



national
RIGHT TO LIFE
NEWS

October 2022

**In the 2022 Midterm Elections
- LIFE is on the ballot!**

Vote like her life depends on it



because it does!





national RIGHT TO LIFE NEWS

Democrat Senate Candidates Pledge Support for Unlimited Abortion For Any Reason Until Birth

By Karen Cross, National Right to Life Political Director

Politicians can be slick. You have probably seen their ads, received their mailings, watched their debates, and maybe even had a campaign volunteer on your doorstep. And yet sometimes it is still hard to know where they stand on important issues. However, there can be no question where Democrats running for Senate in key battleground states stand on the issue of the *Women's Health Protection Act* (also known as the "Abortion Without Limits Until Birth" Act by opponents). They have embraced a platform of unlimited abortion for any reason until birth, with the



Women's Health Protection Act as the centerpiece.

This federal legislation, a high-priority bill for the abortion lobby, the Biden Administration and Congressional Democrats, would enshrine abortion on demand in federal law and policies. Abortion advocates have marketed the bill as merely "codifying *Roe v. Wade*," but, it goes way beyond *Roe*. It would also nullify nearly all existing protective state laws. It would prohibit states from adopting new protective laws in the

See "Democrat," page 42

As Elections Approach, a Look Back at the Abortion Agenda of the Democrat-controlled 117th Congress

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

With elections approaching rapidly, Congress has left Washington D.C. to hit the campaign trail. Due to the *Dobbs v. Jackson* decision, which overruled the 1973 *Roe v. Wade* decision, abortion has become a front and center campaign issue in many races.

While Democrats on the campaign trail attempt to paint their Republican challengers as extremists on the issue of abortion, this Democrat-controlled 117th Congress has taken a staggering number of votes to expand elective abortion and to provide for government funding for abortion, both before

and after the release of the June 24th *Dobbs* decision.

According to the National Right to Life Scorecard, there have been 30 votes related to abortion this Congress, with most of them to expand abortion. There are limited opportunities for Republicans in the minority to seek pro-life votes, but nonetheless they have forced several pro-life votes on abortion funding, and other items to protect unborn children. See more here: <https://www.voterveice.net/NRLC/home>

See "Agenda," page 36



Editorials

22 days until the November 8 mid-terms elections. What do we know?

For many, but not all, Democrats the conventional wisdom is wonderful precisely because what follows from it seems like it's right in their wheelhouse. You want to win on November 8? No problem. Advertise that you're in favor of "reproductive rights," and you'll cruise to victory.

That is still the dominant thread but there are voices in dissent, such as Democratic Socialist Sen. Bernie Sanders. After trotted out his pro-abortion bona fides, Sanders told *The Guardian* that "as we enter the final weeks of the 2022 midterm elections, I am alarmed to hear the advice that many Democratic candidates are getting from establishment consultants and directors of well-funded Super PACs that the closing argument of Democrats should focus only on abortion. Cut the 30-second abortion ads and coast to victory. I disagree."

You can find a poll that tells you that abortion is one of the top issues of concern for voters, but you can also find polls that place it further down the list behind concerns over the economy, inflation, the price of gas, etc., etc. When it comes to single-issue voting



on abortion (for or against), pro-lifers virtually always come out ahead. What's dawning on many Democrats—what gives them that sinking feeling—is that the passionate pro-abortion response which erupted after *Dobbs* is fading.

The elephant in the room is President Biden. How much of a drag will his job (dis)approve exert? The aggregate Real Clear Politics number put him at a -10.1 (43.1% approve, 53.2% disapprove). With Congress in adjournment until after the midterm election, there is virtually no chance his job approval numbers will improve and a decent chance they will sink.

The received wisdom is that Republicans will take the House, following the established pattern

of the party that controls the White House getting hammered in the first midterm. We should be sure to vote to make that happen in 2022.

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Pro-abortion Guttmacher reports that "100 Days Post-Roe: At Least 66 Clinics Across 15 US States Have Stopped Offering Abortion Care"

On the off-chance we might underestimate how important passing state legislation is to saving multiple tens of thousands of babies, we have the pro-abortion Guttmacher Institute to assure us it's true. "100 Days Post-Roe: At Least 66 Clinics Across 15 US States Have Stopped Offering Abortion Care" is classic "the sky is falling" rhetoric.

Guttmacher tells us, "October 2, 2022 marked 100 days since the US Supreme Court overturned *Roe v. Wade*, a decision that has resulted in states across the nation severely restricting access to abortion." They add, "New Guttmacher research found that 100 days after the June 24 *Dobbs v. Jackson Women's Health Organization* decision, 66 clinics across 15 states have been forced to stop offering abortions."

CBS News reports that Guttmacher found that the number of abortion facilities in the 15 states dropped by 66— from 79 to 13—

since *Dobbs*.

"All 13 of the remaining clinics are in Georgia," *CBS News* reported. "The other states have no providers offering abortions, though some of their clinics are offering care other than abortions."

What about hospitals and physician offices that provided abortion but stopped them after the Supreme Court handed down *Dobbs*?

Guttmacher didn't have data for them "but [Guttmacher's Rachel] Jones noted that clinics provide most U.S. abortions, including procedures and dispensing abortion medication."

According to the authors—Marielle Kirstein, Joerg Dreweke, Rachel Jones, and Jesse Philbin

Our state legislative tracking predicts that a total of 26 states are certain or likely to ban abortion within a year of *Roe* being

See "Polls," page 44

From the President Carol Tobias

Which way America? It is imperative to vote to set our nation on the path of greater inclusiveness



For the past several days, an old song has been running through my head. Made popular by “Up With People,” the song hinted that America was at a crossroads and wondered which way the country would go.

WHICH WAY, AMERICA?

Which way America?

Which way America?

Which way America?

Which way to go?

This is my country and

I want to know

Which way America is going to go.

There is many a road to travel

Many a hill to climb

I'm gonna find the straightest road

And walk it 'til the end of time.

There is many a storm before us

Many a choice to make

I'm gonna ask the Lord above

To show me the road to take.

I want America to be a light to the world, a beacon to all because we love and protect innocent human life. How will we make that happen?

Since the Supreme Court's June 24th *Dobbs v Jackson* decision overturning *Roe v Wade*, I've been thinking about that question. Needless to say, as we approach the November 8th midterm elections, the answer has become even more critical.

Is America going to elect men and women who respect the value and dignity of human life? Or will we elect men and women who see life as a burden-- inconvenient and disposable?

The contrast between parties and candidates on many issues is stark, but none more so than Life.

From America's founding, the country has provided hope to the world. Quoting from ushistory.org, “The passengers of the Arbella who left England in 1630 with their new charter had a great vision. They were

to be an example for the rest of the world in rightful living. Future governor John Winthrop stated their purpose quite clearly: “We shall be as a city upon a hill, the eyes of all people are upon us.”

President Ronald Reagan frequently referred to America as a shining city on a

care about whether or not children have a good education? If they don't see how precious human life is, will they protect us from crime and violence?

In *Dobbs*, the Supreme Court cleared away the “right” to abortion and put us back on a path that allows us to protect the lives



hill. I've kept that image tucked away in my heart for many years. Can America be, or remain, a shining city on a hill with the eyes of all people upon us? Are we an example of what is good and right about how people should live and how leaders should govern?

I truly believe that a country's attitude toward human life is critical. It colors how the country will handle so many other issues. After all, if we can't respect and protect innocent human life, why would we care about other issues? For example...

If our elected officials don't respect human life, will they care about how our taxes are spent? If they don't care about protecting innocent human life, will they

of defenseless preborn babies. But we have “many a road to travel and many a hill to climb.” We have “many a storm before us and many a choice to make.”

We have elections and ballot measures and legislative sessions ahead. We have hearts to soften and minds to change. A big task? Sure, but pro-life people are up to the challenge.

We have fought for 50 years to protect unborn children. We have faced storms and climbed hills. We have overcome obstacles and torn down barriers.

We're not going to stop now. How could we? The littlest Americans are counting on us.

3-D ultrasounds of two unborn babies a huge hit on *The Today Show* *Not a “fetus” anywhere*

By Dave Andrusko

When the topic is about unborn babies in their natural (safe) state, then people who probably aren't on our side can feel free to treat them as... unborn babies.

The foursome are cooing all over the place at the photos. At what you ask?

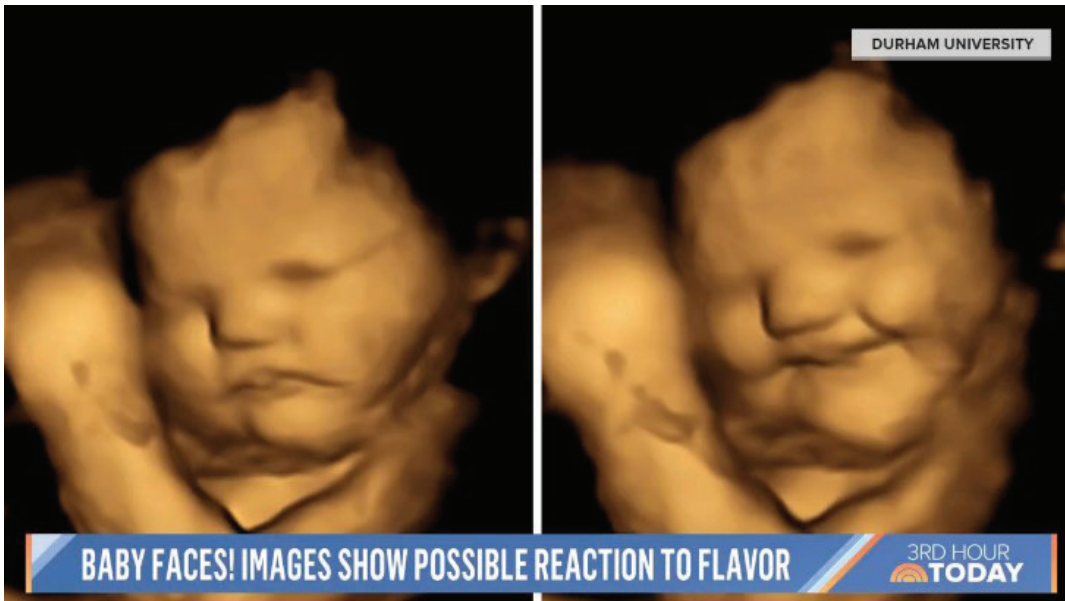
At photos taken from a study, first published in the journal *Psychological Science*, which

during pregnancy.”

Even the pro-abortion to the hilt *Guardian* newspaper was captivated. Nicola Davis, the paper's Science correspondent writes

exposed to the greens in the womb.

While previous studies have suggested our food preferences may begin before birth and can be influenced by the mother's diet, the team says the new research is the first to look directly at the response of unborn babies to different flavours.



This 1 minute and 22 second clip taken from *The TODAY Show* which is primarily devoted to 3D photos of babies was passed all around our office.

are “the first in the world to look at how unborn babies react to taste and smell in the womb and gives rare insight into understanding how human taste and smell receptors develop

If the taste of kale makes you screw up your face, you are not alone: researchers have observed foetuses pull a crying expression when

The TODAY Show quartet had no problems using the “B” word.

“Some amazing baby pictures” is the first observation. “Baby in the womb;” “Baby in the resting state;” “Want to look at this baby's reaction?;” and “When a Baby's reacting...”

One other thing. One of the two women on the set said that her two sons “look exactly like they do in the 3-D imagery.”

The continuity of life, anyone?

And I scouted around the Internet a bit. Guess what? Not a “fetus” to be found!

Be sure to watch.

An “Interview with an Unborn Child”: No baby should ever be unwanted, unknown, or unloved

By Dave Andrusko

Last night, I re-watched video titled, “Interview with an Unborn Child” by the Life Network of Malta. It moved me more than any of the dozens and dozens and dozens of pro-life videos I’d seen before or since. I’d written about it previously but, if possible, this four-minute-long video made an even deeper impression on me this time.

The creators of this video know that abortion is a highly sensitive topic and even many pro-lifers find brutally honest pictures of aborted babies very unsettling. So this “Interview,” filled with images of unborn babies, while very haunting, strikes a nerve for very different reasons.

We read the introduction

I had the privilege of interviewing an unborn child.

I asked about his dreams.

Here is his reply.

The narrator (the unborn child) ever-so-quietly reduces you to tears in less than 60 seconds. Why? How?

For starters, the music immediately signals that this child is completely and utterly alone. And when he tells us that “My most beautiful dreams turn into nightmares,” he tells us in a voice you have to hear to understand how affecting it is.

Partly we are touched because the refrain “not even my mother” is the narrative thread that binds the video together—that and the expressions of deep, **deep** pain etched on his tear-stained mother’s face.

From his words and the

images, we know that he has been abandoned. Even many decades in the Movement, this truth still cuts me to the quick. This pain is only exacerbated by the truth that as often as not, the child’s father (at a minimum) will encourage the child’s mother to “get rid” of him.

Listening to the baby, we know that he anticipates being hurt, physically and existentially. Even if he

life will be snuffed out.”

This little one has been cast aside, and

“I’ll never know who I am.”

But Someone does.

Only He would made me different from all others will know me.

He sees my talents and who I would become.

The video ends with a refrain I remembered instantly, even though the last time I watched “Interview with an Unborn Child” was seven years ago:

Even though I am preparing to breathe the outside air

The only breath I will breathe is the breath of death.

Except for death, no one will kiss me...not even my mother.



didn’t, we do. And too many of us attempt to keep his cries muffled and our indifference barricaded.

And when he says,

“My greatest pain will not reach the ears of anyone... not even my mother”

you are (or at least I was) stunned into silence.

Then there is abortion’s finality.

“Even though my heart is beating fast, how quickly the star of my

We believe He is with the baby in his final hours. If that doesn’t motivate me to be His hands and feet to find a better way, I don’t know what will.

When the baby says

Nobody else will ever know me... not even my mother.

We want to be able to say that while we may not know him individually, we work tirelessly to find a life-affirming solution for babies just like him and their mothers.

And

Even though I have feelings,

I will never experience love from someone else.

When I wrote that last sentence, I re-watched the video once again.

Please share it, using your social media contacts.

For no baby should ever be unknown, unwanted, or unloved.

Pennsylvania, once again, will be critical in midterm elections

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

It is difficult to turn on the television now without hearing about Pennsylvania's role in the upcoming general election. The Keystone State is considered to be pivotal in the determination of party control of the U.S. Senate.

We have been in this position before. In 2016, it seemed that all eyes were on Pennsylvania in the Presidential contest, which pitted pro-life Republican hopeful Donald Trump against long-time pro-abortion activist Hillary Clinton.

In the end, Pennsylvania was one of the states that helped to put Trump over the top, securing a surprising come-from-behind victory.

Were it not for that victory, strict constructionist Justices would not have been appointed to the U.S. Supreme Court. Without those Justices, the tragic U.S. Supreme Court ruling *Roe v. Wade* would still be the law of the land.

Now, we face a different kind of threat at the federal level. The badly misnamed Women's Health Protection Act would wipe out state


protections for preborn children. That could mean the elimination of Pennsylvania's time-tested Abortion Control Act. If that Act were to fall, the Commonwealth would lose the requirement for parental consent for abortion.

In an age when parental rights are a top priority on the national and local scene, it seems inconceivable that parents could lose rights that pro-life advocates fought for a generation ago.

Democratic U.S. Senate candidate John Fetterman is an outspoken supporter of the Women's Health Protection Act. That means he is also an opponent of parents' right to protect their children from the abortion industry.



In contrast, Pennsylvania's Republican U.S. Senate candidate, Dr. Mehmet Oz, believes in parental consent for abortion as an important component of parental rights.

To find out more about how the two candidates stand on the life issues, please visit the Pennsylvania Pro-Life Federation website at www.paprolife.org. Information is power—especially in this post-*Roe* era. Indeed, advocates for life must work harder than ever in Pennsylvania to ensure that basic protections for preborn children remain in place.

PENNSYLVANIA GENERAL ELECTION  TUESDAY, NOVEMBER 8, 2022

WHERE DO THE CANDIDATES STAND ON LIFE ISSUES?

★ PENNSYLVANIA U.S. SENATE RACE ★

	
Dr. Mehmet Oz	John Fetterman
WHERE DO THEY STAND ON TAXPAYER FUNDING OF ABORTION?	
Dr. Oz WILL NOT USE YOUR TAX DOLLARS to pay for abortions.	John Fetterman WILL USE YOUR TAX DOLLARS to pay for abortions.
Where do they stand on dismemberment abortions, in which fully-developed, living babies are killed in the womb?	
Dr. Oz SUPPORTS PROTECTING BABIES FROM DISMEMBERMENT ABORTIONS.	John Fetterman OPPOSES PROTECTING BABIES FROM DISMEMBERMENT ABORTIONS.
What about abortions during all nine months of pregnancy up to birth?	
Dr. Oz SUPPORTS PROTECTIONS FOR PREBORN BABIES AND THEIR MOTHERS.	John Fetterman SUPPORTS ABORTION during all nine months of pregnancy up to birth. He is backed by pro-abortion PACs.

PENNSYLVANIA PRO-LIFE FEDERATION
There's always a reason to choose life™

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Three questions about abortion to ask before you vote

By Paul Stark Communications Director, Minnesota Citizens Concerned for Life

As Election Day approaches, a lot of people are talking about abortion, and many will consider the issue when they cast their ballot. Voting is a responsibility that each of us ought to take very seriously. Here are three crucial questions to ask before you go to the polls.

Is she a human being?

Abortion ends the life of a human embryo or fetus. Is that embryo or fetus a human being—a living member of our species? This is a question answered by science.

