



**national**  
**RIGHT TO LIFE**  
**NEWS**

**September 2022**

**VOTE**



**PRO-LIFE**

**ELECTION DAY: *Tuesday, November 8, 2022***



# national RIGHT TO LIFE NEWS

## Reflecting the incredible progress made in fetal medicine, Sen. Graham and Rep. Smith reintroduce “Protecting Pain-Capable Unborn Children from Late-Term Abortions Act”

By Dave Andrusko

At a press conference held September 13, NRLC President Carol Tobias contrasted the Democrats anything-goes abortion proposals with the “Protecting Pain-Capable Unborn Children from Late-Term Abortions Act” which surveys show has very strong support among the American people.

Pro-life champions Senator Lindsey Graham and Congressman Chris Smith reintroduced legislation to protect these children from a



*NRLC President Carol Tobias explaining that the bill would protect unborn children at 15 weeks.*

hideously death.

“This bill would protect unborn children at 15 weeks, a point by which science shows that the unborn child is capable of experiencing great pain when killed by dismemberment or other late abortion methods,” she said. “It stands in stark contrast to the Democrats’ support of radical legislation like the so-called ‘Women’s Health Protection Act.’”

*See “Reflecting,” page 13*

## Record Revenues, Abortions at Planned Parenthood during Pandemic

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

Months late, without any apology or explanation, and raising nearly as many questions as it answers, the Planned Parenthood Federation of America (PPFA) has finally released its annual report for 2020-2021.

While full of the usual self promotion and political bluster, there is little real new news in the 36-page report except that PPFA is once again reporting record revenues and performing a record number of abortions. Believe it or not, the

slogan of the report is “Here for a Reason.”

Planned Parenthood performed 383,460 abortions between October 1st, 2019 and September 30, 2020, surpassing the record it set just the year before by more than 28,500. Despite the economic plunge that so many normal businesses and industries took in 2020, Planned Parenthood thrived, with revenues reaching an all time record of \$1.714 billion.

*See “Revenues,” page 29*



# Editorials

## Vice President Harris lay out radical proposals pro-abortion Democrats would pass if they gain additional seats in the Senate

It's important to be reminded what Democrats would do if they retain control of the House this November and gain two seats in the Senate. Actually, it's imperative.

Fortunately, our pro-abortion vice president Kamala Harris lays it on the line pretty much every chance she gets.

On September 10 she delivered a speech at the Democratic National Committee's summer meeting at National Harbor in Maryland.

According to Karen Townsend, Harris was giddy with enthusiasm:

**"With just two more seats in the Senate, we can codify Roe v. Wade, we can put the protections of Roe in law," Harris said. "With two more seats in the United States Senate we can pass the Freedom to Vote Act and the John Lewis Voting Rights Act. Two more seats."**

**"You know, our President Joe Biden, he's been clear. He's kinda done with those archaic Senate rules that are standing in the way of those two issues," Harris said of the Senate filibuster. "He's made that clear and has said that he will not allow that to obstruct those two issues. And, you know, for me, as vice president, I'm also president of the Senate.... I cannot wait to cast the deciding vote to break the filibuster on voting rights and reproductive rights. I cannot wait! Fifty-**



*Pro-abortion Vice President Kamala Harris  
Photo: Gage Skidmore  
(CC BY-SA 2.0)*

*See "Harris" page 31*

## So how far off are the polls?

November 8th—the date of the pivotal mid-term elections which may possibly signal the impact of the Dobbs decision which on June 24th gave *Roe v. Wade* its just desserts.

Already pollsters are nervous that they will bungle the outcomes as has been the case repeatedly. Take David Leonhardt, of *The New York Times*, whose column was entitled "Are the Polls Wrong Again? Are Democrats again about to be disappointed by overly optimistic polling?"

There's a lot to digest. Let me choose some highlights.

#1. Here's his lead. [Underlining is mine]:

**The final polls in the 2020 presidential election overstated Joe Biden's strength, especially in a handful of states.**

**The polls reported that Biden had a small lead in North Carolina, but he lost the state to Donald Trump. The polls also showed Biden running comfortably ahead in Wisconsin, yet he won it by less than a percentage point. In Ohio, the polls pointed to a tight race; instead, Trump won it easily.**

**In each of these states — and some others — pollsters failed to reach a representative sample of voters. One factor seems to be that Republican voters are more skeptical of mainstream institutions and are less willing to respond to a survey. If that's true, polls will often understate Republican support, until pollsters figure out how to fix the problem. (I explained the problem in more depth in a 2020 article.)**

**This possibility offers reason to wonder whether Democrats are really doing as well in the midterm elections as the conventional wisdom holds. ...**

**But the Democrats' strength in the Senate campaign depends partly on their strength in some of the same states where polls exaggerated Democratic support two years ago, including the three that I mentioned above: North Carolina, Ohio and Wisconsin.**

*See "Polls," page 35*

# From the President Carol Tobias

## Elections-- Consider the Alternative



In less than two months, Americans will go to the polls and make a decision that will determine the future for millions of preborn children. Voters will cast their ballot for candidates who want to

protect these children or candidates who have no desire, no interest, in even trying to recognize the humanity of these little ones.

The country is deeply divided on whether unborn children should be protected as the unique human beings they are or whether they are to be treated with no more respect than a ruptured appendix or broken tooth.

Let me lay out two scenarios, depending on the outcome of the election.

### DEMOCRATS WIN

If you read this column regularly, you know I've been concerned for a long time about this outcome.

If Democrats maintain control of the U.S. House and pick up additional seats in the Senate, what does the future of America look like? Death for millions of our littlest brothers and sisters as Democrats pass measures that have little public support but which satisfy their pro-abortion allies.

The party of abortion will have the votes to eliminate the filibuster. It will then pass the so-called "Women's Health Protection Act" and establish abortion on demand, with no limits throughout pregnancy, as federal law.

Proponents of the bill claim this bill would codify *Roe v. Wade*. Don't be fooled-- it goes much, much further. Reasonable limits, such as parental consent and women's right to know laws--which were possible under *Roe v. Wade*--would no longer be allowed. In addition, tax dollars would flow to pay for abortion.

It wouldn't matter what your state wanted. If you have laws to protect unborn children, federal law would likely prevail.

In addition, the District of Columbia, and possibly Puerto Rico, would be elevated to statehood, providing four more Democrat senators to ensure a continuing Democrat majority for many years. In addition, as many as four more justices would be added

to the Supreme Court, guaranteeing laws to protect unborn children would never again be upheld.

Does that sound like scare-mongering? A bill has already been introduced in Congress to add justices to the Supreme Court and President Biden formed a commission to study the possibility of doing so.

The commission did not recommend the additional justices but that hasn't settled the matter. Lawrence Tribe, noted Harvard law professor and rabid abortion advocate, along with Nancy Gertner, a retired U.S. District Court judge, wrote this in a Washington Post op-ed: "We now believe that Congress must expand the size of the Supreme Court and do so as soon as possible. We did not come



to this conclusion lightly.... We started out leaning toward term limits for Supreme Court justices but against court expansion and ended up doubtful about term limits but in favor of expanding the size of the court."

These statements about what the Democrats will do if they maintain and grow power in Congress are not simple speculations. Are they preposterous? Yes. Far-fetched? Yes. Likely? Also, yes.

### REPUBLICANS WIN

If Republicans are able to win enough U.S. House and Senate seats, they will ensure that abortion-without-limit does not become federal law. This would be a tremendous victory. We would also continue to work at the state and federal levels to establish legal protection for unborn children and to help mothers who need support during what may be a challenging time.

We already know the battle to protect the little ones will not be easy or be accomplished quickly, but carrying the day this November means we will have the opportunity to continue our steady progress.

For example, we've seen states move to protect unborn children and advance programs to help their mothers. We've also seen states move in the opposite direction, removing any protections that were in effect. Illinois repealed its parental notification law and California passed a bill to allow nurse practitioners and midwives to perform abortions.

Unfortunately, abortion will be available in many parts of the US for many years to come, but the debate over abortion would continue, giving us the opportunity to persuade a growing number of people about the humanity of the unborn child and why they deserve to be protected.

It also gives people on the fence time to realize that the threats and scare-mongering of our opponents wildly distort what the pro-life movement is all about.

They've been reading and hearing absurd claims that women who experience ectopic pregnancies or miscarriages will die because no doctor will be willing to treat her, afraid of being prosecuted as if performing an abortion.

As the American Association of Pro-life Obstetricians and Gynecologists (AAPLOG) has stated, "There are no laws in any state in the United States which criminalize treatment of any of these conditions."

I never thought I'd find myself agreeing with, or liking, something President Biden says but here it is: "Every election's a choice. My dad used to say, 'Don't compare me to the Almighty, Joey. Compare me to the alternative.'"

We know no candidate is perfect. There will be something about the candidate we don't like or something with which we disagree. But when it comes to elections, we have to consider the alternative.

The abortion industry and its allies in the Democrat party want abortion for any reason, with no limits whatsoever, for all nine months of pregnancy. That is not the position of the American public.

Don't give them the opportunity to make it happen.

# After Nearly Fifty Years, West Virginia Legislature Protects the Unborn and Their Mothers

On Friday, West Virginia Gov. Jim Justice signed HB 302, the bill to clarify West Virginia's abortion laws. The vast majority of unborn babies and their mothers in West Virginia will now be protected from the horror of abortion. On September 13, the bill passed both the Senate (22-7) and the House (78-17).

"The Supreme Court's *Dobbs* decision returned abortion law to the people's representatives in the state legislatures where it belongs," stated West Virginians for Life (WVFL) President Wanda Franz. "Today the WV Legislature



*West Virginia Gov. Jim Justice*

has passed a bill that will save thousands of babies' lives here in West Virginia thanks the pro-life legislators who support protection for all human life."

For background, as a result of *Dobbs*, abortion law in WV was once again governed by an 1848 law. Thus, by the end of June, abortion was prohibited in the state.

Abortion advocates immediately filed a suit on behalf of the Women's Health Center of West Virginia, to which Attorney General Morrisey responded with a strong pro-life stand. His office sought to ensure that abortion would remain illegal in

West Virginia before the case was decided.

In the days that followed, Governor Jim Justice added abortion to a special session in July, which ended in the House not concurring with the Senate vote because the two versions of the bill were incompatible.

A special session devoted to creating a compatible version occurred last week.

"For years, the people of West Virginia have fought tirelessly in defense of the unborn. Today we see our effort turned into life-saving law," said Legislative Director Sadie Shields.

## 28 weeks Pregnant at a D.C. abortion clinic

By Monica Snyder, Executive Director, Secular Pro-Life

*Editor's note. This appeared in the Washington Times.*

### OPINION:

I was 28 weeks pregnant when I entered the small, windowless waiting room of the Washington Surgi-Clinic for my abortion appointment. I filled out paperwork and gave the front desk nurse \$11,400 in cash. I asked if it was weird that I was paying in cash. She said it wasn't. I took a seat alongside several other women.

I was nervous. But not because I was there for an abortion. I was undercover. It was January 2022, and I had agreed to partner with Live Action to secretly record my visit to this Washington clinic in hopes of showing people the true nature of late-term abortion. Live Action has investigated the Washington-Surgi clinic before and uncovered some horrifying truths. But the public remains largely unaware of the realities of late-term abortion clinics. I was hoping to help change that. There is a wide chasm between the rhetoric of pro-choice activists – who argue women choose abortion with full knowledge and autonomy – and what I experienced that day.

It was a half-hour before a nurse called me back. She drew blood, recorded my vitals, and viewed my daughter Ruby on an ultrasound. She explained the abortion would be a three-day process: two days for dilation and the third day for extraction. She assured me Ruby would feel no pain before she passed away.

I could feel Ruby turning and stretching, and her movements made me tearful. My emotional reaction surprised me. I had expected to be angry, but I was just heartbroken. I pictured her tiny face. Of course, I knew I wasn't about to do anything that would endanger her. But I also knew I was in the presence

of people who would, if I asked them to, willingly and quite literally tear my little girl apart. While I knew she was safe with me, the horror of the room made me feel as if I needed to protect her.

Crying, I told the nurse I felt stupid, and that I should have made a decision sooner. She was reassuring. "Yes, I know, it's very hard. You can talk to us. We're here to help in any way we can." But she didn't ask why I wanted the abortion, whether I was sure it was the right decision, or whether I was aware of or interested in any other options.

I returned to the waiting room, sorrow washing over me. I reminded myself that Ruby and I would be leaving shortly, that she was safe and we'd both be fine. But that mantra offered no comfort for the women sitting around me. Some seemed calm. Others were crying. One woman complained of feeling ill. We sat together mostly in silence, but I wanted to turn to them and ask "Why are you here? How can I help?"

Before Ruby, I'd birthed three children. With each pregnancy, a medical professional asked me questions to screen for domestic violence and mental health issues as a safety protocol. In stark contrast, although I wept intermittently during a multi-hour appointment to abort my healthy 28-week child, not one person screened me for coercion or psychological issues.

No one asked about Ruby's medical history or health status, either. This uninterest makes sense; after all, the Washington-Surgi clinic performs abortions through the third trimester for any reason. It is legal and readily accepted. In fact, the nurses repeatedly reassured me that there was nothing wrong with or even unusual about me, a healthy woman, seeking an abortion of my healthy child at

seven months.

After another hour of sitting in the waiting room, a second nurse called me back. She discussed some potential complications. She warned of early labor, calling it a "spontaneous abortion." I asked what I would do if that

Considering my options, I asked whether or not Xanax would affect my clarity of thinking, to which she replied "No, it shouldn't." I reiterated that I would prefer to speak to the doctor first, but she didn't budge. So, I told the staff that I had changed my mind. They



happened in my hotel room that night. "It doesn't happen very often. But if it does, don't panic. [The doctor] could come and help you take care of it, or we could just tell you what to do with the remains," she said.

The nurse began to hand me medications in advance of the first dilation. The list included acetaminophen, an antibiotic, and Xanax. "Those guys are just there to relax you," she said with a smile.

I asked if it would be possible to speak to the doctor performing the abortion before taking the medications, but she said that wasn't how it worked. According to her, the doctor wouldn't see me until it was time to begin dilation, and by then the medications would need to already be in my system.

returned the cash I paid (minus ultrasound fees), and I left.

As I walked out of the waiting room, my mind again turned to the women around me. It felt like I was abandoning them and their children in the uncertain hope that this undercover work would protect more women and children in the future. It was an abysmal calculus. I've thought repeatedly about those who stayed in that waiting room after I left, and of all the women and children who have entered it since.

*Monica Snyder worked as an investigator with the human rights organization, Live Action, to investigate the Washington-Surgi Abortion Clinic to expose their late-term abortion practices. She also serves as the Executive Director of Secular Pro-Life.*

# Attack on abortion pill reversal once again fails to state the facts

By Cassy Fiano-Chesser

Abortion pill reversal is an opportunity for women who regret their decision to have a second chance, and it has reportedly saved thousands of preborn lives. Yet the abortion industry — which frequently flouts abortion pill FDA protocols and which claims to advocate for women's choice — has fought to undermine abortion pill reversal at every chance, denigrating it as nothing more than a tool used by the pro-life movement to hurt women.

Kate Knibbs, a senior writer for *Wired*, said, “The first time I heard about it, I didn’t understand why abortion pill reversal was a flashpoint in this culture war. It sounds like the rare thing pro-choice and antiabortion people could wholeheartedly agree on, a choice to not have an abortion. Win, win,” she wrote.

However, she eventually arrived at the conclusion that abortion pill reversal is a nefarious tactic used by proliferators to reframe the debate around abortion.

## How it works

Mifepristone is the first drug in the abortion pill regimen, and works by blocking the pregnancy hormone progesterone, depriving the preborn child of oxygen and nutrients. Misoprostol is given next to induce contractions, forcing the baby's body out of the mother's uterus. The abortion pill reversal treatment administers progesterone to counteract the effects of mifepristone, ensuring the baby is able to continue growing and thriving.

