



national
RIGHT TO LIFE
NEWS

May 2020

*Children are the
anchors that hold
a mother to life.*



Biden now is in lockstep with his extreme pro-abortion Democratic Party

By Karen Cross, National Right to Life Political Director

Former Vice President Joe Biden, his party's presumptive presidential nominee, is in lockstep with the Democratic Party's extreme position. And extreme is not an exaggeration.

Democrats finally are publicly admitting what we have known to be the truth for decades: they support all abortion – even on healthy mothers of healthy babies, through the entire pregnancy.

Like virtually all Democrats, Biden agrees not only with abortion on demand but also



with coercing taxpayers into paying for elective abortions by repealing the Hyde Amendment which he once supported. But there's more to Biden's support for the Abortion Lobby's wish list.

In an overview, the *New York Times* said Biden supports "legislation to codify *Roe v. Wade*" [code for abortion on demand] and pledges "to nominate only Supreme Court

See "Lockstep," page 32

Supreme Court hears Little Sisters of the Poor defend their right not to be compelled to pay for health coverage for products and procedures they find "morally unacceptable"

By Dave Andrusko

Freedom of conscience and the freedom to practice one's faith are cornerstones of the American experience. To the abortion industry, however, they are tiresome, "religious" barriers to commanding each and every one of us, directly or indirectly, into an offensive to weave abortion into every thread of American life.

At first glance, you might think the Pennsylvania Attorney General Josh Shapiro, and New Jersey Attorney General

Gurbir S. Grewal would be embarrassed about going after the Little Sisters of the Poor. But you would be wrong.

In *Little Sisters of the Poor v. Commonwealth of Pennsylvania*, the Supreme Court on May 6 heard arguments about whether these Catholic nuns, and others with religious and moral objections, are bound by a mandate, issued

See "Defend," page 35



Editorials

Opposition to abortion is “sacrosanct” for young Republicans, *New York Times* concedes

Job #1 for the pro-abortion media is defeating President Trump. Not exactly breaking news.

However, in combination with a story that ran last week in the Abortion Industry’s house newspaper (the *New York Times*), it’s extraordinary to see the flagship of the “mainstream media” acknowledging how crucial opposition to abortion is to the Republican Party and, by extension, to re-electing pro-life President Trump. Allow me to offer some background.

Last week I forwarded “Trump Pushes Young Republicans Away. Abortion Pulls Them Back” to a handful of friends to get their reactions. The story was written by Maggie Astor, a “political reporter” for the Trump-hating *New York Times*.

There were many amusing responses.

My favorite began, “I am sure the reporter was holding her nose because she had to talk to young, pro-life Republicans—and come to think of it, how did the *New York Times* find these bastions of GOP youth? It must have been like finding the rare albino tiger based on the way the *Times* writes the rest of the year: ‘Pro-life youth’? Gasp!”

Exactly.

When I read these kinds of stories, I am reminded of the glut of news stories, scholarly accounts, and full-blown books that grew like Topsy after the November 2016 investigating what one writer dubbed “Trumpology.” She defined this as “a nascent genre of reading material exploring a certain portion of the electorate that seems most likely to vote for Donald Trump.”



The difference here is Astor is trying to explain why, despite differences on other issues, young Republicans [18-23] nonetheless **stay** with the President. It’s the abortion issue, plain and simple.

This is a straightforward acknowledgement of how important the party’s pro-life position is, but it also pulls double duty. It

See “Opposition,” page 37

To describe Planned Parenthood as an “abortion business” is not “partly false” but 100% accurate

During the COVID-19 pandemic it almost seems as if not a day goes by that the Abortion Industry, led by Planned Parenthood doesn’t show its radical pro-abortion colors. To take a telling example, last week Planned Parenthood of the Rocky Mountains celebrated an upturn in abortions during the pandemic.

Whereas the rest of us are bursting with pride at what Americans are doing for the vulnerable during the COVID-19 pandemic—truly “We are all in this together”—PPRM prided itself on all the additional unborn lives it took because other states, such as nearby Texas, took the correct position that during a pandemic, priority must be given to necessary, not elective, surgical procedures, such as elective abortions.

“The numbers that we’ve seen have been pretty extraordinary,” Vicki Cowart, president and CEO of Planned Parenthood of the Rocky Mountains, bragged to *Fox News* Denver. In just April alone, Cowart told Michael Konopasek Planned Parenthood of the Rocky Mountains “saw more than 250 out-of-state patients for abortion care services.”

But that doesn’t mean that members of the Media Establishment

wouldn’t continue, forever and a day, to try to persuade us that Planned Parenthood’s involvement in abortion is like a tiny side business.

Before we get to *USA Today’s* bizarre fact-checking story, to be fair we should acknowledge that the *Washington Post* Fact checker and *Slate* magazine have actually practiced journalism when investigating some of Planned Parenthood’s most egregious lies, falsehoods, and misrepresentation.

In *WaPo’s* case, “For Planned Parenthood abortion stats, ‘3 percent’ and ‘94 percent’ are both misleading.” *Slate* headlined their debunking, “The Most Meaningless Abortion Statistic Ever.”

So, in light of that, how does *USA Today’s* fact checker come up with this doozy? In investigating a 2019 post, Haley BeMiller concedes, yes, “Planned Parenthood is still the largest provider of abortions in the United States,” but “to call it an abortion business is a stretch, as the organization provides other services far more often.”

See “Accurate,” page 39

From the President Carol Tobias

New Challenges and New Opportunities

National Right to Life has a flyer, available for download, titled, "Infinite Possibilities." A picture of an unborn child is surrounded by potential occupations and attributes. Will she be a physicist or photographer? Will he be mischievous? Merciful? It makes the reader wonder what that child will do-- will he influence thousands of young children as a teacher, will she discover a vaccine for the next pandemic?

I was reminded of that flyer as National Right to Life, along with the rest of the country, was dealing with the coronavirus and the fallout of its impact. Like many business places, our office was essentially closed and our employees have been working from home.

Sadly, we had to cancel the 2020 NRLC convention. The summer NRLC Academy, which brings in students from around the country for a five-week, in-depth study of pro-life issues and leadership training, was also canceled. (But both will be back next year!)

Rest assured, our staff has been extremely busy as they worked from home. It was more difficult-- not being able to walk down the hall or go upstairs to discuss some matter with a co-worker-- but by phone, computer, and social media, our efforts have continued.

Similar to the previously-mentioned "Infinite Possibilities" flyer, this latest crisis presented NRLC with new challenges and new opportunities.

As governors were saying, "No elective surgeries; essential procedures only," National Right to Life and its state affiliates led the way in urging state officials to properly declare that elective abortions are non-essential medical services.

We know that the abortion industry cares nothing about women and is only interested in increasing the number of babies who die each day. Their response to this tragic pandemic gave us opportunities to showcase their true colors.

As people were being told to stay home to prevent the spread of the virus, abortion facilities were encouraging women to come to their facility to end their pregnancies.

As health care personnel around the country were begging for Personal

Protective Equipment (PPE) so they may better protect themselves as they cared for COVID-19 patients, some Planned Parenthood clinics were asking supporters to donate PPE so their staff could continue killing babies. In fact, some Planned Parenthood affiliates suspended all services BUT abortions.

NRLC issued press releases and, during several interviews, I pointed out Planned Parenthood's rabid commitment to killing unborn babies. That point of view didn't necessarily show up in the mainstream media but people around the country heard and read the information via social media and more reasonable media outlets.

We pushed back against the abortion establishment's efforts to change Food and Drug Administration (FDA) protocols that protect women. The industry that deals in death wants to expand access to mail-order and telemedicine abortions. They want the FDA to loosen restrictions on chemical abortions so they can promote do-it-yourself abortions that take place at home.

NRLC worked with Congress to ensure that federal funds in the CARES Act, the COVID-19 stimulus bill which provides forgivable loans to small businesses, would not be available to the multi-billion dollar abortion industry.

One critically important, yet often overlooked, pro-life matter addresses the discrimination and rationing of health care to persons based on age or disability. Examples of this utilitarian ethic have flared up during the pandemic.

News stories and articles in medical journals written by "bioethicists" began discussing the possibility of rationing care based on the age and ability of those affected by COVID-19. Others raised the possibility of instituting mandatory "do not resuscitate" orders for COVID-19 patients, even if doing so overrode a patient's advanced directive or the family's wishes.

National Right to Life sent a letter to President Trump, Health and Human Services Secretary Alex Azar, and Office of Civil Rights(OCR) Director Roger Severino sounding the alarm about the danger of discriminatory policies

and the need to protect persons with disabilities, the elderly, and individuals with chronic conditions.

OCR, later followed by the Federal Emergency Management Agency,

issued a strong statement to ensure that "covered entities do not unlawfully discriminate against people with disabilities when making decisions about their treatment during the COVID-19 health care emergency."

Never forgetting that we have critical elections this year, NRLC and its political action committees have been interviewing candidates by phone, e-mailing candidate questionnaires and promoting our endorsements through social media and press releases.

One more opportunity is on-going right now, until June 10. NRLC is partnering with Christian Creative Media to bring the play, "Viable," into homes via WatchSalemMedia.com.

"Viable" is a story of heartbreak, grieving, sorrow, and shame. It is also a story of God's grace, mercy, and forgiveness. The play was filmed while playing at North Greenville University in Greenville, SC. Making this film available online, on phones or smart TV gives NRLC the opportunity to reach into homes we may not otherwise have reached. At the same time we help promote a terrific pro-life play, we are able to enlarge and enhance the NRLC name in a new, unusual, and fun way.

If you haven't seen "Viable" yet, I hope you will make an effort to do so. Set a date with family or friends to watch it together, even if that means you watch in your own homes then discuss it later on Facebook. There is a charge to watch the play but you will find it worth every penny.

Just as an unborn child has infinite possibilities, you can count on National Right to Life to use new challenges to further our efforts to protect the most voiceless among us.



Jettisoning the term “surgical abortion,” but not the horrific practice

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

In all likelihood you missed it, but the online pro-abortion news outlet Rewire.news recently decided to explain why it no longer would use the descriptive “surgical abortion.” Instead, Rewire vice president and managing editor Regina Mahone said in an April 16, 2020 editorial, these would now be called “procedural abortions.”

Hmmm.

Nothing has changed about the “procedure” itself. Abortionists **still** use instruments to pry

abortion”), Mahone claims the use of “surgical” to describe first-trimester abortions done by vacuum aspiration is “misleading.”

Here’s the argument.

The vacuum aspiration or “suction abortion” procedure used in most abortions, they say, “doesn’t typically require cutting or suturing of any kind.” It is only a “five- to ten-minute process involving gentle suction to remove the products of conception from the uterus.”

In case it wasn’t clear, the

that makes their product harder to sell. Years ago, Planned Parenthood largely jettisoned “surgical abortion” in favor of the phrase “in-clinic abortion.” See our 2013 news story “The End of ‘Surgical’ Abortion” (www.nationalrighttolifenews.org/2013/07/the-end-of-surgical-abortion).

While the claim is that the change is needed “to more accurately describe abortion care,” the pragmatic reasons are easily discerned.

As Rewire tacitly acknowledges, the term “surgical” is off-putting for many women. They don’t like the idea of surgery. They find it intimidating, and they don’t like the idea of cutting or scraping. (This is one reason why chemical abortions were developed). The abortion industry hopes to win them back by trying to make the case that this isn’t surgery at all-- that it presents none of the problems they would typically associate with surgery.

But again, these abortions do involve the use of instruments inserted into a woman’s vagina, pushed through the cervix into her uterus, where a cannula (tube), often with a sharp cutting edge, is dragged along the uterine wall to find and then remove the child and the rest of the amniotic or placental tissue that served as the child’s life support system.

No “cutting”? How absurd. Cutting and scraping are part of the process, belying the idea that no surgery is involved.

It is worth repeating what we have said before about this

claim:

The claim that “no cutting” is involved appears to rest on a contention that the baby, who is definitely cut, is not a part of the woman’s body. Yet abortion’s defenders fail to explain how this claim is compatible with their long-time assertion that a woman should be free to abort because it is “her body, her choice.”

If the fetus is really just part of “her body,” then cutting is clearly done to “her” body and the claims of those trying to recast these as “non-surgical” abortions are clearly false.

If the child is not part of her body, as the promoters of this new definition seem to contend, then the old slogan of “my body, my choice” is based on a false premise and the whole logic of the pro-choice movement is undermined.

Of course, the language here was never meant to follow the rules of logic, but to serve the interest of the abortion cause.

Motivations for the change

There are other reasons besides reducing the fear-factor for women why the industry is particularly interested **now** in recasting these as non-surgical abortions.

See “Jettisoning,” page 22



open the birth canal, to reach in and suction or cut out the baby. And the result is **still** a dead baby, cut up into many pieces, laying on a tray or in a collection bottle.

So why the change in terminology?

The explanation given appears to cloud rather than clarify the issue.

Under the headline, “Notes on Language: Why We Stopped Using ‘Surgical Abortion’ at Rewire.News,” Mahone says Rewire “has updated its style guide to more accurately describe abortion care.” While typically applied to any abortion that is not chemically induced (aka “medication

“products of conception” referred to by Mahone is *the baby*, who is killed as his or her flesh is ripped apart by the “gentle suction” of the vacuum aspiration machine. If you’re looking for a classic example in how the industry uses euphemism to mask the reality of what they do, you’ll find no better.

Calling it a “procedure” helps to put those disturbing images out of the mind and makes it sound so much simpler and benign.

They’ve tried this tack before

This is not the abortion industry’s first (or likely the last) attempt to get rid of language

Good news. Full 9th Circuit refuses to review its decision upholding Trump Administration's "Protect Life Rule"

By Dave Andrusko

When an 11-member panel of the 9th U.S. Circuit Court of Appeals affirmed a three-judge panel's decision upholding the Trump Administration's "Protect Life Rule," the state of California asked the Court to rehear its *en banc* decision. The decision had vacated court decisions entered in California, Oregon, and Washington which blocked enforcement of the rule.

Last Friday, the 9th Circuit refused to reconsider its 7-4 decision to uphold, according to the *Court House News Service*. The judges simply announced that the Court "has voted to deny the Petition of Plaintiffs-Appellees."

Derided as a "gag rule," the Trump Administration's Protect Life Rule did nothing more than require recipients of Title X family planning money not to refer clients for abortion as a method of family planning or co-locate with abortion clinics. Planned Parenthood opted out of the Title X program rather than accept the limitations which were clearly intended by Congress when it created the program in 1970.

At the time of the February 24 *en banc* decision, Mollie Timmons, a Department of Justice spokesperson, said, "Congress has long prohibited the use of Title X funds in programs where abortion is a method of family planning and HHS's recent rule makes that longstanding prohibition a reality."

Ed Whelan, in a very helpful post, nicely summarized the 9th Circuit's holding in *California v. Azar*:

In her majority opinion, Judge Ikuta explains that the Title X regulations are similar to those upheld by the Supreme Court in *Rust v. Sullivan* in 1991, and that they are in fact "less restrictive in at least one important respect: a counselor providing nondirective pregnancy counseling 'may discuss abortion' so long as 'the counselor neither refers for, nor encourages, abortion.'" There therefore "is no 'gag' on abortion counseling" (even if

one were to adopt the dubious position that a refusal to provide funding amounts to a

the regulations are inconsistent with a provision in the so-called Affordable Care



“gag”).

