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NEWS

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National Right to Life
ENDORSES

President Donald J. Trump

2024 Presidential Election



Throughout his time in office, President Trump championed policies designed to safeguard the lives of both unborn children and their mothers from unlimited abortions.

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National Right to Life Endorses President Donald J. Trump in 2024 Presidential Race

WASHINGTON — National Right to Life, the federation of right-to-life affiliates in all 50 states and the District of Columbia, over 3,000 local chapters, and millions of grassroots supporters, announced its endorsement of President Donald J. Trump in the 2024 presidential race.

“National Right to Life is pleased to endorse Donald J. Trump for President. In his first term, President Trump demonstrated extraordinary leadership and delivered historic results on behalf of vulnerable unborn children



and their mothers,” said Carol Tobias, president of National Right to Life. **“Thanks to President Trump, the American people and their elected representatives on the state and federal levels now have greater authority to determine abortion policy and pass meaningful protections for unborn children and their mothers.”**

Throughout his time in office, President Trump championed policies designed to safeguard the lives of both unborn children

See Trump, Page 25

At press conference, pro-life leaders pledge their support for bills Helping Women and Families, Pregnant and Parenting Students

By Dave Andrusko

January 18, on a party line vote, the GOP-controlled House of Representatives passed two bills designed to help women and their families as well as pregnant and parenting students.

H.R. 6918, *The Supporting Pregnant and Parenting Women and Families Act* passed by a vote of 214 to 208. H.R. 6914, *The Pregnant Students’ Rights Act*, passed in a vote of 212 to 207.

H.R. 6918 was sponsored by Congresswoman Michelle Fischbach (R-Mn) with Rep. Claudia Tenney (R-NY) and Rep. Chris Smith (R-NJ) as original co-sponsors. Several directors of pregnancy centers gave remarks, as did many members of Congress. *The Supporting Pregnant and Parenting Women and Families Act* would ensure that pregnancy centers are

eligible for funding through the Temporary Assistance for Needy Families (TANF) program.

The Biden administration is currently proposing a rule to restrict federal funds from going to pregnancy centers in a number of states that direct funds to them through the TANF program.

H.R. 6918 would prohibit the Department of Health and Human Services (HHS) from finalizing, implementing, or enforcing this or any similar rulemaking that would restrict the use of TANF funds for pregnancy centers.

At Thursday’s press conference preceding the votes, Rep. Smith, several members of congress, and pro-life leaders were joined by several pregnancy center leaders highlighting the critical work of pregnancy resource centers.

NRLC president Carol Tobias

also delivered remarks at the press conference. “In a post-*Roe* America, it is vitally important that resources

are made available to support mothers and their babies both before and after birth,” she said.



(left to right) Congresswoman Michelle Fischbach, sponsor of H.R. 6918, The Supporting Pregnant and Parenting Women and Families Act, with NRLC President Carol Tobias, Jennifer Popik, Director of Federal Legislation, and Ben Clapper, Executive Director of Louisiana Right to Life

Editorials

Trump rolls to 11 point victory in New Hampshire, Haley says, “This race is far from over”

It was all but inevitable following former President Donald Trump’s convincing victory in New Hampshire that there would be calls for former South Carolina Gov. Nikki Haley to pull out. Last week a draft resolution submitted to the Republican National Committee hoped to recognize Trump as the GOP’s “presumptive nominee” after his victory in The Granite State. Trump rejected that, saying it was in the best interests of “party unity” that he continue with the primaries and win “the old fashioned way.” The next primary is in South Carolina, Haley’s home state. The Real Clear Average of polls find Trump with 52% to 22% for Haley.

Even the Trump-hating *New York Times* acknowledged that Trump’s back-to-back victories in Iowa and New Hampshire were no small thing. Lisa Lerer, Maggie Haberman, and Jonathan Swan wrote

The much-fabled power of New Hampshire’s fiercely independent voters wasn’t enough to break the spell Donald J. Trump has cast over the Republican Party.

Brushing aside Nikki Haley a little over a week after he steamrolled her and Ron DeSantis in Iowa, Mr. Trump became the first Republican presidential candidate who was not a White House incumbent to carry the nation’s first two contests.

Trump “performed well across nearly every demographic group, according to exit polls,” the *Times* added.

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Pro-life former President Donald Trump

Photo: Gage Skidmore

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Democrats think they have “found their voice on abortion” in Vice President Kamala Harris

With limited success at her previous job assignments—being the “border czar,” for example—pro-abortion Vice President Kamala Harris (her 40% approval notwithstanding) is now “Trump’s Worst Nightmare on Abortion”. Nia-Malika Henderson, writing for *Bloomberg News*, believes, “It only took five decades, the end of *Roe v. Wade* and America’s first woman vice president for Democrats to [drumroll] find their voice on abortion.”

Because? “She can talk personally about what it means to be a woman in post-*Roe* America,” Henderson writes.

“Most importantly, she can channel the anger.”

“Channeling the anger” is a large part of what



Harris’s “Reproductive Freedom Tour,” which began a week ago Monday in Wisconsin before moving on to Manassas, Virginia,

is all about. Harris’s husband, Doug, along with pro-abortion President Joe Biden and his wife, Jill, joined her.

Referring to the three appointments former President Trump made to the Supreme Court, making the overturning of *Roe* possible, Biden said, “He’s betting we won’t hold him responsible.” Biden added, “He’s betting you’re going to stop caring.”

We’re betting pro-lifers won’t forget that Justices Neil

See *Supreme*, Page 33

From the President Carol Tobias

A Clear Contrast Between Presidential Candidates



Polling shows that Americans are most concerned with the economy, immigration, and foreign policy, yet President Joe Biden and Vice President Kamala Harris are conducting a nationwide campaign

focused on promoting ways to kill more preborn children.

The Biden administration is using a “whole of government” approach—using every lever of federal power—to remove any and all limits on abortion and use your tax dollars to pay for them.

The administration seeks to remove conscience protections from medical personnel who do not wish to participate in abortion (or assisted suicide).

They are attempting to use the Emergency Medical Treatment and Labor Act (EMTALA) to force hospitals to become abortion centers.

They continue to push pharmacies to work with the Food and Drug Administration to make the abortion pill, mifepristone, readily available and to ignore a federal law that prohibits the transportation of abortion drugs through the mail.

The Department of Veterans Affairs has finalized its rule, so the department continues to “provide abortion counseling and, in certain circumstances, abortion care to veterans and VA beneficiaries.” This rule ignores a long-standing federal statute to the contrary and chillingly refers to the killing of vulnerable, preborn babies as “care.”

The Biden-Harris administration continues to support using Department of Defense funds to provide support and travel expenses for service members seeking an abortion.

Administration attorneys have jumped into almost every lawsuit in the country to oppose laws which place even modest limits on abortion.

And much, much more.

They do this all under the guise of protecting women.

At the same time, the abortion industry, with the full support of President Joe Biden and Vice President Kamala Harris, are doing everything they can to remove “choices” from pregnant women.

They oppose giving women information about the procedure, its potential risks, and alternatives that are available.

They are working overtime to shut down or incapacitate pregnancy resource centers. They don’t want a pregnant woman to know she has alternatives—that help and support is available as she works through what may be a very difficult time in her life.

Some elected officials, including Democrat members of Congress, are pushing legislation that would require the Federal Trade Commission to prohibit what they call “deceptive and misleading information” by the pregnancy centers.

Google and other tech companies are being encouraged to censor information about pregnancy centers when someone searches for pregnancy help.

Abortion activists and some allies in the medical community are even trying to prevent women from changing their minds. They don’t want a woman who has taken the abortion pill to seek medical help to try to reverse the abortion process. At least 4,500 babies are alive today because their mothers changed their minds and were able to save their babies’ lives.

While this abortion-rabid administration is going to great lengths to remove options from pregnant women and ensure the deaths of precious preborn little ones, the pro-life movement reaches out to help and protect both mother and child. Many state and federal programs are available to new parents because of pro-life efforts and advocacy.

A growing number of states provide tax incentives for individuals who support pregnancy centers; other states provide grants to the centers. Programs in state health departments have been increased in order to provide expanded health care for moms and new babies.

Churches have stepped up to support pregnancy centers or to adopt a new mother to provide the support she needs to raise her child.

It is a reflection of the pro-life attitude of “love them both” that speaks strongly to all but the most hardened and cynical abortion advocates.

The presidential election is shaping up to be another Trump-Biden contest although I, like many others, will not be surprised to see Biden replaced on the ticket by someone just as radical on abortion. The nominee in this race with a proven pro-life record is Donald Trump, which is why he has been endorsed by National Right to Life. (See page one.)

We know that in the foreseeable future, no national law will be passed to either greatly limit abortion or to protect abortion, as the so-called Women’s Health Protection Act would.

What a pro-life president can do is make sure that our tax dollars are not being used to fund abortions in America or to support organizations which promote or perform abortions in other countries; protect conscience rights for medical personnel; cut off funding to abortion providers in the Title X program; support protections for babies who survive an abortion; help connect women with resources that are available in their local communities; and make sure the Food and Drug Administration is dealing honestly with the American public about the dangers of mifepristone.

President Donald Trump did much of this in his first term and he proudly wears the title “Most Pro-Life President Ever,” due to his many pro-life actions on behalf of women and babies.

In contrast, the Biden-Harris administration recently embarked on a disgraceful campaign to pit women against children, disregarding unborn children as nothing more than a minor nuisance to be swatted out of existence.

We need Donald Trump’s boldness to undo the radically pro-abortion damage the Biden-Harris administration has done. Let’s do everything we can to give him four years to do it.

Speaker Johnson: Every single person has inestimable dignity and value, including the unborn child

Editor's note. Pro-Life Speaker of the House Mike Johnson (R-La) delivered these stirring remarks at the March for Life.

Speaker Johnson: Thank you so much. Good afternoon and welcome to the Nation's Capital. We are delighted that you're here and really sorry about the weather especially from our friends from Louisiana. They're freezing. That's my own state.

It's my great privilege to stand alongside Jeanne and all of my great colleagues who are joining us here today, and so many extraordinary leaders who are braving the weather to join us for this important tradition. And it is an important one. We're so encouraged to see all of you, everybody from across the land. The beauty of this event is that it's a beautiful picture of America. We have people from all walks of life, all ages, all experiences, all backgrounds, and we're all joining to celebrate life and what it means to be an American. Thank you for being a part of that.

It was the great British statesman, G.K. Chesterton, who famously observed that America is the only nation in the world that was founded upon a creed. And he said it was listed with theological lucidity in the Declaration of Independence. What is that creed? What is it from our nation's birth certificate, the declaration, that makes us who we are? We know the language so well. "We hold these truths to be self-evident." In other words, obvious that all men are created equal, not born equal, created equal. That's what the founders said.

And that they're endowed by their creator with certain inalienable rights, including the right to life, liberty, the pursuit of happiness. Those are inalienable rights. They cannot be taken away. And so it's from the very beginning that our founders boldly

proclaim those self-evident truths that our rights do not come from government. Our rights come from God, our creator.

And it also means that every single person has inestimable dignity and value, and your value's not related in any way to the color of your skin or what zip code you live in, how good you are in sports, where you went to



Pro-Life Speaker of the House Mike Johnson

high school. It's irrelevant. Your value is inherent because it is given to you by your creator. Our national creed is the essence of who we are in this country. It is the foundational principle that made us the freest, most successful, most powerful, most benevolent nation in the history of the world. And we can never forget that.

I am myself a product of an unplanned pregnancy in January of 1972, exactly one year before *Roe v. Wade*, my parents, who were just teenagers at the time, chose life. And I am very profoundly grateful that they did.

See what we have to do right now, and I believe the reason all of you're here, is you understand that we have to build a culture

that encourages and assists more and more people to make that same decision. This is a critical time to help all moms who are facing unplanned pregnancies to work with foster children and to help families who are adopting, to volunteer and assist our vital pregnancy resource centers in our maternity homes. And to reach out a renewed hand of compassion and

proposing a regulation to restrict funds to pregnancy resource centers. We know those are the centers that states rely on to assist expecting moms and dads. And that action would undercut that important work, the important material support that expecting and first time mothers get from these centers. Our bill would prevent that regulation from coming into effect and ensure that the states can utilize these centers to help people in need. Who could be opposed to that?

We're passing these bills, and we're marching today because it takes a lot of work to convince people that every single human child, every unborn child, has a value that is too profound and precious to ignore. And we have every reason to be optimistic, my friends, that we can change public opinion. We find encouragement from the leaders of previous generations. We can learn from the great Americans who change public opinion throughout our history. Abraham Lincoln and Frederick Douglas and Susan B. Anthony, they challenged the prevailing narratives of their day and they succeeded.

And you know how they did that? We have to remember this. This is the key. Their success was grounded in our nation's creed that we just spoke about. And they reminded their fellow Americans about our founding principles. And as Lincoln said in his famous first inaugural, the Better Angels of Our Nature, we should do the same thing today. My friends.

Let's be encouraged. Let's press on in hope and that we can join together and make this great difference. I believe that we can, we can stand with every woman for every child, and we can truly build a culture that cherishes and protects life. God bless you. Thanks for braving the weather. We'll see you soon.

to speak the truth in love. That's what we do. All of us can play a role in that really important work.

This is also a pivotal time to promote quality healthcare for both women and their unborn children. This week in Congress, you'll be encouraged to know the House passed the Pregnant Student's Rights Act because being pregnant while finishing your degree can be really difficult. But women should not be presented with a false choice of being a mom or being a student. We also passed the Supporting Pregnant and Parenting Women and Families Act. That's a big one too right now.

Right now you should know the Biden Administration is

Two Pro-life Wins in the House

Jennifer Popik, J.D. Director of Federal Legislation

As thousands of Americans gathered in Washington D.C. for the 2024 March for Life, the House passed two pieces of pro-life legislation. With the theme of the March this year being “With Every Woman, For Every Child,” the two votes could not have been more appropriate.

On Thursday, January 18, 2024, the U.S. House of Representatives passed two bills designed to help women and their families as well as pregnant and parenting students. In a post-Roe America, it is more important now than ever that pregnancy centers are able to effectively support mothers and their babies.

H.R. 6918, the *Supporting Pregnant and Parenting Women and Families Act* (sponsored by Rep. Michelle Fischbach R-Mn), passed by a vote of 214-208. Not a single Democrat supported the bill. The bill ensures that pregnancy centers are eligible for state-directed federal funds through the Temporary Assistance for Needy Families (TANF) program.

This legislation is in response to a current proposed rule by the Biden Administration to restrict federal funds from going to pregnancy centers in several states that direct funds to them through the TANF program. H.R. 6918 would prohibit HHS from finalizing, implementing, or enforcing this or any similar rulemaking that would restrict the use of TANF for pregnancy centers.

The Proposed Rule, among other things, targets pregnancy resource centers by threatening to strip them of millions of dollars of funding claiming, without evidence, that pregnancy centers do not meet TANF criteria. This is funding that is currently being used to support and compassionately help millions of women and their unborn babies annually.

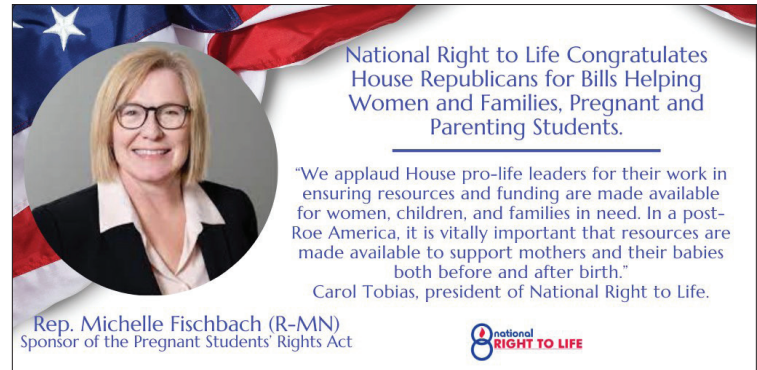
On the same day, H.R. 6914, the *Pregnant Students’ Rights Act* (Rep. Ashley Hinson R-IA), passed by a vote of 212-207. Again, not a single Democrat supported the bill. This legislation seeks to inform pregnant students that they have rights to accommodations and that there are prohibitions against discrimination due to pregnancy under Title IX of the Education Amendments of 1972.

According to the bill’s findings, “Female students enrolled at institutions of higher education and experiencing an unplanned pregnancy may face pressure that their only option is to receive an abortion or risk academic failure.”

