



national
RIGHT TO LIFE
NEWS

January 2021





national RIGHT TO LIFE NEWS

After 2020 elections, pro-lifers already planning for the future

By Karen Cross, National Right to Life Political Director

As we enter 2021, pro-abortion Democrats will control the House, Senate, and the Presidency.

As unhappy as we are that pro-abortion Joe Biden defeated pro-life President Donald Trump, it's important to remember that we defied expectations in the Senate and fared well in the U.S. House and in state races. That bodes well for the future.

It's also important to remember that pro-lifers have been in this place before and each time—undeterred—we've bounced back.

For example, on January 20,



2009, President Barack Obama took the oath of office after a decisive electoral victory. He entered office with sizable Democratic majorities in both the House and Senate.

At that time, the pro-abortion movement's top priority (as it had been for years) was the passage of the so-called "Freedom of Choice Act" (also known as FOCA), a bill that would have invalidated virtually all protections for the unborn. We face similar threats now with the abortion

See "Future," page 34

Pro-lifers already gearing up to fight battles in forthcoming 117th Congress

By Jennifer Popik, NRLC Federal Legislative Director

As we start the 117th Congress, Democrats will control both the House and Senate by the slimmest of majorities. Even with a smaller Democrat majority in the House and equally divided Senate, Democrats are expected that push to expand abortion fast and furious.

Pro-lifers in and out of Congress are already preparing to fight this onslaught with all the tools at their disposal.

In the House, there are 222 Democrats, 211 Republicans, and 2 vacancies. In a particularly bright spot, the incoming Republican members

include 18 new pro-life women. In the Senate, there will be 50 Democrats and 50 Republicans and pro-abortion Vice President-elect Kamala Harris would serve as a tie-breaking vote. This means that fellow pro-abortionists Sen. Chuck Schumer (D-NY) and House Speaker Rep. Nancy Pelosi will largely control what legislation comes to the floor -- and we expect the abortion issue to be a high priority.

While it is anticipated that the incoming Biden Administration

See "Battles," page 32



Editorials

“Dedicated heroes” take a deep breath and look ahead to ways to protect unborn babies and the right of conscience

There are no two ways around it. It was a bitter pill to swallow on January 6th when Congress certified that pro-abortion Joe Biden had won enough electoral votes to become the 46th President of the United States and it was confirmed that pro-abortion Democrats had narrowly won both Senate runoff races in Georgia.

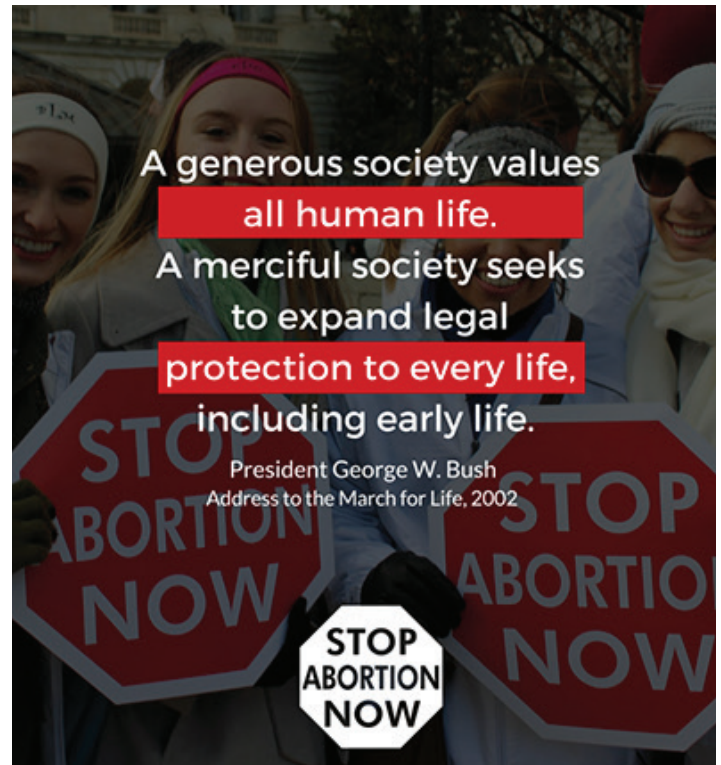
Before I go any further, let me quote NRL President Carol Tobias who said, “The pro-life movement has faced tremendous challenges before but protecting the right to life is more than an idea. Life is our most fundamental human right and needs dedicated heroes who will work tirelessly and endlessly to protect the most vulnerable among us. Now, more than ever, we must stand together for life.”

In my 40+years in the Movement, I have never met a Sunshine Patriot, someone who basks in the glow when everything is going our way but retreats when the going gets tough. I’m sure they must exist, but I have never encountered them.

Instead, in season and out of season, pro-lifers battle. They contest. They encourage one another. Most important, they say, “If not me, who?”

Over the last five days, I have pondered a quote from a very unlikely source: singer Ed Sheeran. He said something remarkable, in my opinion: “Everything will be okay in the end. If it’s not okay, then it’s not the end.”

See “Heroes,” page 30



Biden/Harris as TIME’s “Person of the Year” is unsurprising and in line with everything done to defeat Donald Trump for four years

Last month, when TIME magazine chose as its two-headed “Person of the Year” Joe Biden and Kamala Harris, could there have been a less surprising choice?

No, actually, there couldn’t be.

TIME and virtually the entirety of its journalist brethren spent four years working to undermine the first term of pro-life President Donald Trump and deny him a second. Choosing President-elect Biden and Vice President-elect Harris was like taking a victory lap. And TIME patted itself on the back in a series of stories about its choice selection.

Here are two quick thoughts.

First, there is the story written by Corky Siemaszko for *NBC News* about the choice.

One of the costs of shrinking media revenues is the absence of copy editors. Clearly, this story was not edited—but I suppose it didn’t need to be. Anything that bashed Trump would suffice. His story is a primer in media bias, distortion, and one-sidedness.

Second, there is TIME Editor-in-Chief and CEO Edward Felsenthal’s softball interview with Biden “edited for clarity.”

(I’m sure they missed the irony.) Biden is as wonderful and unifying as Trump is awful and divisive. What does it say that although the theme is “uniting” the country, the second question is about “pardoning” President Trump?!

As bad as that was, the introduction (and presumably the way the piece was edited) by Madeleine Carlisle was worse. Every problem—real and imaginary—is the “legacy” of Donald Trump. Not a syllable of praise or even acknowledgement.

But try as I wanted to avoid it, I need to say just a word about the major piece written by Charlotte Alter about the Biden and Harris team. Unless you work for the Democrat Party, or hate Donald Trump so much you instinctively attribute unbelievable qualities to his opponent, her long, long post will, at best, leave you scratching your head, at worst, wondering who **are** these people because they sure aren’t the Joe Biden and Kamala Harris the rest of us know.

Just guessing but I strongly suspect this “tough questioning” is about as probing as will get from the Media Elite, which is, as we all know, an extension of the Democrat Party.

From the President Carol Tobias

Going forward: Challenges and Opportunities



From the November 3rd election through the January 5th run-offs in Georgia, I experienced all the negative feelings you would expect, including anger and a temptation to despair.

You may have gone through some of these emotions yourself.

We worked so hard to elect pro-life candidates! Election night we had tremendous success in adding new pro-life members to the US House (a net gain of 13 or 14), along with four new pro-life U.S. Senators, but it wasn't enough. The abortion industry is in position to call the shots in the White House and Congress.

Many of the fabulous pro-life gains made under the Trump administration over the past four years will be reversed, and we will be fighting efforts to enact a federal abortion-on-demand-through-birth law. We will need to vigorously and strategically oppose efforts to repeal the Hyde Amendment so that our tax dollars do not pay for the killing of unborn children.

So, do we have difficult challenges ahead? Of course. When we signed on, no one ever said it would be easy or that there would not be setbacks.

But are we going to give up and walk away? Absolutely not!! Since we do not labor for personal gain but for those who cannot help themselves, we will take a deep breath and continue the fight.

We have many opportunities available to us, and we need to take advantage of them as much as possible.

While many of President Trump's pro-life policies will be reversed, a lasting impact will be seen in the courts. His appointees to the federal bench have a deep respect for the Constitution; they will make decisions on laws that come before them according to its text.

That is hugely important. We know that *Roe v Wade* was not based on the Constitution. Honest, pro-abortion legal minds acknowledge that *Roe v Wade* was poorly decided.

In a famous 1973 Yale Law Journal article, entitled "The Wages of Crying Wolf," Professor John Hart Ely wrote that he was personally "pro-choice," yet denounced the *Roe* decision. He wrote that *Roe* "is bad because it is bad constitutional law, or rather because it is not constitutional law

and it gives almost no sense of an obligation to try to be." The article is very much worth reading in its entirety.

Justice Byron White wrote, in his *Roe* dissent, "I find nothing in the language or history of the Constitution to support the Court's judgment. The Court simply fashions and announces a new constitutional right for pregnant mothers and, with scarcely any reason or authority for its action, invests that right with sufficient substance to override most existing state abortion statutes. The upshot is that the people and the legislatures of the 50 States are constitutionally disentitled to weigh the relative importance of the continued existence and development of the fetus, on the one hand, against a spectrum of possible impacts on the mother, on the other hand."

Just as we made pro-life gains in the U.S. House, we saw an increase of pro-life legislators in many state houses. Many of these state legislatures will continue their efforts to be "laboratories of democracy" when it comes to protecting unborn children.

I refer, of course, to a 1932 opinion in which Supreme Court Justice Louis Brandeis wrote that states may "serve as a laboratory; and try novel social and economic experiments without risk to the rest of the country."

With guidance and support from our affiliates, many of the states will find ways to challenge the fabricated constitutionality of *Roe v Wade*.

In addition to passing protective legislation at the state level, we will also continue our educational efforts. Because of the Covid pandemic, many county and state fairs were canceled. If they are back in operation this year, make sure your pro-life chapter has a presence at the fair.

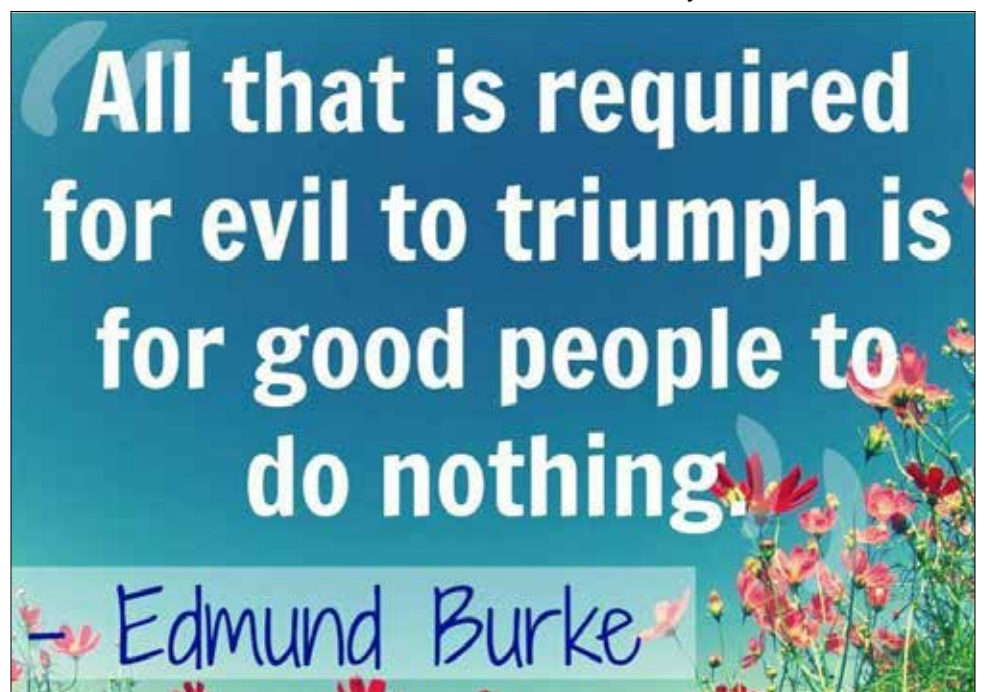
Booths that display fetal models and hand out informational materials are a great way to reach those you may not meet elsewhere.

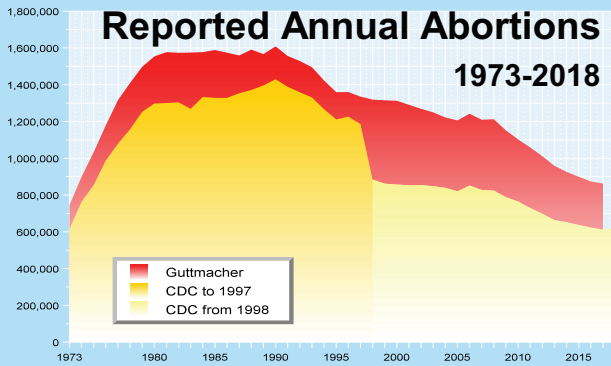
Advertising on radio, billboards and buses, working with churches and community groups, promoting pro-life messages and information through social media—all are ways we can impact our fellow citizens.

Giving credit to Wikipedia, "The marketplace of ideas holds that the truth will emerge from the competition of ideas in free, transparent public discourse." Our goal is to inject the truth about the humanity of the unborn child into the marketplace of ideas; to change the hearts and minds of people who bought into the lie of "choice."

The pandemic reminds us that the elderly and those with disabilities are often the first targets for neglect. Sadly, we've seen too many of them endangered by placement in infectious living facilities; or denied treatment based on a subjective "quality of life" standard. We have spoken up on their behalf. They need our voices now more than ever.

The pro-life movement has had challenges before and we have always risen to meet, and overcome, them. We will continue to do so, and we will prevail. For the babies and the medically vulnerable, we must.





1973	744,610	615,831
1974	898,570	763,476
1975	1,034,170	854,853
1976	1,179,300	988,267
1977	1,316,700	1,079,430
1978	1,409,600	1,157,776
1979	1,497,670	1,251,921
1980	1,553,890	1,297,606
1981	1,577,340	1,300,760
1982	1,573,920	1,303,980
1983	1,575,000	1,268,987
1984	1,577,180	1,333,521
1985	1,588,550	1,328,570
1986	1,574,000	1,328,112
1987	1,559,110	1,353,671
1988	1,590,750	1,371,285
1989	1,566,900	1,396,658
1990	1,608,600	1,429,247
1991	1,556,510	1,388,937
1992	1,528,930	1,359,146
1993	1,495,000	1,330,414
1994	1,423,000	1,267,415
1995	1,359,400	1,210,883
1996	1,360,160	1,225,937
1997	1,335,000	1,186,039
1998	1,319,000	884,273*
1999	1,314,800	861,789*
2000	1,312,990	857,475*
2001	1,291,000	853,485*
2002	1,269,000	854,122*
2003	1,250,000	848,163*
2004	1,222,100	839,226*
2005	1,206,200	820,151*
2006	1,242,200	846,181*
2007	1,209,640	827,609*
2008	1,212,350	825,564*
2009	1,151,600	789,116*
2010	1,102,670	765,651*
2011	1,058,490	730,322*
2012	1,011,000	699,202*
2013	958,700	664,435*
2014	926,190	652,639*
2015	899,500	638,169*
2016	874,100	623,471*
2017	862,320	612,719*
2018-20	862,320§	619,820*

*excludes NH, CA and at least one other state

§ NRLC projection for calculation

ABORTION statistics

United States Data and Trends

Abortion Drop Continues

There are two basic sources on abortion incidence in the United States:

- The U.S. Centers for Disease Control (CDC) publishes yearly, but relies on voluntary reports from state health departments (and New York City, Washington, D.C.). It has been missing data from California, New Hampshire, and at least one other state since 1998.
- The Guttmacher Institute (GI) contacts abortion clinics directly for data but does not survey every year.
- Because it surveys clinics directly and includes data from all fifty states, most researchers believe Guttmacher's numbers to be more reliable, though Guttmacher still believes it may miss some abortions.

Both the CDC and Guttmacher show significant recent drops and sustained declines over the last 25 years.

- Total abortions dropped 29.9% from 1998 to 2018 with the CDC, and fell 46.4% from 1990 to 2017 with the GI.
- Total abortions fell below 1 million for the first time in the 2013 GI count and have continued downward to 862,320 in the most recent GI figures for 2017.
- The **abortion rate** for 2017 for GI was 13.5 abortions for every 1,000 women of reproductive age (15-44), less than half what it was in 1981 (29.3) and even lower than when abortion was legalized in the U.S. in 1973 (16.3).
- Guttmacher says there were 18.3 abortions for every 100 pregnancies ending in live birth or abortion in 2016, 18.4 for 2017, lower **abortion ratios** than any since 1972.
- Guttmacher says that the number of abortion "providers" has dropped from a high of 2,918 in 1982 to 1,587 in 2017.
- Most of the reduction in abortions seen between 2008 and 2017 occurred in facilities performing a thousand or more abortions a year. A loss of 122 such facilities from 2008 to 2017 was accompanied by a decline of 346,280 abortions, virtually all of the drop between those years.
- The percentage performed with chemical abortifacients like mifepristone rose from 16.4% in 2008 to 39.4% in 2017.

The Consequences of *Roe v. Wade*

62,502,904

Total abortions since 1973

Based on numbers reported by the Guttmacher Institute 1973-2017, with 3% added for GI estimated possible 3-5% undercount for 1973-2014. Another 12,000 per year added for 2015-2020 for abortions from "providers" GI says it may have missed in 2015-2017 counts. 1/21

512 10th Street, NW, Washington, DC 20004
202-626-8800 www.nrlc.org



Roe's Legacy: More than 62.5 Million Lives Lost

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

As you see in the accompanying chart on page four, we have made substantial progress in reducing the number of abortions and lowering the abortion rate over the past thirty years. At the same time, though, as long as abortion is legal, each year we will keep adding to the

Projecting a cumulative total

We have used that 2017 Guttmacher figure to project equivalent numbers for 2018, 2019, and 2020 and then used those in tallying the cumulative number of abortions since *Roe*.