Progesterone is not a new treatment. It was the first hormone to be discovered, dating back to the 1600s, and it has been used to prevent miscarriages since the 1950s. Today, it is estimated that using progesterone when miscarriage is threatened could save over



8,000 preborn children each year. Yet Knibbs only claimed:

**... abortion pill reversal is not promoted by mainstream medical organizations. It has never been approved by the FDA, nor has it been tested in a randomized controlled trial. Many doctors worry that this treatment has simply not been studied enough to be safe to prescribe. In fact, the American Academy of Obstetricians and Gynecologists—the most prominent professional association for ob-gyns in the United States, with over 60,000 members—explicitly rejects abortion pill reversal.**

Christina Francis, a board member and CEO-elect of the American Association of

Pro-Life Obstetricians and Gynecologists (AAPLOG), was interviewed briefly by Knibbs. “There’s no increased risk of complications to mom and no increased risk of birth defects for baby,” she said, adding of ACOG, “Their claim that it’s not supported by the science is

completely false.”

This brief statement was overshadowed by lengthy paragraphs dedicated to arguments given by numerous abortionists as to why abortion pill reversal is either dangerous, unethical, or does not work.

## Mitchell Creinin

Knibbs said ACOG told her to speak to abortionist Mitchell Creinin, the principal investigator of a study into abortion pill reversal at University of California-Davis. In his study, some women were given a placebo after taking mifepristone, while the other women were given progesterone to counteract the drug. Creinin told Knibbs abortion pill reversal is “bogus crap,” and she unquestioningly reprinted his propaganda as to why it allegedly does not work.

“[T]he 2020 study had to be stopped early when three women (two who took the

placebo, and one who took the progesterone) experienced bleeding heavy enough to send them to the emergency room,” she wrote. “There has not been another attempt to clinically test the reversal process since, and Creinin does not believe it should be offered as a treatment without sufficient evidence.”

Notice that only one of the three hospitalized women who hemorrhaged had received progesterone (reversal treatment), which does not have a known risk for hemorrhage. The other two received only the abortion pill, which does carry with it a known risk for hemorrhage.

What Knibbs did not point out is that Creinin has a vested interest in making sure the abortion pill regimen is widely accepted and available. Creinin is not only an abortionist, but was also a paid consultant for abortion pill manufacturer Danco Laboratories, and the study was sponsored by the University of California-Davis and the Society of Family Planning, which both have strong ties to abortion.

The other authors on the study likewise had ties to pro-abortion interests. Laura Dalton is the Chief Medical Officer for Planned Parenthood Mar Monte's managing board. Laura Steward is the former chief operating officer for FPA Women's Health, an abortion chain. So Creinin and his co-authors all have a financial incentive to keep the abortion pill in-demand by the public — but none of that was noted by Knibbs.

*See “Attack,” page 14*

# Is CNN becoming more balanced in its coverage?

By Laura Echevarria, NRL Director of Communications and Press Secretary

*CNN's* new CEO Chris Licht is shaking things up at *CNN* and with good reason. *CNN's* ratings have dropped considerably over the years, and this is due to the lack of balance in *CNN's* coverage and the inability of *CNN's* previous leadership to recognize this as an issue. As the new *CNN* CEO pointed out, nearly all of *CNN's* correspondents and anchors have taken on roles more like commentators than journalists.

According to NPR,

**Since joining the network in May, Licht has made clear what he doesn't like about CNN: Too many reporters and anchors act as analysts and commentators, he told associates. Too many commentators simply pump up the volume.**

It's ratings cratering, *CNN's* new CEO needed to make changes. Licht was hired by David Zaslav, the CEO of *CNN's* new parent company Warner Bros Discovery. Zaslav and Warner Bros. Discovery's single largest investor, John Malone, have both expressed

a desire to see *CNN* return to a more middle-of-the-road type of reporting.

In an interview with *CNBC*, John Malone said,

**I would like to see *CNN* evolve back to the kind of journalism that it**



**started with and, you know, actually have journalists which would be unique and refreshing.**

Even at its roots, *CNN* has always been hostile to pro-lifers, but the hostility was found in a bias that seeped into its reporting. However, that hostility was not as overt as it is today. But, since the new CEO's arrival, pro-lifers have

seen an uptick in more balanced and less hostile reporting.

For example, a *CNN* reporter covering National Right to Life's convention also reported on the U.S. Supreme Court's *Dobbs* decision and NRLC staff were surprised at

often lambasted in conservative media for his obvious liberal ideology as well as White House correspondent John Harwood, who, according to *NPR*, "Licht told colleagues, brought more insight than original reporting."

Is the house cleaning at *CNN* going to result in a fully balanced network? It's hard to say. Licht, for example, is keeping uber-liberal Don Lemon, whom he refers to as "a highly talented broadcaster."

However Lemon is being moved from his key evening host slot to a morning show slot that he will now share with Poppy Harlow and Chief White House Correspondent Kaitlan Collins. Collins used to work for *The Daily Caller* which was founded by *Fox News's* Tucker Carlson. Collins will act as a co-host and chief correspondent for the morning show.

What is good news is that *CNN's* new CEO recognizes something that Americans have long known but many reporters and journalists ignore: today's mass media has lost the trust of the American people.

It will take work—and balanced reporting—to restore it.

how balanced the article was considering how biased *CNN* reporting had become over the years. While we don't expect favorable pieces on the pro-life movement, we always *hope* for balanced coverage which has become more difficult to find over the years.

Licht's house cleaning is welcome news.

Recently let go from *CNN* was Brian Stelter, the host of *Reliable Sources*, who was



# At 15 weeks, unborn babies have already reached major developmental markers

By Dave Andrusko

On Wednesday we wrote about a press conference held concerning the reintroduction of the “Protecting Pain-Capable Unborn Children from Late-Term Abortions Act” which surveys show has very strong support among the American people.

“This bill would protect unborn children at 15 weeks, a

The WHPA would establish abortion on demand, with no limits throughout pregnancy, as federal law. “While proponents of the WHPA claim the bill would codify *Roe v Wade*, don’t be fooled— it goes much, much further,” Tobias said.

On September 15, Jordan Boyd of *The Federalist* wrote about “12 Facts Everyone

on a defenseless unborn baby?

Dr. Shelly Theobald explained what she saw. And this was an abortion of a 17 week old baby:

**I still had no idea what the “procedure” was until suddenly I saw a long pointed object come into the triangular view of the ultrasound monitor**

**“This mother needs to wake up and see what they are doing to her baby! She needs to know!”**

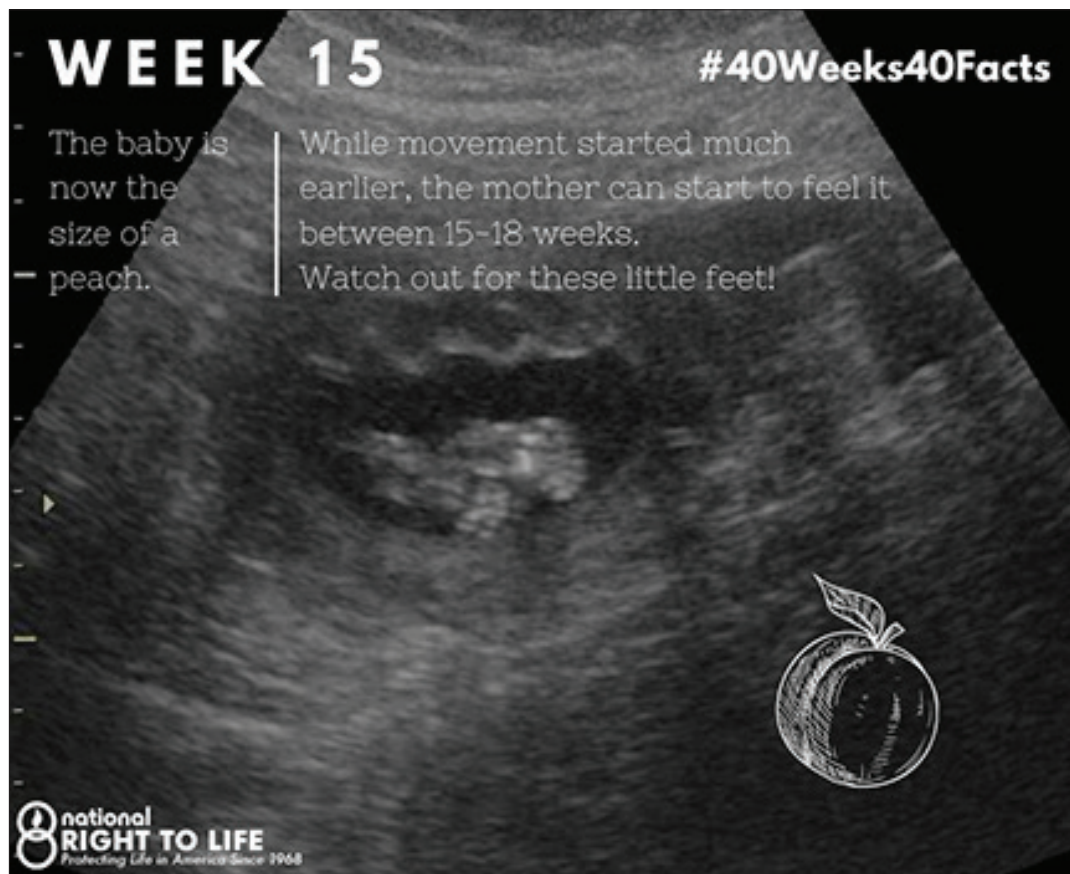
#2. “Baby’s Heart Has Already Beat Nearly 16 Million Times.” “This heartbeat is often detected long before that, by five or six weeks of gestation.”

#3. “All Major Organs Are Formed and Functional.” Boyd quotes Dr. Katrina Furth who explained “almost every organ and tissue forms within the first eight weeks after conception.” Dr. Furth added, “The rest of the pregnancy is spent growing these organs larger and more mature to prepare for life outside the womb.”

The remainder of this fascinating essay outlines such developmental markers as “Baby’s Skeleton Is Fully Formed”; “Baby’s Limbs Are Formed And Moveable”; and “Baby Practices ‘Seeing.’” By the latter, Boyd explains

**At nearly 15 weeks in utero, an unborn baby’s eyes, eyebrows, and eyelashes have all started to develop. Babies’ eyes will stay fused shut for a while yet, but the seeing organs are still reactive to light and capable of rolling and other sporadic movements.**

Take a few minutes and read her great essay at <https://thefederalist.com/2022/09/15/12-facts-everyone-should-know-about-babies-at-15-weeks-of-gestation>



point by which science shows that the unborn child is capable of experiencing great pain when killed by dismemberment or other late abortion methods,” said NRL President Carol Tobias. “It stands in stark contrast to the Democrats’ support of radical legislation like the so-called ‘Women’s Health Protection Act.’”

Should Know About Babies At 15 Weeks Of Gestation.” It’s a wonderful read; I will highlight only some of the fascinating information.

For example, #1. “These Babies Can Feel Pain.” Will pro-abortionists deny this? Of course. How would you like to defend inflicting this excruciating pain

and I watched in horror as the “tool” suddenly jabbed straight at the little baby. The baby immediately jolted violently as it reacted to the pain of the stab. I could not move: I felt paralyzed, dumbfounded. I remember thinking,

# Doctors Aren't Idiots: Abortion in Life-Saving Situations

By Right to Life of Michigan

Once the U.S. Supreme Court overturned *Roe v. Wade* in *Dobbs v. Jackson Women's Health Organization*, abortion supporters have made miscarriages and ectopic pregnancies the center of their response.

Such a response is odd, given the vast majority of abortions have nothing to do with physical health reasons. Texas' heartbeat

lie, and no woman since 2013 has had her insurance claim declined because of confusion between miscarriage treatments and abortion.

But what about situations like ectopic pregnancies, sepsis, or other conditions that require an abortion to save a woman's life? Is Michigan's life of the mother exception too confusing for doctors to understand?



law has been in effect for a year, other states' abortion bans have been enforceable for months, and no women have died. Yet, these talking points continue. Their goal appears to be smearing prolife people as cruel villains who want women to die all across the fruited plains.

So, let's look at this issue in real detail—specifically in Michigan.

First of all, miscarriages aren't abortions. Every doctor knows that. Most people know that. No abortion law in Michigan restricts treatment for a woman after their son or daughter has died. Back in 2013, abortion supporters claimed our Abortion Insurance Opt-Out Act would prevent health insurance from covering miscarriage treatments. It should have been obvious then that it was a blatant

We received five years of reports from the Michigan Department of Health and Human Services on Medicaid coverage of abortions. Michigan law strictly forbids Medicaid coverage of most abortions, but allows coverage for any procedure needed to save the life of the mother. Also, because of a change in the Clinton Administration, Medicaid also covers abortions in cases of rape and incest.

Despite this strict law, every year there were claims paid to women having abortions. If we went further back than 5 years, no doubt every year we'd see Medicaid claims for abortions to save the life of the mother. This means doctors and insurance companies can easily tell the difference. If abortions in life-saving cases were so

unclear, wouldn't there be complaints and calls to change our 1988 ban on Medicaid-funded abortions? There have been no complaints, because doctors aren't idiots and can obviously figure this out.

The abortion amendment that Michigan voters may face in November has similar disdain for doctors. It specifically refuses to include the wording of "doctor" or "physician," instead opting for "health care professional." That definition under Michigan law includes massage therapists and athletic trainers. Doctors aren't perfect, but they certainly can't be replaced with your masseuse.

The amendment goes even farther; it says the state couldn't penalize or punish someone for aiding or assisting a "pregnant individual." That means a non-doctor performing an abortion can't be punished. We've gone from abortion supporters using back alley abortion myths to push their agenda to trying to enshrine back alley abortions into our Michigan constitution.

The numbers also tell us another story. Here's how many Medicaid abortion claims were made for abortions in cases of rape and the mother's life at risk in the entire state:

- **2017: 8 life of the mother, 0 rape**
- **2018: 10 life of the mother, 1 rape**
- **2019: 2 life of the mother, 1 rape**
- **2020: 3 life of the mother, 0 rape**
- **2021: 8 life of the mother, 0 rape**

There were 0 claims for

incest. Tragically, abortion is a tool to assist incestuous abusers, who can take their victims to abortion facilities to "get rid" of the evidence. The abortionists generally have a "don't ask, don't tell" policy when it comes to abuse and human trafficking, and hand the victims right back over to their abusers.

About 25% of Michigan residents are covered by Medicaid, and an even higher proportion of the poorer women more likely to have abortions than richer women. So, these numbers are not capturing all of the abortions in Michigan, but a very large percentage of them. Of the 28,409 abortions performed in Michigan in 2021, only 914 were paid for by health insurance.

So, we see that a tiny number of abortions in Michigan involve a risk to the mother's life or situations involving rape or incest. Yet that's all that abortion supporters want to talk about, because they know that most people don't support abortions for purely economic or social reasons.

They want to create myths about women experiencing miscarriages not receiving treatment because they don't want to talk about women caught in a cycle of self-destruction, coming back to the abortion facility multiple times in their life and just sent back to their situations. They don't want people to see what abortion truly is. They don't want people to think at all about the child in the womb. They don't even want people to think about the situations of the majority of women who have abortions.

# Ultrasounds not only save lives but also help preserve families

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

Science has now confirmed what parents the world over have known in their hearts—that ultrasounds of preborn babies are important for parent-child bonding, including fathers.

An article in the *Journal of Reproductive and Infant Psychology* reveals that a simple sonogram can increase the emotional attachment of parents to their unborn children. As the team of researchers states, “Parents value working collaboratively with sonographers to be actively involved in the experience. Sonographers can help facilitate attachment by delivering parent-centered care tailored to parents’ emotional and knowledge needs.”

The researchers—Emily Skelton, Rebecca Webb, Christina Malamateniou, Mary Rutherford & Susan Ayers—conducted database searches of English language studies published since the year 2000. The 23 studies that were reviewed described measures of attachment in parents after they had seen ultrasound images of their preborn babies.

