to confirm Judge Ketanji Brown Jackson as the next associate justice of the Supreme Court. All 50 Democrats voted in favor, all but three Republicans–Mitt Romney, Lisa Murkowski , and Susan Collins—voted against.

She will replace Associate Justice Stephen G. Breyer after the Supreme Court's term ends in late June or early July.

"Most nominees take their oaths quickly after they are confirmed, but Breyer's unusual timetable means that cannot happen immediately," Mike DeBonis , Robert Barnes, and Seung Min Kim reported. "A confirmed nominee cannot become a justice until she has taken an oath to support the Constitution and a separate judicial oath to 'administer justice without respect to persons, and do equal right to the poor and to the rich.'"

In remarks made earlier today, U.S. Senate Republican Leader Mitch McConnell (R-KY) said "I see hallmarks of judicial activism in Judge Jackson's record and will vote 'no.'" His full remarks are posted below.

The last few weeks have confirmed a pattern that has played out repeatedly in recent decades. When Republican presidents make Supreme Court nominations, the far left and the media melt down. Absurd allegations, conspiracy theories, cheap gimmicks, and apocalyptic rhetoric are guaranteed.

But when Democratic presidents make nominations, Senate Republicans inquire about past rulings and judicial philosophy, and the country gets the serious process it deserves.

On Tuesday, I explained how 30 years of escalation by Democrats ushered in this assertive period for the Senate regarding judicial nominations. Now, and for the foreseeable future, the Senate views itself as a co-partner in this process.

On Wednesday, I walked through Judge Jackson's long and disturbing record of using judicial activism to go soft on crime. Today, I need to discuss how these disagreements affect the very bedrock of our Republic.

For multiple years now, the Democratic Party has waged an aggressive campaign to bully our independent Justices and attack the legitimacy of their institution. When the plain text of our laws and Constitution disappoint liberals' policy preferences, they mount radical campaigns to wreck the Court.

This civic cancer began on the fringe, but it's quickly metastasized through their party. Three years ago, sitting Senate Democrats sent the Court an absurd amicus brief, threatening retribution for a certain ruling.

Two years ago, the Democratic Leader rallied with radicals on the Court's steps and threatened multiple Justices by name if they didn't produce the policy result he preferred. Last year, when fringe activists wanted to dig up the discredited concept of partisan court-packing, President Biden lent it legitimacy with a presidential commission.

Now, just recently, the Senate Democratic Whip said that his side's court-packing proposals don't matter because they lack 60 votes to pass the Senate. This was cold comfort considering the Senator just voted to destroy the 60-vote threshold a few months back. So this nomination has occurred against a strange backdrop. The same Democrats who've spent weeks fulsomely praising Judge Jackson have spent years attacking her soon-to-be workplace.

This is why I needed to hear Judge Jackson denounce court-packing. Justices Ginsburg and Breyer had no trouble condemning these schemes loudly as sitting Justices. Surely President Biden could find himself an institutionalist in their mold.But Judge Jackson was the court-packers' favorite pick for this vacancy. And she refused to follow the Ginsburg-Breyer model. She signaled the opposite. She said she'd be 'thrilled to be one of however many.'

The left's escalating war against the judiciary is a symptom of a profound misunderstanding. Judicial activism sees the Court as a third legislature. The left wants one policymaking body with 435 members, one with 100, and one that consists of nine lawyers. But that isn't what the Founders created and it's not what the American people signed up for.

Judge Ketanji Brown Jackson
Photo: Lloyd DeGrane
CC BY-SA 4.0

We have seen over and over that when judicial activism triumphs over fidelity to the rule of law, our courts mutate into clumsy proxy battlefields for arguments that belong in this chamber and in 50 state legislatures. This is unfair to the American people and it damages our institutions, not least the courts themselves.

There is only one way to lower the temperature, depoliticize the courts, and protect the rule

See "Confirmed," page 40

Virginia General Assembly commends the 50th year anniversary of Virginia Society for Human Life's founding

By Olivia Gans Turner, President, Virginia Society for Human Life (VSHL)

It was as extraordinary opportunity to be a part of this celebration day when the Virginia General Assembly voted to commend the 50 year anniversary of Virginia Society for Human Life's founding. The lady in the chair at the center of the picture is Mrs. Geline B. Williams who along with her husband Alex organized the original VSHL chapter in order to prevent pro-abortion groups from changing Virginia's pro-life laws in 1967. They were successful until R*oe v. Wade* was handed down by the Supreme Court.

Members of the General Assembly and officers past and present of VSHL recognized the 50 year anniversary of the founding of the Virginia Society for Human Life. Del. Jimmie Massey presented a copy of the resolution passed by the House during the 2017 session.

Oregon will stop enforcing a residency requirement in state's Death with Dignity Act

By Dave Andrusko

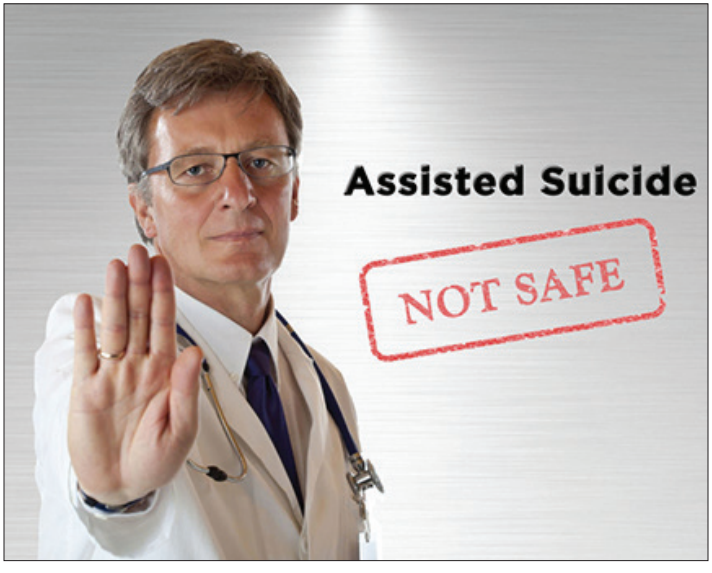
Oregon's so-called Death with Dignity Act was enacted in 1997, the first state in the nation to do so. For the next 25 years the state required residency, seemingly a commonsense, bare minimum. But Oregon has now abandoned even that.

According to *CNN*, "After an Oregon physician filed a lawsuit challenging the constitutionality of the residency requirement in Oregon's Death with Dignity Act, the state, along with the Oregon Medical Board and the Oregon Health Authority, agreed they would no longer apply or enforce the requirement – thus allowing non-Oregon residents to access medical aid in dying in the state."

Not surprisingly Dr. Nicholas Gideonse was represented by Compassion & Choices, formerly known as The Hemlock Society.