Ikuta rejects arguments that two intervening congressional enactments render *Rust's* holding no longer valid (pp. 32-48) and that

Act (pp. 49-58). She also rejects administrative-law claims that the Title X regulations are in various respects arbitrary and capricious (pp. 59-81).

What would the abortion policy of the U.S. be like, if the evening news broadcast the death toll from that day's abortions?

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

Each day around noon, I receive an alert on my cell phone. The announcement comes courtesy of a local television station, which reports the number of Coronavirus cases that day in my state, along with the overall death toll from the vicious virus.

It is a somber way to mark the middle of the day—a solemn reminder of the fragility of life...the deadly dangers of the pandemic...and the overwhelming toll the disease has taken on Pennsylvania.

When I tune into cable television news, I often see the national and worldwide COVID-19 case counts. It is like a stock market image—only in this case, a sharp rise is not good news. I grimly peruse the stats, knowing that behind each statistic is a precious human being who has fallen victim to the Corona monster. Each individual had a name, an

identity, and a family of origin. Each person was precious in the eyes of the Almighty Father.

Research indicates that even people who are not accustomed to prayer are praying for an end to the pandemic. The immense tragedy has grabbed hold of their hearts, and they want the suffering to come to a merciful close.

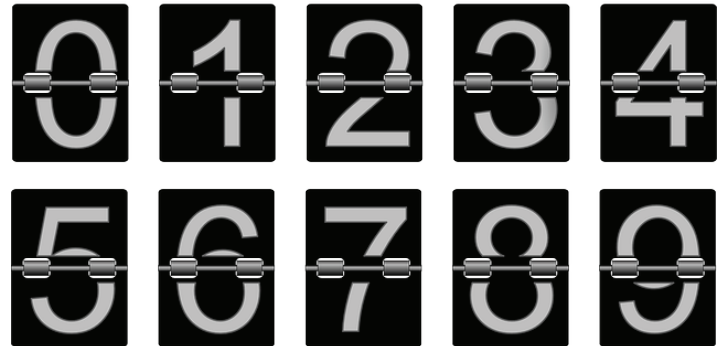
The media attention makes me wonder: What would the abortion policy of the U.S. be like, if the evening news broadcast the death toll from that day's abortions?

I would hazard a guess that most Americans do not realize just how high the casualty count is from legal abortion. In Pennsylvania alone, more than 30,000 abortions occur in a single year. Across the nation, abortions number 900,000 annually.

Those are staggering

figures, and they illustrate the tremendous devastation abortion has caused across

the situation even more painful is that each of these deaths is entirely preventable.



our country and in our local communities. For the babies are not the only victims. There are also the mothers, who must grieve children lost to abortion, and fathers, who mourn their lost fatherhood.

There are brothers and sisters, aunts and uncles, grandmothers and grandfathers—all left with a chasm in their families and a hole in their hearts. What makes

In the time it took you to read this article, countless babies have died from abortion in our nation. In tribute to them—and to the families they left behind—let us work even harder for an end to *Roe v. Wade*. We need no vaccine to end this scourge—just a decision by the Justices of the Supreme Court to give every baby a chance at life.

Problems continue to mount for “Pro-choice Catholic” Joe Biden

By Dave Andrusko

It’s no secret that Joe Biden, the Democrats’ presumptive presidential nominee, is attempting to navigate a bad patch of rough waters. But it is like being up a creek without a paddle.

Supporters and critics alike shake their heads after Biden’s many attempts to construct an understandable sentence. While that’s old news, the former Vice President seems to be getting worse.

And, of course, the most damaging development of late are the allegations made by Tara Reade. Biden has denied all wrong-doing, but the heat is slowly building. (See below.)

But there’s much more. As we discussed last Tuesday at *National Right to Life News Today*, the Harvard School of Government’s Institute of Politics put the best face possible on a recent survey of 18-29 year olds. Truth be told Biden generates neither good numbers [only 34% have a favorable opinion of him] nor enthusiasm [16% would vote for an Independent].

Slate’s Leon Krauze reported earlier last week “A recent Latino Decisions poll reveals a clear enthusiasm gap among Latinos for both Biden and the 2020 election itself, with only 49 percent of registered voters currently committed to choosing Biden over Trump, and just six out of 10 planning to go to the polls in November.”

And, in an interesting experiment, the Morning Consult showed self-described Democrats a clip of Biden vigorously defending himself against Ms. Reade’s allegations after which 26% said Democrats “should select a

different candidate for the 2020 general election.”

Ominously, “Forty percent of Democrats under the age of 45 said the party should pick a different nominee.”

What’s interesting is these Democrat voters were shown only a 30 second clip where Biden denied the allegations “unequivocally.” If they had been shown the entire interview on “Morning Joe,” my guess is a much larger percentage would have wanted Biden replaced.

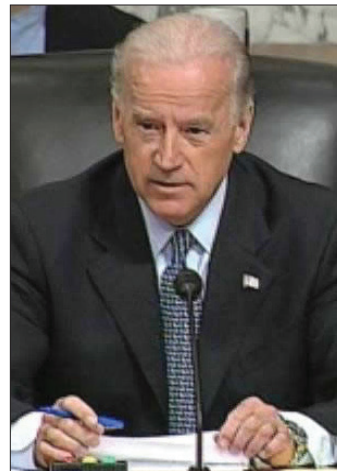
Then there’s this, from a long story that appeared in the *National Catholic Register*. This post, written by Laretta Brown, ran under the provocative headline “Running for President as a Pro-Abortion Catholic, Is Biden a Problem for US Bishops? News Analysis: Biden’s presumptive nomination echoes the intense controversy that erupted in 2004 when John Kerry, another Catholic supporter of legal abortion, was the Democratic presidential nominee.”

It’s important to read in its entirety, but here are four takeaways.

1. Biden is a “Catholic presidential nominee who overtly supports abortion rights” and continues to do so aggressively. Referring to April 28 remarks, Brown writes, “This was only one of a series of times that Biden has defended abortion on the 2020 campaign trail, in direct contradiction to the Church’s teachings about the intrinsic evil of abortion.”

2. Back in September 2008, when Biden was a U.S. Senator, he appeared on *Meet the Press*, as Obama’s vice-presidential nominee. Biden said, Brown writes, that while he was

“prepared as a matter of faith to accept that life begins at the moment of conception,” he would not impose that belief on anyone through law because that would be “inappropriate in a pluralistic society.”



Pro-abortion Joe Biden

Archbishop Charles Chaput and Bishop James Conley responded in no uncertain terms:

“Abortion is a foundational issue” and “is always grievously wrong,” Archbishop Chaput and Bishop Conley stated, adding that, “in reality, modern biology knows exactly when human life begins: at the moment of conception. Religion has nothing to do with it.”

“If, as Sen. Biden said, ‘I’m prepared as a matter of faith to accept that life begins at the moment of conception,’ then he is not merely wrong about the science of new life; he also fails to defend the innocent life he already knows is there,” the two bishops said.

3. Brown interviewed Russell Shaw, a Catholic author who served as secretary for public affairs of the National Conference of Catholic Bishops/U.S. Catholic Conference from 1969 to 1987. Shaw said, according to Brown, “that, as the 2020 campaign heats up, the bishops could potentially speak out again if Biden presents his positions a certain way.”

“The really crucial thing for the bishops as pastoral leaders is to make it perfectly clear to Catholics generally that the fact that Biden or some other candidate holds views in conflict with the clear, authoritative teaching of the Church does not somehow make those views acceptable for Catholics to hold — and that is not a political position, but a pastoral one.”

4. Brown writes that according to Archbishop Naumann [chairman of the USCCB Committee on Pro-Life Activities],

following an ad limina visit, Pope Francis agreed with the U.S. bishops’ identifying abortion as the “preeminent” priority, Catholic News Service reported.

“His response to that was, ‘Of course, it is. It’s the most fundamental right,’” Archbishop Naumann told CNS. “He said, ‘This is not first a religious issue; it’s a human-rights issue,’ which is so true.”

And we still have 179 days until the November 3 elections.

Twitter Tests New Feature Giving Users ‘Option to Revise’ a Reply That ‘Could Be Harmful’

By Alexander Hall

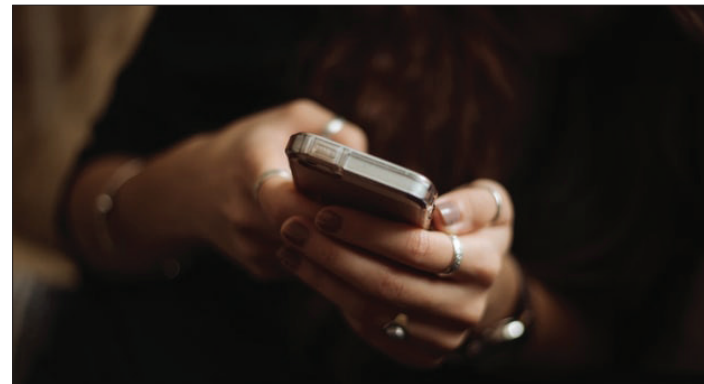
Instead of arguing with people on Twitter, you may be getting nagged by the platform about your posts and what it suggests “could be harmful.”

“When things get heated, you may say things you don’t mean. To let you rethink a reply, we’re running a limited experiment on iOS with a prompt that gives you the option to revise your reply before it’s published if it uses language that could be harmful,” Twitter Support announced in a May 5 tweet.

Twitter has mulled over making drastic changes to the platform before. In Fall of 2018, Twitter CEO Jack Dorsey considered “introducing an edit button to correct errors in tweets, according to the social media platform’s chief executive,” The Telegraph reported.

But Dorsey has since given

a more definitive response concerning the addition of an edit button. “During a video Q&A with Wired, Dorsey was asked if there’ll be an edit



button for Twitter in 2020. He replies, with a faint smile: “The answer is no,” according to The Verge’s coverage in January 2020.

This latest change, “the option to revise your reply,” however, appears to be playing to a trend

popping up on multiple other platforms.

Instagram had experimented with an anti-bullying AI, which the social media company

reported for bullying,” and the commenter will then have the “opportunity” to change the caption before posting it.

“In addition to limiting the reach of bullying, this warning helps educate people on what we don’t allow on Instagram, and when an account may be at risk of breaking our rules,” the Dec. 16, 2020 blog stated.

Business Insider discussed a similar feature with Gmail, which allows users to “unsend” an email using Google Mail’s “Undo” option. Users can toggle how long they have to stop an email in transit between “5, 10, 20, or 30 seconds. The longer you choose, the longer you’ll have to decide if you want to unsend an email after you’ve pressed send.”

explained is triggered when an Instagram user writes a caption on a post “and our AI detects the caption as potentially offensive.” The commenter “will receive a prompt informing them that their caption is similar to those

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

Mom shares amazing photos of premature twins who survived at 22 weeks

‘I am so lucky and I know it’s an absolute miracle. I feel blessed.’

By Paul Smeaton

NORTH CAROLINA, April 29, 2020 — The mother of the world’s second most premature babies to survive life outside the womb has told reporters she feels blessed after doctors suggested that her identical

twin daughters had zero chance of surviving.

“I am so lucky and I know it’s an absolute miracle. I feel blessed,” the daughters’ mother, Tracey Hernandez, told The Metro after sharing incredible

photos of her children receiving critical care from medics in North Carolina.

“They are a creation of God and I have watched them develop outside the womb,” she said.

Twins Makenzie and Makayla were born at just 22 weeks, with Makenzie weighing less than 1 lb, 1 oz and Makayla 1 lb, 3 oz.

The twins were born on December 8, 2019. After months in the hospital with treatment including back and heart surgery, they are expected to return home soon.

“They have both amazed me and they continue to amaze me,” Hernandez said. “They are a blessing and I am so proud to call myself their mom.”



Makayla and Makenzie, born at 22 weeks and three days, are now three months old and are set to go home for the first time next month. (Picture: Tracey Hernandez/Metro.co.uk)



Makenzie and Makalya were born weighing 11b 1oz and 11b 3oz and had less than a 10% chance of survival. (Picture: Tracey Hernandez/Metro.co.uk)



So far the twins have spent 129 days in hospital and are still recovering from their premature arrival into the world. (Picture: Tracey Hernandez/Metro.co.uk)

Hernandez told reporters: “When I went into labour they told me the survival rate for them was zero per cent. They said that babies born at less than 23 weeks just don’t make it.”

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

Is abortion ‘essential’—or is human life?

By Paul Stark, Communications Associate, Minnesota Citizens Concerned for Life

When the COVID-19 pandemic struck and governors began postponing elective and non-essential procedures in order to conserve scarce medical supplies, abortion defenders argued that such postponements should not apply to the practice of abortion.

Why not? Because abortion, they said, is essential. But in what way?

“Here’s the thing: The abortions in question are absolutely elective,” acknowledges Regina Mahone in a recent article at the abortion-advocacy outlet *Rewire.News*. After all, in any actual medical emergency, a pregnant woman should go to the hospital to receive the care she needs. That’s not what we’re talking about when we talk about abortion. We’re talking about a procedure that is, by any ordinary definition of the word, “elective.” In fact, not only isn’t abortion a response to an urgent medical situation—it’s not a “medical”

procedure at all since it serves no health-related purpose (such as the treatment or prevention of a disease).

Mahone claims, though, that abortion is still necessary.

“Just because a service is elective, that doesn’t make it any less time-sensitive or necessary,” she writes. “When people are forced to delay their abortions, the care they seek becomes more expensive and difficult—or impossible—to obtain.”

Of course, to say that something is expensive or difficult to obtain (like, say, a new car) is not to show that it is *necessary* to obtain. Why is abortion necessary? Why is it essential?

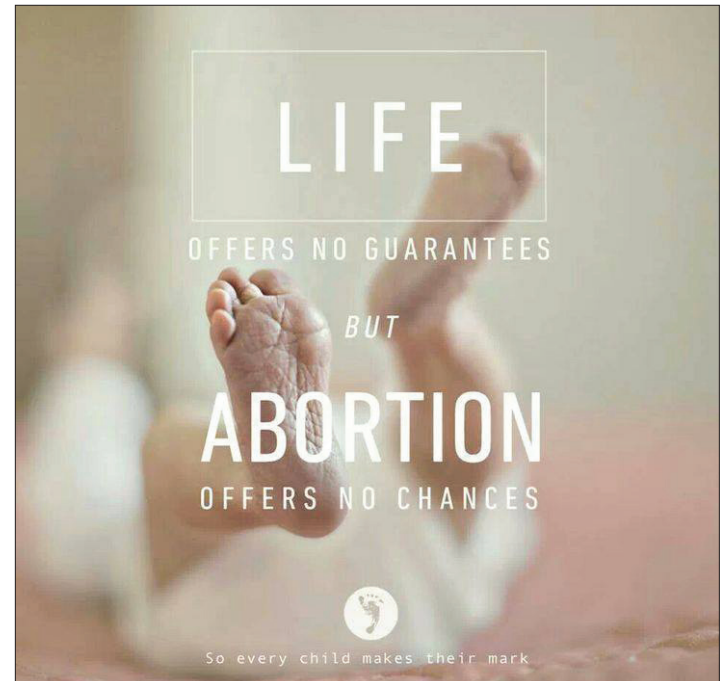
Here’s what Sarah Stoesz, president and CEO of Planned Parenthood North Central States, says: “We believe all abortions, if women seek them, are essential.”

But wanting something doesn’t make it essential. Ice cream certainly isn’t.