H.R. 6914 would ensure that pregnant students, as well as students who are caring for a baby after birth, receive information on resources that exist to help them. Students would also be given information on how to file a complaint with the Department of Education based on Title IX and file a discrimination complaint with the institution of higher

education.

H.R. 6914 and H.R. 6918 reflect the commitment of the pro-life movement not only to protecting unborn babies but also to helping



their mothers get the support and practical assistance they need.

According to National Right to Life President Carol Tobias,

In longstanding narrow-mindedness, all of the Democrats in the House failed to support these reasonable measures because the bills do not promote abortion. Once again, leaders in the Democratic Party have shown their allegiance to the abortion industry and its extremism.

While these bills are unlikely to receive any action in the Senate, the House should continue to fight for mothers and their unborn children.

The new Speaker Mike Johnson addressed the March for Life crowd stating,

We know those are the centers that states rely on to assist expecting moms and dads. And that action would undercut

that important work, the important material support that expecting and first time mothers get from these centers. Our bill would prevent that regulation from coming into effect and ensure that the states can utilize these centers to help people in need. Who could be opposed to that? We’re, we’re passing these bills and we’re marching today because it takes a lot of work to convince people that every single human child, every unborn child, has a value that is too profound and precious to ignore. And we have every reason to be optimistic, my friends, that we can change public opinion.

Abortion Survivors Break Their Silence: An invaluable resource in Post-Roe America

By Dave Andrusko

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

*Melissa knew she was adopted, but not until her sister had an unplanned pregnancy did she learn that she had survived a hideously painful 5-day prostaglandin abortion. Through a series of events—discussed at length in her book *You Carried Me: A Daughter's Memoir*—she discovered her birthparents had been engaged to be married—they had dated for four years before her birth mother became pregnant with Melissa. She is convinced her birthparents would have carried Melissa to birth before her grandmother stepped in. To her delight she and her birthmother have since reconciled.*

In 2012 Melissa founded The Abortion Survivors Network (ASN), which has connected with more than 700 abortion survivors, friends, and family members. The ASN is the only healing and advocacy organization for abortion survivors, friends, and family members.

NRL News: You begin the book with this epigram:

To my community of abortion survivors around the world:

May this book show you that you are seen,

You are heard, and you are not alone.

Whether you break your silence publicly

or whisper it quietly, you matter...

Abortion Survivors Break Their Silence is a book that shines a light in the darkness.

What did you mean?

Melissa: Abortion survivors exist throughout the world. You wouldn't know that, of course, by looking at mainstream media reporting of abortion survivors.

their story to be validated. I want them to know that if they never share their story publicly, their story and their life matters. Our worthiness is not tied to speaking out.

NRL News: All books have a history. What brought you to

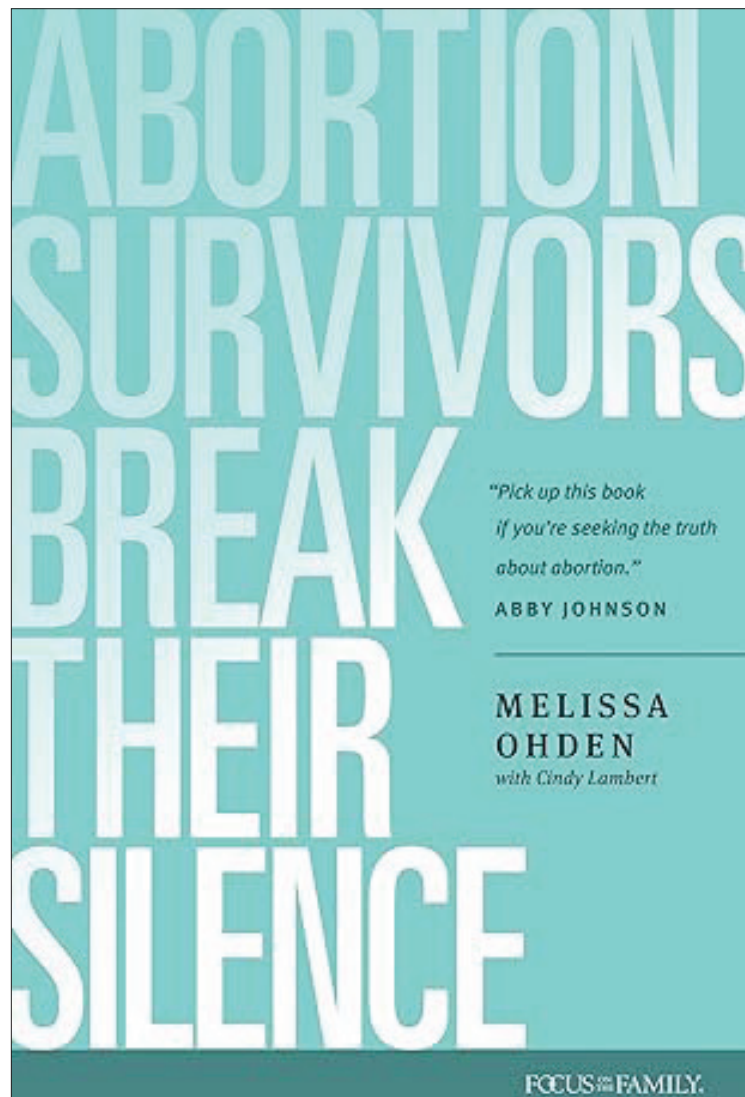
I felt like the next logical step in terms of awareness about survivors was this book. I admire Cindy's work and particularly *Unplanned*, and I'm honored she said yes to working with me on it.

From 2020-forward has been a progression of one change after another in terms of publishing. When the Supreme Court took up the *Dobbs* case in 2022, I honestly was kicking myself that the book hadn't been released yet. I honestly thought it would have been an important part of raising awareness and education regarding it. What I came to recognize after *Dobbs* overturned *Roe* is that the timing of this book is actually perfect. This book is needed now more than ever.

NRL News: You make the extremely important point not just that abortion survivors have lacked a voice in the national abortion discussion but also that the country is all the poorer for missing their real life stories.

Melissa: Stories are powerful. And the most powerful stories tend to be those most often buried under the weight of secrets, shame, cultural perceptions or cultural narratives on issues like abortion.

NRL News: Dr. Christian Francis is the CEO of the American Association of Pro-Life Obstetricians and Gynecologists. She wrote this about the book: "Melissa Ohden and Cindy Lambert shine a light on this little-talked-about aspect of the fight to defend the dignity of all human beings, and they beautifully give voice to these courageous individuals." There is that constant theme of giving voice to the voiceless.



Up until now, those of us who share our stories publicly—what our lives entail—are the only examples other abortion survivors have.

It's just implausible for many survivors to speak up because of family dynamics and expectations; it's not healthy. But survivors shouldn't have to share

collaborate with Cindy Lambert and write *Abortion Survivors Break Their Silence* at this particular point in time?

Melissa: Honestly, it's been a long road to get to 2024. This book has been on my heart for years. In early 2020 after we launched "Faces of Choice" as a successor to "Face the Choice,"

Abortion Survivors Break Their Silence: An invaluable resource in Post-Roe America

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Melissa: All of us in the movement give voice to the voiceless preborn, but survivors also give voice to the voiceless survivors out there and the women who share their stories give voice to the other women like them who have been voiceless for so long.

NRL News: You write “This closely held secret [that she had survived the attempted abortion at St. Luke’s Regional Medical Center in Sioux City, Iowa] that, once revealed, defined my life from that point forward. At first I was angry, feeling betrayed and misled. I thank God, however, that those angry feelings eventually gave way to an even deeper closeness between both my biological mom and my adoptive mom and me—a closeness that remains to this day. I marvel at how tenderly and wisely my adoptive parents handled my identity crisis after this shocking revelation.”

I would imagine that all people who find out they survived an abortion could easily be filled with rage. Do you find that to be true and do many reconcile with their birthmothers?

Melissa: Anger is a normal response to a violation or an injustice. It’s connected as well to the fight or flight response, which survivors are very much impacted by in utero. So it makes sense that most survivors tend to report anger when first finding out. But the anger is a mix of complicated emotions—not necessarily at the person who did it, but at the circumstances. And the truth is our life was endangered. That has impacted our lives. Owing to the brutality of the abortion process, we may be left with a disability. The feeling we have about our biological

parents is more like grief, more sadness than it is anger. These are the people we expect to protect us from harm. But when we learn the story of how they came to have the abortion, there is great power in coming to know the person behind the story (often birth parents). When we learn more about them and their circumstances, it leads, more often than not I find, to love and forgiveness.

We actually have found that more survivors are raised by their biological mothers (at least in those that we’ve connected with) than placed for adoption. There’s a lot we need to talk about and learn from mothers and survivors who’ve been impacted by failed, stopped, and reversed abortions. These families have long been under-identified and as a result not served. This is very important.

Without support and healing, patterns of shame, neglect, and abuse can occur. Obviously a “successful” abortion is not the solution. What is the solution is having an honest understanding that abortions can result in live births. All the parties involved—the babies who survive the abortionist, the women who experience this, the families impacted by this—all need medical, mental, emotional, familial, social support at the earliest point of intervention.

NRL News: There are twelve stories in *Abortion Survivors Break Their Silence*. I assume you were limited only by space constraints and could have included many more, right?

Melissa: Let’s just say there may be another book in the works already.....

NRL News: Bring us up to

speed on *The Abortion Survivors Network*.

Melissa: We’ve connected with over 700 survivors worldwide, which we know is just the tip of the iceberg.

Ambassadors’ stories.

NRL News: Any other areas I haven’t asked you about that you’d like to address?

Melissa: We’re working at ASN



Melissa Ohden

This last year, we began our support groups for moms, and we have separate groups for adoptive parents—although many connect to us themselves; you can contact us anytime—this is what we’re here for! We also held our first annual “Babies Survive Abortions Awareness” month this past September and will do annually going forward. Be on the lookout for more incredible stories and educational campaigns. We also launched our Advocates and Ambassadors—these are survivors who are trained how to share their stories and raise awareness in their states and countries. Always lots going on, and we’re so humbled by how we’re called to serve. You’ll see us at the National Right to Life Convention later this year and learn more through some of our

on various forms of training for Pregnancy Resource Centers’s, adoption agencies, sidewalk counselors, even medical professionals. That way they can talk with women whose babies survived an abortion as well as adoptive parents and survivors. More to come on that. This is also an important policy area that we’ll be talking about soon.

NRL News: How can *NRL News* readers and all pro-lifers order copies of *Abortion Survivors Break Their Silence*?

Melissa: The book is available wherever books are sold. You can find links on our website: www.abortionsurvivors.org where you can click through to purchase and see incredible stories not included in the book.

NRL News: Thank you, Melissa.

Do women suffer from depression after their abortions?

By Michael Cook

“It’s important for folks to know that abortion does not cause mental health problems,” Debra Mollen, of Texas Woman’s University, told the American Psychological Association in 2022. “What’s harmful are the stigma surrounding abortion, the lack of knowledge about it, and the lack of access.”

A link between abortion and depression is one of the most controversial topics in all of medicine, so it’s unlikely that an American consensus will be punctured by one study. But a recent systematic review and meta-analysis in *BMC Psychiatry* claims that globally the prevalence of post-abortion depression is 34.5% — more than one in three women.

Perhaps the reason for the difference lies in the fact that the six co-authors are all Ethiopian. They claim that their paper is “the first global meta-analysis of literature on post-abortion depression, to the best of the researchers’ knowledge”.

Their conclusions are tentative, as they were based on geographic regions rather than countries – and not all of the regions, either. “The continents of North America, South America, and Antarctica were not included due to a paucity of available literature,” they explain. It’s not surprising that statistics about abortion in Antarctica are scarce, but in North and South America? Perhaps US researchers decided that it is not an issue worth worrying about.

In any case, North America and South America are also-rans in the global population stakes. Asia, Africa, and Europe account

for 87% of the world’s population and for most of the world’s abortions.

Find more statistics at [Statista.com](https://www.statista.com)

What the Ethiopian researchers found is that post-abortion depression is more prevalent in the Eastern Mediterranean region and in Asia. Depression is much more

is believed to contribute to family dysfunction, health issues, and mood disorders.”

There is great variation amongst regions. Asia had the highest prevalence of post-abortion depression (37.58%), followed by Europe (32.69%), Africa (34.1%), and Australia (30%). The Eastern Mediterranean region had the

psychological problems, despite beliefs to the contrary”. Even if that is true in the United States, do all women around the world want their abortions? According to the Guttmacher Institute, an abortion rights think tank, “Roughly 121 million unintended pregnancies occurred each year between 2015 and 2019. Of these unintended



common in lower and middle-income countries (42.91%) than in high-income countries (24.9%). “This disparity may be attributed to the low social status of individuals, which can impede access to intangible resources such as security, opportunity, and education, irrespective of their objective income levels when they reside below the societal material standards,” they write. “The loss of certain types of social capital

highest prevalence (38.94%) while the European region had the lowest (32.69%).

These statistics are puzzling in the light of the vehemence with which American pro-abortion groups deny that abortion ever triggers mental health issues. The explanation may have something to do with the words “wanted” and “unintended”. The APA said that “getting a wanted abortion does not cause significant

pregnancies, 61% ended in abortion. This translates to 73 million abortions per year” – and about 25 million women suffering from depression.

This Ethiopian paper needs to be discussed more widely. The main news outlets seem to have ignored it.

Editor’s note. This appeared in BioEdge and is reposted with permission.

What if Pharmacists could be Abortion Pill Prescribers?

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

What if a pharmacist could not only dispense abortion pills, as the Biden administration has recently made possible, but prescribe them? Pharmacists in the state of Washington, taking advantage of provision in state law allowing pharmacists to prescribe drugs, are completing a training program that will enable them to be certified to prescribe and deliver abortion pills to women in their state, says Patrick Adams in a January 22, 2024, report for National Public Radio (NPR).

The vision is not simply to expand abortion pill access in Washington State, but to serve as a model for other states.

Taking advantage of newer FDA rules

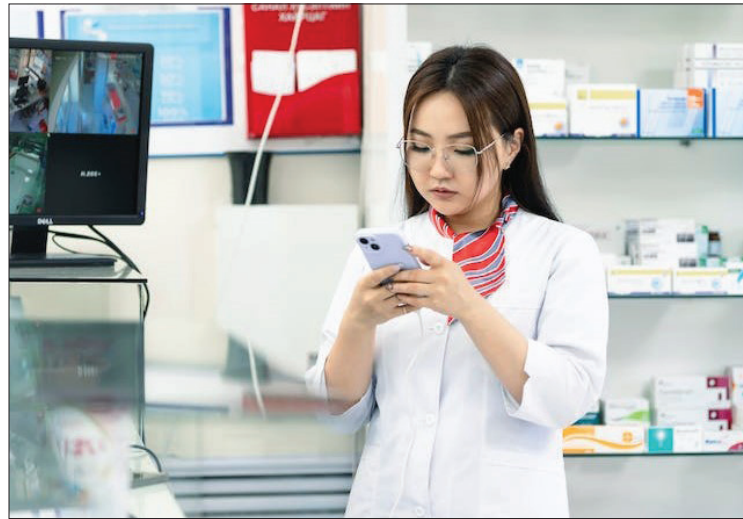
It was only about a year ago when the U.S. Food and Drug Administration (FDA), at the behest of the Biden administration, announced new regulations allowing for pharmacies to be certified to dispense mifepristone, the abortion pill.

Besides needing to have a designated person to fill out and manage all the paperwork, this person had to be familiar with the prescribing information, insure that prescriptions came from certified prescribers whose information was on file and confirm with the prescriber that the drug was appropriate for the patient.

This essentially means that prescriber and pharmacist both have to make sure that the patient has been appropriately screened for various conditions or drug allergies, making sure they are within the appropriate gestational range (no more than ten weeks past a woman's last menstrual period), and making sure that they do not have an ectopic pregnancy,

which the drugs do not treat.

The pharmacist who is planning to ship these drugs to women's



homes has to track and record all shipments and guarantee their delivery within four calendar days.

Any patient deaths are to be reported back to the prescriber, who in turn is to report these to the distributor, who reports these to the FDA.

At one point, prescriptions were limited to doctors, but under regulations in place since 2016, these can be prescribed by any "certified healthcare provider."

Under those terms, the drugs can be prescribed by any doctor, nurse, physician assistant, or any other healthcare provider — such as a pharmacist.