The majority of the studies were conducted in European nations. As the article notes, “Parents regarded scans as a milestone event, which they expected, and wanted.”

It is also interesting to point out that “One of the first-time mothers even considered the ultrasound examination to be

an initiation rite into pregnancy, making it obvious not only to herself but also to others that she really was expecting a baby.”

But mothers were not the only ones to see their attachment

**The baby represents a project shared between a couple and the scan is a pregnancy-related event that both parents can experience simultaneously.**

**through images shared afterwards and the scan experience may further support the intrapsychic dynamics of the expectant parents by enabling an**



to their babies enhanced as a result of ultrasounds. Fathers, too, bonded with their babies in what might be considered an unexpected way:

**A cross-cutting theme was the importance of partners at scans. Scans help fathers and non-pregnant partners to engage with the pregnancy and get to know the baby through visual cues.**

**Knowledge about the unborn baby is acquired together, and physical movements can be witnessed in real time during the scan, providing fathers and non-pregnant partners with a glimpse into the otherwise privileged access their partner has of the pregnancy. The ‘thrill’ of being present cannot be fully felt**

**encounter with their imagined child.**

In addition, “partner behavior changed after the scan to be ‘more understanding and gentle’ towards mothers.”

It’s incredible when you think about it—a simple diagnostic tool bringing together a family in a unique and vital way.

What a wonderful gift they are in the on-going effort to rebuild a culture of life!

# Biden hits rock-bottom in his attacks on Republicans

By Dave Andrusko

Electoral prospects will inevitably change over the next six and a half weeks, so drawing any tentative conclusions is dicey. But to gin up their base and persuade the public that Republicans are horrible people, President Biden and Vice President Harris are indulging in demagoguery of the first order.

To be sure, politics ain't beanbag. You'd expect a president with rock-bottom approval ratings and a vice president just as unpopular to lash out. But...

Take President Biden's latest attack at where he "was speaking at a Democratic National Committee reception in a swanky Boston apartment," according to the *Associated Press's* Zeke Miller.

"If we lose the House and we lose the Senate it's going to be a really difficult two years," he told a crowd of about 30 donors and guests. "I'll be spending more time with the veto pen than getting anything done."

Fair enough.

Then there was this:

**In his remarks, the president also took aim at the "MAGA R e p u b l i c a n s , " continuing his sharp attacks against former Republican President Donald Trump and his supporters, an effort that has emboldened Democrats across the**

**country ahead of the election.**

Reading the official White House transcript of his remarks, you see that Biden lashed out again and again. "It's about the right to vote," President Biden said. "It's really about democracy itself. And I don't think that's hyperbole. It's about democracy itself."

And then, he dove for the cellar. According to *CNN*, "It's not just Trump," he went on, "it's the entire philosophy that underpins the — I'm going to say something: It's like semi-fascism."

House Minority Leader Kevin McCarthy called on Biden to apologize. "President Biden has chosen to divide, demean, and disparage his fellow Americans — Why? Simply because they disagree with his policies," McCarthy said in his speech. "That is not leadership."

Of course Biden didn't apologize.

Given his attack mode presidency, Biden has the perfect vice president. Harris spoke September 10 at the Democratic National Committee Summer Meeting. Read all of what she said carefully but especially these passages.

**And, you know, our President — our President, Joe Biden, he's been clear. He's kind of done with those archaic Senate rules that are standing in the**

**way of those two issues. He's made that clear, and has said that that — he will not allow that to obstruct those**

**about that?**

**And so, that being the case, I cannot wait to cast the deciding vote to break the filibuster**



*Pro-abortion President Joe Biden*

**two issues.**

**And, you know, for me, as Vice President, I'm also president of the Senate. And — (applause)— and in our first year in office, some of the historians here may know I actually broke John Adams's record of casting the most tiebreaking votes in a single term. (Laughs.) How about that? (Applause.) How**

**on voting rights and reproductive rights. I cannot wait. (Applause.) Fifty-nine days. Fifty-nine days.**

Well, it's now 6 and a half weeks until the November 8 elections and Biden and Harris have laid out in block letters what their party will do if they win additional seats in the House and especially the Senate.

Will we meet the challenge? I am confident we will.

# Michigan law banning most abortions is unconstitutional, judge rules

*Judge Gleicher, a frequent donor to Planned Parenthood, declined to remove herself from the case*

By Dave Andrusko

As was wholly expected, Court of Claims Judge Elizabeth Gleicher ruled September 9<sup>th</sup> that the 1931 law banning almost all abortions “would violate both the right to bodily integrity and equal protection afforded to people who are pregnant under the Michigan Constitution,” according to Dave Boucher of the *Detroit Free Press*. “The order is not the final say on abortion access in the state – opponents will certainly appeal to a higher court that has already undermined previous Gleicher rulings.”

She wrote

**“Manifestly, criminalizing abortion will eliminate access to a mainstay healthcare service. For 50 years, Michiganders have freely exercised the right to safely control their health and their reproductive destinies by deciding when and whether to carry a pregnancy to term. Eliminating abortion access will force pregnant women to forgo control of the integrity of their own bodies, regardless of the effect on their health and lives. ...**

**“Enforcement of**

**(the criminal abortion ban) will endanger the health and lives of women seeking to exercise their constitutional right to abortion. Enforcement**



**also threatens pregnant women with irreparable injury because without the availability of abortion services, women will be denied appropriate, safe and constitutionally protected medical care.”**

But Judge Gleicher was just warming up:

**“The statute not only compels motherhood and its attendant responsibilities, it wipes away the mother’s**

**ability to make the plans she considers most beneficial for the future of her existing or desired children. Despite that men play necessary role in the**

**decisions about when and whether to be a parent.”**

The lawsuit was filed earlier this year by Planned Parenthood of Michigan against Attorney General Dana Nessel. “Gleicher already issued a preliminary injunction that she argued should prevent Nessel and any county prosecutor from enforcing the 1931 abortion law,” Boucher wrote.

Of course, the attorney general and the governor are staunchly pro-abortion. Neither is interested in defending the law.

In fact, Nessel filed an *amicus* brief today in support of *Reproductive Freedom For All v Board of State Canvassers*. On August 31st, the 4-member Michigan Board of State Canvassers deadlocked on whether to certify the Reproductive Freedom for All ballot initiative to the November ballot. The initiative would enshrine abortion in the state constitution.

Gov. Gretchen Whitmer “has filed a separate lawsuit against prosecutors in the 13 Michigan counties with abortion clinics, resulted in an Oakland County judge issuing a separate injunction that prevented these law enforcement officers from charging anyone under the abortion ban.”

**procreative process, the law deprives only women of their ability to thrive as contributing participating in world outside the home and as parents of wanted children. ...**

**“Our Constitution does not permit the Legislature to impose unjustifiable burdens on different classes of pregnant women. It also forbids treating pregnant women as unequal to men in terms of their ability to make personal**

# Federal court: CA can't force Christian doctors to participate in assisted suicide

*Editor's note. This explanation of Christian Medical & Dental Associations v. Bonta comes from ADF—Alliance Defending Freedom.*

LOS ANGELES – A federal district court has ruled that a California law violates the First Amendment rights of medical professionals by requiring them to participate in physician-assisted suicide against their religious convictions and professional ethics. Alliance Defending Freedom attorneys representing a doctor and the Christian Medical & Dental Associations asked the U.S. District Court for the Central District of California to halt enforcement, while their lawsuit proceeds, of a state law that forces physicians to participate in assisted suicide.

“Our clients seek to live out their faith in their medical

practice, and that includes valuing every human life entrusted to their care. Participating in physician-assisted suicide very

The Christian physicians “have demonstrated they are likely to suffer a violation of a constitutional right absent an injunction...,” the court wrote

California legalized physician-assisted suicide in 2015 with its passage of the controversial End of Life Options Act. Then, despite the medical-ethics consensus that no physician should be forced to participate in physician-assisted suicide even where the practice is allowed, California legislated to not only eliminate important safeguards from the End of Life Options Act, but also force conscientious physicians to participate in the process.

Christian Medical & Dental Associations (CMDA) is a national association of conscientious Christian health care professionals whose personal religious convictions and professional ethics oppose the practice of assisted suicide. Dr. Leslee Cochrane, a member of CMDA, is a California-licensed physician who joined the lawsuit.



clearly would violate their consciences,” said ADF Senior Counsel Kevin Theriot, who argued before the court on behalf of those challenging the California law. “We’re pleased the court followed the U.S. Supreme Court’s decision in *NIFLA v. Becerra* that clarified First Amendment protections extend to religious medical professionals.”

in its opinion in *Christian Medical & Dental Associations v. Bonta*. “The ultimate outcome of this requirement is that non-participating providers are compelled to participate in the Act through [even its] documentation requirement, despite their objections to assisted suicide.”

As the lawsuit ADF attorneys filed in February explains,

## Reflecting the incredible progress made in fetal medicine, Sen. Graham and Rep. Smith reintroduce “Protecting Pain-Capable Unborn Children from Late-Term Abortions Act”

*From page 1*

The WHPA would establish abortion on demand, with no limits throughout pregnancy, as federal law. “While proponents of the WHPA claim the bill would codify *Roe v. Wade*, don’t be fooled-- it goes much, much further,” Tobias said.

Smith explained that a recent Harvard poll shows 72% percent of Americans, including 75% percent of women, oppose abortion after 15 weeks of pregnancy. “A Marist poll from January 2022 similarly reported that 71% of Americans oppose abortion after the first three months of pregnancy,” according to Smith, co-chair of the House pro-life caucus.

And these are not “rare” abortions. According to data published on Monday, each year approximately 55,800 unborn children are killed by

abortion at 15 weeks gestation or later.

And if the public had the slightest idea what happens to these children, positive response would be even greater.

“The extreme pro-abortion bill—which has passed the Democrat House twice—would legally authorize and enable the violent death of unborn baby girls and boys by dismemberment, decapitation, forced expulsion from the womb, deadly poisons, and other methods at any time and for any reason until birth,” said Smith.

“The dismemberment abortion—the most common abortion method used during the second trimester—involves beheading, cutting and dismembering the child’s fragile body including severing

his or her arms and legs,” Smith said. “Until rendered unconscious or dead, the baby feels every cut.”

“We all dread pain, avoid it, and even fear it,” said Smith. “And we all go to extraordinary lengths to mitigate its severity and its duration for ourselves. Yet every day, a whole segment of human beings is being subjected to painful—and deadly—procedures. This unconscionable human rights abuse must stop.”

Smith added, “Thanks to incredible progress made in science, we now know that by at least 15 weeks unborn babies killed by abortion experience excruciating suffering and physical pain. Our legislation responds to the scientific advances already recognized in fetal medicine by increasing

human rights protection for these children.”

Smith also highlighted a TIME Magazine cover story entitled “Saving Premies” that explored the premie revolution and how medicine and dedicated caregivers are helping the tiniest babies to survive and thrive.

According to TIME, “thanks to advances that had not been made even a few years ago, the odds of surviving and thriving are improving all the time.”

“Abortionists on the other hand are in the business of ensuring that children neither survive nor thrive,” said Smith. “Unborn children, including children with disabilities, deserve treatment not excruciating deaths by dismemberment.”

# Veterans Administration Expands Coverage of Abortion on Demand

## *New Rule Violates Federal Law*

WASHINGTON— The Biden Administration announced that it would expand abortion on demand through the Department of Veteran Affairs in violation of Section 106 of the Veterans Health Care Act of 1992 which specifically prohibits the VA from providing abortion. The new rule announced on September 9<sup>th</sup> includes a broad, undefined “health” exception that would allow abortion for virtually any reason. National Right to Life opposes the new rule.

“The Biden Administration is once again pushing taxpayer funding of abortion on demand,” said Carol Tobias, president of National Right to Life. “Abortion is not health care, and this rule is in clear violation of existing law.”

In a recent *CNN* interview, VA Secretary Denis McDonough was asked, ““Will the VA take this measure and allow abortion

services at VA hospitals even in states where abortion is banned?” Secretary McDonough replied, “We’re going to make sure that they [veterans] have access to the full slate of that care, because that’s what we owe them.”

“Despite current federal law and regulations, the Biden Administration has made every effort to promote and pay for abortion on demand

using taxpayer money,” stated Tobias. “On the issue of abortion, President Biden has demanded a radical ‘whole of government’ response.”

**NATIONAL RIGHT TO LIFE  
PRESS RELEASE**



## Attack on abortion pill reversal once again fails to state the facts

*From page 6*

Knibbs also left out some important information from Creinin’s study that not only showed that — despite his small sample size — the abortion pill reversal regimen is not only safe, but it works. Twice as many patients who were given progesterone instead of a placebo saw their pregnancies continue, and twice as many patients who received the placebo were transported to the hospital via ambulance.

Christina Francis previously responded to the accusations of danger in Creinin’s study in a statement to Live Action News, saying, “It actually was only one woman who received progesterone that was taken to the hospital and two who received placebo. The one

who received progesterone completed her abortion and required no further treatment. **The two who did NOT receive progesterone both had to have emergency surgery and one had to have a transfusion.**” (emphasis added)

### Daniel Grossman

Daniel Grossman is the director of the University of California-San Francisco’s Advancing New Standards in Reproductive Health, which trains future abortionists. He is also a senior adviser at Ibis Reproductive Health, which is funded by — once again — Danco Laboratories, the abortion pill manufacturer. He has also served as a National Abortion Federation (NAF)

board member, and as a consultant to both Planned Parenthood Federation and the Center for Reproductive Rights.

He has also heavily advocated the “no-test” protocol for the abortion pill in which women undergo the procedure without seeing a doctor, undergoing an ultrasound, or ruling out any contraindications. Without testing, a woman may not know if she has an extrauterine pregnancy or what her child’s true gestational age is. A provider would also be unaware if she is being coerced into an abortion.

Grossman has stated that, in a post-*Roe* environment, women who take the abortion pill and experience complications

should go to the emergency room and lie to their doctors, saying they had a miscarriage.

Knibbs is completely reliant upon people heavily invested in promoting abortion to discredit something that gives women a second chance, if they want it. The only real reason to oppose abortion pill reversal is because it threatens abortion; it shows that the notion of post-abortion regret is real, no matter how much abortion advocates try to deny it.

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

# Pennsylvania's John Fetterman advocates for unfettered access to abortion

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

He's portrayed in the news media as a blue collar "every man," an average Joe in shorts and a hoodie who cares about the common man.

But U.S. Senate candidate John Fetterman has extreme positions when it comes to the life issues.

Fetterman advocates for unfettered access to abortion. What this means from a practical standpoint is legal abortion during all nine months of pregnancy up to birth.

The current Pennsylvania Lieutenant Governor also opposes protecting babies from brutal dismemberment abortions, where they are torn limb by limb from the mother's womb.

He would also have our hard-earned tax dollars pay for abortion—a stand opposed by the vast majority of Americans in national poll after national poll.

Fetterman regularly takes to the social media platform Twitter with his abortion-without-limits mantra.

In a tweet in June, Fetterman wrote: "We can't wait. We need Democrats to vote like Democrats, scrap the filibuster,

and pass the Women's Health Protection Act."

The Women's Health Protection Act is a deceptively labelled bill that would go far beyond *Roe v. Wade*, the tragic U.S. Supreme Court ruling which led to the deaths of more than 63 million American preborn babies.

The Act would protect abortion, not women.

As National Right to Life has stated in its fact sheet on the subject:

**"This bill would enshrine into law abortion-on-demand and would overturn existing pro-life laws and prevent new protective laws from being enacted at the state and federal levels.** This bill seeks to strip away from elected lawmakers the ability to provide even the most minimal protections for unborn children, at any stage of their pre-natal development."

Fetterman is far out of the mainstream when it comes to the issue of abortion. The people of Pennsylvania deserve a U.S. Senator who reflects their life-affirming values—not one who will cater to the whims of the mega abortion industry.