“Fertilization is a critical landmark,” explains the textbook *Human Embryology & Teratology*, because “a new, genetically distinct human organism is thereby formed.”

If all goes well, that distinct human organism, or human being, develops herself through the many stages of life. That’s what each one of us has done. We were once embryos and then fetuses before we were infants and toddlers and teenagers.

The embryo or fetus, then, is the same *kind* of being as we are. She is a human being—living and growing rapidly as a young member of our human family.

Does she have a right to live?

The next question is this: How should we treat this unborn human being? Does she have a right to live—a right not to be intentionally killed through abortion?

There are two basic views about the scope of human rights. The first view says that rights belong only to human beings who have

particular characteristics or abilities. If unborn humans don’t meet those criteria, then they don’t count. But this approach is both exclusive and inegalitarian.

It’s *exclusive* because it doesn’t just exclude embryos and fetuses—it excludes other vulnerable humans too. Many abortion defenders say that

Some people are just more valuable than others.

The second view of human rights, by contrast, is both inclusive and egalitarian. It says that rights belong to human beings simply because they are human beings. That means that all humans have rights—no matter how young or dependent or marginalized—and they

whole class of humans from such protection. It denies their human rights and exposes them to lethal violence. And that violence happens on an industrial scale.

Can we do something to affect our abortion laws? Yes, we can. The candidates we elect to public office will shape our laws and policies—for



certain mental capacities are necessary in order to have rights. If that’s true, then patients in temporary comas and people with advanced dementia don’t qualify.

This view is *inegalitarian*, too, because it doesn’t make sense of equality for anyone. If cognitive functions confer our rights, then those of us with greater cognitive abilities have a stronger right to live than those of us with lesser ones. We aren’t equal.

have equal rights because they are equally human.

If all humans matter, then the unborn human being matters. And the pregnant woman does too. This is why both mother and child deserve our respect, protection, and care.

Will I vote to protect her?

Now we get to the final question. Justice requires that society protect the basic rights of innocent human beings. But legalized abortion excludes a

better or for worse. We can use our vote to make things better. We can use it to advance justice and compassion so that more unborn children are safeguarded, more pregnant women are empowered and supported, and more lives are saved.

Science tells us that the unborn child is a human being. Justice says that her human rights deserve protection. The only remaining question is this: Will we vote accordingly?

Post-*Roe*, educating the press means answering some very strange topics

By Laura Echevarria, NRL Director of Communications and Press Secretary

It's never surprising to see the press latch onto the most sensational aspects of a story angle but since the *Dobbs* decision in June, we've seen stories on abortion that have been shocking in how tangential, biased, bizarre, and even unrelated they are to the abortion issue.

Many media requests we have received are a direct result of misinformation campaigns pushed by pro-abortion groups. While dealing with reporters asking these questions, we've found that many reporters do not fully understand the law, do not understand the distinction that an abortion is the *deliberate* killing of a living unborn child, or they do not have a basic understanding of the development of a baby in utero.

Some of the strange topics we've been asked include:

- the impact *Dobbs* will have on fetal surgery;
- the impact of *Dobbs* on stem cell research;
- the impact in a post-*Roe* world with abortion bans that may cause (any or all of these, depending on the reporter): maternal mortality rates to go up, a decrease in medical colleges training students in abortion, the financial cost to states that deny abortions, and the impact on military recruitment if women are not able to get abortions in the military;
- Connected to the medical schools' question was the reporter's comment that a decrease in medical schools that offer abortion training would—in the reporter's mind—impact treatment for ectopic pregnancies and miscarriages.

Astonishingly, even after explaining that the point of an abortion is to kill a living unborn baby and that fetal surgery is seen as an unborn-baby-as-the-patient surgical procedure designed to *save* an unborn baby's life by repairing a life-threatening condition, the reporter thought *Dobbs* could cause doctors to fear repercussions if the baby died because of the surgery.

Reporters asking about embryo stem cell research were told that the most promising research—with known successes—is research based on *adult* stem cells.

Our response to reporters asking about maternal mortality rates was to point to studies that showed that maternal mortality was not decreased by abortion and that the way maternal mortality information is compiled is different from how information regarding mortality from abortion is compiled. The idea that “abortion is safer than childbirth” is misinformation put out by abortion promoters.

We were stunned by the reporter who crassly asked about the potential impact on state budgets in light of the *Dobbs* decision impacting the number of women having abortions in that state. The reporter thought that the burden would be greater in states that

passed protective legislation and that those states would have to increase aid benefits. The assumption here was that largely poor women had abortions and that preventing abortions would cause an increase in the state budget to provide aid.

For this reporter, we responded with information about how much money pregnancy centers save states every year through generous donations from pro-life individuals, churches, and businesses. We also pointed out that human lives cannot be weighed in a balance to determine if those lives have “worth” in the state budget. In

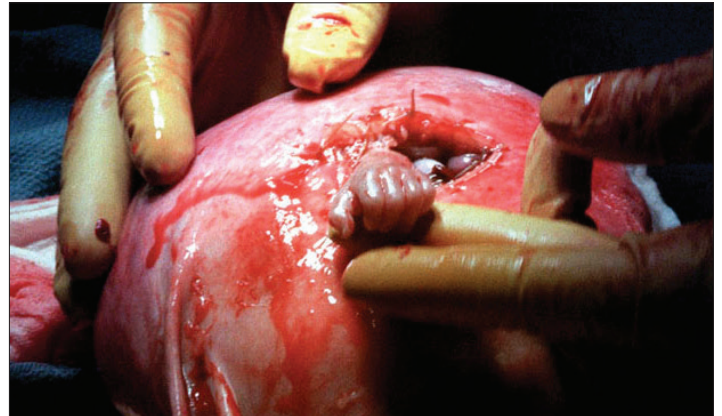


Photo: michaelclancy.com

addition, our safety/aid nets for women facing pregnancy are riddled with issues *because* of abortion on demand.

With the question regarding the military, we pointed out that whether a woman entered the military or not likely did not hinge on whether abortion was available.

And lastly, for the reporter asking about medical schools training abortionists and how this would impact treatments for miscarriages and ectopic pregnancies, this required educating the reporter on medical procedures and abortion.

Abortion is the *deliberate* taking of a human life. In a miscarriage, the baby, sadly, has already passed and is no longer alive so any treatment is not an abortion. In an ectopic pregnancy, the baby implants in the fallopian tube and cannot be saved but the mother can be by removing the fallopian tube and, with it, the unborn baby. Medical doctors have been doing these procedures and treatments without abortion training because they are trained in the same surgical techniques. A doctor doesn't have to do abortions to know how to treat a miscarriage

Media calls and interviews we receive often involve not only answering the reporter's question but also educating a reporter about basic fetal development, how federal and state laws work, and what is involved in an abortion. Every encounter with a reporter is an opportunity to educate—if they are willing to listen.

Second meeting of Task Force on Reproductive Healthcare Access calls for “codifying *Roe*” and political activism

By Dave Andrusko

One hundred days after the Supreme Court’s historic *Dobbs* decision overturning *Roe v. Wade*, pro-abortion President Joe Biden again reiterating that Congress should pass a bill “codifying *Roe*” and that the upcoming November 8th midterms are crucial to making that wish a reality. He made his remarks during the second meeting of the White House’s Task Force on Reproductive Healthcare Access.

“Right now we’re short a handful of votes,” Mr. Biden said. “The only way it’s going to happen is if the American people make it happen.”

The Supreme Court “got *Roe* right 50 years ago, and the Congress should codify the protections of *Roe* and do it once and for all,” Biden added. “But right now, we’re short a handful of votes. The only way it’s going to happen is if the American people make it happen.”

In his “codifying *Roe*” remarks, the President was alluding to the preposterously mislabeled “Women’s Health Protection Act.”

“Codifying *Roe*” is the Big Lie which Democrats keep peddling. The Women’s Health Protection Act “would nullify nearly all existing protective state laws,” said Jennifer Popik, J.D., director of Federal Legislation for National Right to Life. “In addition, this legislation also would have prohibited states from adopting new protective laws in the future, even laws specifically upheld as constitutionally permissible by the U.S. Supreme Court.”

The U.S. Conference of Catholic Bishops explained the WHPA contains no “meaningful limitations” on the termination of a pregnancy.

National Review called it “a barbaric abortion bill that would enshrine in federal law a virtually unlimited right to abortion through all nine months of pregnancy in all 50 states.”

The second meeting of the White House’s Task Force on Reproductive Healthcare Access highlighted two announcements the administration made on the topic,” according to Joyce

Frieden of *MedPage Today*.

“First, the Department of Education issued guidance reminding universities that they cannot discriminate on the

Force noted in its report.

Pro-abortion Vice President Kamala Harris, who has taken the lead on the Administration’s post-*Roe* response, told the



Pro-abortion President Joe Biden
Photo: Gage Skidmore

basis of pregnancy, including for pregnancy termination. Second, HHS will issue more than \$6 million in new Title X grants and other grants “to protect and expand access to reproductive health care and improve service delivery, promote the adoption of healthy behaviors, and reduce existing health disparities,” the Task

assembled group “We’re not going to sit by and let Republicans throughout the country enact extreme policies.” Harris added, in a slightly less strident manner, one “does not have to abandon their faith or beliefs to agree that the government should not be making these decisions for the women of America.”

Planned Parenthood Crossing the (Border) Line with Mobile Abortion Clinic?

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

The legal details are still being worked out, but with Roe gone, America has ended up a patchwork of legal protections, with abortion being fully legal in some states and unborn babies being afforded a degree of legal protection in others.

For the most part, Planned Parenthood seems to be trying to comply with these laws, publicly (but perhaps only temporarily?) shutting down abortion operations in those states where new protections are in place. This does not necessarily imply an acceptance of the new reality so much as perhaps represent a strategic decision to try to keep the organization and its staff out of legal jeopardy while they plan their next moves.

To no one's surprise, Planned Parenthood is actively challenging these protective bans in the courts.

In the meantime, however, Planned Parenthood has been working on ways to work around the new limitations, keeping their abortion business humming by relying on new mega-clinics in border states and now a new mobile abortion clinic.

Border Clinics

In October 2019, Planned Parenthood opened one of the organization's largest abortion clinics in the country, an 18,000 square foot megaclinic, in Fairview Heights, Illinois, equipped to handle services to 11,000 patients a year. The new clinic was replacing an older Planned Parenthood clinic that had been much smaller and could only handle a fraction of the patients anticipated at the new facility (*NBC News*, 10/2/19).

Something else about that clinic, though. It was less than 15 miles from the border of Missouri, which was at that time involved in a long

running dispute with Planned Parenthood regarding the licensing and operation of abortion clinics in that state.

Planned Parenthood openly admitted that one of the reasons for building the new clinic, for building it where it was and presumably for building it so big, was to be able to serve those who might be traveling from out of state to receive "reproductive health care."

"The idea is that we are creating a regional abortion access hub," Yamelsie Rodriguez, the president of Planned Parenthood of the St. Louis Region and Southwest Missouri told the *New York Times*. "In a post-Roe world, this is crucial to our mission" (*NY Times*, 10/22/19).

Just over the line

This is hardly the only new bordertown clinic that Planned Parenthood has erected in the past couple of years.

In July of 2020, Planned Parenthood of Illinois (PPIL) opened a large new abortion clinic in Waukegan, IL. PPIL said that the new center could handle overflow from North Chicago as well as any patients who might cross the state line from Wisconsin, which PPIL described as "a state that poses stringent legal barriers to abortion" (*Daily Herald*, 7/12/20).

In April of 2022, Planned Parenthood announced plans to lease space for an abortion clinic in Ontario, Oregon, a small town of less than 12,000 located in that state's eastern high desert. Considering its size and its isolation from any other large population centers in the state, the opening of a new business appeared to make little economic sense. One wouldn't expect to see enough STD, birth control, PAP smear, let alone abortion patients, to

keep the business open.

But one other important detail puts the plan in perspective – Ontario was situated right on the border of Oregon and Idaho, only about an hour's drive from Boise, Idaho's most populous city. Boise, statistics tell us, was home to the women

patients get the care that they need, even in states where abortion is banned or severely restricted," McGill Johnson told *CNBC* (*CNBC*, 6/9/22).

Besides building the clinics mentioned above, McGill Johnson talked about increasing staff and funding at existing



responsible for most of Idaho's 1,680 abortions in 2020.

There is no way that the timing and placement of the new clinic was simply coincidental with a June 2022 announcement by Planned Parenthood that its Boise, Idaho clinic would be closing, anticipating the state's actions in light of *Roe's* impending overturn.

A national objective

Planned Parenthood's national president, Alexis McGill Johnson, in an interview with *CNBC* shortly before the Supreme Court's official *Dobbs* announcement, said that the group was focused on, in *CNBC's* paraphrase, "boosting access to abortion in states where the procedure is expected to remain legal, especially states like Colorado and Illinois, which share borders with states ready to immediately ban abortion if *Roe v. Wade* is overturned."

"We want to ensure that

clinics in some of these states so that they could help schedule travel for patients coming from out of state and could handle the overflow.

Deadly Deals on Wheels

Many of the details are still a bit fuzzy, but the same folks who built the Fairview Heights megaclinic on the Illinois side of St. Louis are back at it again, now announcing what it says will be Planned Parenthood's first mobile abortion clinic.

The idea is to have a 37 foot RV that will travel the roads along the southern border of Illinois offering abortions to women in neighboring states like Missouri, Kentucky, and Indiana where abortion has been limited or banned. The RV is set up to include a small waiting area, a lab, and a couple of exam rooms.

See "Mobile," page 12

Surge of support from Hispanics for Republican Party

By Dave Andrusko

Rai Rojas, NRLC's director of Hispanic Outreach, says over and over that Hispanics are "intuitively" and "culturally" pro-life. And any number of survey over the last few years demonstrates they are leaving the Democrats—the party of abortion—in droves.

Take Joshua Young, writing for the *Post-Millennial*. He quotes the results from a NBC/Telemundo survey which "shows that in 2012, Hispanics preferred a Democrat led congress over Republicans by 42 points. By 2022 that difference dropped to 21 points."

Sure, "Latino voters still prefer the Democrat party by a margin of 54 to 33," Young writes, "but the curvature from 2012 to 2022 consistently shows Democrats shedding Latino support in favor of the Republicans."

NBC News' Mark Murray reported that Republican pollster Bill McInturff and

his team at Public Opinion Strategies conducted the poll with Democratic pollster Aileen Cardona-Arroyo of Hart Research Associates. McInturff said, "Being down by 20 points is a lot better [for Republicans] than being down

points in October 2020 in the *NBC/Telemundo* poll."

Following the election of Joe Biden in 2020, *MSNBC* data journalist Steve Kornacki observed

"It was one of the major stories to



by 40 points," referring to past *NBC/Telemundo* studies of Latino voters.

Since 2012, "Democrats led Republicans by 38 points in 2016, 34 points in 2018, and 26

emerge from the 2020 elections, the shift we saw in the Hispanic vote," Kornacki said. "Democrats still won the Hispanic vote in

2020, you can see, by 21 points, but that was down 17 points from 2016. Hillary Clinton won the Hispanic vote by 38, Joe Biden by just 21. And you know what? The trend seems to be continuing in 2022."

As a sign of growing Republican support, Republican Mayra Flores defeated Democratic challenger Dan Sanchez in a special election in June "to finish Rep. Filemon Vela's current term in Texas's 34th Congressional District, flipping an 84 percent Hispanic seat that Biden won by 13 points in 2020," Hank Berrien reported.

"A *CBS* poll at the end of July found that the surge of support among Hispanics for the Republican Party had grown so strong that a virtual tie existed between support for the Democratic Party and the Republican Party."

Survey of post-abortive women shows their emotional trauma

By Sarah Terzo

The pro-life group Heartbeats conducted a survey of post-abortive women. They asked the women what they experienced after their abortion(s).

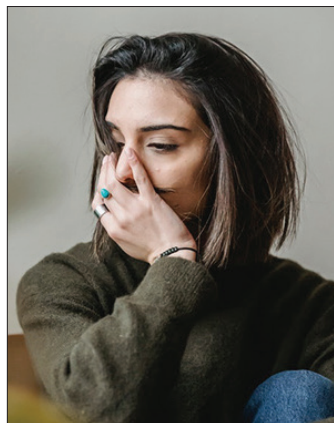
- 92% experience an emotional deadening, either feeling less in touch with their emotions or feeling a “need to stifle their emotions.”
- 86% have an increased tendency toward anger or rage (48% reported they became more violent when angered).
- 86% fear others learning of the

abortion, and have a greater sense of fear in general.

- 82% feel intense feelings of loneliness or isolation.
- 75% said they are less self-confident.
- 73% indicate some sexual dysfunction (increased pain during intercourse, promiscuity, rigidity, or loss of pleasure).
- 63% experience denial, the average period of denial that they reported was 5.25 years.
- 58% have insomnia

or nightmares.

- 57% have difficulty



in maintaining or developing relationships.

- 56% experience suicidal feelings.
- 53% increased or began using drugs and/or alcohol to deaden the pain.
- 39% reported eating disorders that began after the abortion.
- 28% attempted suicide.

Wayne Mcghie, *The Right to Choose* (2022) pp.40 – 41.

Editor’s note. This appeared at Clinic Quotes and reposted with permission. Sarah Terzo is offering a short, free pro-life eBook that exposes the pro-choice movement.

Planned Parenthood Crossing the (Border) Line with Mobile Abortion Clinic?

