national RIGHT TO LIFE NEWS

March 2019

THESE U.S. SENATORS BELIEVE THAT UNWANTED BABIES BORN ALIVE SHOULD LIE ON A TABLE UNTIL DEAD FROM NEGLECT.

Pray for them, but please don't vote for them.

national RIGHT TO LIFE NEWS

Federal Congressional update: Threats to free speech and upcoming House Action on the Born-Alive Abortion Survivors Act

By Jennifer Popik, J.D. Director of Federal Legislation

In a new Congress, the first bill introduced by the party in power, numbered H.R., 1 is generally reserved as a symbolic indication as to the importance of the bill. Under the Democrat-controlled House under the leadership of pro-abortion Nancy Pelosi, H.R. 1 was the so-called "For the People Act of 2019."

What did H.R.1 symbolize? The Democrats' long history of attempting to maximize short-term political benefits for the dominant faction of one political party—themselves--by placing significant and very burdensome restrictions on free speech.

H.R. 1 was billed by its supporters as acting as a curb on election corruption, but is itself a type of corruption – an abuse of the lawmaking power, by which incumbent lawmakers employ the threat of criminal sanctions, among other deterrents, to reduce

See "Threats," page 28

Hold Democrats accountable for supporting abortion without limits until birth and beyond

By Karen Cross
National Right to Life
Political Director

Sadly, pro-abortion Democrats have become so brazen on abortion – so zealous – that they no longer hide behind the old euphemism of supporting abortion only in "rare" instances. They finally admit what we've known all along – they support abortion without limits until birth.

But wait! There's more!

Pro-abortion Democrats are actually willing to go on record as opposing legislation that would provide care to babies who survive abortion. Babies who are born alive!

On February 25, 2019, 44 pro-abortion Democrat U.S. Senators voted to block the Born-Alive Abortion Survivors Protection Act.

Last year, on January 19, 2018, 183 pro-abortion Democrat Members of the House voted against passage of the same legislation.

See "Democrats," page 31

Editorials

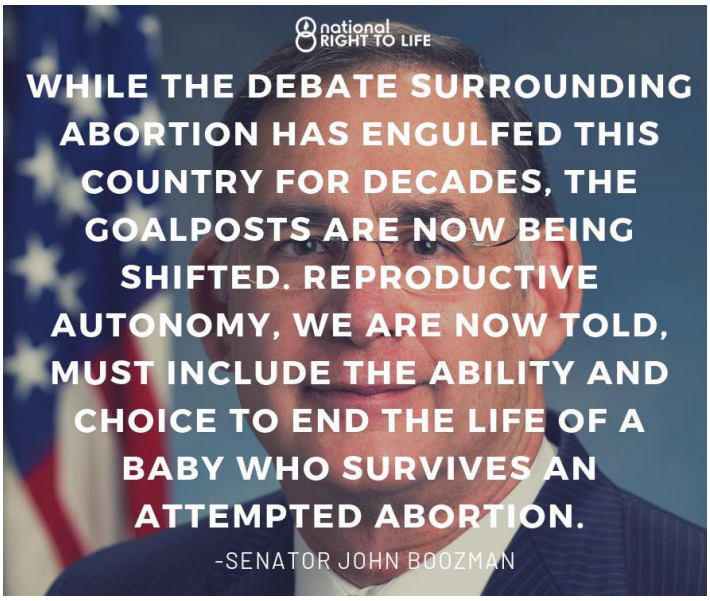
Why Democrats find it impossible to oppose infanticide

"Thousands of medical ethicists and bioethicists, as they are called, professionally guide the unthinkable on its passage through the debatable on its way to becoming the justifiable until it is finally established as the unexceptionable."

-- "The Return of Eugenics," by Richard John Neuhaus.

"Faith is like radar that sees through the fog--the reality of things seen at a distance that the human eye cannot see."

--Holocaust survivor Corrie ten Boom.



Richard John Neuhaus's quote from the April 1988 edition of *Commentary* magazine may be the single most prescient, visionary explanation of how contemporary "bioethics" went off the rail (and took us with it) as you will ever read. Fr. Neuhaus cautioned that there are "political, legal, and moral resources to resist scenarios of the worse inevitably coming to the worst," only to observe just two paragraphs later, "All that said, we *are* nonetheless witnessing the return of eugenics."

Fr. Neuhaus was exploring a whole range of behavior whose common core was a belief—conscious or otherwise—in what the Nazis called *Lebensunwertes Leben* ("life not worthy of life). Sometimes the contemporary intersection of eugenics and abortion and infanticide is so obvious the only reason we don't see it is because the major media refuse to acknowledge the self-evident.

Here's some background from our daily *NRL News Today* which I hope will help make my point. (BTW, I hope **everyone** is receiving *NRL News Today*.)

As readers may recall, prior to her journey into becoming the public face of abortion up through "40 weeks," Virginia State Del. Kathy Tran (D) was best known for having breastfed her child on the floor of the House. She received plenty of heat for her "Repeal Act," which eventually went down in flames.

But Virginia Gov. Ralph Northam (another pro-abortion Democrat) quickly added his two anti-life cents worth. After supporting Tran's abortion up until a woman is "dilating" proposal, he volunteered that should there be an abortion survivor, it's up to the abortionist and the now-aborted mother to decide what to do. (Gracious soul that he is, Northam did concede the baby should be kept "comfortable.")

As the debate swirled. Northam was rightly condemned for condoning—if not actively encouraging—infanticide. Congressional Republicans responded with the Born-Alive Abortion Survivors Act which said only—**only**—that a baby who survived an abortion be treated no differently than a baby of similar gestational age who was "wanted."

Too much for Congressional Democrats? Of course. They have long since sold their souls to the Abortion Industry. Even so, it was not their finest hour,

However, what got lost in Northam's dreadful comments in an interview on *WTOP* radio was that he attempted to minimize (I think that's the right word) the fallout from his dehumanizing observation by limiting his remarks to a "nonviable pregnancy" and babies with "severe fetal abnormalities." (The pretense was that virtually all these ultra-late abortions were for these reasons, which even by pro-abortion standards, is shockingly and cynically wrong.)

Who gets to decide whether a baby is a "nonviable pregnancy" and what constitutes **severe** fetal abnormalities? The man who has just failed at his task—killing an unborn child.

And more to the point, proponents of neglecting abortion survivors deliberately obfuscate and confuse and meld categories together in order to mislead the public and hide their own inhumanity.

We reposted on *NRL News Today* a terrific story by Paul Stark of Minnesota Citizens Concerned for Life.

From that gold mine I extracted that the key to the oppositional optics was/is/and always will be to state—as pro-abortion Minnesota Senator Tina Smith did on the floor of the Senate—that the Born-Alive Abortion Survivors Protection Act would "compel physicians to provide unnecessary care." To increase the rhetorical power, they usually tag on the insistence that this would be "painful" for the baby.

But the bill wouldn't require "unnecessary care." The bill simply says that physicians can't treat certain babies **differently** just because their mothers had abortions. That is, when it comes to medical care, babies who survive abortions can be discriminated against.

See "Optimism," page 38

From the President
Carol Tobias

Which Road, America?

I admit that, although I love to read, I'm not really into poetry. For that reason, I'm still amazed that I remember an elementary school teacher reading "The Road Not Taken" to our class, and developing a deep appreciation for its lyrical rhythm. Robert Frost's poem is one of the more famous poems ever written and it came to mind as I thought about the future of abortion, assisted suicide, and infanticide in America.

Two roads diverged in a yellow wood,
And sorry I could not travel both
And be one traveler, long I stood
And looked down one as far as I could

To where it bent in the undergrowth;
Then took the other, as just as fair,
And having perhaps the better claim,
Because it was grassy and wanted wear;

Though as for that the passing there
Had worn them really about the same,
And both that morning equally lay
In leaves no step had trodden black.

Oh, I kept the first for another day!
Yet knowing how way leads on to way,
I doubted if I should ever come back.
I shall be telling this with a sigh

Somewhere ages and ages hence:
Two roads diverged in a wood, and I—
I took the one less traveled by,
And that has made all the difference.

America is soon coming to that fork in the road where we will make the decision to either choose the road that continues down a dark and dreary path or take one that moves in a different direction, one that transforms our nation's attitude toward vulnerable life.

Regarding the former, there is an attempt by some to make sure unborn children are treated as non-humans, deserving of no respect or protection. There are attempts to encourage the elderly and those with disabilities to "take advantage" of physician-assisted suicide. This philosophy degrades the value of human life in all its stages and all its conditions. Life, in or out of the womb, is dismissed as nothing special, nothing worthy of protection. Human life is no different than dogs or trees. Some may even think human life is less valuable than these.

But if human life is no longer precious or valued, might we turn into the society depicted in the book, *Logan's Run*? In William F. Nolan's and George Clayton Johnson's novel, humans live in an enclosed city, controlled by a computer that balances the population with available resources. In order to keep that balance, people are "terminated" when they reach the ripe old age of 30.

An episode of "Star Trek: The Next Generation" titled "Half a Life," shows us an alien planet on which the people, as they turn 60, go through a ritual suicide so as not to become a "burden" to younger generations.

Everything is utilitarian. It doesn't matter what is good or bad, wrong or right. What matters most for the most overrides the value of the individual.

Regarding that second road, alas we have experience treating human beings on a sliding scale where their relative value is imputed to them rather than recognized as theirs simply because they are human. Our Declaration of Independence rightly declares that all men are created equal, that we are endowed by our Creator with unalienable rights, with Life being the first right.

But it is a sorry truth that for almost 250 years, most African-Americans were slaves, including during the first 90 years following the adoption of the Declaration of Independence. In *Dred Scott*, the Supreme Court even went so far as to rule, 7-2, they were property with no legal standing—and as such could never become citizens. (As you probably know, *Roe v Wade* was also a 7-2 decision.)

The repercussions are still felt throughout our culture today.

Occasionally, I wonder if we will follow the road leading to civilizations shown in *Logan's Run* and *Star Trek's* alien nation.

However, I firmly believe we will follow the other path. One where abortion is seen in the same light as slavery, a horrifying example of cruelty to humans. A future in which the facilities that now kill vulnerable preborn humans are viewed with the same revulsion as we do slave markets. And where abortionists are regarded as no better than the ruthless slaveholder Simon Legree in "Uncle Tom's Cabin."

In Frost's poem, both roads were grassy and wanted wear. It's as if the choice of which road to take is unimportant. With respect to abortion, assisted suicide, and (increasingly) infanticide, that is the evil genius of anti-life forces. One "choice" is as good as another.

But nothing could be further from the truth. It is up to us to clear away the fog so that the American people will take the path that recognizes the dignity and value of every human being, born and unborn.

Spend your July 4th with National Right to Life this year!

By Abby Loftus

Are you planning your summer vacation yet? How about your 4th of July weekend? Spend it in Charleston, South Carolina with National Right to Life!

On July 5th and 6th of 2019, our 49th annual National Right to Life Convention will take place at the Embassy Suites by Hilton North Charleston. We will kick off the event with a luncheon on July 5th at 11 A.M., and end with our annual banquet on July 6th at 8 P.M. The hotel offers FREE parking, our awesome convention rate of $129 per night, free continental, made-to-order breakfast, a free happy hour each evening in the hotel lobby, and much more.

The convention will be packed from start to finish—this includes 3 general sessions, 48 workshops, and an exhibit hall full of local and national vendors there to educate you even more. If you're concerned about the abortion debate today, especially because of what's been happening in New York, Vermont and Virginia (to name a few), the convention is necessary to learn more and act on your newfound knowledge. The pro-abortion side is gearing up for battle, and we must win. If you'd like to send your legislators a message, go to prolifepetition.com to sign our online petition.

Register today at nrlconvention.com. Please continue to visit the website on a continued basis, as more up-to-date information about the convention will be available. We look forward to seeing you there!

National Right to Life Academy empowers pro-life college students to make a difference

The National Right to Life Academy, a five-week summer program held at NRLC's DC headquarters, trains pro-life student activists to become effective advocates for life. The ripple effect of the program's graduates can be felt across the country.

Over the five weeks of the program, pro-life students learn from the foremost leaders in the pro-life movement on a variety of topics, including abortion, euthanasia, stem cell research, Planned Parenthood, legislative strategy, lobbying, politics, communication, grassroots organizing, social media and more.

Graduates of the program are currently working for state pro-life groups, starting local right-to-life chapters, aiding in the efforts of crisis pregnancy centers and bringing a pro-life perspective to their workplaces in the medical, legal, and social work fields.

NRLC Academy graduates are currently filling the positions in states across the country as legislative directors, Political Action Committee directors, education directors, and an executive director of one of our state affiliates.

Our students have also become sought-after speakers and organizers. Even those who didn't continue in working within the pro-life movement attest that the NRLC Academy instilled them a sense of duty to always defend life in their day-to-day lives.

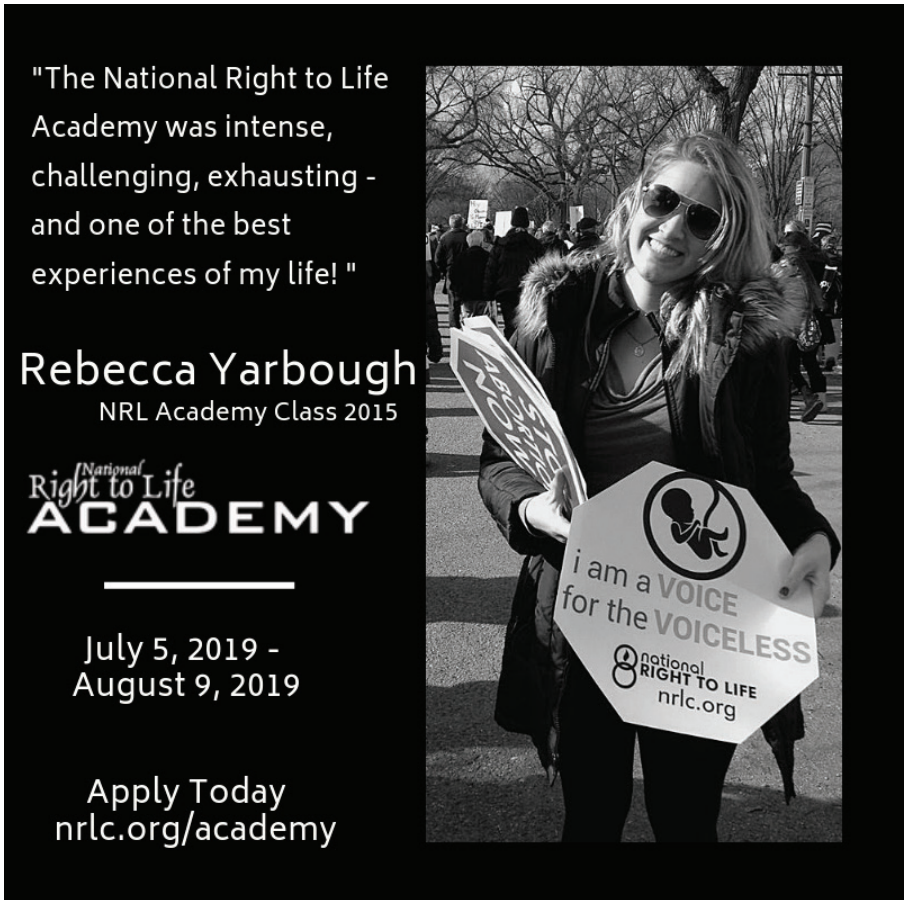
This year marks the 13th year of the NRLC Academy, and we have seen more than seventy bright, young, energetic and committed pro-life students graduate. We being on July 5th, 2019 in Charleston, South Carolina, where the students will be fully engaged in the 49th annual National Right to Life Convention. From there, students will be transported to NRLC's national headquarters in Downtown Washington, DC.

Students interested in participating in the 2019 summer program, should email the Program Director, Rai Rojas at academy@nrlc.org or call 202-626-8809. More information as well as applications are also available at www.nrlc.org/academy.

Tuition for the program is $3600 and includes the cost of the program itself, housing in downtown Washington, DC, and registration/lodging at the National Right to Life Convention in Charleston, SC.

The National Right to Life Academy focuses on equipping young pro-life leaders with the skills and knowledge they need to put their pro-life passion to work. The efforts of just one person can make an incredible difference. And with an estimated 61 million lives lost to abortion since 1973, and the onslaught of pro-euthanasia initiatives, now is the time for each one of us to stand up and be a voice for the most vulnerable.

Don't let this opportunity for the college-aged student in your life pass by. If you know of a student who would benefit from the NRLC Academy, please speak to them and guide them to our website for an application.



Research Shows Earlier Pain Perception in Unborn Child

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

Capitalizing on their election victories and giving their political funders what they paid for, Democrats have launched a campaign to try and_shore up and extend the reach of *Roe v. Wade*, 410 U.S. 113 (1973), gutting even the most reasonable and widely accepted limits on late abortions as they did in New York and tried to do in Virginia.

In their zeal to push these late abortions right up to the point of birth (or after, as the governor of Virginia suggested), these advocates have ignored years of research showing that unborn children aborted in the last half of pregnancy experience pain during those abortions, and quite likely even more excruciating pain than they would once born.

While evidence exists of pain receptors appearing as early as five weeks after conception and the child responding to touch as early as week six, even those who hold out for the development of the whole fetal sensory system--pain receptors, nerve tracts, spinal cord, thalamus, cortex--had to grant that all these were in place by the child's twentieth week of life.

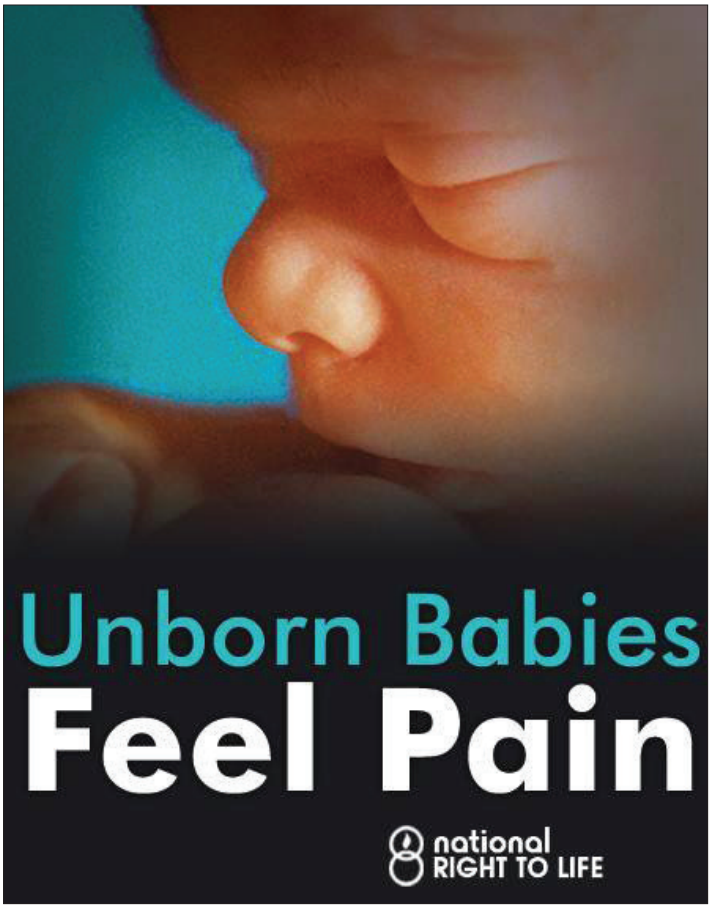
It was on this basis that many states passed the Pain-Capable Unborn Child Protection Act, which effectively protected unborn children who might be aborted after twenty weeks old.