CNN's Raja Razek further explained that "The Oregon Health Authority, the Oregon Medical Board, and the Multnomah County District Attorney's Office 'agreed to draft internal directives stating that they would not apply or otherwise enforce the residency requirement,' according to the settlement."

NRLC 's strong opposition was widely quoted, including in *CNN's* story, the *New York Times*, and twice in a story appearing in the *Catholic News Service*.



"In the push to legalize assisted suicide laws here in the United States, proponents argue that there are so-called safeguards in place," said Jennifer Popik, JD,director of National Right to Life's Robert Powell Center for Medical Ethics. "Not only are these so-called safeguards totally inadequate, but they are regularly followed by efforts to remove them."

Laura Echevarria, NRLC director of communications and press secretary, added "Oregon's February 2019 report on its assisted suicide law showed that the terminal diseases that qualified some patients for the lethal overdose included diabetes and arthritis. These are not terminal conditions."

For example, she noted "In California, when a woman's insurance company would not cover her prescribed chemotherapy treatment, she inquired if assisted suicide was covered under her plan," Echevarria added. "She was told, 'Yes, we do provide that to our patients, and you would only have to pay $1.20 for the medication.'"

Of course, having no residency requirement means the state will become a magnet for people seeking to end their lives. Echevarria, told *The New York Times* that the change in this law "allows for anyone traveling to Oregon to seek assisted suicide. We do believe Oregon will become the assisted suicide tourism state."

Dr. Greg Burke, co-chair of Ethics Committee of the Catholic Medical Association, which counts 2,400 "health care professionals" in 115 local guilds among its membership, said a physician's role at the end of their life is not to abandon their patients but to "caringly walk with the patient through that uncertainty, alleviating suffering, while providing every opportunity for meaningful living as one prepares for death."

Since 1997, 3,280 people have received the assisted-suicide prescriptions. 2/3rds–2,159 people–have died from ingesting the medications, according to a report from the Oregon Health Authority.

Alas, that number is likely to spiral out of control.

To the pro-abortion mind, treating urinary tract infections are no different than having an abortion

By Dave Andrusko

Last week, *The New York Times* ran a story—"Abortion Pills, Once a Workaround, Are Now a Target"—whose subhead neatly summarized the story: "In advance of a Supreme Court decision, states are proposing new restrictions and heavier criminal penalties on medication abortion. In the first three months of this year, anti-abortion legislators proposed more than 100 restrictions on medication abortion in 22 states."

Kate Zernike writes, "Medication abortion is the new front in the nation's five-decade-long fight, as both sides anticipate that by summer the Supreme Court could overturn or pare back the constitutional right to abortion established in *Roe v. Wade*."

Of course, driving this narrative is not just the Supreme Court's decision in Mississippi's 15 week abortion ban, important as that is. Roughly half of all abortions today are medication abortion —chemical abortions—a dramatic shift from a few years ago.

The real kicker, of course, is what the FDA did last December. "Attempts to restrict abortion pills have accelerated since the Food and Drug Administration loosened its rules on medication abortion late last year," Zernike writes.

The Food and Drug Administration did not merely loosen its rules. Pregnant women are no longer required to go in person to the abortionist's office. The drugs can be mailed to them.

States are tackling medication abortions in various ways . Two examples. They propose to ban the pills altogether or require their state's informed consent to tell women that there is a good chance she can save her baby if she promptly changes course. The success of the Abortion Pill Reversal depends on a woman being told that there is a window of opportunity to reverse the effects of the lethal chemical if she seeks medical attention in time.

To Zernike, this nothing more than "anti-abortion activists "trying "to create doubts about abortion pills — calling them 'chemical abortion' and pushing regulations requiring doctors to tell women that they can reverse a medication abortion if they change their minds after taking the first pill."

One other point which so indicative of the way pro-abortionists think. Zernike quotes Dr. Jamie Phifer, the founder of Abortion on Demand. She "said she hoped the increasing use of telemedicine that the pandemic encouraged would also encourage acceptance of providing abortion pills that way.

> **"Seeing the clinician on your phone for treating your urinary tract infection and seeing the clinician on your phone for an abortion isn't going to be that different," she said.**

Urinary tract infection are no different than having an abortion. That sums up the pro-abortion mindset in ten words.

Cancel culture canceling life itself

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

A few days ago my 23 year old niece did something *extraordinary*. She had a *baby*. A precious 10 pound baby girl.

Whereas in the past, giving birth seemed like a natural, common, and somewhat ordinary progression of life (yet still inherently miraculous), today having a child, or even more so *children*, is nothing short of extraordinary.

With today's couples delaying marriage and often trading in bibs for leashes, the birthrate in the United States has hit its lowest rate *ever*. Some attribute this to the pandemic, but the fact is that the birthrate has been dropping steadily for several years.

The case against children has been simmering under the cultural surface for decades as the abortion industry has cast children as the enemy to be eradicated. *Children limit our freedom. Children require sacrifice. Children are expensive.*

The messaging has been subtle and steady. Now, however, it's screaming at us from billboards: "Stop Having Children!"

As reported by *Life News,* that's the very visible billboard campaign launched in Portland, Oregon by a pro-abortion group subscribing to anti-fatalism, a "philosophical and ethical stance against human reproduction…to radically reduce suffering and environmental destruction in the world."

This is Margaret Sanger 2.0. Like the founder of Planned Parenthood, this small but vocal group of extremists believes the way to eliminate suffering is to eliminate the sufferer.

If we stop having kids, we'll stop bringing people into a world that has problems. And there will be more resources for those of us granted the privilege of birth.

Cancel culture canceling life itself.

But there are problems with this sterile, short-sighted wokism.

The drooling babies, demanding toddlers, and difficult teens of today eventually become what you and I are now-- the older and wiser caretakers, the persistent problem-solvers, the productive contributors to society.

Babies become adults—people. And people are our *greatest* natural resource, fueling the world with their ingenuity, hard work, and good deeds. People discover, invent, cure, produce, and achieve. We imagine, overcome, inspire, seek a greater good, and above all, we love.

Canceling children today cancels tomorrow's generations, and that severely limits our potential as a society.

Just ask China.

After years of brutally enforcing a one-child policy, they are now scrambling to reverse their humanity deficit as reported in *Forbes* magazine. Couples are now "permitted" to have up to three children in China to replenish their population.

Billionaire Elon Musk has issued his own warning about global population decimation, stating, "Please look at the numbers – if people don't have more children, civilization is going to crumble, mark my words."

But the problem of canceling kids is bigger than labor shortages or economic impact. We don't just have children to supply tomorrow's workforce. Rather, children are the fullest expression of human love.

And when we have them, through the demands made and sacrifices offered, we learn to love in a way we hadn't before. We become more "other-oriented" which is not only beneficial to the family unit but good for society in general. Raising children, the citizens of tomorrow, is a chance to leave a legacy, our fingerprint on the future.