*John Fetterman  
Photo: Gov. Tom Wolf  
(CC BY 2.0)*



# “The Conversation” Platforms Pro-Abortion Disinformation

By Audrey Wagner

*The Conversation* claims to publish “trustworthy and informative articles written by academic experts.” So I was recently disheartened, and not just a little annoyed, when I found false premises, misleading information, and logical fallacies among three of their recent articles discounting the value of unborn humans in the abortion debate.

## Sahotra Sarkar: Please disregard a survey of thousands of biologists and focus instead on a single biologist’s lecture on “personhood”

The first of these was shockingly deceptive, as we’ll see.

Sahotra Sarkar’s September 1, 2021 article in *The Conversation* is titled, “Defining when human life begins is not a question science can answer – it’s a question of politics and ethical values.”

The title alone begs the following questions: Whose politics and ethical values decide when human life begins, and on what basis? And why say that science can’t answer when human life begins, when the answer is provided by textbooks as well as a consensus of biologists?

Sarkar attempts to discount this scientific consensus by begrudging Steven Andrew Jacobs’ 322-page published paper that included results of a survey sent to 62,469 biologists focusing on the biological view of when a human life begins, 5,557 of whom provided analyzable data through their responses. Unfortunately for Sarkar, 96% of them affirmed as “correct” at least one statement

that describes the biological view that a human’s life begins at fertilization.

Sarkar says Jacobs’ survey is “not a proper survey method and does not carry any statistical or scientific weight,” on the basis that the survey responders were



“self-selected.” He implies the survey responders were biased toward a pro-life conclusion. By a single sweeping condescension, Sarkar hopes to falsify the affirmations of 5,557 biologists in a study that, for those who actually read it, clearly does demonstrate scientific methodology.

Self-selection is an issue only if those who opt to take a survey are not equivalent to those who opt out, thereby skewing responses. Yet, of the 5,557 biologists from 86 countries and 1,058 academic institutions who provided analyzable data, 85% identified as pro-choice (pg. 250). Sarkar’s implication of a pro-life bias has no basis.

Not only that, but the email advertising the survey did not disclose that the survey had implications for the abortion debate, so as not to skew the

pool of participants (pg 253).

Sarkar then goes on to say (wrongly) that there is no scientific consensus for when human life begins. He says there are actually several possibilities put forth by scientists for when human life begins, including

in addition to “human life” is philosophically problematic and empirically impossible. Jacobs said it well in his paper: “notions of sustainability, viability, meaning, and value are non-scientific concepts that adulterate the discussion” (pg. 247). From a purely biological perspective, Jacobs explains, “An organism with a diploid genetic code is present at fertilization, and it did not exist at the moment before then,” (pg 247).

Recall that 96% of the biologists from his survey study agree.

Sarkar concludes by repeating his misleading premise that biology does not determine when human life begins. He says, instead, that our values determine the answer to this question. (One might here recall unfortunate events in history when “values” led to various crimes against humanity, including mass killings.)

## Nancy Jecker: Let’s consider the implications of banning abortion—but only the ones that make my point

Nancy S. Jecker’s May 13th, 2022 article in *The Conversation* also thinks we should shift the conversation to “ethics.” Again, whose ethics?

The ethics of pro-choice ideology, of course.

She points us to the notion of “personhood” in the abortion debate. She says that most philosophers distinguish being a person from being human, while no one disputes the fetus’s species.

(Ironically, she here admits that “no one” disputes that

not until birth. He makes these assertions despite previously claiming scientists can’t answer the question in the first place.

It then gets much worse, for this is the point in his article when Sarkar hugely misleads readers. When you click on Sarkar’s reference that supposedly backs up his claim that there is no scientific consensus about when “human life” begins, you are taken to a transcript by biology professor Scott Gilbert. It turns out that Gilbert is not at all talking about when “human life” begins; rather, his transcript is clearly and repeatedly about when “personhood” begins.

Sarkar thereby misleads readers into believing that there is no scientific consensus for when “human life” begins.

Of course, trying to extract “personhood” as something

See “*Conversation*,” page 39

# Parents receiving a prenatal diagnosis need extra support. Here's how you can help

By Anne Marie Williams, RN, BSN

While the overturning of *Roe v. Wade* is a cause for celebration among pro-lifers (while still realizing the work is just beginning), one group of pregnant women and their preborn children remain perilously abortion-vulnerable across the country. But there is a way to help them.

Be Not Afraid (BNA), previously profiled here and here, is a North Carolina-based, 100% pro-life “case management support service providing parent-centered care and peer support to moms and dads carrying to term following a prenatal diagnosis.”

## The Prenatal Diagnosis Exception

Even in states where abortion is now largely banned, exceptions for life-limiting or life-altering prenatal diagnoses are common, and the abortion rates of these children remain alarmingly high. Requests for BNA's help have skyrocketed all over the United States. Now, BNA is exporting its model of care to “ensure that parents experiencing a prenatal diagnosis find comprehensive case management support in the state in which they live,” and it's counting on pregnancy resource centers, religious organizations, healthcare professionals, and caring individuals across the country to help them accomplish this goal.

## Pregnancy Help Centers can Stand in the Gap

Anne Tretinyak, Executive Director of Vida Medical Clinic and Support Services in Wisconsin, believes that prenatal diagnosis support for families is a necessary and natural extension of the incredible work pregnancy help centers do every day. She shared her personal testimony of receiving a frightening prenatal diagnosis as a young

newlywed.

“My husband and I experienced the unexpected blessing of pregnancy just three short months after getting married. We were both in graduate school at the time



and a little overwhelmed by our good news. I experienced bleeding about 10 weeks into my pregnancy and was diagnosed with a large tear in my placenta. I was told the tear was so significant that my baby would not survive. Abortion was recommended. Long story short, at the 20 week ultrasound the tear couldn't be found, and I delivered a full-term, healthy 10.5 pound baby boy.”

When Heartbeat International approached her about the possibility of expanding their ministry to include prenatal diagnosis support, Tretinyak leaped at the opportunity.

She observed, “Centers like Vida offer [prenatal diagnosis] support to our patients but do not market support services to the community at large. This needs to change.” With the support of its Board of Directors, Vida stands ready to embrace “a new expanded vision of our ministry that encompasses support, mentoring and advocacy for women experiencing an adverse diagnosis or challenging pregnancy,” in addition to its historic outreach of “support and mentoring for women who have experienced the loss of a pre-born child (through

abortion, miscarriage or still birth) or infant.”

## A Model already Exists that PHCs Can Adopt

Tracy Winsor, BNA Parent Program Director, told Live

training day requirement, each goes through nearly 30 recorded modules online related to the topics mentioned above.

## Feedback from Training Participants

One participant commented, “Seeing the impact BNA has had on actual families was the best thing... It was beautiful to see the love, compassion, support and friendship that was given to families in their greatest crisis.”

Another observed:

**It is hard to pick out the best thing. The whole design of the training was outstanding in its multi-dimensional approach to care. Learning about trauma-informed care from a scientific perspective was fantastic. Having the opportunity to apply it to the cases presented was very helpful.**

BNA's training filled trainees with hope for what's possible, as the following feedback shows:

**Meeting people who care so much about children and parents, and are committed to their care was the best thing! Both the fellow PCC trainees and the BNA team. And developing an understanding of how to best serve the parents. The stories shared by the team, the real-life examples, hearing the parents' stories—the entire day renewed my heart and commitment to prolific work.**

Action News that with funding from the Knights of Columbus and The Lynch Foundation, BNA has developed a Parent Care Coordinator (PCC) training program. So far, 15 individuals from several Catholic dioceses as well as multiple pregnancy resource centers, including Vida, have attended a training day in North Carolina or Pennsylvania, and two more training days are planned this fall in Colorado and Texas.

Participants have included a retired OB/GYN, four Registered Nurses, an ultrasound tech, a Catholic Charities social worker, and several employees of Catholic dioceses.

Training topics include “An Introduction to Case Management, Pastoral Care, Trauma-Informed Care, Working with the Medical Community and in Hospital Settings, Prenatal and Newborn Testing,” and “Planning for Birth and Beyond.” Feedback from participants has been overwhelmingly positive.

Training participants receive extensive training to be successful in the PCC role. In addition to the in-person

# Pro-Life Recap: Primaries, Special Elections, and Runoffs in Florida, New York, and Oklahoma

By Karen Cross, National Right to Life Political Director

On Tuesday, August 23rd, voters made their voices heard in primaries, special elections, and runoff elections in Florida, New York, and Oklahoma. Here's a pro-life rundown of some of the most noteworthy races.

## Florida Primary Elections

At the top of the ticket, pro-life Senator Marco Rubio (R), who is seeking a third term in the Senate, did not face a primary challenger. Senator Rubio holds a 100% pro-life voting record with National Right to Life. His strong record of advocacy on behalf of unborn babies and their mothers stands in stark contrast to that of Congresswoman Val Demings, the winner of the Democratic primary. Demings supports a policy of abortion on demand for any reason, until birth, and she supports the use of taxpayer dollars to pay for abortions. While serving in the House, Demings even voted against the Born-Alive Survivors Protection Act, legislation to ensure infants who survive abortions are provided with the same degree of medical care that would be given to any other premature baby born at the same gestational age. *The Cook Political Report* gives the edge to Senator Rubio and labels the race: Leans Republican.

Pro-life Governor Ron DeSantis (R), who also did not have a primary challenger, will face pro-abortion former Governor Charlie Crist (D) in the general election. For the Democratic nomination, Crist defeated Florida Commissioner of Agriculture Nikki Fried, the only Democrat currently

serving in statewide office in Florida. Crist, a former Republican turned Democrat, currently serves in the U.S. House representing Florida's 13th District. Earlier this year, Crist voted in favor of the so-called Women's Health Protection Act, a bill that really should be titled the "Abortion Without Limits Until Birth Act" because it would enshrine abortion on demand in federal law and policies, and it would even tear down pro-life protections on the state level.

Crist also voted to eliminate the life-saving Hyde Amendment, which bars federal tax dollars from being used to pay for abortion in many federal programs. In contrast, Governor DeSantis has demonstrated pro-life leadership by signing legislation to protect unborn babies 15 weeks and older, signing legislation requiring parental consent before a minor can obtain an abortion, and dedicating more than \$86 million for pregnancy support and prenatal health services.

Florida Attorney General Ashley Moody, a pro-life Republican, is up for re-election this year. She will face off against pro-abortion Democrat Aramis Ayala. The contrast between the candidates could not be clearer. Attorney General Moody has defended pro-life protections passed by the Florida Legislature and signed by the governor, like the law protecting unborn babies at 15 weeks and beyond. Conversely, Ayala, according to her campaign website, believes protecting unborn babies 15 weeks and older is "unconstitutional." (In June,

the U.S. Supreme Court ruled in *Dobbs v. Jackson* that a similar law enacted in Mississippi protecting unborn babies at 15 weeks and beyond is, in fact, constitutional.) If elected, Ayala

*Cook's* Likely Republican column. In the 15th District, pro-life former Florida Secretary of State Laurel Lee won the Republican nomination and will be up against pro-



suggests she would not defend pro-life laws in court, instead calling abortion a "sacred right" and a "top priority."

Following this year's redistricting process, in which Florida gained a new Congressional seat, the map for Congress saw major shake-ups. 2 seats currently held by pro-abortion Democrats have been moved into the Likely Republican column, according to the *Cook Political Report*. Both are open seats in 2022 after one Democrat opted not to run and the other decided to run for governor instead. These are Florida's 7th District where pro-life Republican Corey Mills won Tuesday's Republican primary and will face pro-abortion Democrat Karen Green, and Florida's 13th District where pro-life Republican Anna Paulina Luna will face pro-abortion Democrat Eric Lynn.

Republicans are looking to hold onto the 15th and 27th Districts, which also land in

abortion Democrat Alan Cohn in the general election. In the 27th District, pro-life Congresswoman María Elvira Salazar (R) will have to defeat pro-abortion Democrat Annette Taddeo in order to secure a second term. Taddeo is backed by EMILY's List, the radical DC-based fundraising giant that supplies campaign funds to female Democratic candidates who share their support for abortion without limits.

## New York Congressional Primaries and Special Elections

On August 23rd, New Yorkers, who in June selected their nominees for U.S. Senate, Governor, and State Assembly, returned to the polls for Congressional and state Senate primaries after the courts tossed out egregiously gerrymandered maps devised by partisan Democrats for those offices.

*See "Recap," page 25*

# Indiana Attorney General Rokita successfully defends law requiring reporting of abortion complications

*Dismissal of lawsuit is fifth pro-life win since U.S. Supreme Court overturned Roe v. Wade*

Attorney General Todd Rokita has won the dismissal of a lawsuit challenging an Indiana law requiring physicians, hospitals and abortion clinics to report 25 listed abortion complications to the Indiana Department of Health.

“We are making strong and steady progress in protecting women’s health and safeguarding unborn children,” Attorney General Rokita said. “Day by day, we are building a culture that respects the lives and well-being of all Hoosiers.”

Planned Parenthood’s patients historically have been able to choose from two different methods of first-trimester abortion — chemical (medication) abortion and surgical abortion by aspiration (suction). Both methods have

caused serious complications at times.

Chemical abortions can result in infection, excessive vaginal



*Indiana Attorney General  
Todd Rokita  
Twitter photo*

bleeding, failure to terminate the pregnancy and incomplete abortion. Complications of aspiration abortion may

include uterine perforation, cervical laceration, infection, excessive vaginal bleeding, pulmonary embolism, deep vein thrombosis, cardiac arrest, respiratory arrest, renal failure, shock, amniotic fluid embolism and coma.

In some cases, both methods of abortion have even resulted in women’s deaths.

“The legislature had a legitimate concern that researchers have insufficient data available to study the safety of abortion,” Attorney General Rokita said. “This law advances the causes of compassion, common sense, medical science and public health.”

Planned Parenthood first challenged the law requiring reporting of complications in 2018. They won at the district-court level, but Indiana then

won in appellate court. Most recently, Planned Parenthood renewed the challenge at the district-court level based on a different legal argument.

Previously, Indiana also won a final judgment on another aspect of the same lawsuit — a challenge to the state’s requirement for annual inspections of abortion clinics.

“I am grateful to our team for their persistence over many years in defending good laws protecting the sanctity of life and the health of women,” Attorney General Rokita said. “We will keep pressing onward in this important work.”

The dismissal of this lawsuit represents Attorney General Rokita’s fifth legal victory on behalf of Indiana’s pro-life laws since the U.S. Supreme Court overturned *Roe v. Wade*.

## Parents receiving a prenatal diagnosis need extra support. Here’s how you can help

*From page 17*

Dr. Elizabeth Nelson, MD, reflected:

**This training provided an excellent perspective including trauma-informed care with the diagnosis and providing continuing support and advocacy throughout the pregnancy. Carrying a pregnancy with a life-limiting diagnosis is ultimately better for the mother’s health. Additional materials were provided to be read after the in-person training. This training is the beginning of the journey!**

Tretinyak of Vida shared, “We feel blessed to participate in this training and are excited

about the possibility of being fully equipped and supported by a national organization to love and serve these families well!”

### National collaboration

BNA has partnered with Heartbeat International, CLI Her Plan, the National Catholic Bioethics Center, the American Association of Pro-life OBGYNS, the American College of Pediatricians, String of Pearls, and Sidewalk Advocates for Life to raise awareness about the new PCC program. Heartbeat International, the CLI, and HerPlan will assist with making patient/family referrals to local Parent Care Coordinators. These collaborations with national organizations will help funnel families in need to

PCCs.

Many more PCCs are needed to serve families for the duration, starting after they receive an emotionally overwhelming diagnosis and continuing as they learn a whole new medical vocabulary to understand the prognosis, and then through birth and whatever follows. In many cases, Winsor noted that the PCCs will make referrals to supportive healthcare professionals, but she stressed that even if a family continues under the care of an unsupportive doctor, etc., “the service can be a success,” since “trauma-informed care is really about the connection and relationship between the parents and the PCC.” Winsor gave the examples of Ohio, Pennsylvania, and Virginia as states where organizations

willing to develop a PCC service are still very much needed.