From page 10

How this is supposed to work

Initially, the plan is for clinicians aboard the mobile clinic to give abortion pills to women up to 11 weeks gestation. The U.S. Food & Drug Administration (FDA) protocol limits this to 10 weeks, but Planned Parenthood ignores this limitation. It appears that women will call Planned Parenthood, be told about the mobile program, and if interested, will discuss their situation and the nature of the chemical abortion process and then arrange a time and place to meet. The mobile unit will then drive and meet them at that location when it is time for their appointment.

Once there at the mobile clinic, it sounds as if women may be given some sort of brief exam and counseling and, once cleared, will get and take mifepristone, the abortion pill. They will then be given the prostaglandin misoprostol, the

second drug in the process, to take later on their own a day or so later.

Presumably the women drive home to endure the bloodiest and most difficult part of the abortion there. None of the stories mention any sort of in person or professional follow up to determine whether or not the abortion has been “successful” or is complete. A certain percentage of these abortions fail, and sometimes women require surgery to complete the process or just to stop the bleeding.

Unmarked roads

No specific route has been identified, other than somewhere “along the southern Illinois border.” Colleen McNicholas, the chief medical officer, says that with the mobile clinic is that patients “might only have to drive five hours instead of nine hours” (*NPR*, 10/3/22).

NPR says that “The organization is reviewing data to determine where patients are coming from and looking at healthcare facilities, churches, and other locations as potential stopping-off points.”

This may not turn out to be as simple as Planned Parenthood believes. Beyond the exurbs across the river from St. Louis, much of the southern Illinois area involved is rural and farmland, not the sort of communities who would be anxious to host a mobile abortion clinic.

Planned Parenthood is starting with the one truck and chemical abortions, but the plan is to add surgical abortions as early as next year and maybe add additional mobile clinics in the future.

Deadly competition

Sadly, while Planned Parenthood may get most of the media coverage and more

of the customers, it is not the only organization going the mobile clinic route. In June of 2022, a new telemedical abortion group called “Just the Pill” announced plans to build a fleet of mobile abortion clinics that would travel the country, concentrating on states like Illinois and New Mexico where abortion was legal but less so in neighboring states (*ABC News*, 6/29/22).

“Just the Pill” was already operating two such mobile abortion clinics in Colorado at the time, performing an average of 16 surgical abortions a day and having 50 patients a day pick up abortion pills. The group hopes to expand its fleet to 30 vans, if sufficient funds can be obtained, adding mobile units to Illinois, New Mexico, and Pennsylvania in the near future.



Memorials & Tributes

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

In Memory of

Joan P. Allgaier
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Sallie Roth

Janet Cicenas
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Larry & Heather Lucas

Chuck Cordell
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Carly Parks

Velma Inman Rowlett
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Baby Michael Sacco
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Kathi Withers
Richard Roberts

Dorothy "Coco" Witt
Dorothy DeCaro
Jim & Teri Dowdy
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Cynthia Krynicki
Paul Stache

Dorothy Wolfe
Wayne Wolfe

In Honor of

Sue Good's 65th Birthday
Marilyn Benedict

Anne L. Hoffman
Cecilia Eifert

Kiernan Kelly
Daniel Buzz

Pastor Matt & Pastor Karla
Theresa DeLau

October 2022

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



Memorials & Tributes

Contribution amount



Your name _____

In memory of _____ In honor of _____

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Fighting against Article 22, a proposed constitutional amendment that would enshrine abortion on demand throughout pregnancy in Vermont

By Dave Andrusko

Not as well known as some other pro-abortion initiatives, Vermont's Article 22, the proposed amendment that would enshrine in the Vermont Constitution an unrestricted right to abortion throughout all nine months of pregnancy. "If the voters of Vermont don't vote this down, the Vermont legislature would be constitutionally prohibited from passing any law that could restrict abortion, regulate abortion procedures, or protect the unborn in any way at any point in their development," according to Melissa Ohden, who survived a saline abortion at 31 weeks in 1977.

As Rep. Anne Donahue wrote, "We know a majority of Vermonters do not support third trimester abortions, yet the state is being flooded with two messages: that this amendment is necessary to preserve the rights "lost" by the overturning of *Roe v Wade* (totally false, given Vermont's current laws! See Act 47), and Vermonters are being told that elective third terms abortions don't happen. When people recognize those are not accurate statements, many shift their position and are ready to vote, "no." Getting enough of those shifts is not an insurmountable challenge, but is getting harder and harder."

But if are to believe a nurse from the University of Vermont Medical Center writing a Commentary, "The intent of

Article 22 is to preserve the status quo of abortion access/care as it stands right now." In one word, no. Or, in three words, that's not true. And that

potentially her license if she refused," according to Roger Severino, who served as the director of the Office of Civil Rights at the United States



is also not true for conscience protections in particular.

They do late—real late—abortions at UVMC. The nurse insists that "There is a written policy that states that any employee can object to participating in providing care on the basis of moral, religious or ethical grounds."

A civil suit was filed by a different nurse, alleging that she was forced "to assist in the termination of a child's life on pain of losing her job and

Department of Health and Human Services from 2017 to 2021.

It was, he wrote, "the most open and shut conscience case in over a decade." The Trump administration pressed hard, while the Biden administration

quietly, and voluntarily, dismissed the case. No admission of guilt, no injunction, no corrective action, no settlement, no nothing. Worse yet, because

the victim has few to no options to sue on her own (due to nuances around private rights of action), the Biden administration is effectively giving UVMC a full pardon and will continue to give it federal funds, despite it having been found by HHS to have violated the law.

Back to the Commentary. It ends this way:

Finally, I'd like to make an honest suggestion or plea. I think that it would be an incredibly meaningful thing if we could all (pro-life and pro-choice communities alike) stop funneling our money, time and energy into the debate over abortion. Instead, we could leave the decision to have an abortion (or not!) between a woman and her doctor.

So pro-lifers should just concede what has been a bedrock foundational principle for us for 50 years: that it **isn't** a decision just between a woman and her doctor. That there is somebody else that we will forever and a day speak up for: the defenseless unborn child.

Planned Parenthood (who else?) says that “late-term abortions” don’t exist

By Dave Andrusko

Well, who could possibly argue? Who knows more about snuffing out unborn children than Planned Parenthood? So when “Holly” tells us “There’s no such thing as a ‘late-term abortion,’” we can confidently nod our head in agreement, right?

Actually, no, we can’t. Let’s talk about her evidence and what Holly ignores.

Alright, let’s work backwards, starting with her last paragraph:

Bottom line: “Late-term abortion” isn’t a thing, except in the imaginations of anti-abortion rights activists. Abortion is health care, and health care is personal. People deserve to be in charge of their own medical decisions throughout their pregnancy. Lawmakers who care more about control than health or personal freedom don’t deserve to make those decisions for you or anybody else.

Her “proof”?

A pregnancy is “full term” from 39-40 weeks, and “late term” at 41 weeks. Those are medical terms used by doctors.

I guess that settles it. There really **isn’t** such a thing as a late-term abortion, right? Why? Because full term is “39-40 weeks” and late-term is “41 weeks.” And, oh by the way, abortion is “health care.”

So an abortion at 38 weeks is...what? I’m guessing few

would disagree that this is a late-term abortion. Pro-abortionists, of course, immediately conjure up excuse after excuse (as does Holly) as if the reasons for the abortion negate the fact that this is a huge, full-developed baby.

Keep in mind that it is, as NRL Director of Education & Research Dr. Randall K. O’Bannon observed, “extremely telling that the author never really discusses exactly what babies are like and can do at any of these stages.”

It’s also sort of awkward to try and claim that there are no such things as “late-term abortions” and then defend the industry’s performance of them, sort of “We don’t do them, there’s nothing wrong with them, but when we do them, it’s YOUR fault!”

Holly dismisses abortions performed at 15 weeks, the Mississippi law that was reviewed in *Dobbs*. That’s not “late term.” Just another pro-life “lie.” Really?

Jordan Boyd of *The Federalist* wrote about “12 Facts Everyone Should Know About Babies At 15 Weeks Of Gestation.”

For starters, by this juncture, babies can feel unimaginable pain as they are torn apart.

“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.”

In this short post, Holly doesn’t bring up the canard that

CDC — and numerous states, like California and Maryland, do not. Others, like New



late term abortions are “rare.” Why would she because “Late-term abortion’ isn’t a thing, except in the imaginations of anti-abortion rights activists.” But for the record, Cassy Fiano-Chesser explains how un-rare they are:

According to the CDC’s 2019 Abortion Surveillance Report, the most recent year for which data is available, 1.1% of all abortions were committed after 21 weeks of pregnancy. If you include the second trimester, or after 14 weeks of pregnancy, the number rises to 8% of all abortions.

While 1.1% or even 8% might seem like small numbers, they aren’t. The CDC reports 398,505 abortions committed in 2019. 1.1% of that number equals 4,383 abortions committed after 21 weeks of pregnancy; 8% equals 31,880. Of course, states are not required to report their data to the

Jersey, did not have reporting requirements in place, causing the CDC warn that its data may not be accurate. Essentially, this means the true number of abortions — regardless of gestational age — is almost certainly higher. Using the Guttmacher Institute’s numbers (which are collected directly from abortion providers), 930,160 abortions were committed in 2020. If the CDC’s percentages hold true with 1.1% of abortions occurring after 21 weeks, that equates to an estimate of more than 10,000 human lives per year, and 8% occurring after 14 weeks equates to an estimate of more than 74,000 human lives per year.

You get the drift. Late-term abortions do exist and they are by no means rare.

Pro-abortion Wisconsin Senate candidate Barnes admits he supports abortion up until birth

By Dave Andrusko

Some Democrats are evasive when confronted with the fact that their position on abortion is that you can kill the children up to the moment of birth. Some refuse to answer—see Arizona Democrat gubernatorial candidate Katie Hobbs. Others, such as Mandela Barnes, the pro-abortion Democrat challenging pro-life Wisconsin Sen. Ron Johnson, are more honest: sure, he does, although he quickly attempts to muddy the waters.

John McCormack pinned him down over the weekend at an abortion rally. The headline to McCormack's story is "Mandela Barnes Admits He Opposes Any Legal Limit on Abortion Until Birth: Even if baby and mother are healthy, Wisconsin's Democratic Senate nominee says abortion should be allowed after viability."

In the piece for *National Review Online*, McCormack quotes their exchange:

National Review:

Lieutenant Governor, last night at the [Wisconsin Senate] debate Ron Johnson said that you support abortion up until

birth. You responded you support Roe. But what about after viability, when Roe said that there could be limits? Say at 23 weeks of pregnancy, if the pregnancy doesn't pose a risk to the physical



Mandela Barnes

health of the mother — [the] baby's healthy — should abortion be legal or illegal in those cases after viability?

Mandela Barnes:

It all goes back to this decision being made between a woman and her doctor. That's as simple as it gets.

McCormack points out the overwhelming opposition to post-viability abortion. So, indeed, it is simple: it's that, unlike Barnes, the public says it **should** be illegal. McCormack writes

Viability (mostly a function of lung development) occurs as early as 21 to 22 weeks of pregnancy, and a 2013 study reported that data suggest abortions between weeks 20 and 28 of pregnancy are not performed for "reasons of fetal anomaly or life endangerment."

McCormack made another attempt to see if Barnes was that extreme:

National Review: So even when there's no physical threat to the mother's life and the

baby's healthy after viability?

Barnes attempted to shift the question to the law of another state. But McCormack explained that Wisconsin's law is crystal-clear:

The text of the Wisconsin statute says the prohibition on abortion "does not apply to a therapeutic abortion which: (a) Is performed by a physician; and (b) Is necessary, or is advised by 2 other physicians as necessary, to save the life of the mother."

McCormack moves on to talk about the politics of the race between Johnson and Barnes and how pivotal it is for both parties since the United States Senate is currently split 50-50 with pro-abortion Vice President Kamala Harris casting the tie-breaking vote.

Please take a few minutes out and read "Mandela Barnes Admits He Opposes Any Legal Limit on Abortion Until Birth." at www.nationalreview.com

Love, the heart of the Gospel message, is also the heart of the pro-life movement

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

It has been said, quite rightly, that the pro-life case can be made in purely secular terms. In other words, someone could be an atheist, and still believe in the sanctity of human life. But it is also important to note that people of faith have additional reasons for supporting the pro-life cause, based on Scripture and religious teaching.

While perusing the Sunday bulletin from my church, I came across an interesting piece by a woman named Ruth Weber of Davenport, Iowa. Weber deftly addressed the issue of minors having abortions.

“Minors need parental consent to have their ears pierced. Minors need parental consent before caregivers can give them an aspirin or their prescribed medicine. Minors need parental consent to go into the military. Minors need parental consent to marry.

“Why then is Planned Parenthood (the nation’s largest

abortion operation) so against parental consent before they perform abortions on minor girls? I will tell you why—they will lose money! Planned Parenthood is big business.”

Weber also wrote about the clear-cut nature of the issue of abortion.

“There is no common ground here. You are either pro-life or pro-death. A baby is a gift from God to be loved and cherished—not be thrown back in His Face.”

Love...the heart of the Gospel message...is also the heart of the pro-life movement. As pro-life advocates, we love mother and child...father and uncle...grandmother and grandfather. It is a love without limits and without qualifications.

Weber summed up her argument with this succinct observation: “A baby has a right to life and a right to expect that we, our judges and our laws, will protect them.”

And in that simple statement lies an undying truth: in a civilized society, we have the obligation to protect the most vulnerable from harm. That

is why, in addition to pro-life ministry, we need protective pro-life laws.

Laws—and the love behind them—save lives.



The truth about abortion and euthanasia compels us to work toward a civilization of love, where every life is cherished and protected

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

I did not grow up thinking I would become a pro-life advocate. During my childhood, I considered occupations ranging from hairstylist (my grandfather was a barber) to judge (I watched a lot of law-and-order TV shows). I was also captivated by the idea of becoming a journalist—a desire that would become a preoccupation as I grew older.

As I recall, I did not have a clear picture of abortion until I was in 7th grade and our school principal led us down to the state Capitol, where we conducted a silent, prayerful protest against the 1973 U.S. Supreme Court decision known as *Roe v. Wade*. That single court decision led to the deaths of scores of millions of unborn babies and left their mothers grieving for the children they would never hold in their arms.

At a pivotal point in my life, I received a calling to pro-life work. It has been a joy to see babies welcomed into the world that might otherwise have perished in their mothers' wombs. It has also been a privilege and an honor to work toward passing meaningful

legislation that protects both mother and child from harm.

Now that *Roe v. Wade* has been overturned, this is a critical time in the life of the pro-life movement—a time when advocates for life must be more persuasive and courageous than ever before. It is likely

their descendants to abortion. Others have had their families shattered by the horror of assisted suicide...or have had loved ones threatened by euthanasia.

Please rest assured of my prayers as you continue on the path to healing and hope.



that all of us, to a greater or lesser extent, have struggled to overcome the damage caused by an anti-life culture.

Some are mothers and fathers who have sacrificed their own children...some are grandparents who have lost

All of us can serve as wounded healers, using the lessons we have learned about the devastation of death culture to reach out to others who are struggling. Whether you are new to the pro-life movement or a seasoned veteran, you can

make great strides in advancing peaceful pro-life action. There are so many people ready to cheer you on, giving you encouragement for your pro-life advocacy, whether that takes you to the halls of pregnancy resource centers or to the corridors of your state Capitol.

The truth about abortion and euthanasia compels us to work toward a civilization of love, where every life is cherished and protected. It is a sacred calling that springs forth from our very humanity. Our duty to our fellow brothers and sisters on this planet means that we must defend human life at all stages—from the dawn to the twilight of life.

We are so fortunate in the pro-life movement to be witnesses to the many real-life tales of transformation and redemption which give us hope that the most vocal opponents of the pro-life cause can become ambassadors for the cause of life.

As pro-life advocates, we are always ready to put out the welcome sign for others to join our compassionate, life-affirming cause!

Pro-life doctors refute ‘blatant misinformation’ on prenatal heartbeats

By Sam Dorman

A series of pro-life doctors say Georgia Democrat Stacey Abrams and others are incorrect to assert that preborn children’s heartbeats at six weeks are a “manufactured” sound designed to oppress women.

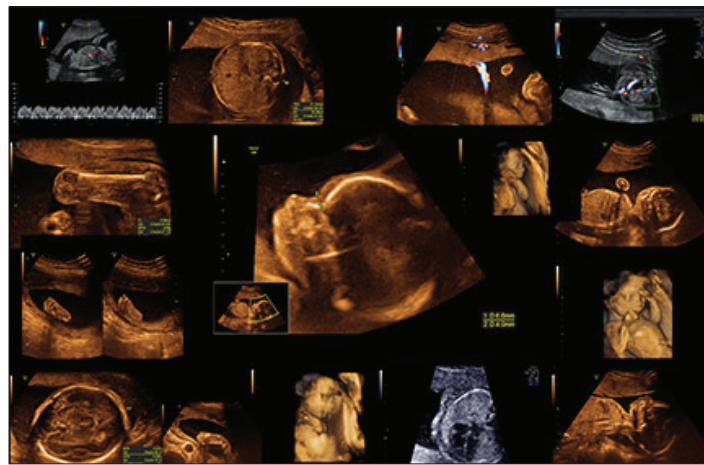
“The narrative that embryos don’t have heartbeats at six weeks’ gestation is a blatant example of misinformation that can be corrected by studying basic embryology,” Dr. Donna Harrison, CEO of the American Association of Pro-Life Obstetricians Gynecologists, told *Live Action News*. “In fact, at six weeks’ gestation, the embryonic heart rhythmically contracts to pump blood through its arteries, which flows to the placenta to exchange carbon dioxide for oxygen. To call this anything other than a beating heart is dishonest, and serves only to dehumanize preborn people.”