But children are not just our tomorrow, they are also our today. They surprise and delight, help us to stay grounded, and become lifelong friends, perhaps even our own caretakers. They give us more, much more, than they demand. It's not something we can quantify or even adequately articulate. If you know, you know.

What we need in our country is not anti-natalism billboards scaring young people away from parenthood, but a return to the very ordinary idea that having a family is a beautiful, worthwhile, and in its own way, extraordinary vocation.

As G.K. Chesteron said, "The most extraordinary thing in the world is an ordinary man and an ordinary woman and their ordinary children."

Let's make America extraordinarily ordinary again by welcoming children into a country that we can make better together.

Mississippi's 15 week abortion law is not "extreme," or "radical" but mainstream

By Dave Andrusko

We went through *a lot* of briefs (*amicus*—"friend of the court") to make our readers aware of what arguments pro-lifers were making to support Mississippi's 15 week limitation on abortion. It was a fascinating exercise, and I really appreciate the feedback which was highly instructive. We all, I believe, profited from the discussion of *Dobbs v. Jackson Women's Health Organization*.

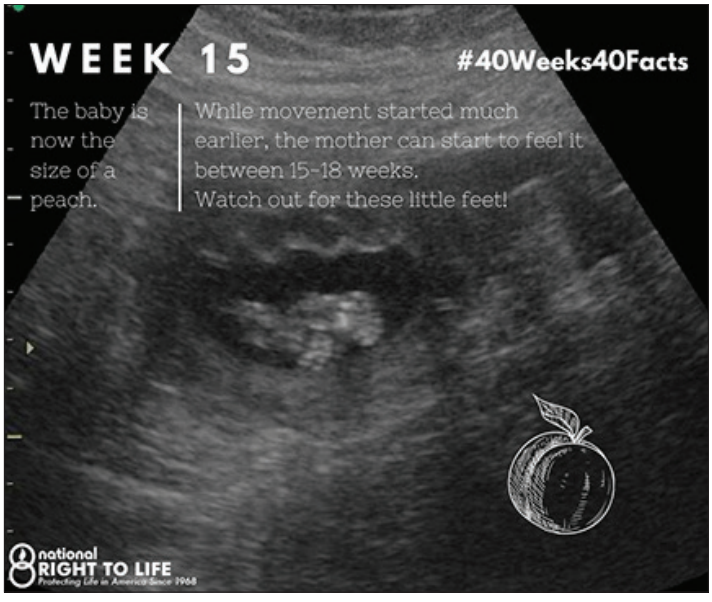
However, one element—hugely important—that I failed to highlight enough was just how extreme our nation's abortion law is. We are one of only seven nations that permit elective abortion past 20 weeks of gestation until fetal viability.

As Jeff Jacoby of the *Boston Globe* wrote, quoting Chief Justice John Roberts,

> **"[W]e share that standard with the People's Republic of China and North Korea."** (The other four are Canada, Singapore, the Netherlands, and Vietnam).

However, you wouldn't know that from the hysteria coming from the usual sources. Jacoby writes

> **Ardent supporters of abortion rights are appalled by the thought that Roe might be curtailed. They have characterized Mississippi's 15-week ban as a calamity for women's freedom and autonomy. The measure has been labeled "radical" (by House Speaker Nancy Pelosi), "not reasonable or moderate" (The New Republic), "severe, extreme, and unconstitutional" (Catholics for Choice), and "a near-total ban on abortion" (National Abortion Federation).**



"Most Americans don't see it that way, and neither do most other countries," he writes. We've talked several times about the survey taken for the *Wall Street Journal* which Jacoby brings up at this point in his column.

According to a new *Wall Street Journal* poll, "nearly half of US voters — 48 percent — support a ban on abortions after 15 weeks (with exemptions to protect the health of the mother), while only 43 percent are opposed." Who would think that is the case? Pro-lifers who follow public opinion with a passion.

Naturally, pro-abortionists are trying to spin this every which way but up but the results remain the same.

One other point. A 2014 survey of 198 countries found nearly all nations had a less permissive law that we do.

> **Among the nations of Europe, 13 countries prohibit abortion on demand entirely and allow a pregnancy to be terminated only in "exceptional cases," according to the European Centre for Law and Justice, which filed a friend-of-the-court brief in the Dobbs case. Of the remaining 34 countries where abortion can be accessed without having to give a reason, "eight states permit it only through the first 10 weeks of pregnancy, Estonia through 11 weeks, and a further 20 states through 12 weeks."**

Conclusion? "In short, the abortion laws of nearly every European country impose *stricter* gestational limits than the 15-week standard of the Mississippi law."

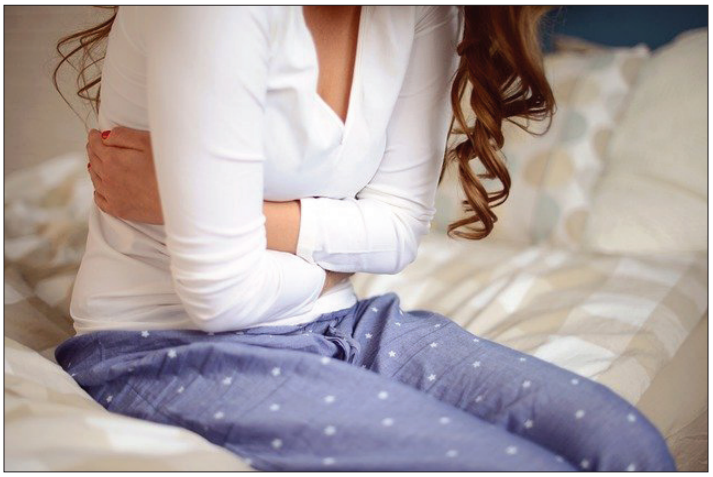
Excellent piece. You can read it at bostonglobe.com.

16-year-old girl describes horror of home abortion at 20-week gestation

By Right to Life UK

A sixteen-year-old girl has described the horror of home abortion after a phone consultation miscalculated her gestation by 12 weeks.

Savannah, not her real name, had a phone consultation with the abortion provider, the British Pregnancy Advisory Service (BPAS) who determined that she was less than 8 weeks pregnant.



When she went to the clinic to collect the abortion pills, the medical professionals did not perform a medical examination or a scan.

After Savannah took both abortion pills at home, she felt "really bad" pain.

"My relative called another ambulance because when I was pushing, my boyfriend could see feet", she said.

Her son was born alive, with his heart beating and they both had to be taken to hospital. The hospital concluded that Savannah had been between 20 and 21 weeks pregnant.

"If they scanned me and I knew that I was that far gone, then I would have had him", she said. Savannah said that she had been left traumatised.

When questioned by the *BBC*, BPAS said it could not comment on individual cases.