Abortion defenders probably see abortion as essential because of the unwanted consequences of the continued existence and birth of the human being *in utero*. That is, abortion is essential *relative to the objective of ending the life of the unborn child (and*

preventing all that life may entail). To achieve this purpose, abortion is indeed necessary.

But a humane and just and healthy society doesn’t think that it’s important for some humans to die so others can get what they wish. It regards every single one of us as essential.



An even greater appreciation for Mother's Day

By Melissa Ohden

Editor's note. Melissa, a frequent contributor to NRL News Today, survived a saline abortion in 1977. She has shared her story all over the world, including at numerous National Right to Life conventions.

The celebration of Mother's Day is rife with heart-warming tributes to the women who make our world go around—the mothers, grandmothers, aunts, and mother figures who sacrificially pour into our lives into ours. Here are a few samples.

"What I love about my mom is she's easy to talk to and she's funny. I love her."

"No words can express the gratitude I have for my mom. She's my best friend, my mom, and my hero. I love the way that at any chance she gets, she will show Jesus' love."

"I love how you love us no matter how crazy we get, how you help me with math even when you don't completely understand, and I love that you do your job in the world even though you never want to leave us."

"I love that you gave birth to me."

Typical, in one sense, but truly special in another. **All** of these sweet reflections are from the children of abortion survivors. **None** of them would be here had their mothers not survived the best attempt of the abortionist to take their lives.

The Abortion Survivors Network is made of people just like this, and many others. From 2012-2020, The Abortion Survivors Network had contact with 316 survivors of abortion or their friends or family who

contacted us on their behalf. We know this is just the tip of the iceberg when it comes to survivors—many don't ever share their stories with anyone, and, in fact, many probably don't even know about their survival, as it's kept a secret.

As an organization we

lives have been permanently altered by our presence.

Every abortion survivor is someone's son or daughter and grandchild. They're likely also a sibling, a cousin, an aunt or an uncle. And many survivors are parents, grandparents and even great-grandparents



Jennifer Milbourn, second from the left, with her family.

educate frequently about how abortion affects generations; how we understand the dynamics that often lead women to abortion. We have found love and forgiveness for our birthparents, clinic workers, even the abortionists themselves.

Why do we share our stories? To bring hope and healing to all who are impacted by abortion. However, what we don't often share, because it's so personal, is what it means for our families to have us in their lives.

Yes, we are survivors. But that's not all we are. We are part of a network of people whose

themselves. In fact, I received a beautiful email earlier this year from the great-great grandchild of a survivor of an at-home attempted abortion.

This year, as we do every year, we celebrate the women who gave us life, even if that wasn't their original plan. The Abortion Survivors Network also celebrates the hundreds of survivors in our Network who are themselves mothers, grandmothers, and mother figures.

Women such as Jennifer Milbourn, pictured here, second from the left. You may recognize her from the

"Face the Choice" ad that was unveiled at the March for Life.

Jennifer survived her biological mom's vacuum aspiration abortion. The abortionist couldn't complete the abortion because Jennifer's head was too big. In other words, she was much further along gestationally than what had been expected.

Jennifer's son, Gabriel, shared the first loving comment above about her. Daughter, Madalyn, offered the second.

To our movement, survivors offer a sign of hope. Hope that lives are being saved and future generations made possible because of that. Survivors are also a very tangible illustration of the all the unborn we're fighting to save.

To our families, we're their greatest supports and encouragers, their place of strength. And from the last two statements included above about their mother (graciously shared by my 12-year-old, Olivia), we're also steadfast in our commitment to math homework and to making a difference with our lives.

As our world comes out of quarantine, I hope and pray that abortion supporters will have a new appreciation of abortion survivors—that they will see us as ordinary people just as our own children do.

To all the mothers, grandmothers, and mother figures in our Network, in our movement, I pray that you had a Happy Mother's Day.

And to my birthmother, Ruth, I echo the sentiments of my Olivia: "I love that you gave birth to me."

The life inside a mother's womb remains no less precious and deserving of protection during a pandemic

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

I happened to be perusing the *Philadelphia Inquirer* online when the headline of an opinion piece stopped me cold: "I had an abortion during the pandemic. Reproductive health care is crucial."

I agreed with half the headline—I believe in safe, trustworthy reproductive health care for women. But I don't believe abortion is a legitimate part of it.

I was also troubled by the fact that, less than a week before Mother's Day, a major city newspaper would run an opinion piece promoting abortion.

By tying the abortion to the pandemic, the news outlet fed on the fears of readers at

a critical time in our nation's history. The writer, Fae Ehsan, was also not a casual observer to the cause of abortion. As she wrote, "I have spent the past four years donating my time, talent, and money to Planned Parenthood whenever I can."

The reasons the writer gave for her abortion were telling. "My concerns about my own health, combined with anxiety about finances and the economic upheaval that has come with the coronavirus made our choice obvious — though it was not a decision we made lightly."

It struck me that, had the woman been volunteering for a pregnancy care center the last few years rather than an abortion outlet, how different her story might have been. At

the pregnancy resource center, she would have been given the emotional support so important in bringing a baby into the world during a difficult time. A doctor who respected the dignity and value of all human life could have allayed any unfounded fears about her health and the well-being of her baby.

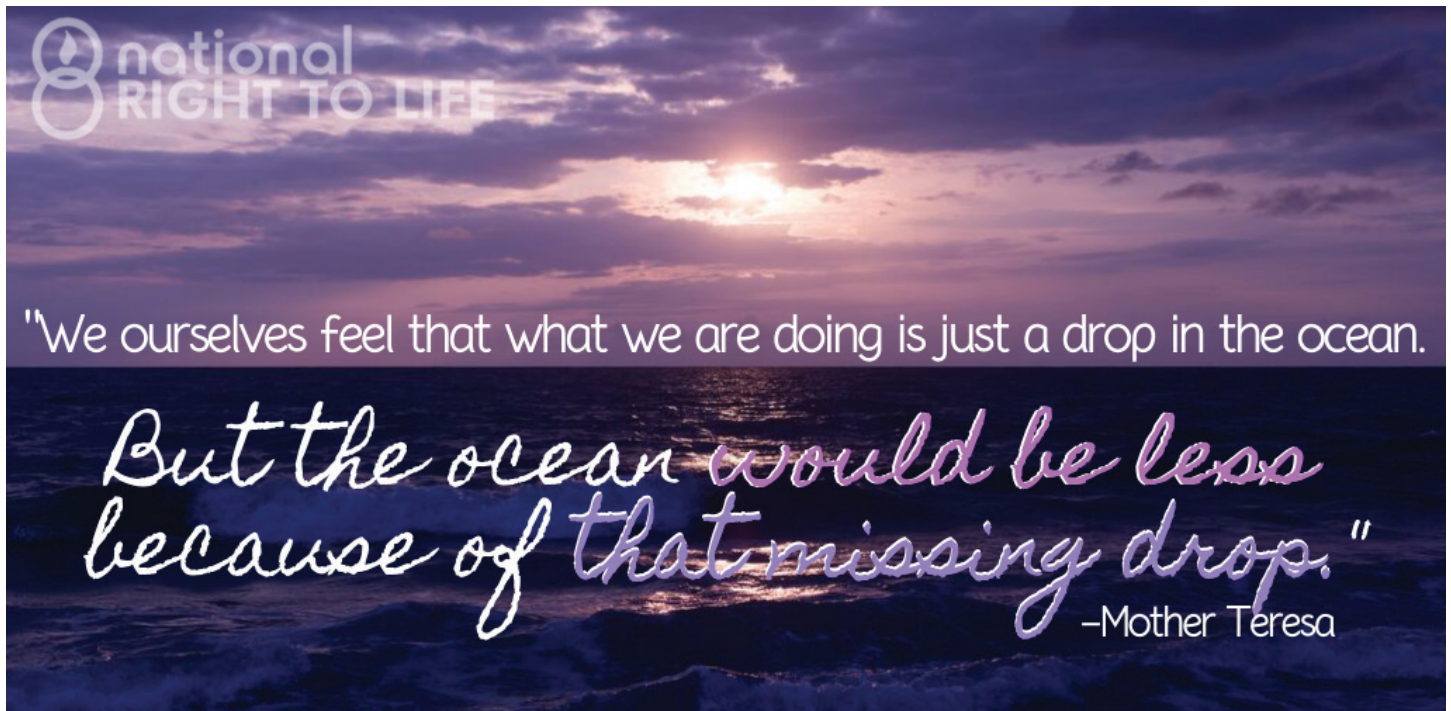
A life-affirming counselor could have eased her anxiety about finances and could have pointed her to resources available for her and her family. Instead of a cold-hearted offer to take the life of her child, the pregnancy support center could have assisted her with a choice to parent her child or place her child for adoption.

It saddens me that the writer thought abortion was her only

choice. Abortion is a sign that society has failed women. The life inside a mother's womb remains no less precious and deserving of protection during a pandemic.

Did the abortion center provide her with resources to deal with the aftermath of abortion? Will abortion center personnel be ready to handle calls in the middle of the night, should she come to regret her decision? To ask the question is to answer it. NO!

Healing and hope are available to women who have undergone the tragedy of abortion. I hope Fae finds it. But she can never come to know it through the abortion industry, which has no interest in dealing with dissatisfied customers.



The worldwide leader in . . . hope?

By Kirk Walden

Editor's note. This is excerpted from a post at Pregnancy Help News.

Whenever circumstances change, those with a larger vision adapt. They re-imagine. In short, while they may be surprised at times, they are never caught off-guard. They remember the vision and ask, "Based on this new situation, how do we succeed?"

The pregnancy help community has adapted and re-imagined for nearly 50 years. One salient example? In the 1980s and into the early 90s, our best avenue to reach prospective clients was a free, high-efficacy pregnancy test—better than those found in retail outlets.

But if we believed then we were in the "Pregnancy Test" business, we would have been forced to shutter our doors the moment those same pregnancy

tests showed up on drugstore shelves.

We adapted. We now offer ultrasound. STI testing. Prenatal care. Oh, and parenting classes, mentoring, Bible studies, educational support, job training. And let's remember all the material needs we meet as well.

The truth? Though it is not (yet) an industry-wide mantra, we are in the Hope Business. Perhaps our vision should be, "Our goal is to be the worldwide leader in hope."

We understand that those who come in our door—whether they realize it—are desperately seeking hope in a challenging situation.

Our vision—through various delivery methods—is to provide hope so she (and perhaps he) is empowered to choose life.

Hope comes with a smile. It comes with encouragement. It comes with providing resources

and solid, straight answers to tough questions. And it comes by sticking close to someone (with proper social distancing,

business, becoming the best at what we do.

Will pregnancy help organizations one day be



of course) when others walk away.

Whatever our list of services, wherever we serve, regardless of our budget, we are in the Hope business. Let's stay in

viewed as "The Worldwide Leader of Hope?" I don't know, but it's a vision worth considering.

Hope, after all, springs eternal.

Younger voters not keen on pro-abortion Joe Biden

By Dave Andrusko

Let's be clear. A study from the ultra-liberal Institute of Politics at the Harvard Kennedy School of Government does not paint a portrait of large numbers of young people saying they approve of President Trump. No doubt the authors were happy with this, but that was not the primary objective of the survey.

Rather the entire point, judging by the "analysis," is to persuade the reader that support for pro-abortion Joe Biden among young voters [18-29] is "comparable" to what Sen. Bernie Sanders would enjoy if he were "at the top of the Democrat Ticket."

This is, obviously, key. Biden will need a healthy turnout among young people if he is to defeat President Trump.

But if you actually look at the questions, the crosstabs, and the Top Lines, as opposed to all the puff interpreting what the poll supposedly says, you find that Biden's approval

numbers are underwhelming as is enthusiasm for the presumptive Democrat



presidential nominee.

So, to the basic "Do you have a favorable or unfavorable view" question, you would never guess that Biden is barely ahead. Writing at *Fox News*, Justin Haskins observes

Although the percentage of young people who said they have an unfavorable

view of President Trump was much higher (63 percent),

percent [than Biden at eight percent].

What about if they were given options—say, voting for a third party Independent candidate? According to Haskins

Even worse for Biden, when asked if they would rather vote for Trump, Biden or an independent candidate in 2020, only 39 percent said they would choose Biden. One-quarter chose Trump, and a whopping 16 percent said they would rather pick an independent.

the percent who said they have a favorable opinion of Trump was only four percentage points lower (30 percent) than Biden's. And, quite interestingly, more young people said they have a "very favorable" view of Trump, 14

Again, the point is not to misrepresent what young people said, as one could readily argue the Institute of Politics at the Harvard Kennedy School of Government did. It is to note that former Vice President Biden is not exciting younger voters at all, and that could spell disaster for him come November 3.

Building a bridge to a reporter whose pro-abortion biases are showing

By Laura Echevarria, NRL Director of Communications and Press Secretary

I have a problem.

A reporter who has interviewed key National Right to Life spokespersons is an apologist for pro-abortion groups. How do I know?

Her Twitter feed uses pro-abortion language to describe abortion on demand. Her articles unflinchingly show abortion in a positive light. This reporter also writes pieces that are highly complimentary of the leadership of pro-abortion groups. In many of her posts, not a single pro-life voice is heard.

Her writing is so obviously pro-abortion, she was recently the subject of a conservative columnist's analysis which highlighted in detail this woman's unbending and unyielding bias.

Yet, because she is the reporter covering the abortion issue for a major news outlet, I can't really ignore her. Nor should I.

How do I "fix" this? How do I influence a reporter to modify the language she uses? To be clear, I am not trying to persuade this reporter to use our language. I just want her to use something approximating objective language.

A recent pinned tweet on her Twitter account asks the reader if he or she wants to know "what a post-Roe world looks like?" It featured a list of things that would supposedly happen

based on "Coronavirus-related abortion bans." This in spite of the obvious fact that limitations on abortion are not "targeting" abortion. The state executive orders are restrictions on all non-essential medical services during a pandemic, which includes elective abortion.

Other tweets include such loaded language as:

-Really interesting article

administered.[emphasis mine]

And in a recent article about abortion clinics remaining open during the COVID-19 pandemic, she wrote:

-For *anti-abortion rights activists*, overturning *Roe* is the first step to nationally criminalizing pregnancy termination completely.

She retweets articles and commentary from Planned

rights debate toward third-trimester abortions." However, the Born-Alive Abortion Survivors Protection Act is a law designed to protect babies *already born*.

If she were a reporter for a liberal, pro-abortion media outlet such as *ReWire News* or *Mother Jones Magazine*, I wouldn't be surprised at her reporting, just as Planned Parenthood's communications director wouldn't be surprised at negative coverage of their issue by *NRL News*.

However, her outlet is a major news outlet and, as such, should attempt to be unbiased in its coverage.

How do I "fix" it?

I go back to the basics.

I form a relationship and attempt to teach her to think of pro-lifers not as the monsters portrayed by the Abortion Industry but as rational human beings whose arguments have merit. I've started doing that.

I'm not expecting a complete turnaround—just respect. Respect for our issue and respect for the voices—born and unborn—that we represent.

If down the road she begins to give our Movement a fair shake, that would be wonderful. For now, I will build a bridge.

It may be rickety at first but with time, I hope I can make it stronger.



Laura Echevarria

from the NYT on how *anti-abortion rights* policies are aligning some young Republicans.