An additional 3% is added to totals from 1973 through 2014,

with a population of 62.5 million would rank about twenty third on the list of the world's most populous countries.

In terms of population, a nation that size would rank ahead of such countries as Italy, Spain, Kenya, South Africa, Saudi Arabia, Iraq, Argentina, Columbia, Venezuela, Hong Kong, Cambodia, South Korea, or Canada.

CDC hints at abortion's future

Recently released figures from the CDC reinforce the conclusion that a new low in the number of abortions may have been reached but suggest that a slight increase may be in the offing due largely to the increased number of chemical abortions.

The CDC reported 612,719 abortions for 2017 and then a slight uptick to 619,820 for 2018.

These numbers tell us something, but should be viewed with caution.

Numbers from the U.S. Centers for Disease Control (CDC) have not included data from California, New Hampshire and at least one other state since 1998, so its annual abortion totals are always much lower than Guttmacher's.

The CDC's substantially lower numbers are thus a function of missing data from several key states and its reliance on state health

departments. Guttmacher obtains its data from more aggressive direct contacts with "abortion providers." So it may take a few years to determine whether or not the CDC's most recent slight increase reflects a new upward trend.

Chemical abortion bending the curve upward

If an increase occurs, it will likely be to the increased promotion and use of chemical abortions which have risen steadily since the FDA's approval of the abortifacient mifepristone in 2000. So-called "medication abortions" have increased even while surgical abortions have been declining and the number of clinics has been shrinking in the U.S.

Efforts of the abortion industry and its political allies to promote telemedical chemical abortions, where abortionist never sees the woman in person, will surely exacerbate this trend.

To reiterate, the long term trend in the number of abortions is definitely downward, even in the midst of overall population increases. It is clear that the legislative, educational, political, and outreach strategies of the pro-life movement have been effective.

The numbers make clear both that we have come a long way and that we have a long way left to go.

The Consequences of *Roe v. Wade*

62,502,904

Total abortions since 1973

total of lives lost to America's greatest holocaust.

The latest reliable national annual figure we have comes from the Guttmacher Institute which, although pro-abortion, does the most complete data gathering. For the year 2017, Guttmacher estimated the number of abortions performed in the U.S. was 862,320.

That is the lowest figure Guttmacher has reported since 1973 when the Supreme Court legalized abortion nationwide. That number is just a bit more than half of what the toll was in 1990 when Guttmacher recorded more than 1.6 million abortions.

reflecting a 3-5% undercount Guttmacher has estimated for those figures.

Another 12,000 abortions were added for each year since 2015 to reflect the caseload of "providers" Guttmacher says it may have missed in its 2015-2017 counts.

That data added together yields a cumulative total of 62,502,904 abortions since 1973. This is more than the population of our country's most populous state (California) and a number greater than the *combined* population of our 23 least populous states.

To get another take on the enormity of that loss, a nation

48 ways the Pro-Life Movement is creating and fortifying a Culture of Life

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

As we approach the 48th anniversary of the tragic U.S. Supreme Court decision *Roe v. Wade*, here are 48 ways the pro-life movement is making a profound impact on our nation through education, legislation, political action, and alternatives to abortion.

1. Federal court judges are boldly asking the Supreme Court to revisit *Roe v. Wade*.
2. A new contingent of pro-life women is gracing the halls of Congress as a result of the 2020 election. Pro-lifers flipped 14 House seats from pro-abortion Democrats to pro-life Republicans in 2020. The “pro-life advantage” helped to elect numerous state lawmakers last year.
3. National Right to Life local chapters are educating people in their local communities about the development of the preborn child.
4. More and more women who have had abortions and who now regret them are speaking up about their traumatic decision.
5. Events such as the National Right to Life Convention have helped to energize and focus the pro-life movement.
6. The film “Gosnell” shed light on an abortionist’s horrific crimes against humanity.
7. The March for Life continues to draw massive numbers of people to the nation’s capital to draw attention to the cause of life.
8. Solid scientific research is educating Americans about the physical and psychological risks of abortion.
9. The outrageous practice of partial-birth abortion, where a baby is partly delivered, then killed, has been outlawed. Progress is being made at the state level to end the dismemberment of living unborn children.
10. Strict constructionist judges, dedicated to the Constitution rather than pro-abortion politics, were appointed to the federal courts and the Supreme Court in recent years.
11. The Hyde Amendment has saved at least two million lives.
12. National Right to Life’s state affiliates are passing meaningful pro-life legislation that is holding the abortion industry accountable while saving lives.
13. The pro-life movement empowers women to make life-affirming decisions for themselves and their families.
14. Pro-life news outlets such as *National Right to Life News Today* publish daily updates that keep pro-lifers up to date.
15. Healing ministries such as Rachel’s Vineyard are providing hope to families impacted by abortion.
16. Parental consent laws have helped to dramatically reduce the number of teen abortions.
17. Pregnancy resource centers are providing comprehensive counseling and material support to pregnant women in challenging circumstances.
18. So many one-time advocates of abortion, such as NARAL founder Dr. Bernard Nathanson, became pro-life.
19. Technology such as 4D Ultrasound has provided a window to the womb, helping to strengthen the bond between mother and unborn child and saving lives.
20. Medical advances have allowed doctors to save premature babies at ever-earlier stages of development.
21. The movie “Unplanned” moved people’s hearts to embrace the pro-life cause.
22. From diaper drives to parenting classes, the pro-life movement is proving itself as a “pro-love” movement.
23. 40 Days for Life’s prayerful and peaceful presence outside abortion facilities has helped abortion workers find a way out of the abortion industry.
24. Men who have suffered the loss of children through abortion are stepping up to discuss their lost fatherhood.
25. Polls also show that a majority of Americans oppose the reasons 90%+ of all abortions are performed.
26. Pro-life marches and rallies in local communities are focusing renewed attention on the cause of life.
27. The pro-life movement has placed a spotlight on the tremendous potential of children with Down syndrome and other disabilities.
28. African-American leaders such as Dr. Alveda King are drawing attention to the devastation abortion has caused in minority communities.
29. Dedicated volunteers are bringing vital pro-life education into schools across the nation.
30. Celebrities such as actress Patricia Heaton are using their platforms to promote a life-affirming message.
31. Pro-life advocates are illuminating the cause through social media outlets such as Facebook, Twitter, Instagram, LinkedIn, and Parler.
32. Pro-life videos on YouTube are educating a new generation about the cause of life.
33. The National Right to Life Essay Contest is helping students hone their pro-life argumentation.
34. Investigative journalists such as David Daleiden are exposing the atrocities of the harvesting of baby body parts.
35. Disability rights activists are at the forefront of fighting assisted suicide legislation in numerous states.
36. Yearly abortion totals are declining nationwide.
37. The National Right to Life Oratory Contest is showcasing the rhetorical talents of young pro-life advocates.
38. The pro-life movement welcomes people of all faiths, or no faith at all, to join us in our mission of care and compassion.
39. Websites such as TeenBreaks.com are providing meaningful information and resources to pregnant teens in difficult circumstances.
40. The first-of-its-kind, state-funded alternatives to abortion program administered by Real Alternatives, has served more than 330,000 women and their families.
41. Public opinion polls show the vast majority of Americans oppose taxpayer funding of abortion.
42. High school and college students are bringing vitality and a new perspective to the pro-life movement.
43. Informed consent laws are giving pregnant women the information they need about fetal development and alternatives to abortion.
44. High school and college students are bringing vitality and a new perspective to the pro-life movement.
45. Informed consent laws are giving pregnant women the information they need about fetal development and alternatives to abortion.
46. Grandparents are recognizing the incredible gift they lost due to abortion.
47. Investigative journalists such as David Daleiden are exposing the atrocities of the harvesting of baby body parts.
48. A reversal of *Roe v. Wade* is within sight.



The abortion revelation in “This is Us” raises far more questions than it answers

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

Every pregnant woman deserves love and support, and should be made aware of the fact that there are people who are willing to journey with her at every stage of her pregnancy. Even if the father of her child is unwilling to step up and be the father he is supposed to be. Even if she feels abandoned by family and friends.

That is what makes a pivotal scene in the first episode of the NBC drama “This is Us” all the more painful.

In the clip, the character Kate, played by actress Chrissy Metz, reveals to her husband Toby, portrayed by actor Chris Sullivan, that she had an abortion when she was a teenager. Toby, who was not the father of the unborn child, displays difficulty understanding why she kept the abortion a secret from him for so long.

She states that she made the decision “alone” and that she has lived with it “alone.” So very ironic for a program entitled “This is Us.” As a viewer, my heart went out to her, knowing that she felt so

isolated during her pregnancy.

In revealing her abortion, Kate states that she was “nowhere near ready to be a Mom.” But what if she had been offered comprehensive support, the kind of assistance found

compassionate support for a life-affirming alternative--adoption? Where might the child who lost his or her life to abortion be now, if, instead, that son or daughter had been placed for adoption?



by the thousands of pregnancy resource centers throughout the country? Would she have found the strength within her to parent her child?

She also states that she could “not be tied to the guy for the rest of my life.” What if she had received loving,

of an innocent, unrepeatable child? Sadly, the humanity of the preborn is not mentioned in this discussion. There is no indication that Kate saw an ultrasound of her baby prior to the abortion.

The drama also fails to recognize the number of women who do have abortions and who regret them. The painful, traumatic aspects of abortion go unexplored.

Still, her husband Toby asks a haunting question: “If it (the abortion and her previous relationship) was truly in the past, then why would it take you four years to tell me about it?”

Sadly, with abortion, past is often prologue. It is not a once-and-done decision, but one that has repercussions for a lifetime. With help and healing, women who have lost children to abortion can find new life. But, as so many women who have had abortions tell us, they wish for all the world that they had never suffered that trauma to begin with.

Their stories need to be told, on television and elsewhere.

Kate states that the abortion was the “toughest decision I ever made in my life, but I don’t regret it.” The script fails to flesh out why an abortion would be the toughest decision in a woman’s life.

Could it be because it involves an abortionist taking the life

Forty-five new pro-life members sworn into U.S. House of Representatives

By Dave Andrusko

Understandably, almost the entirety of the news coming out of the January 3rd swearing in of the Members of the House of Representatives was the very narrow margin by which pro-abortion Nancy Pelosi was chosen once again to be Speaker and some eye-rolling, nonsensically PC-on-steroids verbal idiocies.

Pelosi received only 216 votes—less than a majority of 218—but she prevailed because 216 was a majority of the Members present. “Two members, both Democrats, voted for somebody else and three members—also Democrats—voted present,” Matthew Boyle reported.

Of course, this diminution in support from her caucus will not slow Pelosi in her attempts to pass pro-abortion legislation and eliminate the life-saving Hyde Amendment.

If anything, it will make her more determined.

For us, the larger story was the swearing in to the 117th Congress of many, many new

would increase to 19 if pro-life challenger Claudia Tenney defeats pro-abortion incumbent Rep. Anthony Brindisi in New York’s 22nd Congressional

Together, that means, if Tenney carries the day, a whopping 14 House seats will have flipped from pro-abortion Democrats to pro-life Republicans.

That reality is music to the ears of pro-lifers. “I’m very excited about the new GOP members in the 117th Congress!,” said Karen Cross, NRLC Political Director. “Every one of them is pro-life and will work with us to protect unborn children!”

This massive turnabout was accomplished in the face of an avalanche of pro-abortion money. But resources wisely spent and the faithful efforts of millions of pro-lifers overcame not only the huge money disadvantage but also non-stop media predictions that pro-abortion Democrats would add seats.



GOP Leader Kevin McCarthy swears in pro-life Congress-woman Michelle Fischbach (R-MN) accompanied by husband Scott Fischbach, Executive Director of Minnesota Citizens Concerned for Life.

pro-life women and men.

According to National Right to Life, there are 18 new pro-life women. That number

District. Tenney leads by 29 ballots out of 311,695 cast.

Other good news. There are 27 new pro-life men!



NRLC 2021 Yearbook Patron

Annual National Right to Life Convention ★ June 25 & 26 ~ Herndon, VA

Make a special tribute to your loved ones, friends, or heroes while supporting the largest pro-life grassroots educational event in the country, the National Right to Life Convention.

In memory of

OR

In honor of

- | | |
|--|--|
| <input type="checkbox"/> TITANIUM \$1000 | <input type="checkbox"/> DIAMOND \$500 |
| <input type="checkbox"/> SILVER \$100 | <input type="checkbox"/> ROSE \$25 |
| <input type="checkbox"/> PLATINUM \$750 | <input type="checkbox"/> GOLD \$250 |
| <input type="checkbox"/> BRONZE \$50 | <input type="checkbox"/> ANGEL \$10 |

All patrons must be postmarked by May 25, 2021.

Please make checks payable to NRLC 2021 and mail with this form to:
National Right to Life Conventions, 1446 Duke Street, Alexandria, VA 22314
Or, online at nrlconvention.com.

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

E-MAIL _____ PHONE _____

* Contributions to National Right to Life Conventions, Inc. are not deductible for Federal Income Tax purposes.

Shining a light to illuminate the truth and standing strong for the right to life

By Laura Echevarria, NRL Director of Communications and Press Secretary

One of my favorite movie, television, and book genres is classic mysteries. I enjoy the hunt for clues and putting them together like a puzzle to solve the crime.

My favorites include “The Thin Man” movies based on the Dashiell Hammett books, books by Agatha Christie, Dorothy L. Sayers, G.K. Chesterton, Sir Arthur Conan Doyle—these classic writers of classic mysteries were well educated in history, grammar, debate, language, philosophy, and logic.

Growing up with an interest in debate and logic naturally led to my joining the debate team in college where the focus was on argumentation—in its truest sense.

An argument, in its simplest form, consists of at least three parts according to the late British philosopher Stephen Toulmin. His summary of an argument consisted of the claim, data, and warrant. The claim or assertion had to have data to back it up and the warrant was the connection—either implied or explicit—between the claim and the data.

Today, those basic elements are lacking in most arguments. But this is not true for the pro-life movement’s arguments for the right to life. We assert that an unborn baby is alive, a member of the human family, and, as such, is deserving of legal protection.

Our claim is grounded in logic, science, and facts. As such, the warrant—or connection—between the science data and a baby’s life is clear.

Sadly, as we move further away from the classical

television shows that seem to make a character’s abortion the moral equivalent of getting a tattoo, pro-abortion arguments stumble over logic, ignore science, and treat facts as if they are irrelevant.



educations where logic was grounded in the facts and fallacies were rejected, we are now facing a system where logic is rejected. How someone “feels” supersedes everything else.

From “Shout Your Abortion” campaigns by pro-abortion ideologues to movies and

The NRL Communications department sees this constantly when working with the media. At many media outlets, there is a deeply embedded assumption that the pro-abortion side is accurate and contemporary while the pro-life side is wrongheaded and out of date.

As bad as that is, there are also

the arguments—even among the mainstream media—that pro-abortion ideology is “on the right side of history” and that the pro-life movement is a modern invention of the conservative movement.

These arguments fail the straight face test, yet they are promulgated by pro-abortion groups and too many members of the media repeatedly.

But the facts are the opposite. For much of history, there was a consensus that abortion and infanticide were indefensible.

The right to life is based in both science and historical reality. Many of the world’s faiths recognize the living child in her mother’s womb as nothing short of sacred.

Whether interacting with the media, the public, or state and federal elected officials, the pro-life movement unapologetically promotes the right to life and stands in the gap to prevent pro-abortion policies from gaining ground.

As we begin 2021, we face many challenges but the one thing we are not lacking in is the truth. Truth is—and always has been—on our side.

As we move forward, we will do what we have always done in the face of the opposition: shine a light to illuminate the truth and stand strong for the right to life.

Grim 10th anniversary of Grand Jury report about abortionist Kermit Gosnell

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

It was a crime shocking in its scope and horrendous in its aftermath—hundreds of newborn babies believed to have been murdered at the hands of a long-time abortionist.

This Thursday it will be exactly ten years since a Philadelphia grand jury issued its scathing report detailing what went on in Kermit Gosnell's Women's Medical Society which the District Attorney rightly called a "House of Horrors."

The grand jury report chronicles the cruel fate of baby after baby who lost their lives in the West Philadelphia "medical" facility. Although he would be convicted of three counts of first degree murder—Gosnell would deliver huge babies alive and then murder them by cutting their spinal cords—authorities suspected the number was in the hundreds.

The opening paragraph of the grand report is just as chilling as it was when it was released January 11, 2011:

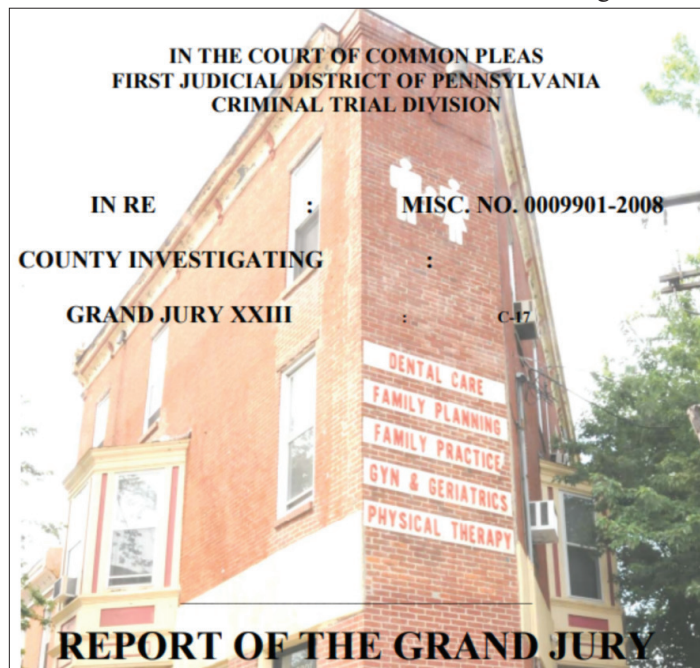
"This case is about a doctor who killed babies and endangered women. What we mean is that he regularly and illegally delivered live, viable babies in the third trimester of pregnancy—and then murdered these newborns by severing their spinal cords with scissors. The medical practice by which he carried out this business was a filthy fraud in which he

overdosed his patients with dangerous drugs, spread venereal disease among them with infected instruments, perforated their wombs and bowels—

The doctor joked that this baby was so big he could 'walk me to the bus stop.' Another, Baby Boy B, whose body was found at the clinic frozen in a one-gallon spring-water bottle, was at least 28 weeks of gestational

the building; they had to threaten to call the police. They eventually found her inside, bleeding and incoherent, and transported her to the hospital, where doctors had to remove almost half a foot of her intestines.