At-home abortions are only permitted until 9 weeks and 6 days gestation in England, but the gestation of the baby is hard to determine outside a clinical setting.

'DIY' abortions made permanent in English law

This story was released on the same day that MPs voted to allow 'DIY' abortions to take place outside of a clinical setting on a permanent basis. Before March 2020, medical abortions were only permitted following a face-to-face consultation with a medical professional. This was both to ascertain the gestation of the baby, thereby preventing complications, and to act as an important safeguard in helping to prevent coercion and abuse.

However, as part of the Government's pandemic response, abortions were permitted, for the first time, to take place entirely outside of a clinical setting. 'DIY' abortions were explicitly introduced on a temporary basis and in February, the Government confirmed that they would come to an end in August this year.

However, Conservative Peer, Baroness Sugg, introduced an amendment to the Government's Health and Care Bill that sought to overrule the Government's decision and make the 'DIY' abortion scheme permanent. Following it being voted through in the House of Lords, the amendment was passed by the Commons on Wednesday 30 March. A letter, written by Labour's Shadow Health Secretary, reportedly "encouraged" Labour MPs to support the amendment.

Savannah's story is not an anomaly

During the debate on whether to make 'DIY' at-home abortion a permanent part of the law in England, DUP MP Carla Lockhart MP said: "Savannah's story should make us all pause and consider what this policy actually means". She pointed out that instances like this are not "an anomaly".

Lockhart referenced "a leaked 'urgent' email sent by an NHS regional chief midwife [which] quoted the "escalating risk" around at-home abortions and cited 'the delivery of infants up to 30 weeks gestation'."

"Similar reports have been made by the body that comprises all senior NHS doctors and nurses who fulfil statutory child safeguarding functions in the NHS, the National Network of Designated Health Care Professionals for Children. Specifically, it has recorded 47 cases of early medical abortions that resulted in mid-to-late pregnancy terminations, across all ages, since the start of the pandemic in March 2020. Six involved girls and in half those cases, and 12 instances in total, there had been signs of life", she said.

Right To Life UK spokesperson, Catherine Robinson, said: "Predictably, BPAS said they could not comment on the Savannah case. Of course they can't, as this sad case shows just how dangerous 'DIY' abortions are. There is simply no way to accurately determine the age of the baby so complications inevitably occur".

"Sadly, 'DIY' abortions will only lead to more suffering for mothers and their unborn children. Our MPs made an appalling decision based on a careless ideology, not on the evidence of the very real dangers of 'DIY' abortions".

Editor's note: This article was published by Right to Life UK and is reposted with permission.

2022 Primaries are Underway: Let's Win for the Babies

From page 1

However, we must be careful that in our zeal to protect life we do not inadvertently help defeat pro-life candidates.

How, you may ask, can we do this? There are six ways this can happen:

1. Fall in love with your candidate. Too often pro-lifers get so excited about their candidate that if he/she loses to another pro-life candidate (especially in a primary), the pro-life grassroots person does not support the pro-life candidate who won. Because their candidate did not win, they will not volunteer in the campaign or work to get others to vote for that candidate. Pro-life candidates need the active support of all pro-lifers and, all too often, without that full support, a pro-abortion candidate wins.

2. Believe that your candidate is the only "real" pro-life candidate in the race and bash other pro-life candidates. Some people pick out the one or two votes that a pro-life candidate did not vote right on and attack him or her as not being really pro-life. By doing this, however, the pro-lifer demoralizes other pro-lifers and weakens enthusiasm for the pro-life candidate who does win the primary, making it more difficult for the pro-life candidate to win in November.

3. Support a really nice candidate who is pro-life but has no chance of winning. The viability of a candidate must be considered when we decide whom to vote for. If it is apparent a wonderfully pro-life candidate cannot win, he needs to be encouraged to step aside for a candidate who may not be as eloquent but who can actually win and then be able to take action to protect unborn children.

4. Expect the candidate to sound like a Right to Life chapter chairperson. Many candidates will do what is right when they are elected, but that does not mean they will be comfortable or eloquent talking about the killing of unborn babies. Some of our strongest pro-life elected officials, whose actions have helped to save hundreds of thousands of unborn babies, are not articulate on pro-life issues. Remember, words are nice, action is far better.

5. Expect the candidate to make abortion the top issue in the campaign. To win, a candidate must focus on several issues that will appeal to a broad variety of voters. In some races, making abortion an issue will help the candidate, but in some parts of the country, the pro-life candidate must stress other issues to win.

6. Vote for a third-party candidate who has no chance of winning. There will be times when a third-party candidate will get into the race, claiming to be the "real" pro-lifer. He will attack the pro-life candidate and get other pro-lifers to jump on board. This is a sure strategy to elect the pro-abortion candidate. In some close races the number of votes for a third-party candidate can be the difference between electing a pro-life candidate instead of a pro-abortion candidate.

You can go to www.nrlvictoryfund.org/resources/6-ways-to-defeat-a-pro-life-candidate to download the "6 Ways to Defeat a Pro-Life Candidate" brochure to distribute to your friends and family. Remember the outcome of elections matters tremendously and a pro-life candidate must win to be able to take the action necessary to save babies.

In South Carolina alone more than 184,000 babies are alive today because South Carolina Citizens for Life helped pass pro-life legislation. That is 184,000 families blessed with a baby instead of cursed with despair and regret.

What a difference pro-lifers can make! Let's be careful that our well-intentioned actions do not help defeat the pro-life candidate.

And finally, when the dust has settled, primaries are finalized, and the parties have determined their nominees, let us look at the best outcome for the babies by working for the pro-life candidate that made it to the general election. And win this one for the babies!

Right-to-Life Lessons for Young Children

By Wisconsin Right to Life

Perhaps one of the most challenging aspects of parenting is finding ways to pass along our values to our children. How can we best convey our pro-life beliefs? To help, we have arranged several ideas below, based on the age range of the child you are teaching.

Age 0 to 18 Months

Pro-life parents can help their children understand the value of human life from a very young age. Teaching a child that they have inestimable value is a good beginning. No child is too young to understand that they are loved. Hugs, kisses, words that affirm and encourage are all wonderful ways of saying to a child, "You have value! You are a special child who is dearly loved."

18 Months to Three Years

By 18 months to three years parents can illustrate the value of human beings by pointing out how many kinds of people there are and explaining that each one is special: red and yellow, black and white, short and tall, big and small, some who walk and some who use wheelchairs. Find opportunities to convey the baseline pro-life value that each person is a special creation.

Preschool to Third Grade

If you aren't reading to your preschooler every night before bed, you are missing a wonderful teaching opportunity – on several levels.

The Dr. Seuss classic Horton Hears a Who tells the story of Horton, the kindhearted elephant who rescues the citizens of Whoville. Horton's philosophy ("a person's a person no matter how small") is a gentle lead-in to the humanity and dignity of the unborn.