### Call to Action

If you’re currently affiliated with a pregnancy care center or religious organization, contact Be Not Afraid about sending a representative to a Parent Care Coordinator training day. If you’re a healthcare professional, reach out to them to serve as a local provider. Medical professional-specific training is planned for 2023. And if you’re a concerned pro-lifer, ensure that your local pregnancy center or church knows about this new PCC program.

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

# Guest Column: ‘The First Civil Right Is The Right To Life’

*“Without the right to life, there are no other rights.”*

By Holly Gatling

*Editor’s note. Holly is executive director of South Carolina Citizens for Life. This guest column appeared at fitsnews.com.*

For the first twenty years of my professional life, I was a daily newspaper reporter covering heinous crimes, shocking criminal trials, and many civil cases of public interest. As most reporters do – or did back then – I developed a Teflon shell around my emotions so that I could look at and smell murder victims covered with maggots and decaying in shallow graves. I’ve seen crime scene and accident photos that were beyond troubling to someone outside of law enforcement, forensic pathology, or the emergency room of most hospitals.

My Teflon shell did its job protecting me from reacting emotionally to the grizzly and gruesome facts of life – until one day in the early 1980’s someone showed me a photograph of an aborted baby. I was stunned and horrified. Without doubt, this was a dead human baby savagely dismembered, and it wasn’t a crime. My Teflon shell cracked wide open.

Flashback to my childhood when the Civil Rights era was the news of the day. I remember being deeply, emotionally impacted by photographs of American slaves whose bodies were scarred from beatings, dismemberment, and inhuman abuse. Another was of a dead black man with a rope around his neck swinging from a tree while the lynch mob below looked on with demonic satisfaction.

I remember photos of the Klan burning crosses, and I learned a

protest song I played over and over on my ukulele. It began, “The countryside was cold and still. There stood across upon the hill. This cold cross bore a burning hood to hide its rotten heart of wood.”

Then there was the profoundly disturbing news coverage of violent police action against Dr. Martin Luther King Jr. and the peaceful Civil Rights protests to end the wrong of segregation.

I was raised knowing slavery was wrong. My maternal great-grandfather fought for the Union Army, and I have to this day the tiny diamond engagement ring he gave my great-grandmother. I knew segregation was wrong because my parents were working side-by-side with black leaders for peaceful integration of Columbia, S.C., schools, churches, and places of business. My high school, Dreher High, was one of the first public schools in South Carolina to integrate in 1964. My personality for justice and right was firmly set when I was 14 years old.

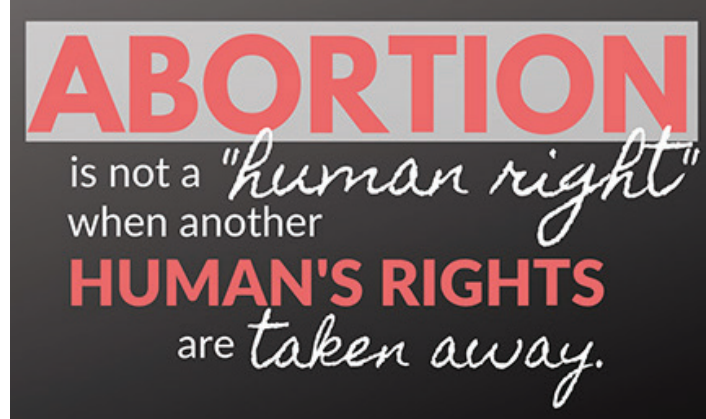
Now fast forward to that day I first saw the picture of an aborted baby. It seared my conscience in the same way that pictures of abused slaves, and lynch mobs, and vicious dogs attacking peaceful Civil Rights protestors affected me as I was growing up. “This. Is. Wrong.”

I remember staring at the bloody, chopped up remains of a baby and saying to myself, “Why doesn’t somebody do something about this?” I thought the news media surely would spring into action and correct the injustice, just as it had in the Civil Rights era. I quickly learned that I was

terribly mistaken. The news media was part of the problem. The secular news media was promoting abortion as a social good, just as it had defended slavery upheld in 1857 by the U.S. Supreme Court 7-2

for any reason or no reason at all.

Our agenda has been to pass every life-protecting law we can pass to save every life we can save until the U.S. Supreme Court overturns *Roe*. That long-



decision known as *Dred Scott*. (The court has never reversed its decision).

After five years of discernment, including 30 months in a Benedictine monastery nestled in the Sangre De Christo Mountain Range in Northern New Mexico, the answer was clear. I needed to answer my own clarion call. The opportunity presented itself in 1993, and I’ve been the executive director of South Carolina Citizens for Life since then.

Why South Carolina Citizens for Life? We are the state affiliate of the National Right to Life Committee, the nation’s oldest and largest single issue pro-life organization. We were organized with the express purpose of restoring legal protection to the unborn members of our human family whose right to life was demolished by the lethal 1973 *Roe v. Wade* and *Doe v. Bolton* decisions. Taken together, these two 7-2 opinions legalized abortion on demand through all nine months of pregnancy and

awaited day happened on June 24, 2022, and now the new era of our right-to-life work begins. We will work to pass the Human Life Protection Act (H. 5399) that protects the right to life of unborn members of our human family at every stage of development and equally protects the lives of pregnant women.

I welcome thoughtful, informed dialogue about the right to life of all human beings. Abortion is a real war with a real body count. More than 63 million lives lost since 1973 equals more casualties than from every war since 1775. Abortion is malignant racism. In South Carolina African Americans make up 28 percent of the population yet 44 percent of abortions occurring in our state are black babies. I call that genocide.

My upbringing in the Civil Rights era now has come full circle. The SCCL motto is, “The First Civil Right is the Right to Life.” Without the right to life, there are no other rights.



I  
Stand  
for  
life

# Pro-aborts insist “when human life begins” is still unsettled

By Dave Andrusko

The more pro-lifers are victorious—see the *Dobbs* decision overturning *Roe*—the more pro-abortionists are intent on revisiting topics that are already long since settled.

So we get stories from the reliable pro-abortion *National Public Radio* with the headline “When does life begin? As state laws define it, science, politics and religion clash.”

Sarah Varney uses a familiar tactic. Argue that since the definition of death is now (“more or less”) settled, then we ask “when exactly does human life begin? At conception, the hint of a heartbeat, a first breath, the ability to survive outside the womb with the help of the latest technology?”

Notice how Varney repackages the question. For the moment skip the last nine words:

**Unlike the debate over death, which delved into exquisite medical and scientific detail, the legislative scramble to determine when life’s building blocks reach a threshold that warrants government protection as human life has generally ignored the input of mainstream medical professionals.**

Later

**Medical professionals and bioethicists caution that both the beginning and end of life are complicated biological processes that are not**

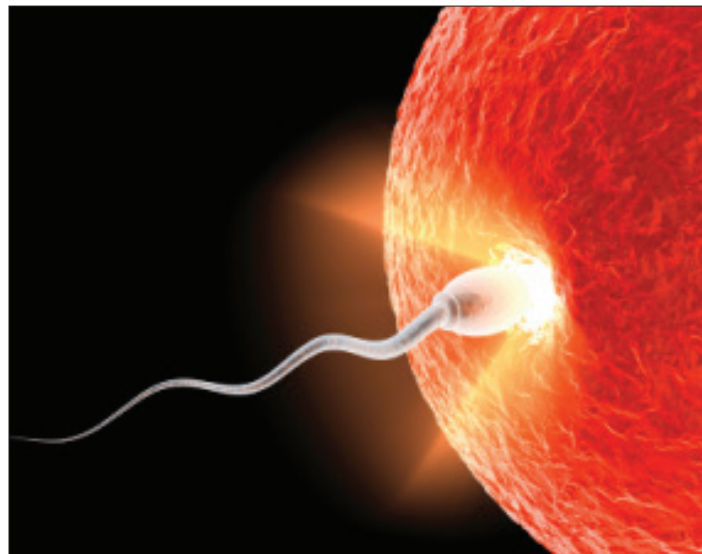
**defined by a single identifiable moment — and are ill suited to the political arena.**

**“Unfortunately, biological occurrences are not events, they are processes,” said David Magnus, director of the Stanford Center for Biomedical Ethics.**

**Moreover, asking doctors “What is**

Sonia Sotomayor. She was referring to the pro-life view. The implication was probably that, because it’s religious, this view shouldn’t be reflected in our law, Paul Stark observed.

**Yet the pro-life position is about justice, not faith or dogma. Opposition to killing unborn humans is no more inherently “religious”**



**life?” or “What is life?” or “What is death?” may miss the point, said Magnus: “Medicine can answer the question ‘When does a biological organism cease to exist?’ But they can’t answer the question ‘When does a person begin or end?’ because those are metaphysical issues.”**

During the oral arguments over *Dobbs*, “That’s a religious view, isn’t it?” asked Justice

**than opposition to killing teenagers. Such opposition is supported by empirical science, which shows that embryos and fetuses are living members of our species, and by the principle that all human beings have human rights.**

Secular pro-life comes to the same conclusion. “The human zygote is the first developmental stage in a human life cycle,” Monica Snyder.

**In the abortion debate, people treat this statement as if it were a belief, rather than a fact. They seem to assume the demarcation of the zygote as a human’s beginning is just one belief of many, brought up only to support an anti-abortion agenda.**

**But pro-lifers didn’t invent the idea that the zygote is the start; we’re merely acknowledging that already existing reality. And I notice that whenever biology comes up outside of the abortion debate, science communicators readily acknowledge this basic biological fact too.**

Varney smuggles in the question of personhood, which is a hugely important but separate issue. And she takes some shots at states whose laws she doesn’t approve of:

**“[R]ed states across much of the South and portions of the Midwest are adopting language drafted by elected officials that is informed by conservative Christian doctrine, often with little scientific underpinning.**

Varney to the contrary notwithstanding, the case for when the life of an individual human being begins is settled.

# Pregnancy help should never be controversial

By Jor-El Godsey

Life-affirming pregnancy help should not be controversial. Helping women embrace the motherhood in which they find themselves however they arrived there is something everyone should be able to support.

This used to be a value our entire culture supported.

Certainly, medicine did for more than a millennium. We can see the evidence of this in the Hippocratic Oath. The “Father of medicine” Hippocrates, 400 years before Christ, established his work under spiritual direction (his was “Apollo the physician, and Aesculapius the surgeon, likewise Hygeia and Panacea”). In so doing he incorporated the physician, patient, and Providence. And he included the statement, “I will not give to a woman a pessary to produce abortion.”

In 1964 Dr. Louis Lasagna, Academic Dean at Tufts University School of Medicine, rewrote the Hippocratic Oath into what is called the “modern or revised” Hippocratic Oath. In it the references to any god or gods are removed reducing the Oath to only the physician and patient. The new “modern” version also removed the Hippocrates prohibition of providing abortion to women.

This is among the first evidences of the “abortion distortion” that has become part of our cultural, political, and societal narratives.

Such intentional revisionism in our national institutions is now evidenced in mainstream media decisive declarations

about the loss of a “right” to abortion.

In its way, this is the very dynamic our country experienced in the early 1800s. As slavery became less and less tolerable in Free States, it was even more important for Slave States to create laws



that protected slavery, slave owners, and slaves as property. The latter often allowed slaves who escaped their masters to be returned to their “owners.”

Today we see the fruit of abortion distortion manifesting in Abortion States making laws to protect abortion, abortionists, and even the profiteering practice across state lines.

In the wake of the leak of the impending decision on Dobbs (in May), angry abortion activists not only took to the

steps of the Supreme Court but also immediately attacked churches and pregnancy help centers. This only continued after the official ruling was handed down June 24.

Politicians supported by Big Abortion campaign contributions have also begun

while championing motherhood is maligned.

The people of God, though, understand the Gospel of Life – and the spiritual attack against it, which dates all the way back to the garden.

In our role of leadership in pregnancy help organizations

lashing out at pregnancy help centers, abortion pill reversal and anything else that dares to be an antidote to abortion.

Loving and supporting a woman in her unexpected pregnancy should not be controversial. Yet, somehow, the abortion distortion has made it so.

Controversy does not dissuade the people of God. After all, we know that crosses and creches are controversial. Ignoring biology is de rigeur,

we know that our call is to continue even in the face of controversy. We are both appointed and anointed to champion the Gift of Life. God promises us the wisdom to advance His Kingdom even against the god of this world.

*Editor's note: This article is a lightly edited version of a column produced for pregnancy help leaders. Heartbeat International manages Pregnancy Help News. Reposted with permission.*



# How the Summer Gives Us Hope This Fall

Eleni Mastronardi, NRL Conventions Assistant

As a child in school, the first day always had the teacher asking, “What was your favorite part of the summer?” or “What was one fun thing you did over the summer?” And even though I have been out of school for quite some time, it is still helpful to look back, reflect, and evaluate.

months, I was relieved that it was finally time to put all the hard work to use and throw the event.

But I was also excited with the anticipation that whatever the ruling, the *Dobbs v. Jackson Women’s Health* case would be decided some time within the next few weeks.

Convention with the Prayer Breakfast on Friday morning, June 24, and then as our next session got started, we were all watching for the Supreme Court decisions coming out. When *Dobbs* was released, it was a whirlwind, and by the end of the weekend, I left Atlanta thankful for a great convention,

more to come this fall.

In some states, depending on the laws that went into effect after *Dobbs*, pregnancy centers have seen a great increase in women seeking alternatives to abortion and assistance in getting needed resources for their children, and they have been finding hope. Churches and community groups have had more women and families to serve.

In my state, nothing has changed. But our local pregnancy centers continue to provide better options for pregnant mothers and healing for others.

And in many of the states, there is great optimism for the fall elections, where more pro-life leaders have hope of being elected, and will have the opportunity to speak up for their constituents, both the born and preborn.

So even though the crazy summer is over, it doesn’t mean that the work doesn’t continue, and that there isn’t more excitement to come. The fall is just the next step, the next battle to save lives.

*For more information on the annual convention, go to [nrlconvention.com](http://nrlconvention.com).*

*To help in our efforts to elect pro-life leaders this fall, go to [nrlvictoryfund.org/donate](http://nrlvictoryfund.org/donate) or [donate.nrlc.org](http://donate.nrlc.org).*



My summer began with flying down to Atlanta, Georgia to prepare for the annual National Right to Life Convention in June. Having prepared for the convention for the previous six

And at the same time I was nervous, as more attacks on pro-life groups and pregnancy resource centers were being reported.

As we kicked off the

and uplifted by the decision and what it means for our future.

But it doesn’t end there.

The summer was encouraging and exciting, but the trajectory shows that there is so much

# Against all odds, may every pregnant mother have the opportunity to hear her child's laughter

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

It was the laughter that struck me. The unmistakable sound of children's laughter, coming from somewhere outside my apartment. The giggles were a refreshing escape from the monotony of the day, and they instantaneously made me smile.

It is for them that advocates for life struggle against tremendous odds. Despite pro-abortion forces in Washington, D.C. and our state capitols, we stand ready to constantly defend the rights of those precious children to breathe, to play, and to laugh.

Abortion forever silences that laughter, that childlike wonder, that hope. It eliminates a wondrous, irreplaceable human being and leaves a mother to mourn her lost child. It deprives Dads of the noble calling of fatherhood, and leaves grandparents without their precious offspring.

And so we press on, knowing that our cause is just and that there are so many people depending on us. The giants of the tech industry may try to silence us. But truth and justice will eventually win out.

We will not rest until every single child is welcomed in life and protected under the law. We will work diligently and enthusiastically at the state and federal level for common sense protections for preborn babies and their mothers.

Ours is a movement of hope and of love. We hope for a world

in which abortion is unthinkable. We love both mother and child, bringing comfort in what can seem like a world of despair... and may every child be given the chance to live and laugh in freedom and in peace.



## Pro-Life Recap: Primaries, Special Elections, and Runoffs in Florida, New York, and Oklahoma

*From page 18*

The new, fairer maps leave little doubt that there will be several highly contested races in the Empire State this November.