That consensus may be shifting, though. Not by moving the pain threshold later (though there are always some who want to push that all the way to birth, or even later), but by asserting that the latest scientific evidence shows that pain capacity occurs even earlier.

The Physiology of Pain in the Unborn

While there are still some who claim a fully developed cortex (some say full maturation of the prefrontal cortex doesn't occur until one is 25 years old!) is essential to experience pain, more and more researchers and those who do fetal surgery in the womb are convinced that there is evidence that a functioning cortex. The fetal brain begins to differentiate into its various parts about four to five weeks after conception and the first signs of the thalamus can be seen as early as six weeks (UK Parliamentary Office of Science and Technology, Post Note 94, February 1997). Though brain stem and thalamus are sufficient for pain perception in the unborn.

The thalamus is that part of the brain just above the brain stem which processes and relays sensory information and signals to the cerebral



further development and differentiation will continue to occur over the coming months, the thalamus begins carrying out its functions in a manner of weeks.

Pain receptors show up as early as seven weeks gestation* around the mouth, spread to the palms of the hands and soles of the feet by 11 weeks, the trunk, arms, and legs by the 15th week, and all remaining skin surfaces by the time the unborn child reaches the 20th gestational week (KJS Anand, et al, *NEJM*, 1987). Nerve tracts connecting the spinal cord and thalamus are established by that time (Adama van Scheltema, et al, *Fetal and Maternal Medicine Review*, 2008)

Even for those who want to argue that the pain signal must be processed by the cortex to qualify, there is now evidence that the thalamic and subcortical structures are sufficiently mature, and have the necessary thalamocortical connections, in the words of Harvard anesthesiologist Roland Brusseau, that by the 20th gestational week, "it would appear possible that fetuses could experience something approximating 'pain'" (Brusseau and Myers, *Journal of Emergency Nursing*, 2006).

Taken together, this would tell us that, though still developing, the entire neural pathway from pain receptors to the cortex is in place by as early as the 18th week of the baby's life.

See "Research," page 46

** Like many other medical authors, KJS Anand speaks in terms of "weeks of gestation." Gestational age in obstetrics is usually dated not to conception, but to the woman's last menstrual period, or LMP. If so here, the fetal age would be two weeks less than the gestational age, e.g., 20 weeks gestational age would translate into 18 weeks fetal age. The reader should keep this in mind when seeing authors speak of "gestational weeks" later in the article.*

A Mid-March Update on State Legislation

By Ingrid Duran, Director of State Legislation, National Right to Life Committee

It seems like this legislative session has already lasted an eternity and yet we are only mid-March. While I typically like to report all of the strides that pro-life lawmakers are making everywhere, I want to start on a somber note and then conclude with the progress that we are making.

To make sure it had the most P.R. impact, New York chose January 22 to celebrate not only the willful destruction of unborn children but also the removal of protections for abortion survivors.

The so-called Reproductive Health Act is an extreme abortion-on-demand law that: removes the requirement that only physicians can perform abortion allowing nurse practitioners to also perform abortions; expands when abortions can be performed past the 24 weeks up until birth (it did so by adding a loose "health" exception that includes the pregnant woman's mental well-being); and repeals protection for babies who survive abortion attempts.

If that weren't bad enough, the RHA removed protections from criminal acts of violence against a pregnant woman's unborn child. Even "wanted" babies have lost all legal protection. All this, we were told, merely "codified" *Roe v. Wade*, dishonest even by pro-abortion standards.

Then, like an infectious disease, this idea began spreading to other state legislatures. Similar measures have been introduced in Illinois, Massachusetts, Rhode Island, Vermont, and Virginia.

Maryland was going to introduce a constitutional amendment enshrining a right to kill babies in their state constitution. Fortunately that was withdrawn but promises to return next session.

In Virginia, the pro-life movement, led by our affiliate Virginia Society for Human Life, initiated a successful and informative awareness campaign and lobbied intensely against the "Repeal Act" on behalf of the unborn. As a result, Del. Kathy Tran's bill to legalize abortion through all "40 weeks" failed. Virginians made it clear; they did not want to be the next New York.

Unfortunately, in Rhode Island and Vermont, these radical bills have passed one chamber of their legislature. In both cases, the governor has promised to sign the bills if they sent to them.

Three quick things the reader can do right now to help advance the pro-life cause and help prevent this malady from spreading: 1) Donate to National Right to Life. 2) Get involved with our state affiliate and spread the message, get involved by contacting your local representatives and let them know that you are opposed to abortion on demand laws. 3) Educate yourselves by going to www.nrlc.org/stopabortion/ and stay updated and sign up to receive breaking news from *National Right to Life News Today* [www.nationalrighttolifenews.org/join-the-email-list/].

Pro-abortion Virginia state Rep. Kathy Tran

PAS

Another problem cropping up in various state legislatures are the doctor-prescribed death laws, also known as assisted suicide or physician-assisted suicide.

As of mid-March, 14 states have introduced bills to make it possible for physicians to prescribe lethal drugs for their "patients." They include Arizona, Connecticut, Indiana, Iowa, Kansas, Maryland, Massachusetts, Nevada, New Mexico, New Jersey, New York, Oregon, Rhode Island, and Utah. Earlier this month, the Maryland House approved HB 399-- a bill legalizing suicide--by a vote of 74-66.

Our state affiliates, along with other groups and medical professionals, are on the front lines educating the public why these are dangerous bills, why "safeguards" do not work (and indeed, cannot work, given the way the laws are written), and testifying eloquently at hearings.

Now that we have the bad news out of the way, here is the good news. We have introduced many bills—and the current legislative session isn't over in most states. We are still creating waves and passing laws that effectively protect unborn children. **You** can still help.

Six states (Indiana, North Carolina, North Dakota, Rhode Island, South Carolina, and Washington) have introduced NRLC's top priority piece of legislation--the Unborn Child Protection from Dismemberment Abortion Act. This law protects living unborn children from being torn apart limb by limb by dismemberment abortion, a horrific abortion technique that culminates with the child bleeding to death.

So far 10 states have already passed a law protecting unborn children from being dismembered. This legislative session, Indiana passed the bill in its House (71-25), and North Dakota did likewise in its House (78-13).

Five states (Delaware, Florida, Maryland, Missouri,

See "Update," page 14

By 106-36, Vermont House adopts radically pro-abortion measure, including protection for partial-birth abortions

By Dave Andrusko

It was not like a surprise when the Vermont House of Representatives overwhelmingly voted 106-36 Thursday in favor in what Mary Hahn Beerworth, executive director of Vermont Right to Life, aptly described as "unlimited, unrestricted and unregulated abortion-on-demand throughout pregnancy."After all, the state House, like the state Senate, is firmly under the control of militantly pro-abortion Democrats whose savagery has only picked up speed. And they have veto-proof majorities in both houses, although there is no indication the governor would veto H.57.

Beerworth told *NRL News Today* there was no amendment, no matter how commonsense to H.57 that stood a chance against the Democrat machine. All these went down to defeat: "to protect minor girls, to limit abortions on unborn babies in the later stages of development, to provide informed consent (including alternatives to abortion), to providing regulation and inspection of abortion clinics, and other amendments."

But if ever there was a gauge just far how Democrats are willing to go, they shot down a proposed amendment to codify in Vermont state law a ban on the partial-birth abortion procedure. The federal ban on partial-birth abortion was upheld by the Supreme Court in 2007 in *Gonzales v. Carhart*.

In case you forgot this sickening "technique," the abortionist pulls a living baby feet-first out of the womb and into the birth canal, except for the head, which the abortionist purposely keeps lodged just inside the cervix. The abortionist punctures the base of the baby's skull with a surgical instrument, inserts a tube into the wound, and sucks the baby's brains out.

"Pro-abortion legislators walked in lock step with Planned Parenthood and the ACLU as they read on the House floor the talking points that were rather obviously provided to them by both pro-abortion organizations, "Beerworth said. "The legislators who fought against H. 57 included both pro-life and pro-choice members of the Vermont House of Representatives. Rep. Bob Bancroft, of Westford, identifies himself as pro-choice. But the fact that H 57 lacked any concern for young girls and women, or any concern for a viable unborn baby, compelled him to offer over eight amendments to the abortion bill."

Of course, "Abortion already is legal in Vermont throughout all nine months of pregnancy with no regulations or restrictions on its practice," Beerworth explained. " Not a single one."

The significant change "in passing this legislation will not be in what is legal in Vermont," Beerworth added. "The change is that the Vermont Legislature will move from passive acceptance of unrestricted abortion to intentional enactment."

Sen. Inhofe and Rep. Scalise: Where the 'Born Alive' abortion bill goes from here

By Sen. James Inhofe, Rep. Steve Scalise

Editor's note. This appeared at Fox News.

From New York to Virginia, states across the country are infringing on the right to life more and more, preventing millions of babies from realizing their God-given potential. Our right to life is not only enshrined in our Declaration of Independence, it is a solemn promise to protect innocent lives. While Congressional Democrats are fighting to continue and expand the abortion on demand culture they've perpetuated, we're standing with President Trump to protect innocent life at all stages of development.

The new front for the abortion activist is to deny babies who survive the brutal abortion process their right to life. Liberal states and politicians argue that unwanted babies who survive abortions—including late-term abortions—should not receive the highest level of medical care and would simply be "made comfortable" before they are murdered.

While horrific, this isn't far-fetched. Twenty-four states do not have explicit protections for live births. The state of New York specifically repealed this protection last month with lawmakers cheering and applauding in the background. Virginia considered a bill that would have done the same, but after a video went viral that made it clear the legislation would have allowed infanticide it failed in committee.

It is appalling and Congress must act. That is why we support the Born Alive Abortion Survivors Protection Act. It should be common sense in a just and moral society. This bill requires medical practitioners—those who have sworn to 'do no harm'—to exercise equal care to a baby who survives an abortion as any other child and provides criminal penalties for anyone who intentionally kills or denies lifesaving care to a child who is born alive after an abortion.

While members of the Senate are on the record with a vote on this legislation, the Democrat leadership that controls the House of Representatives has blocked its consideration. They don't want to have to vote on infanticide because they know the rest of the country doesn't agree–77 percent of Americans support protections for abortion survivors and 62 percent oppose late-term abortion.

There is one way to get around Speaker Pelosi's iron grip and demand accountability of our lawmakers—the discharge petition. If a majority of the Members of Congress sign the discharge petition on the Born Alive Abortion Survivors Protection Act, the Speaker will be forced to bring it to the floor for a vote. Whip Scalise has begun the process of a discharge petition in the House, which will become eligible for signatures early in April.

Because of the reform effort led by Sen. Inhofe in the early 1990s, the discharge petition signatures are now public. What this means is that constituents can clearly see if their elected representatives truly hold their values or only pay lip service to preventing infanticide and protecting the unborn. So look online. See if your representative supports life and the joys and blessings that come with that wonderful gift. Then take action by asking your member of Congress to sign the discharge petition to give a voice to the voiceless. With your help, we can force a vote on this important legislation

Sen. Jim Inhofe and Rep. Steve Scalise

The pro-abortionist's abiding fear of and loathing for Pregnancy Care Centers

By Dave Andrusko

Pregnancy Care Centers (also known as Women Helping Centers and Crisis Pregnancy Centers) are the stone in the shoe of the Abortion Movement. An alternative to the death-peddlers they not only give women a genuine option, they function as a standing rebuke to the Planned Parenthoods of this world. Which is why, of course, they are perennially in the crosshairs of the Abortion Establishment.

I admit I am fascinated, in a perverse sort of way, with the level of vitriol, the unabashed hatred on display. Part of it is from the wing of the abortion movement which goes crazy at the thought that many of those volunteers who help out do so as an expression of their faith. That cannot be allowed.

Others have sold themselves a bill of goods—that Pregnancy Care Centers offer (as pro-abortion scribe Robin Marty once put it) "Misleading and inaccurate health information."

You have to appreciate that to ideologues like Marty it is an article of faith, in a manner of speaking, that **every** study that demonstrates that a certain percentage of women suffer from one or more of a myriad of post-abortion complications is simply making the results up.

Abortion **can't** be bad for women, it just can't. Common sense would tell you otherwise, including, most obviously of all, an increased risk of premature birth with subsequent babies following an abortion.

"This is just one in a long list of risks associated with abortion," Cassy Fiano explains. "Women who have abortions are at risk for higher mortality rates, serious medical injuries or death, mental health problems, depression, suicide, and breast cancer."

Remember that Planned Parenthood is a more than $1.4 **billion** dollar "nonprofit" which gets money from every level of government and tons of private subsidies. The largest abortion provider in the United States is swimming in private contributions and tax-funded subsidies, but the idea that a Pregnancy Care Center would receive any governmental aid—direct or indirect—drives them into a frenzy.

A tax credit? Intolerable. A state fund that reimburses them for some expenses? Unacceptable.

How about applying to the city for low-interest loans to build an apartment building to house women with unintended pregnancies during and for some time after the birth, as Marty explains. That must be smothered in the cradle, lest those pesky pro-lifers be better able to do what pro-abortionists always rant pro-lifers have no interesting in doing: help women after the baby is born.

My point is a simple one: Mix hatred for competition, shake it with a loathing for faith-based women-helping centers, and stir it with a fear that one single baby might ever escape their clutches and you'll understand why they will never cease trying to destroy all alternatives to abortion.

Here's abortionist Willie Parker's incoherent argument against human equality

From page 6

simply because we are human. And society must respect those rights as a matter of justice.

Parker should understand this well. He likes to quote Martin Luther King Jr., who articulated better than anyone the difference between what governments say and what justice requires. A law or court decision that "[relegates] persons to the status of things," Dr. King wrote, is "unjust."

Does Parker hold a different view? When he speaks, it often sounds like it.

Willie Parker became a celebrity abortionist by identifying as a Christian and invoking the parable of the Good Samaritan as a twisted rationale for dismembering inconvenient and helpless members of the human family. He is now lauded by the likes of Planned Parenthood, Gloria Steinem, and Lena Dunham. He is celebrated on *The Daily Show* and in the pages of *The New Yorker* and *Rolling Stone*.

They might want to rethink some of their praise. Parker's debate performance showed that he can't give defensible or even coherent reasons for his practice of lethal discrimination against a class of innocent human beings. ("I am not trained in debate. I am not trained in philosophy," he told the audience after a rebuttal given by his opponent, Prof. Mike Adams.)

But Parker's not alone. Historically, attempts to divide humanity into those who matter and those who don't have never held up to scrutiny. They have always failed the test of reason and justice.

They fail because—despite Parker and the abortion industry's shallow protestations to the contrary—human equality really is true.

"Me …Still Me" is a wonderful way to illuminate the continuum of human life from the womb to the crib

By Dave Andrusko

The beauty of being a genuine grassroots movement is that often times some of the very best ideas come from pro-lifers motivated by the pro-abortion actions of their governmental officials and love for their children.

Nichole Rowley wrote to NRLC's Jacki Ragan about what is called "Me …Still Me," a delightful way to show everyone, including pro-abortionists, there is perfect continuity between a baby in the womb and the baby born after 40 weeks.

According to Nicole, "Me …Still Me" "strives to save unborn children from abortion by utilizing two of the most powerful weapons in the pro-life arsenal: Ultrasound photos and newborn photos."

Nicole explained the background to Jacki:

"Me …Still Me" started when Rhode Island Governor Gina Raimondo (radically pro-choice) sent me a "Welcome Baby" greeting card after my son was born. I mailed the card back to Governor Raimondo along with my son's "Me …Still Me" photo (ultrasound and newborn photo side by side with "Me …Still Me" written across).

After posting what I did to social media, many of my friends created their own "Me …Still Me" photos and sent them in as well. And just like that the "Me …Still Me" movement was born!

Abortion advocates, Nicole wrote Jacki, "attempt to dehumanize the unborn in order to normalize abortion. We combat the lie of dehumanization by showing a side-by-side photo of the child in the womb (Me) and outside the womb (…Still Me), clearly presenting the continuum of human life from the womb to the crib."

Fulton James

These two photos and three words beautifully sum up the pro-life message "and it becomes impossible to deny that abortion kills beautiful children."

For those of us whose internet skills are a bit lacking, Nicole explained how you go about showing putting "Me …Still Me" together.

Using an app, combine an ultrasound photo and a photo of your child after birth, side-by-side. Then

Write "Me" over the ultrasound photo and "…Still Me" over the photo of your baby after she or he is born. Post to the Me Still Me group page and send to your local legislators!

Nicole sent along the two photos we've posted above–her newest son, Fulton James and her oldest son, Gerard James—that she sent to Gov. Raimondo and other legislators.

Nicole encourages pro-lifers to join the Me Still Me group page kindly share with others! "Together we are even more powerful!"

"This President, this party, and this movement will always stand for the unborn. We will always defend the unalienable right to life"—Vice President Mike Pence

By Dave Andrusko

A vice president, like Mike Pence, of a very pro-life administration, led by President Donald Trump, is not going to miss the opportunity to slam Senate Democrats for their ghastly decision to prevent a vote intended to stop infanticide.

And that's exactly what Mr. Pence did last week in a powerful speech delivered at the annual meeting of CPAC, the Conservative Political Action Conference, held at Gaylord National Resort & Convention Center in Maryland.

On February 25, with only three exceptions, Senate Democrats blocked action on the Born-Alive Abortion Survivors Protection Act. Pro-lifers will not soon forget that 60 votes were required to "invoke cloture," but only 53 supportive votes were cast.

Nor will they forget (as Ed Mechmann of the Archdiocese of New York put it) that "Everyone understood that this was not just a procedural vote, but was really a substantive vote on the bill itself. So a 'yes' vote was to ban infanticide, and a 'no' vote was against it."

In 2019, 44 senators voted against banning infanticide.

The Vice President began by calling for his audience that

> **Since the first days of this administration, President Donald Trump has stood without apology for the sanctity of human life. In one of his very first acts, the President reinstated the Mexico City Policy, preventing taxpayer dollars from funding abortion or abortion providers around the world. And here at home, President Trump signed a law to allow all 50 states to defund Planned Parenthood.**
>
> **Life is winning in America once again.**

Then Vice President Pence transitioned to what's happening not only in Congress but, unfortunately, in some states where Democrats wield power:

But for all the progress we're making at the very moment that more Americans than ever before are embracing the right to life, leading members of the Democratic Party are embracing a radical agenda of abortion on demand.