So long as they meet the certification requirements, largely mirrored in the pharmacy certification conditions, they can receive certification and FDA permission to prescribe and distribute the drugs.

If there is a difference in the two certifications, it is that the prescriber has to certify that they personally have the ability to accurately date pregnancy, diagnose ectopic pregnancy,

provide or refer for any necessary surgical intervention, and can assure patient access to medical

facilities equipped for blood transfusion.

They also need to make sure the patient is fully briefed on mifepristone risks, has any questions answered, and signs appropriate agreements.

Abortion pill advocates have sought to interpret these very loosely. They claim these tasks can be accomplished without an in-person physical exam (or ultrasound) in a teleconference, or even a phone call, or an online questionnaire. As of January 2023, the FDA appears to be allowing if not endorsing that interpretation with its new protocol.

State of Washington takes advantage

Under the new regulations, it isn't clear why any pharmacist in any state might not be able to qualify as a prescriber. But Washington state's law explicitly authorizing pharmacists to prescribe medications certainly makes it easier.

More than forty years ago, Washington passed a law setting up "collaborative practice

agreements," or CPAs. These allowed licensed prescribers such as to physicians or nurse practitioners to delegate authority to a pharmacist to prescribe or administer certain drugs. This enabled the state to use pharmacists to provide some limited healthcare and boost immunization rates among underserved Native American communities in the state.

Don Downing is a pharmacy professor who was part of that program in the 1970s and served as a pharmacist medical provider on area reservations. This past spring, shortly after the Biden administration announced the new certification system, Downing and several of his colleagues set up the Pharmacy Abortion Access Project. This focused on training community pharmacists to screen chemical abortion patients, prescribe abortion pills, and dispense them from their stores.

Downing told *NPR* that most women live close to their community pharmacy and see their pharmacist twice as often as they do their primary physician. Being more familiar, Downing seems to feel, women may be more comfortable seeking abortion pills from their local pharmacist than their doctor. Pharmacists are also more accessible to patients, with drug stores being open in the evenings, on weekends and holidays, often available without need for any appointment.

Ten pharmacists are part of Downing's first "class," and he expects them to be prescribing abortion pills sometime in the next few weeks. No word on how Downing means to ensure that the FDA grants certification within that time frame. However,

No, 64,000 Children Have Not Been Conceived in Rape in States with Pro-Life Laws

By Michael New

This past week, the academic journal *JAMA Internal Medicine* published a study claiming that the tens of thousands of pregnancies resulted from rape in states that enacted strong post-*Dobbs* pro-life laws. Specifically, the article claims that, since *Dobbs*, 519,981 rapes took place in states with strong pro-life laws in effect. This purportedly resulted in 64,565 children conceived in rape.

This study was quickly and uncritically covered by a number of mainstream media outlets including *CNN*, *NBC News*, the *Houston Chronicle*, *Axios*, *Time*, and the *Huffington Post*.

To call those figures an exaggeration would be an understatement. The article is frankly one of the worst and most misleading pieces of advocacy research that I have ever encountered in my years as social scientist.

Furthermore, the fact that this article appeared in a prestigious peer-reviewed journal grants it legitimacy and credibility that it absolutely does not deserve. There are significant problems with the methodology that that authors used.

First, the authors of the study claim that approximately 12.5 percent of rapes result in a conception. That is an exceptionally high figure. The results of a survey of over 4,000 women that was published in the *American Journal of Obstetrics and Gynecology* in 1996 puts that figure at closer to 5 percent. Furthermore, the 5 percent figure cited in this 1996 journal article is probably high because several

survey respondents reported being raped more than once.

Second, there are extremely wide disparities in reported rape statistics. The authors use data from the CDC's 2016–17 National Intimate Partner and Sexual Violence Survey, which estimated that over 1.4 million



women were the victims of a completed forcible rape during a twelve-month period. That is over four times higher than the estimates provided by the Department of Justice's National Crime Victimization Survey and over ten times higher than FBI data on the number of rapes reported to law enforcement. Furthermore, the CDC data have been criticized for significantly overestimating the incidence of rape. Fair-minded researchers

would have at least acknowledged these disparities. However, the authors of the *JAMA Internal Medicine* article simply assume that the much higher CDC estimates are the most accurate.

Finally, if one extrapolates the authors' calculations to the entire country, there would have

It should come as no surprise that some of the authors of this article are employed by organizations that support legal abortion. The lead author, Samuel Dickman, is the medical director of Planned Parenthood of Montana. Kari White is the executive and scientific director of Resound Research for Reproductive Health, previously known as the Texas Policy Evaluation Project (TxPEP). This group also supports legal abortion. The mainstream media outlets that ran stories about this study unsurprisingly failed to cover this blatant conflict of interest.

The fact that *JAMA Internal Medicine* published this article is troubling. In recent years many academic journals, particularly in the field of public health, have published opinion pieces or thinly researched articles by supporters of legal abortion. In 2017, the *New England Journal of Medicine* published an editorial criticizing some of President Trump's Health and Human Services appointees. Prior to the vote on the Affordable Care Act, the *New England Journal of Medicine* published a very superficial analysis of Massachusetts abortion data to claim that insurance coverage of abortion would not increase abortion rates.

Overall, academic journals should stick to publishing rigorous peer-reviewed research instead of serving e

been about 178,000 children conceived in rape in 2017. If half of the rape victims decided to obtain abortions, that means that approximately 10 percent of all abortions were performed on rape victims. However, multiple Guttmacher surveys find that only 1 percent of women seeking abortions cite being a rape victim as a reason for obtaining an abortion. This clearly shows how exaggerated these estimates really are.

Editor's note. This appeared at National Review Online and reposted with the author's permission.

Defeating Extreme Abortion Referendums in 2024: Your stories will make the difference.

By Peter T. Northcott, NRL Director of State Strategies

Some politicians today believe the way to protect their own political futures in 2024 is to alter their state's constitution to allow even the most extreme abortions. This dramatic change quietly gives the profit-driven abortion industry mandated approval to perform abortions with little-to-no safeguards to protect the health and safety of women.

These same women are left to feel that abortion is their only choice. Their real difficulties are lost in others' political ambition and the push to pad the abortion industry's already hefty bottom line.

But who else is lost? The children who will never blow out their first birthday candles.

In every corner of our nation, abortion franchises are taking steps to get assistance from radical pro-abortion state legislators or even funding paid canvassers to collect signatures per state ballot requirements to reach their goal.

Billionaires such as George Soros, Michael Bloomberg, and others are spending big to fund front groups with deceptive names that include the word "Freedom," "Limited Government," and the like. Their job? To convince the public that these initiatives are about stopping "government intrusion" into "private decisions."

Are you surprised their ads rarely use the word "abortion"?

Yet, from Arizona to New York and Florida, all the way to Hawaii, voters in over a dozen states could see measures that would force states to allow painful late-term abortion, clear the way for non-doctors to perform abortions on women, and erode informed consent requirements.

On top of this, the proposed language of most measures weakens parental rights so much that a 14-year-old girl could be

dropped off at an abortion clinic without her parents or guardians even knowing.

How is this possible? In short, changing just one word in a state's constitution can have a profound impact on its citizens for generations to come. In the case of these extreme abortion initiatives,

While most media sources downplay or intentionally conceal the facts from the public, one only needs to look to states whose constitutions have been altered to the abortion industry's liking to see what the endgame is. In 2019, in *Hodes and Nauser v. Schmidt*, the Kansas Supreme

In Michigan, clinic licensing requirements and even the state's law curbing the inhumane practice of partial-birth abortion have been removed. The list goes on and on.

To try to soften the perceptions around the initiatives, the proponents and their echo chamber, the press, have noted that their language makes reference to limits on certain abortions after "viability." However, virtually every referendum referencing viability includes a "health" exception, which will almost certainly be determined by the abortionist or their associates. Thus, it is a gaping loophole to allow any abortion, for any reason, at any point in pregnancy.

So, what is the best way to stand against these initiatives and stand up for the women, children and families who will bear the brunt of an unfettered abortion industry? Beyond raising the funds to push back against the marketing efforts of the abortion industry and the almost blatant malpractice of the media, it all starts with sharing personal stories that can pierce the human heart.

If you or a loved one has been hurt emotionally, physically, or in other ways by the abortion industry, sharing your story with National Right to Life or one of our state affiliates is the first step toward halting these initiatives. By exposing the truth and showing our fellow citizens that there is a better, more hopeful path forward is something our movement has that abortion extremists and their financial backers will never have.

For those feeling called to share their story, please feel free to reach out to us at NRLC@NRLC.org. Your story belongs to you, and you will stay in complete control of what is shared and what is kept confidential.



to quote Legal Scholar Elizabeth Kirk, "the broad unconditional wording of these constitutional regimes provides no textual basis for those states to restrict abortion (or any expression of "reproductive autonomy") in any meaningful way."

Thus, once the measures are passed, the abortion industry has the legal footing to systematically dismantle even basic abortion limits though the courts or their political allies.

Court effectively inserted a policy of unlimited abortion into the state constitution. Abortions have skyrocketed from just over 6,900 in 2019 to an estimated 20,000+ in 2023. In that time, limits on brutal live dismemberment abortions have been removed, clinic licensing, safety and sanitation requirements have been removed, informed consent, 24 hour waiting periods and anti-coercion protections have been blocked.

Summarizing the Biden Administration's savage, unforgiving attacks on unborn babies reminds us of what's at stake

By Dave Andrusko

Here's a question. What do we mean when we say someone or something is "relentless"?

According to various dictionaries it means "harsh or inflexible"; "showing or promising no abatement of severity, intensity, strength, or pace": finally, how about "Someone who is relentless is determined to do something and refuses to give up, even if what they are doing is unpleasant or cruel"?

If those descriptions don't apply 100% to the administration of President Joe Biden and its position on killing unborn babies, nothing would. Writing in *National Review Online*, Lathan Watts headlines his essay "The Biden Administration is continuing its Relentless Push for Abortion."

Even those of us who closely follow the Biden administration machinations would learn something new from Mr. Watts.

He starts off with something we have covered time and time (and time) again: The over-the-top unprincipled promotion of mifepristone, the abortion pill, better known as RU-486.

But before this there is his thesis:

Recent developments in ongoing litigation demonstrate two major points in the national debate over abortion policy and women's health. First, the Biden administration's contempt for the U.S.

Supreme Court's ruling in *Dobbs v. Jackson Women's Health Organization* is nearly boundless. Second, the Clinton-era canard that



pro-abortion advocates want to keep abortion "safe, legal, and rare" can be dispensed with forever.

Mr. Watts' first example illustrates how little stock the Biden Administration puts in sincere claims of conscience: The attempt by Biden administration to use the federal Emergency Medical Treatment and Labor Act to force emergency-room doctors to perform abortions. Various pro-life groups asked the court to keep in place a lower court ruling halting the administration's abuse of EMTALA to force doctors to harm women and their unborn children in emergency rooms in violation of state law." Guess what? The appeals court unanimously agreed.

Back to mifepristone. The Biden Administration trots out the usual suspects—ACOG and Planned Parenthood—to "prove" that women have nothing to fear if they undergo a chemical abortion.

However...

The FDA's own label for these abortion drugs indicates that roughly one in 25 women who take the drugs will end up in the emergency room. After requiring critical safety standards for 16 years, the FDA betrayed women and girls and removed these standards.

Showing the agency's cruel indifference to women's health, the FDA approved the drugs to be delivered through the mail directly to women and girls — without them ever meeting with a doctor. Nothing about leaving young girls to take these drugs all alone

at home with no medical attention is "safe, legal, and rare." The FDA even eliminated the requirement for health-care providers to report any serious, nonfatal complications from the drug. As the saying goes, "there are none so blind as those who refuse to see."

There are countless other examples—relentless attacks on the life-saving work of pregnancy help centers is just one of many. Watts's conclusion provides a great summary:

Whether it is using EMTALA to force emergency-room doctors to endanger the lives of women or abandoning women and girls in their homes or dorm rooms to face life-threatening complications of abortion drugs on their own, the executive branch of our federal government has made clear its callous disregard for pregnant women and their unborn children, not to mention the American people's right to empower women and protect life in their states without federal-government coercion. The Supreme Court will have its opportunity to rein in the administration's brazen overreach this spring.

Thousands gather to remember 12,000 lives lost and oppose unlimited abortion amendment at MCCL March for Life

ST. PAUL — Thousands of Minnesotans filled the state Capitol grounds to urge protection and love for both unborn children and their mothers

in this state Capitol behind me, we are likely to see even higher numbers for 2023.”

This year’s March for Life comes after the Minnesota

state Constitution.

“Each year in Minnesota, hundreds of babies just like me are aborted,” said 15-year-old Abby Hewitt of Pine Island, who

shared her story of overcoming three critical congenital heart defects. “They will never get to go to school, read a book, tell a silly joke, fall in love, or get married. ... I am fearfully and wonderfully made, heart defects and all. It’s a great reminder every day that I was created on purpose for a purpose.”

Dozens of state lawmakers and Congresswoman Michelle Fischbach attended today’s March. MCCL also announced a new outreach arm, the Center for a Pro-Life Minnesota, which will work through various avenues to rebuild a pro-life culture in the state.

“Governor Walz and the DFL Leadership have taken our state too far,” Blaeser told the crowd. “It’s time to say to them: No more extreme abortion policies that hurt women and threaten the lives of our children.”



and to speak out against efforts to enshrine unlimited abortion in the Minnesota Constitution. The MCCL March for Life, held each year on the anniversary of abortion’s legalization, featured a display of 12,000 life-size models of unborn children, each baby representing one life lost to abortion in 2022 alone.

“We can see as we look at this tragic display on the steps of our state Capitol the tremendous loss of life in just one year in our state,” said MCCL Co-Executive Director Cathy Blaeser during today’s program. “I am devastated to tell you that because of the laws passed by the DFL leadership

legislature in 2023 established abortion-up-to-birth in state law and repealed numerous longstanding abortion-related policies, including the Woman’s Right to Know informed consent law, the Positive Alternatives program supporting pregnant women, and a measure that ensured lifesaving care for born-alive infants.

The number of abortions in Minnesota increased by 20 percent in 2022—reaching more than 12,000 abortions total—and early estimates indicate an even larger increase in 2023. Some lawmakers now aim to enshrine abortion-without-limits in the



South Carolina Citizens for Life Celebrates Successful 50th Jubilee Anniversary

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

COLUMBIA, S.C. – South Carolina Citizens for Life celebrated its 50th Jubilee Anniversary with a two-day event January 5-6, 2024, including the Proudly Pro-Life Dinner featuring Seth Dillon, CEO of the Babylon Bee, and the annual Stand Up for Life March and Rally that has been held every year since 1974 despite the unpredictable January weather.

The Proudly Pro-Life Dinner was established in 2010 in the gymnasium of Our Lady of the Hills Catholic Church and has grown every year since. In 2012, SCCL moved to an events venue which accommodated the growth of the dinner through last year. This year we realized we needed to move to the Columbia Metropolitan Convention Center to accommodate the pro-life participants. Nearly 900 pro-life supporters gathered to hear popular pro-life speaker Seth Dillon and to enjoy uplifting music provided by Joyful Sound of North Greenville University and the Chetta Strings, a sibling group of professional musicians.

SCCL President Lisa Van Riper



presented a special Jubilee award to Pastor Bill Monroe, pastor of the Florence Baptist Temple, Florence, S.C., who helped start South Carolina Citizens for Life in 1974.

Carol Tobias, president of the National Right to Life Committee, Lynda Bell, Chairman of the NRLC Board of Directors, and Bill Pincus, M.D., president of North Carolina Right to Life were among the out-of-state guests to join in the Jubilee celebration.

SCCL President Lisa Van Riper's video recollections of the organizations 50 years of operation can be seen at <https://www.youtube.com/watch?v=oi7keq2ZfZU>.

The forecast for Saturday, January 6, was abysmal with more than an inch of rain predicted to fall on our parade. Many people prayed for God's favor and the rain slacked up around 9 a.m. The overcast and windy weather did not deter at least 300 pro-life marchers who gathered at the University of South Carolina's Russell House and, led by the Knights of Columbus, marched seven blocks to the State Capitol.

Supreme Court to hear first abortion case since *Dobbs* on March 26

By Dave Andrusko

And here we go. The Supreme Court on Monday released its calendar for March oral arguments and said they will hear *FDA v. Alliance for Hippocratic Medicine* on March 26. It's the first time since the court's historic 2022 ruling in *Dobbs v. Jackson Women's Health Organization* overturning *Roe*, that the justices will weigh in on the issue of abortion.