The delightful book by Jennifer Davis, *Before You Were Born* is short and easy-to-understand for children of preschool age to about third grade. It includes a simple approach to the unborn baby's development with interactive pages that children can peek under and look at.

Both these books are available at most libraries and bookstores, or they can be borrowed from Wisconsin Right to Life. Book lending information is available by writing the Wisconsin Right to Life Education Department.

Another fun way to help youngsters appreciate the unborn is to take them to see the newborns at the hospital. Point out the wonderful variety in each of the babies and remind children that they were once that tiny too – but no less special.

Discussions about babies (and "where they come from") should take place early and often. A child's natural curiosity about the anatomical differences between girls and boys will lead them to ask questions. Answer them honestly using language they can grasp but don't offer more information than they are requesting. Little by little, you can fill in the blanks as they inquire.

Fourth Grade through Adolescence

When you feel it is appropriate, have your children participate with you in your chapter's pro-life activities. Help them to understand that the people of our country disagree about whether or not it is right to kill babies before they are born.

You can say, "Mom and dad believe that every baby is a special person and no one should have the right to kill them."

Teaching pro-life lessons during your child's adolescence is particularly important.

An important step is setting a family standard for what is and is not acceptable TV and movie viewing. Be aware though, kids are walking "hypocrisy detectors." The only way for parents to avoid undermining their own teaching on this subject is to abide by the same standards themselves.

Great Pro-Life Websites for Teens

TeenBreaks.com — Teen abortion experiences, facts, stats, complications, survivors. Straight talk from teens who have been there and done that.

Wisconsin Teens for Life — The home page for Wisconsin Teens for Life. Find info about Summer Leadership Camps, a newsletter and cool stuff for Wisconsin Teens.

As advocates for life, we are ambassadors for the truth

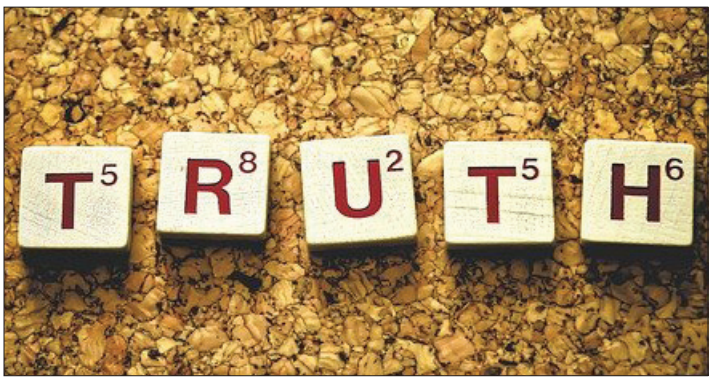
By Maria V. Gallagher, Legislative Director, Pennsylvania Pro-Life Federation

Recently I received an e-vite to a fabulous event. It was a festive celebration, made all the more so by the longing for community that came from the COVID-19 pandemic. It was truly a gift to be able to get together to share a meal, some laughter, and some reflection on old times.

But for me the highlight was a spontaneous play produced by the youngest guests. The actors enthusiastically assumed their roles for an impromptu performance of "Little Red Riding Hood." To see the joy on one little boy's face as he portrayed the big, bad wolf was really a sight to behold.

The fact is, those children were the life of the party. They brought unmatched happiness to the proceedings, bringing smiles to the faces of the rest of the party guests. They approached life with an exuberance that was really infectious.

Consider this your e-vite to become even more involved in the pro-life movement. We have so many precious souls we need to protect—so many mothers who are in need of help and encouragement. When we stand for life, we stand for the happiness that comes with bringing these unique and unrepeatable children into the world.



A myth persists that, if only the U.S. Supreme Court will rule the right way, our decades-long national nightmare of widespread abortion will end. While an overturn of the 1973 U.S. Supreme Court decision *Roe v. Wade* is a critical first step, chances are likely that the issue of abortion will catapult back to the states. There, we will need to enact laws which protect the rights of the most vulnerable among us—preborn children.

As advocates for life, we are ambassadors for the truth. We recognize the humanity of the preborn child and we share that truth with all who are willing to listen. We also stand for beauty, for there is nothing so beautiful as a child. Ugliness occurs when society treats the child as less than human, turning to the violent act of abortion to end the child's life.

So please join me in redoubling our efforts to extend a mantle of protection to preborn babies and their mothers. Working together, we can renew and refresh our culture, making it one that celebrates and reveres life in all its phases and at all its stages.

So why are pro-abortion organizations "sounding the alarm" six months out from the 2022 mid-term elections?

By Dave Andrusko

The headline to the story that recently appeared in *The Hill* is what we will be reading and hearing constantly over the next 204 days until the midterm elections: "Advocates sound the alarm on abortion rights ahead of midterms."

It's amusing to read how at various points in his story that Nathaniel Weixel both supports and undermines his thesis.

For example, cutting against the grain [pro-abortion] is this from Kristin Ford, vice president of communications at NARAL Pro-Choice America: "We think that once people really see the stakes and what it means for their ability to make their own decisions about their family, that that is going to translate into significant electoral activity in support of candidates who champion reproductive freedom and in opposition to candidates who are trying to take away that freedom."

And this from Jenny Lawson, National Campaign Director at Planned Parenthood Federation of America.

> **"It is hitting people in a very real way right now and it will continue to do so as the Supreme Court makes this decision [on the Mississippi 15 week ban].**
>
> **"The stakes have never been higher. The impact has never been clearer."**

So why the "alarm"? Simply because pro-abortionists don't believe their own rhetoric and because they are desperate to gin up support among their supporters.

There are various polls alluded to that were conducted by pro-abortion organizations with predictable results. "But despite the favorable polls, it may be difficult to translate those responses into voter turnout, especially if voters don't believe the threat to abortion rights is imminent," Weixel writes.

A very unfavorable survey was the *Wall Street Journal* poll we discussed last Friday. With lawmakers in several states pushing forward with bills that would ban abortion after 15 weeks of pregnancy, 48% of voters said they would strongly or somewhat favor such restrictions, with exemptions to protect the life of the mother, while 43% were in opposition.

This comes as no surprise to our Movement. Last November, for example, Marquette University asked respondents **if they would favor or oppose a ruling to "uphold a state law that (except in cases of medical emergencies or fetal abnormalities) bans abortions after the 15th week of pregnancy" or if they haven't heard enough about this to have an opinion. Thirty-seven percent favor a decision upholding such a law, while 32% would oppose such a ruling and 30% say they haven't heard enough. In September, 40% favored upholding such a law, 34% opposed such a law, and 27% said they hadn't heard enough.**

And they are also the beneficiary of billionaire philanthropists such as MacKenzie Scott, the former wife of Amazon founder Jeff Bezos, who coughed up a whopping $345 million donation to Planned Parenthood.