Pro-life Vice President Mike Pence

> **In state legislatures across the country, Democrats have endorsed late-term abortion. The Democrat governor of Virginia openly defends infanticide. And just four short days ago Democrats in the Senate, including every Democratic senator running for president, voted against a bill that would prevent newborn babies who survived failed abortions from being killed.**
>
> **You know, I've long believed that a society can be judged by how it deals with its most vulnerable: the aged, the infirmed, the disabled, and the unborn.**
>
> **With Democrats standing for late-term abortion, infanticide, and a culture of death, I promise you this President, this party, and this movement will always stand for the unborn. We will always defend the unalienable right to life.**

What a frightful thought. All but three Senate Democrats refused to draw a line at neglecting to treat babies who survive abortions with the same—no more, no less—care they would any other baby of a similar gestation age.

Worse yet, if possible, all Senate Democrats running for President in 2020 voted against the Born-Alive Abortion Survivors Protection Act: Bernie Sanders of Vermont, Kamala Harris of California, Cory Booker of New Jersey, Kirsten Gillibrand of New York, Amy Klobuchar of Minnesota, and Elizabeth Warren of Massachusetts .

This may play well with party "activists," but for the rest of humanity, their vote was a disgrace.

5 amazing things preborn children can do inside the womb

By Rebecca Downs

Preborn children may not be at the same developmental stage as us, but there are many things that they can still do! They have beating hearts at only 21 days gestation, detectable brain waves at roughly 42 days, and can suck their thumbs and yawn. They even have taste buds and their own fingerprints!

The incredible things preborn children can do inside the womb may surprise us, however, they certainly showcase the humanity of preborn life.

Learn!

BabyCentre shares that the "womb is a sensory playground for your baby," noting that when babies respond while in the womb, it is a sign that the child is preparing for life after birth.

WebMd states that babies have the ability to learn and listen while in the womb:

The new research suggests that babies began to absorb language when they are inside the womb during the last 10 weeks of pregnancy — which is earlier than previously held.

Newborns can actually tell the difference between their mother's native tongue and foreign languages just hours after they are born.

These incredible facts display that while the baby is not yet seen, he or she is very much human.

React with gestures!

Babies have the ability to hear language and music in utero — the latter of which the child may react to. Babies can react in the womb to music "by blinking or moving to the beat."

Children in the womb can also react in other ways, such as giving a thumbs up or other hand signals. A baby recently made headlines after the mother posted a video of her child at 14 weeks, clapping in the womb.

Remember!

Research on how children learn inside the womb also note a preborn child's ability to remember. In fact, research shows us that children can actually distinguish their mother's language and voice from others.

Speech pathologist Melissa Wexler Gurfein suggests that mothers should "continue to talk to her newborn from the moment of birth to help facilitate language development."

Children can also remember songs they hear in the womb for up to four months, as noted by The Daily Mail. Researchers say exposure to music in the womb may also influence a "critical period of brain development.

It is amazing how children not only learn in the womb, but remember.

Dream!

At 32 weeks, it is reported that babies sleep 90 to 95 percent of the day. Some of these hours are spent in different stages of sleep, including REM, deep sleep, or in an indeterminate state.

During REM sleep, [a baby's] eyes move back and forth just like an adult's eyes. Some scientists even believe that fetuses dream while they're sleeping! Just like babies after birth, they probably dream about what they know — the sensations they feel in the womb.

Researchers who observed babies in utero note that they are in a state of quiet alertness. This suggests that the child may be focusing on something — perhaps listening to their mother's voice.

Exist as human beings!

Even before preborn children are able to do these things, they still exist. The moment the sperm fertilized the egg, a new human person came into existence!

An individual child is never anything but human, and has never existed, nor will exist again. From the moment of conception, preborn children amaze us.

Editor's note. This appeared at liveactionnews.org and is reprinted with permission.

The only difference between a baby who is born prematurely and a baby fighting for life after a botched abortion is location: the NICU

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

It was one of those Facebook posts which breaks your heart. A young mother who had just given birth to twins found out that one of her newborn baby boys was in medical trouble.

He was flown to a distant children's hospital where he could receive life-saving care. When his mother, father, and newborn brother arrived on the scene, doctors determined that the other twin needed to be admitted too. His mother was beside herself with anxiety and appealed for urgent prayer from her Facebook friends.

This story has a happy ending—both boys recovered and are now safely at home with their older siblings. But I found it ironic that this chain of events unfolded on social media at the very moment that pro-abortion Democrats in Congress were blocking legislation to protect newborn babies from infanticide.

In one part of the country, health care professionals feverishly work to save the lives of newborns. In Washington, D.C., political pols whose main allegiance appears to be

to Planned Parenthood and NARAL work to unravel the legal safety net for babies.

This schizophrenic state of events strikes many people as decidedly strange. In America, where we uphold the rights of the vulnerable, why is it open season on babies who have just emerged from their mothers' wombs? Why do we invest time and resources toward saving babies in Neo-Natal Intensive Care Units, while at the same time, in our nation's capital, dismiss the humanity of babies deemed unworthy of life?

The only difference between a baby who is born prematurely and a baby fighting for life after a botched abortion is location. One is rushed to the NICU, the other is completely ignored, save (in the famous pro-infanticide words of Va. Gov. Ralph Northam) she be made "comfortable."

The priceless value of both babies remains the same.

I was overwhelmed with emotion when I learned that, in Japan, a tiny baby who had been born at 24 weeks' gestation, weighing the size of an onion, was finally coming home from the hospital. In addition to medical care, that boy had medical professionals who believed in him and his inherent worth.

That's all any of us needs, really—someone to believe in us. If you are a baby born alive after an attempted abortion, it is clear that with a tiny handful of exceptions, Congressional Democrats do not believe in you.

At election time, the question should be, why should we believe in them?

A Mid-March Update on State Legislation

From page 7

and Washington) have introduced NRLC's model Pain-Capable Unborn Child Protection Act. This legislation protects from abortion unborn children who are capable of feeling pain. Substantial medical evidence demonstrates that unborn children are capable of experiencing pain certainly by 20 weeks, if not earlier.

In early March, legislative hearings were held and excellent testimony was provided by pro-lifers in Delaware and Maryland.

In Missouri, the House passed an omnibus bill containing the Pain-Capable Unborn Child Protection Act by a vote of 117-39.

NRLC is encouraging more states to follow in their footsteps.

Prior to this legislative session, 16 states had passed pain-capable laws.

APR

The Abortion Pill Reversal Information Act is another lifesaving, protective piece of legislation. This law makes it possible for abortion-minded women to give true informed consent by providing them with information that should they change their mind, there is a serious chance of reversing a chemical abortion.

So far in the 2019 session six states have introduced the Abortion Pill Reversal Information Act: Arkansas, Kansas, Oklahoma, Nebraska, North Carolina, and North Dakota. (Arkansas has a law but is amending it to strengthen the current law.) So far the bill has passed one chamber in Arkansas, North Dakota, and Oklahoma.

Currently five states have laws that provide women with this life-saving information.

So you see for every extreme pro abortion-on-demand bill that gets introduced, the pro-life movement counters with more than double the number of bills. However, pro-abortionists want to block our legislation as well as pass their own. We need your help to protect the innocent and vulnerable.

Please continue to support our efforts and stay involved. Your support, encouragement, and prayers are appreciated and needed now more than ever as we fight this culture of death and destruction.

Amicus brief filed with Supreme Court defending Alabama's ban on dismemberment abortions

By Dave Andrusko

Tip of the hat to an unusual source: the pro-abortion blog Rewire.news.

A story recently posted by Rewire.news author, Jessica Mason Pieklo, reminded me of a story we posted back in late August when a three judge panel of the 11th Circuit Court of Appeals upheld a lower court verdict striking down Alabama's Unborn Child Protection from Dismemberment Abortion Act.

Ten states have enacted a ban on dismemberment abortions.

The law bans a hideous dismemberment abortion technique, which the panel readily acknowledged (and which made the author of the Rewire.news story uncomfortable) : It

> **involves tearing apart and extracting piece-by-piece from the uterus what was until then a living unborn child. This is usually done during the 15 to 18 week stage of development, at which time the unborn child's heart is already beating. …**
>
> **The State has an actual and substantial interest in lessening, as much as it can, the gruesomeness and brutality of dismemberment abortions. That interest is so obvious that the plaintiffs do not contest it.**

Nonetheless, according to the panel,

> **But the fact that the Act furthers legitimate state interests does not end the constitutional inquiry. The legitimacy of the interest is necessary but not sufficient for a pre-viability abortion restriction to pass the undue burden test.**

A coalition of 20 state attorneys general has filed a 30-page brief with the Supreme Court, writes Pieklo, "argu[ing] for the constitutional power to endanger patient safety." Of course that is absurd, but it gives you some appreciation how nervous the Abortion Industry and its support staff in the media are that the Supreme Court will take the case and agree the ban is constitutional!

Let's go beyond Pieklo's distortions of the amicus brief and spotlight three arguments that explain why Alabama's SB 363 meets constitutional muster.

*The key is the very first paragraph—balance:

> **The question presented in this case goes to the heart of the States' authority to regulate abortion. This Court has held that States (1) have an interest in protecting and fostering respect for human life, including unborn life, and (2) have the power to regulate the medical profession, including on matters of medical judgment and ethics connected to abortion. See Gonzales v. Carhart, (2007). As a result, not only may States prohibit specific abortion procedures that threaten to erode respect for life, but they may balance any related medical tradeoffs when they do so, on condition that they do not unduly burden the decision to obtain an abortion. Although the decision to obtain an abortion has been constitutionally protected, access to a particular abortion method — even a method favored by abortion providers — is not.**

Abortionists prefer an abortion methods that the amicus brief describes as "an exceptionally grisly one, at least as, and potentially even more so than, the 'partial birth' procedure at issue in Gonzales." All the law requires is the baby's demise before the abortionist tears her to pieces. But this is too much for the Abortion Industry.

*The brief emphasizes that the states must have the authority "to protect both unborn life and human dignity in that small way."

> **The States' authority to regulate abortion for the purpose of protecting unborn life and advancing respect for life is unquestionable. See, e.g., Gonzales. Alabama defended the challenged abortion regulation on that ground. It is also beyond serious question that this abortion procedure threatens to undermine respect for life. Alabama is thus empowered to defend**

See "Alabama," page 16

Kentucky House passes bill to ban abortions on babies with Down syndrome

By Calvin Freiburger

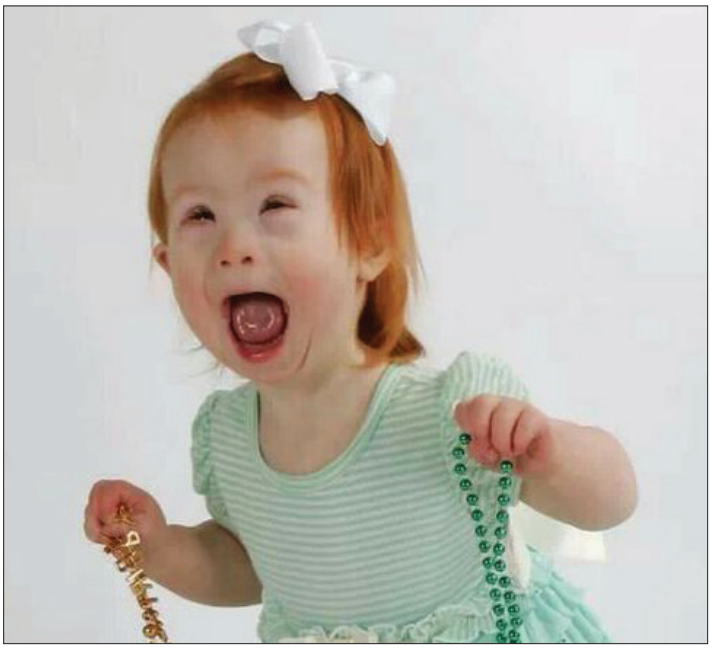
Editor's note. This is excerpted from a post that appeared at Life Site News.

FRANKFORT, (Life Site News) – Following the advancement of multiple pro-life proposals, the Kentucky House voted February 27 to pass legislation that would ban abortions driven by discrimination against certain characteristics of the preborn child.

Introduced by Republican state Rep. Melinda Gibbons Prunty, House Bill 5 would ban any abortion sought on the basis of the baby's race, sex, color, national origin, or disability. Abortionists would be required to certify they were unaware of any such motive before aborting. Violators would be guilty of a Class D felony (punishable by 1-5 years in prison), see their medical licenses revoked or suspended, and be potentially liable for civil damages.

On Tuesday, the Republican-controlled House voted 67-25 to approve HB5 and send it on to the Senate, *Kentucky Today* reports.

"There are 15 clauses that protect the sanctity of life and civil rights," Prunty argued during a lengthy floor debate. "This bill would extend those exact same rights to the unborn, from the moment of conception. Demanding the right to extinguish or eliminate the life of an unborn child, specifically because of their gender, race or possible physical or mental disability, is reminiscent of the evil social philosophy of eugenics."



"Once again, this legislative body is inserting itself into the physician's office," Democrat state Rep. Mary Lou Marzian shot back. "This legislation has also been passed in several states and found unconstitutional. So, I guess I should be thrilled for my ACLU friends, who will be the recipient of over $100,000, I'm sure, of taxpayer dollars."

Last week, University of Notre Dame developmental psychologist and public policy fellow Mary O'Callaghan testified before the House Committee on Veterans, Military Affairs and Public Protection that an estimated 70% of Down syndrome-diagnosed pregnancies end in abortion, the *Lexington Herald-Leader* adds.

"Make no mistake, preventing these children's births through abortion is prenatal screening's ultimate goal," she warned.

HB5 is likely to pass the state's Republican-controlled Senate and be signed into law by pro-life Republican Gov. Matt Bevin.

Amicus brief filed with Supreme Court defending Alabama's ban on dismemberment abortions

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against that threat. Gonzales held that when a State regulates abortions for the sake of fostering respect for life, including unborn life, it has leeway to balance that interest against possible medical tradeoffs. Even when some abortion providers consider a forbidden procedure to be medically preferable, the State's reasonable resolution of the tradeoffs prevails. Abortion providers instead must work to find abortion methods that are more consistent with respect for life. The nature of the State's interest distinguishes cases like this one and Gonzales from cases like Hellerstedt, where the State justified its abortion regulations solely in medical terms.

*One other. The amicus brief argues that the litigants are going far beyond demanding the right to slaughter living unborn children:

> **abortion providers and their counsel appear to have interpreted Hellerstedt as declaring open season on State abortion laws (sometimes even including common sense regulations as fundamentally sound as requiring sterile instruments). Only this Court can clarify that Hellerstedt was not the watershed abortion providers claim it was and reaffirm the right of States to enact reasonable abortion regulations.**

Mom gives birth midflight; airline names the plane after her baby

By Texas Right to Life

Last month, the airline JetBlue hosted the youngest customer in the company's history. While a flight from Puerto Rico to Florida was still in the air, a mother gave birth to a healthy baby boy and the flight crew captured images of the unexpected arrival.

JetBlue released a statement reading in part, "We'd like to thank the crew and medical professionals on board for their quick action under pressure, and wish the new mother and son all the best." Footage obtained by NBC 6 shows medics treating the mother after the flight landed safely in Florida while other passengers look on excitedly.

Fittingly, flight 1954 was operated on aircraft N523JB, named "Born To Be Blue." In a tweet, the airline quipped: "Giving storks a day off. With mom's okay, we'd like to rename 'Born To Be Blue' after our newest baby blue and our youngest customer ever. More baby shower gifts to come! #AirBorn"

Surprisingly, the baby boy born on a JetBlue flight is not the only baby to make an appearance mid-flight. The Independent reports that two babies born in the air in 2017 were given free flights for life on the respective airlines.

Not all babies born in the air receive such an extravagant gift, but the news stories about each unexpected birth at 30,000 feet show how people come together to take care of a vulnerable baby. On a Turkish Airlines flight in 2017, a baby was born prematurely at just 28 weeks.

The flight crew and passengers came together to assist the mother and care for the baby until they could be transported to the hospital upon landing. Mother Nafi Diaby and her daughter both were in good health following the harrowing incident.

Sometimes, unexpected births during travel don't take place in a city far from home. That's what happened to a Texas family during a Christmas vacation in 2015. While out of state, all the way in North Dakota, Crystal Russell started hemorrhaging at just 24 weeks into the pregnancy. Her son Wyatt was delivered in an emergency C-section. As a micro-preemie, Baby Wyatt weighed in at a mere 1 pound, 5 ounces.

Baby Wyatt beat the odds and grew into a healthy toddler. The journey was a difficult one, requiring many sacrifices from his family. His brothers had to return to Texas for school and his dad needed to go back in order to work. This left Baby Wyatt and his mother in North Dakota, thousands of miles from home, so that Wyatt could continue to receive the care he needed to grow and develop.

Communities in North Dakota helped to support Baby Wyatt and his mom through the difficult months of being separated from the rest of the family and the uncertain ups and downs of caring for an extremely premature baby.

While radical abortion activists are trying to "normalize" late-term abortion, these beautiful stories of babies born unexpectedly in inconvenient circumstances show that people are ready and willing to support babies and their families when the need arises. The excitement of passengers and crew of the JetBlue flight is palpable. News outlets' desire to share the story shows how universal that excitement is.

Despite the continued efforts of abortion extremists, we have a culture that still values Life. Every baby, whether born mid-flight or not, deserves the warm and enthusiastic welcome of the newborn delivered on JetBlue.

How can you support newborns and their families in your community?

Pro-life House leaders hold press conference condemning Senate Dems for killing the Born-Alive Legislation

By Karen Cross, National Right to Life Political Director

Last week, Rep. Ann Wagner (R-Mo.) and five of her pro-life House colleagues held a press conference to condemn Senate Democrats for failing to advance the Born-Alive Abortion Survivors Protection Act (S. 311), sponsored by Sen. Ben Sasse (R-Neb.). The final vote was 53-44 with all but three Democrats voting to block the bill from receiving the 60 votes necessary to move S.311 forward ("invoke cloture"). The bill would extend federal legal protection to babies who are born alive during an abortion.

In the House, Democrats have erected a procedural hurtle which prevents a similar bill from being heard. Along with her colleagues, Wagner urged House members to sign onto a "discharge petition" to force the same legislation to a vote on the floor of the House.

A discharge petition is a procedural tactic to circumvent the Speaker of the House when the Speaker opposes a measure. It allows an absolute majority of the House (218 lawmakers) to force a floor vote on a bill, even if pro-abortion leaders oppose the measure.

Rep. Wagner was joined by Whip Steve Scalise (R-La.), Rep. Jackie Walorski (R-Ind.), Rep. Chris Smith (R-NJ), Rep. Roger Marshall (R-KS), Rep. Michael Burgess (R-Tx.), and several prolife organizations who all made remarks. The members were united in expressing shock over the 44 members of the United States Senate who voted to protect what amounts to infanticide: willfully withholding life-saving care from a born-alive infant.

Action on the Born-Alive Abortion Survivors Protection Act comes on the heels of enormous controversy in New York and Virginia. In January, the New York legislature passed, and Gov. Andrew Cuomo (D) signed, the so-called "Reproductive Health Act." Among other provisions, the law repealed protections for infants born alive during an attempted abortion. Previously, New York law stipulated that a second physician be present to care for a child 20 weeks or older born alive during an abortion.