The drug at the center of the case is mifepristone—the abortion pill—which is half of a two-drug protocol used to end over half of all pregnancies.

The original lawsuit was brought by the Alliance Defending Freedom on behalf of pro-life medical organizations and four doctors who say they have treated women with mifepristone. Judge Matthew J. Kacsmaryk held “that both the initial approval of the pills in 2000 as well as more recent FDA decisions allowing them to be prescribed via telemedicine, sent by mail and dispensed at retail pharmacies, are unlawful,” Politico’s Alice Miranda Ollstein wrote.

Judge Kacsmaryk stayed his decision to allow an appeal which came in short order. The case moved to the 5th Circuit, an appellate court that oversees district courts in several states, including Texas.

In August 2023, “the U.S. Court of Appeals for the 5th Circuit turned down the challengers’ request to revoke the FDA’s

“The drug, however, remains widely available as a result of a temporary order issued earlier in 2023 by the Supreme Court.”

In April 2023, National Right to Life released a white paper *Addressing Many of the Myths the Media is Repeating about the*



initial approval of the drug in 2000, ruling that the lawsuit came too late, but it rolled back later actions by the FDA that increased access to the drug, such as allowing it to be used later in pregnancy,” Amy Howe reported.

“The FDA and Danco, which manufactures mifepristone, came to the Supreme Court last year, asking the justices to review the 5th Circuit’s decision, which they agreed in December to do.”

FDA’s Approval and Management of Mifeprex (Mifepristone) which can be accessed at <https://www.nrlc.org/wp-content/uploads/23-0404-White-Paper-Myths-About-the-FDA-Approval-of-Mifepristone.pdf>

National Right to Life Supports Bills Helping Women and Families, Pregnant and Parenting Students

NRLC President Carol Tobias spoke of NRLC's strong support for two bills that would help women and their families and pregnant and parenting student

On January 18, the House of Representatives passed two bills designed to help women and their families as well as pregnant and parenting students.

"We applaud House pro-life leaders for their work in ensuring resources and funding are made available for women, children, and families in need," stated Carol Tobias, president of National Right to Life. "In a post-Roe America, it is vitally important that resources are made available to support mothers and their babies both before and after birth."

Tobias continued, "In longstanding narrow-mindedness, every Democrat present voted wrong and failed to support these reasonable measures because the bills do not promote abortion. Once again, leaders in the Democratic Party have shown their allegiance to the abortion industry and its extremism."

H.R. 6914 The Pregnant Students' Rights Act passed in a vote of 212 to 207.

The Pregnant Students' Rights Act would inform pregnant students that they have rights under Title IX of the Education Amendments of 1972 to prevent discrimination because of pregnancy. The bill would also ensure that pregnant students, as well as students who are caring for a baby after birth, receive information on resources available to help them. H.R. 6914 would also provide students with information on how to file a complaint with the institution of higher learning.

"The Pregnant Students' Rights Act is needed so a mother should never have to choose between her education and giving birth to her child," said Tobias.

millions of dollars by providing services at little to no cost. Many pregnancy centers provide limited obstetrical ultrasounds under a local doctor's oversight as well

through the TANF program. H.R. 6918 would prohibit the Department of Health and Human Services (HHS) from finalizing, implementing, or enforcing this



NRLC President Carol Tobias spoke of NRLC's strong support for two bills that would help women and their families and pregnant and parenting student

H.R. 6918 The Supporting Pregnant and Parenting Women and Families Act passed 214 to 208.

The Supporting Pregnant and Parenting Women and Families Act would ensure that pregnancy centers are eligible for funding through the Temporary Assistance for Needy Families (TANF) program. Nearly 3,000 pregnancy centers across the United States serve over 2 million clients each year, saving local communities

as parenting classes. In addition, nearly all centers provide material assistance such as diapers, cribs, and car seats as well as practical help such as connecting a mother in need to local resources that can help her with housing or transportation.

The Biden Administration is currently proposing a rule to restrict federal funds from going to pregnancy centers in a number of states that direct funds to them

or any similar rulemaking that would restrict the use of TANF funds for pregnancy centers.

"We also thank pro-life leaders for standing firm and pushing back against the agenda of pro-abortion House Democrats," continued Tobias. "These same radical Democrats voted against these pro-family and pro-women bills because the bills do not advance the pro-abortion dogma of abortion extremists."

Did this mom in a Biden campaign ad ‘need’ to deliberately kill her preborn baby? Does any mom?

By Cassy Fiano-Chesser

A new campaign ad for the Biden administration features a Texas obstetrician-gynecologist (OB/GYN) making the now-familiar claim that she was denied a medically-necessary abortion because her pregnancy with a child with a “fatal condition” put her own “life at risk.” But is this true? But did she actually need to have her preborn child with a disability intentionally killed?

THE AD

In the ad, Dr. Austin Dennard is featured. Dennard is an OB/GYN practicing in Dallas, and is the married mother of three living children, and called her family the joy of her life. “I never thought that I would need an abortion for a planned pregnancy,” she said. “But I did. Two years ago, I became pregnant with a baby I desperately wanted.”

“At a routine ultrasound, I learned that the fetus would have a fatal condition, and that there was absolutely no chance of survival,” she continued. “In Texas, you are forced to carry that pregnancy, and that is because of Donald Trump overturning *Roe v. Wade*. The choice was completely taken away. I was to continue my pregnancy, putting my life at risk. It’s every woman’s worst nightmare, and it was absolutely unbearable.”

While it should be obvious to anyone aware of the American system of government, it was the United States Supreme Court, not former president Donald Trump, that overturned *Roe v. Wade* in the *Dobbs v. Jackson Women’s Health Organization* decision issued in June 2022, allowing each state to regulate its own abortion law. Read more here on the reasons why a majority of the Court chose to overturn *Roe*, which they called “egregiously wrong from the start.”

DID DENNARD NEED AN ABORTION?

Dennard argued in her Biden campaign ad that her life was at risk; however, carrying a child with a disability (like anencephaly, which was the diagnosis in this case) does not put the mother at risk any more than carrying an able-bodied child does.



Anencephaly is a condition in which the skull doesn’t properly form, causing the brain to be exposed to amniotic fluids and therefore, become underdeveloped. Many children with anencephaly die within hours or weeks after birth; some children, however, defy the odds and survive — even for years.

Though many have argued that it is necessary to intentionally kill a preborn child after a diagnosis of anencephaly to prevent the baby from experiencing pain, Cleveland Clinic states that newborns with anencephaly do not have the ability to feel pain.

Dennard is one of several women suing the state of Texas over the state’s laws protecting preborn children from abortion; in her court documents, Dennard explained she was particularly excited about this pregnancy because she had previously suffered a miscarriage.

She also disclosed that she had undergone an abortion in her first

pregnancy, after that baby was also prenatally diagnosed with disabilities — which indicates that her statement in the ad of never expecting to have an abortion was disingenuous. According to *CNN*, Dennard sought that prior abortion due to a diagnosis of Noonan syndrome. Though people with Noonan syndrome do

have disabilities, it is *not a life-threatening disease*.

DENNARD’S MINDSET

Dennard testified at an abortion hearing in front of Senate Democrats, where she complained of “forced pregnancy... forced delivery.” She further added that she would have been “[f]orced to watch him die, either in my womb, or in my arms.” She then said that Texas laws made her scared to use her credit card or tell people where she was going (out of state to get an abortion) even though Texas has no laws preventing anyone from traveling outside of the state for an abortion.

Dennard continued on by saying that she was not willing to bear the risks of carrying a pregnancy to term *for a baby with little chance of survival*. “They essentially just gasp for air until they pass away,” Dennard said of babies with anencephaly in her Senate testimony.

Her speaking of not wanting

to watch her baby die also is a key indicator of her mindset. It was obviously not *necessary* to hurry up and kill a child who was unlikely to survive; instead, the abortion was *desired and elective*, and it is clear from her statements that Dennard chose it to avoid experiencing her newborn’s death firsthand. Actively killing a one-year-old diagnosed with terminal cancer because you didn’t want to watch your child slowly pass away would be considered unacceptable; yet somehow, when the baby is preborn, that comparable scenario of actively killing one’s own child becomes acceptable.

While seeing your child die is, without a doubt, unspeakably traumatic and heartbreaking, playing a part in *actively killing* your own child is certainly not without significant trauma. Numerous studies have found that women who choose to kill a child by abortion following a prenatal diagnosis of a life-limiting disability or birth defect have a higher risk of post-traumatic stress disorder and emotional anguish than women who carry their babies to term after such a diagnosis.

In Dennard’s court documents, as well as follow-up press photos and the campaign ad where she proudly poses with a baby, it is clear that she was able to get her “much wanted” third (born) child at last... one whom she found acceptable enough to let live.

According to *CNN*, Dennard also stated that she believes “everyone’s reason for needing an abortion is valid” and, in fact, knew her life was not at risk due to her child’s disability, despite her claim in the Biden campaign

Freedom for Life: Why a Crying Baby is a Good Thing

“The best way that we can advance ‘Freedom for Life Year’ in South Dakota is by taking care of both moms and their babies before birth and after.”

By Gov. Kristi Noem

Editor’s note. Kristi Noem is the pro-life governor of South Dakota.

I recently delivered my State of the State Address to a joint session of our State Legislature. Towards the end of my speech, a small kiddo started crying up in the gallery. Now, to some that would probably be an unwanted interruption, but in South Dakota, we will always welcome a crying baby. And that’s a good thing considering the fact that our state has the highest birth rate in the nation – so we have a lot of crying babies around!

This particular kiddo did have some great timing, though. The crying started just as I started discussing Freedom for Life. We couldn’t have planned it better if we tried!

That crying represented every South Dakotan’s Freedom to get off to the right start. That includes before they are born, after they are born, and continues until the day they die. In that spirit, I just

signed a proclamation making 2024 “Freedom for Life Year” in the state of South Dakota.

The best way that we can advance “Freedom for Life Year”



*Pro-life South Dakota Governor
Kristi Noem*

in South Dakota is by taking care of both moms and their babies before birth and after. Every human life is precious from the conception of an unborn child until natural death. And being pro-life means valuing every child’s life before their birth and throughout their life. Being

pro-life also means valuing and protecting the lives of mothers.

Research has shown that the first 1,000 days of a child’s life are the most significant days for their development. This time stretches from the moment a child is conceived through their 2nd birthday. The fields of neuroscience, biology, and early childhood development all give us powerful insights into how nutrition, relationships, behaviors, and environments in the first 1,000 days shape future outcomes.

During that critical time, both mom and baby have to be well nourished and cared for to lead to healthy physical, emotional, and mental growth as a child’s brain and body develop. The first 1,000 days really does set the foundation for the rest of a child’s life.

In South Dakota, we have been dedicated to providing moms, babies, and their families with extensive resources to help them through those first 1,000 days and beyond. We offer the Bright

Start program to get one-on-one nursing services to first-time moms and their babies. And my Department of Social Services’ Pregnancy Health Home will offer care coordination to all pregnant mothers enrolled in Medicaid.

Life.SD.gov compiles all of our resources in one convenient location. I encourage moms to go there to find answers to any questions they may have about pregnancy, parenting, available financial resources, adoption, and more.

I am proud that South Dakota respects life. And I am looking forward to expanding our efforts to support mothers and their babies throughout 2024, “Freedom for Life Year.”

I want to thank that little kiddo for crying during my State of the State Address. Thank you for reminding all of us why we do what we do. I promise that I will keep doing all that I can to make sure you (and every other baby in South Dakota) has Freedom for Life.

What if Pharmacists could be Abortion Pill Prescribers?

From Page 9

his training program includes not only instruction on how to screen patients remotely without ultrasound, pelvic exam, or bloodwork, but also how to implement the treatment regimen and handle follow-up care.

Downing believes Washington’s program can be a model for other states.

NPR’s Patrick Adams writes about a bill being considered in New York state that would grant pharmacists authority to prescribe abortion pills there. Researchers in San Diego, California recently

published results of a pilot study claiming to show that pharmacists could safely and effectively prescribe abortion pills in that state.

NPR believes that there are already a few pharmacists in California who received advance practice certification and are legally allowed to prescribe the abortifacient pills.

Experts offer differing opinions

Naturally, like so many other propaganda pieces encouraged by the abortion establishment, the

article wraps up with statements by industry “experts” that chemical abortions are “extremely effective and extremely effective.”

Pro-life doctors who challenged the FDA’s new laxer prescription criteria in *Alliance for Hippocratic Medicine v. FDA*, the case being heard by the Supreme Court in April this year, know better.

When the FDA expanded the prescriber pool to include non-physicians and dropped requirements for in-person visits, those doctors claimed this made misestimations of gestational

age more likely, decreasing effectiveness and increasing the likelihood of complications.

They also believed this increased the risk of undetected ectopic pregnancies, which can prove deadly to the mother if they rupture.

This is in addition to the risks of hemorrhage, infection, and failure normally faced by users of the abortion pill.

If the Supreme Court rules in favor of pro-life doctors, it could mean that pharmacists in Washington and elsewhere will not be writing these prescriptions.

A call to conscience: Women deserve better than abortion

By Dave Andrusko

On page 20, we've gratefully reposted a commentary that Rep. Chris Smith, a personal hero of mine, wrote for the *Washington Times*—“Pregnancy resource centers must not be excluded from government funding.”

Smith, Co-Chair of the Congressional Pro-Life Caucus, was first elected in 1980 and is currently in his 22nd two-year term serving the 4th Congressional District of New Jersey. His passion to protect babies—and their mothers—is second to none.

The breadth of Rep. Smith's commitment to human rights and religious freedom can be seen in his choice of committees that he chairs or serves on.

According to his official biography, Smith “is Chairman of its Global Health, Global Human Rights and International Organizations Subcommittee. Smith also serves as the Co-Chair of the Tom Lantos Human Rights Commission, Chairman of the bipartisan House/Senate/White

House Congressional-Executive Commission on China (CECC) and as ‘Special Representative’ on Human Trafficking for the OSCE Parliamentary Assembly.”

Rep. Smith is blunt in his speeches in committee, on the floor, and in the commentaries he writes. For example, in the aforementioned *Washington Times* commentary, he writes that as pro-lifers

We reject the violence of abortion — dismemberment, child beheadings and abortion pills that literally starve the unborn baby to death.

Not a syllable in those 20 words is false. Which is why Rep. Smith is such a powerful orator. He touches even the hardest of hearts and forces them—if just for a moment—to squarely confront their consciences.

We too often talk about abortion as if it were an abstraction, as if almost 900,000 babies annually are not poisoned, not starved to death,

and not beheaded. We could abide what we are doing to the littlest Americans only if we look away—refuse to look at what we

devalues and disrespects unborn children and trivializes the harm suffered by women.



are doing and to *whom*.

Finally, in his *Washington Times* commentary, Rep. Smith concludes

The pro-abortion culture of denial — a modern-day flat earth society — denies,

The United States and the world must more fully recognize the breathtaking miracle of the newly created life of an unborn child and that women deserve better than abortion.

Pregnancy resource centers must not be excluded from government funding

By Rep. Chris Smith (R-NJ)

Pregnancy resource centers — supported by 83% of Americans — are an “oasis of love, compassion, empathy, respect, and care for both mothers and their precious children.”

At a pregnancy resource center dinner in New Jersey, two women expressed through tears of joy their deep and abiding gratitude for the love, respect and care that persuaded them to reverse their decision to abort their babies.

Then, two teenage girls spoke and thanked the director of the center for helping their mothers, who had just spoken about those difficult times. The girls said that if the director hadn’t been there for their mothers, “we’d be dead.”

There are more than 2,700 pregnancy resource centers in the United States — each and every one of them an oasis of love, compassion, empathy, respect and care for mothers and their precious children.

Americans agree. The new Marist national poll released this week found that 83% of Americans, including 75% of Democrats, support — I say again, support — pregnancy resource centers.

Like all of us in this great human rights movement, they stand with every woman and for every child.

We reject the violence of abortion — dismemberment, child beheadings and abortion pills that literally starve the unborn baby to death.

As all of you know, the infamous holdings in *Roe v. Wade* and *Casey* were reversed by the brilliant *Dobbs* decision

— conveying to lawmakers at the federal, state and local levels the authority to regulate or prohibit abortion.