Make no mistake, we must be vigilant and make sure we have the best pro-life candidates conducting the smartest campaigns.

New Study Claims, But Fails to Show, Physical Exams, Ultrasounds Unnecessary for "Safe" Chemical Abortions

From page 23

involving ultrasonography or pelvic examination."

Even if their numbers are accurate, it does not appear that such a conclusion is warranted. It seems a real stretch to call a method that fails more than twenty thousand patients and sends a number of them to the hospital "safe" or "effective."

"Safe" means more than lost patients getting help elsewhere

It is almost never mentioned in the media and certainly never highlighted by the pill's promoters, but one reason why advocates have been able to report the seemingly high efficacy and low complication rates is that these studies consistently lose track of high numbers of patients.

Many women who receive the pills never get back to researchers to share their results, to confirm whether or not the pills worked, whether they had complications, whether they had surgery, or whether they might have changed their minds and sought abortion pill reversal.

This was true in this latest study as it has been in so many previous studies.

While researchers started with a pool of 3,779 patients or "eligible patient records" (already excluding some who had ultrasound, did not take both mifepristone and misoprostol, had files with invalid or incorrect medical data, etc.), their final analysis was based on just 2,397 with "known abortion outcome."

This means that researches lost track of more than **36%** of the patients who are supposed to have received the drugs.

Researchers simply leave these women out of the equation and calculate risks based on the records they have available. While normally this might seem to be a reasonable accommodation to the data at hand, in this case, it compromises the basic integrity of the study.

One of the major concerns, a primary focus of this sort of study is to determine how well women fare without some of the procedural safeguards, how they do without standard exams and with less direct supervision. But if you end up losing track of more than a third of your patients, and particularly those patients most likely to seek help elsewhere, you really don't know the answer to that question.

It isn't just that this leaves off some women that randomly might have some issues, but that the women it loses track of are precisely those most likely to have experienced problems. Women for whom things go as planned have no real problem getting back with researchers and telling them how things went.

But those who do have problems – who have copious bleeding, extreme pain, who do not see the baby pass and perhaps have a vague sense that something is wrong – seem much more likely to go their nearest Emergency Room, or even to their own private doctor rather than return to a clinic they may have visited only once, if at all (since many are getting their pills through the mail).

Missed Complications

In line with other similarly structured studies, the 2022 JAMA Internal Medicine study reports complication rates of only about 0.5%. It recorded eight patients requiring blood transfusions, three needing major surgery for issues like ectopic pregnancy, and six who had to be admitted to hospitals.

But studies which checked hospital or emergency room records instead of relying on reports back to clinic staff or online abortion pill websites automatically found higher numbers of complications than what abortion pill advocates report here. In fact, in 2015, Upadhyay, one of the authors here, studied emergency department visits and found not a 0.5% complication rate, but a 5.1% complication rate for "medication abortion."

Though considerably more than her latest study, even this may be a significant underestimate. Those who sell these abortion pills online routinely tell women that if they end up having to go the ER for bleeding of other issues, they need not inform the doctor that they have taken the abortion pills. They can simply say they are experiencing a miscarriage and that the doctor will not be able to tell the difference.

So there may be many complications and failed abortions not being reported as such.

Whatever the actual complication rate, it is clear that studies like this latest one do not and cannot give women any real confidence regarding the safety or efficacy of chemical abortions using these drugs – with or without medical exams – with such a high number of missing patients.

Abortion industry ready to risk women's lives

What we have here, then, is not a study proving that physical exams and ultrasounds are not necessary for safe or effective chemical abortions. Instead, what we have is a study showing how anxious the abortion industry is to avoid any of the basic medical safeguards that will help ensure that women with ectopic pregnancies or pregnancies past the recommended gestation will not be given the pills.

"Effectiveness" of these drugs begins to fall off the farther a woman gets past the ten-week gestational limit of the FDA's protocol. The pills do not work at all in the circumstances of ectopic pregnancy, which can be detected by an ultrasound but not nearly as well from a few interview questions.

Even relying solely on self-disclosed patient medical history (which may have been erroneous if a woman misremembers or mistakes early pregnancy spotting for her last menstrual period), authors admitted that at least 62 were given pills past the FDA's 70 day deadline. All told, researchers also said they identified four ectopic pregnancies, including at least one that was only detected nine days after the patient had taken mifepristone.

The problem with ectopic pregnancy is not only that the pills do not work in such circumstances but that the signs of a rupturing ectopic pregnancy – severe abdominal pain and bleeding – are exactly the symptoms expected and experienced during an ongoing chemical abortion.

Again, these are only the cases of ectopic pregnancy and post deadline gestations that researchers found among the women they were able to track. How many more suffered failed or incomplete abortions, or complications like hemorrhage or ectopic pregnancy among the patients lost to follow up is unknown.

Clearly, though, there are cases that slip through the cracks with the abortion industry's "no-test" or "no physical exam or ultrasound" protocol, and there are women who suffer because of it.

And just as clearly, the abortion industry is willing to accept that higher level of risk for those women so long as it enables them to sell more abortion pills.

MPs vote to make 'DIY' abortion permanently available

By Right to Life UK

Members of Parliament (MPs) have voted to permanently remove the requirement to see a medical professional in person before procuring an medical abortion up to nine weeks and six days, overturning the Government's decision to end 'DIY' abortion.

On Wednesday March 30, MPs approved a House of Lords amendment to the Health and Care Bill by a margin of 27 votes (215-188) that will make 'DIY' at-home abortion permanently available in England.

This means that for a medical abortion, before 10 weeks, it is possible to procure and administer the two abortion pills used in a medical abortion without ever seeing a medical professional in person.

To procure an abortion prior to March 2020, it was necessary to have a medical consultation in person. This was both to ascertain the gestation of the baby, thereby preventing complications, and to act as an important safeguard in helping to prevent coercion and abuse.

However, as part of the Government's pandemic response, abortions were permitted, for the first time, to take place entirely outside a clinical setting. 'DIY' abortions were explicitly introduced on a temporary basis and last month the Government confirmed that they would come to an end in August this year.

However, Conservative Peer, Baroness Sugg, introduced an amendment to the Government's Health and Care Bill that sought to overrule the Government's decision and make the 'DIY' abortion scheme permanent. After being voted through in the House of Lords, the amendment was passed by the Commons after Labour's Shadow Health Secretary "encouraged" Labour MPs to support the amendment.

A number of MPs highlighted concerns that removing an in-person consultation could facilitate coercion and abuse. Commenting on this, Dr. Caroline Johnson MP said:

"We know that sometimes women and girls can be coerced into having abortions that they do not want, perhaps because the baby is of a gender or sex that the father does not want, perhaps because they are being abused, or perhaps they are being trafficked or sexually assaulted. It is very difficult for a woman to tell someone about that over the telephone, whereas if a woman is seen in clinic, she has that one-to-one opportunity."