Abrams, who is running for governor, made her comments at the Ray Charles Performing Arts Center in Atlanta. “There is no such thing as a heartbeat at six weeks,” she said on Tuesday. “It is a manufactured sound designed to convince people that men have the right to take control of a woman’s body.”

Abrams seemed to be referring to the sound emitted from doppler technology, which allows doctors to track blood flow in preborn humans.

Dr. Grazie Christie of the Catholic Association explained the process in a video posted to Twitter. “What we are hearing is a doppler signal of blood flowing in one direction and in the other,” she said, noting that this can be detected as early

as “five weeks LMP [after last menstrual period].” She added, “that’s what we see when we put our cursor over the heart. We watch the blood – we can see the bloodflow on color doppler ... as it changes directions, and we can watch the valves flutter and we can watch the walls of the heart also move as the



baby’s heart beats.”

“Interestingly,” she said, “fetal heartrate is much faster than mom’s. That’s how we know we’ve found the baby’s heartbeat ... so, Stacey Abrams is wrong. This is not just a manufactured thing. This is science. It’s called the science of doppler – doppler signals. It has to do with sound waves. It’s all very complicated but very beautiful.”

Dr. Kathi Aultman, a retired OBGYN and former abortionist, told *Live Action News* that “a picture is worth a thousand words.”

“By inserting a small scope attached to a camera through the cervix and placing it against the clear amniotic membrane we can see the embryo as it is developing inside the fluid filled amniotic sac within

the uterus,” she said. She pointed to a video published by the Endowment for Human Development and noted that “we can see the heart beating and pumping blood at 4 weeks and 4 days from fertilization which is 6 weeks and 4 days gestational age (weeks from the last menstrual period).”

pregnancy will continue.”

Dr. Jeffrey Wright, a maternal fetal medicine specialist, compared the process to taking a photograph. “[W]hen you see an image of a baby with an ultrasound machine, it is accurate to say that the machine is creating the image,” he told *Live Action News* via email. “That does not make the baby any less real.”

He added, “If you took a selfie of yourself at the beach and sent it to your friend, your friend could accurately say, ‘that’s not really you, it’s just an image manufactured by your phone’. That doesn’t make your beach trip any less real. A tiny baby’s heart does not make enough sound for you to hear directly using your ears. That baby is wonderfully cradled inside a womb that your eyes cannot see through.”

“When the ultrasound machine detects fetal cardiac motion and blood flow, and then displays it as a moving picture we can see or translates it into sound we can hear, it provides us with clear evidence that a tiny human being is indeed alive with a beating heart.” Dr. Wright stated.

Abrams’ comments came amid a raging debate over the nature of human life in the womb. Part of the reasoning behind Mississippi’s 15-week ban, by which the Supreme Court overturned *Roe v. Wade*, was that science has revealed the reality of life for preborn children. Sen. Lindsey Graham (R-S.C.) recently proposed a law that would enact a

According to *The Developing Human: Clinically Oriented Embryology*, “The heart begins to beat at 22 to 23 days. Blood flow begins during the fourth week, and heartbeats can be visualized by Doppler ultrasonography,” she also noted. “Our ears alone cannot hear the heartbeat of the embryo or fetus [within] the womb but that doesn’t mean it isn’t there. We can see and hear it on ultrasound just as we can see and hear the adult heart on ultrasound. The sound heard by doppler at 10 weeks is also a sound that is generated electronically. Using ultrasound to detect the embryonic heartbeat is the standard of care in obstetrics and we know that once the heartbeat can be detected within the uterus that there is a strong chance that the

National Right to Life Praises Republicans’ “Commitment to America” and Its Promise to Protect the Lives of Unborn Children and Their Mothers

Democrats Would Embrace Abortion at Any Time and for Any Reason

WASHINGTON — The Republican leadership presented its “Commitment to America,” a statement of the Republican Party and what it stands for—which includes protecting unborn lives.

“National Right to Life praises Republican leaders for their commitment to women and their unborn children,” said Carol Tobias, president of National Right to Life (NRLC). “In contrast, the Democratic Party is pursuing abortion for any reason and at any time in pregnancy.”

The Democratic Party has committed to passing the so-called Women’s Health Protection Act (WHPA). The Democratic proposal would make sweeping changes, including expanding taxpayer

funding of abortion, and eliminating requirements that a woman be given information



about the development of her unborn child so she can make an informed decision.

Tobias continued, “The Democrats’ so-called Women’s Health Protection Act is far-reaching legislation that would entrench abortion on demand in federal law and running

roughshod over the will of the American people. Democrats would endanger the lives

of women and their unborn babies.”

The Democratic bill would invalidate most previously enacted federal limits on abortion, including federal conscience protection laws and most, if not all, limits on government funding of

abortion. The Democrats’ legislation would also invalidate state laws regarding parental involvement and consent for a minor’s abortion.

“The Democrats’ legislation would nullify nearly all existing protective state laws,” said Jennifer Popik, J.D., director of Federal Legislation for National Right to Life. “In addition, the Democrats would also prohibit states from adopting new protective laws in the future.”

Popik continued, “The difference between Democrats and Republicans couldn’t be plainer. While Democrats maintain a nearly uniform support of abortion without limits until birth, Republicans seek to protect unborn children and their mothers.”

Post-*Roe*, more focus on state supreme courts

By Dave Andrusko

Pro-lifers have long recognized the importance of the Supreme Court. After all the justices gave us *Roe v. Wade*—essentially legalizing abortion on demand—but also the cause of unborn children. Most recently the Kansas Supreme Court, on a 6-1 vote, shot down the Kansas Unborn Child Protection from Dismemberment Abortion

it from the majority opinion, the law, S.B. 95, prohibits abortions in which a fully-formed unborn child is torn apart with sharp metal tools, bit by bit, while still alive, inside her mother.

The Associated Press's Andrew Demillo wrote a thoughtful story that ran in the *Washington Post* headlined “Abortion ruling intensified fight over state supreme courts.”

Demillo cites Illinois as a state “surrounded by states with abortion bans that took effect after *Roe v. Wade* fell,” that “is one of the few places where the procedure remains legal in the Midwest.”

Abortion-rights supporters are worried that might not last. Their concern is shared in at least a half-dozen states, and this year it's not just about state legislatures. In Illinois, Democrats hold

a supermajority, and the governor, a Democrat, is expected to win reelection.

Instead, Republicans could be on the verge of winning control of the Illinois Supreme Court, where Democrats currently hold a 4-3 majority. Two seats are up for election in November, prompting groups that have normally set their sights on other offices to concentrate attention and money on the judicial campaigns.

Sarah Standiford, national campaigns director for Planned Parenthood Action Fund, told Demillo, “It's increasingly clear that the way access is playing out is at the state level, which puts the role of the court in stark relief.”

Demillo also sites Michigan, Ohio, North Carolina, Kentucky, and Kansas as states with competitive contests for seats on the state's highest court that bear watching.



Dobbs v. Jackson Women's Health Organization—which overturned *Roe*. Our attention has also always been on the state's supreme courts.

Act and in the process found in various penumbras and emanations in the state Constitution's Bill of Rights a “right” to abortion.

Some have been disasters for Although you'd never know

Including the father in the conversation about abortion may just save a life—and save a man and woman a lifetime of emotional pain

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

Fathers are far too often forgotten, when it comes to the protection of preborn babies' rights.

But a long-time pregnancy care center in Pennsylvania is trying to change that with its fatherhood initiative.

Morning Star Pregnancy Services, based in south central Pennsylvania, is reaching out to the fathers of preborn babies with care, concern, and compassion.

Morning Star cites an intriguing statistic—an astounding 85 percent of women who have had an abortion say they would have had their babies—if only the fathers of those children had been supportive.

This is where Nurse Clinic Manager Steve Morris comes in.

In Morning Star's recent newsletter, Morris said:

"A father's presence is extremely influential and helpful for a mom strongly considering abortion. We hear it time and again from moms: 'If he had been more involved, I would have been less likely to choose abortion.'

"From a woman's perspective, when the dad says, 'I support your choice,' she hears and interprets that as 'she is on her own.' What she wants to hear is

'I'm going to support you, let's do this together.'"

Morris added, "It's important for me to sit down with these

Morris discusses with each dad who comes in for counseling the idea of fatherhood and a vision of it moving forward.

he doesn't like to hear it, but it hits home."

Kudos to Morning Star and all the pregnancy care centers



dads and ask them what they are thinking and how they envision themselves in this decision-making process. I empathize with the dads in our counseling sessions, and I tell them that their opinion weighs heavily in the decision."

"I also emphasize he has a responsibility. There is something so fundamental for men to step up to responsibility—it just resonates with guys. I remind him that this was both of their decision in creating this child. Sometimes

throughout the country that reach out to fathers with love and understanding. Including the father in the conversation about abortion may just save a life—and save a man and woman a lifetime of emotional pain.

The transformative power of ultrasounds to change the way pregnant women understand their unborn child

By Dave Andrusko

One of my daughters was president of a local Women Helping Center. If anyone would know the crucial importance of ultrasounds, it would be her and the staff. By making concrete what to a woman facing an untimely pregnancy is essentially an abstraction, ultrasounds dramatically change the decision-making calculus.

By slowing down the rush to death, ultrasounds offer an abortion-prone woman (or girl) a chance to catch her breath and calm her nerves. Which is why, of course, pro-abortionists hate women helping center in general, ultrasounds in particular.

Let's place ultrasounds in the context of "science," which to pro-abortionists is limited to whatever they insist furthers their cause. So when pro-abortionists find something—anything—they think can further the process of desensitizing the public to the horrors of abortion, it is "real science."

By contrast, when pro-lifers find something—anything—that offsets the callous attempts of the Abortion Industry to separate mother from unborn child, we're indulging in "phony science."

When we offer irrefutable evidence, we're said to have "hijacked" it.

I thought of this dynamic when I re-read "The Iconic Photo Hijacked By the Anti-Abortion Movement," by Amarens Eggerat, whose grumpy piece for VICE Netherlands was reposted for an American audience here.

Pro-life veterans would

guess, correctly, that she is referring to "Swedish photographer Lennart Nilsson's book of photography *A Child Is Born*, which became a global sensation after appearing in Life magazine in 1956 [she means 1965]. Nilsson captured



extreme closeups showing the different stages of human development, from fertilised egg to fully-formed baby."

It's been a little over five years since the passing of Nilsson, a photojournalist extraordinaire. As we have written dozens of times, the impact of the cover of Life magazine is incalculable.

The cover—"Fetus, 18 weeks"—continues to receive a well-deserved second look as "one of the 20th century's great photographs," to quote Charlotte Jansen, writing for the British (and very pro-abortion) newspaper, The Guardian in 2019.

Here's how Jansen began:

In April 1965, Life magazine put a photograph called Foetus 18 Weeks on its cover and caused a sensation. The issue was a spectacular

success, the fastest-selling copy in Life's entire history. In full colour and crystal clear detail, the picture showed a foetus in its amniotic sac, with its umbilical cord winding

miracle of life, and really gave viewers the impression they were staring directly into the womb, looking at a foetus calmly floating around like a little astronaut.

But since, "In reality, Nilsson photographed miscarried and aborted fetuses," somehow decades later that should offset the impact on countless millions of mothers and fathers as they happily look at a four-color ultrasound of their unborn baby. Or at least make it suspect, to the likes of Amarens Eggerat.

What rubbish.

Again, Eggerat's real gripe is less with us than it is with the transformative power of ultrasounds to change the way we—and especially pregnant women—understand the unborn child. Read this convoluted paragraph:

And then, the public window into women's private domain became political. Before ultrasound technology, anti-abortion activists often relied on religious or moral arguments against safe access to abortions. But the powerful imagery of prenatal scans helped them strengthen their cause—triggering people's protective instincts towards what looked like a tiny unborn child.

off to the placenta. The unborn child, floating in a seemingly cosmic backdrop, appears vulnerable yet serene. Its eyes are closed and its tiny, perfectly formed fists are clutched to its chest.

So to return to Amarens Eggerat, how is it that pro-lifers "hijacked" the photo? I've read the article several times, and I'm still stumped.

The best I can gather is that it's not so much what pro-lifers did with what came to be known as the "Nilsson photos," as it is how the photos were one of the very earliest "windows on the womb."

To be sure, she does babble on about

The colour photographs were one of the first representations of the

See "Power," page 28

Yankee slugger Judge hits #62, credits the constant support he had from his adoptive parents

By Dave Andrusko

As the New York Yankees star outfielder, Aaron Judge knows baseball history. He knew Roger Maris held the single season American League record for homeruns—61—and once he tied the record, it took him 6 days pressure packed days to hit #62.

Tuesday night he crushed one high and deep to leftfield and entered the ranks of baseball immortals. Not bad for a 30 year old, a Christian, who just got married, and who was adopted at birth by his loving parents, Wayne and Patty Judge.

After the game, “Judge told reporters that his family was at the front of his mind as he ran around the bases,” Randy Miller writes.

“I was thinking of my wife, my family, my teammates, the fans’ he said. ‘All that was running through my head, just the constant support I’ve had through this whole process.’”

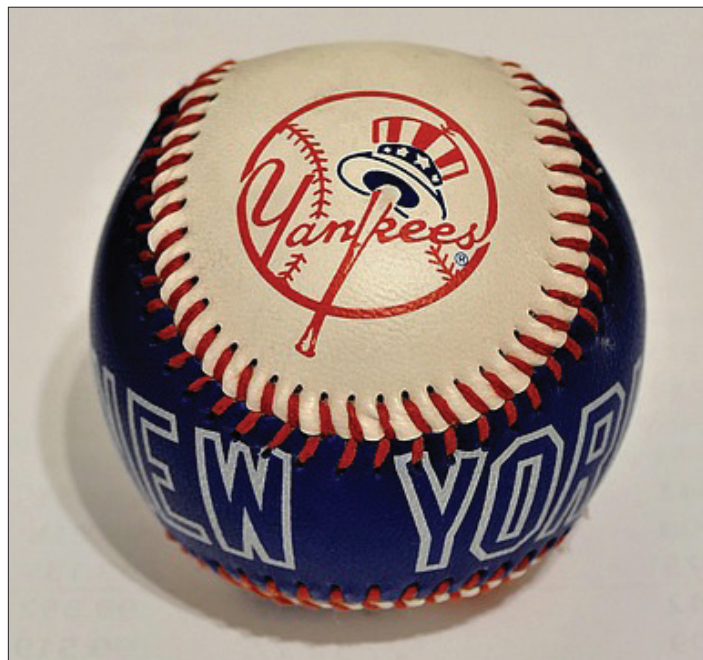
But there’s much more there, according to Nancy Rosenhaus of Adoption with Love:

Talented and respectful, the Yankees’ VP of scouting calls Judge the “super

package.” And Aaron Judge truly is, giving most of the credit to his parents, Wayne and Patty Judge,

devoted, hardworking, respectful man from day one.

Judge professed to the New York Post,



two retired physical education teachers from California. While they did not exactly give him his 6-foot-7, 275-lb stature, they did teach Aaron how to be a

“My parents are amazing, they’ve taught me so many lessons. I honestly can’t thank them enough for what they’ve done for me.” Of his bond with

his mom and dad, he proudly stated, “I’m blessed.” ...

“I know I wouldn’t be a New York Yankee if it wasn’t for my mom. The guidance she gave me as a kid growing up, knowing the difference from right and wrong, how to treat people and how to go the extra mile and put in extra work, all that kind of stuff. She’s molded me into the person that I am today.”

Judge was born April 26, 1992, in Linden, California, about 85 miles from Oakland, “and was adopted the following day,” according to Newsday’s Steven Marcus.

“Mention his adoptive parents, Wayne and Patty, and Judge smiles,” Marcus writes. “Some kids grow in their mom’s stomach; I grew in my mom’s heart,” Judge said. “She’s always showed me love and compassion ever since I was a little baby. I’ve never needed to think differently or wonder about anything.”

New Poll Debunks Media Claims That Pro-Life Stance Will Doom GOP

By Scott Whitlock

The new talking point coming from the liberal media is that being strongly pro-life will doom Republican candidates in the midterm elections. Both *CBS*, *MSNBC* and *CNN* have hyped supposed GOP “extremism” on the issue to cheer up Democrats and scare Republicans. So it’s not a surprise that the networks ignored good news for Greg Abbott, the strongly pro-life governor of Texas.

Abbott, who hailed the overturning of *Roe*, who signed a trigger law banning most abortions in the state, represents the views of his state. As noted by *The Washington Examiner’s* Paul Bedard: here’s data from an Emerson College/*The Hill* poll:

“Voters were asked which candidate they align with most on the issue of abortion rights. Forty-nine percent align with Abbott while 44% align with O’Rourke.”

That clearly doesn’t fit the

media narrative of impending doom for pro-life Republicans. Drawing conclusions from a single poll is risky, but multiple recent surveys show a surge for the Republican. According to



Real Clear Politics:

- Abbott leads pro-abortion Democrat Beto-O’Rourke by eight in the Emerson poll.
- Abbott leads by seven in the September 18 Spectrum News/Siena poll.
- Abbott leads by ten

in the September 16 KHOU-TV poll.

- Abbott leads by 11 in the September 13 Dallas Morning News poll.

30, *CNN* hyped a turning point for Democrats. Here’s Brianna Keilar:

The Supreme Court overturning *Roe v. Wade* has energized voters and made abortion rights a flashpoint in the midterm elections. It’s given Democrats a boost. Now, some Republican candidates who were strongly opposed to abortion are suddenly softening their stance.