We are greatly encouraged and filled with hope and resolve.

Lives are being saved.

Despite serious challenges in some states like my own, 25

states have one or more strong gestational limits on abortion that are either in effect or are being litigated in the courts.

discriminates against pregnancy resource centers. The measure, the Supporting Pregnant and Parenting Women and Families Act, would ensure that pregnancy resource centers cannot be excluded or restricted from receiving Temporary Assistance for Needy Families

young women are empowered to choose life and create the best future for themselves and their child.”

Tragically, Mr. Biden — the abortion president — has weaponized the federal bureaucracy to aggressively promote abortion on demand, including a full-court press to force taxpayers to pay for it.

Last Congress, with Mr. Biden’s absolute support, House Democrats twice passed a radical abortion on demand act that would not only legalize abortion in all nine months of pregnancy but would also nullify every pro-life policy ever enacted.

Think of it: all nine months. We can’t allow that to happen.

That extremist legislation poses an existential threat to countless women and children.

The Biden administration and some governors and lawmakers continue to smear and misrepresent the noble work of pregnancy resource centers. We can’t allow that to happen, either.

The pro-abortion culture of denial — a modern-day flat earth society — denies, devalues and disrespects unborn children and trivializes the harm suffered by women.

The United States and the world must more fully recognize the breathtaking miracle of the newly created life of an unborn child and that women deserve better than abortion.

Editor’s note. This commentary appeared in the Washington Times.



states have one or more strong gestational limits on abortion that are either in effect or are being litigated in the courts.

We are making progress.

Last week, under Speaker Mike Johnson’s leadership, two important pro-life bills authored by two courageous lawmakers, Michelle Fischbach and Ashley Hinson, passed the House.

Ms. Fischbach’s legislation would prohibit President Biden’s new policy proposal that

funding, which the president has proposed in a rule.

Ms. Hinson’s Pregnant Students’ Rights Act would require colleges and universities to communicate and distribute information informing pregnant students of their rights, and the accommodations and resources available to them.

She said: “It’s unacceptable that pregnant women on college campuses are often pressured to have an abortion. My bill ensures

Annual Knights of Columbus poll has much good news for pro-lifers

By Dave Andrusko

For the better part of a decade, just prior to the March for Life, the Knights of Columbia have released their annual poll on abortion. This year's is headlined "A Consistent Consensus of Americans Continue to Support Legal Limits on Abortion Poll Also Shows Overwhelming Support for Pregnancy Resource Centers."

Each year I look forward to reading the results, which are taken for the K o f C by the Marist Poll, because the survey asks questions either nobody else inquires about or dismisses their significance.

The lead of their press release is

"The 2024 Knights of Columbus-Marist Poll results, released today, reveal that 66% of Americans support placing legal limits on abortion, and that nearly 6 in 10 support limiting abortions to the first three months of pregnancy."

The survey also found

that 83% of Americans support pregnancy resource centers, which offer support to mothers both during their pregnancy and after their baby is born.

Additionally, the poll found that two-thirds of Americans believe healthcare professionals with religious objections to abortions should not be legally required to perform them, while 86% of respondents believe that laws can protect both the mother and her unborn child.

Let's dig deep into the survey of 1,371 adults taken between January 8 and 9 of this year and

see what a close look reveals.

- "Do you strongly support, support, oppose, or strongly oppose using tax dollars to pay for abortion?"



53% said they were strongly opposed/opposed while 46% of the respondents said they were strongly in support/support.

- "How about "using tax dollars to support abortion services in other countries?" Two-thirds [67%] were either strongly opposed or opposed sending their money overseas to kill babies. They then were asked...
- "Do you think doctors, nurses, or other healthcare professionals who have religious objections to abortion but practice where abortion is legal, should or should not be legally required to perform abortions?" Two-thirds [66%] say medical personnel should not be legally required to participate in this grisly business.

This is important because the pro-abortion Biden administration, armed to the teeth with federal power, is constantly, consistently, and continually attempting to

run roughshod over the religious objections of those who want no part of abortion. Which brings us to chemical abortions...

- "Do you think for someone to receive

these prescription medications: An in-person visit with a healthcare professional should be required or an in-person visit with a healthcare professional should not be required?" Sixty-one percent say an in-person visit should be required.

Why is this important? The Biden administration is moving heaven and earth to insure that mifepristone—the abortion pill—be send through the mail—in other words without an in-person visit. This is flat-out dangerous to women.

This is coming to a head.

On December 13, the justices of the Supreme Court agreed to hear the pro-abortion Biden Administration defend the new REMS [Risk Evaluation and Mitigation Strategies] put in place last January. These changes remove the required in-person visit to pick up the pills, thus authorizing mail order, but still keep certain provider certification qualifications and impose a certain set of requirements for pharmacy certification.

The survey participants were then asked....

- "Do you strongly support, support, oppose, or strongly oppose abortion because the child will be born with Down Syndrome?" Almost 60% said they strongly opposed or opposed to these eugenic abortions. Three more...
- "Do you strongly support, support, oppose, or strongly oppose abortion because of the child's gender or sex?" A whopping 86% oppose sex-selection abortions!!
- "Do you strongly support, support, oppose, or strongly oppose pregnancy resource centers which are places that do not perform abortions but instead offer support to people during their pregnancy and after the baby is born?" 83% support these life-affirming centers.
- "Regardless of your position on abortion, if there were laws which limit when abortion is allowed, do you think these limits: Should allow exceptions for rape, incest, or to save the life of the mother at any time during pregnancy or should not allow for any exceptions?" 84% say these exceptions should be allowed.

A nuanced, carefully constructed survey. You can read in its entirety at www.kofc.org/en/resources/communications/polls/marist-poll-results2024.pdf

Newborn left wrapped in plastic shopping bag on London street in freezing temperatures

By Cassy Fiano-Chesser

A newborn baby was found abandoned on the streets of London this week, wrapped only in a plastic bag. Hospital staff have named the little girl Elsa.

A good Samaritan out walking a dog found baby Elsa on the night of January 18th and alerted police. “Thinking fast, that person kept the baby girl warm until London Ambulance Service paramedics arrived and checked her over before taking her to hospital,” Chief Superintendent Simon Crick said. “I am grateful to the members of the public who stayed at the scene to speak with officers and medics – your actions contributed to saving the baby’s life.”

Crick added that they now are hoping to find the mother, and are concerned with her welfare.

“[S]he will have been through a traumatic ordeal and will be in need of immediate medical

attention following the birth,” he said. “Trained medics and specialist officers are ready to support her and we urge her to get in touch by phone or walk into the



nearest hospital or police station. If you are the baby’s mother please know that your daughter is well; no matter what your circumstances, please do seek help by dialing 999.”

Temperatures that night were less than 30 degrees, with snow and ice warnings. Police have confirmed that Elsa was less than one hour old. She was thankfully

the mother wanted the baby girl to be found, by leaving her in such a public place. “The towel was by a red route clearway sign. But the baby and the plastic bag weren’t there. The towel was in a really visible area next to the main road,” she said. “It was absolutely freezing last night.”

The United Kingdom does not appear to have safe haven laws like the United States. In the U.S., each state has some form of a law allowing infants to be left safely and anonymously with first responders at locations like hospitals or fire stations. A petition was submitted to introduce safe haven laws to the UK in the 2015-2017 Parliament session, but it didn’t receive enough votes to proceed.

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

found unharmed, and is safe and well in the hospital.

Restaurant manager Tania Lurac lives nearby, and saw the commotion on her way home from work. She said she believes

Contrary to the claims of pro-abortion activists, abortion pill reversal is safe and promising.

By Calvin Freiburger

BOSTON — The Massachusetts Department of Public Health (DPH) is warning health providers in the Bay State against promoting or prescribing a safe, proven method of reversing the effects of abortion pills before they kill a developing child.

Abortion Pill Reversal (APR) is a method of counteracting the abortion pill mifepristone (better known as RU-486) that functions by administering extra progesterone, the natural hormone mifepristone blocks, ideally within 24 hours of taking the abortion pill. Abortion defenders have targeted it in multiple states and demanded that speech touting it be suppressed on social media.

As highlighted by Live Action earlier this week, on January 3 the Massachusetts DPH sent a memo to all “licensed physicians, physician assistants, nurses, pharmacists, pharmacies, hospitals, and clinics” in the state to warn that their medical licenses could be at risk if they did not “provid[e] patients accurate and complete information for informed decision-making, accurate portrayal and advertising

of clinical services, and licensees practicing within their scope of practice and their license.”

One example of “violation of good and accepted health care practice” identified by the memo is APR. “Strong evidence,” it says, indicates that APR is “unproven, unethical, and unsafe to provide to patients.”

The document does not elaborate on this evidence, but instead cites the position of the American College of Obstetricians & Gynecologists (ACOG) that APR is “not supported by science.” ACOG has a long history of pro-abortion bias and advocacy.

In response to such accusations, pro-life OB/GYN Dr. William Lile has explained that APR is based on principles that are well understood from progesterone’s common, FDA-approved use in a variety of other pregnancy-related situations. According to the Abortion Pill Rescue Network (APRN), “initial studies of APR have shown it has a 64-68% success rate.” Heartbeat International also publishes firsthand testimonials from women who have benefited from the technique.

Last summer, the academic journal *Scientific Reports* published a study by Franciscan University of Steubenville neuroscientist Dr. Stephen

Pill Reversal) can be effective since it’s the very same hormone a woman’s body produces to sustain her pregnancy,” says Heartbeat International. “One study even



Sammut that found “progesterone, administered shortly after mifepristone, reversed the effects of mifepristone (i.e., reversed the abortion) with living fetuses present at the end of gestation in 81 percent of cases,” after months of being challenged and rejected by other publications.

“All major studies show that using progesterone to counteract a chemical abortion (Abortion

shows an effective rate of 80 percent. Progesterone has been safely used with pregnant women and their babies since the 1950s. To date, statistics show more than 4,500 women have had successful abortion pill reversals and that number grows higher each day.”

Editor’s note. This appears at Life Site News and is reposted with permission.

Stand Against the Radical Arkansas Abortion Amendment!

Join the DECLINE TO SIGN Campaign

Arkansas Right to Life is currently engaged in the toughest battle yet for the lives of our unborn children in Arkansas. Since the *Dobbs v. Jackson Supreme Court Decision* of June 24, 2022, Arkansas effectively ended the legal killing of unborn children by abortion, with the only exception to prevent the death of the mother (Act of 180 of 2019).

As the issue of legal abortion was returned to the people, we have seen state initiatives to expand abortion and Arkansas now finds itself a target for such an effort. In November a group calling themselves “For AR People,” ironic in itself, formed a ballot question committee, “Arkansans for Limited Government,” to place an amendment on the 2024 ballot to address reproductive freedom.

After the title was rejected by Attorney General Tim Griffin, the group resubmitted it as simply the Arkansas Abortion Amendment narrowed a “health” exception, and made other changes suggested by AG Griffin and await approval to begin gathering signatures on petitions to secure it on the ballot before voters on November 5, 2024.

Arkansas Right to Life isn’t waiting to announce our Decline to Sign Campaign to ask all Arkansans unwilling to sign a death warrant on innocent unborn children to POLITELY Decline to Sign when approached. Once the ballot title is approved paid canvassers will hit the streets of Arkansas.

We have already joined with other pro-life, pro-family organizations and individuals to strategize to confront this assault on the lives of Arkansas women and children. The fight is on and we are up to the challenge!

It is evident that while this appears as a reasonable and

compassionate response to the needs of women – it is far from it! To be clear, legal abortion is a profit-driven industry that seeks to exploit vulnerable women without safeguards against injuries or



death and cares nothing about the child that is destroyed by any means possible, even moments from birth. There is nothing reasonable or compassionate there.

The Arkansas Abortion Amendment would enshrine abortion in Arkansas’ Constitution and gut Amendment 68 which says it’s the policy of the state of Arkansas to protect unborn babies from conception until birth.

Besides that, it could wipe out all Arkansas laws that protect women ensure clinic inspections, licensing, and safety when it comes to abortion, and prevent parents from knowing about or being involved in their minor child’s secret abortion. There could be no law protecting unborn babies capable of feeling pain from being tortured to death by dismemberment or dying from neglect if they survived an abortion.

We urgently request your

help by joining the DECLINE TO SIGN campaign! We are unwavering in our commitment to fight against this deceitful abortion amendment and will utilize every pro-life resource

state. We can’t hope to match them but that won’t stop us from trying.

3. **Spread the word:** Share this message to all your family, friends, and pastor. Urge them to join the DECLINE TO SIGN campaign. Together we can amplify our voice to protect mothers and unborn babies in Arkansas.
4. **Peaceful Intervention:** When you come across individuals collecting signatures to support this anti-life amendment, peacefully intervene. Stand near them and kindly request people not to sign, explaining why the language in this amendment is deceptive. Be respectful at all times.
5. **PRAY for Arkansas Right to Life and all those who are working to protect mothers and unborn babies in Arkansas.** Lift us up daily in prayer, seeking divine assistance and strength to defeat this evil. Your prayers undergird our work and are essential to our pro-life work. We will not win without them! Talk to your pastor about making this a priority in your church.
6. **Write letters to your local paper:** In your own words

to ensure its defeat, but we need your help!

What YOU can do to help us prevent the pro-abortion organizations from successfully gathering petition signatures:

1. **Do NOT sign the death warrant on the unborn petition:** urge everyone you know not to sign! See “Why You Shouldn’t Sign” below.
2. **Please make a generous donation/monthly pledge:** Arkansas Right to Life has made this our TOP priority. Your financial contribution will strengthen our fight against this evil amendment. Planned Parenthood and their elite Hollywood friends will spend lots of money to legalize killing babies in our

National Right to Life Endorses President Donald J. Trump in 2024 Presidential Race

From Page 1

and their mothers from unlimited abortions.

Along with a consistent majority of Americans, President Trump opposes using tax dollars to pay

tax dollars to organizations that perform or promote abortions overseas. He later expanded this policy as the “Protecting Life in Global Health Policy” to prevent

as the “Abortion Without Limits Until Birth Act,” an extreme bill pushed by Democrats that would enshrine unlimited abortion in federal law and policies and tear

In contrast, President Joe Biden and Vice President Kamala Harris have employed a relentless, whole-of-government approach in their efforts to bring unlimited abortion to every state. In a second term, Biden and Harris have made it no secret that they plan to institute a radical, nationwide policy that will allow unlimited abortions for any reason until birth and use taxpayer dollars to fund abortions, even as a means of birth control.

“For years, President Trump has given a voice to many Americans who felt their concerns were not heard and their needs not met, including millions of Americans who want to see greater protections for unborn children and greater help for women and families facing unexpected pregnancies,” said Tobias. **“We look forward to defeating the pro-abortion Biden-Harris ticket and working with President Trump to build an America that truly respects life at every stage.”**

A summary of President Trump’s record on the life issues is available here-- www.nrlc.org/uploads/records/trumprecord.pdf.

A summary of President Biden’s record on the life issues is available here--<https://www.nrlc.org/uploads/records/bidenrecord.pdf>.



for abortions. In 2017, Trump issued a statement of support for the *No Taxpayer Funding for Abortion Act*, a bill that would bar taxpayer funding for abortions on a government-wide basis with exceptions for when the life of the mother is at risk or in cases of rape, incest, or medical emergency.

As one of his first actions as president in 2017, President Trump reinstated the Mexico City Policy to halt the flow of American

\$9 billion in foreign aid from being used to fund the global abortion industry.

President Trump supports the *Born-Alive Abortion Survivors Protection Act*, which would ensure that an infant born alive during an abortion attempt is afforded the same degree of medical care as any other infant born at the same gestational age.

President Trump opposes the so-called *Women’s Health Protection Act*, also referred to

down virtually all protections for unborn children and their mothers on the state level including laws requiring parental involvement before an abortion is performed on a minor.

President Trump is committed to filling judicial vacancies with qualified individuals who will interpret the Constitution based on its text and history, and otherwise leave policy questions in the hands of elected legislators.

Montana AG puts the brakes on proposed constitutional amendment, says it “creates an express right to abortion but denies voters the ability to express their views on the nuance of the right”

By Dave Andrusko

In a memorandum dated January 16, Montana Attorney General Austin Knudsen wrote that Ballot Measure #14, a proposed ballot initiative “spearheaded by Planned Parenthood Advocates of Montana, improperly ‘logrolls multiple distinct political choices into a single initiative’ and limits the state’s ability to protect public health and safety,” Mara Silvers reported for the *Montana Free Press*.