"On another occasion, Gosnell simply sent a patient home, after keeping her mother waiting for hours, without telling either of them that she still had fetal parts inside her. Gosnell insisted she was fine, even after signs of serious infection set in over the next several days. By the time her mother got her to the emergency room, she was unconscious and near death."



and, on at least two occasions, caused their deaths. Over the years, many people came to know that something was going on here. But no one put a stop to it."

"Baby Boy A. His 17-year-old mother was almost 30 weeks pregnant—seven and a half months—when labor was induced. An employee estimated his birth weight as approaching six pounds. He was breathing and moving when Dr. Gosnell severed his spine and put the body in a plastic shoebox for disposal.

age when he was killed. Baby C was moving and breathing for 20 minutes before an assistant came in and cut the spinal cord, just the way she had seen Gosnell do it so many times."

The grand jury report reminds us that Gosnell was also a butcher of women:

"One woman, for example, was left lying in place for hours after Gosnell tore her cervix and colon while trying, unsuccessfully, to extract the fetus. Relatives who came to pick her up were refused entry into

In the end, prosecutors could only bring forth a handful of criminal charges against Gosnell because he had destroyed so many records. He was ultimately convicted of murdering three newborn babies and of involuntary manslaughter in the death of a female patient, Karnamaya Mongar. He is now serving three consecutive life sentences for his grisly crimes.

Advocates for children and women will never forget Gosnell's horrific crime spree, and continue to work every day to ensure that justice is done on behalf of his many victims.

An interview with the 2020 National Right to Life Video Contest Winner and the woman whose story she told

Editor's note. National Right to Life had the pleasure of interviewing Emily Martin, the film-maker and winner of the 2020 National Right to Life Video Contest, and Katrin Young, the subject of her video. You can watch the video at <https://youtu.be/39WXBCbD-EQ>

NRLC: Where did the idea for this video come from?

Emily: After seeing a video testimony at church, I realized how impactful a personal abortion story can be.

Katrin: I had told Teresa Strack, who was the President of Montgomery County Right to Life, that I would be willing to share my story with anyone, anytime.

NRLC: How did you get interested in the right to life movement?

Emily: My parents have taught me about Christianity my whole life. As a Christian, I understand that every person is created in the image of God. It hurts me to see so many women being coached and supported to believe that their baby is not a person. So I wanted to get involved to hopefully help influence women to make a decision for life.

Katrin: I wanted the opportunity to come alongside other women struggling with the fear of unplanned pregnancy. I want to let them know that they are not alone and to warn women of the regret that comes with an abortion decision. I also want people who are pro-life to understand that mercy, love, and grace are absolutely necessary when dealing with the abortion issue. God's forgiveness is offered to everyone for all sin.

NRLC What message do you hope the video conveys?

Emily: I hope this video conveys the impact of the decision for abortion. That it is not something that will ever be forgotten. The mother will live with the decision for the rest of her life. I know there are many women like Katrin who have been through the same thing. I hope it will inspire women to share their stories, and help others avoid the lifelong



Katrin Young

hardships of choosing abortion.

Katrin: I hope that the words I spoke convey that while it may be frightening to face an unplanned pregnancy, you are not alone. God sees you, God loves you, and will not abandon you- even if you make decisions for your life that you end up regretting.

NRLC What do you hope people your age understand about the right to life argument?

Emily: I can't begin to imagine the fear and uncertainty that comes with an unplanned pregnancy. But whether or not it's planned, the human being that results has every right to live as their parents do. My hope is that people will see the truth and give the opportunity of life to that little human inside. Life is a precious gift

from God, and should never ever be considered optional.

NRLC: What was your reaction to hearing Katrin's story for the first time?

Emily: It was the first time I had ever heard someone tell the story of their choice for abortion. Her sorrowful regret had a strong impact on me and made me realize how destructive abortion is to the mother. I really respect

you were younger. Can you elaborate on the importance of accepting the feeling of not being abandoned and not being "meant to be used and discarded?" What should we do or say for women we know facing difficult pregnancies?

Katrin: Abortion feeds on fear. A woman who thinks about abortion is scared--this baby will change her life. Who will be her support system? Who will be there for her if she decides to keep this baby? Who will help? Where is the dad in this picture? For so many women- once pregnancy happens--the man flees, leaving her feeling that she was only good for one thing. Now that a sexual relationship has turned into a baby, life got too serious too quickly. Now not only is she scared, but also feeling used, discarded, and abandoned.

What we can say for women facing difficult pregnancies is, "I'm here to help, I'm here to love you, and see you through this." Lead her to resources like pregnancy centers, where she can see an ultrasound of her baby, get counseling to talk through her fears, receive items for her baby, and take parenting classes. For those of us who have been through it ourselves, we can come alongside and understand what she's going through.

An important thing to remember, if a woman facing a difficult pregnancy decides to get an abortion, we can love her anyway. We all make mistakes, and Christ chose to die for us while we were still sinners. For a woman to feel truly loved, she needs to see Christ's love in action and receive the gift of His love for herself.

her courage to tell her story knowing that some people will judge her for her decision.

NRLC: How do you see yourself involved in the right-to-life movement in 5 or 10 years?

Emily: Protecting the life of the unborn is very important to me. God has given me a passion for film production, and I hope to be able to use all that he provides to give a voice to those who can't speak for themselves. Video testimony and documentary stories are powerful resources to inform people and reveal the truth about this lifelong decision.

NRLC: Katrin, In the video, you share some words to women who find themselves in a situation similar to the one you found yourself in when

‘The ultimate reward’: Surgery in the womb saves babies from potentially fatal condition

By Nancy Flanders

Pregnant 31-year-old Luissa underwent a medical procedure in 2016, but the surgery wasn't for her. It was for her preborn baby girl who had been diagnosed with congenital diaphragmatic hernia (CDH), a rare and often fatal condition affecting one in 4,000 preborn children who have a hole in the diaphragm — the thin sheet of muscle that separates the chest from the abdomen.

The hole causes the liver or bowels to move up into the chest cavity, which prevents the lungs from fully developing, according to *The Guardian*. Without the procedure, babies with severe CDH have a 15-20% chance of survival. With the procedure, their chance of survival increases to about 50%. It's not a definitive cure, but it offers hope.

The procedure was pioneered by Professor Kypros Nicolaides, a world-renowned fetal medicine specialist who works at NHS' Kings College Hospital in London and was elected to the US National Academy of Medicine for improving the care of pregnant women around the world. Nicolaides led the development of the surgery, which is performed at 26-28 weeks and is believed to be able to help in at least one-third of preborn children with CDH.

Writing for *The Guardian*, Caroline Davies said Nicolaides, called “Prof,” is known for his skilled hands and “trademark banter.” “Crucially, though,” she writes, “[parents] benefit from his many years of pioneering research and experience, which reassures

them they are giving their babies every chance in the world.”

Nicolaides performed fetal endoscopic tracheal occlusion (Feto) in which he inserted a miniature latex balloon through the wall of Luissa's uterus and through the mouth of her baby. He put the baby girl to sleep with an anesthetic. Then he placed the balloon in the preborn baby girl's windpipe and inflated it with water until it blocked the airway. The balloon stayed there, trapping fluid in the baby's lungs and thereby forcing the lungs to expand and develop, until 35 weeks, when it was removed. Davies wrote in *The Guardian*:

“See, that is the spine, the heart is on that side ... and next to it, this black thing, that is the stomach. It should not be there, it should be further down. That's the issue,” he tells Galloso, as who is on her back, looking at her baby on the overhead monitor as her fiancé, Stuart, and her mother, Jill, sit alongside, their eyes glued to the grainy ultrasound images. [...]

Precision is everything. Nicolaides expertly guides the fetoscope towards the baby's mouth and an incredible visual journey begins.

“That is the nostril. That is the upper lip there. That is the mouth, see the gums,” he says as the fetoscope continues over the

baby's tongue, past the uvula and tiny vocal cords and epiglottis.

“Now we are going down the windpipe,” he says. “And there. That is where we will put the balloon.”



The surgery meant Luissa's baby could be delivered safely and alive. She then would have to undergo surgery to correct the CDH and put her organs that had moved through the hole back to their correct positions. But the prenatal surgery meant her lungs had developed and she could breathe.

As a medical student at King's, Nicolaides was there at the same time as Professor Stuart Campbell, a pioneer of obstetric and gynecological ultrasound. “Nicolaides was ‘overwhelmed’ by the concept of seeing a foetus before birth, and within a few years was one of the world's leading in foetal medicine,” noted *The Guardian*.

Nicolaides' office walls are covered in thousands of pictures of the babies he has saved — babies who could have been lost to abortion. In Iceland, one study showed

that seven out of eight children diagnosed prenatally with CDH were killed through abortion.

In October of 2019, Nicolaides was diagnosed with Multiple Myeloma, a blood cancer. After the COVID-19 pandemic hit and his life would be at risk if

he were to contract the virus, he began performing prenatal surgery through FaceTime, directing his team. “My dream is to continue to work,” he told *Parikiaki.com*. “I intend to carry on working until I die; there is no such concept in my mind as retirement.”

Though there is intense pressure to save babies, he knows some may die no matter what he does, and he becomes emotionally attached to all of them. “There is no better reward in life than a woman coming along to show you her baby,” he told *The Guardian*, “and sending photographs to say: ‘Thank you, this baby would not have been born.’ How can you judge that? Against what? That is the ultimate reward.”

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

South Carolina Citizens for Life hosts annual Proudly Pro-Life Weekend

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

COLUMBIA, SC (January 11) – South Carolina Citizens for Life held its annual Proudly Pro-Life Weekend January 8-9, 2021, featuring actress Ashley Bratcher, star of the pro-life film **Unplanned**.

The weekend events included the Proudly-Pro-Life Dinner Friday night, and the 48th annual Stand Up for Life March and Rally on Saturday. Approximately 1,000 pro-life people attended one or both of the weekend events. The Stand Up for Life March and Rally has been held every year since 1974 regardless of weather or other impediments.

Gov. Henry McMaster and First Lady Peggy McMaster attended the dinner with Gov. McMaster introducing Miss Bratcher who portrayed Abbey Johnson, author of the book *Unplanned* on which the film **Unplanned** was based.

Lt. Governor Pamela Evette and members of her staff and family attended the dinner and the March and Rally on Saturday. Approximately 500 marchers, lead by the Knights of Columbus Color Guard, enjoyed sunny but slightly chilly weather for the March and Rally at the State House grounds.

Lt. Governor Evette introduced Miss Bratcher at the Rally. At both events, Miss Bratcher spoke compellingly about her role as a former Planned Parenthood facility director who became pro-life after watching an ultrasound-guided abortion during which she witnessed the baby's struggle to survive. Miss Bratcher recounted her own pro-life story that she became aware of during the filming of **Unplanned**.

South Carolina Citizens for

Life presented two special awards to members of the South Carolina House of Representatives, including to House Speaker Jay Lucas for his leadership in getting pro-life laws passed, and to Representative John McCravy who started the House Family Caucus to emphasize passage of pro-life and pro-family legislation. Honored also with the SCCL Lifetime Achievement Award was long-time SCCL Senior Policy Advisor and lobbyist Joe Mack who garnered enormous respect of members of the General Assembly and their staff. He retired at the age of 81.

SCCL President Lisa Van Riper emceed both events. "I saw this weekend the people in South Carolina committed to continuing to protect the lives of the unborn and medically fragile," she said.

Despite the challenges of COVID-19, she said, "We need never to forget that after the scourge of COVID-19 ends, we still will be facing the scourge of abortion, infanticide and euthanasia. We must continue to rid society of the scourge of abortion, infanticide, and euthanasia with as much energy as we work to rid society of COVID-19 virus."

South Carolina Citizens for Life complied with every COVID-19 precaution recommended by the Centers for Disease Control and Prevention, the South Carolina Department of Health and Environmental Control, and pro-life Governor McMaster's Executive Order for events with more than 250 attendees.



From left are SC Congressman Joe Wilson, R-CD2, Lt. Governor Pamela Evette, husband David Evette, son Jackson Evette, daughter Amanda Nesta and her boyfriend Simon Webb. Photo courtesy of Micah Rae, Special Assistant to the Lt. Governor.



Memorials & Tributes

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

In Memory of

Joan P. Allgaier

Michael Allgaier

Billie M. Dines

Bates County Nostalgia Band

Pamela Dodds

Delbert & Joyce Guffey

Wayne & Josephine Schapeler

Annette White

Larry Larsen

Anne Marie Berthiaume

Nelson & Jean Brandt

Roseann Larsen

Florence Kever

Knights of Columbus Council 2027

Been & Mary Beth Peters

Vince & Nancy Samson

John & Carolyn Troesser

Tom & Kathy Wolinski

Frances Negrette

Theresa Welker

Earl Pittman

Verlin Beam

George & Tina Brant

Rodney & Marjorie Heelan

Mary & Martin Kraus

Michael & Geraldine Miller

Carl & Judith Moeller

Buck Sargent

Bobbi Gillispie

Jean Joyce

Gloria Sargent

Robin Walker

Jenny Lee Strait

Deborah Bush

Kathleen Wischmeyer

Thomas Schultee

Dorothy Wolfe

Wayne Wolfe

In Honor of

Happy Birthday to Emily Kastens

Adrienne Stengel

January 2021

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



Memorials & Tributes

Contribution
amount



Your name _____

In memory of _____ In honor of _____

Your address _____

Name/Address for acknowledgment card _____

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

Post-Election: Pro-Abortion Organizations Celebrating and Demanding

By Parliamentary Network for Critical Issues

Editor's note. This is excerpted from a post that appeared on the Parliamentary Network for Critical Issues website.

[A]bortion activists are busy celebrating what they believe will be a Biden-Harris administration that is completely committed to advancing abortion on demand domestically and globally as a so-called reproductive right and as a component of essential health care. They envision US funding for abortion domestically and internationally; increased access to abortion-inducing drugs; and reversal of the Trump administration's strong pro-life stand at the United Nations. These of just a few of the actions in the pro-abortion NGO roadmap for the first days of a Biden administration—*Blueprint for Sexual and Reproductive Health, Rights, and Justice*.

President Trump's Protecting Life in Global Health Assistance Policy, previously known as the Mexico City Policy, is the #1 pro-abortion target internationally. Pro-abortion activists seek US funding to international organizations working in health and family planning that perform or promote abortion. IPPF, one of the global abortion industry giants, was one of the organizations denied US funds under this policy.

IPPF states that it "calls on President-elect Biden to keep to his word of signing an executive order on his first day in office to repeal the harmful

Global Gag Rule aka the Mexico City Policy. Further to this, we are counting on the Biden administration to push for a permanent repeal to this policy...".

The Center for Reproductive Rights also wants quick action to overturn President Trump's



pro-life policies which it considers to be "harmful". It stated,

"After inauguration on January 20, President Biden and his administration must move quickly to reverse the harmful policies of the Trump administration."

The first Executive Order it wants to see enacted is to "rescind the Global Gag Rule and the Domestic Gag Rule" [Hyde Amendment] and it hopes to see funding restored to two international entities that support abortion—the World Health Organization (WHO) and the United Nations Population Fund (UNFPA).

Another U.S.-based organization working to advance abortion globally, Ipas, also anticipates the overturning

of President Trump's international pro-life policies. Its election statement—US Election Outcome Offers Hope for Justice—seeks the elimination of unborn children in the womb and states,

"With the election of Joe Biden and

Helms Amendment... And, we will work to reshape the U.S. role in the world by advocating for the Abortion is Health Care Everywhere Act that will repeal the Helms Amendment, and usher in a new era of health rights for women around the world..."

Gutmacher issued a detailed list of policies it wants a Biden-Harris administration to overturn in the statement *Reviving Sexual and Reproductive Health and Rights in the Biden-Harris Era* which focuses on domestic policies but also seeks the overturning of the Protecting Life in Global Health Assistance Policy. It calls on the Biden administration to "rejoin and restore funding to WHO, restore funding to UNFPA, and champion sexual and reproductive health and rights on the global stage."

Planned Parenthood Action Fund's statement—*Finally! Seven Reasons to Celebrate the Biden-Harris Win*—details domestic policies it wants to see overturned and includes:

"We also expect the Biden White House to reverse the global gag rule, which bans overseas groups from getting U.S. funding if they provide or even mention abortion."

Kamala Harris, Ipas—along with our partners around the world—looks to a brighter future...Our commitment to our mission—to ensure that access to sexual and reproductive health and rights, particularly abortion and contraception, is improved around the world—is stronger than ever...We are confident that the new U.S. leadership supports the belief that everyone should be able to make their own decisions about their health and their future—without harmful restrictions mandated by U.S. foreign policies, like the Global Gag Rule or the

See "Demanding," page 16

Indiana's 18-Hour Ultrasound Law Goes Back Into Effect

By Dave Andrusko

On January 1, at long last, Indiana's 18-hour ultrasound law went back into effect.

As *NRL News Today* readers may recall, last August Planned Parenthood of Indiana and Kentucky [PPINK] dropped its suit against the law which was part of the 2016 Dignity for the Unborn Act signed by then-Gov. Mike Pence. The law requires that women considering abortion be provided the opportunity to view a fetal ultrasound at least 18 hours prior to an abortion.

From July through December 2016, while the ultrasound law was in effect, there were 496 fewer abortions in Indiana compared to the period of July

through December 2017, when the ultrasound provision was blocked and abortions spiked to a 13 percent increase.