In Virginia, Gov. Ralph Northam (D) waded into the debate over a New York-style measure in the Commonwealth. In a radio interview during the Virginia legislature's debate over the "Repeal Act," Northam said an infant born alive during an attempted abortion wouldn't necessarily be entitled to immediate treatment other than being made "comfortable." His comments touched off a torrent of criticism.

Center: Jennifer Popik, NRL director of federal legislation, flanked by pro-life Congresswomen Jacki Walorski (IN) and Ann Wagner (MO), lead sponsor of the Born-Alive legislation.

Jennifer Popik, J.D., director of Federal legislation for National Right to Life, told reporters,

> **You have to ask yourself, can we really trust the abortionist, who was seconds earlier, was attempting to end this life of this baby, to now provide treatment? We need clear standards of medical care for babies born-alive. That is why we need this enhanced version of the Born-Alive legislation.**
>
> **We are appalled that pro-abortion Democratic senators would filibuster the Born-Alive Abortion Survivors Protection Act. They need to explain to their constituents why their allegiance to the abortion industry agenda should allow a practice that is tantamount to infanticide.**
>
> **We call on all members of the House to sign the discharge petition and bring this bill to the floor for a vote. Let the American public see how much they truly care for the most vulnerable among us.**

Documentation on the history of the Born-Alive Infants Protection Act of 2002 (1 U.S.C. §8) and related issues is available on the NRLC website at: nrlc.org/federal/bornaliveinfants.

Trump Administration Restores Title X Regulations to Separate Family Planning from Abortion

Change restores previous regulations prohibiting grantees from co-locating with abortion clinics or from referring clients for abortion

WASHINGTON – The U.S. Department of Health and Human Services has issued a final rule to restore Title X family planning regulations to prohibit grantees from co-locating with abortion clinics, or from referring clients for abortion.

In spite of pro-abortion distortions, the rule does not cut family planning funding. It merely ensures that health facilities receiving Title X funds do not perform or promote abortion as a method of family planning.

"We thank President Trump and Health & Human Services Secretary Azar for their numerous actions to restore pro-life policies," said Carol Tobias, president of National Right to Life. **"We are encouraged to see the announcement of Title X regulations that are back in line with previous policy that prevents federal dollars from being used to directly or indirectly promote abortion domestically."**

Under the new directive, which will take effect in 60 days, organizations receiving Title X funding have 120 days to financially separate their family planning and abortion operations and one year to physically separate their family planning and abortion operations.

HHS Secretary Alex Azar

Congress created Title X in 1970 as a preventative family planning program. Congress wrote language into the statute to ensure the program did not directly or indirectly promote abortion.

Unfortunately, after *Roe v. Wade*, this language gradually became a dead letter. Title X grantees were first permitted, then required, to routinely refer all pregnant women regarding abortion as a "pregnancy management option." For all practical purposes, some Title X grantees treated abortion as "a method of family planning," despite the statutory prohibition.

Pro-life President Donald Trump

During the Reagan Administration, regulations were issued, with National Right to Life's strong support, to restore the original character of Title X by prohibiting referral for abortion except in life endangering circumstances. Additionally, abortion facilities could not generally share the same location with a Title X site.

In the 1991 *Rust v. Sullivan* decision, the U.S. Supreme Court found similar regulations permissible.

However, the Clinton Administration would later reverse these regulations.

In early May 2018, nearly 200 Members of Congress and numerous pro-life groups, including National Right to Life, urged the Trump administration to reinstate pro-life policy regarding Title X regulations, separating abortion services and referrals from the Title X Program.

World's tiniest surviving boy goes home

By Dave Andrusko

After five months of treatment, an amazing baby boy, thought to be the smallest male newborn ever to survive and be released healthy, is now home and "feeding normally." Keio University Hospital in Japan said it discharged the unnamed baby, "two months after his initial due date," *CBS News* reported

The preemie was born in August at 24 weeks weighing 268 grams (9.45 ounces) and was so tiny he fit in an adult's cupped hands. He was delivered by emergency C-Section when it appeared he had stopped growing.

"I can only say I'm happy that he has grown this big [just over seven pounds] because honestly, I wasn't sure he could survive," the boy's mother said, according to *CBS News*.

Dr. Takeshi Arimitsu, who treated the little baby, told the *BBC*

> **he was the smallest infant born (on record) to be discharged from a hospital, according to a database of the world's littlest babies held by the University of Iowa.**
>
> **He said he wanted to show that "there is a possibility that babies will be able to leave the hospital in good health, even though they are born small".**

Citing the University of Iowa database that tracks the world's smallest surviving babies, the hospital said the previous record was "held by a boy born in Germany in 2009 weighing just 274 grams (9.6 ounces)," *CBS News* reported.

According to that University of Iowa registry, the tiniest baby ever to survive and go home healthy was a girl born in 2015 in Germany, weighing 252 grams (8.9 ounces).

"Among the very smallest babies, the survival rate is much lower for boys than girls. Medical experts are unsure why, though some believe it could be linked to the slower development of male babies' lungs," the *BBC* reported.

The boy is seen five days after his birth in Tokyo, Japan, in this undated handout photo obtained by Reuters on Feb. 27, 2019. (Keio University School of Medicine, Department of Pediatrics)

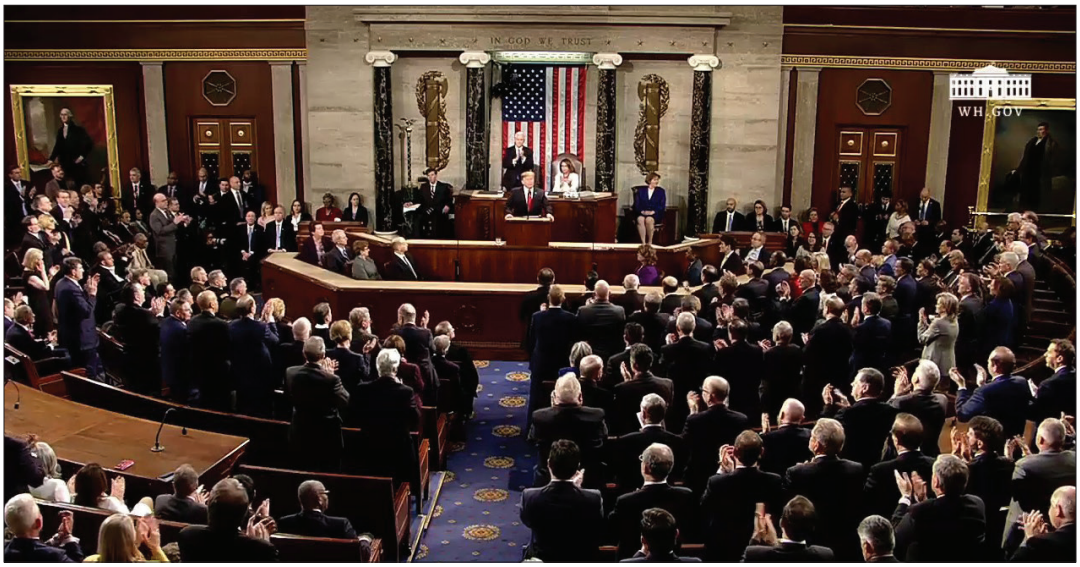
Fact-checking the fact-checkers: Trump on late-term abortion

By Texas Right to Life

In the weeks since President Trump's State of the Union Address, pro-abortion media have run wild with "fact check" pieces rating President Trump's comments as "false." A closer look at the claims of the "fact-checkers" reveals more about the abortion supporters than about the President's truthful and accurate remarks.

In his State of the Union address earlier last month, President Trump spoke harshly about the radical abortion laws threatening innocent human Life. He said,

> **There could be no greater contrast to the beautiful image of a mother holding her infant child than chilling displays our nation saw in recent days. Lawmakers in New York cheered with delight upon the passage of legislation that would allow a baby to be ripped from the mother's womb moments before birth. These are living, feeling, beautiful babies who will never get the chance to share their love and their dreams with the world.**



New York's radical abortion laws allow abortion at any stage of pregnancy if the abortionist determines the mother's "health" is at risk (a term so loosely defined that virtually anything could qualify), allows people who are not doctors to commit abortions, and removes all protections for babies born alive in an attempted abortion. Other pro-abortion states are following New York in promoting similarly barbaric anti-Life laws.

The response of pro-abortion commentators to the President's remarks are telling. *CNN, NBC, the Washington Post*, and *NPR* all go to great lengths to show the President's remarks were "false" without succeeding in finding anything.

These news outlets with a notorious anti-Life bias on abortion ignore the broad and undefined nature of the "health" exception, which dates back to *Doe v. Bolton*, and does, in fact, mean abortion is allowed in virtually all circumstances. The Supreme Court decision states that abortion can be considered "necessary" by the abortionist "in the light of all factors – physical, emotional, psychological, familial, and the woman's age – relevant to the well-being of the patient.

All these factors may relate to health." Ignoring the actual implications of the law is a grave misrepresentation calculated to advance pro-abortion views on the part of these news organizations.

The pro-abortion "fact-checkers" also made much of the statistics showing that most abortions occur early in pregnancy. This does not affect the injustice of late-term abortion, and this statistic is not a counter-argument. Every abortion takes an innocent human Life, but abortions that occur after a child is highly developed and even able to live on her own outside the womb are particularly shocking to most people, and even most abortion supporters oppose late-term abortions.

Each year in the United States, there are roughly one million abortions. As Live Action has reported, each year more than 100,000 of those abortions were committed in the second and third trimester. Nonetheless, the fact-checkers frequently quote the CDC statistic from 2015 that "only" 8,296 preborn babies were killed in extremely late-term abortions, a fact that would alarm most of the American public. [Editor's note. The actual number is likely 11,000 to 13,000, or more, for a variety of reasons, including that CDC's overall abortion numbers are always far short of the actual total due to the way it gathers figures.

Several anti-Life news outlets also brought in "experts" to make the argument that "late-term abortion" does not exist. This is farcical.

Abortion supporters tried this tactic when Pro-Life lawmakers successfully advanced the federal Partial-Birth Abortion Ban, which prohibits a particularly gruesome form of late-term abortion. In the anti-Life Netflix documentary *Reversing Roe*, a pro-abortion lawyer claims, "There's no such thing as partial-birth abortion," because abortionist do not call the procedure by that name.

See "Fact-checking," page 23

The other country where euthanasia for children is legal—Colombia

The long process of legalisation began in 1997

By Michael Cook

Colombia is not a nation that one associates with end-of-life debates, but it is one of the few which has legalised euthanasia – even for children over 6 years old. Perhaps the issue has flown under the radar because many Colombians are Catholics or Evangelicals for whom euthanasia is anathema.

The process began in 1997 when Colombia's Constitutional Court ruled that ending lives in certain circumstances was not illegal. In Sentencia C-239/97 it stated: "Nothing is more cruel than to force a person to survive in the midst of shameful suffering, in the name of other people's beliefs."

However, this still left the legal status of assisted suicide and euthanasia in a legal limbo. Activists could not be sure that they would not be prosecuted.

Finally, the Constitutional Court declared in December 2014 that it was legal (Sentencia T-970/14).

And then, in 2017 (Sentencia T-544) the Court ordered the Department of Health and Social Protection to issue regulations which would "guarantee the right to death worthy of children and adolescents".

So on March 9, 2018, the Department of Health and Social Protection issued Resolution 825 which allowed euthanasia for children over 6. The Department explained that before that age children cannot grasp the idea of their own death. However, children between the ages of 7 and 12 are allowed access euthanasia with the approval of their parents. Children between 12 and 14 can access it even if one parent disagrees. After 14, no parental involvement is needed, provided that all the requirements for euthanasia are fulfilled.

Like adults, the child must have an incurable condition, have unmanageable pain and the mental capacity to consent. "Doing this for children is a whole new world," Ricardo Luque Nunez, a doctor and bioethicist who is an adviser to the Colombian Ministry of Health and oversees this issue, told the Globe and Mail.

According to official records only 40 people have taken advantage of Colombia's euthanasia regulations. Unofficially, there may be many more. As in other countries, activist doctors who are impatient with red tape take the law into their own hands. One doctor claims that he has "provided euthanasia" to almost 400 people, including more than 30 children.

Colombian voters have had no say in this momentous legal change. "We have not had a big national debate about this, and I'm not very happy about it," says a former Colombian health minister. "We need a public debate: We are not Belgium or Holland – this is at odds with people's beliefs and mode of thought."

Michael Cook is editor of MercatorNet where this appeared. Reposted with permission.

Memory of her abortion is "too painful to bear"

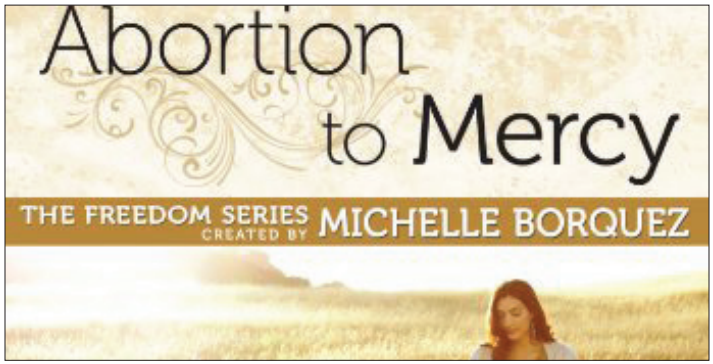
By Sarah Terzo

Michelle Borquez wrote a book about grief after abortion. She says of her own abortion:

> **"There has been nothing in my life quite as painful as the memory of my own abortion. It was too painful to bear. I couldn't even imagine myself having done such a thing. I had buried the memory of it."**

Michelle Borquez, *Abortion to Mercy*, (2013) Kindle edition.

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



Fact-checking the fact-checkers: Trump on late-term abortion

From page 21

This is a purely semantic argument. Of course, Americans do not care what abortionists call the procedure, they care about the violent destruction of innocent human Life. The same can be said of late-term abortion. The killing of preborn babies late in pregnancy does occur, most immediately obvious from the fact that abortion supporters are insisting that keeping these killings legal is "necessary."

President Trump's description of a baby being ripped from the womb moments before birth drew ire from abortion activists, and several of the "fact-check" pieces trotted out doctors to say that this scenario is highly unlikely. In this admission, the pro-abortion pundits reveal something important about late-term abortion: in the event of a life-threatening emergency during the late stages of pregnancy, doctors do not rely on abortion to save the mother's life.

By the late stages of pregnancy, the child is so large that the abortion is a multi-day procedure. A true emergency would require immediate intervention in the form of the premature delivery of a living baby, not the slow and violent destruction of a child followed by the delivery of a dead baby.

Do not be deceived by the extreme anti-Life bias of the mainstream "fact-checkers." President Trump's defense of Life was accurate and necessary. In Texas, the law protects pain-capable preborn babies after 20 weeks' gestation, but there is still much that remains to be done to protect the preborn in our state.

Texas Right to Life's abortion fact sheet shows the truth about abortion in Texas. As the recent debacle over President Trump's Pro-Life remarks shows, we cannot rely on the mainstream media to give accurate information about abortion. The Pro-Life movement must accept the responsibility of staying informed on Life issues.

VICTORY in a major battle for LIFE IN MARYLAND!

In a stunning turn of events on February 23rd, Maryland House Speaker Michael Busch announced withdrawal of his bill, HB 1031, which threatened to enshrine unrestricted abortion on demand in the Maryland state constitution.

This was the most extreme abortion legislation currently under consideration in America today.

Maryland's success in getting the bill pulled was undoubtedly aided by the public furor that developed over the recent outrageous pro-abortion statement of New York Governor Andrew Cuomo and Virginia Governor Ralph Northam.

Maryland Right to Life's staff, chapter leaders, and many hundreds of dedicated volunteers played a significant role in this victory for the unborn.

Laura Bogley Knickman, Maryland Right to Life Director of Legislation

Many thought Maryland was a bellwether state for abortion legislation and expected that Maryland's fall would have given pro-abortion activists in other states new energy to pursue pro-abortion legislation in their state legislatures.

As a result, many thousands of lives, not just in Maryland but in other states as well, were saved by this reprieve.

Delagate Robin Grammer (Baltimore) Laura Bogley Knickman

Delegate April Rose (Carroll County)

Maryland Right to Life (MDRTL) utilized social media, letter writing and call campaigns, grassroots personal lobbying efforts throughout the state to contact key legislators. In addition, MDRTL's new Director of Legislation, Laura Bogley Knickman, utilized innovative lobbying strategies in the General Assembly to optimize the effect of MDRTL's army of pro-life advocates to send a powerful message:

WE WILL RESIST ABORTION ON DEMAND, FOR ANY REASON, THROUGHOUT PREGNANCY.

Maryland Right to Life still faces a threat from Physician-Assisted Suicide legislation which has been aided by the last election which provided some additional PAS support from newly elected legislators in both the House and Senate.

Maryland Right to Life was very pleased to have two freshman legislators introduce significant pro-life bills in this session. Delegate Robin Grammer of Baltimore introduced Pain-Capable Unborn Child Protection Act (HB 975), and Delegate April Rose (Carroll County) introduced an informed consent bill, the Women's Right to Know Act (HB 1075).

Hearings are still scheduled for several pro-life bills including Pain Capable and Women's Right to Know on Friday, March 8th.

New poll finds overwhelming opposition to post-20 week abortions, huge increase in pro-life self-identification

By Dave Andrusko

In the first comprehensive survey since a surge of outrage over Democratic proposals for abortion on demand until birth and after, a Marist Poll released February 25 shows a dramatic and substantive increase in pro-life attitudes and overwhelming opposition to post-20 week abortions. One pro-abortion website pointed to the influence of President Trump's staunchly pro-life State of the Union address as helping to ignite the pro-life upsurge.

"The shift was led by Democrats and those under 45 years old, according to a survey taken Feb.12-17 in the wake of efforts in several states to legalize abortion up until birth," according to a release from the Knights of Columbus which commissioned the poll.

In January, a similar poll found an 18 point advantage among those who identified as pro-choice (55%) compared to those who identified a pro-life (37%). It is now tied at 47% each.

"The recent legal changes to late-term abortion and the debate which followed have not gone unnoticed by the general public," said Barbara Carvalho, director of The Marist Poll. "In just one month, there has been a significant increase in the proportion of Americans who see themselves as pro-life and an equally notable decline in those who describe themselves as pro-choice."

Carvalho added, "Current proposals that promote late-term abortion have reset the landscape and language on abortion in a pronounced – and very measurable – way,"

Carl Anderson, CEO of the Knights of Columbus, observed "Arguments in favor of late-term abortion are simply not convincing the American people. If anything, since these proposals have been unveiled, people are moving noticeably in the pro-life direction. It is now clear that these radical policies are being pursued despite the opposition of the majority of Americans of both parties."

Self-Identification

More than 2/3rds (67%) of Republicans identified as pro-life with Independents almost evenly split–46% pro-life to 48% pro-choice.

The biggest change was among Democrats. A little over 1/3rd (34%) now identify as pro-life. That is a jump of 14 points –from 20% to 34%– in just one month!

According to the poll, among younger Americans, 47% identified as pro-life to 48% pro-choice. In last month's poll, 65% identified as pro-choice.