If Democrats don’t win big because of abortion, if candidates like Greg Abbott in Texas actually do better because of being pro-life, will journalists point it out? Don’t hold your breath

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

When Kansas voted no on a confusingly-worded abortion referendum in August, *MSNBC* obsessively devoted 65 minutes over 12 hours to the vote, touting it as a victory against extremism. On August 29, *CBS* pushed new polling suggesting Democrats might save their majorities by promoting abortion. On August

8th Circuit dismisses challenge to South Dakota law that requires a pregnant woman to consult with a pregnancy help center before undergoing an abortion

Culminates 11 year long legal fight

By Dave Andrusko

Good news from the 8th Circuit Court of Appeals. Chief Judge Lavenski R. Smith, Judges Duane Benton, and Bobby E. Shepherd issued judgments dismissing the case and vacated an injunction that had blocked enforcement of a requirement that a pregnant woman consult with a pregnancy help center before undergoing an abortion.

Judge Karen Schreier [a Clinton appointee] had issued the original injunction in 2011 and reaffirmed her conclusion last December.

No legal or factual change since the court's preliminary injunction in 2011 warrants dissolution of the preliminary injunction of the pregnancy help center requirement. It continues to likely infringe on women's right to free speech secured in the First Amendment, and it presents an undue burden on a woman's right to access abortion.

According to its court filing South Dakota saw the issues very much differently than did Judge Schreier:

The record in this

case reveals that pregnant women are being railroaded into abortions they do

or to screen for or prevent coercion, and in fact will facilitate coerced abortions. To

party, tightly regulated pregnancy help centers (PHCs). PPMNS challenged the third party counseling requirement as unconstitutionally compelling speech and unduly burdening abortion. The district court granted a preliminary injunction in 2011 and, in 2021, after ten years of discovery and statutory amendments, denied defendants' and intervenors' joint motion to dissolve that injunction.

The 8th Circuit's decision dismissing the lawsuit was just two paragraphs long. According to *Bloomberg Law*

The US Court of Appeals for the Eighth Circuit removed two appeals from its calendar, one filed by the state and one filed by crisis counselors Alpha Center and Black Hills Pregnancy Centers. They had been set for oral argument on Oct. 18.

not want. Planned Parenthood of Minnesota, North Dakota and South Dakota (PPMNS), focused on the volume of abortions and bottom line revenue, cannot be counted on properly to inform a pregnant woman's consent to abortion

protect women against coerced abortions and to fill the void created by PPMNS's deficient informed consent and screening practices, South Dakota enacted a statutory program providing women considering abortion free counseling at independent, third



EWTN takes “deep dive on Catholic voters’ attitudes and trends” ahead of the midterm elections

By Dave Andrusko

A new poll, the second of three, commissioned by the *Eternal Word Television Network* [EWTN] and conducted by the Trafalgar Group “finds that across party lines, Catholics are strongly in favor of restrictions on abortion and support public funding of pro-life pregnancy resource centers,” according to Wallace White.

On the abortion issue, “75% of participants who attend Mass at least once a week agreed with *Roe*’s reversal.”

The polls are the product of a partnership between *EWTN News* and RealClear Opinion Research “to conduct a deep-dive poll on Catholic voters’ attitudes and trends ahead of the 2022 midterm elections.”

This poll, taken from September 12 to September 17, reveals that “a vast majority of American Catholic voters who regularly attend Mass support *Roe v. Wade*’s reversal, oppose Joe Biden, and favor Republican candidates,” Jean Mondoro reported.

Asked “If the 2022 elections for Congress were held today,” 48% said they would vote Republican while 44% responded that they would vote Democrat. “Additionally, 58% of Catholic voters did not believe Biden should run for re-election, and only 22% would support a second term,” Mondoro said.

Among the highlights *EWTN* noted

- 58.4% of Catholic voters believe President Joe Biden should not pursue a second term in 2024, while 22.2% believe he should pursue a second term.
- 51.8% of Catholic voters disapprove or strongly disapprove of President Biden’s job performance, while 46.2% approve or strongly approve.
- 73.4% of Catholic voters support limiting abortion to 15 weeks or less. Only 13.4% of Catholic voters support abortion up to the moment of birth.
- 67.4% of Catholic voters support public funding for Pregnancy Resource Centers, where pregnant women can seek help with alternatives to abortion. 18.3% opposed public funding for the centers.
- 60.7% of Catholic voters believe health care workers should not be obligated to engage in procedures

that they object to based on moral or religious grounds, while 25.3% believe

development the poll found”: a “decline in support for the president and Democrats in general among Hispanic



they should be forced to perform such procedures

“Catholics are historically a swing vote but those who attend Mass at least weekly are unquestionably at odds with this administration even as support from Hispanic Catholics is eroding for the president and his party,” said Matthew Bunson, Executive Editor of *EWTN News*. “These voters could very well decide who controls the House and Senate.”

Speaking of Hispanic Catholics, Bunson said, “One potentially significant

Catholics — historically a reliable Democrat voting bloc. When asked how they feel Biden is handling his job as president, 50% of Hispanic Catholics say they strongly approve (11%) or approve (39%), while nearly 47% say they either disapprove (7%) or strongly disapprove (40%).”

The first poll was taken in July. The second poll surveyed 1,581 Catholic voters and has a margin of error of 2.5%. The third and final poll “will be conducted in the days leading up to the midterm elections, which will take place on November 8.”

Planned Parenthood opening first “RV clinic” in Southern Illinois to abort women in states that have passed protective laws

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

In a brazen attempt to circumvent state laws, abortion giant Planned Parenthood plans to open a “mobile” abortion center in southern Illinois “to expand its footprint near the state’s borders with Missouri and Kentucky,” *Axios* reports.

According to *The Hill*, Planned Parenthood hopes to attract customers from sections of the Midwest that have enacted laws to protect preborn babies and their mothers from the harm of abortion.

The move comes after the historic *Dobbs* U.S. Supreme Court decision in June, which overturned the tragic *Roe v. Wade* ruling. That fateful 1973 High Court decision had resulted in an estimated 63 million abortions in the U.S.

A trigger law in Missouri went into effect the day of *Roe*’s overturn, prompting Planned Parenthood to reportedly stop performing abortions in the

state. Planned Parenthood now hopes to attract clients from the state by parking its abortion RV in Illinois.



The Hill reports that the abortion center on wheels will perform chemical abortions up to 11 weeks gestation. However,

by early next year, the mobile abortion center could also be performing surgical abortions.

This latest development

deems necessary. The retrofitted RV also gives a whole new meaning to the phrase “back alley abortions.”

There was a time when backers of abortion claimed they wanted abortion to be “safe, legal, and rare.” Planned Parenthood was obviously never interested in making abortion ‘rare.’

But abortions are not “rare” nor “safe” for the preborn baby whose life is ended. Chemical abortions can lead to a range of complications, including hemorrhaging, which make them dangerous for the mother. And launching an “abortion on wheels” project is hardly evidence of making abortion rare.

For the sake of moms and babies, it is far better to make abortion unthinkable.

The transformative power of ultrasounds to change the way pregnant women understand their unborn child

From page 23

She is recycling tiresome pro-abortion nonsense about how ultrasounds somehow made women “invisible” because they “could only be interpreted by specialists.” In a distorted sense, that may have been partially true in the 1970s and 1980s, but no one has to tell

parents of unborn babies what they see on the screen today.

We were once at a banquet Saturday at our daughter’s Women Helping Center when the medical director showed the audience ultrasounds from the 1970s, 2000s, and today.

You can see the baby’s

head, fingers, and toes in extraordinary detail.

The effect on the audience was absolutely stunning.

You could hear an audible murmur in the room.

No one “hijacked” anything, although pro-abortionists continue to flail away, trying

to persuade themselves that “triggering people’s protective instincts towards what looked like a tiny unborn child” is somehow wrong.

Earth to Eggerat, it is the most natural response in the world.

Survey asks detailed questions, pro-life responses dominate

By Dave Andrusko

A poll taken by McLaughlin & Associates of 1,000 general election voters demonstrates again that if asked specific questions, there is often more support for the pro-life candidate than for the pro-abortion candidate—the “pro-life increment.” The poll shows how important it is that pro-abortion position of unlimited abortion be accurately described.

McLaughlin & Associates outlined three scenarios in the nationwide survey which was taken September 16 through September 22.

In each scenario, the question that was posed began with “Which of the following candidates would you be more likely to vote for in the General Election for U.S. Congress?”

In the first scenario

“Candidate A, who believes abortion takes the life of an unborn child and opposes abortion except to save the life of the mother.



Candidate A also opposes using tax dollars to pay for abortion and says Candidate B’s support for unlimited abortion paid for with tax dollars, even as a method of birth control and even late in pregnancy, is too extreme.”

Or

“Candidate B, who believes a woman has the right to have an abortion at any time with no restrictions and says the decision should be left to the woman. Candidate B supports using tax dollars to pay for abortion and says candidate A’s position of opposing abortion even in the case of rape and incest is too extreme and dangerous to women.”

In this first scenario Candidate A—who is against abortion—received 45.2% of the voters. Candidate B—who supports abortion—received 47.0% of the vote.

Scenario Two:

“Candidate A, who believes abortion takes the life of an unborn child and opposes abortion except to save the life of the mother and in cases of rape or incest. Candidate A also opposes using tax dollars to pay for abortion and says candidate B’s support for unlimited abortion paid for with tax dollars, even as a method of birth control and even late in pregnancy, is too extreme.”

Or

“Candidate B, who believes a woman has a right to have an abortion at any time with no restrictions and says the decision should be left to the woman. Candidate B supports using tax dollars to pay for abortion and says Candidate A’s position of opposing abortion is too extreme and dangerous to women.”

Candidate A—who is against abortion—was chosen by 47.1% of the general election voters. Candidate B who supports abortion garnered 44.2%.

The third scenario poses the question this way:

“Candidate A, who believes abortion takes the life of an unborn child and opposes abortion except to save the life of the mother and in cases of rape or incest or because of a medical emergency. Candidate A also opposes using tax dollars to pay for abortion and says Candidate B’s support for unlimited abortion paid for with tax dollars even as a method of birth control and even late in pregnancy, is too extreme.”

Or

“Candidate B, who believes a woman has a right to have an abortion at any time with no restrictions and says the decision should be left to the woman. Candidate B supports using tax dollars to pay for abortion and says Candidate A’s position of opposing abortion is too extreme and dangerous to women.”

In this case Candidate A—who is against abortion—received 49.3% of the voters. Candidate B—who supports abortion—received 42.1% of the vote.

The survey also gave respondents a lengthy list of options from which to answer the question: “Which of the following comes closest to your own personal position on abortion?”

1. Abortion should only be allowed to save the life of the mother.
2. Abortion should only be allowed to save the life of the mother or in case of rape or incest.
3. Abortion should only be allowed to save the life of the mother, in case of rape or incest or in cases of a medical emergency.
4. Abortion should only be allowed up to 6 weeks of pregnancy when the unborn child has a detectable heartbeat, except to save the life of the mother, in cases of rape or incest, or in the case of a medical emergency.
5. Abortion should only be allowed up to 15 weeks of pregnancy when the unborn child can feel pain, except to save the life of the mother, in cases of rape or incest or in the case of a medical emergency.
6. Abortion should be allowed at any time in pregnancy for any reason.

Here are the poll results. Pro-life (73.7) includes the first five categories below. Exceptions (43.6) are the first three categories.

Pro-life (73.7)

o Exceptions — 43.6

- Only to save life of mother — 13.1
- Save mother, incest, rape — 10.0
- Medical Emergency/Rape — 20.5

Abort up to 6 weeks — 12.5

Abortion up to 15 weeks — 17.6

Abortion at any time — 20.2

Didn’t know/Refused to answer — 6.1

[September 16-22, 2022, McLaughlin & Associates (n=1,000)]

These are important numbers to remember.

Triggered! Planned Parenthood Outraged by Powerful Pro-Life Scenes in Netflix's Marilyn Monroe Drama 'Blonde'

By Dawn Slusher

Someone forgot to tell filmmaker Andrew Dominik that leftist Hollywood doesn't like pro-life scenes or messages in any production. But someone is telling him now. Namely abortion giant Planned Parenthood (PP) who is calling Dominik's Marilyn Monroe drama on Netflix, *Blonde*, "anti-abortion propaganda." Obviously, showing audiences a CGI baby in the womb and telling the truth about abortion is a threat to PP's business.

Blonde, which debuted on Netflix September 28, is a fictionalized version of Monroe's life, based on the eponymous 2000 book by Joyce Carol Oats. Marilyn never had an abortion in real life. Her 3 pregnancies ended either in miscarriage or were ectopic. What is accurate, however, is the depiction of what an unborn child looks like when Marilyn discovers she's pregnant, including the baby's beating heart:

Marilyn: Oh, God, I knew. I guess I knew. I've been feeling so swollen and so happy.

Doctor: My dear, you're healthy. Everything's gonna be fine.

Marilyn: I'm happy I said. I want this baby. My husband and I have been trying for years.

Cass: Hey, Norma. What is it? You look ... happy. What? You think you are?

Eddy: Is this what I think it is?

Marilyn: Yes!

Eddy: Oh man!

Marilyn: Are you happy for me? Us? Gemini and me?

All: Yes!

After Marilyn turns down a starring role in *Gentleman Prefer Blondes*, she writes a letter to her baby, then visits her mother in a mental institution. When she talks about how her mother bravely chose life, the language becomes powerfully pro-life as she points out there would be no Marilyn if her mother had chosen abortion:

Marilyn: To my baby. In you, the world was born, and before you, there was none. How'd you like to be a grandmother?

Gladys: What year is it? What time did we travel to?

Marilyn: Mother, it's May 1953. I'm Norma Jean. I'm here to take care of you.

Gladys: But your hair is so white.

Marilyn: Mm hmm. When you had me, Mother, you weren't married, I guess. You didn't have a man supporting you. Yet you had a baby. That was so brave. Another girl would've ... well, you know ... gotten rid of it. Of me. And I wouldn't be here. At all. There wouldn't be any Marilyn.

Sadly, Marilyn begins fearing her abusive mother's mental illness may be hereditary, causing her to hastily phone her studio connections for help obtaining an abortion. They promise to "take care" of everything, but Marilyn has misgivings and begs the driver to take her back home.

Her requests are ignored by the driver as well as the abortionist. While in a twilight

sleep during the abortion, she dreams she's escaped to her childhood home where she hears a baby crying from the drawer her mother used as a crib for her. Thinking of every woman who has regretted her abortion or was coerced into it, the scene is extremely heart-wrenching:

Marilyn: Oh, the bright lights.

Nurse: You're in good hands, dear.

Marilyn: Please, won't you listen? I changed my mind. Please don't, will you listen?

Doctor: This will put you in a twilight sleep.

Marilyn: No, I want to go back. No! Wait, wait, no! No! Oh, baby.

Now childless, Marilyn accepts the movie role she passed up, and at the screening, she receives a standing ovation. Pain washes over her face as she whispers, "For this, you killed your baby?"

After marrying Arthur Miller, she becomes pregnant again, but the trauma from the abortion has never gone away. That couldn't be more evident than in a scene where she imagines her baby talking to her from the womb, asking her not to hurt him/her:

Baby: You won't hurt me this time, will you? Not do what you did last time?

Marilyn: I didn't ... I didn't mean to.

Baby: Yes, you meant to. It was your decision.

Marilyn: You're not the same baby. You're this baby.

Baby: That was me. It's always me.

Marilyn: Shhh. Shhh. He loves us. He would die for us. He said so.

Sadly, she ends up miscarrying, and she receives a letter from the father of the baby she aborted (who is posing as her father in the letter), which reads profoundly, "The death of an unborn soul may lodge more painfully with us. 'Cause the innocence is unsullied."

After a dalliance with President Kennedy, she undergoes another abortion against her will. By the end of the movie, the unbearable pain of losing her children contributes to her tragic decision to take her own life.

We already know Planned Parenthood works closely with Hollywood to ensure every production fits their pro-abortion narrative so as not to interfere with their business. Thankfully, this one escaped their manipulation.

A PP rep told *The Hollywood Reporter*, "...it's critical these depictions accurately portray women's real decisions and experiences." Unless that woman regrets her abortion and is suffering emotional trauma, as many women do.

Planned Parenthood obviously wants to keep those stories quiet. It's about time someone depicted the truth so these experiences are given the voice they deserve and viewers get to see the reality of abortion and life in the womb.

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

“Aid Access” Defying Law by shipping Abortion Pills to States Where Prohibited, But Want Legal Protection

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

While Planned Parenthood and some of the other established American abortion chains have tried to work within and around new state regulations, foreign abortion pill promoters like Aid Access have continued to defy state limits and tried to find legal ways around them.

Gomperts’ Latest Stunt

Aid Access is a group founded by long time abortion pill activist Rebecca Gomperts, infamous for publicity stunts like the “abortion ship,” the abortion, bus, drone, etc. More than a decade and a half ago, Gomperts launched an international website called Women on Web selling and shipping abortion pills to women in countries where such pills were illegal.

In 2018, sensing that while abortion was still legal here, there were many areas in the United States where it was harder to get, Gomperts set up Aid Access to ship abortion pills to women in America.

According to yet another glowing profile in the *New York Times Magazine*, “Gomperts used her Austrian medical license and prescribed pills to be mailed by a distributor in India – thus operating, she has found, beyond the reach of U.S. authorities.”