In blocking Ballot Measure 14, for now, Knudsen wrote that it “creates an express right to abortion but denies voters the ability to express their views on the nuance of the right. This is classic logrolling and is prohibited by Article XIV, Section 11 of the Montana Constitution,”

“The backers of the initiative, organized through the committee Montanans Securing Reproductive Rights, said they intend to challenge Knudsen’s decision in state court within 10 days, the time designated by the ballot proposal process,” Silvers explained.

Writing for the *Idaho Capital Sun*, Nicole Girten reported, “If this ballot initiative makes it before voters in 2024, the Montana Constitution would get a new section explicitly outlining the right to an abortion, as opposed to relying on the court’s interpretation of the state’s right

to privacy in the constitution.”

“The right to an abortion is already protected in Montana under the state Supreme Court decision *Armstrong vs. State*, which was upheld earlier this year, under the court’s interpretation of the right to privacy in the constitution.”

Ok, if that is so, why the need for Ballot Measure #14?

Spokesperson for Planned Parenthood Advocates of Montana Christopher Coburn said in an interview if this ballot initiative were to pass, the right to abortion access would not rely on such interpretation and would be spelled out as a Constitutional right on its own.

“Courts wouldn’t have to interpret what the constitution might mean, because it would be spelled out in the constitution,” Coburn said.

Or, as the submitted language reads, “This constitutional amendment prohibits the government from denying or burdening the right to abortion before fetal viability.”

Assuming the Montana Supreme Court gives its blessing to the wording, to get on the ballot supporters of Ballot Measure #14 “will have to gather signatures

from at least 10% of Montanans eligible to vote, with that number including 10% of the eligible voters in two fifths of legislative districts” to be on the 2024 ballot, according to Girten.

compelling state interest and are narrowly tailored to that interest cannot survive. This amends the Armstrong framework.

By removing current



Judge Knudson concluded that Ballot Measure #14

changes the status quo. First, Section 36(1) unmoors the right to an abortion from fetal viability. Second, Section 36(2)’s “in no circumstance” clause prohibits any regulation of abortion care if the abortion provider deems the procedure medically necessary. This clause makes it so even regulations that serve a

sideboards on what is medically necessary, the clause has the effect of rendering Section 36(2)’s first clause superfluous because the State can never enforce any regulations on abortion under the “in no circumstance” language. This language also elevates the right to abortion above other medical procedures so that abortion—alone—cannot be regulated.

New York Limits the Financial Assistance Adoptive Families Can Provide for Birth Mothers

By Kim Schwartz, Texas Right to Life

New York makes it easier to abort a child than to adopt one under a new order from Democrat Governor Kathy Hochul's administration.

New York's Office of Children and Family Services (OCFS) issued a memo on January 5 limiting the financial support adoptive families can give to birth mothers.

Often when a birth mother chooses a family to adopt her child, the adoptive family offers to pay for prenatal care, living expenses, or other means that help the woman who has become a unique and special part of their lives. However, New York will restrict financial help to be made 60 days before the baby is born and 30 days after birth.

The mandate is referenced in a memo sent on January 5 by OCFS Agency Director Shelly Fiebich.

"Be advised that the New York State Office of Children and Family Services Interstate Compact on the Placement of Children (NYS OCFS ICPC) office has revised the Adoptive Placement Fee Disclosure Form OCFS-4690 to clarify that the

[agency] will only apply New York law when reviewing fees paid or to be paid in the context of an adoptive placement and an application for [agency] approval of an adoptive placement into New York," Fiebich wrote, according to the *New York Post*.



*Pro-abortion New York Governor
Kathy Hochul*

Not only does the state restrict adoptions for birth mothers who live in New York, but it also forbids families from assisting birth mothers who live out-of-state.

Fiebich continued, saying the New York agency that oversees adoption services "will not accept an out- of-state court order that

addresses the subject of fees."

Birth mothers will be impacted most severely by New York's order at a time when these pregnant women bravely and difficultly seek to provide a new life for their children.

Adoption lawyer Lisa Goldberg warned, "Why would a birth mother pick you if you're limited in how much you can assist her?" She explained that the Hochul administration's gift restrictions will discourage birth mothers from another state to place their children for adoption with New Yorkers, compared to prospective parents in other states with less stringent rules.

Former Congressman and adoptive father Max Rose also criticized the limits as anti-adoption and anti-family.

"I sincerely hope Gov. Hochul fixes this rule. I know in her heart of hearts she wants New York families who choose to adopt to be supported and make New York a place to raise a family," Rose said.

"Unfortunately this rule does the opposite and puts New Yorkers through a lot of pain."

The Hochul administration defended the January memo, pointing the finger at the state legislature, saying the OCFS is only enforcing a state law that was already on the books.

"OCFS is committed to helping all children eligible for adoption find a permanent, loving family, including any who may be considered for adoptive placement from other states. We follow all New York State laws, and any court order that is fully compliant with the law will be honored," the agency said in a statement.

Hochul proclaims she is the first "mom governor" and previously dedicated \$7 million in additional funding for adoption-related services.

However, at a time when New York is doubling down on abortion, it's hard to see this mandate as anything but anti-child and anti-family.

You can contact New York's Office of Children and Family Services to encourage them to reverse this policy by emailing info@ocfs.ny.gov or calling 518-473-7793.

Ohio Grand Jury declines to press charges against woman who left her 22-week-old miscarried baby in a toilet

By Dave Andrusko

A grand jury in Ohio has decided that Brittany Watts, 34, who tried to flush her 22-week-old miscarried baby down the toilet, will not face criminal charges.

“A municipal judge had found probable cause to bind over Watts’ case after city prosecutors said she miscarried — clogging the toilet and removing some of its contents to an outdoor trash area — then left the house, leaving the 22-week-old fetus lodged in the pipes,” Julie Carr Smyth reported for the *Associated Press*. “The Trumbull County prosecutor’s office said grand jurors declined to return an indictment for abuse of a corpse.” An autopsy determined the baby died in utero and identified “no recent injuries.”

Abortion supporters desperately wanted to present the case as an attempt by a pro-life state to prosecute a woman for having miscarriage. Veteran pro-abortion scribe Jill Filipovic claimed Watts was “being prosecuted for having a miscarriage.” Adding more hyperbole and misinformation, she wrote “Watts’ case is a chilling preview of what could come: Miscarriage criminalized in myriad ways.”

Tierin-Rose Mandelburg of *Newsbusters* made the key distinction. “Miscarriages are

when a child spontaneously dies in utero,” she wrote. “Abortions are when a child’s life is purposely ended while in utero. No pro-life law makes it so that a woman who



miscarries cannot receive proper medical attention or care.”

“Watts was in trouble because she tried to flush her 22-week-old baby’s remains down the toilet, not because she had a miscarriage,” she said.

According to Smyth

Watts had visited Mercy Health-St. Joseph’s

Hospital, a Catholic facility in working-class Warren, about 60 miles (100 kilometers) southeast of Cleveland, twice in the

attorney said, she left each time without being treated. After she miscarried, she tried to go to a hair appointment, but friends sent her to the hospital. A nurse called 911 to report a previously pregnant patient had returned reporting “the baby’s in her backyard in a bucket.”

That call launched a police investigation that led to the eventual charge against Watts.

Warren Assistant Prosecutor Lewis Guarnieri told Municipal Court Judge Terry Ivanchak the issue wasn’t “how the child died, when the child died” but “the fact the baby was put into a toilet, was large enough to clog up the toilet, left in the toilet, and she went on (with) her day.”

days leading up to her miscarriage. Her doctor had told her she was carrying a nonviable fetus and to have her labor induced or risk “significant risk” of death, according to records of her case.

Due to delays and other complications, her

Traci Timko, Watts lawyer, argued that Ohio’s “abuse-of-corpse statute lacked clear definitions, including what is meant by ‘human corpse’ and what constitutes ‘outrage’ to ‘reasonable’ family and community sensibilities,” Smyth reported.



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

Maria "Pili" Goddard,
from Connie Lucas

Maria Theresa Klein
from Daniel Klein

CSM Lamar Mallette, Jr., Federico and
Rachele Sansone, deceased
from Flavia Mallette

John Joseph Gustafson
from Jake and Kathi Gallinetti

Anna Jean Sebralla,
from Karen Black

Barbara Weiskircher
from her husband Tom and their children

Daniel A Mercer,
from John E. Mercer

In Honor of

Lori's baby
from Lori Hugill

Dr. and Mrs. Joseph Ricotta
from John Ricotta

February 2024

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



Memorials & Tributes

Contribution
amount



Your name _____

In memory of _____ In honor of _____

Your address _____

Name/Address for acknowledgment card _____

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

Did this mom in a Biden campaign ad ‘need’ to deliberately kill her preborn baby? Does any mom?

From Page 17

ad. “I was not critically ill,” she said. “I was not hemorrhaging, I was not septic.”

Tragically, Dennard never even humanized the second child she chose to abort, telling *CNN*, “I was pregnant with a lethal anomaly, and I did not believe that I would be able to receive an abortion in my state at that time for the sole purpose of my lethal anomaly” (emphasis added).

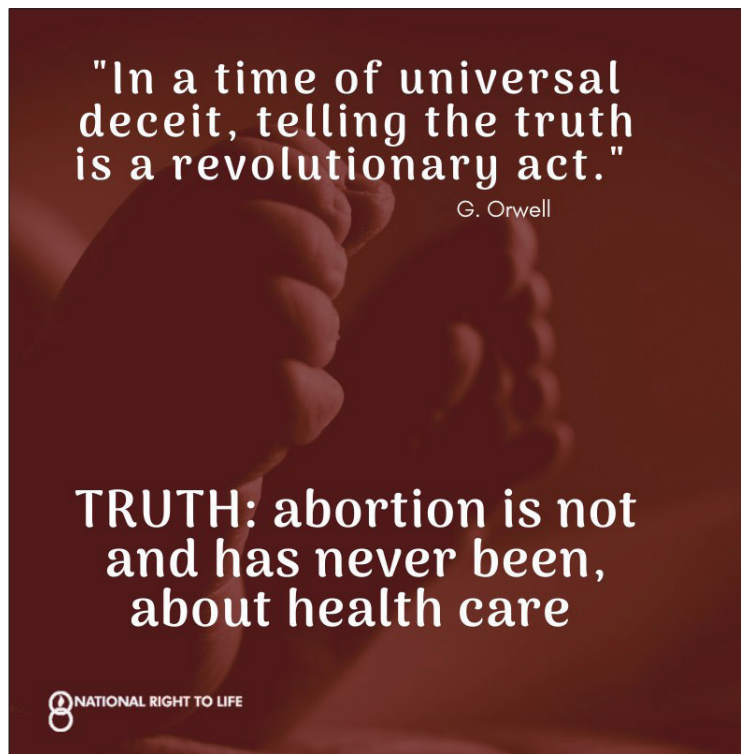
Dennard also stated at a briefing, “the pregnancy was not going to become a brother or sister for my children.” In reality, the child (not “the pregnancy” and not the “lethal anomaly”) in her womb was indeed the biological sibling of her children. Nothing will change that fact. Her children now have two deceased siblings who once lived in their mother’s womb as they did.

A BETTER ALTERNATIVE

Joe Baker, founder of Save the Storks, and his wife Ann were thrilled to be expecting their first daughter, and were crushed to find out she, too, had anencephaly. Their little girl, whom they named Ember, was given a prognosis of just one week to live after birth. They were repeatedly urged to end her life by abortion, but refused – and instead, decided to embrace the little time they did have with her, embarking on what they called the “Ember Tour.”

“Ann brought this map to me,

and she said, ‘I want to take Ember to all of these places,’” Baker previously told *Live Action News*. “And I’m like, ‘Ann, I don’t even think she’s going to be discharged from the hospital,’ and she’s like, ‘No, Joe. We’re going



to all these places between now and November.’ Through that process, of climbing mountains with my pregnant wife, and our little unborn baby, just talking about her and praying for her all the time, she’s really come alive in our family.”

They also received mountains of

artwork to decorate their hospital room for the day of Ember’s birth, to make it as colorful and beautiful as possible. And Baker explained that the support they received helped them through the difficult time.

know their daughter like the way we have, and they miss out on all of that unbelievable support that would come their way....”

Ember eventually was born, and lived for one hour after birth. “We loved her well, and it was life-changing for our whole family,” Baker told *Live Action News*. “It’s just amazing to see this little baby. She was very peaceful, and it was just precious, just that little bit of time. She just felt loved.”

And though it was, of course, a heartbreaking time, it was also an hour that Ember — who was named and loved, and not dehumanized in an effort to lessen the pain of her loss — got to experience of a life filled with love and warmth.

“It was like, we’re going to take the time with our baby, and not put her on any machines or anything, and comfort her, and hold her,” Baker said. “She lived an hour and six minutes outside the womb, and over eight months inside the womb... our family is going to be feeling like there’s a hole in our family from now on.”

Ultimately, the idea that a mother would use the elective choice to kill her own disabled children in the womb to make the killing of *all* preborn children legal is a tragedy.

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

“The beautiful part of the story is, when you carry a child like this, the overwhelming support and encouragement,” he said. “I compare that to someone who would choose to abort one of these children — it becomes their secret. It’s like they miss out on all of the experiences of getting to

Two writers offer deep insights into abortion Post-*Dobbs*

By Dave Andrusko

Let me begin by encouraging you in the strongest terms to read “Pennsylvania reports most abortions in 10 years, three times more complications than in 2017”, and “Media, Democrats falsely paint pro-lifers as anti-democracy ahead of 2024 elections”

Calvin Freiburger and Jonathon Van Maren are both passionately pro-life and gifted writers. I

know, made short work [after 49 years!] of *Roe v. Wade*.

He writes

In response, abortion allies pursue a variety of tactics to keep the abortion industry going, such as embedding “rights” to abortion in state constitutions, easy access to abortion

more pro-life neighbors.

As an overview, that’s deserves an A+. Pro-aborts have shored up their strength in abortion-friendly states such as Illinois and Vermont and New Jersey and used deceptive campaigns to hoodwink voters into approving pro-abortion changes to their state constitutions in

while others had older laws enacted pre-*Dobbs* “triggered” by the Supreme Court decision. He writes

The Democrats intend to make support for democracy and support for abortion synonymous, and the media has already picked up on this theme.



never come away from one of their posts thinking I’ve been short-changed. To the contrary I’m already anticipating their next story.

For example, Van Maren is positively brilliant in summarizing how the pro-abortionists (and their legion of media supporters) have responded to the 2022 *Dobbs* decision which, as you

pill, legal protection of interstate abortion travel, constructing new abortion facilities near borders shared by pro-life and pro-abortion states, and making liberal states sanctuaries for those who want to evade or violate the laws of

states where the unborn have real friends. That, of course, is aided and abetted by various stratagems to make “access” to the abortion pill easier. (See the Biden administration’s HHS which lopped off virtually all safeguards.)

Freiburger discussed how post-*Dobbs* a number of states have enacted protective legislation

If you listen to the words that come rolling out of President Biden’s mouth, they are so transparently evil it takes your breath away.

At some level, I don’t honestly believe that President Biden fully grasps how dangerous it is when he casually invokes racism to “explain” what pro-lifers are about.

I remember his January 21, 2021, Inaugural Address.

The same man who specializes in demonizing his opponents that day invoked President Lincoln who on New Year’s Day 1863 signed the Emancipation Proclamation. President Lincoln said, “If my name ever goes down into history it will be for this act and my whole soul is in it.”

Biden then said, with his typical modesty, “Today, on this January day, my whole soul is in this:

“Bringing America together.

“Uniting our people.

“And uniting our nation.

“I ask every American to join me in this cause.”

It’s enough to give cynicism a bad name.

The Heal Without Harm Coalition Condemns Assembly Passage of Assembly Bill 975

By Wisconsin Right to Life

On Thursday, the Wisconsin State Assembly passed Assembly Bill 975 on a 53-46 vote, permitting abortion up to 14-weeks gestation and fast tracking the legislation onto the ballot in April 2024.

The Heal Without Harm (HWH) Coalition condemns the passage of AB 975 to introduce an abortion referendum during a time when the current state statute continues to proceed through the court system. The HWH Coalition will continue to defend Wisconsin State Statute 940.04, a law that protects life from conception and which saved over 1,500 lives since the overturning of *Roe v.*

Wade. We ask the legislature to address s.940.04 following the court challenges.