-Two months ago they (Supreme Court justices) heard a case that would effectively *gut Roe v Wade*.

-Many patients seeking medication abortion use websites that *allow them to circumvent laws that heavily regulate* how the drug is

Planned Parenthood and other abortion apologists. As noted above, she uses the term "anti-abortion rights" to describe pro-lifers, a confusing formulation I'd never heard of before.

In her coverage of the Born-Alive Abortion Survivors Protection Act, she adheres closely to pro-abortion talking points. She described the bill as "a push by the conservative right to reframe the reproductive

Regardless of circumstance, every baby is a little miracle

By Dave Andrusko

We have three daughters and one son and have been blessed with three grandchildren. Even though our youngest grandson is still in diapers, I don't often

"wanted" babies or "perfect" babies, but all babies.

And since these commercials very often begin with sonograms, pro-lifers see this

circumstances maybe—and the ad doesn't pretend all circumstances are a bed of roses—babies are a gift, a treasure, to honor and protect

of his or her conception. That's on us.

Moreover, without being preachy or overt, the ad (I believe) is telling us in no uncertain terms that there is only one choice—to choose to "celebrate, support and protect" this "little miracle."

There are many other "whethers," including ...

whether the baby has "special needs" or has "lots of needs" [comes as a package deal with multiple siblings]... or adopted...or comes "3 months early" [a preemie] "or ten years late "[an older mom]...or is biracial/multicultural...or has family nearby or "far away."



see commercials for Pampers or Huggies or Luvs these days, or, if I do, they don't register.

But I know, from having written about **many** of Pampers' commercials in the past, they are often nothing short of awesome. They affirm not only the importance of babies, but they also remind parents that "Every baby is a little miracle to celebrate, support and protect." Not just

sentiment as apropos not just for babies once they are born, but from the beginning of the baby's developmental journey.

If you watch "For every little miracle," I promise you will (as did I) forward the link to many of your family and friends [www.youtube.com/watch?v=6gZRRQgusXU].

The overarching point they make is...circumstances do not matter. Whatever those

and (my words here) to marvel at.

The very first "whether" in "For every little miracle" is the most important: "whether he's planned or not..."

We first see a headshot of a young woman in her wedding dress—and then the rest of this woman's very pregnant profile.

That is cutting to the chase. We too often forget that babies don't choose the circumstances

In all these circumstances—the planned and the perfect, or the unplanned and the other-than-perfect—this baby is one of us, a miracle to whom we have the strongest obligation on the face of the planet: to our own flesh and blood.

The ad is just 30 seconds long. Please take a half-minute out and watch "For every little miracle."

Six things you must know before you decide whether to support or oppose physician-assisted suicide

By Nancy Valko

Editor's note. This article was first posted on May 1, 2019, and was originally published in The Public Discourse.

Is the real healthcare crisis not enough physician assisted suicide laws? Or is it the staggering and increasing number of people losing their battles with mental illness and committing suicide?

It has been over twenty years since Oregon's physician-assisted suicide law took effect after a public referendum. Since then, four other states have legalized physician-assisted suicide.



Polls seem to show strong public support for physician-assisted suicide. They ask questions like this one from a 2017 Gallup poll:

“When a person has a disease that cannot be cured and is living in severe pain, do you think doctors should or

should not be allowed by law to assist the patient to commit suicide if the patient requests it?”

Unfortunately, most people have only a vague idea about what such laws actually say and do. Here are six things you must know before you decide whether to support or oppose physician-assisted suicide.

1.) Pain or any other suffering is not a requirement for a person seeking assisted suicide; “a disease that cannot be cured” can include

manageable conditions like diabetes as well as terminal illnesses like cancer.

None of the US laws are restricted to patients experiencing pain, which can be addressed in ways that do not deliberately kill the patient. In 2016, for example, almost half of patients using assisted

suicide in Oregon cited their reason for seeking death as “Burden on family, friends/ caregivers” while just 35 percent cited “Inadequate pain control or concern about it.” Medical professionals participating in physician-assisted suicide are immune from accountability and standards of due care

2.) “No person shall be subject to civil or criminal liability or professional disciplinary action for participating in good faith compliance with”

Oregon's law. Thus any licensed doctor (or other healthcare provider), with or without experience and regardless of his or her medical specialty, can write a lethal overdose prescription for a patient as long as he or she claims to be in “good faith compliance.” As a legal standard, this test is effectively meaningless, because it relies only on the physician's word.

The physician is not required to be—and often is not—the patient's primary care doctor. Many physicians do not want to be involved in this process, according to “Compassion & Choices,” an organization that promotes the legalization of physician-assisted suicide throughout the United States. When one doctor (or many) concludes that it would be irresponsible to give a lethal overdose to a patient, such organizations encourage patients to find a doctor with lower standards.

No other medical intervention has such immunity protection from lawsuits or criminal investigation. In addition, no other medical intervention is

so devoid of standards for the clinical expertise or education required of the physician involved.

3.) Physician-assisted suicide does not involve the stringent documentation and oversight required for other medical interventions.

In all jurisdictions where physician-assisted suicide is allowed, to

prescribe a lethal overdose the doctor need only fill out the required state forms that include a consultation with a second physician who agrees. Neither doctor is required to have a professional relationship with the patient before the physician-assisted suicide request.

Documentation of physician-assisted suicides relies on doctors' self-reporting. There is no requirement that the actual taking of the lethal overdose be witnessed by a medical professional or anyone else. This means that there is no safeguard against medical complications, coercion by family members, or other problems.

The Oregon law also specifies that, Except as otherwise required by law, the information collected shall not be a public record and may not be made available for inspection by the public” after which the original forms are destroyed.

Unfortunately, the immunity protections and secrecy surrounding even the minimal self-reporting in state-level assisted-suicide laws

See “Six Things,” page 26

Why It's Wrong I Was Aborted (Unsuccessfully)

By Melissa Ohden

Editors note. This appeared on Melissa's blog. In 1997 she survived a saline abortion.

5. Not because I'm now, as an abortion supporter once called me, a "success story" as a writer, speaker, and Master's level prepared social worker...

4. Not because I'm free of a disability or long-term health consequences because

of the "procedure"....

3. Not because the abortion was forced upon my birthmother....

2. Not because it was late-term... Rather that abortion was wrong

1. Because I was then and am now a human being with inherently dignity and value.



Soros Democracy PAC Gives \$1,000,000 to NARAL Group Behind Disgusting Anti-Trump Abortion Attack Ad

By Joseph Vazquez

Could liberal billionaire George Soros be more disgusting? He's using his super PAC to exploit the coronavirus and attack President Donald Trump and using the issue of abortion to do it.

Federal Election Commission data revealed that Soros's Democracy PAC gave \$1 million to the radical pro-abortion

accusing the President and his allies of putting 'ideology over science,'" National Public Radio (NPR) reported April 15. NPR also noted the ad accused Trump and his allies of "using the coronavirus pandemic as a pretext to 'roll back the clock' on reproductive rights."

The Fund's April Quarterly report to the FEC, filed April

records confirm that The Fund has only received \$1 million.

NARAL said it is using its political arm to spend nearly "\$35 million overall for the 2020 election cycle to target voters in Arizona, Colorado, Maine, Michigan, Minnesota, Georgia, Iowa, and North Carolina," according to NPR.

NARAL intends to focus its "efforts this year on women and other persuadable voters who see reproductive rights as a motivating concern," NPR noted.

The Fund's "24-hour Notice" to the FEC, filed April 16, noted that its only "independent expenditure" (\$27,965.49) so far was to the progressive media consulting and advertising agency, New Media Firm, Inc.

That firm released a statement promoting the ad on its website April 17, headlined "Working with NARAL to Take on Trump":

We work closely with NARAL Pro-Choice America and NARAL Freedom Fund on a

number of projects and were excited to work with them to take on Donald Trump and anti-choice Republicans who have been exploiting the COVID-19 pandemic by trying to restrict access to abortion.

The firm's disgusting rant continued:

The ad is part of NARAL's six-figure investment aimed at targeting swing voters in key battleground states. It features a group of women voters discussing over Zoom how Trump and Republicans are using the pandemic to push their personal ideology over science no matter the cost.

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



George Soros

group NARAL Freedom Fund. "A new ad from the abortion rights group NARAL Freedom Fund features young women

14, revealed that Democracy PAC's \$1 million was The Fund's only reported source of income so far. Open Secrets

“Catholic” group harshly criticizes Cardinal Dolan for praising President Trump

By Dave Andrusko

When New York Cardinal Timothy M. Dolan recently had good things to say about President Donald Trump, you **knew** it was only a matter of time before “social justice” leaders would clobber him.

As we have discussed countless times over the past three + years, separating President Trump from proliferators, Catholics, and other people of faith is an absolutely essential objective of pro-abortionists. They know, just as we do, that the coalition was instrumental in Trump’s victory over pro-abortion Hillary Clinton in 2016 and will again be whomever the Democrats eventually wind up running against him November 3.

The *Catholic News Service* noted in a story that Archbishop Dolan had complimentary things to say about the President in a

“conference call April 25 to discuss the needs of Catholic schools, which have been struggling because of the coronavirus pandemic”; and “during an April 27 segment on “Fox & Friends,” [where] Cardinal Dolan said

of Trump: “I really salute his leadership,” while adding that he also admired the leadership of New York



Cardinal Timothy M. Dolan

Gov. Andrew Cuomo and New York City Mayor Bill de Blasio, both Democrats. ‘Everybody has really come through, but the president has seemed particularly sensitive to the, what shall I say, to the feelings of the religious community,” the cardinal said.

The letter, sent by the “Catholic” organization “Faith in Public Life,” said there is “nothing ‘pro-life’ about Trump’s agenda” and urged

Cardinal Dolan to “speak truth to power and refrain from even the appearance that bishops have their hands on the scales in this election.”

Cardinal Dolan defended himself “in a May 1 Facebook Live interview with Jesuit Father Matt Malone, editor of *America* magazine,” according to the *Catholic News Service*. Referring to his cooperation with Democratic politicians in New York, Cardinal Dolan said

The right wing is blasting me for the outreach, for the spirit of cooperation there. Now the left wing is snotty about the fact that I may have been part of, which I was, of a conference call with Catholic leaders. I would just say, ‘Look are we in the sacred enterprise of accompaniment and engagement and dialogue or are we not?’ When you do it, you risk criticism from both sides,”

According to Influence Watch **Faith in Public Life was originally a project of Center for American**

Progress (CAP), a large liberal think tank with strong ties to the Democratic Party establishment. ...

Former U.S. Representative and Obama administration official Tom Perriello (D-Virginia) is the founder of Faith in Public Life. He also served as the president of Center for American Progress Action Fund, the 501(c)(4) arm of CAP. He currently serves as the director of U.S. programs for Open Society Foundations, the principal advocacy-philanthropic organization headed by liberal billionaire megadonor George Soros.

We will be instructed countless times in the next 176 days by those who consider themselves our moral superiors that our single-issue focus needs to be abandoned.

What else is new?

We have been told this for 40+ years.

“Precious” premature baby girl recovers after contracting COVID-19

By SPUC—the Society for the Protection of Unborn Children

A premature baby girl from Scotland has recovered after contracting COVID-19, making her the country’s youngest COVID-19 patient. Her mum has described her as “the most precious person in the world.”

Baby Peyton Maguire was born prematurely on March

The baby girl tested positive for COVID-19 three weeks after her premature delivery.

Incredible care from neonatal nurses

Peyton was given steroids to strengthen her lungs and according to her mum, Tracey

with the virus? How is she fighting against it when she’s so wee? It was just the unknown.”

“Watching the staff at work was incredible. They put their lives at risk to make sure my baby was getting fed and cuddled. Even

– because that is that they are trained to do.”

The baby girl was discharged from hospital earlier this week after testing negative twice for Coronavirus. She has now settled with her mum and dad in their home in Bellshill.



Babies and Coronavirus

According to UK medics, there is little evidence to suggest that Coronavirus can be passed to a baby whilst inside womb. Evidence does suggest that it would be possible for the Coronavirus to be passed to new-born babies after birth through contact with a carrier.

The pandemic has prompted extensive changes within UK maternity wards with many home births have now been cancelled and caesarean sections re-scheduled. New parents are being encouraged to introduce their baby to family members through video call in order to maintain social distancing regulations.

Extensive handwashing and sanitising procedures are in place across all UK hospital wards to ensure the safety of patients and footfall throughout the hospital.

Ms. Maguire added: “My message to any mums-to-be is that they shouldn’t be worried about going into hospital to give birth because the staff know exactly what they need to do to protect everyone from the virus.”

26th in Lanarkshire, weighing just over 3lb.

Peyton was delivered prematurely by cesarean section after her mum, Tracey, was diagnosed with pre-eclampsia. Peyton was cared for in University Hospital Wishaw, where she spent the first weeks of her life on an incubator.

Maguire, received “incredible” care from the neonatal nurses.

Ms. Maguire said: “When I heard Peyton had Coronavirus I was sobbing and really worried about how it could affect her respiratory system, her lungs and if it was life-threatening... As much as she was fine I thought at what point was she

wearing their PPE, they were determined to hold her.

“Peyton is the most precious person in the world to me and it shows the trust I had in the midwives and the other staff that I put her care in their hands

National Right to Life and South Carolina Citizens for Life Praise *Amicus Curiae* Brief in Support of *Baker v. Planned Parenthood*

On April 29, 137 members of Congress submitted an amicus curiae brief to the U.S. Supreme Court in support of the petition of *Baker v. Planned Parenthood*.

At issue is whether third parties, such as Planned Parenthood or their patients, have the right to ask federal courts to determine which providers can be reimbursed by Medicaid under Spending Clause contracts between the states and the federal government.

“We thank South Carolina Senators Lindsey Graham and Tim Scott and South Carolina Representatives Jeff Duncan and Ralph Norman as well as other pro-life members of Congress for this amicus brief,” said Carol Tobias, president of National Right to Life. **“It is vital that states be able to consistently support their interests in the right to life and that includes determining which health care providers are considered qualified for reimbursement under Medicaid.”**

In 2018, South Carolina’s governor, Henry McMaster, issued an executive order

directing South Carolina’s Department of Health and Human Services to consider state abortion clinics “unqualified” for Medicaid reimbursement. Planned Parenthood sued in federal court arguing that the “any qualified provider” language in the Medicaid Act permits



third parties to sue and asked the courts to determine who can be considered a “qualified” provider. Various circuit courts have issued conflicting opinions on the question, and Joshua Baker, South Carolina’s Director of Health and Human Services, is petitioning the U.S. Supreme Court to resolve

the different opinions from the circuit courts over this issue.

“It is a privilege for South Carolina Citizens for Life to join in supporting this federal litigation seeking to protect the unborn children of our state,” said Holly Gatling, executive director of South Carolina Citizens for Life.

itself through the courts. South Carolina’s Department of Health and Human Services already has a provision that allows providers to appeal decisions regarding who is a qualified provider. However, Planned Parenthood is seeking to have the right to sue in federal court.

“Planned Parenthood pulls in over a billion dollars a year, largely through Medicaid reimbursements, and the abortion giant has no qualms pursuing every penny of profit,” said Tobias. **“It’s no surprise they are willing to go to court to keep their profit margin.”**

Every year, while the number of abortions has dropped nationally, Planned Parenthood has increased the number of abortions it performs—making it the nation’s single largest abortion provider. In addition, this monolith of an organization boasts an annual income of over \$1 billion.