New York also held two special elections for Congress in which the victors will immediately fill vacancies on Capitol Hill and serve until candidates are elected in November to serve the full two-year terms. In the special election in the 19th District, following the resignation of pro-abortion Congressman Antonio Delgado (D), pro-abortion Democrat Pat Ryan defeated Republican Marc Molinaro, keeping the seat blue. In the special election in the 23rd District, which was previously held by a Republican, National Right to Life-endorsed Joe Sempolinski (R) was victorious over pro-abortion Democrat Max Della Pia.

According to the *Cook Political Report*, in the Tossup column for the November

election are New York's 3rd, 19th and 22nd Congressional Districts. For the open seat in the 3rd District, pro-life Republican George Devolder-Santos, who came close to winning a Congressional seat in 2020, is up against pro-abortion Democrat Robert Zimmerman, who supports a policy of abortion on demand for any reason and would use taxpayer dollars to pay for it. In the 19th District, Republican Marc Molinaro, who also ran in the special election, won the Republican nomination for the general election, and he will face pro-abortion Democrat Josh Riley in November. In the 22nd District, pro-life businessman Brandon Williams won the Republican nomination. He will face pro-abortion Democrat Francis Conole, who supports a policy of abortion on demand for any reason and would use taxpayer dollars to fund abortion

providers.

New York's 17th and 18th Congressional Districts are considered Leans Democratic by the Cook Political Report. In the 17th District, pro-abortion Democrat Sean Patrick Maloney, who serves as the chair of the Democratic Congressional Campaign Committee, is in a tight race against Republican Assemblyman Michael Lawler. In the 18th District, pro-life Republican Colin Schmitt won his party's nomination and will take on now-Congressman-elect Pat Ryan (D), who supports a policy of abortion on demand for any reason.

In New York's 1st District, which is considered Leans Republican by *Cook*, pro-life Republican Nick LaLota, a Navy veteran and local government leader, will face pro-abortion Democrat Bridget Fleming in the general election. Fleming is endorsed by EMILY's List, the

radical DC-based fundraising giant that supplies campaign funds to female Democratic candidates who share their support for abortion without limits.

### Oklahoma Senate Primary Runoffs

In Oklahoma, pro-life Congressman Markwayne Mullin, who holds a 100% rating with National Right to Life, won the Republican primary runoff election for U.S. Senate over pro-life former Oklahoma Speaker of the House T.W. Shannon. Mullin will face pro-abortion Democrat Kendra Horn, a former Congresswoman, in November. The winner will serve the remaining four years of the term won by pro-life Senator Jim Inhofe (R) in 2020. Inhofe, who is 87 years old, announced last summer that he would retire at the conclusion of the 117th Congress.

# What does the future hold for the disabled when euthanasia is legal?

By Michael Cook

As the cartoon above suggests, disability activists fear that euthanasia could become a cheaper option for medical care. In a position paper published by the Anscombe Bioethics Centre, in the UK, a Canadian expert in disability studies contends that “While the expansion of [euthanasia and assisted suicide] has been motivated by a desire to end suffering and respect autonomy, in doing so we have created significant risk to disabled persons in a world which largely sees their lives as less valuable, as ones of inevitable suffering and as not worth living.”

Professor Tim Stainton, director of the Canadian Institute for Inclusion and Citizenship, believes that a “quiet eugenics” becomes more acceptable when euthanasia and assisted suicide (EAS) have been legalised. In many countries, children with Down syndrome are already being aborted after pre-natal testing. In Belgium and the Netherlands, neonatal euthanasia is technically illegal but permitted in some circumstance.

Professor Stainton says that “Significant numbers of these cases involve neonates with non-life threatening, medically treatable conditions and disabilities.”

He cites studies of the ableist attitudes in the medical profession. One recent survey found that 82% of practicing physicians in the US believed

that “people with significant disability have worse quality of life than non-disabled people”. This makes “unbiased practice of EAS with regards to

an ableist bias are unable to appreciate that.

To return to the message of the cartoon, Professor Stainton writes that “A key concern of

that broad public support for “mercy killings” will create a climate in which parents will be able to have disabled children euthanised. “It is also



*Created by Amy Hasbrouck, a Board Member of Not Dead Yet in the US, and Director of Toujours Vivant-Not Dead Yet, a project of the Council of Canadians with Disabilities*

disabled individuals ... highly questionable,” he writes.

Attitudes towards the disabled ignore what scholars called “the disability paradox” – that “many with persistent and serious disabilities report that they experience anywhere between a good to an excellent quality of life”. But people with

the disability community is that people will seek access to EAS because they are unable to secure the degree or types of disability supports and accommodations they need to live a full and meaningful life.”

What does the future hold for the disabled in countries with EAS? Professor Stainton fears

not inconceivable that families with decision-making control or influence will choose EAS for their children when faced with insurmountable barriers to securing appropriate supports.”

*Editor’s note. This appears at Bioedge and is reposted with permission.*

# Massive support, including funding, for Pregnancy Help Centers, poll reveals

By Dave Andrusko

Boy, is **this** going to set off pro-abortion Sen. Elizabeth Warren (D-Mass). As many of you know, Sen. Warren said of Pregnancy Resource Centers, “We need to shut ‘em down here in Massachusetts, and we need to shut ‘em down all around the country.”

On August 23, adding fuel to the incendiary attacks, Minnesota Attorney General Keith Ellison (D) issued a “consumer alert” warning women not to visit pregnancy centers based on findings in a biased report from pro-abortion groups.

But according to an August 3 to August 7 poll conducted by the Creative Response Concepts (CRC) Research, 64% not only don’t want to shut them down, they also support public funding of pregnancy help centers.

The figure jumps to “74% of respondents from across the political spectrum who “strongly support or somewhat support publicly funding these centers after learning what

services the centers provide.”

The survey of 1,600 likely voters informed respondents that pregnancy resource centers “provide resources for pregnant women in

keep their baby and give them the tools to achieve success and independence,” Ryan Foley reported.

Eighty percent support the prosecution of protesters who



need, including prenatal care, clothing, diapers, [and] housing assistance,” “empower women to choose life for their child during pregnancy and after delivery,” “allow women to reach their goals and keep their baby” and “allow women facing unexpected pregnancies to

“[engage] in acts of vandalism and violence against pregnancy resource centers and churches,” Samantha Renck wrote.

“The respondents also overwhelmingly agreed that ‘elected officials should publicly denounce this behavior and call for those engaging in it be brought to justice.’”

**The poll asked respondents if they are more or less likely to support “a candidate who supports legislation that publicly funds pregnancy centers.” Sixty-seven percent of participants classified themselves as “more likely” to vote for candidates who support the public funding of pro-life pregnancy centers. Thirty-one percent said they were “much more likely” and 35% “somewhat more likely” to do so.**

“Local pregnancy center support comes from concerned, pro-life Republicans, independents, and Democrats, who all agree that women should have help with life-affirming alternatives to abortion,” Jor-El Godsey, the president of Heartbeat International, told *The Daily Signal* in a statement.

# Board of State Canvassers place pro-abortion proposal on fall ballot following directive from Michigan Supreme Court

By Dave Andrusko

Two days after Court Claims Judge Elizabeth Gleicher ruled that the 1931 law banning almost all abortions would violate the Michigan Constitution, the Board of State Canvassers placed a pro-abortion amendment on the fall ballot as directed by the Michigan Supreme Court. Previously Judge Gleicher had issued a preliminary injunction while the board deadlocked 2-2.

According to Citizens to Support MI Women and Children, the coalition opposing the amendment, the proposed amendment would legalize abortion through all nine months of pregnancy and allow anyone, including people without any medical training, to “assist” with an abortion.

“It’s actually kind of incredulous that Judge Gleicher would try and do this again,” said Genevieve Marnon, Legislative Director of Right to Life of Michigan. “I mean the court of appeals just ruled that she does not have the authority to bind the county prosecutors and here she is just over a month later trying it again. I’m guessing that one of the prosecutors will file an appeal and or the

legislature who was also a party to the case will file an appeal.”

Marnon added, “I hope that this Judge Gleicher rogue decision is swiftly dealt with because we don’t need judges running around invalidating duly elected laws. ...She’s not the governor, she doesn’t have veto power, and we shouldn’t hand over the power to one judge to strike laws that have been upheld in the past.”

Right to Life of Michigan further explained

**There’s nothing in the Michigan Constitution that mentions abortion. Gleicher knows this because she lost at the Court of Appeals in 1997 when she asked them to create a right to abortion; they obviously said “no” because it doesn’t exist.**

**Democracy is not judges inventing laws.**

But the state Supreme Court, on a 5-2 vote, strongly backed Judge Gleicher, who is a frequent contributor to Planned Parenthood.

“The Michigan Supreme Court’s emergency ruling overrides last week’s party-line tie vote by the Board of State

Canvassers, which blocked the certification of the proposed constitutional amendment,” POLITICO reported.

Approximately 425,000 signatures were required to qualify the amendment.

abortion. “Abortion is essential healthcare, and this order ensures access to reproductive care for all Michigan women,” Nessel said.

“Today, the courts have ruled once again that Michigan



While supporters easily met that requirement, “The two Republicans on that panel sided with conservative groups that argued spacing and formatting errors on the text canvassers presented to voters rendered the entire effort invalid.”

Both Gov. Gretchen Whitmer and Attorney General Dana Nessel are strong supporters of

women have the right to make medical decisions with their health care provider and those they trust,” Whitmer said. “I have been fighting like hell to protect reproductive freedom in Michigan for months and am grateful for today’s lower court ruling declaring our extreme 1931 abortion law unconstitutional.”

# Record Revenues, Abortions at Planned Parenthood during Pandemic

*From page 1*

Planned Parenthood was able to achieve this during a pandemic and at a time when sales of many of its traditional services were tanking. More than ever this speaks to their reliance on and promotion of the product probably now most closely associated with its brand – abortion.

## **Making the most of the COVID crisis**

With Guttmacher releasing a national abortion figure earlier this year of 930,160 abortions for 2020, Planned Parenthood's new record of 383,460 abortions now makes it responsible for more than 41% of all abortions performed each year in the U.S.

Perhaps even more shocking is that PPFA's achievement of this new record coincided with the COVID-19 pandemic which hit right at the beginning of 2020. This means many of those abortions occurred either right before or right in the middle of the nation-wide shut-downs.

PPFA hints that it was the latter, saying that Planned Parenthood was “proud to provide abortion” and that that had “never been more true than during the COVID-19 pandemic.” Recall the language of the debate earlier on during the pandemic about which medical procedures and services stressed and stretched doctors and nurses? And how overwhelmed health care facilities needed conserve precious space and resources for only those services and procedures which were absolutely necessary? Planned Parenthood declares that “Abortion is essential care than cannot wait until the end of a pandemic or the whims of politicians.”

For good measure, PPFA notes that during the first six months of 2021, its health centers administered 13,105 COVID-19 vaccinations. For a group that claims to have seen 2.16 million patients for the past service year and regularly reports seeing more than two million patients a year, the represents less than one percent of the population of patients Planned Parenthood purports to serve.

While clearly the source of abortion for that patient population, Planned Parenthood is not really their source of health care.

## **Abortion thrives, other services suffer during the pandemic**

PPFA's record number of abortions during the pandemic is all the more remarkable when compared to other services where Planned Parenthood saw significant declines. While abortions performed by Planned Parenthood rose by 28,589 from 2019 to 2020, a full 8%, “cancer screenings” provided PPFA clinics dropped more than 30%.

In very practical terms, this demonstrates that while Planned Parenthood clinics made sure to keep their doors open and their personnel open for abortions, they didn't put forth as effective an effort in offering actual life-saving services like cancer screenings.

If any service can be called Planned Parenthood's “signature service,” it is birth control. Yet PPFA's annual report says contraception fell by 14.5% from 2019 to 2020, from about 2.6 million a year to nearly 2.2 million.

Actually, services like contraception and cancer screenings have been falling

for years. But one thing the pandemic made starkly clear is that Planned Parenthood's commitment is not so much to women's reproductive or sexual health as it is to abortion.

## **Loose ends – abortion research, litigation, and racial equity**

In its report, PPFA is anxious to talk about the research in which the group is involved. It touts that 30 of its affiliates participated in 75 studies on different topics including new tests and treatments for sexually transmitted infections, new methods of contraception, “gender affirming care,” and telehealth. But, of course, “abortion care” heads the list, with the only research described in any detail being the “Minimal Contact Medication Abortion Study,” whereby patients were to receive “medication abortion care” [presumably the abortion pills mifepristone and misoprostol] “through telehealth with no and reduced testing before the abortion.”<sup>1</sup>

PPFA wants people to know that the organization, through its legal team, challenged 40 laws and policies in 21 states that “threatened access to sexual and reproductive health.” Detailing what they had in mind, Planned Parenthood talks about challenging Arkansas' “near total abortion ban” and South Carolina's “6 week abortion ban,” as well as “medically unnecessary restrictions” on chemical abortions in Indiana, Ohio, and Tennessee.

With little or no sense of irony or honesty about its own recent internal racial strife, Planned Parenthood's leaders talk about how “equity” is at the heart of their work on health care “access.” It is in the

name of “reproductive health rights, and justice,” that they joined with “The Foundation for a Better Future” in issuing a budget proposal to “end the discriminatory and racist Hyde, Weldon, and Helms amendments to expand access to abortion for people with low incomes.”

Just to be clear. In the name of “equity” and “justice,” Planned Parenthood proposes that the government fund abortions (with, obviously, much of that money flowing through PPFA clinics) to minorities. Black communities, in particular, already devastated by high abortion rates, are expected to be the special object of Planned Parenthood's concern, where sometimes more than half of African American children are aborted (Politifact, 11/25/15).

We don't know why Planned Parenthood's annual report was several months late. Was it still working through internal debates over structural racism in the organization and Margaret Sanger's racial and eugenic legacy? Too busy counting all the cash that came in from abortion during COVID? Too heavily involved in planning how to help its clinics and affiliates figure out how to stay open and profitably operate in a Post-Roe environment?

We may never know. But one thing we know for sure – the abortion empire didn't crumble during COVID. Death has always been a big money maker for Planned Parenthood.

<sup>1</sup>Those wishing to understand why chemical abortions performed this way are so dangerous are welcome to read about them here [www.nrlc.org/uploads/factsheets/RUSafetyEfficacyFS.pdf/

# Why Abortion Pill Reversal so Enrages the Abortion Industry

By Dave Andrusko

It stands to reason that at the same time pro-abortionists insist that any and all abortions are safe, safe, and safe that they would dismiss any and all alternatives to abortion as “unproven and unethical,” would “hogtie doctors into violating their Hippocratic oaths and misinforming women” and “basically garbage.”

Those are just a few of the slanderous comments about Abortion Pill Reversal that Kate Knibbs offers up herself or are quotes given to her by the most prominent critics of APR. Her piece in *Wired* is a wonder to behold.

Check this out.

**The first time I heard about it, I didn't understand why abortion pill reversal was a flashpoint in this culture war. It sounds like the rare thing pro-choice and antiabortion people could wholeheartedly agree on, a choice to not have an abortion. Win, win. It sounded pretty straightforward, too: Medication abortion, which is now the predominant method of terminating a pregnancy in the United States, usually uses two pills. The first, mifepristone, blocks progesterone, a hormone necessary for pregnancy. The second pill, misoprostol, is usually taken one or two days after the first. It causes the uterus to contract, triggering a deliberate miscarriage.**

**In an abortion pill reversal, if someone begins an abortion by taking the mifepristone and then changes their mind, they are given a course of progesterone as soon as possible, in order to counteract the mifepristone's effects in the hopes of halting the abortion process. The reversal process is aimed at an extremely specific type of patient: someone who has decided to begin a medication abortion and who has taken the first pill but not the second.**

Well... yes. But that was before she learned at the feet of pro-abortionists such as American College of Obstetricians and Gynecologists (ACOG), Mitchell Creinin, and Daniel Grossman, the trio of individuals and organizations that APR is, at best, ineffective, and worse dangerous.