The HWH Coalition thanks the 11 pro-life Republican State Representatives who voted against AB 975 and thereby defended s.940.04. As this legislation proceeds to the Wisconsin State Senate, the HWH Coalition urges all State Senators to oppose AB 975.

The abortion issue is not something that can be addressed in one legislative session. It will continue to be a conversation in our culture until we change hearts and minds to favor life.

We call on the Wisconsin State

Assembly to focus on efforts that demonstrate that being pro-life is more than being against

four bills have already passed the State Senate.

The Heal Without Harm



abortion. We urge the Wisconsin State Assembly to pass AB 114 extending postpartum care to a year after birth, AB 343 increasing the tax exemption for dependents and including preborn children, AB 344 funding for pregnancy resource centers, and AB 336 creating grants to support adoption. All

Coalition will continue to work to address the real-life situations of those who encounter challenges in pregnancy. We will continue to educate the people of Wisconsin about the lifesaving alternatives to abortion, and we call on the legislature to work with us on accomplishing these goals.

Stand Against the Radical Arkansas Abortion Amendment!

From Page 24

speak up for life. You are the voice for those who have no voice, the innocent unborn child. Tell your community why you are NOT signing the petition to kill unborn babies. Write about the dangers to women and how parents won't know about their minor daughter's abortion. See below for more ideas.

WHY YOU SHOULDN'T SIGN

- The Arkansas Abortion Amendment would create an unfettered right to abortion up until the moment of birth. **While the text suggests that this right is for the first 18 weeks of gestation, the language contains subjective medical emergency that would allow any abortion at any time**

in the “physician’s (abortionist) good faith clinical judgment.”

- **If adopted the proposed measure could render all current laws protecting the unborn, protecting parental rights, and protecting the pregnant mother null and void.** This means that Arkansas laws requiring parental consent before a minor’s abortion could disappear. It could also repeal laws that protect the unborn from dismemberment abortion, it could repeal our informed consent and ultrasound law, clinic licensing law or admitting privilege law, and certainly, the law that protects the unborn child to birth.
- **If this ballot measure is adopted it could make it impossible**

and illegal to pass any common-sense protections for the unborn child or her mother in the future.

- **At 18 weeks gestation, the unborn child has met many milestones of development:** the baby has a beating heart since day 18, brain waves since day 21, and she can grasp things in her hand, frown, kick, suck her thumb, smile, and can feel pain.
- Amending our state constitution is not only expensive but unnecessary! **Do we want to say in our constitution that it’s OKAY and preferable to kill unborn babies than protect them until birth?**
- The implications of passing such a radical resolution in a state that honors and protects unborn babies and has

been recognized as the MOST Pro-Life state for 4 years straight is irresponsible and dangerous. It is not in the best interest of women, children, families, and our state to pass the Arkansas Abortion Amendment. In Arkansas, we choose life!

NOW IS THE TIME FOR ACTION! Arkansas Right to Life cannot overcome this challenge without your support. We know that we will be outspent. But we have truth and God on our side. All Arkansans who want to protect unborn babies and their mothers must take a stand and join us in this fight for their lives...together, we can and will make a difference! Decide today to do something and then do it.

Democrats think they have “found their voice on abortion” in Vice President Kamala Harris

From Page 2

Gorsuch, Brett Kavanaugh and Amy Coney Barrett--Trump's three appointments--are “responsible” for *Dobbs v. Jackson Women's Health Organization*.

Harris's choice was calculated. “Wisconsin is crucial to Mr. Biden's re-election prospects — he won there by about 20,600 votes in 2020 — and recent polling suggests a close race in 2024,” *The New York Times's* Katie Rogers reports.

Harris will tour pro-abortion states this spring. According to Rogers, “Ms. Harris has become the administration's most vocal defender of abortion rights.” *The Hill* elevated her status still

further. “Harris takes center stage in 2024 abortion fight,” blares a story that ran January 21. This puff piece, written by Brett Samuels and Nathaniel Weixel, begins

Vice President Harris has cemented herself as the Biden administration's foremost messenger on abortion rights, the issue that the White House hopes will define the 2024 election cycle.

After an uneven first 18 months in office, where Harris faced criticism over her ability to handle complex and intractable matters

including migration and voting rights, the vice president has planted her flag in the fight over reproductive rights. ...

“As a leader, she uniquely was able to meet the moment when Roe v. Wade was overturned, and she so galvanized the anger and fear people were feeling when the news came down that Roe was overturned,” said Karen Finney, a veteran Democratic strategist.

But we'll match their anger with love, as we have for more than 50 years. The slogan this year for the

March for Life was telling and so, so accurate: “Pro-Life: With Every Woman, For Every Child.”

Pro-lifers refuse to pit mother against child. We believe in win-win slogans which is literally incomprehensible to pro-abortionists.

We believe in pregnancy help centers and maternity homes that support women and families in need during and after pregnancy. It is striking that pro-abortionists do everything in their power to crush both of these sacrificial, life-affirming options.

This night and day contrast between pro-lifers and the abortion crowd tells you all you will ever need to know.

Working together, we can make 2024 the Year of the Unborn Child

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

I decided to visit the website of a local television station to check out the day's news. One of the most prominent stories on the site announced the area's newest additions—the first babies to be born in the new year.

The photos of those little cherubs were indeed precious and personified the hope inherent in the beginning of January. It is a time of promise and possibility, when everything is new. The birth of those babies is a joy-filled experience, not only for their families, but for the greater community.

2024 is likely to hold many challenges for the cause of life. It is sobering to think that hundreds of thousands of babies die before they are able to enter the world—the result of the violent act known as abortion. Countless numbers of women are left to grieve the children they have lost as a result of this senseless slaughter.

It is incumbent upon the pro-life movement to show that there is a better path than abortion—one that respects the humanity of the unborn child and the incomparable gift that is motherhood. We are challenged to show compassion to pregnant women facing challenging circumstances and to offer them loving support. We must show them the love that might otherwise be missing from their lives.

As the first week of January unfolds, I rejoice in the new lives that have joined the human family. At the same time, I feel sorrow for those who were summarily denied their right to life in the coldness of an abortion center.

Working together, we can make 2024 the Year of the Unborn Child. For in that child lies our greatest hope. Who knows how many future artists and scientists, athletes and doctors will be born this year? The possibilities are as endless as our dreams.



Born at 24 Weeks Premature Baby Was So Tiny His Foot Was the Size of a Fingertip. Thriving Now

By Right to Life UK

A baby boy born at just 24 weeks is now “thriving” after spending 102 days fighting for survival in hospital.

Tommy Pratt, now three years old, was just 710 grams when he was born. A photograph taken by his father, Callum, shows Tommy’s foot measuring roughly the same length as his mother’s fingertip down to her knuckle.

Karianne, Tommy’s mother, reported that the pregnancy went “without a hitch” until 19 weeks, when she started bleeding. “I assumed the worst and rushed to hospital”, Karianne said, “but the doctors assured me he was fine”.

For the next five weeks, Karianne repeatedly attended hospital until she finally started going into labour at 24 weeks. Tommy was born breach and in his amniotic sack.

“It was horrible not being able to cuddle him straight away, but he had to be put in an incubator”,

Karianne shared.

“When I did finally hold him I was terrified”.

“He was so tiny, and it was heart breaking seeing his little body connected to so many tubes and machines”.

Tommy experienced multiple complications in the early days of his life

During his time in hospital, Tommy was diagnosed with chronic lung disease, an eye disease called retinopathy of prematurity, a large hernia and a brain bleed.

The hernia was removed by an operation, while his eye disease disappeared naturally and his chronic lung disease appears to be mild and, according to his mother, does not affect his day-to-day living.

Karianne said “It was daunting when Tommy first came home, as he was still on oxygen. It was the

first time he was able to meet his sister Lily, as she wasn’t able to go into the hospital due to covid restrictions”.

Tommy is now attending an outdoor nursery, which he loves. His mother said “Looking at Tommy now, you’d never know what he’s been through”.

The survival rate for premature babies is improving

Tommy is not alone among extremely premature babies whose prospects have improved significantly in recent years. A 2004 Swedish study found that neonatal survival outcomes between 22 and 25 weeks gestation significantly improve when neonatal hospital staff take a proactive approach in the care of premature babies.

A 2008 study based on a neonatal intensive care unit in London also found that neonatal survival rates at 22 and 23 weeks

gestation had improved. In 1981-85, no babies who were born at these gestational ages survived to discharge. However, by 1986-90, 19% did and this increased to 54% in the period 1996-2000.

A study in 2022 found almost four out of five babies born prematurely between 22 and 28 weeks gestation survive to discharge from the hospital. It found that from 2013 to 2018, with infants born between 22 and 28 weeks gestation, “survival to discharge occurred in 78.3% and was significantly improved compared with a historical rate of 76.0% among infants born in 2008-2012”.

Spokesperson for Right to Life UK, Catherine Robinson, said “Tommy’s story is inspiring, especially as he was born at the same time as the current abortion limit in the UK. Children like Tommy, born at 24 weeks, are going on to live largely unaffected lives and bring great joy to their families”.



Gov. Shapiro working to expand the abortion industry— despite its abysmal safety record in Pennsylvania

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

The pro-abortion bait-and-switch is now complete in Pennsylvania.

Democrat Governor Josh Shapiro's Administration has taken the money that for 28 years supported life-affirming pregnancy care centers and transferred it to pro-abortion organizations.

Back in the summer, the state Senate, which is led by pro-life lawmakers, agreed to a budget deal which increased funding to pregnancy resource centers by two million dollars. However, as soon as the Governor signed the budget, he announced that he was canceling the contract of Real Alternatives at the end of the year. Real Alternatives administered Pennsylvania's Pregnancy and Parenting Support Services program, which funded pregnancy resource centers, adoption agencies, and maternity homes throughout the Commonwealth.

The Shapiro Administration has now taken the money that

was allocated to alternatives to abortion for nearly three decades and awarded it to pro-abortion groups.

Not only did the Shapiro Administration engage in deception, it has also, in essence, given a raise to pro-abortion outfits which have already been receiving state funds.

The Governor is making it clear: His Administration is bound and determined to build up the abortion industry with taxpayer money.

The abortion business bailout runs counter to the will of the people. A recent poll showed a majority of Pennsylvanians support public funding for life-affirming pregnancy care centers.

The pro-abortion power grab comes at a time when abortions are already increasing in Pennsylvania. Statistics from the Pennsylvania Department of Health show that 34,838 abortions took place in the Commonwealth in 2022—an increase of 1,632

over 2021 totals.

The Governor has made it clear he has no interest in reducing abortions. In a raw exercise of

your state lawmakers and let them know you want funding to Real Alternatives restored. You can send an immediate message to



executive power, he is working to expand the abortion industry—despite its abysmal safety record.

Action Item: Please contact

your state lawmaker by going to https://oneclickpolitics.global.ssl.fastly.net/messages/edit?promo_id=18824

Why do scientists acknowledge cricket embryos but reject the humanity of the unborn?

The scientific establishment's shameful silence about procured abortion proves acceptance of the development of a human embryo is highly political.

By John Horvat II

I have never had any interest in crickets beyond listening to their chirping in the summer. The insects represent a part of reality that does not significantly impact my daily life. Among so many other concerns, crickets are not high on the list of priorities.

However, I was intrigued by a lengthy *New York Times* report titled “The Mysterious Dance of the Cricket Embryos” in early August. It reported on a June meeting of 100 scientists on the Greek island of Crete who gathered to discuss cricket embryos. I never imagined anyone, let alone one hundred people, would meet anywhere to discuss such a subject.

Crickets seem to be the ideal organism to study how life works and develops. The two-spotted field cricket does not enjoy the popularity of the common fruit fly as an object of laboratory research. However, new evidence suggests it has unique qualities that make it a fascinating subject for discussion for these scientists.

Even knowing this, however, did little to pique my interest in the loud insect.

It can also be a marvel of God's creation

I started to get interested when the article announced the topic for the international conference was the development of the cricket embryo. The article explained how the cricket embryo helps us understand all embryos since every animal's development follows a similar growth pattern. After the original fertilized cell is formed, other cells form around the egg's surface, “providing an early blueprint for all adult body parts.”

The scientists noted that while all the cells have the same genome, they all do different things with the same information. And the scientists don't know why this happens.

Like in a dance, the cricket embryo seems to do everything right without anyone telling the cell nuclei what to do. Seth Donoughe, a biologist from the



University of Chicago, describes the process as making “the right parts at the right place at the right time.”

This description helped me see how even the cricket is a marvel of God's Creation. The scientists spent hours watching the process of dividing and moving cell nuclei that moved in manners that were beyond mere physics and chemistry. I was even fascinated by the computer simulations in the article, which showed the entire development process from egg to birth.

All focused on crickets

My second point of interest was similar. The researchers had no doubt about the process. They identified the cricket egg, cricket

embryo and final cricket as a single continuous process. I was fascinated by their laser focus on the subject of cricket embryology and its complexity.

Scientists from many disciplines collaborated in this study, all bringing their expertise. Even mathematicians got involved in making models to try to explain the complex movements of cricket

sure that most of the paper's staff would share that attitude since its official position — in favor of procured abortion — sees the human embryo as a parasite that can be eliminated. There is no fascination for the mysterious dance of the human embryo inside the womb.

No one wants to admit the evidence of intelligent design in those clumps of human cells that form around the human fertilized egg's surface, “providing an early blueprint for all adult body parts.” These human cells are expendable in the liberal perspective.

Indeed, the language of the cricket journalist recognizes the cricket at all phases of its development as he describes cricket eggs, cricket embryos and later stages of cricket development. Everything is cricket. Meanwhile, the phases of human life are labeled as zygotes, clumps of cells and fetuses deprived of their humanity.

This tragic and selective fascination for crickets tells me who the liberal media are.

An absent scientific establishment

My final interest in the cricket consists of marveling at the liberal scientific establishment. It can focus on the minutiae of the cricket embryo yet remain indifferent to the plight of the human embryo cut short by abortion, and whose only “crime” was participating in the process of an unwanted gestation.

The scientific establishment, in general, should be on the front

cell nuclei as they rapidly divided and expanded like a “dance.” The scientists took away more than 40 terabytes of data and computer models from the encounter. Since they reached no firm consensus, the data will serve as material for further study.

A selective fascination

My third point of interest was more moral and sociopolitical than scientific. I could not fail to make the connection between cricket and human embryology. I was struck by the utter fascination of *The New York Times* writer with the development of cricket embryos. However, the same journalist did not express the same interest in our human embryo development. Furthermore, I am

Pro-Biden Newsrooms Debate Censoring Trump

By Tim Graham

Donald Trump's early primary victories have started the "newsroom debates" again. *Associated Press* media reporter David Bauder penned a story headlined "Trump's live appearances pose a riddle that news executives still haven't solved."

So when a newsworthy event happens – like Trump's victory speech after the New Hampshire primary – the pro-Biden networks worry "Trump will make false statements that are difficult, if not impossible, to correct in real time — or go completely off script with something entirely unexpected."

Does Trump make false statements? Yes, starting with his refusal to concede he lost the 2020 election. Does Biden make false statements? The name "Biden" never comes up in Bauder's story. There are no fraught newsroom debates over what the president says live. Biden lies and mangles facts on a regular basis, but none of these networks have the slightest resistance to airing him live. This makes them look like naked partisans.

On January 24, the afternoon this *AP* story was posted, Biden spoke to accept the endorsement of the United Auto Workers union. *CNN* aired six minutes of the speech live, and there was no "fact checking" to be done. They

turned to *CNN* reporters who touted the endorsement as a big deal, and pointed out the UAW president called Trump a "scam." That's lapdog coverage.

But with Trump, Bauder wrote nervously of "the responsibility of giving a potential future president

on the fly can be extraordinarily hard, and many of Trump's supporters are more inclined to believe what comes out of the former president's mouth than what a news organization declares is true."

The problem here, then, is



the chance to be heard." Then he mentioned "a disastrous town hall event with Trump on *CNN* last spring reminded everyone of the implications of airing his appearances live."

How was it "disastrous"? Did anyone die? Did *CNN* fall apart? Or were they out of third place for an hour? It obviously rocked *CNN* to its core, and marked the beginning of the end of *CNN* boss Chris Licht. Bauder hinted it was disastrous because "fact-checking

that the media are frustrated that anyone doubts their "fact checking," as if it's completely factual and not influenced by their red-hot partisan loathing of their subject.