The law was initially blocked by a federal judge's ruling in 2017. After the ruling was upheld by a federal appeals court, the U.S. Supreme Court stepped in, vacated the federal appeals court's decision on July 2, and sent the case back for further consideration.

When PPINK withdrew its lawsuit, pro-life Indiana Attorney General Curtis Hill said, "For women considering abortions, ultrasounds are an important part of informed-consent counseling. Anyone interested in protecting

women's health, including their mental health, should support giving them as much information as possible to aid their decision-making. Empowering women with knowledge is fully consistent with the U.S. Constitution."

"Indiana's ultrasound law will save lives," said Indiana Right to Life President and CEO Mike Fichter. "Women deserve the opportunity to see an ultrasound image of their unborn baby at least 18-hours before an abortion in order to have ample opportunity to reconsider an abortion. In the brief time this law was in effect in 2016, abortions dropped sharply in Indiana,

only to rise quickly as soon as the law was blocked. Now



*Indiana Attorney General
Curtis Hill*

we hope to see abortions drop once again, this time for the long term."

Post-Election: Pro-Abortion Organizations Celebrating and Demanding

From page 15

Three pro-abortion Non-Governmental Agencies [NGOs]—Ipas, CHANGE, and Global Justice—had a virtual discussion on December 10 entitled: "A Feminist Vision for #SRHR & Justice in the Biden Administration" where the conversation centered on "setting a progressive, feminist agenda for SRHR in US foreign

policy, and the need to go beyond just undoing the Trump admin's harm."

The UN Special Rapporteur on Right to Health, Dr. Tlaleng Mofokeng@drtlaleng not only tweeted a call for Congress to overturn the pro-life policy but called for passage of the Global Health, Empowerment and Rights Act (Global HER

Act) to permanently bar any future administrative actions from preventing U.S. funds to international organizations that perform or promote abortion:

We are calling on Congress to #EndGlobalGag and pass the #GlobalHERAct!

The U.N.'s top health expert also tweeted her hopes to celebrate passage of the HER Act in Washington:

I can't wait to be back and that day, we will surely be dancing on The Hill because HER act will be passed.

A deeper dive into the 2020 election numbers reveal truths not highlighted in the major media

By Dave Andrusko

Kudos to Hotair's John Sexton for alerting us to a fascinating analysis that appeared the *New York Times*. His title—"NY Times: Latino And Asian Neighborhoods Shifted Red In 2020"—is better than the *Times*'—"Immigrant Neighborhoods Shifted Red as the Country Chose Blue"—but both capture the lead three paragraphs of the analysis written by Weiyi Cai and Ford Fessenden:

Across the United States, many areas with large populations of Latinos and residents of Asian descent, including ones with the highest numbers of immigrants, had something in common this election: a surge in turnout and a shift to the right, often a sizable one.

The pattern was evident in big cities like Chicago and New York, in California and Florida, and along the Texas border with Mexico, according to a New York Times analysis of voting in 28,000 precincts in more than 20 cities.

Joseph R. Biden Jr. beat President Trump in almost all of these places en route to his record popular vote victory. But the red shifts, along with a wave of blue shifts in Republican and white areas, have scrambled the conventional wisdom of American politics and could

presage a new electoral calculus for the parties.

Two thoughts. First, given how well President Trump did overall—he accumulated more than 74 million votes, 10



million more than in 2016—if you take into considerations the improvements noted above, you really do have to wonder how he lost.

Second, an intriguing piece that ran at *NBC News* gives you a real sense of how incredibly close this race was. [Bear in mind that the results in the “battleground” states were always going to determine the outcome.]

Dante Chinni writes

But if you look just at the states that put Biden over the top in the Electoral College, he won by fewer votes than Trump did in 2016.

Throughout Trump's time in the White House, much has been made of how he won the presidency by under 78,000 votes in three states. And that

at a second term for Trump, even though Biden would have won the national popular vote by 7 million votes. [Underlining added.]

To return to the *NYTimes* analysis for one last look, Cai and Fessenden write

Thousands of new voters across the country turned out in areas with significant numbers of Latinos and residents of Asian descent — populations whose participation in past elections has lagged. ...

But in a divided American electorate, any shift can be consequential. Already the shift appears to have changed outcomes in a number of congressional races. [Underlining added.]

point was true. Trump won because of narrow margins in Michigan, Pennsylvania and Wisconsin.

But the margins this year were even tighter in the three states that put Biden over the top in the Electoral College. He won Arizona, Georgia and Wisconsin by a total of less than 45,000 votes. ...

In other words, a swing of a few thousand votes in a few states this year and the country could have been looking

As we've discussed before, while so much attention has understandably focused on the questionable vote tallies for President in key states, what gets lost is President Trump's coattails. We discuss on page one how at least 13 Congressional seats flipped from pro-abortion to pro-life. These pro-life pickups are a major reason the Democrat majority in the House shrank rather than (as widely predicted) increased.

With a race yet to be finalized, there are 18 (potentially 19) new pro-life Republican women in the House of Representatives and more than a dozen new pro-life Republican men!

President Trump Files UN Declaration Saying “There is No International Right to Abortion”

By Stefano Gennarini, J.D.

The U.S. government has officially filed a pro-life declaration with the UN Secretary General. Joined by 34 other countries, the document enshrines the Trump administration’s pro-life diplomacy on the official record of the General Assembly.

“The United States strongly supports the dignity of all human beings and protecting life from the moment of conception throughout the lifespan,” Ambassador Kelly Craft wrote to UN Secretary General Antonio Guterres transmitting the *Geneva Consensus Declaration on Promoting Women’s Health and Strengthening the Family*.

Following the letter, the declaration was issued as an official document of the United Nations last week and circulated on December 11, after having been translated into all six official UN languages.

“The United States, along with our like-minded partners, believes strongly that there is no international right to abortion and that the United Nations must respect national laws and policies on the matter, absent external pressure,” Ambassador Craft added.

Craft instructed the Secretary General to share the declaration with member states more broadly and to include it on official record of the General Assembly,” inviting all Member States to sign the declaration.”

While the declaration is not binding, the fact that it is now on the record of the General Assembly has legal significance. It officially documents the pro-life posture of the 34 countries who co-signed the declaration. This may influence how UN agencies implement UN policies reflected in the Declaration, including on issues such as maternal health and women’s policies.

The declaration states that “sexual and reproductive health,” a term often used by UN agencies as synonymous with abortion, “must always promote optimal health, the highest attainable standard of health, without including abortion.”

This statement of itself may not prevent future abuses by UN agencies who are likely to continue to promote abortion. But the declaration could help inhibit pro-abortion advocacy from the UN system as well as encourage UN member states who signed the declaration to hold the UN system accountable.

The *Geneva Consensus Declaration* was signed by 32 countries on October 22, 2020. It reaffirms long-established norms of international law on the family, the protection of life, and protection of motherhood.

The declaration reaffirms the “inherent dignity and worth of the human person” and that “every human being has the

inherent right to life,” citing the Universal Declaration of Human Rights. It also reaffirms that the “the child... needs special safeguards and care... before as well as after birth,” citing the 1959 Declaration on the Rights of the Child.

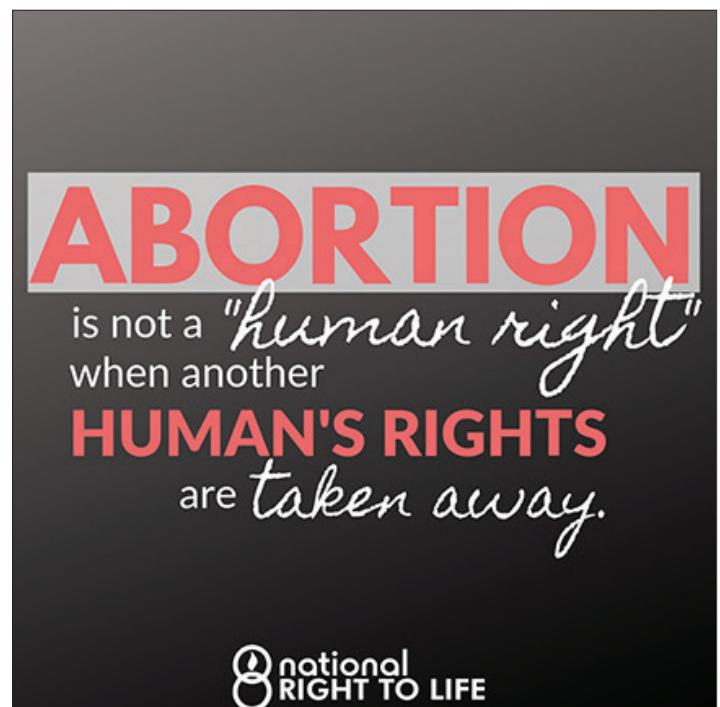
The declaration even reaffirms that “the family is the natural and fundamental group unit of society and is entitled to protection by society and the State.” This is a phrase in several international human rights treaties, following the Universal Declaration of Human Rights.

These norms have become contentious at UN headquarters because of radical forms of

feminism and gender ideology. They were vehemently opposed in UN negotiations by the Obama administration.

A Biden administration is expected to continue to oppose such statements, as the Obama administration did. Abortion groups are calling on Biden to withdraw from the declaration. But it is unclear what legal options he might have other than making more statements that run counter to U.S. obligations under international law.

Editor’s note. This appeared at C-Fam and is reposted with permission.



Extremist pro-abortion measure becomes law in Massachusetts

By Dave Andrusko

As we approached a final conclusion to Massachusetts over-the-top abortion proposal, the two-part question was whether pro-choice Gov. Charlie Baker would veto H. 5179, and, if so, would the House and Senate override his veto.

On Saturday—the day after Christmas—Baker vetoed H.5179. However, on December 28—three days after Christmas—the House overrode the veto on a vote of 107-46, followed by the Senate which did likewise by a vote of 32 to 8.

Dubbed “the ROE Act,” [it is actually an amendment to the Fiscal 2021 budget], it allows for abortions at and after a 24-week period, if merely deemed “necessary, in the best medical judgment of the physician, to preserve the patient’s physical or mental health,” replacing the current more stringent standard that requires that “continuation of the pregnancy will impose on [the mother] a substantial risk of grave impairment to her” physical or mental health.

“In addition, abortions at and after 24 weeks are allowed if there is a ‘lethal fetal anomaly,’ or if the fetus is incompatible with sustained life outside the uterus,” said Patricia Stewart, Executive Director of Massachusetts Citizens for Life. “However,” she continued, “the term ‘lethal fetal anomaly’ is ambiguous

and not defined, opening the door to massive abuse.”

Moreover, prior to the bill, the age at which teenage girls could obtain abortions without

becomes a legal option for the disposal of abortion survivors, like so much medical waste.”

The proposal passed by large measures in both the House and



parental consent was 18. It is now 16.

Then there is the situation when babies survive an abortion. In those instances, “the bill provides only that there must be ‘life-supporting equipment’ present in the room; it does not require the abortionist to actually use it,” Stewart added. “Without mandated use, infanticide

Senate. “The House and Senate sent the bill back to Baker after they rejected several of his proposed amendments including raising the age of consent back to 18,” Bob Katzen reported. Baker then “vetoed the entire bill,” which the legislature overrode today.

Massachusetts Citizens for Life President Myrna Maloney Flynn told *NRL News Today*

While we pause today to grieve for the many lives that will be severely damaged and lost as a result of the “ROE” Act, we anticipate, much as abolitionists did, the inevitability of a brighter tomorrow.

Pro-lifers know setbacks. What we don’t know how to do is give up, to look the other way.

We know the truth is worth pursuing! We know without a doubt that our supporters, by their advocacy over the last 24 months, changed minds and opened hearts, even our governor’s. And we look forward to continuing our work alongside the citizens of Massachusetts, who already know the value of human life and are eager to educate and support others and to ultimately illuminate the inherent right to life of the unborn.

As we have done since January 23, 1973, Massachusetts Citizens for Life will work tirelessly to make abortion not only illegal, but unthinkable. And we will prevail.

Pro-abortionists wash, rinse, repeat same tired laments about insufficiently PC treatment of abortion on television and in the movies

By Dave Andrusko

Steph Herold, while hardly a household name, is one readers of *NRL News* may well recall. Over the years we've written about her pro-abortion agitprop on several occasions (here, here, here and here, for example).

Herold brings new meaning to the idiom "verbal gymnastics." By that I do not mean simply that there is nothing the Abortion Industry can do that would ever/could ever even raise an eyebrow, and nothing you and I do that isn't awful times ten. That's par for the abortion apologist's course.

Rather it is her amazing ability to compartmentalize and to rob words of their meaning that is genuinely astounding.

My "favorite" was the time she announced it was unacceptable to call repeat abortions, repeat abortions.

Pardon?

Women have "multiple abortions," not repeat abortions, Herold instructed us. As I summarized her argument, there are no repeat abortions, "only a series of discreet, separate, don't-connect-the-dots abortions that are multiples of one."

Now, Herold appears to have landed her dream job. At

her twitter account, we learn she is a "Researcher studying abortion on TV & film" at the "Advancing New Standards in Reproductive Health (ANSIRH)."

The results of her latest "research" were reposted at *Yahoo News* under the headline, "In 2020, TV and film still couldn't get abortion right."

Calvin Freiburger wrote the following in 2015:

Now, ANSIRH is back with another dire warning about abortion's portrayal in media. This time, the problem is that TV characters who sought abortions between 2005 and 2014 were disproportionately white, young, and affluent, which threatens to give audiences unfair and unrealistic impressions of both the women who abort and why they choose to do so...

That particular study was authored by Gretchen Sisson and Katrina Kimport. Sisson, as it happens, is Herold's co-author in the study, the results

of which were reposted at *Yahoo News*.

So what, you ask? This is almost word for word what Herold and Sisson found five years later.

But the larger point is the Abortion Industry—and ANSIRH is both deeply embedded and a big-time apologist—want every program that touches on abortion to be a



To which they would doubtless respond, Aha! See, nothing has changed!

In fact, as the analysis—which first appeared in *The Conversation*—reveals, a lot has changed. But if I gave examples of the changes, I would be accused of caricaturing their argument, even though it would be their examples. They are, shall we say, not exactly the experiences of everyday Americans.

PSA for the "safety" of abortion bundled with a lament that those deplorables keep passing laws in state legislatures that impinge on the Abortion Industry's money-making endeavors.

Just as there will never be enough abortions for the likes of Herold and ANSIRH, so, too, there will never be a sufficient flood of movies celebrating the slaughter of unborn children.

37th anniversary of “Sanctity of Human Life” Sunday, January 17, rapidly approaching

By Dave Andrusko

“Abortion has denied them the first and most basic of human rights, and we are infinitely poorer for their loss”
— Ronald Reagan

My great admiration for pro-life President Ronald Reagan’s eloquence and powers of persuasion is no secret to even casual readers of *NRL News*. I have written about those qualities dozens of times, often in the context of his extraordinary essay turned into a small book, “The Conscience of a Nation,” but also in his proclamation of the national “Sanctity of Human Life Sunday.”

The date is always the Sunday closest to the anniversary of the January 22, 1973 *Roe v. Wade* decision. This year, it is January 17.

President Reagan’s genius was an uncanny capacity for cutting through superficialities to get to the core issues. Mr. Reagan demonstrated that the abortion fight is not over when life begins—that was old hat even in the early 1980s. Everyone understood that human life begins at conception. The divide was over what **value** we place on that vulnerable life.

President Reagan understood fully that in the final analysis we either **accept** or **ascribe**. That is, as a nation we either accept that our equality before the law is an endowment to all of us from our Creator, or we hold that we can ascribe worth/value/protection of the law to whomever we please, based on some arbitrary criteria we dream up.

Another way of saying this is that President Reagan believed fervently in the equality of life ethic while pro-abortionists subscribe to the quality of life ethic.

In 1984, President Ronald Reagan designated Sunday, January 22, as Sanctity of Human Life Day. This proclamation was another example of his ability to prod our conscience, of how he could gently offer reminders that we are in this together.

The opening paragraph captures the distilled essence of the pro-life commitment to the equality of all life, not just to the planned and the perfect:

The values and freedoms we cherish as Americans rest on our fundamental commitment to the sanctity of human life. The first of the “unalienable rights” affirmed by our Declaration of Independence is the right to life itself, a right the Declaration states has been endowed by our Creator on all human beings — whether young or old, weak or strong, healthy or handicapped.

To President Reagan, as it was/is to all pro-lifers, legal protection is not doled out, based on power rankings. Every single one of us comes before the bar of justice as equals (there’s that word again).

Rather than paraphrase President Reagan’s 1984 message, and rob it of its power, let me quote his remarks in their entirety:

Since 1973, however, more than 15 million [now over 62 million] unborn children have died in legalized abortions — a tragedy of stunning dimensions that stands in sad contrast to our belief that each life is sacred. These children, over

tenfold the number of Americans lost in all our Nation’s wars, will never laugh, never sing, never experience the joy of human love; nor will they strive to heal the sick, or feed the poor,



*Pro-life President
Ronald Reagan*

or make peace among nations. Abortion has denied them the first and most basic of human rights, and we are infinitely poorer for their loss.

We are poorer not simply for lives not led and for contributions not made, but also for the erosion of our sense of the worth and dignity of every individual. To diminish the value of one category of human life is to diminish us all. Slavery, which treated Blacks as something less than human, to be bought and sold if convenient, cheapened human life and mocked our dedication to the freedom and equality of all men and women. Can we say that abortion — which treats the unborn

as something less than human, to be destroyed if convenient — will be less corrosive to the values we hold dear?

We have been given the precious gift of human life, made more precious still by our births in or pilgrimages to a land of freedom. It is fitting, then, on the anniversary of the Supreme Court decision in *Roe v. Wade* that struck down State anti-abortion laws, that we reflect anew on these blessings, and on our corresponding responsibility to guard with care the lives and freedoms of even the weakest of our fellow human beings.

Now, Therefore, I, Ronald Reagan, President of the United States of America, do hereby proclaim Sunday, January 22, 1984, as National Sanctity of Human Life Day. I call upon the citizens of this blessed land to gather on that day in homes and places of worship to give thanks for the gift of life, and to reaffirm our commitment to the dignity of every human being and the sanctity of each human life.