Limitations on Abortion

The remarks of Va. Gov. Ralph Northam in support of a bill to legalize abortion up to "40 weeks" drew enormous attention. A whopping 71% oppose abortions after 20 weeks, which consists of 66% who say these abortions should be banned except to save the life of the mother, plus another 5% who think abortion should be outlawed completely. "Only 18 percent think abortion should be allowed at any time up until birth," according to the Knights of Columbus.

"Those opposing abortion after 20 weeks, or overall, include: 59 percent of Democrats, 78 percent of independents and 82 percent of Republicans."

The most interesting commentary on the new poll came from the pro-abortion Axios.

Under the sub-headline "Why it matters," Alayna Treene wrote, "Republicans have been on the offensive about this issue since the State of the Union, when Trump seized on the outrage over Virginia Gov. Ralph Northam's abortion comments and the passage of a New York law to promote a congressional ban on late-term abortions."

In November, the Department of Health and Human Services proposed a new rule that would require insurers send customers separate bills for coverage provided for abortion services.

On Friday, the Trump administration issued a new rule barring organizations that provide abortion referrals, like Planned Parenthood, from receiving federal family planning money.

"No uterus, no opinion," the mantra to silence men about abortion

When it is women's genuine well-being at stake and the right to life of all humanity, everyone needs to have an opinion.

By Michael Robinson

Editor's note. This was posted SPUC—the Society for the Protection of Unborn Children.

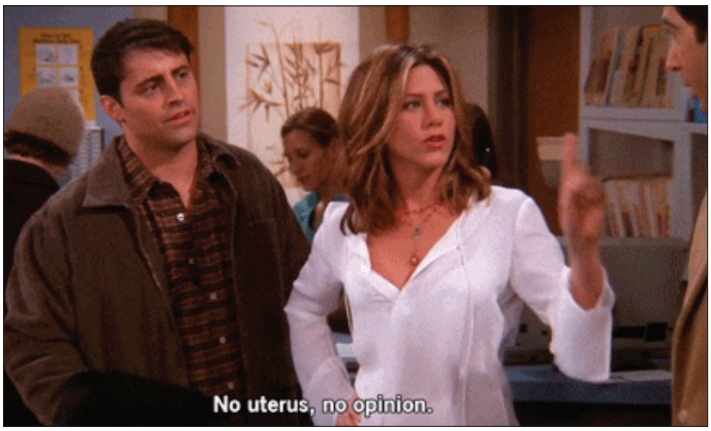
The (in)famous phrase "no uterus, no opinion" is one that men in the pro-life movement hear all too often. It is a mantra that is typically used to try and silence any man who is willing to hold that abortion might be wrong. The abortion movement relies on such sound-bites to avoid genuine thought on the issue and unfortunately many men feel nervous to respond once the "no uterus" card has been played lest they be accused of sexism. However, as I will explain, abortion isn't just a women's issue; it's a human issue and its effects are devastating to men and women.

For a start, every abortion kills an innocent human being. When it comes to any case of injustice, men and women alike are morally obligated to stand united in opposition. Wrong is wrong regardless of sex and to suggest otherwise seems to create its own form of sexism.

Indeed, when an innocent group of human beings is targeted, as it is in abortion, and many millions exterminated, it is an injustice of such proportions that no atrocity in history compares with its scale.

One aspect of "oppression" is denying a group of people their voice. So, when any pro-abortion attempts to deprive men of their right to speak out against abortion, they engage in their own form of sexist oppression. This is significant because pro-abortion feminists are constantly crying out that they are "oppressed by men."

Their assertion is hypocritical, when they see nothing wrong about oppressing those who disagree with them on this issue. This is particularly relevant when we consider the liberal mainstream who preach to us constantly about tolerance and equality.



Rather than keep silent on abortion, I propose four reasons why men have a right and duty to speak out against abortion:

1). Men bear much of the responsibility for a Pro-Abortion Culture

Negligent men/fathers are a huge factor behind the enormous abortion rates, and so shoulder much of the responsibility for abortion. Men play a role in abortion, insofar as they fail to commit to and support the children they have fathered and thus push many women to feel as though abortion is their only option. (Even those men who think they are being supportive by saying "it's your decision" are in fact being unhelpful, as even women who've had abortions say.)

These men should "man up" and take more responsibility for their children and the mothers of their children. It is interesting to note that on the one hand society expects a man to take responsibility for an unwanted pregnancy and give the mother financial help and emotional support – and rightly so. Yet on the other hand, the same man is told that abortion is none of his business. The point women taking the latter line miss is that, ironically, abortion allows and even encourages men to sexually exploit women without the fear of having to take responsibility for any children that are conceived.

2). We Were All Once in the Womb

Men are not simply "male". Their maleness is only one aspect of their identity. Males are also: fathers, sons, brothers, uncles, children, adults, and former foetuses. All men were once in their mother's womb. All males were once potential victims of abortion, and many abortion victims are male. Therefore, every male in society has a duty and right to speak out against abortion.

3). Ending A Life Is a Human Issue

Should only the enslaved have spoken out against slavery? Should only the Jews have spoken out against the Holocaust? Of course not! That which is unjust is wrong regardless of who you are or what your circumstances may be. History is filled with examples of individuals who spoke out against oppression on behalf of others not deemed worthy of equality before the law. We should continue to do so today — and every day — until abortion and all other oppressive practice is eradicated

4). Abortion Affects Men

Slightly over half of all pregnancies involve boys in the womb, and abortions are often committed without knowledge or regard to the gender of the child. Thus, abortion affects not only the female population but the male population also. Not only does abortion affect the unborn baby boy, but also the countless fathers and male relatives of abortion victims.

Their stories are rarely told; their hurt typically remains unrecognized by the public.

See "No Uterus," page 39

Woman completely changes her mind after video shows the horrors of abortion

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

When I began studying television news reporting and production in college, I learned the incredible power of video to tell a story. No matter how strong the words I had written might be, my script would always be overshadowed by the visuals. If the visuals were compelling, the piece would be absolutely riveting. If not, the TV news story basically fell apart.

I was reminded of this phenomenon recently when we chose to lead off our *Pennsylvania Pro-Life Online News* email newsletter with a video posted by the pro-life group Live Action. We headlined the story, "Amazing Video—Woman Changes Mind About Abortion."

Of all the stories we have ever run in the Online News, the video was by far the most popular, stunning us with its "click rate" (in other words, the number of people who clicked on the video in order to view it).

But it was more than just curiosity that made the video a crowd-pleaser. It was also the subject of the video itself—an articulate young woman being questioned about her views on abortion.

At the beginning of the video, she admitted that she didn't really like abortion. But she claimed there are times when an individual "needs" abortion. She went on to suggest that abortion was a matter of "rights" and what a pregnant woman might want to do.

Then, the woman viewed a video explaining a second trimester dismemberment abortion—an abortion in which a baby is torn limb by limb from the mother's womb. The woman begins to cry, and you can see a wave of pain flooding her features.

Her mind has been enlightened, her heart has been broken, and her position on abortion has been changed.

She discusses the fact that she had not realized, prior to viewing the video, that the unborn baby would be "detached" and "crushed." She points out what she has now learned about the risks of abortion to women. She then discusses the fact that there are "so many options" and that there is "always another option" besides abortion. "It is a life," she explains.

The video experiment shows how eyes can be opened to the horrors of abortion, once individuals are educated about the process. It also proves a point that I have often made—that people support the tragic U.S. Supreme Court ruling *Roe v. Wade*, the decision which legalized abortion, because they do not realize what *Roe* actually did.

News stories fail to define the word "abortion," so people are left in an information vacuum. The pro-abortion side benefits from the veil surrounding abortion.

But once people see the brutality of abortion—the fact that babies are torn apart and mothers have their hearts ripped open—they oppose it. In the time it takes to play a short video, a mind can be forever changed.

This fact should compel us to share ultrasounds and other educational videos on Facebook, Twitter, and Instagram. Because in those videos lies an awesome, life-giving power which can save babies from otherwise certain death.

Federal Congressional update: Threats to free speech and upcoming House Action on the Born-Alive Abortion Survivors Act

From page 1

the amount of private speech regarding the actions of the lawmakers themselves.

National Right to Life expressed its strong opposition to the bill in a March 6th letter sent to members of the House of Representatives. NRLC fairly characterized H.R. 1 as "pernicious, unprincipled, and constitutionally defective legislation."

National Right to Life noted:

> **The bill would codify a vague and expansive definition of "the functional equivalent of express advocacy," that applies to communications that "when taken as a whole, it can be interpreted by a reasonable person only as advocating the election or defeat of a candidate for election for Federal office." There is little that an organization could say by way of commentary on the votes or positions taken by an incumbent member of Congress that would not fall within this expansive definition, in the eyes of some "reasonable person" – most often, an annoyed incumbent lawmaker or his operatives**.

In short, this would significantly curb the ability of our organization to let our supporters know when prolife votes occurred or where an elected official stands on abortion.

In addition, the bill would require expansive disclosure of donors by organizations like National Right to Life, our affiliates, and chapters thereby infringing on the rights of those donors in their exercise of free association.

National Right to Life was not alone in its criticism.

As the American Civil Liberties Union (ACLU) argued in their March 1, 2019 letter to House Rules Committee Chairman Jim McGovern (D-Mass.) and Ranking Member Tom Cole (R-Okla.):

> **The Constitution requires a healthy respect for associational privacy. In *NAACP v. Alabama*, the Supreme Court recognized that "[i]nviolability of privacy in group association may in many circumstances be indispensable to preservation of freedom of association, particularly where a group espouses dissident beliefs." For that reason alone, we should be very cautious when contemplating invasions of that privacy. Because the [bill] would expose the private associations of an overbroad number of donors, it fails to respect this first constitutional principle.**

Despite the backlash from advocacy groups from all across the political spectrum, H.R. 1 passed on a party-line vote with 234 Democrats voting for the bill and 190 Republicans opposing it. The bill then went to the U.S. Senate, which according to statements of Senate Majority Leader Mitch McConnell (R-Ky.), is not expected to take up the legislation.

Upcoming House Action on the Born-Alive Abortion Survivors Act

Amidst the public outcry stemming from the extreme abortion agenda being promoted in several states, pro-life Members of Congress are urgently renewing their effort to end abortions late in pregnancy and are calling to increase protections for babies who survive abortions.

The widely-criticized "Reproductive Health Act" was signed into law on January 22 by New York Gov. Andrew Cuomo (D). Among other provisions, the law repealed protections for infants born alive during an attempted abortion. Previously, New York law stipulated that a second physician be present to care for a child 20 weeks or older born alive during an abortion.

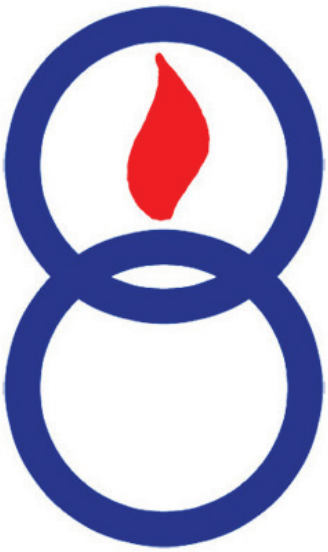
Adding to the mix was embroiled Virginia Gov. Ralph Northam (D). Speaking about a now-stalled measure in the Virginia legislature, Northam indicated during a radio interview that, in his view, an infant born alive during an attempted abortion wouldn't necessarily be entitled to immediate treatment. This is tantamount to infanticide.

With several very similar extremist measures pushing through New Mexico, Rhode Island, Vermont, and Maryland, the response from Congress has been decisive.

While the House remains under pro-abortion Democrat control, Minority Whip Steve Scalise (R-LA) announced that he will file a discharge petition to consider H.R.962, the Born-Alive Abortion Survivors Protection Act. A discharge petition is a tool that the minority can use to force a vote in the House of Representatives if it is signed by a majority of members in the House (218). The legislation is sponsored by Rep. Ann Wagner (R-MO).

Until the discharge petition becomes available (likely in early April) pro-life Republican leaders have gone to the floor of the House on each legislative day since Wednesday February 6th to ask for unanimous consent to consider H.R. 962. So far, 16 House members have sought these requests and Democrats have objected each time. These requests are expected to continue every legislative day for the foreseeable future.

In early April, members of Congress will be able to begin signing the petition to circumvent Speaker Nancy Pelosi (D-Ca.) and bring this bill for a vote.



Netflix' "Reversing Roe": The Crockumentary of the Century

By Ryan Scott Bomberger

What you do when you don't like a factual version of history? You come up with a fake feminist herstory. That's exactly what Netflix created when it produced REVERSING ROE.

It's the crockumentary of the century.

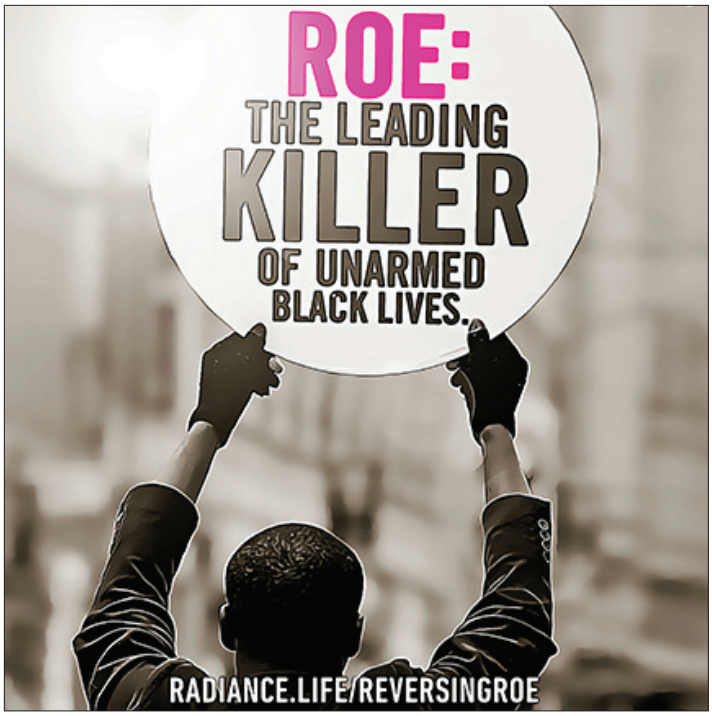
"The film offers candid and riveting interviews with key figures from both sides of the divide," claims Netflix' laughable synopsis. A key figure would be Jane Roe herself—the late Norma McCorvey. She's nonexistent in a movie that tragically bears her name. Norma never aborted her child but made a loving plan of adoption instead. She became pro-life and devoted the rest of her years to aborting the Roe decision. So, naturally, she was aborted from the film.

In one of the film's massive omissions on the history of abortion in America, the Catholic Church is completely missing. There would be no prolife movement without Catholics, and their fight began long before Roe. It's why eugenicist/socialist Margaret Sanger repeatedly vilified Catholics, as evidenced in her alarmingly anti-human 1922 book, The Pivot of Civilization.

REVERSING ROE invokes fear about the back alley, but never mentions legal abortion's most infamous back-alley abortionist—convicted murderer Kermit Gosnell.

The crockumentary shows how the historically-challenged will rely on any lie to promote their brand of fake feminism. It's a world where, magically, thousands of (mostly women-run) pregnancy help centers don't even exist. Poof! Gone.

Millions of women actually oppose abortion. According to the latest Gallup survey, 47% identify as prolife, 48% identify as "pro-choice" and 4% (interestingly) have no opinion. REVERSING ROE claims to be "intense and unflinching in telling the whole story".



Yet it proceeds to tell a partial and intensely distorted story where only middle-aged white males, apparently, are anti-abortion; over 20 are featured. That's strange since most national pro-life organizations are headed by women: March for Life (Jeannie Mancini), CURE (Star Parker), Live Action (Lila Rose), Students for Life (Kristan Hawkins), Americans United for Life (Catherine Glenn Foster), SBA List (Marjorie Dannenfelser), National Right to Life Committee (Carol Tobias), And Then There Were None (Abby Johnson), American Life League (Judie Brown) and the American Association of Prolife Obstetricians and Gynecologists or AAPLOG (Dr. Donna Harrison). Of these amazing prolife women, the film only shows NRLC's Carol Tobias. The late Phyllis Schlafly, founder of the Eagle Forum, is briefly featured, too.

REVERSING ROE doesn't highlight the late Dr. Mildred Jefferson who was the first black woman to graduate from Harvard Medical School, prominent prolife physician and factivist, and an early president of the NRLC. Dr. Alveda King, a leading figure in the pro-life movement, told me that she was never interviewed either. She doesn't fit the liberally colorized narrative where only white people fight the violence of abortion. The Netflix crockumentary, however, show all kinds of diversity on the pro-abortion side while it conveniently ignores the "patriarchal" fact that seven white men in black SCOTUS [Supreme Court of the United States] robes gave us the violence of Roe in the first place.

Netflix offers free "educational screenings" in classrooms for their propaganda, calling the completely imbalanced REVERSING ROE "essential viewing…regardless of where you stand on the issue." The University of Notre Dame took them up on this and held an event, recently, accusing the prolife movement of—get this—white supremacy.

This would be laughable if it weren't about the slaughter of over 62 million human lives since Roe, nearly one million a year. Today, those aborted lives are disproportionately black. Rabidly pro-abortion Notre Dame professors calling pro-lifers 'racists' for tireless efforts to protect mothers and their unborn children, regardless of race or ethnicity, is truly a Jussie Smollett moment. Just. Fake. News. It's a bizarre form of projection as they defend a violent institution actually birthed in eugenic racism and elitism.

Ironically, America's first black (biracial) President, Democrat Barack Obama, utters a statement in the film defending the violent inequality of abortion that sounds eerily

See "Netflix," page ??

Title X Regulations to Separate Family Planning from Abortion

By Dave Andrusko

Last month, National Right to Life congratulated the Trump Administration for issuing a final HHS rule to restore–emphasis on restore–Title X family planning regulations to prohibit grantees from co-locating with abortion clinics, or from referring clients for abortion.

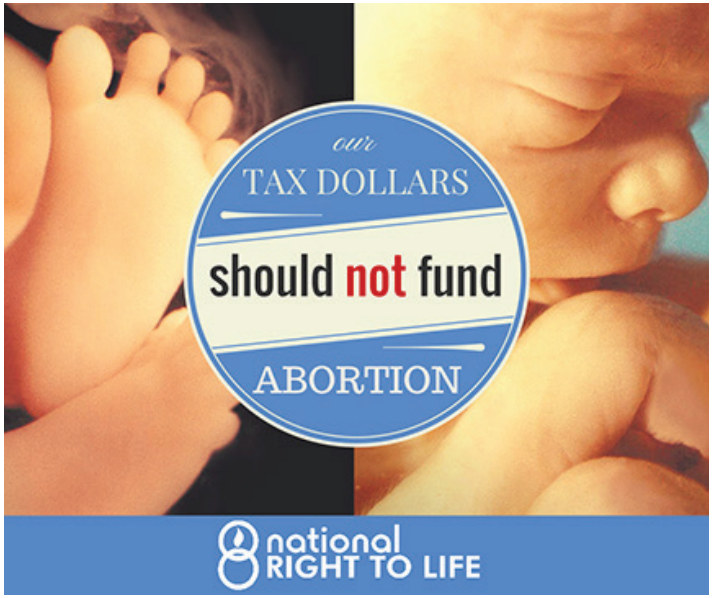
Nothing to do with cutting family planning money—none was cut—but everything to do with ensuring that health facilities receiving Title X funds do not perform or promote abortion as a method of family planning.