Mind you for someone, like Knibbs, who insists there is no reliable data that APR is effective, it is ironic that she offers no evidence that APR is a danger to pregnant women.

For example, according to an article in the August 20 edition of *POLITICO*, ACOG—“the nation's leading organization of reproductive health clinicians”—

**has said the reversal treatment is not supported by science and can cause dangerous hemorrhaging. And a 2019 trial evaluating abortion**

**reversal treatment with progesterone ended early due to three participants experiencing high**



**levels of internal bleeding.**

NRLC's Randall K. O'Bannon has debunked this study on numerous occasions. But confident that they'll be never be called to task, pro-abortionists again and again trot out the 2019 study as definitive “proof” that APR not only doesn't work but is dangerous.

However if you plow through the entire *POLITICO* story you find there really are “remedies” that risk women's lives and health. Only they are from pro-abortionists!

**Overall, the largest platforms have removed more content related to potentially dangerous herbal treatments from abortion rights groups, and less content about abortion reversal treatments from anti-abortion groups, said Jenna Sherman, a program manager at Meedan's**

**Digital Health Lab, a global tech non-profit focused on health misinformation research.**

**“It's good that any posts about natural remedies for abortion are being regulated, but it's concerning that they're being overly regulated in comparison to anti-choice rhetoric, which is also very harmful,” she said.**

Right. Sure. Of course.

The abortion industry will palm off its usual list of lies. What else is new?

Back to Knibbs. “Nobody is saying that if there is a safe way to offer abortion pill reversal, that it shouldn't be offered, even if demand is exceedingly scant.” Her point—her message—is that pro-lifers are trying to embed the notion that women may regret their abortions by using the few women who use APR to save their babies to prove their point.

See “Enrages,” page 34

## Vice President Harris lay out radical proposals pro-abortion Democrats would pass if they gain additional seats in the Senate

*From page 2*

Of course, it would be Armageddon if Republicans prevailed: **“Without a Democratic majority in Congress, who knows what other rights they will come after,” Harris questioned. “Now, imagine a better future. Imagine what we can do if we defend the five seats we need to hold onto the majority in the House. Imagine what we can do if we protect, and better yet, expand our majority in the Senate. Imagine.**

She wasn't through. The following day, appearing on *Meet the Press*, moderator Chuck Todd asked “Do you believe the government should put any limit on abortion?”

Harris responded, “I believe government should not be telling women what to do with their bodies. I believe government should not be telling women how to plan their families.”

But ending the filibuster, “codifying *Roe v. Wade*” (in reality this would go way beyond what was permissible under *Roe*) are just two of the many ways pro-abortionists like Harris and Biden would lower the hammer on pro-lifers and unborn babies. Democrats have already introduced legislation to expand the Supreme Court from nine members to 13 members. And there is the genuinely radical (and wholly misleading) “Women’s Health Protection Act.”

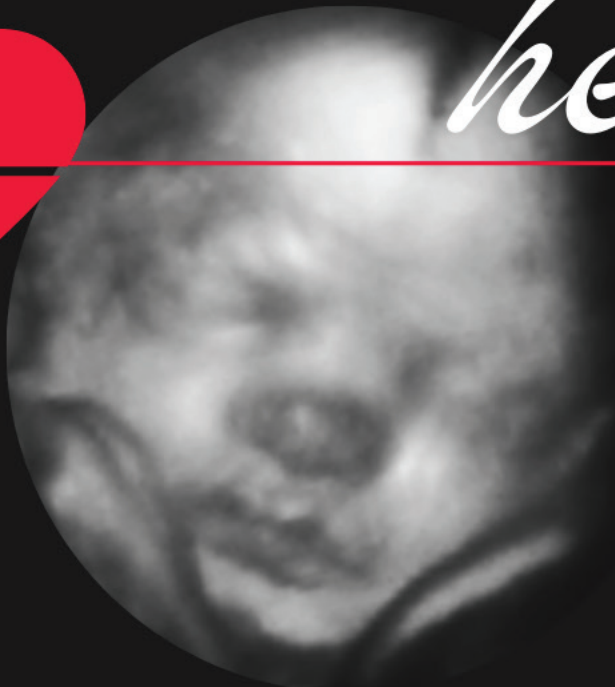
And that’s for starters.

The stakes could not be higher on November 8.

# ABORTION STOPS A BEATING



*heart*





# Why Are Journalists Hiding These Radical Democrats Who Support Abortion Up Until Birth?

By Scott Whitlock

In the month of August, Joe Biden's approval rating climbed back into the low 40s and the Democrat/Republican congressional preference poll closed to a statistical tie. The liberal network newscasts are eager to promote a new narrative: Democrats are making a comeback in the midterms and it's all because Republicans are extreme on abortion.

CBS, CNN, and other outlets have pushed the idea of a "flashpoint" over supposedly rigid Republicans holding outrageously severe positions on abortion. But Democrats in Congress this summer supported legislation that would dismantle most, if not all, restrictions.

Additionally, Democratic senatorial and gubernatorial candidates hold radical views on the issue, supporting abortion right up until birth. Only 34 percent of Americans support abortion in the second trimester and just 19 percent in the third. So this position is the definition of extreme.

Yet you wouldn't know that by watching the networks. MRC's *NewsBusters* analysts looked at the morning and evening newscasts on ABC, CBS and NBC, as well as the Sunday chat shows from January 1, 2022 through August 31, 2022, specifically coverage of five prominent Democratic candidates who support abortion up to birth. We found NO coverage of the radical nature of their positions.

Here's the five extreme Democrats the media don't want you to know about:

## 1. Beto O'Rourke: Democratic gubernatorial candidate in Texas

Beto O'Rourke is a high profile Democrat who has made failed runs for the White House and the Senate and is now challenging incumbent Republican Greg Abbot for governor. He's also uncompromisingly pro-

all of the Democrat's abortion stance came on the May 6 Today with a clip of him saying this about overturning Roe vs. Wade:

This is not about life. This is about control. And this is about power. It's about controlling the lives of the women of Texas and taking power away from them.



abortion right up until the minute before birth. As noted by the Free Beacon: "Democratic presidential candidate Beto O'Rourke on Monday night expressed his support for third trimester abortions, specifically the day before birth."

O'Rourke on August 22 told a pro-life questioner: "This is a decision that neither you, nor I, nor the United States government should be making. That's a decision for the woman to make."

No explanation on the networks of just how extreme O'Rourke's position is, despite 27 mentions of O'Rourke since January 1. The only mention at

- **TOTAL MENTIONS OF CANDIDATE: 27**
- **TOTAL MENTIONS OF EXTREME STANCE ON ABORTION: 0**

## 2. John Fetterman: Democratic Senate candidate in Pennsylvania

As noted by National Review in April, Lieutenant Governor John Fetterman was asked in a debate: "Are there any limits on abortion you would find appropriate?" "I don't believe so, no," Fetterman replied.

It's not as though Fetterman's candidacy has been ignored.

Since January 1, there have been 25 mentions, many focusing on his stroke, recovery and return to the campaign trail. Yet nothing on his radical views on abortion.

- **TOTAL MENTIONS OF CANDIDATE: 25**
- **TOTAL MENTIONS OF EXTREME STANCE ON ABORTION: 0**

## 3. Tim Ryan: Democratic Senate candidate in Ohio

Ohio's Senate race is competitive. According to Real Clear Politics, just 3.7 points separate Tim Ryan from GOP opponent J.D. Vance. Network journalists have mentioned Ryan 16 times on the networks since January 1. What they won't tell you is just how fanatical Ryan's devotion to abortion really is.

Ryan is so rigid that even CNN noticed. On the August 28, 2022 State of the Union, co-host Dana Bash interrogated: "You're criticizing your Republican opponent for not supporting abortion exceptions. So, I want to ask about your position. What restrictions, if any, do you believe there should be on abortion?"

After the Democrat repeatedly dodged the question, Bash concluded, "It sounds like you're saying no restrictions." Ryan stared into the camera for a few seconds before responding. Clearly, he wasn't used to being pressed on the issue. But this shouldn't come as a shock. Ryan's support for

*See "Hiding," page 41*

# UK mom has one twin daughter with Down syndrome and one without... and life is beautiful

By Cassy Fiano-Chesser

Women who receive a diagnosis of Down syndrome rarely receive the news in a positive way. For Nicola Bailey, a nurse from Sheffield in the United Kingdom, it was no different. When her daughter with Down syndrome was born, she said doctors apologized and acted as if someone had died.

Bailey gave birth prematurely to twin girls, Harper and Quinn. According to the *Daily Mail*, her water broke at 32 weeks, but doctors were able to keep the babies in her womb for another week. Bailey didn't get a good look at either of her twin girls, as they were quickly rushed to the NICU. But according to an interview with Tyla, Bailey said when doctors came back, their demeanor made her think one of the twins had died.

Doctors said “[we are] really sorry to have to tell you this,” and said they had “sad news.” They then apologized for the supposed misfortune of having a child with Down syndrome. The chance of Down syndrome occurring in one twin and not the other is one in a million. Shockingly, Bailey wasn't allowed to see her daughters until she and her husband had been given a pamphlet about adoption.

“[A]s soon as I saw them both my heart just melted. They were both so beautiful,” Bailey told the *Daily Mail*. “But I knew straight away when looking at Harper that she had Down's syndrome.”

In an emotional Instagram post, Bailey acknowledged that she grieved the daughter she thought she would have, but said Harper has made her stronger, and taught her how to be better. “I know now I cannot change our beginning but we

can start where we are right now and change our ending,” she wrote. “I was born to be your mother[.] I may have given life to you but [in] all honesty you have helped me find mine so thank you my beautiful for just been [sic] you.”



Since then, Bailey has spoken out about the negative way parents receive diagnoses, and how the stigma has led to truly heartbreaking tragedies.

“It is very common with a diagnosis of Down's syndrome to go through grieving. With all the negativity, it made me not want to bond with her. You're made to feel as though their life is valued less,” she said. “Of course, doctors do have to give you all the factual information, but I think the first thing they could say would be, ‘congratulations, both girls are doing perfectly fine, they're beautiful, we do have some suspicions Harper might have Down's syndrome...’ If they'd done it like that it would have been less traumatic, but the way they deliver the news, you

think your child is dying — it's a horrible way of receiving information.”

And while Bailey didn't receive a prenatal diagnosis for her daughter, her public online presence with her daughters has led many other Down syndrome

systemic problem, particularly in the United Kingdom. The Antenatal Results and Choices (ARC) organization only gives parents resources and support if they choose to have an abortion after a prenatal diagnosis — not if they choose life. Other moms in the United Kingdom have shared similar stories. Some were told they could abort up until the baby was in the birth canal, and some were offered abortions at every single appointment. Other parents say doctors called their children with Down syndrome ‘it,’ or said they would be better off dead.

Yet despite these serious attempts to persuade parents that raising a child with Down syndrome is worse than a death sentence, research has found that virtually all parents reported that they love their son or daughter and were proud of them, while an overwhelming majority said their outlook on life was more positive because of them.

“Even though they will have struggles and limitations, people with Down's syndrome still lead a very happy life,” Bailey said. “A lot of people say to us, ‘would you prefer for her not to have Down's syndrome?’ Obviously, you want your children to be as healthy as possible, but equally I would never want to take the Down's syndrome away from Harper. If you take the Down's syndrome out of Harper, she isn't Harper anymore. She sees the world the way she does because of who she is. It is who she is meant to be.”

moms to reach out to her, many with horrifying stories.

“I've spoken to a lot of mums who decided they wanted to go ahead with the pregnancy but were offered abortions time and time again up until they were 38 weeks. If the mum has already said she doesn't want a termination, that should not be necessary,” she told Tyla. “Mums message me on Instagram to say they've been traumatised because they aborted their baby with Down's syndrome — but after seeing Harper, that's not the picture they were sold. That breaks my heart; they're grieving all over again, because they're seeing something that isn't what they thought their baby was going to be.”

Sadly, these kinds of negative experiences seem to be a

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

# South Carolina Senate Fails to Pass the Human Life Protection Act

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

COLUMBIA, S.C. (Thursday, September 8, 2022) South Carolina Citizens for Life is heartbroken for the unborn in our state because the Senate failed to pass the Human Life Protection Act.

“This isn’t where I want to be,” said Senator Shane Massey, R-Edgefield, the Senate Majority Leader who led the floor debate. He continued, however, leading the Senate to pass language to protect the Fetal Heartbeat and Protection from Abortion Act that the S.C. Supreme Court enjoined on August 17, 2022. Planned



Parenthood alleged in a lawsuit that the Heartbeat law violates the State Constitution’s right to privacy clause.

“While we are crushed for the unborn members of our human family, we will continue to fight for protective legislation and to provide for pregnant women in

need of help,” said SCCL President Lisa Van Riper.

The next move is for the South Carolina House to accept or reject the remnant language intended to save the Fetal Heartbeat Act.



## Why Abortion Pill Reversal so Enrages the Abortion Industry

From page 30

As you will notice, the calm Knibbs at the beginning has become the indignant Knibbs by the end.

**This is why the enthusiasm for this fringe procedure explains the playbook for the movement**

**at large. It’s a spin campaign. More than promoting an actual treatment—which, again, is barely ever requested—abortion pill reversal advertisements promote the idea**

**that abortions are something people regularly need to be saved from having.**

There is nothing that makes pro-abortionists more angry than the thought that some women will escape—will

have second thoughts and try desperately to save their babies. I suspect the more the truth about APR gets out, the more unborn babies will be rescued, and the angrier the Abortion Industry will become.

## So how far off are the polls?

*From page 2*

That is “a warning sign” in the words of Nate Cohn, *The Times*’s chief political analyst, “for both the Democratic Party and for the polls.”

#2. “The unavoidable reality is that polling is both an art and a science, requiring hard judgments about which kinds

of people are more or less likely to respond to a survey and more or less likely to vote in the fall,” Leonhardt writes. “There are still some big mysteries about the polls’ recent tendency to underestimate Republican support.”

You can’t emphasize this enough. For whatever reason, the sample pollsters almost always use includes many more Democrats and many fewer Republicans.

#3. Switching over to Cohn’s article, he notes that in Wisconsin, pollsters have pro-

abortion Democrat Mandela Barnes with a comfortable lead over incumbent Sen. Ron Johnson. **But in this case, good for Wisconsin Democrats might be too good to be true. The state was ground**

zero for survey error in 2020, when pre-election polls proved to be too good to be true for Mr. Biden. In the end, the polls overestimated Mr. Biden by about eight percentage points. Eerily enough, Mr. Barnes is faring better than expected by a similar margin.

And building on that, #4.

**Democratic Senate candidates are outrunning expectations**

**in the same places where the polls overestimated Mr. Biden.**

It raises the possibility that the apparent Democratic strength in Wisconsin and elsewhere is a mirage — an artifact

Cohn covers his bets at the end: 2022 could really be different. But...

The pattern of Democratic strength isn’t the only sign that the polls might still be off in similar ways. Since the Supreme Court’s *Dobbs* decision on abortion, some pollsters have said they’re seeing the familiar signs of nonresponse bias — when people who don’t respond to a poll are meaningfully different from those who participate — creeping back into their surveys.

Brian Stryker, a partner at Impact Research (Mr. Biden is a client), told me that his polling firm was getting “a ton of Democratic responses” in recent surveys, especially in “the familiar places” where the polls have erred in recent cycles. ...

But the pattern is worth taking seriously after what happened two years ago.

I assume what he is hinting at without saying so specifically is that Republicans once again are not answering pollsters when they call and that as a result the numbers once again—including on abortion—will prove to be well off.



# I'll never forget my five weeks at the NRLC Academy

By Lauren Lapinski

I always go where I feel sent, and trust it will all work out. Of course I have a history in the pro-life movement, due to having a post-abortive mother and having gone through my own healing and making that sibling, Rachel, a part of my life as well.