In Witness Whereof, I have hereunto set my hand this 13th day of January, in the year of our Lord nineteen hundred and eighty-four, and of the Independence of the United States of America the two hundred and eighth.
— Ronald Reagan

Birth rates for babies with Down syndrome drop by over 50% in Europe

By Cassy Fiano-Chesser

A new study from Massachusetts General Hospital (MGH) found disturbing data about plummeting birth rates for babies with Down syndrome. Authored by Dr. Brian Skotko of MGH's Down syndrome program, Gert de Graaf of the Dutch Down Syndrome Foundation, and Frank Buckley of Down Syndrome Education International, the study analyzed three years' worth of data from every country in Europe.

The results are heartbreaking.

The researchers aimed to find out how many babies with Down syndrome were being born in each country, as well as the overall number of people with Down syndrome living in each country. "People with DS were being counted sporadically, inconsistently, or not at all, depending on the country," Skotko said in a press release. "But without an accurate estimate, it's impossible for policymakers and advocacy organizations to determine how many resources and support services are needed for its Down syndrome population." For countries with gaps in the data, they used statistical modeling.

Part of the reason for the study was to determine a baseline for both birth rates and abortion rates for babies with Down syndrome before more countries in Europe roll out widespread non-invasive prenatal screenings (NIPS), sometimes referred to as non-invasive prenatal testing (NIPT); many European countries still do not publicly fund NIPS, but more and more

are expected to in the near future.

"Countries that are grappling with funding decisions for NIPS should certainly be having deep discussions about its impact on the country's Down syndrome population," Skotko said, adding that adequate support and information are also needed for families who receive a Down syndrome diagnosis.

Overall, the researchers found that the number of Down syndrome births had fallen overall throughout Europe by 54%. In southern Europe (countries including Spain, Italy, Greece, and Monaco), the decrease in births was highest, at 71%. In northern Europe (home to countries such as Denmark, Finland, Norway, and Sweden), it dropped by 51%. Eastern Europe (countries including Russia, Poland, Slovakia, and Hungary), the birth rate decreased 38%. Each individual country was different. For example, Spain

had the highest reduction in births at 83%, while the birth rate in Malta — considered one of the most pro-life countries in the world — hadn't changed at all.

Skotko said each country's individual religious and moral fabric made a difference, as did the availability of counseling for prenatal screenings, support networks, and opportunities for people with Down syndrome.

"In the U.S., people with Down syndrome have great opportunities to get an education, to fall in love, and to find satisfying jobs," he said, adding, "Massachusetts, for example, has an outstanding network of parents who are willing to talk about their lived experiences of raising children with Down syndrome to expectant couples. That nonprofit has trained parent groups in Brazil, Japan and elsewhere so they don't have to reinvent the wheel."

Many countries in Europe

have extremely high abortion rates for babies with Down syndrome, and put pressure on mothers to abort after a positive diagnosis. In Denmark, just 18 babies with Down syndrome were born in 2019. Iceland made international headlines after announcing its nearly 100% abortion rate for babies with Down syndrome. Nearly every abortion in Poland was due to disability. Women in the Netherlands are told they have a "moral duty" to abort if their babies have Down syndrome.

This widespread ableism is an endemic issue in Europe, and it is sentencing people to death simply because they're seen as "less than." The abortion of babies with Down syndrome is nothing less than a slow-motion genocide, happening right under people's noses, with few willing to speak out against it.

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



Study offers dubious claim that 7% of Women Attempt Self-Abortion in their Lifetimes

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

With a new year and a whole new team about to head the nation's healthcare agencies, a team of all-star abortion researchers has published a study claiming that 7% of women attempt a "self-managed" or do-it-yourself [DIY] abortion at some point in their lives.

There are significant problems with this study, as there always are from these advocates, but equally important is the reason for publishing this study when they did. This is simply the latest salvo in the abortion industry's ongoing efforts to push for government approval for abortions by telemedicine, where women order their pills online, have a brief teleconference with a health care worker, and have the pills shipped to them by mail.

Survey Findings versus Researchers Projections

The study, "Prevalence of Self-Managed Abortion Among Women of Reproductive Age in the United States" appeared in the *JAMA Network Open* online journal on December 18, 2020.

Authors of the study included some of the top names in abortion research — Lauren Ralph, Diana Greene Foster, Ushma Upadhyay, and Daniel Grossman. They are all connected to the University of California, San Francisco, particularly the Advancing New Standards in Reproductive Health (ANSIRH) program of the Bixby Center for Global Reproductive Health, and have been promoting abortion for some time.

The direct claim, that "approximately 7% of US

women reported having attempted SMA in their lifetime, commonly with ineffective methods" is supposed to be the result of a survey of 7,022 women conducted between August 2nd to August 17th in 2017.

But the data actually reported on in the survey deals with only 106 out of 6,953 women— 1.5% of respondents. (Apparently,



69 women skipped or refused to answer the question whether they had ever attempted SMA, or "self-managed abortion.")

In a very familiar technique, the authors took that number and "adjusted for underreporting" to boost it to 2%. Where does the 7% come from? Projecting that percentage over a woman's lifetime.

This 350% higher figure, of course, depends on authors' assumptions about the prevalence of abortion and the continuation of past patterns into the future. It is difficult to avoid the conclusion that these projections are more wishful thinking on the part of these SMA advocates than hard science, though that is a future they are aggressively pursuing.

Information on attempted self abortions

That being said, the study does provide some data on past attempts at "self-managed abortions" (SMAs). While the sample was a little tilted to the older side, with more three quarters of women over 30 years old, most of the SMAs were attempted by women when they were under 30 (61

the prostaglandin normally used in conjunction with mifepristone in legal U.S. chemical abortions, or used physical force (e.g., blows to the belly) in some way to dislodge and abort the baby. A dozen women reported using some other unspecified means. Only 27 of the 92 known attempts were reported to have been "successful."

What were the reasons given for the attempted self-abortion? They varied, but were generally not surprising. Just over 40% (37 out of 92) simply said that "doing on [my] own seemed easier or faster." Just a few less women (30 of 92) simply said the "Clinic [was] too expensive." Another 15 women said the "Clinic [was] too far away" while 10 answered they "Did not know where a clinic was."

Thirteen claimed that "Doing on [my] own seemed natural," and eleven simply reported that they "Use vitamins or herbs whenever sick." Ten "Thought they needed parent's consent," while 16 gave "Other" reasons. (The numbers add up to more than 92 because respondents could offer more than one reason.)

Minorities were much more likely to report an attempted self-managed abortion. Less than 1% of non-Hispanic whites reported such an attempt, compared to 2.3% of non-Hispanic blacks.* Hispanics reported the highest rates— 3%—of self-managed abortion attempts among survey respondents.

out of 82 attempts where age was given). Most of these abortions were said to have happened in the 2000s or 2010s (68 out of 85 attempts) when the decade was reported.

"Herbs" (including parsley, vitamin C, different teas, spices) were the most prevalent method attempted (42 cases) followed by "emergency contraception" (30 cases). The listing of "emergency contraception" by authors is confusing; typically advocates present them as a non-abortifacient effort to prevent pregnancy. However, the authors say they were only counting those using emergency contraception *after* confirming pregnancy (9 cases) in their SMA totals.

An equal number, 15, attempted to use misoprostol,

See "Study," page 33

The life of each human being can be traced to its beginning at conception.

This is your life before birth.

38 37 36 35 34 33 32 31 30 29 28 27 26 25 24 23 22 21 20 19 18 17 16 15 14 13 12 11 10 9 8 7 6 5 4 3 2 1



38 Weeks

Most of us are born around 38 weeks after we were conceived, but some of us are born later and some much earlier.

Recent evidence shows that in the last few months before birth, we may be able to learn from what we hear in the womb.



24 Weeks

By this stage, the baby weighs 1½ pounds and is the length (crown to rump) of a standard envelope.

In some extraordinary cases, babies have survived being born at **19-20 weeks**.



20 Weeks

By this point (perhaps sooner), the baby is able to feel pain. Scientists and medical professionals have seen these babies physically react to outside stimuli.

By **17 weeks** the baby is capable of dream (REM) sleep.



10-11 Weeks

The baby's organ systems are in place. She has a skeletal structure, nerves, and circulation.

The baby's heart begins its first halting beats as early as **18 days** after conception.



DAY 1!

A new human life is conceived at fertilization. At this moment of conception, all characteristics of a person – sex, eye color, shoe size, etc. – are determined by a unique genetic code.

For more information, visit us at: www.nrlc.org



1446 Duke Street
Alexandria, VA 22314
202-626-8800

“President-elect Harris”: Just another verbal flub from Biden or a signal of something else?

By Dave Andrusko

Well..... presumably there are only two explanations. When, yet again, Joe Biden referred to Kamala Harris as “president-elect” (as he did last week), this lapse is either further evidence of the erosion of Mr. Biden’s intellectual capacities or, as I suspect is equally plausible, a deliberate tilling of the ground in preparation for a early handing over of much of the responsibilities of the Executive Branch to a Democrat who, if possible, is even more radically pro-abortion than Biden is.

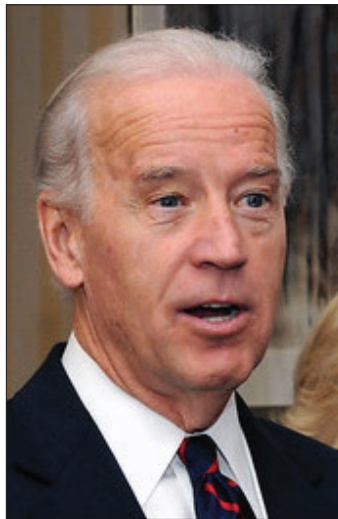
[Actually, I suppose there is a third possibility. Biden is visibly short-tempered and grumpy these days. So when he said (referring to a COVID 19 vaccine he had taken ”to instill public confidence”), “President-elect Harris took hers today for the same reason,” Biden did so just to see if reporters would have the backbone to bring it up. Of course, they didn’t.]

“Biden had already referred to his running mate, a 56-year-old California senator, as leading the top of the ticket,” as Tristan Justice wrote. “Speaking in Florida in September, Biden referred to a potential new White House as a ‘Harris-Biden administration.’ Harris made the same mistake several days earlier, speaking optimistically of a ‘Harris administration.’”

There’ve been many stories about Biden’s “shift” on abortion. And while he has moved, for most of his time in office, he always had one foot and four toes in the pro-

abortion camp. The lone toehold was not insignificant: the Hyde Amendment.

But when push came to shove—last year in June, to be specific when he had



Pro-abortion President-elect Joe Biden

not wrapped up his party’s presidential nomination—in the space of one day he flipped from reaffirming his support for a measure that has saved at least two million lives to opposition. Not exactly a profile in courage, but lurching leftward on a multiplicity of issues was a price Biden willingly paid.

When it came to annihilating unborn children, Sen. Harris had no conscience or principles to toss overboard. She has always enthusiastically embraced abortion.

Before we briefly recite her anti-life resume, it’s important to remember what kind of person she is.

She is the kind whose smear of

now-Justice Brett Kavanaugh was so intellectually dishonest even the *Washington Post* Factchecker and Politifact blanched.

Harris had tweeted out an 11-second clip of Kavanaugh speaking at his confirmation hearing which, oh so conveniently, deleted one second of what he said (the words “They say”). The effect was to falsely and maliciously attribute to Kavanaugh an assertion that someone else had made.

Sleazy even by the standards of Democrats at Kavanaugh’s confirmation hearing and subsequently.

Back to Harris’s record. Perhaps one good way at getting at it is to see what NARAL President Ilyse Hogue said in a fulsome press release after Harris’s selection. Here a few excerpts:

*** Senator Kamala Harris and Vice President Joe Biden not only form a historic ticket, but will also be the perfect ticket to beat Trump in November.**

*** Vice President Biden and Sen. Harris’ commitment to our fundamental rights will be critical to turning out the vote.**

*** With our rights and our freedoms under relentless assault by Donald Trump and Mike Pence, our 2.5 million members are**

ready to mobilize and fight for a better future by electing Biden and Sen. Harris in November.

*** Sen. Harris has earned a 100% voting record in NARAL Pro-Choice America’s Congressional Record on Choice every year she has served in the U.S. Senate. She has cosponsored critical legislation to protect and advance reproductive freedom, including the Women’s Health Protection Act (WHPA) to protect our right to access abortion care free from medically unnecessary restrictions and bans, the Global HER Act to expand access to reproductive health-care internationally by permanently ending the global gag rule, and the EACH Woman Act to block racist bans on abortion coverage like the Hyde Amendment once and for all.**

She reminds me of pro-abortion Hillary Clinton: Let’s increase the number of dead babies not just in the United States but also abroad.

No wonder the Abortion Industry championed Biden’s selection of Harris. Care to wager how eager they are for Biden to effectively give the presidency over to Harris?

PPFA President is proud, proud, proud of its annual toll of 345,000 abortions

By Dave Andrusko

If you haven't followed the trajectory of pro-abortion apologetics, I can assure you the headline on a story in the *Washington Post Magazine* would be a shocker

Written by KK Ottesen, the headline for her oh-so-cozy interview with Alexis McGill Johnson reads "Planned Parenthood president: Saying abortion is a small part of what group does is stigmatizing."

You have to remember that whole forests have been cut down to provide the paper for all the times PPFA insisted that providing abortions, while important, was essentially small potatoes: "just 3%" was the talking point.

Now, Johnson tells Ottesen, to undersell abortion is to "stigmatize" abortion, Planned Parenthood, or both. (I'm sure Johnson means the former, not sure about the latter.)

Poor KK Ottesen. She didn't get the memo. Her second question is to set the third. Here's how it reads:

For many people, "abortion" is the first word that comes to mind when they hear the name Planned Parenthood. How does that sit with you?

Heck, that's just peachy:

I think abortion is health care. And so, if the first thing they think about is health care when they think about Planned Parenthood, I think that's fine.

But (the all-important "but")
But it [abortion] is a

very small part of all the things Planned Parenthood does, right?

Johnson is supposed to unspool the PPFA line—that "Three percent of all Planned Parenthood health services are abortion services." Or, as *Washington Post* Factchecker

important part of what we do. So I think when we say, "It's a small part of what we do," what we're doing is actually stigmatizing it. Like: It's really not a big deal that Planned Parenthood does this. We are a proud abortion provider. We

that abortion "obviously" is "a divisive issue."

Nope.

First of all, I would say it is not as divisive a position as I think folks think. I mean, 77 percent of Americans support [Roe v. Wade] as being the law of the land. What I find, oftentimes, is that when I share what I do, it almost inevitably elicits a story.

To summarize. Abortion is "health care," which is a tough sell for the over 900,000 babies whose health is terminated each year.

Abortion is percentage wise, small [it's actually larger but that's another story], but in Planned Parenthood's eyes, abortion is huge, central even, to "self-determination."

Never mind that "the freedom" which Johnson says "begins with being able to control your own body" is purchased at the price of exercising lethal control over the freedom of the little ones to be left alone until birth.

And everybody—well almost everybody (77%)—is on Planned Parenthood's side. This number, of course, is every bit as absurd as the 3% figure Johnson stands by. But what else would you expect from the President of a \$1.6 billion+ "non-profit" that traffics in the misery of unhappy women and the blood of countless millions of unborn children?



Michelle Ye Hee Lee paraphrased the way abortion advocates traditionally describe it—that abortion is "just a small portion of the array of Planned Parenthood's services..."

But Johnson would have none of the usual "small part" obfuscation. She had new obfuscations, but to be fair, she didn't trivialize how central abortion is to PPFA which aborts over 345,000 babies each year:

Overall, certainly. But it is still a critically

believe that abortion is health care, and we believe, fundamentally, that self-determination begins with being able to control your own body and freedom begins with being able to control your own body. So I don't like to marginalize it in that way.

At this point, Ottesen probably dropped her notepad. She starts again. You would agree, wouldn't you Ms. Johnson,

Planned Parenthood Pushes, Provides Abortion During COVID

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

Many health care workers have acted heroic during the pandemic, bravely putting their own welfare and safety on the line to save the lives of others. Planned Parenthood bills itself as one of those noble “health care providers,” but while others were focused on saving lives during the pandemic, the nation’s top abortion chain continued to be fixated on taking them.

An advisor to former President Bill Clinton once said, “Never let a good crisis go to waste.” These are words Planned Parenthood has clearly heeded.

What did it do while the virus raged?

Planned Parenthood did everything in their considerable power to keep abortion clinics open.

Planned Parenthood used the pandemic as an opportunity to expand the abortion empire with telemedicine.

Planned Parenthood tried to take advantage of the circumstances to grab emergency COVID relief funds.

And of course, Planned Parenthood continued to try and get political supporters of theirs elected to office, to keep government funds flowing.

Open for “essential” business

Granted, everyone was on unsure footing when the virus first hit, not really sure what was safe or how best to react. A lot of businesses shut down, some of their own initiative, others by government mandate.

Many smaller, Independent abortion clinics suddenly faced increased expenses

on cleaning and personal protective equipment, new social distancing mandates that reduced the number of patients that could be seen, to say nothing of individual health concerns of staffers. Those clinics struggled to survive. Some limped by, barely staying open, some closed, unlikely to reopen again (TIME, 12/2/20).



But not so for the nation’s largest abortion provider. Planned Parenthood affiliates all over the country took the occasion to send out messages reminding women they were still open and ready for business.

New York

When New York Gov. Andrew Cuomo issued an order in March that all “non-essential” businesses were to shut down, Meera Shah, the chief medical officer for Planned Parenthood’s Long Island, West Chester, and Rockland (suburbs of New York City, hit hard by the virus) made a statement to Buzz Feed. She said that “Our doors will stay open because sexual and reproductive health care is extremely important, and we have to ensure access to it.”