Complete sales figures and information on who got the pills are not available but Gomperts reported mailing abortion pill packets to 4,584 women in the U.S. between mid March of, 2018, when the program started, and mid March of 2019 (*Lancet*, June 2022). An earlier *New York*

Times report said that orders for abortion pills from Aid Access tripled in Texas in September of 2021 once the heartbeat law



there went into effect, rising to about 1,100 women a month, blunting some of the expected abortion reduction (*NY Times*, 3/6/22).

Gomperts reports that there has been another jump in the U.S. as a whole once the Supreme Court issued its decision overturning *Roe* (*Reuters*, 6/30/22)

Above the law?

Gomperts has said she doesn’t intend to let federal regulations or state laws be an impediment to Aid Access provision of abortion pills. She defied a letter from the U.S. Food & Drug Administration (FDA) telling her to stop selling and shipping abortion pills. She sued Alex Azar, President Trump’s Secretary of Health and Human Services, when HHS began blocking payments to Aid Access and seizing its packages.

After the Texas heartbeat law went into effect, effectively outlawing most chemical

abortions, Gomperts told *CBS News* [*CBS News*, 9/23/21], “I don’t care about six weeks” [the gestational limit established by

the original Texas law]. “It’s another law that is not based on any scientific evidence, human rights, common sense I will provide [prescriptions for abortion pills] until 10 weeks of pregnancy like I’ve always done”[1].

Looking for laws to protect... abortionists

Now with abortion illegal in many of these states and telemedical abortion sometimes explicitly banned, some of Gomperts’ U.S. prescribers seem to be having second thoughts. They still pledge to keep providing pills to women in “red states” where abortion is limited, but say they’d appreciate more legal protection so that they could not be sued, lose their licenses, or face charges.

The theme of the *New York Times Magazine* feature seems to be a push for some sort of telemedical abortion “shield law.” At the behest of the abortion industry, multiple

states have passed laws saying their state will not investigate, arrest, or extradite an abortionist accused of helping a woman in another state, where abortion may be illegal, get an abortion.

Article VI of the U.S. Constitution governs relationships between the states and generally requires that a person who commits a crime in one state and flees to another is supposed to be, when asked by proper state authorities, delivered up to the first state. How this applies in circumstances where the abortionist never leaves his or her own state, but simply mails pills to the person in the state where abortion is illegal, has yet to be legally tested.

For the moment, abortionists from states with the shield laws do not expect to be extradited, though they worry that they could be arrested if traveling to the state where the abortion was performed or if they visit a state without the shield law.

Things get more complicated

The *New York Times Magazine* feature doesn’t say so explicitly, but gives the impression that many of these “red state” telemedical abortions may have been handled by Gomperts herself, because of the immunity she presumes to have as a licensed but foreign prescriber. Going forward, this appears to be a problem, particularly if Aid Access means to expand.

Those relying on Gomperts or one of her foreign prescribers may end up having to wait two

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“Aid Access” Defying Law by shipping Abortion Pills to States Where Prohibited, But Want Legal Protection

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or three weeks for their pills to arrive from India, and a less sympathetic administration watching for those packages may monitor and seize those shipments before they can be delivered. This is obviously not what Aid Access would consider ideal from a marketing standpoint.

Gomperts and her team already faced a delivery challenge in one form during COVID when flights from India were cancelled and supplies of their abortion pills were cut off. At that time, other Aid Access prescribers based in the U.S. were able to tap into domestic supplies to make up the difference, but circumstances now are different. This was in the “sweet spot” during the pandemic after the courts and the FDA had authorized telemedical chemical abortion but before Dobbs gave states the authority to make all such abortions illegal.

With more now legally on the line, Aid Access prescribers are more reluctant to prescribe abortion pills in states where these are not legal, and U.S. suppliers less likely to let their pills be shipped there. Aid Access continues to work with what they have, but conditions are holding back any expansion plans.

Strength in numbers?

For now, Gomperts is hoping that a few “providers” in states like Massachusetts can test

and see how well these new telemedicine “shield laws” work, enabling Aid Access to increase the numbers of women it “serves.”

Promoters of telemedical chemical abortions think that increasing their numbers will make it harder for “red states” to police or prosecute them. Razel Remen, a family medicine physician from Michigan who is one of Aid Access’ prescribers, told the *New York Times* to “Imagine a very large number of providers prescribing from states with shield laws....It would be really hard to go against all of us. It would challenge the validity of the laws in the red states. It would look terrible for the U.S.”

Suzanne Poppema, a long time abortionist from Washington state who now works with Aid Access, added, “The more people who are doing it, the harder it would be to find us.”

Looking for other ways around the law

Other schemes have been discussed. Francine Coeytaux, who heads Plan C, a group promoting “self-managed abortions with pills” suggested officially prescribing the pills for “miscarriage management” rather than abortion. Though the process would essentially be identical, so that it would work the same in either case, doctors could legally write the

prescription for miscarriage without running afoul of the law, putting the burden on the state to prove otherwise.

For the record, at least one Aid Access prescriber from New York pushed back at Coeytaux’s suggestion, saying that the legal stakes were much higher since Dobbs. “Two years ago, we were talking about how we might lose our licenses. [But now,] The stakes have changed.” With performance of abortion being a felony in several states, with the possibility of prison terms ranging from two to 99 years, the prescriber says “We’re talking about serious criminal charges.”

Gomperts is planning to test mifepristone as a form of birth control, the *New York Times* reports, trying to expand the drug’s applications. The idea is that if the drug has a legitimate, legal use, it will be more difficult for states to control or monitor its prescription.

A few other workarounds have apparently already been put in practice, such as having abortion pills sent to an out of state address for pickup, or sent to a mail forwarding service, which may have no idea what they’re passing on. This way, the pills are shipped to a state where such purchases are legal, but get picked up or resent and used by someone in a state where direct import or use of abortion pills is not officially allowed.

Still committed to the cause

Back in July, Gomperts told *NBC News* that the Supreme Court’s decision overturning *Roe* would not change her work. Though she wanted “liberal states” like California and New York to “just make it possible for the doctors and providers there to ship the pills to other states,” rendering her group’s services unnecessary, current plans were not to limit but expand services (*NBC News*, 7/7/22)

“We are expanding again our capacity, so we can help with all the requests that we get.”

For Gomperts and Aid Access, this means continuing to ship abortion pills to “red states” and “blue states,” no matter the law.

“We will continue to serve women who need it,” said Gomperts. “We’re not going to stop.”

[1] By the way, this “principled” 10 week limit didn’t hold for very long. According to the October 4, 2022 *New York Times Magazine* piece, Aid Access’ current limit is now 12 weeks, enabling it to expand its customer base a couple of extra weeks, despite evidence showing that efficacy decreases significantly (and complications increase) the farther out one goes.

Planned Parenthood’s “abortion care package” trivializes the pain and suffering many women feel

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

Sometimes, even veteran pro-life activists are stunned by developments in Abortion World.

That certainly was the case when I read through a recent publication by Planned Parenthood Keystone, an affiliate of the abortion giant located in Pennsylvania (the Keystone State).

The publication listed different activities in which volunteers could take part. One of them was “Abortion Care Basket assembly parties.” At these events, abortion backers are encouraged to put together baskets which include “heating pads, under pads, fuzzy socks, coloring pages, tea, and more!”

Of course, the problem begins with the name—“abortion care” is a huge misnomer, since abortion is meant to end an innocent, unrepeatable human life. There is nothing caring

about it.

Secondly, the stunt trivializes the suffering women can undergo after undergoing an abortion. A heating pad is

hardly sufficient treatment for hemorrhaging, and fuzzy socks will give scant comfort to a woman whose heart is breaking.

But perhaps what is most disturbing is the idea of distributing coloring pages to women who have just lost their children to abortion. These women can experience profound grief, and the coloring pages can serve as a painful reminder of the uniquely beautiful child who lost her life inside the abortion center’s walls.

No matter how much the abortion industry tries to normalize abortion, the fact remains that it is an inherently violent act which snuffs out a precious human being. It can also emotionally scar the woman who is left to grieve the baby who died.

Abortion does not solve problems. It only creates a new set of problems—ones that can hardly be solved by an afternoon tea and a set of coloring pages.



Pro-abortion Rep. Cori Bush says she was ignored by clinic personnel which went ahead with her abortion even though she told them “I’m not ready”

By Dave Andrusko

It’s not often—it’s a rarity, in fact—that a 100% pro-abortion congresswoman would reveal that she was the victim of a forced abortion.

Rep. Cori Bush represents the first district in Missouri. She was interviewed by PBS’s Margaret Hoover in a program that aired October 7. Hoover started the segment on abortion by characterizing Bush’s feeling as “nuanced.”

Having gone through one abortion, when she went to the abortion clinic as a 19 year old for a second, Bush said, “I thought I was ready.” Perhaps it was the reality of the “assembly line” abortion procedure but as she told Hoover

And I went in and I went through all the steps because they were like, it’s almost



Pro-abortion Rep. Cori Bush

like an assembly line, you know, you go from room to room. And I got into the last room, I was helped up onto the

table by the nurse, and I lay there and I started to think, well, one, I didn’t tell the father that that was about to happen. And I just felt like I needed more time. So I said “No, you know what, I’m not ready.” And the nurse, just, you know, wouldn’t listen to me. And I said, “No, I’m not ready.” And as I’m saying, “No,” they continue to pull the instruments and, you know, get everything ready.

According to *Newsbusters’s* Tierin-Rose Mandelburg
“So you were telling

them that you didn’t want to move forward, and they were ignoring you,” Hoover said.

Bush added, “Oh, they absolutely ignored me, even to the point of like, you know, ‘calm down,’ as if I was the problem.”

Bush then explained that she was looking around for someone to help her, someone to listen to her, but before she knew it, the suction instrument was inside her and started up.

Pro-life doctors refute ‘blatant misinformation’ on prenatal heartbeats

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federal 15-week ban, and states like Texas have passed or considered laws that would limit abortions once a heartbeat can be detected (around six weeks).

Dr. Ingrid Skop told *Live Action News* that Abrams’ comments “demonstrate that abortion supporters are no longer able to rely on euphemisms and must confront the science of early human life.” Skop, who is an OBGYN,

noted, “At approximately 22 days of life, a muscular organ begins to contract in response to electrical signals, propelling blood cells throughout the young child’s body. This is most definitely a heartbeat. Due to its small size, instrumental amplification through ultrasound and doppler technology is required for us to become aware of its presence, but whether or not we see it,

hear it, or want to admit it, the heartbeat exists.” She added, “Discussion around the topic of abortion needs to begin by acknowledging the scientific reality.”

In a thread posted Thursday, Dr. Tara Sander Lee, who has a PhD in biochemistry and did fellowship training at Harvard, similarly said, “Abrams is completely ignoring scientific facts readily available in the

public literature to justify her extreme position on abortion, which deliberately ends the beating heart of an unborn child.”

Sander Lee added that “Abrams is showcasing her complete ignorance of science and denial of reality.”

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

NPR: National Press Release for Kamala Harris Pushing Abortion Across America

By Tim Graham

On Friday, NPR demonstrated its daily mockery of its show title *All Things Considered* with a completely one-sided story on Vice President Kamala Harris who is holding a series of pro-abortion events across America. There were no Republicans. There were no pro-life activists. There was just *NPR* — National Press Release.

The unpaid press secretary was named Deepa Shivaram, and she began with a “moderated conversation” at Central Connecticut State University that was basically a campaign event for embattled Democrat Rep. Jahana Hayes:

JAHANA HAYES:

As women’s rights are being eviscerated all over the country, it is critical that we take action to enshrine women’s reproductive rights into law.

SHIVARAM: This is normally a safe Democratic district, but Hayes is in a tight race this year, one of several that Democrats need to win to try to hold on to the House. She brought in a well-known guest to help make her case.

HAYES: I think that our vice president of the United States of America is uniquely qualified to weigh in on this conversation.

Why is she uniquely qualified? Shivaram didn’t mention that Harris was questioned at this event by Hayes and another expert — Alexis McGill Johnson, president of Planned Parenthood, America’s leading

destroyer of babies. She never pointed out that the Republican in this race, George Logan, is also pro-abortion, and a black man. *NPR* could have mentioned his morning tweet.

Instead, shallow Deepa

message to North Carolina, Indiana and Florida. And back at the White House, she’s been bringing together all kinds of stakeholders

are sort of just going through the motions. And this was not that type of a meeting.

Shivaram “rounded out the story” with Utah state Rep.



sounded like she was promoting Harris For President 2024, finding liberals to tout her pro-abortion passion:

SHIVARAM: The conversation is about protecting reproductive rights. And Harris has been weighing in — repeatedly. This was one of more than 20 events on abortion rights that the vice president has led since May, when the draft opinion reversing *Roe v. Wade* was first leaked.

KAMALA HARRIS: This is admirable to get out here and speak with force and feeling about this issue.

SHIVARAM: She’s been taking this

— lawmakers, faith leaders, health experts — to listen and to energize.

JOCELYN FRYE: She is very much involved in the conversation. She is — these are not — this is not a meeting where she’s just reading talking points.

SHIVARAM: That’s Jocelyn Frye, a Biden administration ally who leads an advocacy group, the National Partnership for Women and Families. She was in one of Harris’s meetings last month.

FRYE: You know, we’ve all been in those meetings when people

Andrea Ramos, who “was at a roundtable with Harris and other Latina state lawmakers back in August.” Ramos said Kamala’s message resonated: “It was really, for me, not only a call of action for abortion access and what we could and couldn’t do but really a call of action just to, you know, remind people this is the midterms, but there’s a lot at stake.”

What happens if the Democrats that Kamala visited all lose? We can guess *All Things Considered* won’t consider that, either. You can listen below.

Editor’s note. Tim Graham is the director of media analysis for the Media Research Center, a media watchdog group. This appeared at Newsbusters. Reposted with permission.

As Elections Approach, a Look Back at the Abortion Agenda of the Democrat-controlled 117th Congress

From page 1

The only thing holding back the Democrat agenda of abortion up to birth, without limits, funded by the government is the Senate filibuster rule requiring 60 votes to advance to a bill.

While the Biden Administration has done what it can administratively to expand abortion at home and abroad, President Biden himself has called for an end to the filibuster on legislation dealing with abortion. This past summer in Madrid, Mr. Biden told reporters,

The most important thing to be clear about is we have to codify Roe v. Wade into law and the way to do that is to make sure Congress votes to do that,” Mr. Biden told reporters during a press conference in Spain. “And if the filibuster gets in the way, it’s like voting rights, it should be provided an exception for this...to the filibuster.

Support among Senate Democrats to end the filibuster rule has grown in recent years and they would need only 50 votes to change the rule. Currently, Sens. Manchin (D-Wv.) and Sinema (D-Az.) have committed to keeping the filibuster intact. If the Democrats were able to gain two or three seats, however, it is extremely likely that they would eliminate the filibuster and only require simple majority votes to pass sweeping abortion-expanding legislation such as the “Women’s Health Protection Act.”

With the November 8th midterm elections rapidly closing in, there has been no shortage of pro-abortion votes taken in Congress. Below is a look back at some of the “low-lights.”

Imposing Abortion until Birth Nation-wide

The Democrat-controlled U.S. Senate and House have voted *four times* this Congress on essentially the exact same bill they claim will “codify” *Roe v. Wade*. However, the so-called “Women’s Health Protection Act,” would go far beyond codifying *Roe*, wiping away even modest restrictions on abortion.

In none of the four votes in either the House or Senate did any Republican vote for the measure. On the other hand, in a near-uniform embrace of abortion up until birth, only one Democrat in either chamber votes against the measure.

The so-called “Women’s Health Protection Act” (WHPA) would enshrine into law abortion-on-demand and would overturn existing pro-life laws and 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.

This legislation would invalidate nearly all existing state limitations on abortion and prohibit states from adopting new limitations in the future. Laws that provide women with information prior to an abortion, laws that provide for parental involvement, laws that prohibit abortion if done on a child simply because

they have a disability – they would all be struck. Further, it would invalidate most previously enacted federal limits on abortion, including federal conscience protection laws and most, if not all, limits on government funding of abortion.

As noted above, should Democrats gain seats in the Senate this fall, it is extremely likely that they would eliminate the filibuster and only require simple majority votes to pass sweeping legislation such as the WHPA.

Taxpayer Funding of Abortion

After 45 years of bipartisan support, Democrats in the House have sought to remove the long-standing Hyde Amendment which prevents taxpayer funding of abortion in the annual budget.

An array of long-established laws, including the Hyde Amendment, have created a nearly uniform policy that federal programs do not pay for abortion or subsidize health plans that include coverage of abortion, with narrow exceptions. The Hyde Amendment is widely recognized as having a significant impact on the number of abortions in the United States, saving over an estimated two million American lives.

National Right to Life believes that the Hyde Amendment has proven itself to be the greatest domestic abortion-reduction measure ever enacted by Congress. Additionally, a majority of Americans have consistently opposed taxpayer funding for abortion at home

and abroad.

There were numerous appropriations votes supported by only Democrats that included taxpayer funding at home and abroad. These annual spending measures were ultimately rejected by the Senate as enough Senators vowed to vote against any spending bills to fund abortion. So the Hyde Amendment has been retained, for now.

There were also several votes on COVID-19 reconciliation bills, which dramatically departed from this longstanding policy of the Hyde Amendment. The COVID legislation ended up being a Democrat wish-list containing numerous provisions aimed at propping up the abortion industry as well as potentially funneling millions of dollars into programs without Hyde Amendment protections. This legislation unfortunately only needed 50 votes in the Senate and was approved along party-lines. Republicans attempted to insert Hyde language into the legislation but those amendment votes needed 60 members and failed.

In addition, the WHPA would also eliminate any limits on government funding of abortion.