So, it was only a matter of time before a coalition of 21 states—California filing a separate lawsuit from the other 20 states—would take the new rule to court.

On March 4 California Attorney General Xavier Becerra held a press conference along with (guess who?) Planned Parenthood. "The Trump-Pence administration has doubled down on its attacks on women's health," Becerra said in typical pro-abortion understatement.

"Oregon Attorney General Ellen Rosenblum (D) separately announced Monday that she would lead 20 states and the District of Columbia in filing a national lawsuit against the rule on Tuesday," The Hill newspaper reported.

The basic criticism—beyond the pro-forma criticism of the Trump Administration—was that it would be cumbersome and expensive not to co-house abortion and family planning facilities.



What is absolutely fascinating, of course, is that the U.S. Supreme Court found similar regulations permissible 28 years ago in its 1991 *Rust v. Sullivan* decision. There were clear reasons why the High Court upheld the regulations.

When Congress created Title X in 1970, it was to be a preventative family planning program. Congress wrote language into the statute to ensure the program did not directly–or indirectly–promote abortion.

Then came *Roe v. Wade* and pro-abortion administrations. At first Title X grantees were permitted, then required, to routinely refer all pregnant women regarding abortion as a "pregnancy management option." For all practical purposes, some Title X grantees treated abortion as "a method of family planning," despite the statutory prohibition. In a word the original language had become a dead letter.

Then came the Reagan Administration. With National Right to Life's strong support, regulations were issued to restore the original character of Title X. Abortion referrals were prohibited except in life endangering circumstances. Additionally, abortion facilities could not generally share the same location with a Title X site.

The new directive that is being challenged is scheduled to take effect in 60 days. Organizations receiving Title X funding, which include, including the biggest one, Planned Parenthood, have 120 days to financially separate their family planning and abortion operations. They have one year to physically separate their family planning and abortion operations.

Hold Democrats accountable for supporting abortion without limits until birth and beyond

From page 1

This year House Democrats have erected a procedural hurtle which prevents the bill from being heard.

But what about the states?

In January, the New York legislature passed, and Gov. Andrew Cuomo (D) signed—on January 22, no less— the so-called "Reproductive Health Act." Among other provisions, the law repealed protections for infants born alive during a "failed" abortion.

Soon after, Virginia's Gov. Ralph Northam (D) explained in a radio interview program that an infant born alive during an abortion wouldn't necessarily be entitled to immediate treatment other than being made "comfortable." That would be up the mother and the abortionist!

What would the federal Born-Alive Abortion Survivors Protection Act require? Only that abortionists provide the same level of care to a baby who survives an abortion attempt as they would to any other baby at the same gestational age.

How does caring for born-alive babies affect "medical care" for their mothers? Living babies, who are no longer in the womb?

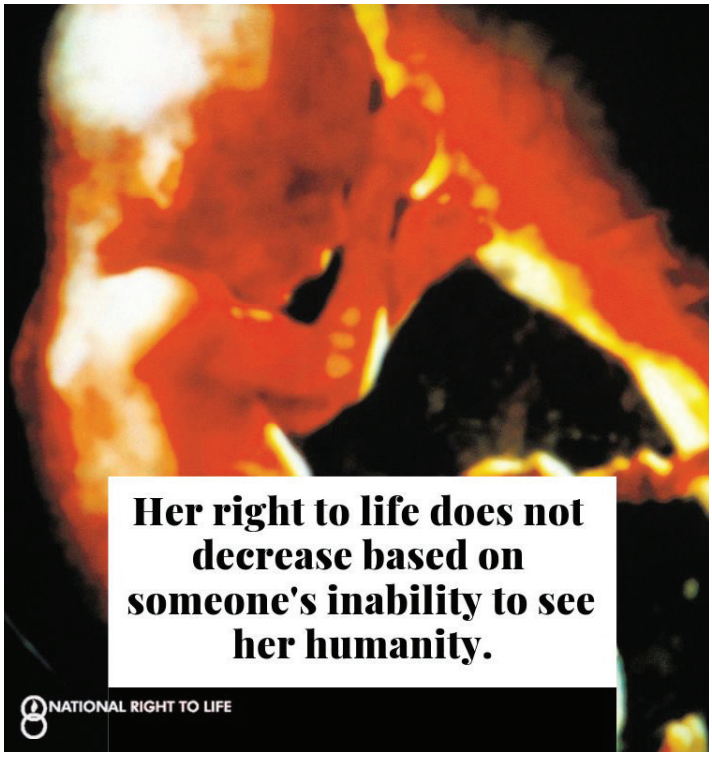
Jennifer Popik, J.D., director of federal legislation for National Right to Life, is urging House members to sign onto a "discharge petition" to force the protective, lifesaving Born-Alive legislation to a vote on the floor of the House.

The discharge petition allows a majority of the House (218 lawmakers) to force a floor vote on a bill, even if pro-abortion leaders oppose the measure.

Popik explained to reporters why the Born-Alive Abortion Survivors Protection Act is absolutely essential:

…Can we really trust the abortionist, who seconds earlier, was attempting to end this life of this baby, to now provide treatment? We need clear standards of medical care for babies born alive. That is why we need this enhanced version of the Born-Alive legislation.

We are appalled that pro-abortion Democratic senators would filibuster the Born-Alive Abortion Survivors Protection Act. They need to explain to their constituents why their allegiance to the abortion industry agenda should allow a practice that is tantamount to infanticide.



She added,

We call on all members of the House to sign the discharge petition and bring this bill to the floor for a vote. Let the American public see how much they truly care for the most vulnerable among us.

Have your state legislators voted for abortion on demand? Was your U.S. Senator one of the 44 who voted against protecting babies who are born alive? Was your Representative one of the 183 who voted against the Born-Alive bill last year in the House?

Encourage your Congressman or Congresswoman to sign the discharge petition for H.R. 4712, the Born-Alive Abortion Survivors Protection Act. Pay attention **now** to their actions, and pledge to hold them accountable in their next election.

Find their voting records at the Legislative Action Center at www.nrlc.org. And contact your National Right to Life state affiliate to find out how your state legislators vote.

If they vote against protecting the babies, you need to vote against them in their next election. It's as simple as that.

Documentation on the history of the Born-Alive Infants Protection Act of 2002 (1 U.S.C. §8) is available on the NRLC website at: www.nrlc.org/federal/bornaliveinfants

Az. House Judiciary Committee rejects bill to authorize infanticide

Sponsor says her "intent" was misunderstood

By Dave Andrusko

The anti-life lobby does it level best (in a manner of speaking) to hide its insatiable appetite for death. For example, how could anyone think the governor of Virginia or members of the Arizona House of Representatives would really and truly want abortion survivors not to be treated, aka, infanticide?

Easy. Just listen to them.

On February 21 the Arizona House Committee on Judiciary unanimously turned back Rep. Raquel Terán's House Bill 2696 to authorize infanticide. The vote was 8-0, although two Democrats took the coward's way out by voting "present."

Rep. Terán screamed "foul." HB 2697 explicitly repealed the 1975 law that required abortionists doctors to use all "available means and medical skills" to save the baby who survives an abortion but it also would repeal the 2017 law which put teeth in the 1975 requirements.

But that was merely a "drafting error," for which Terán told the committee chair she took full responsibility. All she really wanted to do, according to the pro-abortion and very sympathetic *Arizona Republic* was to "repeal Arizona's controversial 2017 fetal resuscitation law."

Rep. John Allen, R-Scottsdale, turned down Terán's request to withdraw the measure. He noted that numerous Democrats sponsored HB 2697.

Arizona State Rep. Raquel Terán

"This is a core value of a lot of members on the other side of the aisle who signed onto this bill," Chairman Allen said when Terán repeated her request to hold the bill. "It's a discussion worth having."

So what is this "controversial" 2017 fetal resuscitation law?

"The bill would require hospitals and clinics providing abortions at 20 weeks or beyond to have medical equipment on site to care for a fetus delivered alive," the *Arizona Republic* reported at the time. "At least three Arizona clinics offer terminations at and beyond 20 weeks gestation," the pro-abortion rewire.news chimed in.

The inadequacies in the 1975 law remedied by the 2017 law is exactly why pro-abortionist hate it so. The 1975 law didn't specify what "delivered alive" meant or specify what is required of the abortionist when a baby survived an abortion. That way abortionists could pick and choose which babies (if any) they would try to save, and to what extent.

As the *Arizona Republic* wrote in 2017

> **SB 1367 defines "delivered alive" as showing one or more of these signs of life: breathing, a heartbeat, umbilical cord pulsation or definite movement of voluntary muscles.**
>
> **It requires the Arizona Department of Health Services to set policies that clinics, hospitals and physicians must follow to care for a baby delivered alive, including having neonatal emergency equipment and trained staff in the room for all abortions performed at or after 20 weeks of pregnancy.**

Proponents of HB 2697 invoked babies born with a "fatal fetal condition." In fact the 2017 law addresses babies who are not expected to live longer than three months. Even so the doctor/abortionist must confirm the fatal condition after the baby is born and "must confirm that additional treatment will only prolong the act of dying," according to reporters Alia Beard Rau and Mary Jo Pitzl.

As an illustration of how the *Arizona Republic* mischaracterized the story, a caption described HB2697 as an "anti-abortion bill."

That's wrong on two scores. Pro-lifers opposed HB2697 and as the hundreds of people who came to the capitol were quick to point out, this is not about abortion but about what we owe babies who are born alive following an abortion.

Born with only 2% of his brain, Noah Wall confounds doctors as his brain continues to grow to near normal capacity

By Dave Andrusko

Way back in October of 2016, we wrote about how the British Department of Health had just announced it had approved what it euphemistically called "Non-Invasive Pre-Natal Testing" for use by the National Health Service. It is a far more accurate prenatal test which can be given earlier in pregnancy and is absolutely guaranteed to increase the number of eugenic abortions. It has since been rolled out and the number of babies aborted because of genetic anomaly has multiplied.

In that same post we wrote about how the day before the October 30 announcement, the Gospel Herald had published a heartwarming story by Suzette Gutierrez-Cachila about 4-year-old Noah Wall, who, "against all odds," has "grown to be a lively boy and is living proof that abortion does not have to be the answer" when parents are given a dreadful prenatal diagnosis.

The doctors grimly told Rob and Shelly Wall that Noah was missing a quarter of his brain. But after he was born in 2012, brain scans showed Noah's condition was far worse than previously expected. There was only 2% present in a thin layer at the front of his head.

Although they had been offered the "option" of "terminating" five separate times, Rob Wall said "It was never an option for us. To me, we wanted to give Noah that chance of life." By 2016 Noah was already making enormous progress.

Flash forward to February 20. *The Daily Mail* has just updated Noah's story with additional details about how his parents had been offered the abortion "option" and how Noah's brain had literally grown back.

When Noah was born, needless to say, his chances of survival appeared slim. But as Lara Keay wrote yesterday, following Noah's and Rob's and Shelly's appearance on "Good Morning Britain,"

Miraculously he kept on growing, and so did his brain, which by the age of three, scans showed had grown to 80 per cent capacity.

Now at the age of six he has learned to talk and is hoping to be able to walk, surf and ski with the help of a pioneering clinic in Australia.

The host of *Good Morning Britain* asked the Walls asked why in light of all the complications they were told their son would suffer, they didn't abort.

Mr. Wall told Richard Madeley, 'We were older parents, if younger people were offered that choice they may have felt pressured to go through with it, but we know our own minds and we are positive people."

And there was enormous pressure to abort ("terminate"). Shelly Wall gave an example of how "'We got taken into a room and they drew a circle saying, 'this brain will only be half a brain'."

And that was only part of Noah's "catalogue of health problems," as Keay termed it, that Mrs. Wall discovered only three months into her pregnancy. "These included spina bifida – a condition which prevents the spine from developing properly – rare chromosome abnormalities and hydrocephalus."

Noah's birth was a medical miracle of its own, according to Keay's fine story. In what MUST be the understatement of the year, Mrs. Wall told the *Daily Mail*, "The day he was born was amazing. We waited with baited breath."

Because the pressure on her unborn baby's brain was becoming dangerously high, Mrs. Wall was admitted a week before her due date. Keay explains

There were 12 doctors in the operating theatre as experts performed a C-section, but as he came into the world, they were given a sign.

Mr. Wall said: 'He let out this amazing scream. We knew there was power there.'

Noah is "extraordinary," Mrs. Wall said: Referring to the doctors, "We send them emails and pictures and we take them presents at Christmas time."

Noah faces a lifetime of operations, Keay concluded, but "he and his parents remain determined to fulfill his dreams and seeing him walk is their ultimate goal."

Here's exactly how Minnesota Senator Tina Smith justified her vote for infanticide

By Paul Stark

On Feb. 25, Minnesota's two U.S. senators, Amy Klobuchar and Tina Smith, joined 42 other senators to successfully block legislation to protect newborn babies who survive abortion.

The legislation in question, the Born-Alive Abortion Survivors Protection Act (S. 311), requires that babies born alive in the context of abortion be treated with "the same degree" of care that would be given "to any other child born alive at the same gestational age." The bill only concerns the treatment of these already-born, living human infants. It doesn't affect abortion in any way. Nor does it affect a woman's pregnancy or her health care in any way.

Before casting her vote against advancing this measure, Tina Smith spoke on the U.S. Senate floor to express her opposition. We reproduce the full transcript of her remarks (taken from the congressional record) below. We do this because the remarks are flagrantly dishonest and call for correction.

Smith's remarks on the Senate floor

Here's what Smith said:

> **Madam President, I rise to join Senator Murray and my colleagues in standing up for doctors and patients in my home State of Minnesota and across the country.**
>
> **S. 311 puts Congress in the middle of the important medical decisions that patients and doctors should make together without having political interference. It would compel physicians to provide unnecessary medical care. It would override physicians' professional judgments about what is best for their patients, and it would put physicians in the position of facing criminal penalties if their judgments about what is best for their patients are contrary to what is described in this bill.**
>
> **Colleagues, let me be clear. For women, this is a healthcare issue, not a political issue, and this bill, I fear, interferes with the doctor-patient relationship, which should worry us all. We can all agree that people deserve the best medical care based on their individual needs and their doctors' best medical advice. This is how our medical system is supposed to work—physicians and patients making decisions together that are based on patients' individual needs.**
>
> **Everybody is different. For example, any oncologist will tell you that each cancer patient's treatment is different. Treatment plans depend on the type of cancer and how advanced the cancer is. Decisions about cancer treatments also depend on each person's age and lifestyle and individual circumstances. The same is true when it comes to pregnancy. Any obstetrician will tell you that every pregnancy is different and that when complications arise, they can completely change the course of treatment. In that moment, women and their families and their doctors are the only ones who are able to make decisions about what is best for a woman and her pregnancy.**
>
> **Think about what this means in real life. In August of 2016, Tippy, who is from Minnesota and has agreed for me to share her story, was pregnant and, with her husband, went to their 20-week ultrasound appointment. They were excited because they thought they were about to find out the gender of their new baby, and they had already bought decorations for the gender reveal party. Instead, Tippy and her husband got devastating news from that ultrasound. Their baby, a boy, had stopped developing properly and would not survive. They would never get to meet him and never get to hold him. The ultrasound revealed not only the tragic news about this much wanted child but also showed a dangerous condition that threatened Tippy's own health. Tippy's placenta was enlarged, and to continue her pregnancy would risk the health of her reproductive system**

Pro-abortion Sen. Tina Smith
Photo: Lorie Shaull

See "Smith," page 44

Nurse recalls baby born alive after abortion: 'He was small but perfect'

By Sarah Terzo

On February 25, 2019, Planned Parenthood president Leana Wen claimed that babies are never born alive after abortions and left to die. Commenting on a bill that would have protected infants born alive after abortions, she tweeted, "Today, the Senate will vote on a bill that criminalizes doctors for a practice that doesn't exist in medicine or reality."

Yet there have been multiple accounts from abortion workers about babies born alive after abortions who were then refused medical care.

A nurse who once worked in a hospital in Sydney, Australia, came forward to tell her own story in a video released by the Save the 8th Campaign in Ireland. The nurse, Caren Ní hAllacháin, spoke about an event she witnessed in the early 1990s. A woman was having an abortion at 22 weeks after an amniocentesis showed that the baby had a "chromosomal abnormality," possibly Down syndrome. Caren said:

> **I wasn't looking after [the woman having the abortion] directly, but I was on the ward. The other nurse had gone for a break, but I went into the sluice room [where medical waste was taken]. And the baby was in a kidney dish, in the sink where all the clinical waste was. The baby was born alive, and the baby was then taken from the mother – the mother never saw the baby. The baby was put into a kidney dish and brought away from the room, and to the sluice room, and left there just to die.**

She described the child:

> **The baby was the full size of the kidney dish, so the baby was probably a little bit more than the length of my hands. He was small but he was perfect. He had – you could see his toes, his hands, it seemed like he had blonde hair. His eyes were closed. His mouth was open slightly. At first when I saw him, I thought he was actually dead, but I could see the rise and fall of his chest once I looked, because through the shock – he was breathing. And he wasn't really moving. He had been there at least an hour and a half if not two hours.**

Because it was an abortion, Caren was not allowed to intervene. She recalls the sense of helplessness she felt while watching the baby struggle for life:

> **I just did not know what to do. But there was nobody treating that baby. That baby was breathing and yet I couldn't go and ring for the emergency team to come. I couldn't get oxygen for the baby. I couldn't put a blanket around the baby. I couldn't pick the baby up…. the baby was still breathing. I couldn't treat that baby as any other baby in any other part of that hospital, where you have babies the same age being treated in incubators and being ventilated and being given every assistance to live.**
>
> **And yet this baby was left… in a kidney dish, which is [a] cold stainless steel metal dish, and just left to die. I had to leave the sluice room. I had to leave the baby there. That part is the hardest part of all because I felt I had abandoned the baby. When I went back the baby had died. The baby wasn't breathing anymore. So the baby was still in the kidney dish. It was when the other nurse came back that she disposed of the baby's body.**

The emotional trauma and helplessness Caren felt has stayed with her:

> **To see that baby trying to breathe – to see the dignity of him in the kidney dish trying to breathe, and nobody, just nobody there. He is a human being and a person. You can't deny it. You can't deny that that child was a son. It is something that will stay with me for the rest of my life. I think the worst part of that is the fact that I wasn't allowed to do anything. The baby was small, but it was perfect. [He] was perfect. The baby had a cleft lip – that was it.**

This is just one example of a baby forced to die alone and cold in a room full of medical waste. The child experienced no love or compassion in his short life and was abandoned to die.

Incidents like this one have taken place in the United States and abroad.

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

The Least of These

By Wesley J. Smith

There has been much righteous criticism of the forty-four Democratic senators who thwarted a bill that would have protected babies who survive abortion from death-by-neglect and infanticide.