The brief can be found at jeffduncan.house.gov/sites/jeffduncan.house.gov/files/documents/SC_Amicus_Curiae.pdf.

The U.S. Supreme Court has recognized that the Constitution’s Spending Clause is a contractual agreement between state and federal governments. In the courts, a third party—Planned Parenthood—who benefits from the contractual agreement is asking for the right to insert

Jettisoning the term “surgical abortion,” but not the horrific practice

From page 4

If these abortions are surgical, that seems to imply the need for a surgeon, someone with special surgical training. With the increasing unpopularity of abortion and the ranks of abortionists greying and thinning, it is getting harder and harder for the industry to find qualified surgeons to perform these abortions.

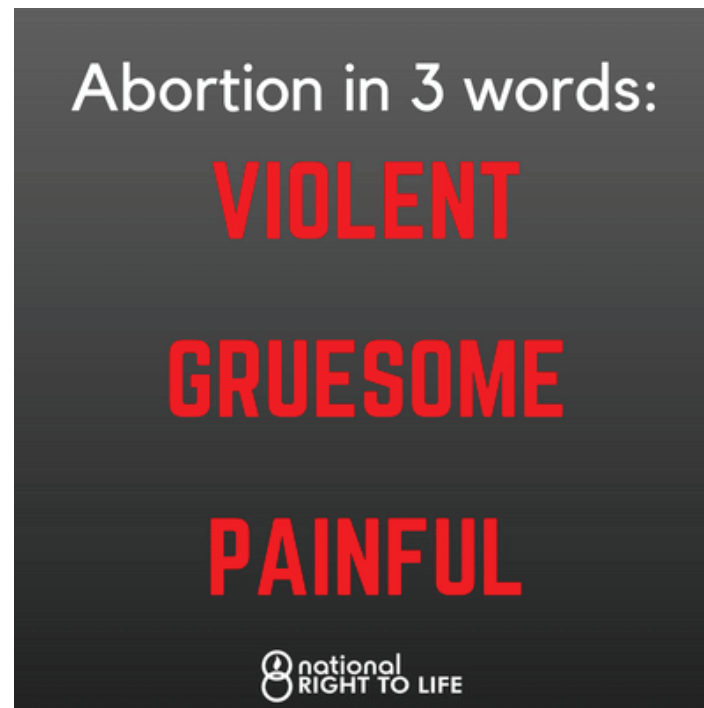
They have tried, in some places, to get states to allow them to train nurses and other less trained practitioners to perform these abortions. Far more expeditious, though, to get the state to reclassify these as non-surgical so that surgical training or certification is not required.

However, some states have gone the other direction. They have properly decided that clinics performing these abortions need to be governed by the same sort of safety regulations that are ordinarily imposed on other ambulatory surgical centers. But if courts and medical boards can make the case that these are not surgical abortions--using the arguments that Rewire and others in the industry are now making--then these clinics would not be covered by such laws.

Capitalizing on coronavirus concerns

Rewire’s Mahone complains that people are

mischaracterizing these abortions as surgical to make the public think that these abortions require the diversion of critical medical equipment in the middle of a worldwide healthcare crisis. It quotes essential, the unavoidable handling of human blood and tissue, some of it likely the woman’s, would at least require other sterile medical supplies and equipment, as well as the attention of a medical clinician



industry spokesperson Daniel Grossman as saying that all that is needed in terms of PPE (personal protective equipment) for a first trimester “in-clinic” abortion are two pairs of gloves and a reusable face shield. A gown and a mask are not usually necessary, says Grossman.

To be generous, this is, at best, facile. Even if a gown and mask were somehow not

whose help might be more needed elsewhere.

Nothing has really changed

In an interesting observation, Mahone notes that at one time the abortion industry may have preferred the term “surgical” to lend a certain cachet to the procedure and to those that performed them. She quotes Amy Hagstrom Miller, the head of the Whole Woman’s

Health abortion chain, who told Rewire, “I think in past generations people called abortions surgery in an effort potentially to reclaim some medical status or ground and try to bring abortion back under a medically respectable [purview].”

This reveals that nothing has really changed about what surgical abortion is and what it does, other than the need to prettify the terminology. Surgical abortions still involve someone, surgically trained (or not), inserting specialized medical equipment into a woman’s vagina, through her mechanically widened cervix, and into her uterus in order to suction, cut, scrape a child off the wall of her womb.

It will involve blood and the cutting of human tissue.

You would never know from Mahone that this is a “procedure” in which many women have had their cervixes damaged or their uteruses perforated, possibilities more likely with unskilled, untrained operators.

The effort to rebrand these abortions as non-surgical may serve the interests of the abortion industry and make them more broadly available and easier to sell.

But it does not change what they are or make them any safer for women.

In defense of legislative abortion oversight in Wyoming

By Mike Leman

The 2020 Wyoming legislative session saw multiple pro-life bills fail. The bill that came the closest to passing was SF-97, Born Alive Infant Means of Care, which overwhelmingly passed both chambers but was then vetoed by Governor Gordon.

The bill sought to close an existing loophole in Wyoming law, ensuring that an infant who survives an abortion attempt would be extended the same life-saving provisions that any other infant would receive. Some question the need for such legislation.

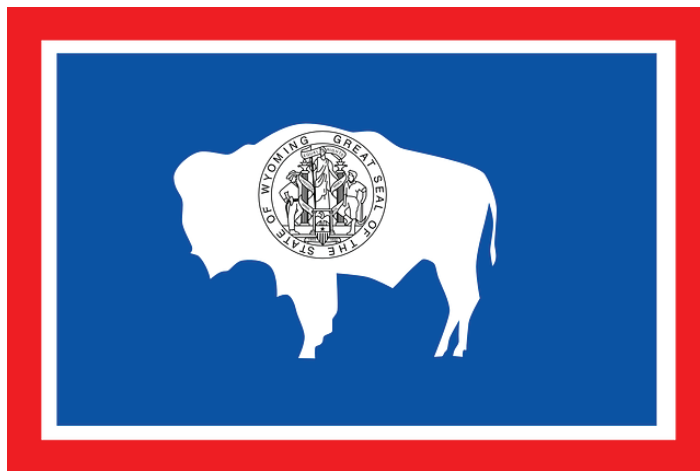
Evidence from other states indicates that abortion providers are not confused by political rhetoric surrounding abortion debate. They know what abortion does and that the current legal line separating the “right” from a crime is arbitrary. Gruesome cases like the one involving Kermit Gosnell show that providers who set out to end the life of an unborn child don’t always experience an awakened sense of responsibility for saving that life just because it passes the birth canal.

Dr. Rene Hinkle, a Cheyenne OBGYN physician, twice testified in opposition to SF-97. Since 2009, she is on record opposing many various pro-life bills like those requiring 48-hour abortion waiting periods, and ultrasounds. Last year, Dr. Hinkle opposed a reporting bill which Governor Gordon signed into law. It created a fine for providers who do not comply with an existing abortion reporting mandate that has been in existence since 1977. This was a necessary change because two providers in the state publicly admitted they have ignored the law.

Dr. Hinkle was re-appointed to the Wyoming Board of Medicine by Governor Gordon,

and she passed her Senate confirmation vote 17-13 as the session concluded in March. She has since been nominated to serve as Vice President of the board.

In her testimony against SF-



97, Dr. Hinkle said she was opposed because abortion after the age of viability (which she said begins at 23 weeks) is already against the law, so no abortions of viable fetuses are possible in Wyoming.

Aside from the fact that premature infants have survived delivery as early as 21+ weeks, an exception in Wyoming statute exists that allows post-viable abortions to preserve the “life or health” of the mother. In *Doe v. Bolton*, SCOTUS [the Supreme Court of the United States] ruled that maternal “health” includes “all factors – physical, emotional, psychological, familial, and the woman’s age – relevant to the well-being of the patient.” This is a significant loophole, which allows late-term abortions in Wyoming for a whole host of imaginable reasons. Contrary to Dr. Hinkle’s testimony against SF-97, aborting viable fetuses is legal in Wyoming.

During testimony on HB197 Abortion- 48 Hour Waiting Period, Rep. Art Washut of Casper, asked Dr. Hinkle, “When a pregnant mother

comes into your office, do you see one patient or two?”

Dr. Hinkle responded that before a fetus reaches the age of viability, there is a higher rate of miscarriage. She said it would be too difficult to think of

patients? Does the Hippocratic Oath apply to a person who is deemed “not a patient”?

Advancing the common good requires seeing people who are negatively impacted by current laws. This is true whether considering the working poor, the uninsured, the immigrant, the elderly, the unborn, or the infant who survives an abortion attempt. Although we can’t save every life, our laws should not pretend those lives don’t exist.

In my heart of hearts, I believe Dr. Hinkle feels she has been doing the right thing. But as the Covid-19 crisis has revealed, it would be a dangerous and unjust precedent if age becomes the legal, deciding factor for who qualifies to be a patient and who does not.

No profession likes government oversight. That’s understandable. But the Wyoming Board of Medicine should recognize the optics of one of their members shielding abortion providers while providers simultaneously admit non-compliance with existing law. Such “above-the-law” attitudes are precisely why many Wyomingites are concerned about abortion law loopholes and consider bills like SF-97 necessary.

A government that abdicates its duty to protect the lives of any portion of its population is a government that forfeits the grounds upon which it has any claim on authority in the first place.

Deacon Mike Leman works for the Diocese of Cheyenne as the director of Catholic social teaching and legislative liaison.

Editor’s note. This appeared in the Wyoming Tribune Eagle and is reposted with the author’s permission.

losing so many patients. So, she acknowledged that until a fetus reaches the age of viability, she only sees one patient.

As a former firefighter, I understand what Dr. Hinkle is saying. People in life-saving professions walk a thin line between compassion and caring so much that the loss of a patient threatens their ability to continue serving. They need some level of detachment if they hope to be there for the next patient. In this case, because they have a higher mortality rate, Dr. Hinkle does not consider fetuses under 23 weeks patients. Such detachment may seem callous, but it is vital to sustaining a career.

When it comes to politics, however, such detachment leads to inhumane laws.

Opponents of abortion restrictions routinely say that the legislature has no business coming between a patient and her doctor. But what happens when doctors admit that, because of age, they don’t consider half of the people entering their office to be

Hillary Clinton says COVID-19 ‘would be a terrible crisis to waste’

The failed 2016 presidential candidate made the remark as she was endorsing Joe Biden for the White House in the 2020 race

By Martin Bürger

In the context of talking about Democratic presidential candidate Joe Biden’s health care policy proposals, Hillary Clinton said the coronavirus pandemic “would be a terrible crisis to waste.”

“This is a high-stakes time, because of the pandemic,” said Clinton, who ran for president in 2008 and again in 2016, when she lost against President Donald Trump. “But this is also a really high-stakes election. And every form of health care should continue to be available, including reproductive health care for every woman in this country.”

The term “reproductive health” includes access to abortion.

Clinton, the former secretary of state under President Barack Obama, expressed her hope that the developments in health care policy in the United States “eventually, and quickly” lead to “universal health care.”

“So I can only say, ‘Amen,’ to everything you’re saying,” Clinton told Joe Biden during a virtual town hall event on Tuesday, during which she endorsed him for president.

“This would be a terrible crisis to waste, as the old saying goes,” she continued. “We’ve learned a lot about what our absolute frailties are in our country when it comes to health justice and economic justice, so, you know, let’s be resolved that we’re going to solve those once you’re elected president.”

The former vice president responded, “I promise you that’s going to be my objective.”

Abortion supporters have already seized on the coronavirus pandemic as an opportunity to push their agenda.

As 159 pro-life members of both the House of Representatives and the Senate pointed out in a letter dated April 14, “there are some who seek to exploit this time of crisis to push for the weakening or overturning of critical Risk Evaluation and Mitigation

providers do not consider them safe.”

Also on April 14, a different group of pro-life members of Congress urged President Trump “to maintain your current fetal tissue research policy and to redirect funds toward ethical, successful alternatives



Pro-abortion Hillary Clinton

Strategy (REMS) association with medication abortion drugs, which would put women at significant risk.”

The signers of the letter were referring to a letter by 21 state attorneys general who had asked Commissioner Stephen Hahn of the U.S. Food and Drug Administration (FDA) on March 30 to “increase access to reproductive healthcare, including safe and legal abortion, during this pandemic.”

“[W]e urge you to waive [the FDA’s] Risk Evaluation and Mitigation Strategy (REMS), or use FDA enforcement discretion, to allow certified prescribers to use telehealth for Mifepristone, the medication abortion prescription drug,” the attorneys general continued.

The pro-life legislators said, “Self-managed abortions from home are especially dangerous; in fact, half of abortion

to combat COVID-19.”

In the wake of the coronavirus outbreak in the United States, some have argued that Trump’s ban on aborted fetal tissue research by government scientists is slowing down efforts to find a remedy for the disease.

“A senior scientist at a government biomedical research laboratory has been thwarted in his efforts to conduct experiments on possible treatments for the new coronavirus because of the Trump administration’s restrictions on research with human fetal tissue,” the *Washington Post* claimed in March.

Fifteen state attorneys general had written to President Trump on March 26, stating that the use of aborted fetal tissue could help “accelerate vaccine development to combat COVID-19,” as well as “study

the impact to pregnant women and children.”

“We ask you to end your Fetal Tissue Ban to allow our top scientists the ability to solve this global health crisis,” the attorneys general concluded.

The group of members of Congress in support of life emphasized that the March 26 letter repeated “false claims and narratives which for many years have touted the utility of aborted fetal tissue in research, including the claim that aborted fetal tissue has been used to create many vaccines.”

During the virtual town hall event on Tuesday, Clinton and Biden both declared once again their strong support for abortion. “Finally, we need to ensure that women have access to all health services during this crisis,” Biden said, adding that “abortion is an essential health care service.”

In recent months, Biden showed he would not let the coronavirus pandemic go “to waste” regarding climate change, either. “COVID is shining a bright light on the structural racism that plagues our laws, our institutions and our culture. And it’s a wake up call, a wake up call to action to climate change overall and to climate justice,” the presidential candidate said during a fundraiser.

Previously, Biden had identified the recovery needed following the COVID-19 pandemic as an “opportunity” to “fundamentally change the science relating to global warming.”

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

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

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

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

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

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

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

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

can see a wave of pain flooding her features.

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

She discusses the fact that she had not realized, prior

that there is “always another option” besides abortion. “It is a life,” she explains.

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

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

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

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



woman might want to do.

Then, the woman viewed a video explaining a second trimester dismemberment abortion—an abortion in which a baby is torn limb by limb from the mother’s womb. The woman begins to cry, and you

to viewing the video, that the unborn baby would be “detached” and “crushed.” She points out what she has now learned about the risks of abortion to women. She then discusses the fact that there are “so many options” and

Six things you must know before you decide whether to support or oppose physician-assisted suicide

From page 17

eliminate the possibility of future potential lawsuits or prosecutions for abuse. They keep alive the myth that there are strong safeguards in the law that eliminate problems like coercion or elder abuse.

4.) The cause of death must be falsified.

States with physician-assisted suicide laws require that the cause of death is reported as death from an underlying condition rather than the lethal overdose, supposedly to ensure the patient's privacy. But this clearly violates the standards set for coroners and medical examiners by the Centers for Disease Control [www.cdc.gov/nchs/data/misc/hb_me.pdf]. Those standards require accuracy in determination of death because "The death certificate is the source for State and national mortality and is used to determine which medical conditions receive research and development funding, to set public health goals, and to measure health status at local, State, national, and international levels."