I did not know what to expect from the Academy. When my friend sent me the link and told me to look into it, I saw “pro-life” and “academy” and figured I would get something useful out of this.

I grew up in the religious sphere of the pro-life movement and those whom I worked around always said abortion could not be ended through politics so I had stayed as far away as I could from the political side of things. NRL was my first exposure to people who had a deep love and care for each unique, individual life, and saw an opportunity to establish, teach, and defend that value by means of legislative action.

Through this academy I was also exposed to the reality that if WE don't lobby; if WE don't join chapters and organize information booths or host events to educate at our churches and in our communities, those who desire abortion on demand WILL. I was faced with the question of what will happen if THEIR voices are the only voices in the ears of our government officials? I can't let the leaders of this country believe all of its people desire abortion on demand through all 9 months.

Many valuable lessons such as these were learned during

my time at NRL headquarters. Practically day to day, my personal experience was very grueling but gratifying.

Deeper than relationships with the other classmates was actually my relationship



*Left to right: Lauren Shovlin (PA); Dr. Randall K. O'Bannon, Academy Director; Lauren Lipinski (OH); and Amy Baker (SC).*

with myself. One day in class, through digging deeper into a specific persuasive column assignment, Dr. Randall O'Bannon helped me realize for myself that I can't win every fight with logic alone. I had thought, “If I just show these women they have nothing to be afraid of, and that choosing the death of their child when in their lowest moment may seem like their only option but it isn't,” I could end abortion for good.

However I didn't take into account the person. I did not take into account her feelings. I didn't listen to her story about her parents threatening to kick her out. I painted with a broad stroke and said, “You have no

reason to be afraid, don't have an abortion.”

Now I should know this doesn't always work! I served as a camp counselor for 2 years. When I had my gal campers up on a 5 story high-ropes course

ready to practically freefall off the edge, I told them as many comforting facts about the safety of the mechanism as I could but it did not erase their fear. Sometimes, we had to sit up there with her for hours letting her cry. We had to let her be in her process and ask her, “What can I do for you in this time of fear?” I told her, “The fact of the matter is you have to jump. There is no other way to get down. So how about you hold onto me and we go down together?”

Sometimes I even had to grab onto her and we had to get a little push off, without her giving her approval. You better believe though, **I never** let go of her for a second and when she was safe on the ground I

told her how proud of her I was. “You may not have liked it, it may have been so hard, but you DID IT. You did that, you are STRONG.”

To see these young women be affirmed that they are strong and capable in the face of adversity was my biggest honor. I want that to be my role for women worldwide facing crisis pregnancies. No matter how logical and sound my claims can be, what they need most is love and support. Not just women facing crisis pregnancies but all women who have been gripped by fear at the overturning of Roe v. Wade. They all believe if they were to be placed in that situation the fear of their capacity to get through that trying time would be crippling.

“You are STRONGER than you think,” is my message to them.

I learned that very message for myself. As much as I preach on not letting fear control you, I did not realize the comfort zone I was letting myself live in. The staff at NRL pushed me really hard. I wanted to avoid uncomfortable situations lobbying or in mock press conferences, but NRL taught me I am stronger than I thought!! At first it seemed sort of cruel and unforgiving to receive critique from the practicum but over time I came to see that it was fuel for me to get better, to become the best version of myself.

I owe the person I am 5 weeks later to the NRL and the people there. It's an experience I will never forget!

During an abortion, unborn children are poisoned, shredded, and dismembered. Even if they look away – they know. #abortionhurtswomen



**"You may  
choose to look  
away, but  
you can never  
say again that  
you did not  
know."**

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*William Wilberforce*



# Florida's AG asks state Supreme Court to reverse its position that a privacy clause in the State Constitution protects right to abortion

By Dave Andrusko

Last week, Attorney General Ashley Moody asked the Florida Supreme Court to “reverse a decades-old position that a privacy clause in the state Constitution protects abortion rights,” according to *CBS Miami*.

Lawyers in Moody's office “addressed the issue in a 44-page document arguing that the Supreme Court should reject an effort by abortion clinics and a doctor to block a new law that prevents abortions after 15 weeks of pregnancy.”

Pro-life Gov. Ron DeSantis signed the bill on April 14, 2022. The law was originally supposed to take effect on July 1, before Leon County Circuit Judge John C. Cooper blocked it. Cooper issued an injunction against it only for the state of Florida to fight back within just days by filing an appeal which placed an automatic stay on Cooper's ruling keeping the 15-week limit in effect.

The 1989 decision “established a right to abortion under the privacy clause the

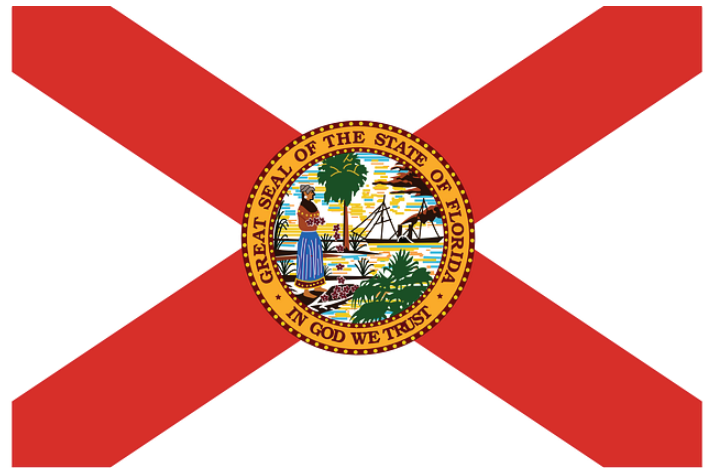
voters added to the Florida Constitution through a 1980 referendum,” Michael Moline reported.

But Moody's office said the decision was wrong “from the start.” Moody's office said in its filing:

**“It ignored that the (constitutional) provision's plain text says nothing of abortion, that its drafters publicly disavowed guaranteeing abortion rights and that the provision was ratified in response to decisions restricting informational privacy. ...”**Were this (Supreme) Court to address the meaning of the Privacy Clause here, it should therefore recede from its precedents and clarify that the original meaning of the clause has nothing to say about abortion-

**and certainly that the Privacy Clause is not so clear as to pry the abortion debate from the hands of voters.”**

more conservative since Gov. Ron DeSantis took office in early 2019,” according to *CBS Miami*. “Three longtime justices who consistently ruled



*CBS Miami* reported that “At another point in the document, Moody's office expressed confidence that the court ‘is likely to hold that the Privacy Clause of the Florida Constitution does not limit the Legislature from regulating abortion.’”

The Florida Supreme Court “has become significantly

in favor of abortion rights, Justices Barbara Pariente, R. Fred Lewis and Peggy Quince, left the court in 2019 because of a mandatory retirement age and were replaced by DeSantis appointees. Another DeSantis appointee, Renatha Francis, joined the seven-member court last week.”

## “The Conversation” Platforms Pro-Abortion Disinformation

From page 16

fetuses are human, while Sarkar, also published in *The Conversation*, insists there is no scientific consensus on this.)

She says that if we can't agree when personhood begins, then we can consider instead the “implications” of certain views. For example, how should we resolve “conflicts” between pregnant people and the fetuses they carry?

She suggests we should consider the toll that unwanted pregnancies take, financially and circumstantially, on those who are denied abortions. She says we have to ethically consider that the overturning of *Roe v. Wade* is unfair to poor people and minorities and to the fact that the majority of Americans support abortion rights. She concludes her list of concerns by stating that abortion bans are projected to increase maternal mortality.

Her suggestions are misleading, and here's why.

She begs the question of how a more difficult life for mothers justifies abortion. Considering the difficult “implications” of denying abortions assumes the moral philosophy of consequentialism, the consideration of which would here imply that we might also kill certain born people in order to make our lives less difficult.

She does not provide readers with facts about the resources available via pregnancy centers, of which there were about 3,000 in 2021. 95 % of abortions occur at clinics, of which there were 808 in 2017. These figures indicate that pregnancy centers outnumber abortion clinics by almost 4 to 1.

She also doesn't include an important, yet less popular,

research finding from *The Turnaway Study* regarding women who were turned away from abortion clinics and carried their pregnancies to term. By the time their children were five years old, only 4% of those women still wished they could have had an abortion. Is it sensible to only point to the “toll” taken on women denied abortions, without pointing also to the research stating those women largely wanted their children in the years following their births?

And, in mentioning the unfairness of abortion bans on the poor and minorities, she leaves out that low-income people are more likely to oppose abortion than high-income people. Why propose abortion as a solution to poverty rather than societal solutions and the resources already available for those who are low-income and pregnant?

Her concern that abortion bans increase maternal mortality begs the question of whether abortion kills a morally valuable life.

What readers are unlikely to know is that the maternal mortality rate is extremely low; in 2017, a pregnant woman had a 0.017% chance of dying from a pregnancy-related complication (17.3 deaths per 100,000 live births). This is 1 out of every 5,780 women. This means that one is 10 times more likely to die from a pedestrian incident than from a pregnancy-related complication.

Jecker also neglects to mention the experience of Chile, which saw maternal mortality substantially decrease after outlawing abortion.

Maternal mortality, therefore,

seems just another point that conveniently ignores that millions of unborn babies die by abortion.

Finally, Jecker commits the logical fallacy of appealing to the majority when she argues that the majority of Americans support abortion rights.

So far, we are 0 for 2 in finding “trustworthy and informative articles” on this topic in *The Conversation*.

### **Amanda Roth: Let's define a human by its stage of development, not by its humanity**

Let's look at a final recent take by *The Conversation* on the value of the unborn, via an article published on June 30th, 2022 by moral philosopher Amanda Roth. Roth offers the theory of gradualism to explain why we can be morally unconcerned about abortions that take place in early stages of pregnancy.

Roth laments that the Supreme Court ruling that overturned *Roe v. Wade* means, for some states, that restrictions and out-of-state travel needs will delay abortions and therefore increase the second-trimester abortion rate.

This is important, she explains, because losing a pregnancy, or aborting a fetus, are commonly felt to be more tragic later in pregnancies than earlier in pregnancies. This sense of tragedy is explained by the philosophical theory of gradualism, she says.

(It's questionable whether Roth's assertion is even true. Prior research has found, in the context of miscarriage, that “gestational age was not shown to affect the degree, intensity, or

duration of the grief, anxiety, or depression” for those who had miscarried.)

According to gradualism, Roth explains, the moral status and value of a fetus increases slowly and steadily, parallel to its “physical, cognitive and relational development.” A 6-8 week embryo might therefore have very minimal moral status. Yet a 32-35 week fetus has the same moral status as a newborn. Mid-pregnancy fetuses are morally “in between.”

She said that gradualism gives us reasons to fight for easy access in every state to early abortions, since early abortion is not very morally concerning. Roth expresses that “it is morally abhorrent to deny anyone the ability to access abortion in their own state, no matter why they are seeking one,” so it's not surprising that Roth puts forth a means to justify abortion via the philosophy of gradualism.

I find gradualism to be illogical and lacking in any empirical foundation.

First, we circle back to the idea of “personhood” as an additional feature that humans can have on top of being human. Gradualists find “personhood” to develop slowly throughout gestation; therefore, it doesn't really exist at conception or in the first several weeks of pregnancy. Gradualists cite “physical, cognitive and relational development” as what distinguishes a person from a human.

This fails when you consider that infants and small children are also quite early in their

See “*Conversation*,” page 40



## “The Conversation” Platforms Pro-Abortion Disinformation

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physical, cognitive, and relational development; and persons of all ages or with various disabilities also have varying abilities in these areas of development. Yet infants, children, and disabled people have full moral status. In *Arguments about Abortion: Personhood, Morality, and Law*, law professor Kate Greasley admits that “The problems associated with adducing a universal criterion for personhood do not just disappear when one adopts a gradualist account of fetal moral status” (pg 150).

“Personhood” can therefore only really be “determined” by the varying subjective feelings of born people, a basis that is not scientific. Such subjective feelings and views are then imposed upon unborn humans in their early stages of development, “justifying” their death by abortion.

Secondly, gradualism fails to consider that a human at all stages of development is an organism. Regardless of its physical, cognitive and relational development, by virtue of continuity a human organism is the same organism at every stage of its development.

More pointedly, gradualism takes a snapshot of a human organism at an early stage of development and considers it not morally valuable. The sinister conclusion is that this human organism, who would have full moral status and value just months later, is sentenced to death right now. This “snapshot approach” confuses a human organism with its stage of development. I don’t look at a photo of myself as an infant and say that I’m essentially an infant. Rather, I say I am essentially a human.

Gradualism thus discriminates against a human being based on

his or her location in time. It says, “This human doesn’t matter... yet. Let’s kill her before she does.” That is akin to saying, “Let’s kill this human while her future has not yet arrived.” But preventing someone’s future value is not a justification for killing; it’s a definition of killing. Killing, after all, prevents someone’s future and all the value that would lie with it.

We don’t kill young children because their adult selves have not yet arrived and therefore have no value. Killing unborn humans on this basis makes no more sense.

Gradualism, while explaining the common sentiment that abortion should take place as early as possible, is, upon further inspection, simply the exploitation and killing of the very youngest among us.

### Do better, *The Conversation*

*The Conversation* claims to share researcher’s expertise. Yet these three recent articles failed to provide relevant, fair, sensible, or sometimes even accurate premises, or else they failed to provide conclusions that logically followed from their premises.

What these articles have in common is that they leave the realm of empiricism and science and enter the subjective realm of “values,” “ethics,” and “moral philosophy,” but only, of course, where those values support the killing of the unborn.

*Editor’s note. This appeared at Secular Pro-life and is reposted with permission.*



## Why Are Journalists Hiding These Radical Democrats Who Support Abortion Up Until Birth?

*From page 32*

abortion up until birth has been ignored on the networks.

- **TOTAL MENTIONS OF CANDIDATE: 16**
- **TOTAL MENTIONS OF EXTREME STANCE ON ABORTION: 0**

### 4. Mandela Barnes: Democratic Senate candidate in Wisconsin

According to the Real Clear Politics polling average, Mandela Barnes has a good chance of unseating incumbent Republican Senator Ron Johnson in Wisconsin. Barnes is leading by 4.3 points. Yet even though the Democrat effectively endorses abortion up until birth, the networks have been nearly silent on his stance. In May, he issued a statement calling for passage of the Women's Health

Protection Act. It would effectively legalize abortion up until birth.

In an endorsement, NARAL Pro-Choice America touted, "He has pledged his support for critical legislation to protect and expand reproductive freedom, including the Women's Health Protection Act."

But the networks have shown almost no interest in the potential that Barnes might unseat Johnson. Just three mentions. There's been no coverage of his his fanatical support for abortion.

- **TOTAL MENTIONS OF CANDIDATE: 3**
- **TOTAL MENTIONS OF EXTREME STANCE ON ABORTION: 0**

### 5. Cheri Beasley: Democratic Senate candidate in North Carolina

Like Wisconsin, the race in North Carolina is essentially tied. Republican candidate and Congressman Ted Budd has a 0.7 percent lead over Democrat Cheri Beasley, according to RCP. The network newscasts have barely noticed the race, however. Just three mentions since January 1. But no mentions of Beasley's devotion to abortion at any time during pregnancy.

The radical NARAL Pro-Choice America endorsed Beasley back in February, noting, "Cheri Beasley has voiced her support for the Women's Health Protection Act (WHPA)." As noted earlier, this would effectively legalize abortion up to birth, wiping out late term abortion bans, partial birth abortion, sex-selection abortion bans, among other restrictions.

- **TOTAL MENTIONS**

**OF CANDIDATE: 3**  
 • **TOTAL MENTIONS OF EXTREME STANCE ON ABORTION: 0**

These Democratic candidates are representative of many in the party who hold fringe positions rejected by the vast majority of Americans. Yet the pro-abortion media have hid the truth. What's the explanation for all this? It's hard to cover the extreme stances of politicians when journalists basically agree with them. Reporters should do some soul-searching and do their jobs: Tell Americans where all candidates stand on abortion.

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