More on these votes can be found here: <https://www.votervoices.net/NRLC/home>

Forcing Providers to Perform Abortions

One of the most dangerous threats to life came in the form of the Equity Act. While this legislation purported to deal

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YouTube Links Pro-Life Video to Pro-Abortion Biden Administration Pages

By Dave Andrusko

It's common knowledge that Big Tech often favors the pro-abortion perspective. Nothing new there.

What may be new is that YouTube is adding a "context box" to pro-life videos that reeks of abortion advocacy. Just ask Catholic Vote, a pro-life advocacy group, which—in this instance—was running a video titled "Kari Lake Exposes Abortion Hypocrisy." Lake, who is pro-life, is running neck and neck with pro-abortion Secretary of State Katie Hobbs, to be the next governor of Arizona.

The "context box" is "linked to pro-abortion talking points hosted on the official government pages of the Biden administration," according to Catholic Vote Communications Director Joshua Mercer:

The YouTube message links viewers to Medlineplus.gov, a government website, which leads to a number of other pro-abortion resources, including ReproductiveRights.gov, a Biden administration page from the Department of Health and Human Services that states:

"Reproductive health care, including access to birth control and safe and legal abortion care, is an essential part of your health and well-being."

procedure is done by a licensed healthcare professional.

"Remove the embryo or fetus and placenta from the uterus." Again, they downplay what



The information in the context box antiseptically describes abortion:

An abortion is a procedure to end a pregnancy. It uses medicine or surgery to remove the embryo or fetus and placenta from the uterus. The

is occurring," Mercer said. "They're not just relocating the fetus. They are terminating its life."

"This is outrageous," Mercer said. "Big Tech is doing the most aggressive political advocacy possible here, and directly on behalf of the Biden administration."

YouTube's box "also pointed viewers to 'plenty of links to pro-abortion groups like the ACOG and the pro-abortion HHS website reproductiverights.gov,'" Mercer said. "Could you imagine YouTube placing a 'context' box on a gun control group's page with links to the NRA? Of course not!"

As many outlets, including *Newsbusters*, have reported, Hobbs is evading a direct answer on abortion. Appearing on *Face the Nation*, Major Garrett was unsuccessful in getting an answer to several straightforward questions. *Newsbusters'* Kevin Tober wrote what happened next:

Again, Hobbs dodged the question that was asked. Realizing that, Garrett pressed again: "If an Arizona voter were to conclude from your previous answer that you do not favor any specific week limit on abortion, would they be correct?"

"I support leaving the decision between a woman and her doctor and leaving politicians entirely out of it," Hobbs snarked.

22 days until the November 8 mid-terms elections. What do we know?

From page 2

The Senate is anyone's bet. It's tied now (50-50). There are 34 Senate seats up and far more Republicans than Democrats and there are numerous competitive races. For what it's worth, Real Clear Politics has the count at 47 Republicans and 46 Democrats with seven seats considered toss-ups.

Finally, *CNN* has a new poll, headlined, "Voters tilt toward Republicans over Democrats in competitive districts." Jennifer Agiesta, *CNN's* polling director, offers keen insights.

"Among likely voters nationwide, the race is a tight split, with 50% backing the Democratic candidate and 47% behind the Republican." Good news for Democrats.

"But in competitive

congressional districts, Democratic support among likely voters dips and preferences tilt toward the Republicans: 48% of likely voters in that group prefer the Republican candidate, 43% the Democrat." Excellent news for Republicans.

Likewise when asked about Republican policies, should they be in the majority after November 8. "Overall, voters nationwide split over whether Republicans' policies would move the country in the right direction or the wrong one should they win control of Congress (51% say the right direction among registered voters compared to the 48% who say the wrong direction), Agiesta writes, "but the GOP has a wider advantage in

competitive districts (54% say the GOP would take the country in the right direction if they won control vs. 45% who say they would go in the wrong direction)."

One last point: enthusiasm. Agiesta tells us the *CNN* poll shows "Republican registered voters nationwide and in competitive congressional districts are a bit more likely to say they are deeply motivated to vote than are Democratic registered voters (52% extremely motivated among Republicans nationally, 46% among Democrats; in competitive districts, it's 55% among Republicans vs. 45% among Democrats)."

That is a huge advantage.

Let me end by borrowing

from Carol Tobias, NRLC President. I hope it inspires as much as it did me:

"We have elections and ballot measures and legislative sessions ahead. We have hearts to soften and minds to change. A big task? Sure, but pro-life people are up to the challenge.

"We have fought for 50 years to protect unborn children. We have faced storms and climbed hills. We have overcome obstacles and torn down barriers.

"We're not going to stop now. How could we? The littlest Americans are counting on us."

As Elections Approach, a Look Back at the Abortion Agenda of the Democrat-controlled 117th Congress

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with sex and gender discrimination, it contained language that could be construed to create a right to demand abortion from health care providers, and likely would place at risk the authority of state and federal governments to prohibit taxpayer-funded abortions.

Historically, when Congress has addressed discrimination based on sex, rules of construction have been added to prevent requiring funding of abortion or nullifying conscience laws. Since no rule of construction was included in the Equity Act, numerous pro-life groups, including National Right to Life urged opposition. While this legislation failed to advance in the Senate, if

it had become law, it would have forced individual health care providers who object to abortion, including those with religious objections, to violate their conscience and participate in abortion.

Violating the Free-Speech of Pro-Life Americans

This Congress has also taken a series of votes on similar but related pieces of legislation aimed at "voting rights." The Senate even attempted, but failed, to change the rules to only require 50 votes. Whether it was the so-called "For the People Act" or the "Freedom to Vote Act," these pieces of legislation are intended to make it as difficult as possible for corporations (including

nonprofit, issue-oriented corporations such as NRLC) to spend money to communicate with the public about the actions of federal officeholders, by applying an array of restrictions on ads, as well as requirements that violate the privacy rights of donors.

The overriding purpose of the legislation is to discourage, as much as possible, disfavored groups (such as NRLC) from communicating about officeholders, by exposing citizens who support such efforts to harassment and intimidation, and by smothering organizations in layer on layer of record keeping and reporting requirements, all backed by the threat of civil and criminal sanctions. National Right to

Life Committee and numerous other advocacy groups opposed passage of these bills, which have stalled this Congress.

Nearly all of the most dangerous abortion-expanding bills have been only stopped by one thing – the filibuster. If Democrats grow their Senate majority, these life-hostile bills would almost certainly be voted on again, and only would need 50 votes. Elections have consequences, and it is critical now, more than ever, to elect pro-life representatives to both Congress and state houses across this country to stop the Democrats push to have abortion until birth, never impeded, and funded by the taxpayers.

Late-Term Abortionist Leroy Carhart Sets Up GoFundMe To Expand

By Olivia Summers

Gruesome late-term abortionist Leroy Carhart, who infamously tried (and failed) to strike down the federal Partial-Birth Abortion Ban, has disturbingly set up a GoFundMe page to expand his late-term abortion business to a neighboring state.

Carhart is expanding his late-term abortion practice from Maryland and Nebraska to Pueblo, Colorado. Just weeks after the *Dobbs* decision was released, abortionist Carhart set up a GoFundMe page asking for \$500,000 to help expand his abortion practice to Colorado – where abortion is legal throughout all stages of pregnancy – because he fears that Nebraska may ban his grisly trade.

Now, if Carhart’s name sounds familiar, that’s because it should.

In 1999, Nebraska banned a barbaric and gruesome abortion procedure accurately called “Partial-Birth Abortion.” This abortion method required delivering a baby alive, but only partially, so that some of the baby’s body was still inside the mother, and then killing the baby – generally by “puncturing of the back of the child’s skull and removing the baby’s brains.” Nebraska was not the first, or only, state to ban partial-birth abortion. In

fact, 31 states had also passed restrictions on the ghastly method.

But, Carhart, who practices late-term abortions, including partial-birth abortions, challenged Nebraska’s ban, and



Abortionist Leroy Carhart

ultimately prevailed in *Stenberg v. Carhart*. The case was decided in 2000, and the Supreme Court declared Nebraska’s ban unconstitutional, rendering it and other state bans on partial-birth abortions across the United States unenforceable.

Just a few years later, however, Congress passed, and President George W. Bush signed into law, the Partial-Birth Abortion Ban Act of 2003. The purpose of the act was to create a federal ban on the procedure, and to effectively undo the Supreme Court’s ruling in *Stenberg v. Carhart*. Naturally, abortionist Carhart challenged the Partial-

Birth Abortion Ban Act – but this time, he lost. The result was the Supreme Court’s 2007 decision to uphold the Partial-Birth Abortion Ban in *Gonzales v. Carhart*.

The ACLJ filed an amicus brief in that case supporting the ban. In our brief, we argued, among other things, that the Partial-Birth Abortion Ban “seeks to halt the extension of gruesome abortion practices into gruesome infanticide.”

In its decision, the Supreme Court echoed that argument, noting:

Congress determined that the abortion methods it proscribed had a “disturbing similarity to the killing of a newborn infant,” Congressional Findings (14)(L), in notes following 18 U. S. C. §1531 (2000 ed., Supp. IV), p. 769, and thus it was concerned with “draw[ing] a bright line that clearly distinguishes abortion and infanticide.” Congressional Findings (14)(G), *ibid*. The Court has in the past confirmed the validity of drawing boundaries to prevent certain practices that extinguish life and are

close to actions that are condemned.

While Carhart ultimately lost the fight against the Partial-Birth Abortion Ban, it didn’t stop him from continuing to profit from killing innocent little babies. But it’s not enough that he’s profited from causing the violent deaths of aborted children – now Carhart wants the general public to fund his expansion to a state where abortion is now essentially a Super-“Fundamental Right” and he can profit even more by offering late-term abortions in a state that has no gestational limits.

Abortionists will never stop their push to expand abortion – especially when they profit so greatly from its existence. The work to stop abortionists like Carhart from profiting off the killing of little babies is essential – which is why we need to not only do everything we can to stop them in the legal fights, but also fight against them by supporting local pregnancy centers that provide women the resources they need to choose life.

Editor’s note. This appeared at the American Center for Law and Justice.

Newborn baby saved thanks to surgery performed during labor

By Bridget Sielicki

A little boy is alive today thanks to a life-saving surgery that took place when he was a newborn.

After suffering four miscarriages, Jamaal and Yadi Martin were overjoyed to hear a heartbeat with baby number five — a milestone they'd never before reached. But that joy soon turned to worry, when later in the pregnancy they were told that their preborn child had a life-limiting condition that would make it nearly impossible to survive past birth.

"The doctor said, 'He has very large lungs for this far into this pregnancy. It's abnormally large. And I think this is something called CHAOS,'" Yadi told *TODAY*.

CHAOS stands for congenital high airway obstruction syndrome, and it prevents an infant from breathing freely after birth. Unfortunately, the condition is usually fatal.

"It becomes a very big deal the minute the baby's born when the baby's separated from the placenta because the only way the baby can get oxygen is by taking its first breath," Dr. Ashley Roman, vice chair of clinical affairs, obstetrics, director of the division of maternal fetal medicine in the department of obstetrics & gynecology at NYU Langone Health, told *TODAY*. "If there's an obstruction in the airway... the baby can't cry in its first breath. It's deprived of oxygen."

Despite the sobering

prognosis, the Martins and their doctors didn't give up hope. Yadi remained optimistic, even as she struggled with a difficult pregnancy.

"They would print out the sonogram pictures and just



to see his little face (was amazing). And he had a little personality — they kept trying to see him from the front and every time he would just turn around and show his butt," she said. "It gave us hope."

Doctors determined that they would use a rare C-section technique called an ex-utero intrapartum treatment, or EXIT procedure, to perform surgery on baby Aydin as he was born.

"It's like pausing midbirth," Dr. Roman said of the complicated procedure. "The minute this baby's head is out, there is a 5- to 10-minute

window to establish an airway, requiring full coordination and months of practice and planning."

A team of more than 25 specialists was on hand to assist in the incredibly complex

delivery. Despite months of preparation, there were still a lot of setbacks on delivery day, as doctors discovered a number of other complications, and Aydin's heart started failing during delivery.

"It was chaos, pun intended," Jamaal said. "Just about everything that could have gone wrong went wrong."

Doctors were able to resuscitate Aydin and put the newborn baby on an ECMO machine, which takes over the heart and lungs so that they have time to heal. This allowed him to pull through.

"I just heard he was alive. Everything else they said was irrelevant," Jamaal said. "I can't tell you anything they said after I heard he was alive."

Aydin then spent the next 169 days in the NICU, during which time he underwent several other procedures to address a heart defect and an anorectal complication. He was then moved to a rehabilitation facility, and finally was able to go home with his parents for the first time just shy of his first birthday. While he still has some medical challenges ahead, his prognosis is excellent.

"It's so awesome to see he's getting stronger. He fights to sit up and just stay sitting up. He can stay sitting up by himself approximately three minutes," Yadi said. "It's so incredible to say this is our baby. He's growing and when it's all said and done he will be absolutely perfect."

The Martins want to share their story to encourage other parents who might be facing a difficult diagnosis of CHAOS with their newborn, and to let them know that there may be options like this surgery that can help.

"God will not give us this blessing without getting us through this. We're going to be fine," Yadi said. "He's going to be fine."

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

California Gov. Newsom signs 13 bills to “streamline” delivery of abortion

By Dave Andrusko

California’s pro-abortion Gov. Gavin Newsom has signed 13 bills, “streamlining” the process for women in state and out to obtain abortions. Several states are competing for the title of King of Abortion with California taking the early lead in proudly facilitating the deaths of massive numbers of unborn children.

As one very much understated account put it, “Gov. Gavin Newsom signed bills aimed at strengthening California’s already robust abortion-rights protections.” These newly signed laws “also set the stage for a November vote to enshrine abortion rights directly into California’s Constitution under Proposition 1,” Melody Gutierrez reported for *The Los Angeles Times*.

Newsom’s signatures were expected after the governor advocated for many of the measures and come after California launched a publicly funded website this month to make it easier for those seeking to end their pregnancy to find

services and financial assistance. The state announced the website — at abortion.ca.gov — the same day that Republican Sen. Lindsey Graham of



Pro-abortion California Gov. Gavin Newsom

South Carolina pushed for a nationwide abortion ban after 15 weeks of pregnancy with rare exceptions.

Two of the 15 bills the legislature send Newsom—SB 245 and AB 1666—were previously signed into law

“while some signed Tuesday were already funded in the budget passed in June.” The budget, Gutierrez explained “included \$200 million in new spending for reproductive health care services and outreach.”

SB 1142 authored by Sen. Anna Caballero was among the bills signed Tuesday “which required the state to create the abortion services website launched earlier this month.”

As Newsom’s brags on his website

As other states throughout the country outlaw abortion and criminalize patients and doctors, California continues to lead the nation’s fight for reproductive health care access and privacy. ...

California continues to take historic steps towards its promise to be a Reproductive Freedom state – not just protecting access to abortion care in the face of Roe v. Wade being overturned,

but moving forward centering equity and expanding access to help people, regardless of where they call home, get the essential care they want or need here in California.

Besides a boatload of new money, the new laws include SB 1375 which “will allow trained nurse practitioners to perform first trimester abortions without the supervision of a physician”; “AB 2223, which “would prohibit a coroner from holding an inquest after a fetal death, including in cases in which drugs are suspected as causing a stillbirth”; and AB 1242, “which prohibits state law enforcement agencies from helping with out-of-state abortion investigations.”

In addition, this fall there is “a measure on the ballot that would explicitly protect a person’s right to an abortion,” Gutierrez wrote. “The UC Berkeley IGS poll found 7 in 10 voters support that measure, Proposition 1.”

Democrat Senate Candidates Pledge Support for Unlimited Abortion For Any Reason Until Birth

From page 1

future, even laws specifically upheld as constitutionally permissible by the Supreme Court. This includes broadly supported protections like parental involvement and informed consent laws.

Make no mistake about it: The so-called *Women's Health Protection Act* is the most extreme piece of pro-abortion legislation to ever come before the U.S. Congress. And every Democrat running for Senate in a battleground state supports it.

Senators Mark Kelly in Arizona, Michael Bennet in Colorado, Raphael Warnock in Georgia, Catherine Cortez Masto in Nevada, Maggie Hassan in New Hampshire, and Patty Murray in Washington, all Democrat incumbents seeking re-election, voted in favor the *Women's Health Protection Act*.

Two other Democrats running for Senate, Congressman Tim Ryan in Ohio and Congresswoman Val Demings in Florida, voted for the legislation in the House.

In Pennsylvania, Democrat John Fetterman has been outspoken in his support for the bill. He tweeted, "The Senate failed to pass the *Women's Health Protection Act*. Now

McConnell's SCOTUS could have the final say on abortion rights in America. The right to an abortion is non-negotiable. Send me to Washington, and I'd be the 51st vote to codify *Roe v. Wade*."