Falsified death certificates also quietly function to smooth over any problems with life insurance policies that have suicide clauses denying death benefits if the insured commits suicide within two years of taking out a policy. And since doctors are only required to "recommend that the patient notify next of kin" about the plan for assisted suicide, the rest of the patient's family may never know the real cause of death. This means that they are also deprived of the chance to reassure their loved ones of their support and willingness to help take care of them until their natural death.

5.) Assisted suicide laws promote discrimination against suicidal people.

The usual standards for caring for a suicidal person include intensive management to prevent suicide attempts. These are changed in physician-assisted suicide: "If, in the opinion of the attending physician or the consulting physician, a patient may be

suffering from a psychiatric or psychological disorder or depression causing impaired judgment, either physician shall refer the patient for counseling." Only the evaluation of a patient's competence, not the diagnosable mental disorders that afflict more than 90 percent of people who die by suicide, is required. It is shocking that only 3.8 percent of those seeking physician-assisted suicide in Oregon were referred for psychiatric evaluation in 2016. Patients with dementia and with clinical depression that had existed for years before they contracted a physical illness have died under the Oregon law.

6.) Suicide is contagious.

A 2015 article in the Southern Medical Journal titled "How Does Legalization of Physician-Assisted Suicide Affect Rates of Suicide?" studied Oregon's and Washington's rates of non-assisted suicide after assisted suicide laws were passed. Despite claims that assisted suicide laws would reduce other suicides or only substitute for them, the authors reached the disturbing conclusion that "Rather, the introduction of PAS (physician assisted suicide) seemingly induces more self-inflicted deaths than it inhibits."

This does not surprise me. In 2009 my thirty-year-old, physically healthy daughter Marie died by suicide. She killed herself using a technique she learned after visiting assisted suicide/suicide websites and reading Final Exit (1991) by Derek Humphry, founder of the Hemlock Society (an organization that merged with another group to form

Compassion & Choices). The medical examiner called her suicide "textbook Final Exit."

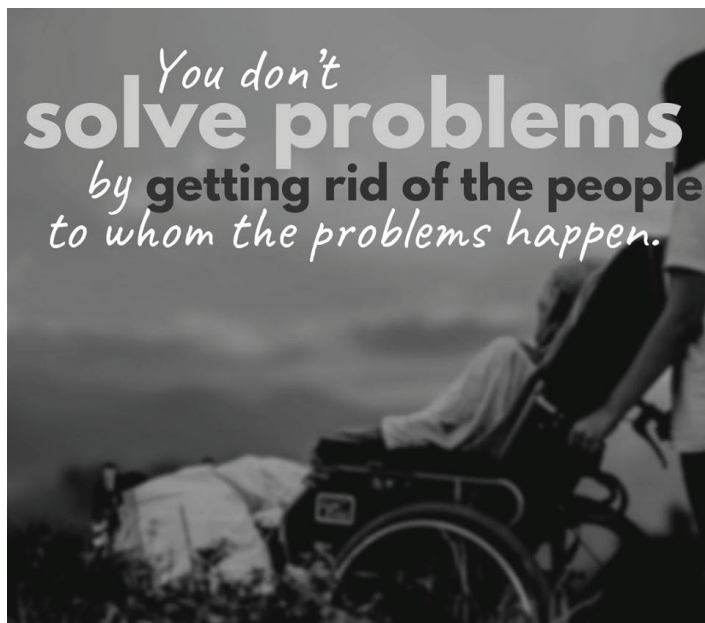
Adding to our family's pain, at least two people close to Marie became suicidal not long after her suicide. Luckily, they were saved, but suicide contagion, better known as "copycat suicide," is a well-documented phenomenon. Often media coverage or publicity around one death can encourage other vulnerable people to commit suicide.

According to the Centers for Disease Control and Prevention, suicide rates have been increasing since 2000 after decades of decline. Suicide is now the tenth leading cause of death in the United States, with more than 44,000 people dying by suicide every year. Suicide costs society over \$56 billion a year in combined medical- and work-loss costs, not to mention the enormous toll suicide takes on family and friends. Oregon's suicide rate is more than 40 percent higher than the national average.

Is the real healthcare crisis not enough physician-assisted suicide laws? Or is it the staggering and increasing number of people losing their battles with mental illness and committing suicide?

No matter what Compassion & Choices says, physician-assisted suicide is not a civil right or just one of an assortment of morally neutral end-of-life options. It's time to stand up and fight to keep the medical profession from abandoning its most fundamental ethical principles.

Editor's note. This also appeared on Nancy's blog and is reposted with permission.



How many family trees have been severed because of *Roe v. Wade*?

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

A lovely photo came up as a memory on my Facebook page. It depicts a young man and woman, both dressed in white, smiling into the wind which is blowing the bride's veil. The couple is a portrait of happiness and optimism, beauty, and bravery. They are my parents on their wedding day.

This weekend marks my parents' anniversary. I wish for all the world I could celebrate with them. But they have both passed away—my father first, followed by my mother five years later. Not a day goes by when I do not think of them and

the powerful imprint they both made on my life.

If they had been conceived in another era, they could have easily been abortion statistics. My father was the sixth of seven children, born into a poor immigrant family. His father, who had come to the U.S. from Italy, was a barber by trade, trying to support a half-dozen children in trying economic times.

My mother was born to an older couple, also facing highly challenging financial circumstances. The family disintegrated after debilitating illness struck both parents,

leaving my mother to be raised by a family friend.

Both my parents, in their own way, had to beat the odds. But beat them they did, raising two girls who would both serve as valedictorians for their high school classes.

They were good people, faithful people, who might never had made an appearance in the world—if they had been conceived after *Roe v. Wade*, the tragic U.S. Supreme Court ruling which legalized abortion for any reason during all nine months of pregnancy.

What inspiration has the world missed—because of

Roe? What family trees have been severed, because of one outrageous court ruling? What wedding photos are missing from Facebook feeds—because a group of seven men denied the right to life for 61 million Americans—and counting?

In celebrating my parents' anniversary this weekend, I will be celebrating not only their long-lasting marriage, but life itself—in all its complex beauty.

It's one of the many lessons they taught me—often without saying a word.



Judge refuses to give an Arkansas clinic free rein to abort during a pandemic

By Dave Andrusko

During the COVID-19 pandemic, it's amazing how commonsense and concern for public safety will win out when a judge does not rubberstamp the abortion industry's demand to have exceptions carved out so it can continue aborting as if we weren't in the midst of a pandemic that has already taken the lives of over 79,000 people.

As *NRL News Today* reported, Judge Kristine Baker did not specify why she opted out of the case filed by Little Rock Family Planning, but it came after the 8th U.S. Court of Appeals firmly rejected her decision to second-guess Arkansas Gov. Asa Hutchinson's executive order. She was replaced by U.S. District Court Judge Brian Miller.

On May 7 Judge Miller rejected a request by the ACLU for a temporary restraining order to block a rule requiring a negative coronavirus test 48 hours before any elective surgery, which includes elective abortions.

As the Arkansas Attorney General's office explained, "The Arkansas Department of Health issued a directive on April 27, 2020, permitting elective surgeries, including surgical abortions, upon satisfaction of COVID-19 related precautions. The directive requires that all patients test negative for COVID-19 within 48 hours prior to any elective procedure."

"Thursday's decision ensures that there are no exemptions for surgical abortions during this pandemic," said Attorney General Leslie Rutledge. "Arkansas's reasonable directive sets standards to protect the health and safety of patients, healthcare professionals, and the public

during the COVID-19 emergency."

The ACLU wanted an exception for four women it said were approaching the 21.6



Judge Brian Miller

week outer limit for abortions in Arkansas.

The ACLU was not happy with Judge Miller's 18-page-long decision.

"People [aka women] cannot pause their pregnancies, and this politically-motivated restriction is already pushing care out of reach," complained Holly Dickson, legal director and interim executive director of the American Civil Liberties Union of Arkansas. "This ruling will extend that harm."

But Judge Miller's reasoning was impeccable.

First, "This [the governor's] directive applies equally to all surgical procedures and does **not** single out abortion providers or surgical abortions." (My emphasis.) This typically gets lost in the discussion.

Second, the ACLU contention is that with regard to the aforementioned women, the "COVID-19 testing requirement is so burdensome

that it has prevented them" from obtaining their abortions.

But Judge Miller notes, "ADH [Arkansas Department of Health] states that, despite the difficulties faced by Jane Does 1-4, the COVID-19 testing requirement is not so burdensome as to prevent women from receiving surgical abortion. It points out that it performed an unannounced inspection of LRFP's facility on May 1, and found that LRFP performed four surgical abortions between April 27 and May 1, and that all four women had timely COVID-19 testing results."

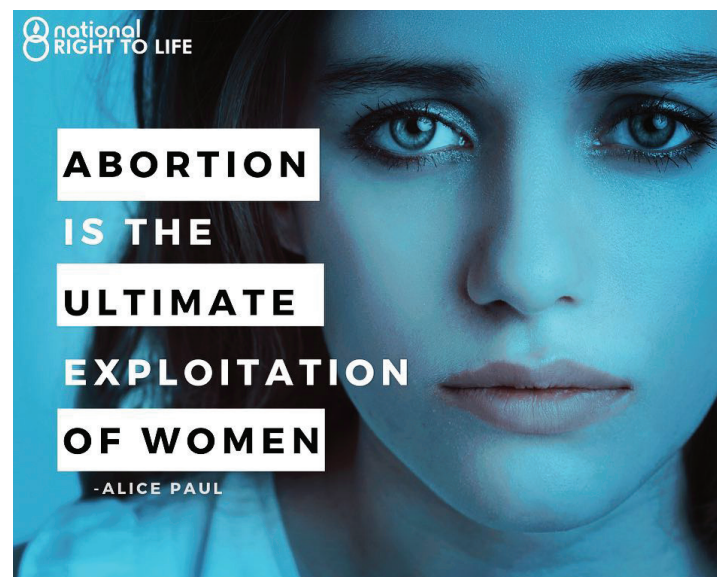
Third, Judge Miller wrote, "The ADH's April 27 directive, just like the April 3 directive, was issued in response to the COVID-19 pandemic. Consequently, it is not subject to constitutional challenge unless it has no real or substantial relation to the COVID-19 health crisis or is 'beyond all question, a plain, palpable invasion' of a woman's right to elective abortion."

As did the 8th Circuit, Judge Miller found the limitations

were "clearly related to the COVID-19 health crisis." Moreover, "The April 27 directive's COVID-19 testing requirement is not beyond all question, a plain, palpable invasion of the right to have an abortion. First, notwithstanding the parties' history of fighting over abortion, the record does not support the position that the ADH promulgated the April 27 directive with an eye toward limiting abortions."

In addition, as we have reported, "Medication" [chemical] abortions have not been affected and, as noted, abortions are permitted if the woman meets certain criteria, most importantly that she obtain a negative COVID-19 test result 48 hours prior to the abortion.

Linda Satter, a reporter for the *Arkansas Democrat-Gazette* put it nicely in the lead to her story: "A Little Rock abortion clinic's effort to get around a new Health Department directive that restricts surgical procedures was denied Thursday by a federal judge."



Celebrating children with Down syndrome for their abilities rather than marginalized them for their disabilities

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

The beauty of a child with Down syndrome is on full display in a television ad for department store giant Target.

It is not the first time that the chain has featured a child with a disability in its advertising. But the commercial is a welcome sign of the times—an encouraging example of inclusion in the marketplace.

People with Down syndrome have made tremendous progress in the past few decades. They contribute greatly to our workplaces, families, schools, and communities.

What is especially significant about TV ads featuring children with Down syndrome is that they mainstream the message that people with an extra chromosome are an important part of the fabric of American life. They are being celebrated for their abilities rather



than marginalized for their disabilities.

Babies with Down syndrome are full of possibility and promise and can serve as a fount of joy for their families. They may grow up to be another Karen Gaffney, a woman with Down syndrome who has swum the English Channel. Or they may rival the accomplishments of Chloe Kondrich, who has met with the President, Vice-President, sports figures, musical artists, and other celebrities.

And yet, it is estimated that the vast majority of preborn babies with Down syndrome become casualties of abortion. It is high time to end the discrimination against these children in the womb. They have as much of a right to life as anyone else—and our nation is enriched by their birth.

The delusional pro-abortion mind at full throttle

By Dave Andrusko

“While a majority of Americans believe abortion should be legal under at least some circumstances, some polls have found that abortions in the third trimester are more controversial.” -- Anna North, Vox.

Well...yes. Is there a poll anywhere in the known galaxy that doesn't find later-abortion, let alone third trimester abortions, “more controversial”?

Writing for Gallup, Lydia Saad summarizes

WASHINGTON, D.C.
— Americans' support for the legality of abortion varies sharply when they are asked to evaluate it on a trimester basis, which is consistent with the pattern Gallup has found for more than 20 years. Six in 10 U.S. adults think abortion should generally be legal in the first three months of pregnancy. However, support drops by about half, to 28%, for abortions conducted in the second three months, and by half again, to 13%, in the final three months.

Or, as the subhead puts it, **General belief abortion should be legal plummets after first trimester.**

A 2018 Marist poll, according to the *Catholic News Service*, found

overwhelming opposition to later-term abortions. By a nearly three-to-one margin — 71 percent to 25

percent — respondents said abortion generally should be illegal during the third trimester of pregnancy.

What about after 20 weeks? That same poll found

About 66 percent of adults said abortion should be banned after 20 weeks except to save the life of the mother, while 18 percent said abortion should be allowed any time until birth.

We could pull out any number of examples, but the point is made. The question remains...

Is North that deluded, that blinded by abortion advocacy, that caught up in the any-abortion-for-any-reason-when-ever mentality that now binds (and blinds) pro-abortion Democrats together that she doesn't grasp that most Americans are queasy about abortion to begin, an uneasiness that mounts massively the more developed the baby is?

Small wonder pro-abortion Democrats (a) do not want an up-or-down vote on the Pain-Capable Unborn Child Protection Act, and (b) are desperate to avoid being held accountable for a vote against the Born-Alive Abortion Survivors Protection Act.

After all, who wants the public to know you're indifferent to slicing apart babies capable of experiencing pain beyond imagination or that you are so in thrall to the abortion lobby that you can stomach passive infanticide?



Seven reasons why Joe Biden sings in harmony with the most radical wing of an already radically pro-abortion Democrat Party

By Dave Andrusko

“Joe Biden’s unique trait as a politician is — and always has been — his honesty.” -- Chris Cillizza, September 10, 2015.

“An allegation like this in the #MeToo era can’t be pushed aside with a dismissive denial from an aide or talking points that misconstrue great reporting by the [New York] Times. The accusation merits a personal response from Biden. Still.” -- Chris Cillizza, April 29, 2020.

Let’s count the many ways why former Vice President Joe Biden would tell an audience participating in an online townhall meeting recently, “We need to ensure that women have access to all health services during this crisis. ...Abortion [is] an essential health care service.”

We could probably list 70 but let’s settle on seven.

#1. He was in the presence of Hillary Clinton, who makes the most wild-eyed pro-abortion feminist look positively timid. Pro-lifers know that had Clinton been elected President, she would have brought the full force of her militancy to bear on us, and, through us, unborn babies.