"I don't know why anyone has to take him live," former *CNN* president Jon Klein told Bauder. They're so opposed to it that Bauder hints that newsrooms are already faced with a "particularly hard decision" over whether to air Trump's convention acceptance

speech live if he's nominated.

At this point, you wonder if Trump and Biden ever debate in the fall, they'll decide Trump's answers will not be aired live.

What remains is the other unspoken, apparent non-issue in newsrooms of access to the candidates. While they are all agitated over granting Trump any access, none of these networks have seemed to offer the slightest public critique of Biden refusing to do news conferences or grant interviews to even liberal outlets. This president has not granted one interview to a national newspaper during his term, and apparently none of them have ever objected.

As usual, Trump grants wide access, and gets cut off. Biden is granting almost zero access to persistent questioning, and he's getting the royal treatment. You never bother the monarch with an impertinent inquiry!

As the public observes this flaming double standard, the media elites keep wondering why no one trusts them and why they are shedding employees. In the end, it's clear they think too many voters are stupid, and won't listen to their sweet reason. That's not helping them gain trust.

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

Is it “practicing eugenics” to abort a baby because she is diagnosed with Down Syndrome? The in-house ethicist for the *New York Times Magazine* weighs in

By Dave Andrusko

We’ve already posted reflections by Michael Cook on a column written by Kwame Anthony Appiah, the in-house Ethicist for the *New York Times Magazine*. I’d like to add a few thoughts.

The headline for Appiah’s post is “Does Prenatal Testing for Down Syndrome Amount to Eugenics?”

The subhead softens the decision to abort a baby who has Down Syndrome: “The magazine’s Ethicist columnist on the moral concerns associated with certain medical exams.”

The way the column works is that people write in with their dilemmas and Appiah offers his insight.

A husband writes that and his wife are planning on having children sometime but worry about “challenges,” one of those “challenges” being a child with Down Syndrome. He knows there are tests that “might tell us if he or she comes with any health challenges and allow us to terminate the pregnancy if we decide that we do not want the added responsibility (and medical bills).”

What’s his question?

We’re worried this course of action might constitute practicing eugenics. Is this decision morally wrong?

To be clear, as a rule, Appiah shuns making overt judgments, moral or otherwise. So...

They are not “practicing eugenics.” Why? The history of eugenics began in the 19th century with Francis Galton, a cousin of Darwin’s, “who was drawn to the idea that humanity, like livestock, should be improved through selective breeding.”

But “Real harm happened when the state [The Nazis] used its powers of coercion in pursuit of this aim.”

“Real harm”? That’s putting it in the mildest possible terms.

So this couple shouldn’t be worried that they would be “practicing eugenics,” should they abort, because [a]the power of the state is not forcing them to have an abortion and [b]

You’re not hoping to affect our common genetic stock (people with Down syndrome rarely have children, though the rate of Down syndrome in their children is quite high when they do). What you are considering, then, isn’t a eugenic choice.

But bioethicist Wesley J. Smith keenly understands where Appiah’s reasoning falls short:

This is too narrow a view of what constitutes eugenics. Eugenics is more than trying to control the health or other attributes of a general population. Rather, it reflects an all-too-commonly promoted mindset that some people are better or have greater value than others, and that an acceptable answer is to make sure disfavored persons are never conceived — as in the old eugenics of the early 20th century — or never make it out of the womb as occurs today (or even, serving as a justification for infanticide as justified by utilitarians like Peter Singer).

Appiah uses the fact that 2 out of 3 babies diagnosed with Down Syndrome babies are aborted to opine “Your sentiments

would seem to ally you with the majority, going by the choices people make.”

But to be fair, while we may (and do) disagree over Appiah’s



conclusions, he does make some very good observations at the end. For example

At the same time, I worry a bit that your reason for not wanting a child with Down syndrome reflects a misunderstanding of what that child’s life will be like. While people with Down syndrome had severely curtailed lives in the past — their life expectancy in the early 20th century was estimated to be about 9 years — they are now living much longer. Recent estimates suggest that a child with Down syndrome will now have a life expectancy of around 60 years.

He concludes with very encouraging (and very accurate) advice:

When you’re thinking about what may lie ahead for your offspring,

it helps, I think, to maintain the proper perspective about what it is to live well, which is what Aristotle meant

by ethics. Human life is not a competition in which everyone places somewhere in a ranking from one to eight billion. That’s because each person has different capacities, aims, relationships, projects and identities. These are all relevant to deciding what a good life is for them. Once children with Down syndrome are born, the task of families, medical professionals and teachers is to identify what these children need to develop their capabilities, which will be different for each one. The task, in other words, is to give them a chance at living their best lives. The same thing goes for all children, of course, whatever their endowments.

Indeed, “whatever their endowment.”

Her husband's death made her more opposed to assisted suicide

By Alex Schadenberg, Executive Director, Euthanasia Prevention Coalition

Dominic Penna wrote an excellent article published in the Telegraph on January 9 concerning an article by Nadine Dorries, the former cultural secretary in the UK government, on how the death of her husband has made her more strongly opposed to assisted suicide.

Penna writes:

Nadine Dorries has said the death of her husband at home only served to increase her opposition to assisted dying.

Paul Dorries, who died of bowel cancer in June 2019, asked to travel to the Dignitas clinic in Switzerland to end his life as soon as he received his terminal diagnosis, the former culture secretary said.

But setting out her

opposition to the “distressing” practice of assisted suicide, Ms. Dorries said her husband had eventually been glad to spend his final weeks in palliative care surrounded by loved ones.

Assisting a suicide is illegal in the UK, so Dorries husband had said that he wanted to die by assisted suicide in Switzerland. Penna continued:

In her weekly column for the Daily Mail, Ms. Dorries said her husband told her he wanted “to go to Dignitas now, while I still can” on the day that he was given four months to live.

“In the event, that is not what happened.

The process to sign up with Dignitas takes a considerable time ... Paul’s short prognosis



Nadine Dorries

timed him out,” she wrote.

“But, as I will explain, the peaceful way he died at home four months later – surrounded by his loving family – only

reinforced my strong view that assisted dying is wrong.”

Penna ends his article by quoting Dorries:

Despite his initial request to end his life, Ms. Dorries said, her late husband came to cherish the “attention and the banter” provided by those who cared for him in his final weeks.

“He didn’t die in a clinical setting in Switzerland, but at home in our arms,” she concluded. “And at the end, that was exactly where he wanted to be.”

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

Why do scientists acknowledge cricket embryos but reject the humanity of the unborn?

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line in defending the unborn. Embryologists should especially protest at the violence of abortion that interrupts the process of pregnancy that is their specialty. Like those studying crickets, they know the reality of what happens inside the womb, even though it may be politically incorrect and career-crushing to shout it from

the rooftops.

The enthusiasm of the cricketologists proves that embryo development is highly dynamic, scientific and complex. The scientific establishment’s shameful silence about procured abortion proves acceptance of the development of the human embryo is highly political. So

many scientists follow political, not biological science.

It is also a moral problem, since abortion involves the destruction of a marvel of God’s Creation with a soul made in His image and likeness. If even a cricket causes people to marvel, how much more man, the masterpiece of Creation.

However, if we were to ask

the journalists and scientists to comment on this moral aspect of human life, I suspect the reply would be the proverbial crickets.

Editor’s note. This appeared at LifeSite News and is reposted with permission.

North Dakota's near-total pro-life abortion law to go to a jury in August

By Dave Andrusko

On January 23, State District Judge Bruce Romanick rejected a request for a preliminary injunction, saying the request “is not appropriate and the Plaintiffs have presented no authority for the Court to grant the specific relief requested.”

The Center for Reproductive Rights filed a lawsuit on behalf of the Red River Women’s Clinic, arguing that North Dakota’s SB 2150 was so vague that it put abortionists who performed an abortion at risk of prosecution. But Judge Romanick said he would not block a part of the law “that doctors say puts them at risk of prosecution if they perform an abortion to save a patient’s life or health,” reported Jack Dura for the *Associated Press*.

Judge Romanick said the plaintiffs appeared to request that he,

“by way of a preliminary injunction, change application of the exception from ‘reasonable medical judgment’ to ‘good faith medical judgment.’ Plaintiffs have cited the Court with no legal authority that would allow the Court to re-write the statute in this manner under the

pretense of providing injunctive relief.”

State Senator Jane Myrdal, “who introduced the bill in 2023, approved of the court’s ruling,” according

Background

Yingling went on to write

The legislature initially passed HB 1466 in 2007 as a “trigger” ban intended to limit abortion services



to Madeline Yingling. “I think we have something that’s very clear for physicians to see,” she stated. “It’s common sense what we put in as far as the health exceptions... and interpreting it simply shouldn’t be that hard for physicians.”

if the US Supreme Court overturned the landmark Roe v. Wade decision that established the constitutional right to abortion. When the Supreme Court reversed

Roe in June 2022, North Dakota Attorney General Drew Wrigley immediately triggered the ban. The state Supreme Court blocked HB 1466 in March 2023, finding the state constitution implicitly included the right to an abortion to preserve the pregnant person’s health or life. The following month, the North Dakota legislature passed the amended ban, SB 2150, that was at issue in Tuesday’s decision.

But there is much yet to clarify. For example, Judge Romanick wrote that he is yet to rule whether the law violates the state constitution.

“The Court specifically notes that it will certainly have to decide the ultimate constitutional issues in this case following the presentation of testimony and evidence to the Court,” Romanick wrote in his decision. “The parties, thus far, have only presented written and oral arguments to the Court. The Court’s decision in this order in no way limits the Court’s ultimate decisions in this matter.”

A jury trial is currently set for August 2024.

Trump rolls to 11 point victory in New Hampshire, Haley says, “This race is far from over”

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“New Hampshire is first in the nation. It is not the last in the nation. This race is far from over. There are dozens of states left to go,” Haley said.

“I’m a fighter, and I’m scrappy and now we’re the last ones standing next to Donald Trump,” she added. Referring to the next primary, Haley said, “South Carolina voters don’t want a coronation. They want an election — and we’re going to give them one. Because we are just getting started.”

Almost all media outlets, however, did not share her optimism. She trails Trump in South Carolina by up to 30 points.

And “Haley is likely to face immense pressure to depart the race in coming

days,” *CNN* reported. “She’ll face questions about whether she’ll follow a path similar to Florida Gov. Ron DeSantis, who vowed to continue on after his second-place finish in last week’s Iowa caucuses — and then he dropped out days later.”

Meanwhile, pro-abortion President Joe Biden’s job approval ratings continue to hover between the low 30s [Pew has him at 33%] to 41% [Gallup]. More specifically, “During President Joe Biden’s third full year in office, spanning Jan. 20, 2023, to Jan. 19, 2024, an average of 39.8% of Americans approved of his job performance,” according to Jeffrey M. Jones.

Pew’s findings were much more

ominous. “The new survey by Pew Research Center, conducted Jan. 16-21 among 5,140 adults, finds that Biden’s own job rating remains highly negative: Just 33% of Americans approve of his job performance, unchanged from last month,” Pew found.

“Currently, 33% of Americans approve of Joe Biden’s job performance, while 65% disapprove. Biden’s job rating has not been above 40% since April 2022.”

What about younger voters?

Young adults are negative about Biden’s job performance. Biden’s job rating is low across all age groups, including young adults. Just 27%

of adults ages 18 to 29 approve of the way Biden is handling his job as

What about minorities?

Black adults are divided over Biden. About as many Black adults disapprove (49%) as approve (48%) of Biden’s job performance. Biden’s job rating is lower among Asian (39%), Hispanic (32%) and White (30%) adults.

One other piece of positive news for former President Trump.

This from (of all places) the *New York Times*. A year ago, “61 percent of the party’s voters said they still supported Mr. Trump’s policies but wanted ‘a different Republican nominee for president,’ Michael C. Bender reported for the *Times*. “A stunning 76 percent of college-educated Republicans agreed.” But...

“This month, the same pollster showed Mr. Trump with support from 62 percent of Republican voters, including 60 percent of those with a college degree.”

Other surveys have revealed similar trends.

Mr. Trump’s backing from white, college-educated Republicans doubled to 60 percent over the course of last year, according to Fox News polling.

Bender concluded with this nugget.

“Trump is good,” said Hari Goyal, 73, a physician in Sacramento, who supported Mr. DeSantis last year but has since changed his mind. “Look at Biden and what he has done to this country. Trump can beat him, and he can fix this country.”

61 Million Babies Died
Because a Lie Became Law

Roe v Wade
January 22, 1973

 National
RIGHT TO LIFE

Woman waking up from abortion: “Give me back my baby!”

By Sarah Terzo

The *Abortionist* is a book written by an illegal abortionist in 1962. This is the contents of a letter that was written to the abortionist. [1]

“I recall fighting my way out of the black void into which the drug had plunged me to hear myself screaming hysterically, “I want my baby! Give me back my baby!” And as I sobbed away, you tried to console me, telling me it was over and that everything was all right.

But everything wasn’t all right. Lying there, I felt only disgust at myself. I had broken nature’s most sacred code, the propagation of the human race. That

was the trust for which I had been placed on earth and I had violated it.

But life is also survival of the fittest and, in some

the father of the child and vowed never to see him again....

But you I do not hate. You have given me a

responsibility of deciding whether I wanted my child. You made me feel I still had the dignity due to every human being.”



way, I knew I was not fit to bear a baby or to be a mother...

I hated myself, I hated

second chance. When everyone else turned their back in scorn, you were willing to allow me the

There is so much self-hatred and post-abortion regret in this testimony, yet she does not blame the abortionist who did the abortion. She seems to be unable to admit that abortion was a horrible mistake, no matter how upset it made her.

[1] Dr. X, Lucy Freeman *The Abortionist* (London: Victor Gollacz LTD, 1962), pp. 43 – 44.

Editor’s note. This appeared at clinicquotes.com. Sarah Terzo is a pro-life author and creator of the clinic quotes website.

Funding to underwrite abortions drying up a year and a half after *Dobbs* decision

By Dave Andrusko

It's only one story but if true, not only now but for the indefinite future, it's very important.

Writing for *The Hill* Nathaniel Weixel's lead is "Abortion funds that help people cover the costs of getting the procedure are struggling with money as the waves of donations that followed the end of *Roe v. Wade* have begun to dry up."

The headline is "'Rage' abortion donations dry up, leaving funds struggling to meet demand." They call it "rage" donations because people who gave money early on did so because they were angry, Weixel explains.

This diminishing pool of money has

Led some of the independent organizations — which help cover expenses for abortions and associated costs, such as transportation, child care, and lodging — to scale back or even pause operations.

After the *Dobbs* decision in June 2022, many funds received large donations from Americans outraged at seeing the right to an abortion stripped away.

The National Network of Abortion Funds (NNAF), which comprises 100 funds across the country, said its members disbursed close to \$37 million to about 103,000 people from July 1, 2022, to June 30. That was an 88 percent increase in spending compared to the year before.

But anger needs headlines for fuel and Weixel explains that donations dropped as the issue "faded from headlines."

"We noticed with any sort of moment that happens, whether it is a certain election, an introduction of an abortion ban, or in this case, the overturning of *Roe*, there is this

the leak of the *Dobbs* decision, which overturned *Roe* a few months later, "dollars were just raining," said Chasity Wilson, executive director of the Louisiana Abortion Fund. "And then a few months after that, it kind of died off," added Bree Wallace, director of case management at the Tampa Bay Abortion Fund.

Her organization stopped giving out funds for four months "and only reopened at the beginning of January."

Near the end of the story, Weixel writes

When abortion was legal, it was not uncommon for funds to pause operations if they



immediate desire to like, make a contribution to abortion funds or make contributions to the movement," said Oriaku Njoku, NNAF's executive director.

"While we appreciate the rage, giving what is actually required to make sure that people can consistently get the care they need is that long-term investment in abortion funds," Njoku said.

In the immediate aftermath of

Wallace estimated the fund spent about \$700,000 in 2023, but "we definitely couldn't do that again this year."

Donations dropped 63 percent from 2022 to 2023, Wallace said. The fund was previously able to help people across Florida but now is limited to people coming into or out of the Tampa area.

ran over their monthly budgets. But fund officials said there's a ripple effect now, because when one fund closes or pauses, others step in to help.

"That is the reality for organizations like this. We do run out of funds and there are some people we cannot support," said Callaway.