Did that include abortion? Absolutely, laying down a marker against any who assumed abortions to be

elective and thus non-essential. Shah continued, “Pregnancy-related care, especially abortion care, is essential ... especially now when there is so much insecurity around jobs and food an paychecks and childcare” (refinery29.com, 3/23/20).

While several of its large abortion clinics did continue to see clients, other of Planned

Pennsylvania

Planned Parenthood’s Pennsylvania affiliate, PP Keystone, issued a similar statement to the one put out by the New York affiliate – “our doors remain open... we are committed to meeting all the needs of our current and new patients” (PP Keystone, COVID-19 Information, 3/6/20).

At the same time, it declared that it wanted to “serve as many patients as possible over the phone or over a secure videoconference.” Patients would be seen in person “when necessary,” but were not to bring partners or children into the office with them. They suggested that those with any flu like symptoms stay home, reschedule, and contact their local health department.

Abortion? According to WHTM’s ABC 27 News, Keystone announced that its abortion performing facilities would remain open “for abortion services only.” ABC 27 also heard from Planned Parenthood’s Southeastern Pennsylvania affiliate, who said they had temporarily closed their centers but wanted to make sure people understood the closure “does NOT include their abortion services” (ABC 27, 3/25/20)

Thus two other PPFA affiliates kept the doors open for abortion patients but discouraged others patients from visiting.

Planned Parenthood’s New York centers did, in fact, close temporarily. They said they were laying off staff because of the pandemic’s strain on resources. *The (Albany) Times Union* reported that these included clinics in the Bronx, Glen Cove, Goshen, Hornell, Kingston, Massapequa, Monticello, Oneida, Rome, Staten Island, and Watkins Glen.

However, note that just one of those clinics (the Bronx) had clearly been a full-service abortion clinic, offering both surgical and chemical abortion. Even in that case there were two other Planned Parenthood clinics within ten miles also offering both abortion methods that did stay open.

A spokesperson told the *Times Union* the centers would reopen once the pandemic and risk of infection receded (*Times Union*, 4/8/20).

Some of those had still yet to re-open as late as mid-December.

See “Pushes,” page 39

8th Circuit panel upholds decision invalidating two Arkansas laws but two members call on High Court to reconsider abortion jurisprudence

By Dave Andrusko

A January 5th decision by a three-judge panel of the 8th Circuit Court of Appeals was both very disappointing—it upheld a decision overturning an Arkansas law banning abortions after 18 weeks and for abortions and when the unborn child is diagnosed with Down syndrome—and encouraging—the concurring opinions pointed a way forward in both instances, but especially when it comes to abortions performed when the reason is because the child has been prenatally diagnosed with Down syndrome.

The decision comes less than two months after a three-judge panel of the 6th U.S. Circuit Court of Appeals gave the state of Tennessee a big victory when it ruled the state could begin enforcing a ban on abortion when the abortionist knows that the woman is seeking the abortion because of the child's sex or race or if he knows the woman is seeking an abortion because of a diagnosis of Down syndrome.

The January 5th opinion was written by Judge James Loken. Although Judge Bobby Shepherd and Judge Ralph Erickson joined, it was their criticism of Supreme Court abortion jurisprudence in their concurrences that is most telling.

The core of the 3-0 opinion is the conclusion that contrary to the State's argument, the age of viability has not shifted prior to 18 weeks—

As Defendants presented no generally accepted medical evidence that

the attainment of viability has shifted to before eighteen weeks after gestation, we must affirm the district court's order preliminarily enjoining enforcement of Act 493, which effectively prohibits a substantial universe of pre-viability abortions. ...

And therefore that (as Ed Whelan noted),

The panel likewise concluded that under Casey the ban on Down syndrome abortions could not be applied to pre-viability abortions

However, Judge Shepherd honed in on the High Court's viability standard as enunciated in *Planned Parenthood v. Casey*:

Because the Court's opinion applies binding Supreme Court precedent, I join it in full. I write separately, however, to reiterate my view that "good reasons exist for the [Supreme] Court to reevaluate its jurisprudence" regarding the viability standard as announced in *Planned Parenthood of Southeastern Pennsylvania v. Casey*. ...

Today's opinion is another stark reminder that the viability standard fails to adequately consider

the substantial interest of the state in protecting the lives of unborn children as well as the state's "compelling interest



in preventing abortion from becoming a tool of modern-day eugenics." Box [v. *Planned Parenthood* (2019)] (Thomas, J., concurring). The viability standard does not and cannot contemplate abortions based on an unwanted immutable characteristic of the unborn child. And Casey directs that we resolve this inquiry by considering viability alone.

Judge Shepherd observes, as alluded to in the quote above, that in a prior case, the Supreme Court chose not to consider abortions because of a Down syndrome diagnosis, and then went on to quote more from Justice Thomas:

In a separate concurring opinion, Justice Thomas expressed his view

that the latter law" and other laws like it promote a State's compelling interest in preventing abortion from becoming a tool of modern-day eugenics," and acknowledged that "with today's prenatal screening tests and other technologies, abortion can easily be used to eliminate children with unwanted characteristics."

Judge Erickson likewise asks the High Court to review its viability standard:

I concur in the Court's opinion and in Judge Shepherd's concurrence, but write separately to emphasize my belief that there are important reasons for the Supreme Court to revisit its precedent in *Planned Parenthood of Southeastern Pennsylvania v. Casey*, 505 U.S. 833 (1992). Viability as a standard is overly simplistic and overlooks harms that go beyond the state's interest in a nascent life alone.

The great glory of humanity is its diversity. We are, as a species, remarkably variant in our talents, abilities, appearances,

See "Upholds," page 41

Abortion leading cause of death worldwide in 2019, ending the lives of over 73 million unborn babies

Abortion accounted for 57% of all deaths worldwide

By Right to Life UK

Abortion was the largest cause of death worldwide in 2019, ending the lives of an estimated 73.3 million unborn babies, according to a study published in *The Lancet*.

The World Health Organisation estimates that there were nearly 55.4 million deaths from causes other than abortion worldwide in 2019.

Ischemic heart disease was responsible for 8.9 million deaths, stroke 6.1 million deaths, chronic obstructive pulmonary disease 3.3 million deaths and lower respiratory infections 2.6 million deaths. Deaths from neonatal conditions of children after birth resulted in 2 million deaths, 1.2 million fewer than in 2000.

Based on these estimates, abortion accounted for 57% of deaths worldwide in 2019.

John Hopkins University estimates that in 2020 over 1.8 million people worldwide died from COVID-19.

The most recent full year abortion statistics for England and Wales reveal a total of 209,519 abortions in 2019, an increase of 3.4% abortions from 2018 when there were 205,295 abortions.

Interim abortion figures for the first six months of 2020 show a significant rise in the number of abortions performed, compared to the already all-time full year high, recorded in 2019. The statistics showed that 109,836 abortions were performed for

English and Welsh residents in the six months between January 1 and June 30 2020. This is an increase of 4,296 from the same time period in 2019, where 105,540 abortions were performed.

This significant rise in abortions in the UK coincides with the UK Government's temporary measure allowing 'DIY' home abortions in the UK. Since 'DIY' home abortions were introduced in late March, a number of significant problems have arisen.

A nationwide undercover investigation found evidence of abortion providers putting women at significant risk by not carrying out basic checks before sending them 'DIY' home abortion pills. It also discovered 'DIY' home abortion pills can easily be obtained and administered to others, potentially in a coercive manner.

In May, it was revealed UK police were investigating the death of an unborn baby after its mother took 'DIY' home abortion pills while 28 weeks pregnant.

In addition, abortion provider BPAS announced that it was investigating a further eight cases of women taking 'DIY' home abortion pills beyond the 10-week limit, raising questions over what checks are being conducted to ensure the law isn't being broken and

dangerous later-term abortions aren't happening.

A number of women have also come forward to share the serious problems they've experienced after taking 'DIY' home abortion pills. One woman said she went through "hell"



and thought she was going to die after taking the dangerous pills. Another woman said the pain and physical process was "horrible" and "a lot worse than expected".

Right To Life UK spokesperson, Catherine Robinson, said, "Abortion is the leading global cause of death by an extremely large margin. While the womb should be the safest place in the world, it is in fact one of the most dangerous."

"Seventy-three million lives lost to abortion is a global tragedy. UK taxpayers have funded a very

large number of these abortions overseas through their support of MSI Reproductive Choices, as the largest single donor to this organisation, along with funding a number

of other organisations who perform abortions in developing countries".

"This occurs in spite of that fact that the majority of the public support the Government removing funding of abortions overseas. We are calling on the Government to immediately cut funding to abortion-providing organisations who are fueling this global tragedy".

“Dedicated heroes” take a deep breath and look ahead to ways to protect unborn babies and the right of conscience

From page 2

Pro-lifers are fueled by the sure knowledge that ultimately we will carry the day. Our cause is just and because that is so, we stand strong during the inevitable ebbs and flows.

Moreover, we know with utter certainty that the pro-abortion Democrats, headed by President-elect Biden and Vice President-elect Kamala Harris will overplay their hand. Why? For three reasons.

First, if you have persuaded yourself that abortion is not a “tragic decision” but the equivalent of a magic carpet that will whisk women away to joy and happiness, then you must—**must**—work day and night to legalize abortion on demand

throughout pregnancy and paid for by the taxpayer. No woman who wants one should ever be “denied” a taxpayer-funded abortion, no matter how late in pregnancy, or how frivolous the reasons, or how stomach-turning dismembering a living unborn baby is to anyone with an awakened conscience.

This is not a winning position. Second, it’s who they are. They are genuine, not phony, authoritarians. Stifling free speech is as natural to them as breathing.

It goes without saying that Biden and Harris could not have essentially holed up in their residents for the entirety of the election cycle, saying nothing,

and still won the election, had not the Institutional Media decided **nothing** was more important than defeating (better yet humiliating) pro-life President Donald Trump.

But the point is their extremism on abortion and a host of issues outside our single issue purview guarantees that there will be a massive peaceful resistance much sooner than later. It also means that even the cowardly abortion-enabling outlets such as the *Washington Post* and the *New York Times* may eventually wake up.

Third, they’ve already told us (in particular Harris and the likes of Sen. Chuck Schumer and Speaker Nancy Pelosi) how

eager they are to fulfill the wish list of the Abortion Lobby and its many friends in Congress. Taxpayer funding of abortion; hounding states which are passing pro-life legislation; and eliminating every limitation on abortion makes NARAL and Planned Parenthood smile.

But none of these are winning issues with the American public.

Let me conclude with another quote from NRL President Carol Tobias. She said, “Pro-life Americans need to stand in the gap and protect those threatened by abortion, infanticide, euthanasia, and assisted suicide from those who would devalue and cheapen human life. It is vital that every pro-life American stand up and say, ‘enough is enough’ to the pro-abortion wish list put forward by pro-abortion groups, the pro-abortion strategies pushed by pro-abortion apologists and legislators, and the pro-abortion policies that are proposed by the incoming pro-abortion Democrats.”

And you **will** stand in the gap, of that I am totally sure. And National Right to Life will right there alongside you.

Please do me a small favor, if you would.

Please let your pro-life friends and associates know there is an in-depth Monday through Saturday source of pro-life news and commentary that will enable them to keep up the date. It’s *National Right to Life News Today*.

Encourage them all to sign up at <https://mailchi.mp/nrlc/emailsingup>.

Thank you for all you have done for unborn babies and the medically dependent and all you will do.

WE ARE THE GRASSROOTS



Pro-abortion Slate columnist laments that “Trump Judge Lobbies the Supreme Court to Overturn Abortion Rights”

By Dave Andrusko

On page 28 we wrote about a fascinating decision by a three judge panel of the 8th Circuit that while upholding a lower court decision invalidating two pro-life Arkansas laws, included two concurrences which actively and pointedly encouraged the Supreme Court to rethink its “viability” standard.

Pro-abortionists immediately—and correctly—picked up on what Judge Bobby Shepherd and Judge Ralph Erickson were doing. Although they upheld the reliably pro-abortion U.S. District Judge Kristine Baker’s decision, they were moving in a different direction by building on a brilliant concurrence from a prior Supreme Court decision written by Clarence Thomas.

Justice Thomas illuminated how abortion and eugenics were joined at the hip in the early days and continue to be linked today. And that it is only getting worse:

Technological advances have only heightened the eugenic potential for abortion, as abortion can now be used to eliminate children with unwanted characteristics, such as a particular sex or disability.

This brings us to a critique written for *Slate* by Mark Joseph Stern, whose headline is incorporated into my headline.

What is his critique? It’s many-fold, beginning with the 2017 Senate confirmation vote of 95–1 which is “the most

votes of any of Trump’s appeals court nominees.”

And, of course, that Judges Shepherd and Erickson were accusing women who aborted because of a prenatal diagnosis of Down syndrome of “seeking



to systematically eliminate those with the condition from the face of the planet,” which is a nice rhetorical flourish but not what either judge was saying (nor was Justice Thomas).

The real burr under his saddle is something that has been around for a long, long time in Supreme Court decisions and which is too easily overlooked. It’s what Judge Erickson describes as “the state’s interest in nascent life.”

In this paragraph he conjoins opposition to eugenic abortions with a critique of viability:

While the state’s interest in nascent life has been recognized to give way to the right of a woman to be free from “unduly burdensome interference with her freedom to decide

whether to terminate her pregnancy” id. at 874 (quoting Maher v. Roe, 432 U.S. 464, 473–74(1977)), it is apparent that the right is not, and should

not be, absolute. By focusing on viability alone, the Court fails to consider circumstances that strike at the core of humanity and pose such a significant threat that the State of Arkansas might rightfully place that threat above the right of a woman to choose to terminate a pregnancy.

The right to “be free from ‘unduly burdensome interference with her freedom to decide whether to terminate her pregnancy’” is “not, and should not, be absolute.” That’s not what the Mark Joseph Sterns of this world want to hear.

They want abortion on demand, for any reason or

no reason, through the end of pregnancy, paid for by the taxpayer. If a baby survives an abortion, abortion apologists are absolutely unwilling to require that this **born** human being receive the same medical treatment any other baby born at the same gestational age would receive. “Comfort care” at most.

One other thought. Lower court judges “lobby” the Supreme Court all the time, sometimes directly, more often indirectly. But either way, there is nothing unusual or inappropriate about a federal judge/judges telling the Supreme Court where the justices have gone wrong and/or why time and practice has rendered a prior decision obsolete.

The irony is, of course, staggering. We are forever being told we wish to “go back to the past.”

But it is pro-abortionists who cling to the past.

They are the ones who insist that we have learned nothing about unborn children in the past 50 years. Pro-abortionists, not pro-lifers, say we should apply discriminatory attitudes to babies who supposedly are the “wrong” age or sex or who are insufficient “perfect.”

Stern responded so vigorously because he knows the truth. Aborting babies on such patently unjust grounds is a huge chink in the Abortion Industry’s armor.

Pro-lifers already gearing up to fight battles in forthcoming 117th Congress

From page 1

will seek to use executive orders to and rulemaking to make quick work of undoing pro-life gains, there are significant and far-reaching battles coming in Congress as well.

While a simple majority is all that is needed to advance legislation in the House, legislation that is not strictly fiscal currently needs 60 votes in order to avoid a filibuster in the Senate. It is uncertain at this time if the Senate would change that long-standing rule to only require a simple majority.

Administrative Actions

One of pro-life President Donald Trump's first acts in office was to restore (and later expand) the Mexico City Policy, which prevents tax funds from being given to organizations that perform abortions or lobby to change abortion laws of host countries. The Trump administration also cut off funding to the United Nations Population Fund because of that agency's involvement with China's forced abortion program. We can expect pro-abortion President-elect Joe Biden to move to undo these gains immediately.

Domestically, the Biden administration may roll back the protections for conscience rights of people who do not want to pay for, participate in, or perform abortions. Additionally, the Title X family program regulation that under the Trump administration required recipients not to collocate with abortion clinics or promote abortion will certainly face elimination. It is also expected that the FDA would eliminate what few restrictions there are on distributing

chemical abortion pills, as well as loosen restrictions on fetal tissue research. This list is merely a sample of the damage the new Administration is expected to do.

President Trump had pledged "to veto any legislation that weakens current pro-life federal policies and laws, or that encourages the destruction of innocent human life at any state." With the incoming Biden administration, we are a far cry from that. Joe Biden has embraced the Democrat party's platform of unlimited abortion on demand through birth.

Congressional Actions

Legislative fights are expected on numerous items, including the ERA (Equal Rights Amendment) and the "Equality Act," and, potentially, health care.

Both houses of Congress are likely to vote on measures that are intended to insert the language of the 1972 Equal Rights Amendment into the Constitution. Many ERA advocates claim that Congress can now accomplish this by simple majority votes in Congress, although most authorities on the constitutional amendment process say the ERA expired decades ago.

The issue is very important, because there is now broad agreement between key pro-life and pro-abortion groups that the language of the 1972 ERA could be employed by federal judges to reinforce and expand "abortion rights." If the courts accept the understanding that a law limiting abortion is by definition a form of discrimination based on sex, and therefore impermissible under

an ERA, the same doctrine would invalidate virtually any limitation on abortion, including late abortions, and require government funding of abortion. For background on this issue see www.nrlc.org/federal/era/

Another measure, the so-called "Equality Act," as with the ERA, ranks as one of the most pro-abortion pieces of legislation to ever be voted on in the House of Representatives. Despite being billed as legislation dealing with sexual orientation and gender discrimination, the "Equality Act" contains language amending the Civil Rights Act of 1964 that could be construed to create a right to demand abortion from health care providers. It also would likely place at risk the authority of state and federal government to prohibit taxpayer-funded abortions. If enacted, this legislation could be used as a powerful tool to challenge any and all state limitations on abortion.

One of the other critical fights we will face this congress is over the popular and decades-long Hyde Amendment which prevents taxpayer funding of abortion, with limited exceptions.

Joe Biden supports using tax dollars to pay for abortion and now says that he supports elimination of the Hyde Amendment. Additionally, House Speaker Pelosi has publicly endorsed the push to do away with the Hyde Amendment this year.