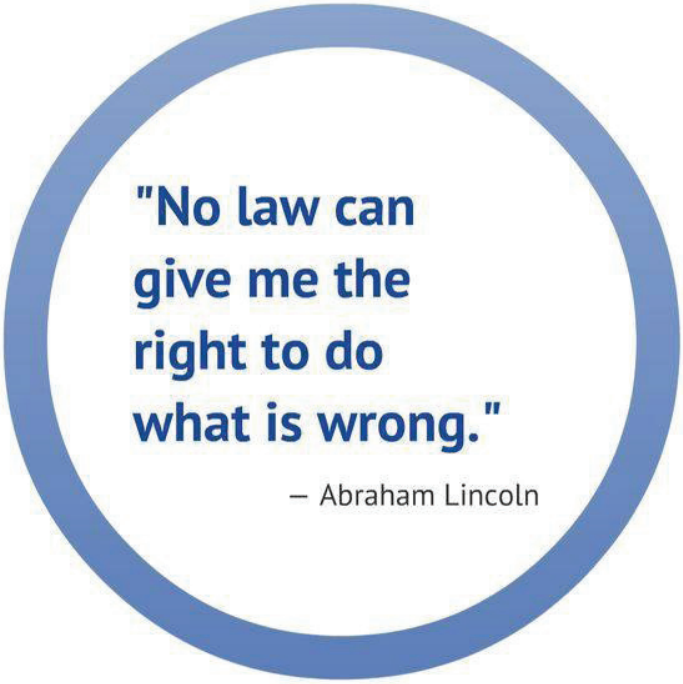
In a nutshell, the Born-Alive Abortion Survivors Protection Act would have required simply that all born babies—whether wanted or not—be treated equally, by requiring any healthcare practitioners present when a baby survives abortion to "exercise the same degree of professional skill, care, and diligence to preserve the life and health of the child" as they would "render to any other child born alive at the same gestational age."

It would also have required abortionists to ensure that surviving babies be transported immediately to a hospital for care, and would have outlawed "an overt act" meant to kill "a child born alive," i.e., infanticide.

That most senate Democrats—including six presidential candidates—thwarted the bill's passage moves abortion advocacy beyond "choice" to establishing a concomitant right to a dead fetus or baby (as the case might be). The bill's defeat also reflects a growing bigotry against the moral value of babies with disabilities, a stunning repudiation of the sanctity/equality of human life ethic.

The senate bill's defeat coincided with the enactment of a New York law that allows post-viability abortion, and which also repealed a statute that required proper medical care for babies who survive abortion. Vermont is very close to enacting the most extreme abortion license in the world, creating a "fundamental right to an abortion," without any limitations as to viability, time of gestation, method of termination, or reason—no "health of the mother" pretense in the Green Mountain State!

The excuses given by pro-abortion/infanticide advocates for refusing to pass the federal law—and justifying passage of the new late-term abortion licenses—generally reflect profound biases against babies with disabilities. Thus, Virginia Governor Ralph Northam—a pediatric neurologist—infamously endorsed a (failed) late-term abortion legalization bill on the (false) claim that such terminations only involve babies with serious health difficulties and disabilities, in his words, "cases where there may be severe deformities" or when "there may be a fetus that's non-viable."



How is Northam's death-by-neglect prescription any different morally than the old Roman practice of exposing disabled babies to the elements? The only difference I can see is that Northam would keep doomed babies "comfortable" in bassinettes. The ultimate outcome would be the same.

Killing disabled babies is not just an ancient practice. During World War II, German doctors committed infanticide, which was considered a "healing treatment" that prevented suffering. "Baby Knauer"—the first disabled baby to be killed under color of law in Germany—was born with serious disabilities, including blindness.

His parents wrote Hitler a letter asking that doctors be permitted to put their child "to sleep." Hitler sent his personal physician, Karl Rudolph Brandt, to verify the facts and assure the infant's doctors that they could kill the child without legal consequence, which they did. In 1973, Baby Knauer's father was quoted by Robert Jay Lifton in The Nazi Doctors, as recalling appreciatively that "the Führer had granted us the mercy killing of our son. Later, we could have other children, handsome and healthy, of whom the Reich could be proud."

Hitler's infanticide policy was kept a secret from the German people, and unlike Baby Knauer, most infanticides took place without parental consent. After the end of the war, infanticide of disabled babies was universally condemned a crime against humanity. Some German doctors who participated in the pogrom were hanged.

That moral opprobrium is dissipating. Disabled babies are again being killed by doctors—this time in the Netherlands. Only rather than occurring furtively in the shadows, baby killing is practiced openly under a bureaucratic infanticide guideline known as the Groningen Protocol (after the Groningen University Medical Center).

The Protocol establishes three categories of killable babies:

- The baby has no chance of survival.
- The baby "may survive after a period of intensive treatment but the expectations for the future are very grim."
- The baby does "not depend on technology for physiological stability" but has "suffering [that] is severe, sustained, and cannot be alleviated."

In other words, Dutch doctors lethally inject babies with serious disabilities who

See "Least," page ??

Thanks to adult stem cells, man free of the AIDS virus

By Dave Andrusko

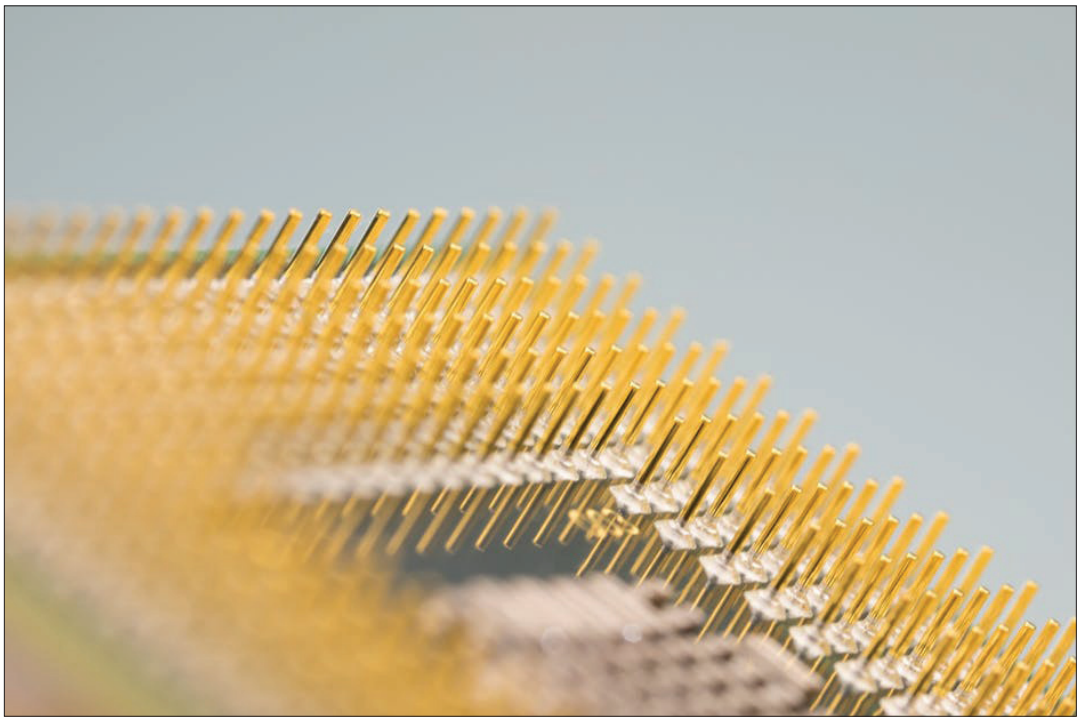
Understandably, all the attention in response to an article posted March 4 in the journal "Nature" was captured in the headline in many ensuing stories: "Second HIV patient is in long-term remission, a decade after the first."

The patient, "whose identity hasn't been disclosed, was able to stop taking antiretroviral drugs, with no sign of the virus returning 18 months later," reported Matthew Warren.

What was completely ignored is the source of the stem cells that were responsible for this long-term remission from HIV infection—they were adult stem cells. As we have written many multiples of times, adult stem cells carry none of the ethical baggage associated with using stem cells from aborted human embryos and are not only effective, but have been in wide use for years. In fact, adult stem cells are the only successful stem cell in clinical practice, now treating more than 70,000 patients a year.

Whenever the topic of stem cells comes up, I turn to Dr. David Prentice. Dr. Prentice explained how

> **This provides another example of the utility of adult stem cell transplants to help heal, in this case from HIV/AIDS as well as cancer. It's really just a standard adult stem cell transplant, starting with donor bone marrow adult stem cells, to treat a type of blood cancer.**
>
> **BUT because the doctors know that the patient also has HIV/AIDS, the donor is very carefully chosen not only for a tissue transplant match but also because the donor cells lack the protein "flag" (called CCR5) on the cell surface to which the HIV virus attaches. After ridding the body of the cancerous cells, the result is that not only are the blood-forming stem cells replaced, but the new blood cells produced by the transplanted stem cells can no longer be infected with HIV, ending the virus' deadly reign in the patient's body.**



The unidentified man contracted HIV in 2003 and developed Hodgkin lymphoma in 2012 and that year "agreed to a stem cell transplant to treat the cancer in 2016," according to Carla K. Johnson of the *Associated Press*.

"With the right kind of donor, his doctors figured, the London patient might get a bonus beyond treating his cancer: a possible HIV cure," Johnson writes.

"The patient received the stem cell transplant from a donor with a rare CCR5 mutation that allows HIV resistance. About 1 percent of people descended from northern Europeans have inherited the mutation from both parents and are immune to most HIV. The donor had this double copy of the mutation," she explained. "The transplant changed the London patient's immune system, giving him the donor's mutation and HIV resistance."

To be clear, while a major development, this is not generally applicable to every AIDS patient. As Johnson explained in her story, "Donors must be a genetic match to recipients, and there are very few people who also naturally carry two copies of the disabled CCR5 gene, which limits the number of potential transplants."

Dr. Prentice agreed, but added this critical reminder: "These latest results validate the idea of using adult stem cells as a clinical intervention for HIV infection."

Why Democrats find it impossible to oppose infanticide

From page 2

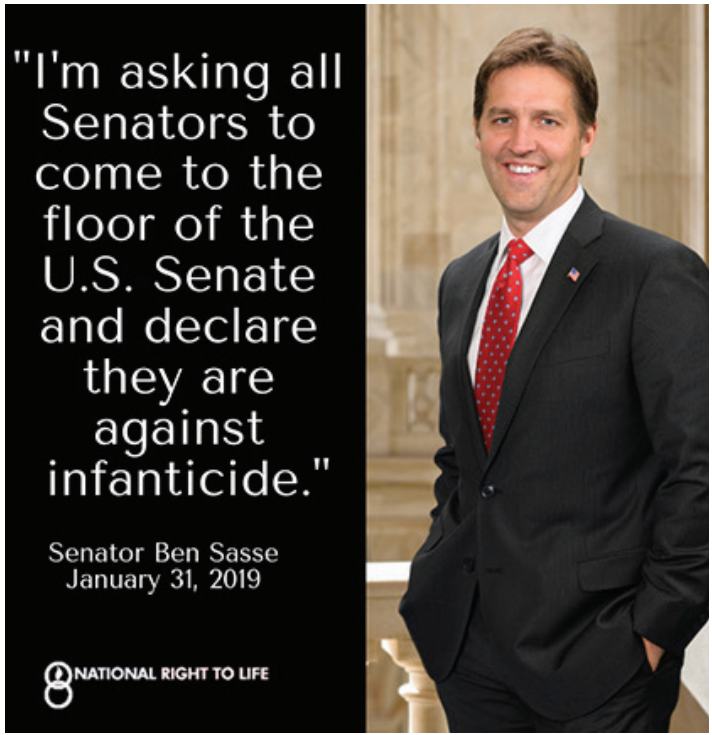
Pro-abortion Democrats are predisposed to give short-shrift to abortion survivors. These little ones weren't supposed to have survived in the first place. So (in their warped view) why would you do anything, other than (perhaps) wrap the baby in a towel and put her in the corner somewhere while you wait for her to die as you while away the hours aborting other little boys or girls?

Ask yourself what were/are the ticking time bombs in the *Roe* decision that would explode in infanticide? And while we can understand why pro-abortion Democrats are so adamant that abortion be legal until birth, why have they so embraced the position that newborn babies who miraculously escape the abortionist's clutches should be abandoned?

It's probably as simple as this. A dead baby was **always** the point. How you got there was just details. If the kid evades the abortionist's best efforts, what difference does that make to the **objective**, which is to get them dead?

When Senate Democrats beat back a vote on the Born-Alive Abortion Survivors Protection Act, they bundled up their cold heartedness in a closet-full of faux-sympathies. It was a ruse from A to Z.

The question is whether the overwhelming majority of Americans who believe abortion survivors should be treated remembers which party condones infanticide. Let's do our part to make sure they do.



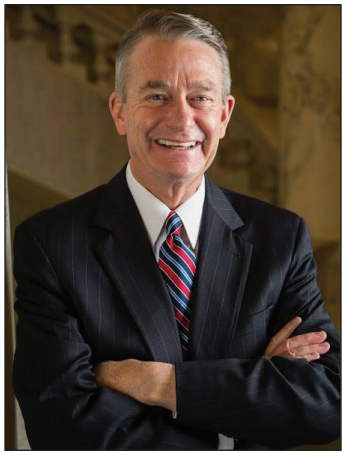
Idaho Gov. signs state ban on partial-birth abortion

By Dave Andrusko

Last month, NRL Director of State Legislation Ingrid Duran wrote a first-rate update for **National Right to Life News** of state legislation, which she does again the March digital edition of **NRL News**. She explained that "Idaho passed a state partial-birth abortion ban in their Senate State Affairs Committee."

Partial-Birth Abortions are a horrific type of abortions typically performed late in pregnancy that deliver an unborn child intact, feet first, while leaving the baby's head inside the mother and then sucking her brains out, and delivering a dead baby."

Since then the bill has passed the full Senate—29-6— the full House-50-11—and Governor Brad Little signed the bill into law on March 7. Idaho's ban on partial-birth abortions has been "unenforceable since 1999 due to a federal court ruling [Weyhrich v. Lance]," *East Idaho News reported*.



Idaho Gov. Brad Little

Sen. Lori Den Hartog, R-Meridian, one of the bill's sponsors, told *East Idaho News*, "We've known for a while that we needed to go back and clean up our code to have it match the federal language."

The bill "adds a very specific definition to mirror the federal definition of what partial-birth abortion is," Hartog explained. "It includes the exception for the health of the mother. And it mirrors the civil remedies that are in the federal statute."

"No uterus, no opinion," the mantra to silence men about abortion

From page 26

These silent victims of abortion are the broken fathers. Indeed, recent findings from the charity Abortion Recovery Care and Helpline (ARCH) found that 10-15% of those calling for help are male.

In the UK today, a father does not hold any legal rights with respect to his unborn child, nor does he have any legal say in the mother's decision to abort his child. It's an undisputed scientific fact that both a man and a woman are equally involved in the creation of a human child, and they are both equally the biological parents of that child. Yet, fathers don't even have to be notified, should the mother decide to have an abortion.

Speaking to ARCH, one can find out the reality that abortion can hurt and even destroy men's lives. A typical call might sound something like:" I've only been dating my girlfriend for a few months. She just told me she is pregnant. I want my baby. But she scheduled an appointment for an abortion. What can I do?" This is the tragic reality for many men when they find out that their girlfriend/partner or even their wife is pregnant.

For some, the trauma is so bad they end up taking their own lives. A journalist for the Australian Daily Telegraph wrote an article on the link between abortion and male suicide, and was forced to conclude that the effect abortion has on men "is a heartbreaking ocean of pain I had no idea existed".

It has suited abortion campaigners to try to make the issue of abortion a so-called rights issue of interest only to women. It is a strategy which betrays women who are the greatest victims of abortion, both in terms of aborted females and suffering mothers. The strategy has to be opposed and men need to take their place in this struggle for justice. When it is women's genuine wellbeing at stake and the right to life of all humanity, everyone needs to have an opinion.

Passing of the producer of "The Silent Scream" reminds us how powerfully this video altered the abortion debate

By Dave Andrusko

I did not know until last week that Donald S. Smith has passed away on January 30 at age 94. His name will be familiar to only a small percentage of our readers but his impact as producer of "The Silent Scream" was immense.

It is not the slightest exaggeration to say this 28 minute film stunned the nation in 1984. It personalized abortion in a way that never had been accomplished before by, in essence, explaining abortion from the terrified victim's point of view.

Of all publications, the *New York Times* offered a fairly balanced obituary. "Mr. Smith was working in public relations and advertising when he began to turn his attention to the abortion issue," wrote Neil Genzlinger. "He and Dr. Bernard N. Nathanson, an obstetrician-gynecologist who had once performed abortions but had become an abortion opponent, joined forces to make 'The Silent Scream' through American Portrait Films, a company Mr. Smith had formed."

Genzlinger explained that "Mr. Smith's promotional efforts included distributing videocassette copies of the movie to every member of Congress and every justice on the Supreme Court, as well as various state officials. The movie was widely criticized as exploitative and scientifically suspect by Planned Parenthood and other groups, but it became a pivotal weapon of the anti-abortion movement."

Skeptical as was all the media elite, the *Los Angeles Times* nonetheless wrote in 1985, "the 28-minute film — translated into six languages and seen by millions on television news reports and religious shows and in private screenings before school and church groups — has intensified the longstanding fight over abortion and turned it into a high-tech propaganda war."

Needless to say, we didn't then and we don't now see *The Silent Scream* as "propaganda." President Reagan, a big promoter of the film, called the film a "chilling documentation of the horror of abortion" at a rally three weeks before Smith screened the film at a February 1985 news conference in Washington's Old Executive Office Building which is located next door to the White House.

According to the *Times*, Smith was making a film when he approached Dr. Nathanson to borrow some of the sonogram images Dr. Nathanson used in his talks. "The two men decided to make an entire film built around the sonogram imagery, with Dr. Nathanson the on-camera narrator."

In an interview I conducted with him in June 1984, Dr. Nathanson told me the film was the first to present abortion "from the victim's vantage point."

What follows is an article that appeared in 1985 in **National Right to Life News** that I believe gives a flavor of what pro-and anti-life forces were thinking. It also illuminates how important NRLC was in helping *The Silent Scream* reach the widest possible audience.

Washington (Feb 25)—The Silent Scream "represents the most powerful breakthrough for the right to life movement since the election of President Ronald Reagan," NRLC President John C. Willke said today. "This extraordinary documentary of the death of a 12-week preborn child is changing the very vocabulary of the abortion debate," he said. "The National Right to Life Committee has been, and will continue to be, in the forefront of publicizing and distributing this compelling drama."

NRLC Vigorously Promotes "The Silent Scream."

Pro-abortionists obviously share Dr. Willke's assessment. "There's been a lot of discussion and gnashing of teeth and tearing of hair about how to deal with it," according to Lisa Akchin, a spokeswoman for Planned Parenthood of Maryland. Even journalists are not immune from the film's extraordinary impact.