#2. He was in the presence

of Hillary Clinton, from whom Biden had finally won an endorsement. The tiniest hesitancy on an issue close to Clinton’s heart would not have gone over well.

#3. The focus of the townhall meeting were the effects of



the coronavirus pandemic on women. It is a tenet of pro-abortion orthodox not only that the show must go on—babies must be slaughtered on schedule—but also that a pandemic presents an almost unparalleled opportunity to argue for the wonderfulness of DIY chemically-induced abortions performed at home.

#4. Clinton’s endorsement, *Reuters* reported, “came at a critical moment as Biden aims to raise his profile with female voters.” Well, yes. It also comes

at a time when Biden is doing his level best to avoid his own #MeToo moment.

#5. Following the party line again and again and again is a way of reassuring pro-abortion voters that when he threw over his career-long support for

anyone silly enough to believe in a pandemic that elective abortion is, well, an elective surgery, not an essential surgery. And finally, my favorite, building on #6 ...

#7 “It’s being used as a political wedge right now,”

the Hyde Amendment, there was no turning back. Far from having second thoughts about the wisdom of jettisoning his support for a policy that saved over two million lives, a President Biden would be an obedient pawn of the Abortion Establishment, led by Planned Parenthood, NARAL, and EMILY’s List.

#6. It’s good practice for pulling in the usual pro-abortion heavyweights—ACOG, for example—to contrast his “science-based” posture with

Biden said. Pardon? Who is shamelessly using a pandemic that has already taken the lives of over 79,000 Americans to try to persuade the FDA to expand access to mail-order and telemedicine abortions by asking the FDA to loosen restrictions on chemical abortions that are intended to protect women?

Seven reasons why Joe Biden sings in harmony with the most radical wing of an already radically pro-abortion Democrat Party.

Biden now is in lockstep with his extreme pro-abortion Democratic Party

From page 1

justices who support abortion rights.” Biden also opposes 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.

In gratitude, the Abortion Industry embraces Biden. Ilyse Hogue, president of NARAL Pro-Choice America, praises Biden for “coalescing around the Party’s core values – support for abortion rights.”

Kelley Robinson, the executive director of the Planned Parenthood Action Fund, told *Newsweek*, that Biden has made clear his “support for reproductive health and rights, including repealing the Hyde Amendment, as well as their support for Planned Parenthood.”

Not surprisingly, the radical pro-abortion group EMILY’s List says that being pro-choice is an “essential part of being a Democrat.”

Pro-lifers were mortified on January 22, 2019, when New York Gov. Andrew Cuomo signed and celebrated the “Reproductive Health Act” (aka the Abortion Without Limits Until Birth and Beyond Act).

Soon afterwards, Virginia Del. Kathy Tran admitted her bill would allow abortions up through all “40 weeks.” Virginia Governor Ralph Northam followed up by saying it was acceptable for doctors to allow abortion survivors to go untreated—in other words

he was advocating for passive infanticide.

Your pro-life friends and family should know that on February 25, 2019, 44 pro-abortion Democrat U.S. Senators voted to block the Born-Alive Abortion Survivors Protection Act from coming to a vote. On February 28, 2020, 220 Democrat U.S. House members did the same.

It is amazing. If a child actually survives the brutal attack on her tiny body – abortionists refer to that as the “dreaded complication” – Democrats don’t even want to provide the kind of medical care to that living born child that doctors would for any other baby born at a similar gestational age.

More and more leaders in the Democratic Party are making it clear that they have no room for pro-lifers in their party. Even *NBC News* has said, “Democrats have nearly stamped out opposition to abortion rights in their party.”

In 2017, Tom Perez, Democratic National Committee chair, promised to support only Democratic candidates who support abortion, saying it was a “non-negotiable” position.

On March 17, pro-life Democrat Congressman Dan Lipinski lost in the primary to pro-abortion Democrat Marie Newman. He lost primarily due to his pro-life stance which he refused to renounce.

There are many other examples of how thoroughly

pro-abortion the Democrat party has become.

The Democratic Attorneys General Association (DAGA) changed their policy to require their attorney general candidates to support unfettered abortion in order to have their financial support. Sadly, in March, DAGA sent a letter to HHS Secretary Alex Azar urging the DHHS to “increase access” to abortion during the pandemic, referring to abortion as “essential services.” (During the COVID-19 pandemic, in a valid exercise of state power, many Governors restricted non-essential medical services—including abortion—in order to preserve PPEs and medical services for the crisis.)

In 2016, Democrats removed the word “rare” from their platform and called for repeal of the Hyde Amendment. Last June, Joe Biden reversed his position on taxpayer funding of abortion and now supports repealing the Hyde Amendment often and loudly.

As noted above, in the fourth debate held last October among Democrats running for President, Biden pledged that his judicial nominees would “support the right to privacy, on which the entire notion of a woman’s right to choose is based.”

Joe Biden’s official campaign site includes the following on his list of priorities in his 2020 campaign:

- Working to codify *Roe v. Wade* (which means unlimited abortion on demand);

- Supporting the repeal of the Hyde Amendment (which means taxpayer funding of abortion on demand); and,

- Restoring federal funding for Planned Parenthood, including through Medicaid and Title X (which is taxpayer funding to the nation’s largest abortion provider and promoter).

See more on Joe Biden’s radical position on abortion (and life) here: www.nationalrighttolifenews.org/2020/04/do-you-know-joe-bidens-radical-pro-abortion-positions/

For information on President Trump’s position on abortion, click here: www.nrlc.org/uploads/records/trumprecord.pdf

Polling shows that approximately 64% of Democrats support limits on abortion, while only 22% support Biden and the Democrat’s extreme abortion through birth policy. [February 12-17, 2019, The Marist Poll (N=1,008, margin of error +/- 3.5%)]

Your pro-life friends and family deserve to know how candidates stand on protecting life. They deserve to know whether the candidates they are voting for will protect vulnerable children, or whether they will turn their backs on the most vulnerable among us.

Please share this important information.

A gloomy, awful day for pro-abortionists

By Dave Andrusko

No pun intended here, but last week while I was surfing the web looking for something entirely different, I ran across this fascinating quote. Jonatan Mårtensson is a Swedish soccer player who once said, “Feelings are much like waves: we can’t stop them from coming, but we can choose which one to surf.”

How apropos in light of a post I read earlier that appeared on the pro-abortion website rewire.news. “When Will These Attacks on Abortion Rights End” asks Jessica Mason Pieklo, who teases the answer to her own rhetorical question with the remainder of the headline: “You won’t Like the Answer.”

Pro-abortionists, perhaps not surprisingly, flip flop between expressing adulation (for example, when states like New York pass abortion until birth legislation) and apocalyptic predictions of “the end of Roe” which is a lot of the time, given that the pro-life surge continues to roll in like a succession of ocean waves. To continue the surfing metaphor, the former is akin to peacefully paddling out before starting to ride the wave, the latter is like trying to surf a Tsunami.

As the headline indicates, Pieklo does not spend a lot of time on what are, from her perspective, good tidings. “There have been glimmers of good news,” she writes. By this Pieklo means those courts which at the same time we are fighting a pandemic, have made it impossible for states to (correctly) deem elective abortions a non-essential health service.

“That’s all good news,” she writes. “But it’s good news tempered through the lens of

a cascading attack on abortion rights that has only become more brazen as anti-choice lawmakers grow increasingly confident they’ve placed enough judges on the bench to re-criminalize abortion.”

A trifle over the top, wouldn’t you say, but that’s where you go when you anticipate a wipeout. What leads Pieklo to such a gloomy conclusion?

*We begin with the above reference, which is to the many, many judges nominated by President Trump and confirmed by the Senate. “He [Senate Majority Leader Mitch McConnell] has helped usher through the confirmations of a record number of judges — 193 — during Trump’s presidency, including two Supreme Court justices and 51 circuit judges,” wrote *NBC News*’ Leigh Ann Caldwell. “By comparison, the Senate confirmed only 55 circuit judges in all eight years of Barack Obama’s presidency.”

*There’s the “web of anti-abortion restrictions” which pro-abortionists are furiously litigating to overturn. Pielko understands that the more judges who are confirmed that understand there are three branches of government and that their full-time job is **not** to act like a “superlegislature,” the greater the likelihood that popular pro-life proposals will not only be enacted but upheld.

*Speaking of judges yet again, Pielko quotes from a dissent written by 5th Circuit Court Judge James Dennis in a decision that (for the moment) allowed Texas Gov. Greg Abbott’s executive order to stand.

This Circuit thus once again does not apply

the applicable rules of law because of the subject matter of the case, and, equally troubling, ignores the words of its own ruling

jurisdiction, reaches patently erroneous results, and usurps the state’s authority to craft emergency public health measures



from less than two weeks ago. I again echo the words of a colleague in dissent in a case now before the United States Supreme Court: “It is apparent that when abortion comes on stage it shadows the role of settled judicial rules.”

How ironic. For decades, pro-lifers have railed against what the late Supreme Court Justice Antonin Scalia once called the “abortion distortion,” whereby “the Constitution and normal rules of law are bent to protect abortion as a super-right,” in the words of James Bopp, NRLC’s general counsel.

To be clear, if you read the majority opinion to which Judge Dennis dissented, it was Judge Dennis and the plaintiffs who ignored the “applicable rules of law” and wanted special treatment for abortionists:

Those errors [listed above in the opinion] led the district court to enter an overbroad TRO that exceeds its

“during the escalating COVID-19 pandemic.”

Once again, the dissenting opinion [Judge Dennis] accuses the majority of treating abortion differently and once again it is wrong. At issue is whether abortion can be treated the same as other procedures under GA-09 [Gov. Abbott’s executive order]. It is the district court that treated abortion differently, issuing back-to-back TROs that did not follow the law.

And so it goes. Pieklo ends with the gloomy (for her) conclusion that “all this s_ _ t” (the “bad faith attacks on abortion rights”) will end—but only when there is a “ruling overturning *Roe v. Wade* entirely. And not one moment before then.”

We can only hope she is prophetic and her prophecy comes true soon.

Abortionists have nightmares and “strong emotional reactions”

By Sarah Terzo

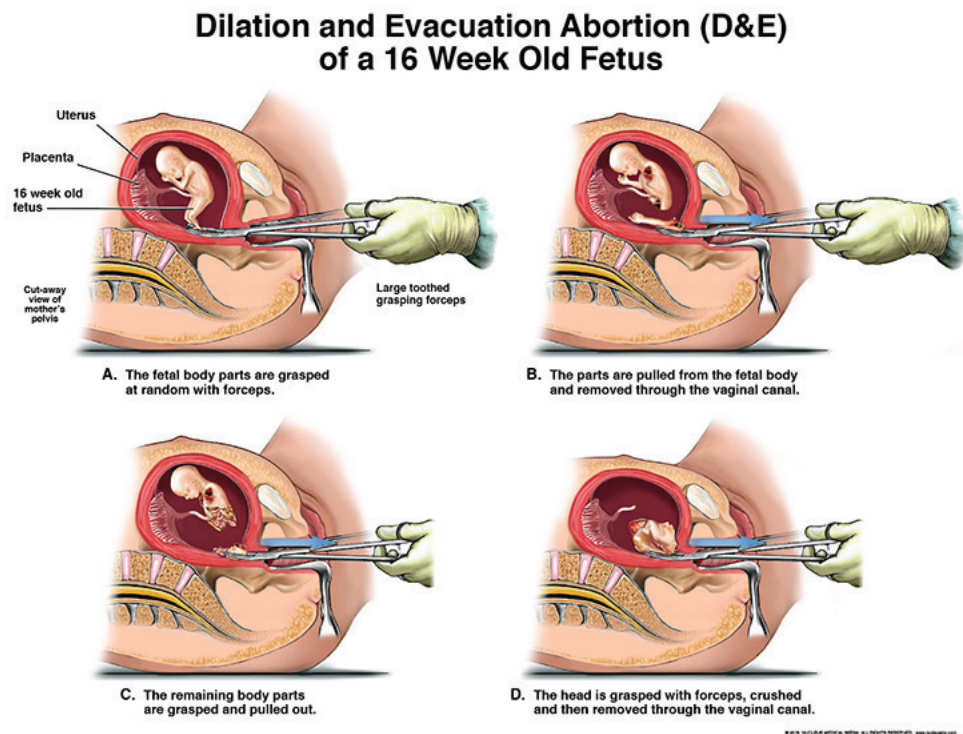
From a book on late term abortions:

“The two physicians who performed the D&E procedures...felt technically competent, but noted strong emotional reactions during or following the procedures, and occasional disquieting dreams.”

Second Trimester Abortion: Perspectives After a Decade of Experience (Berger, Brenner, Keith, eds, Martinus Nijhoff Publishers, 1981), in the chapter “Psychological Impact on Patients and Staff,” p. 246.

In a D & E, performed mainly in the 2nd trimester, the baby is torn apart with forceps.

Here is a diagram of the procedure



In the picture of the D&E abortion at 16 weeks

It is easy to see why abortionists have nightmares!

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



Supreme Court hears Little Sisters of the Poor defend their right not to be compelled to pay for health coverage for products and procedures they find “morally unacceptable”

From page 1

by HHS under a provision of ObamaCare, which would force them to provide health insurance coverage for products and procedures they find “morally unacceptable.”

The Order, which serves the poor and the elderly, has fought the mandate for seven years and seemingly had finally prevailed when HHS announced a new rule to protect religious non-profits, including the Little Sisters of the Poor. That proved too much for several states, including Pennsylvania and California

and New Jersey, who went to court.

At issue before the Justices, who are conducting oral arguments by teleconference, was the nationwide injunction issued by the 3rd Circuit blocking the HHS rule.

The issues at stake are fundamental. As a brief filed by 92 Members of the House and Senate argued

The Third Circuit’s decision below is a direct assault on RFRA [Religious Freedom Restoration Act] and

imposes a drastic and unprecedented restriction on federal agencies’ ability to protect religious liberty. It must be reviewed and reversed.

The one-two punch delivered by the Third Circuit both permits an agency to implement regulations that burden religious exercise, and also restricts the Executive from providing sufficient

religious accommodations to temper that burden. That pair of rulings runs roughshod over RFRA’s requirement that all laws—including all regulations promulgated to “implement[]” statutory law—be interpreted and construed to provide the greatest possible protection to freedom of conscience and religious exercise.

**"No law can
give me the
right to do
what is wrong."**

— Abraham Lincoln

“If the media want to know why their reputation is at an all-time low, Kate Smith is Exhibit A.”

By Dave Andrusko

It didn't take long after CBS News assigned Kate Smith to provide much of its coverage on abortion [aka stories surrounding “abortion access”] to figure out that a hard-hitting, down-the-middle reporter she was not. We've written about her soft-ball techniques several times.

Here are two of the early can-I-be-of-service? stories Smith cranked out as essentially a stenographer for Planned Parenthood. One was a particularly unctuous, servile portrait of Planned Parenthood's interim President Alexis McGill Johnson. Another was an elaborate cover story masquerading as a news story.

it until PPFA wanted what it was doing made public? Kate Smith.

In that vein, hats off to *National Review Online's* Alexandra DeSanctis for a fine post that ran under the headline “Planned Parenthood's Ambassador to CBS News.”