During the debate, MP for Upper Bann, Carla Lockhart, referenced the tragic story of a 16-year-old girl who received abortion pills far beyond the legal gestational limit of 10 weeks. She said

"She disclosed that during her phone consultation the abortion provider calculated she was less than eight weeks pregnant, so she went to a British Pregnancy Advisory Service clinic to collect abortion pills. She was not scanned or examined. As the BBC reports, on taking the second pill she began to experience, in her words, "really bad" pain. She shared: "My relative called another ambulance, because when I was pushing my boyfriend could see feet."

"Members, this baby was born with a heartbeat. They were both taken to hospital, where Savannah was found to have been between 20 and 21 weeks pregnant. Unsurprisingly, she said she had been left traumatised and that if she had been scanned to determine her gestation, she "would have had him."

During the debate, Fiona Bruce MP alerted MPs to the startling data showing the dangers of DIY abortions: "Freedom of information data analysis also shows that one in 17 women taking abortion pills requires hospital treatment. That means that more than 14,000 women have been treated in hospital following the approval of pills-by-post abortion. A similar study of FOI [Freedom of Information] data in February 2021 showed that every month, 495 women attended hospital with complications arising from abortion pills, and that 365 of them required hospital treatment."

Right To Life UK spokesperson, Catherine Robinson, said: "The group of MPs who have voted for this amendment have voted to remove vital safeguards including an in-person appointment with a medical professional. This will put thousands more women at risk from 'DIY' home abortion services."

"At-home abortion schemes have been linked to a series of scandals where women have been put at risk."

"By removing a routine in-person consultation that allows medical practitioners to certify gestation and

See "MPs Vote," page 39

Partial-birth abortion and HHS Secretary Becerra's long track record of evasive answers

From page 2

entitled to enforce and that they are entitled to have the government respect. I will do everything I can to make sure a woman's rights and reproductive care are defended," Becerra responded.

"So I take that as no, you don't concede that that is the law," Banks stated.

"I gave you the answer," Becerra said.

Becerra has a track record of denying that partial-birth abortions took place or even that they exist. As a member of Congress, Secretary Becerra voted against passage of the 2003 Partial-Birth Abortion Ban Act. The law passed and was found to be constitutional by the U.S. Supreme Court in 2007.

Last year he had the following exchange with Rep, Bilirakis:

Rep. Bilirakis: Do you agree that partial-

HHS Secretary Xavier Becerra

birth abortion is illegal, sir?

Sec. Becerra: Congressman, thank you for the question and, here, as I said in response to some of those questions during my confirmation hearing, we will continue to make sure we follow the law. Again, with due respect, there is no medical term like partial-birth abortion and so I would probably have to ask you what you mean by that– to describe what is allowed by the law.

…

Sec. Becerra: Which law are we talking about, sir?

Rep. Bilirakis: The law concerning partial-birth abortion.

Sec. Becerra: Well, again, as I said, there is no law that deals specifically with the term partial-birth abortion…

Under additional questioning by Rep. Crenshaw, Sec. Becerra continued to evade. However, under questioning by Rep. Joyce, Becerra again asserted that the term partial-birth abortion was not a medical term and added:

Sec. Becerra: My question is not so much with the term partial-birth abortion, [it] is with what the rights are of the woman…

…

Sec. Becerra: I will make sure we are providing women with the protections they need on their reproductive rights.

And so it goes with our ultra-evasive Secretary of Health and Human Service.

MPs vote to make 'DIY' abortion permanently available

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recognise potential coercion or abuse, 'at-home' abortion has presented serious risks to women and girls in abusive situations. It has allowed severe complications to occur, as well as abortions beyond the legal limit, as abortion providers currently cannot ensure the pills are taken by the intended individual within the appropriate time frame."

"Polling in England shows the overwhelming majority of women and GPs ['General Practitioners] surveyed were concerned by the possibility of pills being falsely obtained for another person, and by women having medical abortions at home beyond the legal limit. Previous polling has revealed that 92% of women in Britain agreed that a woman requesting an abortion should always be seen in person by a qualified doctor."

Mother: If not for a sidewalk counselor, "my beautiful daughter would not be here today."

By Sarah Terzo

A woman named Nancy was walking into an abortion clinic when a pro-life sidewalk counselor stopped her. She says:

"When I stepped out of the taxi, I was gently approached by an older lady who handed me a brochure. Her only words were, "Do you really want to do this?" I burst into tears and said "No!"

If not for the pro-life advocates outside that abortion clinic that day and the advice they offered about other options, I would also have ended that pregnancy – and my beautiful daughter would not be here today."

Dr. Debbie Garratt, PhD *Alarmist Gatekeeping: Abortion* (2021) p.123.

Editor's note. This appeared at Clinic Quotes and is reposted with permission. Sarah Terzo is offering a short, free pro-life eBook that exposes the pro-choice movement. Click here to get it.

Judge Ketanji Brown Jackson confirmed to a seat on the Supreme Court on a vote of 53-47

From page 26

of law: Confirming only judges who will honor the Constitution and not supplant it. The road to a healthy Court and a healthy country is not striking some 'balance' where some Justices stick to the text and some Justices try to make policy. The solution is for all the Justices to stay in their lane.

There is one right number of Justices who seek to follow the law. It is nine. There is one right number of Justices who seek to make policy. It is zero.

There are jurists and scholars with personal views across the political spectrum who understand that all judges should be textualists and constitutionalists in their day jobs. That must be the Senate's standard.

I see hallmarks of judicial activism in Judge Jackson's record and will vote 'no.' Nevertheless, our Democratic colleagues are on track to confirm our next Supreme Court Justice.

And do you know what won't happen? Top Republicans will not imply she's illegitimate. We will not call for court-packing. I won't be joining any mobs outside her new workplace and threatening her by name.

Democrats must stop their political siege of the institution that Judge Jackson is about to join. They must stop their assault on judicial independence.

We're about to have a new Justice whose fan club has openly attacked the rule of law. So Judge Jackson will quickly face a fork in the road. One approach to her new job would delight the far left. A different approach would honor the separation of powers and the Constitution.

The soon-to-be Justice can either satisfy her radical fan club or help preserve the judiciary that Americans need. But not both.

I'm afraid the nominee's record tells us which is likely. But I hope Judge Jackson proves me wrong

The most powerful pregnancy help client session I've ever experienced

By Patty Knap

Those of us who work at pregnancy centers know all too well the many risks involved in abortion, and the fact that abortion providers routinely withhold this information from their clients.

A few years ago, at the center where I serve, we had a 20-something woman come in for a pregnancy test. Lauren* stated outright that if she was pregnant, she planned to abort.