For example, *ABC Nightline* host Ted Koppel calls the film "a distressing, in parts a very distressing video." He has gone so far as to ask the question whether *The Silent Scream* "is one of those images which captures the public's imagination [such as] the police dogs used by Bull Connor and his men in South?"

Produced by American Portrait Films in Anaheim, California, the controversial 28-minute motion picture is sending shock waves across the country. The core of this extraordinary film is an ultrasound, narrated by Dr. Bernard Nathanson, depicting the death throes of an unborn child as she desperately tries to evade the fatal probe of the abortionist's suction curettage.

Pro-abortionists such as Judy Goldsmith, president of the National Organization for Woman (NOW), seems compelled to talk about the film on every possible occasion. Goldsmith spent over half of her time at a recent debate with

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Democrats are now the party of infanticide, and no one can deny it

By Jonathon Van Maren

The Democrats have overplayed their hand. I've never seen such a suicidal strategy on the part of pro-abortion progressives—and it proves that they're getting genuinely desperate.

For decades, abortion activists and their political allies have wisely attempted to avoid the topic of late-term abortion entirely. Many insisted that partial-birth abortion simply did not exist, strategists warned behind closed doors that defending late-term abortion was a sure way to drive more people into the pro-life camp, and Nancy Pelosi even responded to a question about late-term abortion by ducking, dodging, and then demanding that her questioner be ashamed of himself because the question of killing third trimester infants is apparently "sacred ground" to her.

But then Hillary Clinton, the champion of the abortion industry, lost her bid for the presidency. She did so, it must be added, defending abortion at any stage in pregnancy, sending even reluctant pro-life voters into the Republican fold, but that lesson apparently remains unlearned. Clinton's loss induced a well-publicized meltdown that continued with the confirmation of Neil Gorsuch to the Supreme Court and reached a crescendo with the collective shriek of rage and fear that met the replacement of Justice Anthony Kennedy with Brett Kavanaugh.

Progressives are now terrified that *Roe v. Wade* will be overturned and that legal abortion in the United States might be under threat. One abortion activist and journalist, Robin Marty, has already released a *Handbook for a Post-Roe America* and is warning her ideological allies that *Roe's* days are numbered. I'm not so sure about that. …

Pro-abortion Andrew Cuomo Photo: Pat Arnow

But the best evidence for the desperation of abortion activists is their decision to whole-heartedly embrace late-term abortion. In New York, Governor Andrew Cuomo lit up landmarks with pink light to celebrate a bill that essentially permitted abortion until birth. In Virginia, Democratic delegate Kathy Tran put forward a similar bill, and when questioned by Republican Todd Gilbert, admitted that her bill permitted abortion until forty weeks.

Even, Gilbert asked, when "she has physical signs that she is about to give birth? She's dilating?" There was an awkward silence, and then Tran's response: "My bill would allow that, yes." That same day, Tran had submitted a bill to protect caterpillars at certain stages.

Just as the wave of shock and outrage that met the New York late-term abortion bill had begun to recede, the Virginia bill set the debate ablaze once again. When Governor Ralph Northam

Pro-abortion Hillary Clinton

attempted to defend the bill in an interview, he ended up simply horrifying people even further. "If a mother is in labor," he stated, "I can tell you exactly what would happen. The infant would be delivered. The infant would be kept comfortable. The infant would be resuscitated, if that's what the mother and the family desired, and then a discussion would ensue between the physicians and the mother."

In other words, late-term abortion involves killing an infant if the family decides to—and infants born alive could be left to die.

Videos of these exchanges have gone viral, racking up millions of hits. To many people, the agenda of the Democrats has suddenly become crystal clear: They are the party of abortion, regardless of how barbaric the procedure is.

Democrat politicians are so afraid of recent pro-life gains and pro-life judicial appointments that they seem willing to stake out this ground, come hell or high water—and in doing so, they have tipped their hand. They are becoming, as Trump recently tweeted, "the party of late-term abortion."

Trump also spoke for many when he noted that he had seen the defences of late-term abortion and simply found them "terrible," reminding people of a famous [presidential] debate moment: "Do you remember when I said Hillary Clinton was willing to rip the baby out of the womb? That's what it is, that's what they're doing, it's terrible…This is going to lift up the whole pro-life movement like maybe it's never been lifted up before. The pro-life movement is very much a 50-50, it's a very 50-50 issue, actually it's gained a point or two over the years. I think this will very much lift up the issue because people have never thought of it in those terms."

That is precisely right. Ironically, as the Democrats scramble to protect the abortion industry, their morbid enthusiasm for prenatal infanticide is causing ordinary Americans to recoil in horror. Vice President Mike Pence responded to the late-term abortion bills by penning an editorial for the *National Review*, noting that these

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Democrats are now the party of infanticide, and no one can deny it

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procedures violate "every demand of human decency," and that in his opinion, the "New York and Virginia bills aren't some bold departure into a brave new world. They are the last gasp of a dying movement that stands in stark and irreconcilable contrast with our nation's timeless founding principles."

I hope the vice president is correct. I do think that this is a significant moment in the abortion debate, the moment where the Democratic Party abandoned all pretence of caution and threw their lot in with those who demand the right to kill babies right up until the moment of birth, and occasionally even after. Men like Ralph Northam demanded that everybody see him as the compassionate one in the debate, and nobody bought it. Because Cuomo and Tran and Northam were so blunt about what it was that their bills would permit and facilitate, they could not deny that these bills were death warrants for full-term babies. Perhaps they forgot how ugly and extreme that is.

If they did, the American people are letting them know, loudly and clearly.

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

Pro-lifers help poor couple have their baby

By Sarah Terzo

Pro-life activist Ken Campbell told the following story:

"On a cold, rainy October day in 1987, Reza, then aged 25 years and Nasrin, aged 21 years…found their way into the back alley of the [abortion clinic]. Here they met two wet and cold sidewalk counselors, Craig and Mary, who offered them pro-life pamphlets and help to continue the pregnancy. The couple was confused and upset about the idea of abortion. Raised as Muslims, each believed in the sanctity of preborn life, but Reza could see no other option for them. They were applying for immigrant status and could barely survive financially.…. As they faced the terrible reality of abortion before them, their hearts sank, but still they decided to enter the [abortion clinic] …. Sickened by the atmosphere, they walked out. Reza recalled, "It looked and felt evil in there." His reaction crystallized his thoughts and feelings and he remembers thinking, "I'm not a criminal. I don't want to kill my baby. It's human too."

Craig and Mary had waited outside the [abortion clinic] and silently prayed for the young couple. When they reappeared Reza told them "It's like a house of death in there." He gave Craig his phone number… The next morning Craig called offering practical and financial help: $500 from Save the Baby Fund to ease their money worries, basic pieces of furniture… a clock and a mattress, a used TV set so Nasrin could learn English, a medical referral to an ever obliging pro-life obstetrician, Dr. Ned Lacey, and even the offer of a better paying job.…

The couple was married on December 10, 1987… Craig would've been a witness but he had to appear in court that day on trespassing charges at the abortuary, so Mary filled in for him….

Shayan, which means "deserving", was born a few months later. His delighted parents summoned Craig…and Mary to the hospital where all rejoiced at the arrival of this precious baby. They proclaimed Craig to be the "baby's first uncle." During the next year Craig and his wife continued to visit the family frequently."

Ken Campbell *Five Years Rescuing at the Gates of Hell* (Burlington, Ontario, Canada: Coronation Publications 1990) 76 – 77.

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

Here's exactly how Minnesota Senator Tina Smith justified her vote for infanticide

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and her ability to have future children of her own.

Tippy, with her family and her doctor, made the difficult decision to have an abortion in order to save her reproductive system. Because she was able to make that medical decision, she was able to have another baby a year later. Tippy and her husband are today the proud parents of an 18-month-old child. When Tippy and her husband made their decision, it was based on guidance from her doctor and what was right for them and the family they hoped to have in the future.

They didn't need politicians to be looking over their shoulders in the doctor's office and telling them what to do. None of us in this body should be in the business of interfering in that doctor-patient relationship. We don't tell oncologists how to treat their patients; we don't tell emergency room doctors how to save lives; and we shouldn't tell women's doctors how to take care of their patients.

Colleagues, that is what this bill does. It would give politicians in this room the power to make medical decisions for women and their families. This bill intimidates providers and forces physicians to provide inappropriate medical treatment even when it is not in the best interests of their patients or their families.

Colleagues, we should treat women with respect. Decisions about women's healthcare aren't different from decisions about men's healthcare, so why are we treating women differently? This legislation, if it were to become law, would put doctors in an untenable position: Do they follow the law or do they follow their code of professional ethics?

Colleagues, let's get out of the business of dictating medical care for women. Let's continue to trust women and their doctors. I urge my colleagues to oppose this legislation.

I yield the floor.

These comments don't accurately describe the bill, and if Smith has read the bill, she knows it.

Why Smith's remarks are thoroughly dishonest

Start with the story of Tippy, a woman who had an abortion. Smith tells this story even though it has nothing whatsoever to do with the legislation. The only way it could be relevant is if Tippy's baby was born alive. In that case, the bill says the child should be treated like other premature infants rather than discriminated against merely because of the circumstances of her birth. But that equal treatment wouldn't prevent Tippy from having the abortion in the first place. It certainly wouldn't prevent doctors from caring for Tippy in whatever way they thought best.

The rest of Smith's speech is no better. She says that "for women, this is a health care issue." How? A woman's health care doesn't require the denial of health care to someone else. Smith says that the bill is about "dictating medical care for women." Again, how is it about that? Smith says we should "treat women with respect" and rhetorically asks, "Why are we treating women different?" Well, we're not.

If Smith were sincere, these comments would be completely baffling. Could Smith actually believe that the fate of a separate and already-born child falls within the domain of the mother's "health care"? Is a newborn infant a part of her mother's body? No one believes that because it's nonsense.

Smith says the bill pertains to "decisions about women's health care." The bill actually pertains to "decisions about whether to deny proper care to individuals other than women." What Smith is doing here is called lying.

Regarding doctors, Smith claims that the bill would "compel physicians to provide unnecessary care." No, it wouldn't. The bill doesn't specify the care that is appropriate in any given situation. It simply says that physicians can't treat certain babies differently just because their mothers had abortions. (Or is Smith suggesting that any care for a baby who survives abortion is "unnecessary"?)

Smith says that the bill would "override physicians' professional judgments about what is best for their patients." It would only do this if physicians' "judgment" is that they should abandon, neglect, or kill their patients. Smith claims that the bill would force doctors to choose whether to follow the law or to follow "their code of professional ethics." What code of ethics requires discriminating against babies who survive abortions? If that's the code embraced by Smith (a former Planned Parenthood executive) and others from the abortion industry, then the Born-Alive Abortion Survivors Protection Act is desperately needed.

Read the bill yourself

On Feb. 25, Tina Smith voted against providing appropriate medical care to living human infants who are fortunate enough to survive abortion. Presumably, she doesn't want to acknowledge or defend this deeply unpopular position. So she pretended the bill is about something else instead. She gave a 700-word speech without ever mentioning the human beings who are the sole focus of the legislation.

We encourage Minnesotans to read the text of Smith's speech about the bill. Then read the text of the actual bill. This is all public information. Anyone can see the truth for themselves.

Tina Smith chose to lie, and lie extravagantly, and then hope that most people won't notice.

Editor's note. This appeared on the blog of Minnesota Citizens Concerned for Life, NRLC's state affiliate.

Passing of the producer of "The Silent Scream" reminds us how powerfully this video altered the abortion debate

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Jerry Falwell at the National Press Club trying to discredit *The Silent Scream*.

"The pro-abortionists' defensiveness is understandable," Dr. Willke said. "For the first time in over a decade, they are unquestionably on the defensive, trying to justify the ghastly death of a tiny human brutally torn apart."

Requests for copies of the film are coming into NRLC from as far away as Japan and Australia. Inquiries about "the abortion film" are pouring in from Latin America, Canada, England, and the Scandinavian countries.

NRLC has made the promotion of the Nathanson ultrasound one of its highest priorities. "Prior to our January 22 press conference, NRLC determined to explain to the media that *The Silent Scream* is the most newsworthy item in the abortion debate," said NRLC Public Relations Director Dan Donehey. "We succeeded."

NRLC arranged for Dr. Nathanson to come to Washington to present his film at the press conference. The media's interest was immediate and clear. NRLC also made arrangements with the film's producer, Donald Smith, to have broadcast-quality videotapes available for the major television networks, and that night, every network showed clips of *The Silent Scream*.

The media's keen interest led to numerous television appearances by pro-life leaders along with a spate of newspaper stories in major papers around the country. Following the January 22 news conference, the NRLC public relations office distributed copies of *The Silent Scream* to more than 20 major broadcast media.

The interest has been so intense that NRLC has set up a corner of the office so that visiting press may have a quiet place to view this incredible film. The film has been shown almost continuously and newspaper and magazine articles about The Silent Scream appear nearly every day.

NRLC's involvement stretches back to its 1984 convention in Kansas City where Nathanson introduced the ultrasound. An interview with Nathanson that appeared in the June 21 issues of NRL News has appeared in right to life publications all over the country.

"I can't see how you could overestimate the importance of *The Silent Scream*," Dr. Willke said. "We feel privileged to be able to contribute free copies to our fifty state affiliates."

NRLC Educational Trust fund Director Richard Glasow told **NRL News** that the Trust Fund has already purchased over $53,000 worth of copies of the film. "We've placed orders with American Portrait Films for 140 copies of the movie and 100 copies of the video tape, for starters," Glasow said. "Our goal is to make it possible for every interested pro-lifer in the country to see this film, and, more importantly, to work to get it shown on their local television stations.

Like an avalanche gaining momentum, the fascination with *The Silent Scream* builds and builds. The White House held a briefing and ceremony Feb. 12 in which a gold-plated 16 mm copy of the film was given to President Reagan. Producer Donald Smith also made available 550 copies to be distributed to every member of Congress and the U.S. Supreme Court free of charge.

On Feb. 17 the Rev. Jerry Falwell aired the film during his weekly cable network television program and gave credit to *WTBS* owner Ted Turner for demonstrating "intestinal fortitude" in allowing the full 28-minute version to air unedited. Falwell has called on his massive nationwide audience to help him get copies of *The Silent Scream* into the hands of 50,000 pastors.

Meanwhile, media powerhouses such as the *Washington Post*, the *Baltimore Sun*, *Newsweek*, *Time*, and *U.S. News and World Report* have carried stories on the Nathanson ultrasound. Thanks to the efforts of the NRLC public relations department, clips of *The Silent Scream* have recently appeared on all three major networks, the *Cable News Network*, and local stations around the country.

Mr. Smith passed away almost exactly eight years after Dr. Nathanson.

Rest in Peace.

Research Shows Earlier Pain Perception in Unborn Child

From page 6

Earlier than 20 weeks

New studies say that while contact with the cortex is a significant milestone, it is not necessarily essential to the ability of the unborn child to experience pain.

Clinical data about human beings with damaged or missing cortexes show that pain perception is not significantly altered by that unfunctioning part. This is not so when it comes to the thalamus, though. The absence or stimulation of the thalamus matters greatly. For example, lesions (tissue damage of some kind) of the cortex, no matter how extensive, were not, in studies, associated with coma, but lesions of the neural network centered around the thalamus and connecting the brainstem, thalamus, and cortex were.

In a 2016 study appearing in the *Journal of Pain Research* entitled "Appearance of fetal pain could be associated with maturation of the mesodiencephalic structures," researcher Slobodan Sekulic and colleagues say the following after looking at several proposed fetal pain milestones:

> **When it comes to the fetus, it has to be taken into account that the developing neural elements may be immature, but they are not inactive; the developing pain system has a signaling function during the maturation of the fetus. This system uses the existing neural structures at that moment. According to this, the perception of pain during development is not related to any determined structures of the CNS [central nervous system], on the contrary, the process of pain perception could be made with any structure satisfying the conditions that perception is the organization, identification and interpretation of sensory information in order to represent and understand the environment.**
>
> **All these data could lead to the hypothesis that the early rudimentary form of the perception of pain in human species could be achieved only with mesodiencephalic structures during intra-uterine development.**

So that this revolutionary claim is clear, the "mesodiencephalon" and the "mesodiencephalic structures" the authors are talking about involve that midregion of the forebrain which include the brain stem, the thalamus, and surrounding related structures such as the hypothalamus, the epithalamus, and the subthalamus.

"In intact fetuses," say the authors, "this structure shows signs of sufficient maturation from the 15th week of gestation."

Medical Experts Concur

Sekulic's study is one of the most recent and takes the data further than others, but he is not alone in arguing that thalamic development and other markers argue for the possibility of earlier pain perception in the unborn child.

Roland Brusseau, mentioned earlier, explained why anesthesia is given the child in fetal surgery. In a 2013 article in *Clinics in Perinatology*, Brusseau noted that "the fetus is capable of mounting a physio-chemical stress response to noxious stimuli as early as 18 weeks gestation."

Mauricio V. Ramirez, writing in the *Colombian Journal of Anesthesiology* in 2012, noted that all the receptors, neural connections between the spine, thalamus, and cortex were present (some complete) at a range of 17-20 weeks gestation. Ramirez uses this information to argue for the provision of fetal analgesia/anesthesia "during painful interventions that trigger noxious fetal responses."

In a 2015 article "Secrets of anesthesia in fetoscopic surgery" in *Trends in Anaesthesia and Critical Care*, Ayten and Kemal Saracoglu argue that given the sufficiency of the neural network circuitry by 17-20 weeks and stress responses in this time frame, "fetal analgesia should be ensured."

Critics may see these studies and say that researchers are simply being cautious rather than asserting the certainty of the unborn child's ability to feel pain at this point. The obvious point is that they see the presence and functioning of these structures and feel these developmental facts provide sufficient ground to be concerned about this possibility – so much so that they are willing to stake their professional reputations on recommendations of fetal anesthesia during surgery on those children in the womb.

Even more painful

Sekulic and his colleagues stress that this earlier possible perception means that the pain is likely to be felt more, not less, intensely.

> **Bearing in mind the dominant role of the reticular formation of the brain stem, which is marked by a wide divergence of afferent information, a sense of pain transmitted through it is diffuse and can dominate the overall perception of the fetus**.

In other words, because the neural network feeds such a lot of information to the brain stem, the pain can be overwhelming for the unborn child, especially given that, the authors say, "The threshold for tactile stimuli is lower at earlier stages of gestation."

Furthermore, Sekulic and his research colleagues point out, "The pain inhibition mechanisms are not sufficiently developed during intrauterine development, which is another factor that leads to

increased intensity of pain in the fetus." Between 30 and 32 weeks, humans develop mechanisms that help us moderate or inhibit the experience of pain.

"As a conclusion" says Sekulic, "it could be proposed that the fetus is exposed to rudimentary painful stimuli starting from the 15th gestation week and that it is extremely sensitive to painful stimuli."

Sekulic and his research team never speak of abortion directly in the article, but implications are clear. Unborn children, particularly those aborted from the mid-second trimester on, are likely to experience excruciating pain when their lives are being taken.

This is hardly the sort of outcome politicians should fight for, much less celebrate.