Here are just a few of her most trenchant, no-nonsense observations. The ideal is “reporting that reflects both this intense, deeply rooted polarization and the complexity and moral gravity of the subject,” DeSanctis writes:

But if you believe that's what CBS is doing in employing Smith, you'd be wrong. Kate Smith is not a reporter

nation's most powerful abortion-rights advocacy groups. She has traded her objectivity for access to these organizations, offering them the kid-glove treatment so they will permit her to be the first to publicize their PR campaigns, interview their leaders, and scoop their briefs in court cases.

Access? In exchange for being firstist with the mostist, Smith doesn't even pretend to give both sides of an abortion-related issue:

Earlier this month, she was the first to report that a “coalition of abortion rights groups” had responded to the Fifth Circuit Court of Appeals' ruling in favor of Texas's COVID-19 abortion restrictions. Her article noted that Texas was restricting “abortion access” and exclusively quoted pro-abortion activists, one from the Center for Reproductive Rights and one from NARAL Pro-Choice Texas.

Smith has been particularly helpful in helping the abortion industry and its defenders in Congress “frame” the Born-Alive Abortion Survivors Protection Act as something that it is not. The Act would simply require that a baby who survives an abortion receive the same medical treatment as any premie born at the same stage would receive. No more

but no less. And it deals with a baby who has **already** been born. As DeSanctis accurately states, “the bill doesn't restrict abortion procedures in any way.”

Later she shrewdly observes

Smith attempted to frame the bill as evidence of “a push by the conservative right to reframe the reproductive rights debate toward third-trimester abortions.” (Note her use of “reproductive rights,” another phrase that, like “abortion access,” is used only by those who champion unlimited legal abortion.) Later in the article Smith repeated herself: “The push for the legislation is part of an ongoing attempt by Republicans to shift the debate on reproductive rights to focus on so-called late-term abortions.”

But the push for the legislation began, as its sponsor Ben Sasse clearly articulated, in response to comments from Virginia governor Ralph Northam, who had said in January 2019 that he favored allowing doctors and mothers to decide whether or not to care for infants born alive after an attempted abortion, at least in



You may recall that Planned Parenthood constructed an 18,000-square-foot mega-clinic in southern Illinois with virtually no one having a clue what was taking place. With Planned Parenthood skulking about, using shell companies to hide that it was building a new mega-abortion facility, who would it choose both to put the best possible face on this massive exercise in deception and give an exclusive, knowing the reporter would keep a lid on

at all. She is an advocate for abortion rights who exploits her perch at CBS to disguise as fact the opinions of the country's most radical abortion-rights activists. She is Planned Parenthood's ambassador to CBS, posing as a reporter and constructing articles that more closely resemble press releases for the

Opposition to abortion is “sacrosanct” for young Republicans, *New York Times* concedes

From page 2

provides Astor the opportunity to tell us that only something this fundamental can outweigh everything else, including these young conservative Republicans’ dislike for Trump.

Before I go further, an important side note. A pool of two dozen young Republicans is hardly the last word on how young conservatives collectively feel about President Trump. By every indication, Republicans young and old are remarkably faithful to Trump. But Astor’s not going to let that get in the way of her narrative.

As always, you have to read between the lines **and** recall what Astor concedes at the beginning (and then ignores for the rest of the story): that what she writes about young Republicans no doubt applies to young Democrats. (“It’s just less visible.”)

In interviews with two dozen Republicans ages 18 to 23, almost all of them, while expressing

fundamentally conservative views, identified at least one major issue on which they disagreed with the party line. But more often than not, they said one issue kept them committed to the party: abortion.

(I would ask an obvious follow-up question: Is there anyone, ages 24 to infinity, that doesn’t disagree with “the party line” on “at least one major issue”?)

Astor tells us, “Abortion is not the only issue on which young Republicans lean right,” but that “abortion is, very often, the issue that is sacrosanct — the one that outweighs their concern about climate change, for instance, and their dislike for Mr. Trump.”

The next two paragraphs are very important:

Polling of conservatives indicates

that abortion “is becoming a bigger issue to their identity as Republicans,” said Melissa Deckman, a political scientist at Washington College who studies Generation Z. “This is an issue that’s just become nonnegotiable, even among younger people.”

Certainly, many young Republicans said, they would consider crossing the aisle in this election if not for abortion.

She then cites the Harvard University Institute of Politics’ annual survey of 18- to 29-year-olds which *NRL News Today* wrote about last week. Astor says that survey found

that, while 82 percent of Republicans in that age group said they would

vote for Mr. Trump over Joseph R. Biden Jr., only 30 percent were closely aligned with Mr. Trump based on an ideology and values questionnaire.

(Be interesting to know what percentage voting for Biden closely aligned with him on ideology and values.)

As we learn from Astor’s account, the importance of opposition to abortion in holding these young Republicans to the party cannot be overstated.

Also, worth remembering is that young people almost inevitably are more “liberal” on a host of issues than are people 40 and up. This could apply to young GOPers as well/

If the latter is true, clearly abortion is **the** anchor issue for young Republicans.

“If the media want to know why their reputation is at an all-time low, Kate Smith is Exhibit A.”

From page 36

some circumstances. The born-alive bill, then, was not an example of GOP debate-shifting but a response to Democratic extremism; Smith, of course, had little choice but to ignore that fact entirely.

DeSanctis concludes with a brilliant summation:

Earlier this month, Smith tweeted this gem: “Writing up the new Texas abortion news and watching Little Fires Everywhere

and of course there’s an abortion subplot. I can’t escape this beat!”

But dressing up pro-choice pabulum as hard-nosed reporting isn’t a “beat” at all. It’s a lie, a smokescreen concocted by those who embrace legal abortion and believe their moral rectitude gives them the right to mislead their readers by presenting the ill-formed opinions of their “reporters” as facts. If the media want to know why their reputation is at an all-

time low, Kate Smith is Exhibit A.

One final thought on that last comment. The easiest way to find media bias in any context is (a) to see whether the reporter manages always to attribute the worst possible motivations to the side of the issue they disfavor; and (b) whether it is obvious they are finding sources who will tell them exactly what they want to hear. Or, as DeSanctis puts it,

Smith’s Twitter account routinely hosts insinuations masquerading as

facts — “Restrictions on abortion always disproportionately impact people of color” — and solicitations of sources who will substantiate the pro-abortion argument she’s already decided to make.

What would happen if we politely pointed all this out to Kate Smith? Well, remember the quip of the legendary CBS correspondent Edward R. Murrow: “Journalists don’t have thin skin — they have no skin.”

Happy Rallyversary—the Rally for Life 30 years later

By Carol Tobias, President, National Right to Life

Editor's note. This ran April 27th at National Right to Life News Today.

Thirty years ago tomorrow, I was on the National Mall with hundreds of thousands of pro-life activists who had traveled to Washington for National Right to Life's "Rally for Life." We came together to show our elected leaders, the media, and our society that America was and is a pro-life nation, and we would not stop until we saw the reversal of the Supreme Court's *Roe v. Wade* decision and all unborn children and their mothers were protected in law from abortion.

We gathered together on that blisteringly hot April day to answer the call of the late pro-life champion Representative Henry J. Hyde of Illinois. Following the Supreme Court's 1989 decision in *Webster v. Reproductive Health Services* that upheld the central holdings of *Roe*, Congressman Hyde issued a challenge to National Right to Life, and the entire right-to-life movement, saying "Now is the time to stand and be counted."

That challenge became a call to action, and pro-lifers came from across the country and around the world to answer the call. The Rally remains one of the largest gatherings ever to be held on the National Mall—though the media at the time would've made you think it was nothing more than a few dozen people. Those of us there that day still know better.

Much has changed since that day 30 years ago. The annual number of abortions hit their

peak of 1.6 million in 1990. According to the Guttmacher Institute, the pro-abortion think tank, that number is now under 900,000. Every abortion is a tragedy that takes the life of a living unborn child. We never forget that. But we take heart

laws that protect a woman's right to know all the facts before having an abortion, provide for parental notice or consent before a minor daughter's abortion, prohibit tax dollars from paying for abortion, ban partial-birth

The electoral successes of the pro-life movement in carrying into office women and men who work to protect the sanctity of human life in our laws has seen numerous federal legislative victories – among them maintaining the Hyde Amendment prohibiting the use of tax dollars to pay for abortion under the Medicaid program, the Partial-Birth Abortion Ban Act, which the Supreme Court upheld in 2007, the Born-Alive Infants Protection Act, and the Unborn Victims of Violence Act, which recognizes unborn children as victims of violent federal crimes. Under President Trump, the "Mexico City" policy has been broadened and strengthened; Planned Parenthood chose to exit the Title X family planning program rather than stop performing or promoting abortion; conscience protections have been once again enforced; two justices have been appointed to the Supreme Court who understand the difference between adjudicating and legislating—to name just a handful.

The Rally for Life was more than a demonstration of pro-life support in America; it was a call to action that inspired two generations of pro-life activists to work tirelessly for the most vulnerable members of our society. And, while we have made tremendous advances in our work to protect innocent human life, there is still much to be done.

As we remember the April 28, 1990 Rally for Life and its call to action, we continue to press on, because millions of unborn babies are counting on us.



National Right to Life Celebrates
30 Year Anniversary of our
Rally For Life 90!
4/28/90 -- 4/28/20



WERE YOU THERE?

in knowing that every year, we are saving more than 700,000 children who otherwise would have been lost to abortion.

Shortly after the *Webster* decision, National Right to Life created a department of state legislation to work with our state affiliates to pass pro-life laws in the state legislatures. While our state affiliates had been (and remain) extremely active in passing pro-life laws, the *Webster* decision opened the door to further protective laws and we knew it was vital to provide expert and legal support to our affiliates.

Over the past 30 years, National Right to Life's state affiliates have been successful in passing effective pro-life

abortion, and more recently protecting pain-capable unborn children from abortion and banning dismemberment abortions. And those are just the highlights.

These pro-life state laws, combined with efforts at the federal level, have further pushed the annual number of abortions down and have educated countless millions about the realities of abortion on demand.

Since 1990, we have seen three pro-life presidents (George Herbert Walker Bush, who was in office at the time of the rally; George W. Bush; and now Donald Trump) and two pro-abortion presidents in Bill Clinton and Barack Obama.

To describe Planned Parenthood as an “abortion business” is not “partly false” but 100% accurate

From page 2

This description is “partly false”—aka “an exaggeration”—because “to call Planned Parenthood an abortion business, when abortions make up a small portion of the services offered.” *

Dr. Randall K. O’Bannon, NRL’s Director of Education & Research, has plowed this territory—abortion is such a “small” fraction of what PPFA does—a dozen times. Here are just a few of many, many points that could be made in rebuttal to Ms. BeMiller’s conclusion.

There is no debate over this—you merely need to compare Planned Parenthood’s annual reports: they have retreated in a serious way from providing real medical services at the same time they pursue abortion with a single-minded (and lucrative) fanaticism.

In analyzing Planned Parenthood’s 2018-2019 annual report, Dr. O’Bannon wrote

Every time someone challenges their mission or (especially) funding, Planned Parenthood likes to talk about all the lives they potentially save providing cancer screenings. But the number of those services have fallen every year since at least 2005.

At one time, over two million a year

(2,011,637 in 2005), all Planned Parenthood’s “cancer screenings and prevention” services barely totaled half a million (566,186) in

What about contraception, Planned Parenthood’s “signature product”? That “continued to decline for the sixth year in a row. At 2,556,413 in 2018, birth control services

abortion has been thankfully declining for years to under 900,000, according to Guttmacher.

Moreover, as Dr. O’Bannon wrote, “Though the number of Planned Parenthood clinics offering surgical abortions declined in the past ten years, more and more of those surgical clinics that remain are offering later abortions. In 2010 just under half, 80, advertised that they performed abortions at 14 weeks gestations, but in 2020, 110, more than two thirds, said they do so.”

We could go on and on to demonstrate why the slogan, “When you think Planned Parenthood, think abortion,” is so accurate. But perhaps the best observation comes from Dr. Leana Wen who was sacked by PPFA after less than one year into her presidency for insufficient abortion militancy. She tweeted

First, our core mission is providing, protecting and expanding access to abortion and reproductive health care.”

*The first half of her post has to do with Planned Parenthood’s state and federal funding, which is a separate question which we’ll assume she just misunderstands. But that’s a topic for another day.



2018. This represents a whopping fall of more than 71.8% in just 14 years!

And those are just simple things such Pap smears and manual breast exams. Despite what you may have heard, Planned Parenthood does not and has never provided mammograms.

are down nearly **36%** of what they were just twelve years earlier.”

Abortions? More and more and more, which is pivotal to the bottom line of a \$1.6 billion “non-profit.” In their latest annual report, they tell us that PPFA performed 345,672 abortions—over 40% of all abortions—a remarkable figure when you consider that the number of

No action taken against pro-life students who were investigated for “breaching a safe space” by showing the reality of abortion

Investigated for showing accurate abortion images

By SPUC—the Society for the Protection of Unborn Children

A Scottish pro-life university society which received complaints for “breaching a safe space” has been cleared of any wrongdoing, following an investigation from the Students Association. Aberdeen Life Ethics Society, a pro-life university society in Scotland, came under scrutiny after showing accurate abortion images at their event.

The pro-life student group, allegedly generated complaints after showing accurate abortion images at their event held on March 12th; Does abortion Violate Human Rights.

Complaints to the Aberdeen University Student Association (AUSA) included allegations that the student’s use of real images had broken the universities ‘safe space policy.’

Following an investigation, AUSA informed the complainants that “the issues have been raised with Aberdeen life Ethics Society and they have provided assurances to AUSA that clearer and more explicit content warnings, and cautions will be issued, prior to showing similar videos in the future,” and that “on this basis we have concluded that no further action will be taken by AUSA against Aberdeen Life Ethics Society and this matter is now concluded.”

An honest discussion of abortion

In a statement, Aberdeen Life Ethics Society said:

“In response to these unfounded complaints, we provided AUSA with various examples of our efforts to warn attendees about sensitive content. We maintain that these efforts fulfilled our obligation to caution anyone who might be uncomfortable with an honest discussion of abortion (i.e., the intentional killing of antenatal humans by vacuum aspiration, poisoning, and/or dismemberment).

“Thankfully, AUSA was satisfied with our defence against these vexatious complaints and will take no action against us.

“We look forward to organising future public events about the ethical importance of human life in the womb, and we pledge to continue to offer clear and explicit content warnings about the grisly reality of abortion.”

So-called safe spaces are in fact censorship zones

Dr. Tom Rogers, SPUC Education Outreach Manager said: “We very much welcome this outcome and the stand the student association has taken, in this case, to defend freedom

of speech. We also fully support the efforts of these students to raise awareness and debate about the reality of abortion amongst their peers, and are concerned that conscientious young people who campaign

in practice censorship zones which should have no place at a university.”

He concluded, “It seems like the pro-life students even went the extra mile to ensure all those attending their event



for the most basic of human rights had to be put through this at all.”

Dr Rogers continued, “Standing for the right to life is the very last thing that should be controversial in a civilised society, but, regardless of that, a university should always be a ‘safe space’ where these so-called “controversial” viewpoints can be aired and debated properly without censorship or intimidation from those who disagree with them. Such so-called ‘safe spaces,’ however, are

were forewarned that entirely honest evidence of the reality of abortion would be presented, so that students could make up their own minds about whether to attend or not, on that basis. Not even that, however, is enough for those who are determined to shut down all debate and ensure no one has access to the truth. It is exactly that sort of censorship that abortion has thrived on – at the cost of millions of innocent lives”