On December 10, 2020, she told reporters, "I myself have been an opponent of the Hyde Amendment long before I came

to Congress, so I would be receptive to that happening... It's long overdue, getting rid of it, in my view."

In fact, as one of their last hearings in the 116th Congress, Democrats took aim at the Hyde Amendment. A hearing in an Appropriations LHHHS Subcommittee entitled "The Impact on Women Seeking an Abortion but are Denied Because of an Inability to Pay," focused on eliminating the Hyde Amendment.

Pro-abortion Rep. Rosa DeLauro (D-Conn.), who is set to chair the powerful House Appropriations Committee, said next year that the House intends to eliminate the Hyde Amendment.

What is the Hyde Amendment and why is it so critical?

After *Roe v. Wade* was handed down in 1973, various federal health programs, including Medicaid, simply started paying for elective abortions. By 1976, the federal Medicaid program was paying for about 300,000 elective abortions annually, and the number was escalating rapidly. On September 30, 1976, an amendment by pro-life Congressman Henry Hyde (R-Ill.) was enacted that prevents federal Medicaid funds from paying for abortions.

Congressman Hyde offered his limitation amendment to the annual Health and Human Services appropriations bill, to prohibit the use of funds that flow through that annual appropriations bill from being used for abortions. In a 1980

See "Battles," page 41

An error, an omission, and a fundamentally misleading statement

By Dave Andrusko

As we were approaching a final conclusion to the 2020 elections, a small post at *Christianity Today* illustrates a mistake (easy enough to make), an omission (tunnel vision, perhaps) but also a fundamentally misleading statement that bedevils those of us who grasp the gigantic difference it makes whether you have a pro-life Republican or a pro-death Democrat in the White House.

First, the mistakes. Because there is still a race to be finalized, there are 18 (potentially 19) new pro-life Republican women in the House of Representatives, not 16.

“Seven [of these pro-life women] flipped Democratic

seats.” In fact, they flipped at least ten (and possibly eleven) seats held by pro-abortion Democrats.



We have celebrated this huge influx on many occasions.

The omission? There are also

more than a dozen new pro-life men! Together, these women and men flipped at least 13 seats from pro-abortion to pro-

life. These pro-life pickups are a major reason the Democrat majority in the House shrank.

Fundamentally misleading statement? “Abortion rates are at record lows and have trended downward through the presidencies of Bill Clinton, George W. Bush, Barack Obama, and Donald Trump.”

What’s the inference? They’ve trended down regardless of whether pro-lifers—George W. Bush and Donald Trump—or pro-abortionists—Bill Clinton and Barack Obama—lived at 1600 Pennsylvania Avenue.

You simply could not leave a more incorrect impression. As we have documented many times, abortion rates went down **in spite of** the best efforts of Presidents Clinton and Obama.

Study offers dubious claim that 7% of Women Attempt Self-Abortion in their Lifetimes

From page 23

These results were not surprising, even to the authors. Black market sales and use of misoprostol among Latin women, particularly in border towns, has been widely reported here and elsewhere in the last few decades.

Why this study, why now?

Ralph and her colleagues declare, “As abortion clinics close owing to increased abortion restrictions, a reduced demand for facility based abortions, and a growing demand for convenience, privacy, and the comfort of self-managed abortion and self-care more broadly, it is likely that SMA will become more prevalent in the US, as it is today in other countries.”

They claim they are only trying to establish a “baseline” for those tracking these abortions in the future. But the obvious message is to assert that self-managed abortions are already here; that there is a demand for them; and that the government ought to facilitate the use of SMAs since such abortions are supposedly broadly and safely offered in other countries.

It is no coincidence that this article appears while advocates—including some of the researchers publishing here—have been petitioning the FDA to abandon Risk Evaluation and Mitigation Strategies (REMS) regulations imposed on the prescription of mifepristone. By making sure that prescribers and patients fill out and sign forms that ensure women are aware of the risks and by

requiring that the drugs be dispensed at the facility by a certified prescriber, the REMS regulations are intended to try to ensure that the drugs are used safely.

Although you’d never know it from the likes of these researchers, as of 2018, thousands of mifepristone patients had suffered serious complications and at least two dozen had died from complications such as hemorrhages, infections, and ruptured ectopic pregnancies.

To this point the FDA has resisted efforts to modify or jettison the REMS requirements, which would have opened the door to these “self-managed” abortions. However, abortion advocates have used the coronavirus as an excuse to argue that the FDA should “temporarily” suspend the regulations, obviously hoping to prevail permanently under a new more sympathetic Biden/Harris administration.

Advocates act as if the legalization of do-it-yourself abortion will suddenly make such abortions safer for women. Instead what it will mean is that more women facing the pain, the bleeding, the risk of infection, the possibility of a ruptured ectopic pregnancy, as well as a gruesome encounter with her aborted child, all alone, far from qualified, accountable medical help.

That’s the dream of these researchers, but a nightmare for the women who heed their assurances.

*Our percentages may differ slightly, as we are using the actual percentages of the unweighted sample rather than the recalculated percentages the authors report for weighted samples.

After 2020 elections, pro-lifers already planning for the future

From page 1

industry lobbying to pack the courts, eliminate the Hyde Amendment, revive the long-dead ERA, add new seats in Congress, increase funding for abortion providers at home and abroad, and more.

However, unlike 2009, President Biden will have to contend with a Senate equally divided with 50 Republicans and 50 Democrats and a House where Democrats currently hold the majority by just 11 seats. This comes despite virtually all the political prognosticators anticipating that the Democrats would expand their majority in the House and pick up many more seats in the Senate.

In 2020, pro-life voters delivered critical margins of victory in countless races. Notably, 13 House seats held by pro-abortion Democrats flipped to pro-life Republicans. (The race in New York's 22nd District remains undecided so that number could grow to 14.)

In addition, not a single pro-life incumbent lost their seat in the general election. Among the new members of Congress are a record number of pro-life women and people of color.

They bring with them a diversity of experiences and backgrounds, which will serve well as they advocate for life. The lineup of new pro-life members includes former state lawmakers, physicians, mayors, a professional athlete, a Spanish-language media personality, small business owners, military veterans, and more.

While we lost some ground in the Senate, pro-life voters should be commended for delivering key victories for Senators Thom Tillis (NC), Lindsey Graham (SC), Steve

Daines (MT), Joni Ernst (IA), Dan Sullivan (AK), and John Cornyn (TX), who faced intense reelection fights. Pro-life voters helped secure victories for new Senators such as Senators Roger Marshall (KS) and Tommy Tuberville (AL), whose races were top targets for pro-abortion Sen. Chuck Schumer. We also saw the addition of a new pro-life woman in the Senate—Senator Cynthia Lummis from Wyoming.

Another marked difference from 2009 is the composition of the Supreme Court. Thanks to President Trump and the pro-life Senate majority during his term, we have 3 new justices, Neil Gorsuch, Brett Kavanaugh, and Amy Coney Barrett. In 2020, Gorsuch and Kavanaugh voted to uphold a pro-life law that was challenged in Louisiana.

(Barrett had not yet joined the Court.)

Heading into 2020, political commentators also predicted a good year for Democrats on the state level. They anticipated takeovers of state legislatures and governorships. That did not come to pass. In fact, Republicans held on to their majorities and flipped the state House and Senate in New Hampshire. In Montana, Republicans won an open governorship electing pro-life Gov. Greg Gianforte.

While we fight to stem attempted pro-abortion advances in the immediate future, we must also begin organizing for 2022.

Two years after Obama's first election, pro-life candidates swept at the ballot box. Likewise, in 2022, pro-life control of both the House and Senate are within reach. We

need to net just one Senate seat and a net pickup of 6 House seats.

Obviously, there will be many ebbs and flows, but right now pickup opportunities include Arizona, Georgia, Colorado, Nevada, and New Hampshire. The path to taking over the House runs through several areas where President Trump performed well in 2016 and 2020.

Political victories come and go. But one thing is certain: We are not giving up! The pro-life movement endures because of our broad grassroots support. Your efforts, no matter how small, do have an impact! Let us redouble our efforts and continue to be the critical voice for the voiceless.

There is a lot on the line and unborn children and their mothers are depending on us.



*All the new Republican members of the House of Representatives
Photo courtesy Office of House Republican Leader Kevin McCarthy*

A quiet ending to a bizarre tale of a man who hoarded the remains of thousands of aborted babies

By Dave Andrusko

Indiana Attorney General Curtis Hill has concluded his investigation into the thousands of fetal remains found on the properties of the notorious abortionist Ulrich Klopfer and concluded that since Klopfer had acted alone, no further charges would be filed because the 79-year-old Klopfer had passed away last September.

“This horrific ordeal is exactly why we need strong laws to ensure the dignified disposition of fetal remains. I was humbled to provide these precious babies a proper burial in South Bend,” Attorney General Hill said. “We hope the results of our investigation provide much-needed closure to everyone who has been impacted by this gruesome case.”

As *National Right to Life News Today* reported in numerous stories, following Klopfer’s death on Sept. 3, 2019, his family discovered medically preserved fetal remains in the garage next to his home in Will County, Illinois. Local law enforcement were dispatched to search the premises and found the babies’ remains, along with thousands of health records from Klopfer’s medical practice.

The remains, mostly found in molding boxes and old Styrofoam coolers containing large, red medical waste bags, were in various states of decay. Each remain appeared to have been placed in a small,

clear, plastic specimen bag for purposes of being medically preserved in a chemical suspected to be formalin, a formaldehyde derivative. However, many of the bags degraded over time and/or suffered damage, resulting in leakage from the individual bags into the outer bag, box, or cooler.

This ghastly discovery led to the search of multiple properties owned or rented by Klopfer and his related businesses. During these searches, authorities found additional fetal remains, including 165 in a trunk in a car he kept stored in Dolton, Illinois, along with hundreds of thousands of health records.

All told, authorities discovered 2,411 fetal remains, which appear to be from Klopfer’s medical practice in Indiana from 2000 to 2003. Because the remains were in poor condition and the health records were degraded, it was not possible to independently verify the identities of the individual fetal remains.

After his death, further details surfaced about a genuinely disturbed man.

To name just one, according to the *AP*’s Michael Tarm,

It was a 1978 Chicago Sun-Times story that first raised questions publicly about Klopfer, recounting the competition between him and another

doctor. A nurse told the newspaper that the other doctor tallied each abortion in pencil on his pant



The late abortionist Ulrich Klopfer

leg. If Klopfer saw lots of marks, he would go “like wildfire to catch up,” she said.

According to Dan Carden of *The Times of Northwest Indiana*, after women learned of the initial discovery of the remains of thousands of aborted babies, many could not help torturing themselves with the thought that the remains of their baby might be among

those or the additional 165 fetal remains found in the car trunk. The interviews with these women were exceeding painful to watch.

Nobody will likely ever understand Ulrich’s motivation for packing these poor babies’ remains inside airtight plastic bags, inside scores of cardboard boxes. His wife never had a clue until she went through their garage after Ulrich’s death. Tarm speculated

Was it a hoarding disorder? Was he was trying to save disposal costs as he racked up legal bills suing and being sued by abortion opponents? Was he hoping to torment his enemies from beyond the grave?

Something this sick probably defies even a semi-sane explanation.

“You can speculate till hell freezes over,” said Kevin Bolger, a Chicago lawyer representing Klopfer’s widow. “You’re not going to know the answer. He took it with him.”

True, but is it all this that surprising coming from a man who was so twisted that (according to a story written by the *Chicago Sun Times*’ Stefano Esposito) he “often told people that, when he died, he expected to meet the likes of Hitler, Stalin and Mussolini.”

Why abortion activists hate photos of pre-born babies

By Jonathon Van Maren

If the pre-born are not human, pro-life apologist Scott Klusendorf is fond of saying, then no defence of abortion is necessary. But if they *are* human, no defence of abortion is adequate. The entire abortion debate hinges on whether or not the person being aborted is, in fact, a person. Human beings have human rights. Human rights can only begin when the human being begins. And there is an iron-clad scientific consensus as to when a new, unique, and whole human being begins his or her life: At fertilization.

As we have acquired the ability to witness what takes place in the womb during the earliest stages of human development through ultrasound technology, the pro-choice movement has been forced into making increasingly untenable arguments. Many have simply accepted the fact that they are killing a human being, but claim that it is a moral act because it is legal. Others, like Peter Singer, have advocated for the legalization of infanticide and attempted to deny personhood status to pre-born children. Many simply attempt to deny the science entirely.

The difficulty with that last—and most common—approach is that it defies an enormous body of growing evidence. Thus, we have delusional articles like this recent column in *Vice*, titled “The Iconic Photo Hijacked By the Anti-Abortion Movement.” According to Amarins Eggeraat, images of babies in the womb should be being used as pro-life propaganda:

If you look up the word abortion in a stock

image bank, you’ll find roughly three types of photograph: sad women, protesters holding pro-choice signs or fetuses, usually near-fully developed, with a human face, closed eyes and sometimes



even a tiny thumb in their mouth.

Besides being morally loaded, the visual association between these tiny babies and abortion is also scientifically incorrect, since the vast majority of procedures are carried before 13 weeks. And yet, anti-abortion movements have used fetuses as a primary symbol since the 1970s.

A few comments on those strange assertions. Contrary to what Eggeraat suggests, many of the photos used by the pro-life movement (including the organization I work for)

utilize photos of pre-born children prior to 13 weeks. Those children, contrary to her insinuation, look very much human. To imagine them suctioned into slurry is to visualize what Eggeraat is defending. More:

For most of human history, fetuses

weren’t actually visible. We didn’t know much about how they evolved in the womb, we only had drawings and wax models based on stillborns, or fetuses preserved in jars of formaldehyde. That all changed with Swedish photographer Lennart Nilsson’s book of photography *A Child Is Born*, which became a global sensation after appearing in *Life* magazine in 1956. Nilsson captured extreme closeups showing the different stages of human development, from

fertilised egg to fully-formed baby.

The colour photographs were one of the first representations of the miracle of life, and really gave viewers the impression they were staring directly into the womb, looking at a foetus calmly floating around like a little astronaut. In reality, Nilsson photographed miscarried and aborted fetuses, using artist lighting and planning his subjects’ postures. The same year Nilsson’s series came out, a hospital in Glasgow used ultrasound technology for foetal screenings for the first time. Now our best tool for checking foetal development before birth, the ultrasound changed prenatal care (and motherhood) forever.

These scans were more than a medical exam – they were our earliest “window into the womb”, as media studies professor José van Dijck wrote in 2001. Before then, only mothers could really know how the pregnancy was developing – they’d be the first to feel the signs of life, or if something wasn’t right.

See “Activists,” page 42

Judge Baker predictably slaps preliminary injunction on four pro-life Arkansas laws

By Dave Andrusko

You have to say this about pro-abortion U.S. District Judge Kristine G. Baker. Being slapped down repeatedly by higher courts has not fazed her in the least.

Last week the *Arkansas Democrat-Gazette* reported that Baker has **again** put a hold on four pro-life laws — Acts 45, 1018, 733, and 603—passed overwhelmingly by the Arkansas legislature in 2017.

Those four laws, which Judge Baker preliminarily enjoined in July 2017, banned the dismemberment of living unborn babies; prohibited sex-selective abortion; required forensic samples from abortions performed on a minor; and mandated humane disposal of the aborted baby's remains.

Since then the 8th Circuit threw it back to her twice. Dale Ellis summarized what has happened since last August when a three judge panel of the 8th U.S. Circuit Court of Appeals vacated Baker's 2017 injunction

asking her to use a different legal standard to review any request to keep the state's laws from taking effect. In December, the 8th Circuit declined to reconsider its decision to vacate Baker's preliminary injunction, which

cleared the way for the laws to go into effect on Dec. 22.

On Dec. 22, Baker issued a temporary restraining order



blocking the laws from taking effect until Jan. 5, at which time she issued the preliminary injunction in a 253-page order that was filed at the end of the day Tuesday. The injunction is to stay in effect until further orders from the court are issued.

Of course, everybody knew Judge Baker would replace the temporary restraining order with a preliminary injunction. It was just legal gamesmanship on her part.

Ellis reported that Stephanie Sharp, a spokeswoman for Arkansas Attorney General Leslie Rutledge, said that Rutledge was disappointed with Baker's decision.

is a very nice summary from *Courthouse News*:

In their decision reversing the district court's injunction [Judge Baker's] that had previously blocked the regulations, the Eight Circuit Court of Appeals cited "June Medical Services v. Russo," the Supreme Court's June 29 ruling striking down a Louisiana abortion restriction. Though Chief Justice Roberts sided with the court's liberal bloc, he offered his own separate opinion. In it, he wrote that states do not have to prove that the benefits of an abortion restriction outweigh the burden on a person's ability to access the procedure—it just has to show that it does not present a "substantial" obstacle or burden.

"Nothing about [previous Supreme Court precedent] suggested that a weighing of costs and benefits of an abortion regulation was a job for the courts," Roberts wrote.

"Those regulations protect unborn girls from systematic discrimination, protect children from predators and sex traffickers, require the respectful treatment of human remains, and prohibit a particularly barbaric and inhumane late-term abortion practice," Sharp said. "Just months ago, the Eighth Circuit overturned Judge Baker's nearly identical order in this case, and we are confident that the Eighth Circuit will do so again."

So why did the full 8th Circuit uphold the upholding the three-judge panel's conclusion? Here

Restoring the Culture of Life requires efforts on many fronts

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

“Like anybody, I would like to live a long life. Longevity has its place. But I’m not concerned about that now. I just want to do God’s will. And He’s allowed me to go up to the mountain. And I’ve looked over. And I’ve seen the Promised Land. I may not get there with you. But I want you to know tonight, that we, as a people, will get to the promised land!”—The Reverend Martin Luther King, Jr., April 3, 1968, Memphis, Tennessee

In working to celebrate and honor the dignity of innocent human life, I have found this quotation from civil rights leader Martin Luther King, Jr. coming to my mind again and again. I hope with all my heart that I will see the day when the tragic U.S. Supreme Court ruling *Roe v. Wade* is overturned.