After confirming that Lauren was pregnant, my co-worker Janet* and I sat down with her. It was Lauren's first pregnancy. She had plans, and her plans didn't include being a mom; not now, anyway. She was in school and working, and her job had her on a solid career path.

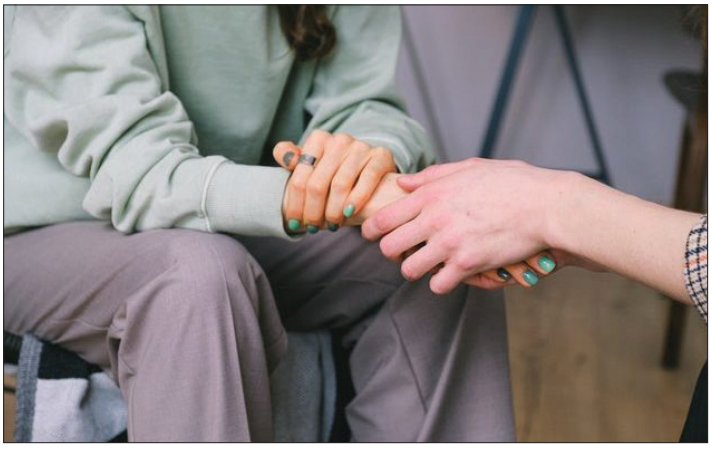
I knew Janet had had an abortion in her past, but I didn't know her full story. She asked Lauren a few questions about the baby's father, Lauren's parents, and siblings.

Then Janet asked a great question: Where did Lauren see herself in 5-7 years?

Lauren confidently described finishing her master's degree, climbing the corporate ladder, buying a house. And personally? She said she and her boyfriend would probably get married, and maybe have a child at that point.

We took out the fetal models and showed Lauren the size of her then-7-week -old unborn baby. While Lauren gazed at the plastic babies and read about heartbeats, brain waves, tiny fingers and toes, Janet shared her story.

"About 30 years ago I was exactly where you are," Janet said. "I was 23, had a good job and a great boyfriend, and I figured I had plenty of time to have a baby or a few babies later on."



"I told myself it wasn't the right time, and I went to Planned Parenthood," Janet told her. "They didn't show me these fetal models, and they said a baby would complicate my life and interrupt my plans to have a high paying job."

"I had the abortion that day," Janet said. "My boyfriend and I went on to get married about two years later, and we assumed we'd start a family."

Lauren and I listened as Janet continued.

"That first year I had two miscarriages," Janet said. "Over the next few years, I had five more miscarriages."

"I never did have a baby," she explained. "And so, the baby I aborted was the only child I would ever have."

"I wish those people that day at the abortion clinic told me that future miscarriage, even infertility, are risks from having an abortion," said Janet. "They didn't. In their rush to sell me an abortion, they only emphasized the supposed 'benefits;' not having the responsibility or expense of a baby, not having my career interrupted."

Janet cautioned this young mother that there was no guarantee she would conceive another child, and she could be less assured of doing so if she chose to abort this one. I felt tears forming in my eyes as Janet told her heart wrenching story and realized the pain it took for her to share it in the hope of preventing the same tragedy for someone else.

Janet and her husband still miss that baby and regret their decision, and still deal with anger over the deceptions of Planned Parenthood.

Another thing that wasn't shared with Janet on the day of her abortion was an ultrasound, showing the self-evident truth of the humanity of the unborn baby.

We told Lauren that it was crucial that she see her ultrasound before making a decision, and that refusing to show one to her was a big part of an abortionist's strategy to dehumanize the child, and keep the natural maternal instinct from setting in.

Lauren accepted our referral for a free ultrasound the next day, and, probably in large part due to Janet's testimony, this mother went on to keep her baby.

When I'm talking with pregnant women, I now often ask that same question Janet asked: Where do you see yourself in 5-7 years?

Many young women assume they can 'get rid of' this baby now and then just automatically have another baby later whenever they feel it's the "ideal" time. It doesn't always happen like that.

Editor's note: The parties' names have been changed to preserve anonymity. This appeared at Pregnancy Help News and is reposted with permission.

Start making your plans to attend NRLC 2022, National Right to Life's annual convention!

From page 1

and the Frederick Douglas Foundation in an ongoing effort to educate Americans about the issues that are impacting the Black community.

Right after the Prayer Breakfast, heading our first General Session is Wesley J. Smith, J.D., one of our most popular speakers. Wesley will be speaking on "Preventing Technocracy Crucial to Sanctity of Life." You are familiar with him as an author whose columns are regularly reposted in *National Right to Life News* Today. Wesley is now Chair, Discovery Institute's Center on Human Exceptionalism, and is Host of their "Humanize" Podcast.

On Friday afternoon, we will host a session featuring Melissa Ohden, who survived a saline abortion meant to take her life in 1977. She manages the website, The Abortion Survivor Network (https://abortionsurvivors.org).

In her words, "Behind the word 'choice' is a person. You are more than a choice. So are we. We're someone's son or daughter, grandchild, sibling, niece or nephew, cousin, friend, co-worker, neighbor. Many of us are someone's spouse, someone's parent."

This session is a must attend to be on top of what is going on and the sheer number of abortion survivors.

On Friday night NRLC 2022 welcomes Super Bowl Champion & Author Matt Birk. A graduate of Harvard University, Matt was the recipient of the 2011 Walter Payton NFL Man of the Year award for his excellence on and off the field. Matt speaks to organizations across the country about the value of true inspiration, lasting leadership principles, the dynamics of teamwork, and fulfilling potential.

We will also hear from David Scotton, whose story was featured in "I Lived on Parker Avenue" and will be featured this summer in the new Kendrick's Brothers film, "Lifemark." The National Right to Life Video Contest winner will also be announced for 2022 at this session!

Opening the second day of the convention is Rep. Michelle Fischbach, J.D, discussing "The Guide to Winning!" Others will also be joining us for this session so check back to the website often for new names added.

Saturday afternoon, we will feature the must attend session tentatively titled, "More than a Tylenol ~ Risky Business" and will bring you completely up to date on the "abortion pills" and Abortion Pill Reversal. We are bringing back Dr. George Delgado and several others for this session. Find out what you need to know about chemical abortions, how many are being done, what you can do to help save lives, and hear the testimony of some that have been through the process.

Closing out NRLC 2022 jam-packed two-day convention is Jim Daly, president of Focus on the Family. The daily radio program which he hosts has a massive audience of more than 5.6 million listeners a week and has been honored as Program of the Year by the National Religious Broadcasters. He will be joined by the winner of the National Right to Life Oratory Contest who will deliver his or her winning speech.

Our number one goal each and every year for the convention is to make you glad you came, felt you received your money's worth and that you can't wait for the next one. The General Sessions alone will be well worth the trip.

We really are looking forward to seeing each and every one of you in Atlanta. Check nrlconvention.com regularly as new speakers are added.