To me, metaphorically speaking, enabling states to protect preborn children from the moment of conception is the “Promised Land” that I am longing to see. I pray that this happens during my lifetime.

It saddens me that my daughter has had to grow up

in a world in which the taking of unborn children’s lives is so prevalent. In the U.S. alone, the unborn death toll from abortion stands at more than 62 million



since the 1973 Supreme Court decision. That figure does not include mothers who have died directly as a result of abortion, mothers who have died from drug or alcohol overdoses

following abortion, or of post-abortion suicides.

That death toll also does not take into account the collateral damage caused by abortion—

culture of abortion is prevalent in our political system, entertainment, and the media. Thus, the effort to restore a culture of life is played out on multiple fronts—not only in courtrooms, but also on television and movie screens and over Internet connections.

To counter the abortion lobby is a vast undertaking. But there is certainly hope born in every chapter and affiliate of National Right to Life. Research shows that the Millennial generation of young adults is more pro-life than young people of generations past.

When I learn that a baby’s life is saved and a mother is spared the harm of abortion, I am transported to the mountaintop. I still hope I will survive to see the promised land of an abortion-free America. But if I do not, I am confident that my daughter or another descendent will.

the severed relationships, the emotional and psychological trauma, the physical complications, the subsequent premature births.

What could be called the

The unjust ruling known as *Roe* will eventually crumble, just as so many of history’s injustices have. It is not too big to fail—it is such a huge travesty that failure is guaranteed.

Planned Parenthood Pushes, Provides Abortion During COVID

From page 27

Washington DC

The prioritizing of abortion was made clear by Planned Parenthood's Washington, DC affiliate. *The Washingtonian* magazine's Marisa M. Kashino wrote that, in the capital region, abortion had been deemed "essential" and noted that Planned Parenthood "clinics here are taking extra steps, including scaling back other services, to ensure that women can continue to safely access the procedure" (*The Washingtonian*, 4/1/20).

Laura Meyers, CEO for the DC affiliate, told the *Washingtonian* that her three local health centers were, for the time being, only allowing patients with "time-sensitive needs" to make in-person appointments. That meant, Meyers said, such things as "treating IUDs that are problematic, symptomatic visits [such as treating STDs], and abortion care" (italics added).

Making staff and facilities available for other services was problematic, given that Planned Parenthood, like many other legitimate health care providers, was experiencing a shortage of PPE (personal protective equipment).

Illinois

Another affiliate, Planned Parenthood of Illinois (PPIL), likewise made its agenda specific, closing eleven of its clinics but keeping six of those offering abortions open. They called this a temporary "consolidation" of services, directing patients to the open centers across the state.

"Planned Parenthood of Illinois is taking all necessary precautions to keep our staff

and patients healthy and well. This temporary consolidation of services is just one part of that," Dr. Amy Whitaker, Chief Medical Officer at PPIL, told the *Chicago Sun-Times*. "Patients will still need family planning services and abortion care during this time, and we are committed to providing it."

Anyone seeking "non-essential services" should reschedule, PPIL, said, while those seeking birth control, dealing with urinary tract infections, could call or do an online visit and get their prescriptions without ever having to come in (*Chicago Sun-Times*, 3/19/20).

If that didn't make PPIL's priorities clear, even with eleven of its centers still closed for COVID, PPIL proudly announced the opening of another large abortion-performing clinic in Waukegan. That abortion clinic, PPIL admitted, was strategically situated to draw overflow from North Chicago and any patients who might cross the state line from Wisconsin. PPIL described Wisconsin as "a state that poses stringent legal barriers to abortion."

The new Waukegan clinic is geared towards high volume. It has two what it calls "procedure rooms" five exam rooms and a parking lot with more than 100 spaces, though it is also accessible by public transportation (Lake County News-Sun, 5/12/20).

Where things stand today

Even as the virus resurges, "Many Planned Parenthood health centers are open and able to provide services, with precautions in place to

protect the health and safety of patients and staff," the national organization's website declared. "Some Planned Parenthood health centers have had to reduce hours or suspend walk-in appointments. And some Planned Parenthood health centers have made the difficult decision to close during this time and refer patients to other locations or health care providers."

But they still want to make sure that women know that abortion is still available at Planned Parenthood clinics in most of the country.

"Abortion is still legal in all 50 states in the U.S.," their website relates. "Abortion care is time-sensitive and essential, and nurses and doctors are doing the best they can to continue to provide abortions. If you're trying to schedule an abortion, our Abortion Care Finder can help you find your closest provider — give them a call to make an appointment or for more information." (Planned Parenthood website, 12/17/20)

Is the turn to telehealth a prelude to at home abortion?

The regular mention of consulting patients by phone and seeing others by videoconference by Planned Parenthood spokespeople above is not coincidental. And though one might assume that telehealth applies only to non-abortion patients, that would be wrong.

In April, early on in the pandemic, Planned Parenthood's national office announced that affiliates in all fifty states would be offering services by "telehealth" by the month's end (*Washington*

Times, 4/14/20). That in and of itself was not unusual. Many in the health care industry were turning to telemedicine as a way to continue seeing patients during the pandemic. But Planned Parenthood treated this as a way not only to connect to patients old and new, but also to promote its signature product — abortion.

Though services varied from center to center, PPFA said telehealth services would include birth control, hormone therapy, testing and treatment for sexually transmitted diseases and, in some cases, help in getting pills for an at-home abortion.

"You may be able to get a medical abortion—the abortion pill — through telehealth," the Planned Parenthood website advised. "If so, during your telehealth visit, your nurse or doctor will give you all of the information you need to use the abortion pill at home. Then you'll go to your local health center to pick up the medicines you'll need. And — depending on the state you live in — you can usually get a medication abortion up to 11 weeks after the first day of your last period" (*Washington Times*, 4/14/20).

As of mid-December of 2020, the FDA had not authorized online prescription and at-home use of mifepristone, except in limited testing. But Planned Parenthood had exploited that loophole to allow affiliates in Colorado, Minnesota, Montana, New Mexico, Oregon, and Washington state to offer "telabortions" as part of a

See "Pushes," page 40

Planned Parenthood Pushes, Provides Abortion During COVID

From page 39

“study” abortion pill promoter Gynuity was conducting in several states.

According to its website “PPFA joined the American Medical Association (AMA), the American Academy of Family Physicians (AAFP), and the American Academy of Pediatrics (AAP), and other leading health care organizations in signing on to an amicus brief in support of the lawsuit” to force the U.S. Food and Drug Administration (FDA) to roll back Risk Evaluation and Mitigation Strategy (REMS) regulations that required patients to meet a health care provider in person and pick up abortion pills at the clinic in order to help ensure their safety.

The suit argued that such regulations were “unnecessary” and “burdensome” during the national COVID-19 emergency, but their clear aim was to get rid of the requirements entirely so that mifepristone could be readily prescribed online and delivered by mail even after the virus is vanquished.

Staying Viable with Government Assistance

Researchers looking at phone tracking data have theorized that abortion clinic traffic fell off considerably during the initial phases of the pandemic. That may ultimately prove to be the case.

However, we know that Planned Parenthood was reserving a lot of its in-person slots for abortion patients

(meaning that the patients still visiting the clinics were more likely to be abortion patients). Moreover, there was at least one affiliate (Colorado clinics with the Planned Parenthood of the Rocky Mountains affiliate) reporting an increase in abortions due to women coming in from out of state (*KDVR*, 5/5/20).

Planned Parenthood’s deep pockets (\$1.6 billion in revenues in its 2018-19 Annual Report) and its aggressive efforts to keep its profitable abortion business open did not prevent the group from seeking special government assistance for businesses devastated by the coronavirus. At least 38 of Planned Parenthood’s affiliates shared \$80 million in forgivable loans from the government’s Small Business Administration’s Paycheck Protection Program designed to help avert layoffs during the pandemic (*CBS News*, 5/22/20).

PPFA Vice President Jacqueline Ayers told *Politico* that the loans ensured that health centers could retain staff and continue to provide patients with “essential, time-sensitive sexual and reproductive health care” during this crisis. (*Politico*. 7/6/20)

Despite unwelcome publicity and government efforts to have Planned Parenthood return the money, saying the abortion giant did not really meet the program requirements, some affiliates outright refused to return the funds (Reform Austin, 8/4/20). There was no indication that any had returned

some or all of the money by early December (*Washington Post* 12/2/20),

Of course, Planned Parenthood was not so poor as to give up its usual political advocacy. As early as May, the Planned Parenthood Action Fund was launching a \$5 million ad campaign in battleground states like Arizona, Colorado, Georgia, Iowa, Michigan, North Carolina, Nevada, Pennsylvania, Tennessee, and Wisconsin highlighting moves made in those states to either advance or impede “reproductive healthcare” during the pandemic (*NBC News*, 5/14/20).

Astute observers will recognize many of those states where the presidential election results turned out to be the closest.

Just two months later, the PP Action Fund used the debate over coronavirus relief funds to launch a [unspecified] “Six-Figure Paid Ad Campaign” targeting Republican Senators in tough races: Sens. Mitch McConnell (KY), Steve Daines (MT), John Cornyn (TX), Joni Ernst (IA), Susan Collins (ME), Cory Gardner (CO), Thom Tillis (NC) and Martha McSally (AZ). (Josh Hawley of Missouri was also targeted, but his seat was not up for election in 2020).

Fortunately, pro-life Republicans were able to retain all but two of those seats (Colorado and Arizona), but Planned Parenthood was clearly invested in using the COVID crisis to win votes for

their side.

Whose side are they on?

As of this last weekend, some 318,000 people in the U.S. had lost their lives to COVID. Planned Parenthood has taken at least that many lives every year since 2008!

While other clinics and other industries were shutting down, scrambling to figure out how they would stay in business, Planned Parenthood was boldly declaring they were still open. They claimed their abortion business was “essential” to a country dealing with a frightening and devastating health crisis.

They used the occasion to adapt, to publicize and advocate for telemedical chemical abortions where patients could meet with Planned Parenthood online for screening and counseling, and have their abortion pills shipped to their home address by mail.

Despite being the biggest, richest provider in the abortion industry, Planned Parenthood affiliates sought coronavirus relief funds to help keep their affiliates financially afloat. And then they spent millions to try to sway the election in favor of pro-abortion Democrats who would back their deadly agenda.

You’d think people that had suffered through one of the most deadly pandemics in history would have a new appreciation for the preciousness of human life.

But that’s never been the top priority at Planned Parenthood.

8th Circuit panel upholds decision invalidating two Arkansas laws

From page 28

strengths, and weaknesses. The human person has immense creative powers, a range of emotional responses that astound the observant, and a capacity to love and be loved that is at the core of human existence. Each human being possesses a spirit of life that at

our finest we have all recognized is the essence of humanity. And each human being is priceless beyond measure. Children with Down syndrome share in each of these fundamental attributes of humanity.

Then, arguably the most important statement:

While the state's

interest in nascent life has been recognized to give way to the right of a woman to be free from “unduly burdensome interference with her freedom to decide whether to terminate her pregnancy” *id.* at 874 (quoting *Maher v. Roe*, 432 U.S. 464, 473–74(1977)), it is apparent that the right is not, and should

not be, absolute. By focusing on viability alone, the Court fails to consider circumstances that strike at the core of humanity and pose such a significant threat that the State of Arkansas might rightfully place that threat above the right of a woman to choose to terminate a pregnancy.

Pro-lifers already gearing up to fight battles in forthcoming 117th Congress

From page 32

ruling (*Harris v. McRae*), the U.S. Supreme Court ruled, 5-4, that the Hyde Amendment did not contradict *Roe v. Wade*.

The Hyde Amendment is widely recognized as having a significant impact on the number of abortions in the United States, saving an estimated two million American lives. The Hyde Amendment has proven itself to be the greatest domestic abortion-reduction measure ever enacted by Congress. Additionally, 60% of Americans, or more, have consistently opposed taxpayer funding of abortion.

In the years after the Hyde Amendment was attached to LHHS appropriations, the remaining appropriations bills, as well as other government programs, were brought into line with this life-saving policy.

The fight on the Hyde Amendment will not only be over funding bills but also on any bills that expand or create new healthcare benefits. For example, prior to the time Barack Obama was elected president in 2008, an array of long-established

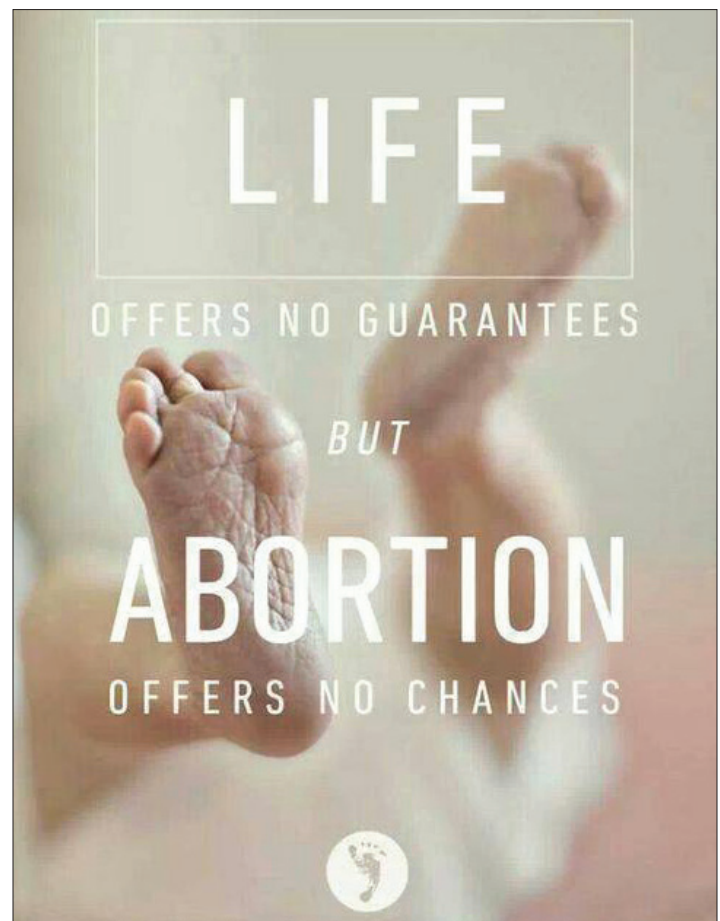
laws, including the Hyde Amendment, had created a nearly uniform policy that federal programs did not pay for abortion or subsidize health plans that included coverage of abortion, with narrow exceptions. Regrettably, provisions of the 2010 Obamacare health law ruptured that longstanding policy. The Obamacare law authorized massive federal subsidies to assist many millions of Americans to purchase private health plans that have covered abortion on demand.

There is abundant empirical evidence that where government funding for abortion is not available under Medicaid or the state equivalent program, at least one-fourth of the Medicaid-eligible women carry their babies to term, who would otherwise procure federally-funded abortions. Some pro-abortion advocacy groups have claimed that the abortion-reduction effect is substantially greater –one-in-three, or even 50 percent.

Despite slim pro-abortion majorities in the House and

sharply divided Senate, the coming fight on abortion will be long and difficult. Effective opposition will rely on the

hard work of pro-life members of Congress and the pro-life grassroots.



Why abortion activists hate photos of pre-born babies

From page 36

But since these new exams could only be interpreted by specialists, medical personnel became responsible for directly monitoring the foetus' well-being, while the mother's role drifted into the background. "The same technology that made the foetus visible, has made the mother invisible," wrote American political scientist Rosalind Pollack Petchesky in an influential 1987 essay.

Again, this is almost entirely revisionist history. The reason photographs of pre-born children were (and are) utilized was not to push mothers to the background or some such nonsense. It was to answer a fundamental question as the abortion movement began to achieve success: Who, exactly, was being aborted? If abortion simply removed a clump of cells, then we could comfortably accept its legalization. But if it destroyed a child, that was another matter entirely. Photographs shed light on the subject at the centre of the abortion debate—the very subject abortion activists desperately wanted to avoid. More:

And then, the public window into women's private domain became political. Before ultrasound technology, anti-abortion activists often relied on religious or moral arguments against safe access to abortions. But the powerful imagery of

prenatal scans helped them strengthen their cause—triggering people's protective instincts towards what looked like a tiny unborn child.

Still living in Sweden, Nilsson was said to have been shocked when he visited London in the 1980s to find his own images plastered on anti-abortion posters. Realising how the images were being used abroad, he refused to allow them to be published again, until an exhibition shortly before his death.

It really is impressive how much Eggeraats has managed to get wrong. In fact, abortion was first banned in the United States because of campaign by doctors who had begun to realize, based on an increasing body of evidence, that life began much

earlier than "quickening" as previously assumed by many. (Dr. Daniel K. Williams of the University of West Georgia has written a fantastic book on this subject, *Defenders of the Unborn*.) The push to get pro-life legislation was a drive for science-based legislation; the push to repeal those laws was a naked attempt to legalize "back-up contraception" in the wake of the Sexual Revolution. More:

In her 1987 essay, Petchesky argued the pro-choice movement hadn't found an image powerful enough to match the foetus as an icon of the anti-abortion movement. According to Christa Compas, director of Humanistisch Verbond – an NGO based on secular humanistic values – that remains true today. "I would love it

if there was a powerful image in support of the idea that people have the right to choose and shape their own lives," Compas said in a 2019 interview.

The fact that women can die from unsafe abortions clearly hasn't been enough to stamp out the anti-abortionist movement. Today, feminist movements across the world are going up against imagery that associates abortions with baby-killing. And for pregnant women, the procedure is still often associated with shame and tragedy. But in reality, many women also feel relief and a renewed sense of control after the procedure. Abortions can save lives: theirs.



Nowhere does Eggeraats address the central point here. The reason photos of the foetus are powerful is that they *show us who is being killed during an abortion*. A single photo of a baby in the womb dispels all the murky nonsense pushed by abortion activists and forces us to confront the truth about feticide. Sonogram photos aren't propaganda. They are evidence. Eggeraats' essay inadvertently makes that point for us: Abortion activists cannot believably assert their unscientific claims unless photos of children in the womb are ignored or dismissed.

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