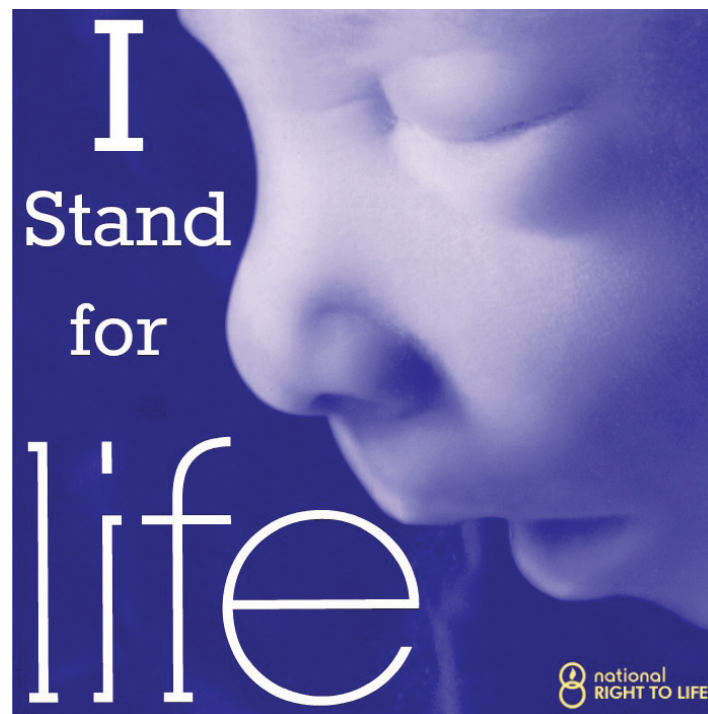
In Wisconsin, Democrat Mandela Barnes tweeted, "It's time to pass the *Women's Health Protection Act* – and vote out politicians like Ron Johnson who stand against it."

In North Carolina, Democrat Cheri Beasley's campaign website states that she "believes the Senate must take action to protect women's constitutional rights. In addition to repealing the Hyde Amendment, she supports the *Women's Health Protection Act*, which would codify *Roe v. Wade* and protect reproductive rights so that women can get the care they need no matter where they live."

Democrats have confidently touted their support for abortion on demand on the campaign trail, hoping the issue will be a saving grace as they fight to retain their majorities in the House and Senate despite low approval numbers for President Biden and less than desirable economic numbers.

Yet, polling conducted before and after the Supreme Court's *Dobbs* decision in June shows that a majority of Americans

may already be underway in your state. Let no clever rhetoric or fancy advertisement distract from what is at stake



support commonsense limits on abortion. A recent national poll showed just one-fifth of respondents support the *WHPA* and the Democrat platform of unlimited abortion for any reason until birth.

Election Day is a little less than a month away. Early voting

in this election. If Senate Democrats are able to expand their majority, they will pass the *Women's Health Protection Act*, and countless lives will be at risk. Life is on the ballot in November, and unborn babies and their mothers are counting on us!

“We know we are doing good work” – California center shines in response to Warren’s anti-pregnancy help campaign

By Tabitha Goodling

It’s been over three months since *Roe v. Wade* was overturned with the *Dobbs v. Jackson Women’s Health* ruling, and liberal Massachusetts Senator Elizabeth Warren has been on a mission to prove that pregnancy care centers are “false clinics” that are hurting low-income women.

In contrast with most major media reporting since, one pregnancy center in California was given an opportunity to respond to her attacks and provide an accurate, positive view of pregnancy help.

The Sacramento Life Center was featured in an opinion piece penned by Pulitzer Prize-winning writer Melinda Henneberger for the *Sacramento Bee*. The largest pregnancy center in the area, Sacramento Life was able to illustrate via the article how pregnancy centers do just the opposite of what Warren and other abortion proponents claim.

Sacramento Life Center Executive Director for Marie Leatherby told *Pregnancy Help News* that the columnist chose to highlight Sacramento Life simply because “we are currently the largest and most well known pregnancy center in town.”

“We are celebrating our 50th year,” she said.

The opinion piece stressed how pregnancy centers help women in need by providing not only education, but items for the women and their babies. It was later picked up and covered by *National Review*.

Henneberger challenged left-

wing activists by stating she believed some women may have had bad experiences at pro-life centers but added there is a clear difference between an abortion facility and a pregnancy center.

Pro-life or not, she said, everyone should agree that women are given support and care in these centers.

Warren has been claiming pregnancy centers are deceiving and are “torturing” pregnant women and vows to shut them down across the nation.

Recognition of the idea as over the top has not been limited to conventional pro-life circles, with at least one columnist having written that Warren’s idea of shuttering pregnancy centers across the board is “blatantly unconstitutional.”

When Leatherby heard Warren’s comments, she could hardly believe the senator had no idea what pregnancy centers provide.

“At first I was shocked and dismayed that she would say such untrue things about thousands of centers and clinics as a representative of the people,” Leatherby said. “I couldn’t believe how misinformed she is on what pregnancy centers actually do for women; provide free services for women who need help during and after their pregnancy.”

“What she said is just plain wrong and untrue, and very unkind,” Leatherby told *Pregnancy Help News*. “I chalked it up to her receiving campaign funds from Planned Parenthood and she is just

towing the line for them at this point for her continued candidacy.”

Sacramento Life has one location in the city, serving 50 to 60 women each week.

fortunately those have been cleared up.”

“We have had some phone calls from people that were harsh and interrogative,” she added, “but nothing we



They are also operating with a state-of-the-art mobile clinic, Leatherby said.

While some pregnancy centers across the United States have been vandalized and threatened by groups such as “Jane’s Revenge,” Sacramento Life has managed to stay under the radar of such attacks. Out of an abundance of caution, the center boosted security measures.

“Fortunately, we have faced very little physical backlash to the clinic,” Leatherby said. “We have hired security guards, put up barbed wire and cameras to protect ourselves.”

But, like other pregnancy help centers, Sacramento Life has faced cyber assaults.

“We have had some online attacks on our Facebook, Yelp, and Google accounts,” she said. “We had over 50 BOT reviews that were very negative, but

can’t handle with grace and kindness.”

Leatherby and her staff are not letting vicious attacks by word or deed keep them off course from their mission.

There is a community of support that has existed, both prior and following the opinion piece.

“The outpouring of support from our donors has been wonderful,” she said,

“Knowing that our government, state, and community seem to be against us weighs heavy on us,” said Leatherby. “We know we are doing good work, and our patients love us and our grateful. That is what keeps us going during this hostile time.”

Editor’s note. This appeared at Pregnancy Help News and reposted with permission.

Pro-abortion Guttmacher reports that “100 Days Post-Roe: At Least 66 Clinics Across 15 US States Have Stopped Offering Abortion Care”

From page 2

overturned. Already, several states—including Indiana, Ohio and South Carolina—had total or six-week abortion bans go into effect briefly before they were temporarily blocked in court. These bans could go into effect again as soon as the court cases are resolved. These disruptions to service

provision—even when temporary—affect the ability of established providers to quickly resume abortion care. Further, rapidly changing laws may make it unclear to some patients whether they can legally seek an abortion in their state.

Jones told *CBS News*, “Much more research will need to

be conducted to grasp the full extent of the chaos, confusion and harm that the U.S. Supreme Court has unleashed on people needing abortions, but the picture that is starting to emerge should alarm anyone who supports reproductive freedom and the right to bodily autonomy.”

Having read the report in detail, Dr. Randall K. O’Bannon, NRL Director of Education & Research, says

“They will tell you that many of the pregnant women in these states will just go to a clinic in a neighboring state to have their abortions. Some will. But something they aren’t anxious to admit may be way more important — with the abortion clinic closed in their home state, many women will change their minds about seeking abortion and will choose to let their babies live.”

ABORTION STOPS A BEATING



heart



Noonan: “I am pro-life for the most essential reason: That’s a baby in there, a human child.”

By Dave Andrusko

When Peggy Noonan’s wrote “The End of Roe v. Wade Will Be Good for America,” it was before the Supreme Court’s June 24th decision to overturn Roe. However her insights were keen and very much worth pondering as we now live in a post-*Roe* world.

While Noonan covers numerous aspects of *Roe*’s awful impact on our culture, what I find most inspiring is her explanation for why she is pro-life:

I am pro-life for the most essential reason: That’s a baby in there, a human child. We cannot accept as a society—we really can’t bear the weight of this fact, which is why we keep fighting—that we have decided that we can extinguish the lives of our young. Another reason, and maybe it veers on mysticism, is that I believe the fact of abortion, that it exists throughout the country, that we

endlessly talk about it, that the children grow up hearing this and absorbing it and thinking, “We end the life within the mother here,” “It’s just some

Yes, *Roe* changed everything. *Roe* undermined the moral obligation mothers—and fathers!—have to their unborn children. Like acid, *Roe* ate away at the foundations of our culture

the media, they are formidable foes.

Yet pro-lifers are the eternal optimists. Why? Because we believe the better angels of our nature will not—cannot—be forever silenced. As a nation, we are better than turning a blind eye to almost 900,000 abortions a year would have you believe. Reminding our fellow citizens of this tragedy is among the most important tasks you do, day in and day out.

Noonan’s conclusion is immensely powerful. Remember this was written before June 24:

And if *Roe* is indeed overturned, God bless our country that can make such a terrible, coldhearted mistake and yet, half a century later, redress it, right it, turn it around. Only a thinking nation could do that. Only a feeling nation could do that. We’re not dead yet, there are still big things going on here.



cells”—that all of this has released a kind of poison into the air, that we breathed it in for 50 years and it damaged everything.

making abortion seem to be an acceptable “solution.”

Not surprisingly, now that *Roe* is in the rearview mirror, pro-abortionists have lashed out. Along with their allies in

The Turnaway Study Takedown: Video debunks ‘re-search’ claiming women suffer when denied abortion

By Cassy Fiano-Chesser

The abortion industry and its media allies frequently claim that women don’t regret having abortions, but a new Live Action campaign, “Can’t Stay Silent,” is demonstrating otherwise. The Turnaway Study, the product of pro-abortion researchers, is cited time and time again as support for claims that women who have had abortions don’t feel grief or regret as a result — but the reality of what this study found isn’t what the abortion industry claims.

In the Turnaway Study, women who were able to have an abortion were compared to women who were turned away — thus the name — because they were past a gestational limit to have the procedure. The researchers claimed that women were not harmed by having an abortion, and that women who did not have an abortion fared worse than the women who did, resulting in “worse financial, health, and family outcomes.” The study has since been regularly cited by media outlets in a supposed debunking of the pro-life idea that abortion can negatively impact women.

What rarely gets mentioned is how incredibly flawed the study is, as a new Live Action video examines:

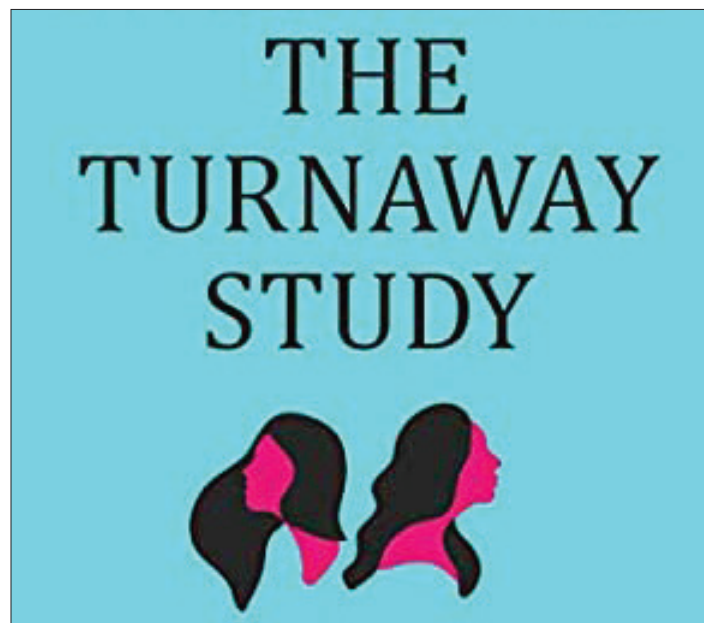
From the study’s flawed design, its skewed sample, bias from the researchers, and deceptive reporting, it’s difficult to see how the results could be valid.

Flawed design

In 2008, the Turnaway Study was released by the group Advancing New Standards

in Reproductive Health (ANSIRH). The goal of the study was to compare how having an abortion versus not having an abortion affects women. 877 women were asked to participate, hand-selected by 30 abortion facilities across the country. They were then given phone interviews every six months, over a five-year period.

The study also ignored that a full quarter of the women turned away ended up having an abortion in another state, or experienced a miscarriage. In addition, no distinctions were made between women who had



undergone multiple abortions, compared to women who had undergone just one abortion. Worst of all, there was no comparison whatsoever made to women with an unexpected pregnancy who did not seek out abortion, but made the decision to parent from the beginning.

Additionally, by limiting the study period to five years, any potential long-term effects of abortion remain unknown.

Skewed sample

The sample size has been criticized for being too small. While thousands of women were recruited to participate, only 27% agreed, despite receiving an incentive to do so. By the final year of the study, only 17% remained. This makes it impossible to determine how abortion affected the majority of women the researchers followed.

What makes this information especially striking is that women who had negative abortion experiences were the least likely to continue participating.

The women who reported the least amount of relief were the ones found most likely to drop out of the study. This means the small percentage of women who did continue participating were more likely to report on abortion positively.

The sample size was further skewed because women who sought out abortion due to fetal anomalies were kept out of the study, as women in those

circumstances are more likely to have high rates of distress afterward.

In addition, the women participating were not chosen at random. They were hand-picked by employees of the abortion facilities. Did those staffers intentionally choose women who seemed more at peace with their decision to have an abortion, while ignoring those who seemed more emotional or upset? This calls the study results further into question — the people choosing the study participants are the very people with a vested financial interest in keeping abortion legal.

Researcher bias

Those who authored the study were biased in and of themselves, something rarely admitted in the coverage hyping up the Turnaway Study. Diana Greene Foster, the study’s principal investigator, sits on the board of the Later Abortion Initiative, which promotes access to late-term abortion and has been applauded by pro-abortion groups like NARAL Pro-Choice America. Foster also testified before Congress, calling for all restrictions against abortion to be eliminated. She’s also the director for the University of California, San Francisco (UCSF) Bixby Center for Reproductive Health, which trains future abortionists.

Study author Daniel Grossman is the current director of ANSIRH. He is an abortionist and former board member of NARAL Pro-Choice America

See “Study,” page 48

Quebec College of Physicians slammed for justifying infant euthanasia

By Alex Schadenberg, Executive Director, Euthanasia Prevention Coalition

Re: Infant euthanasia proposed by the Quebec College of Physicians

The *National Post* published a thorough article written by Catherine Lévesque on October 11 titled “Quebec College of Physicians slammed for suggesting MAiD for severely ill newborns: Canada cannot begin killing babies when doctors predict there is no hope for them. Predictions are far too often based on discriminatory assumptions about life with a disability.”

In the article Lévesque interviews people from the disability community, from the medical community, and myself.

Lévesque explains the issue:

Dr. Louis Roy, from the Quebec College of Physicians, told the Commons’ Special Joint Committee of Medical Assistance in Dying (MAiD) on Friday that his organization believes MAiD can be appropriate for infants up to age one who are born with “severe malformations” and “grave and severe syndromes” for which their “prospective of survival is null, so to speak.”

Lévesque first quotes from Krista Carr with Inclusion Canada:

Krista Carr

“Most families of children born with disabilities are told from the start that

their child will, in one way or another, not have a good quality of life.”

“Canada cannot begin killing babies when doctors predict



there is no hope for them. Predictions are far too often based on discriminatory assumptions about life with a disability.”

Carr then says:

“An infant cannot consent to their own death. This isn’t MAiD, it’s murder. And providing MAiD to a person who cannot consent is a standard that is wildly dangerous for all persons with intellectual disabilities in Canada.”

She then quotes me saying that legalizing infant euthanasia for babies who are will die is simply not necessary.

Alex Schadenberg

“Why would you then have to give the child a

lethal dose? If the child is not going to survive, the child can be kept comfortable and die naturally. There’s no reason for us to kill the child. There’s no

reason for us to do this at all.”

To further clarify the position of the Québec College of Physicians, Lévesque quotes from a December 2021 press release:

The press release said that MAiD could be an avenue for infants who are subject to “extreme suffering that cannot be soothed, coupled with very dark prognostics,” while adding that this treatment would have to be regulated by a “strict protocol.”

The College mentioned the Netherlands’ Groningen Protocol — a detailed process that includes unbearable suffering confirmed by at least one doctor and informed consent from both parents — as an

avenue to explore in Canada for euthanasia for severely ill newborns.

It also recommended making MAiD accessible to minors from 14 to 17 years old, with the authorization of parents or of a tutor, adding that suffering has no age and that it can be as intolerable as for adults.

Lévesque continues the article by quoting comments made by *National Post* columnist Ben Woodfinden, who originally reported about Dr Roy’s testimony:

“Assisted death or suicide isn’t even the right word for what’s being described here. A baby cannot consent, a baby cannot decide they want to end their own life, it’s not about any kind of ‘choice’ or ‘autonomy.’ It’s straight up infanticide.”

American disability activist and film maker, Dominic Evans told Lévesque:

Dominic Evans

“I have many friends who were told this in infancy who have lived into adulthood and have thriving lives,”

“My disability was not diagnosed until I was four, but it was as though I had already ‘died’

See “Quebec,” page 49

The Turnaway Study Takedown: Video debunks ‘research’ claiming women suffer when denied abortion

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and the National Abortion Federation. He is currently serving on California’s Future of Abortion Council.

UCSF itself has roots in promoting abortions as far back as the 1960s, before *Roe v. Wade* was decided in 1973. Today, UCSF continues promoting abortion, participating in clinical trials for the abortion pill and promoting its deregulation — including a “no-test” protocol pioneered in part by none other than Daniel Grossman.

The study was funded by the David and Lucile Packard Foundation, the William-Flora Hewlett Foundation, and the Gerbode Foundation — all three of which invested in Danco Laboratories, the

manufacturer of the abortion pill.

These were not objective scientists; it was a group of people deeply embedded within the abortion industry, with a vested interest in promoting abortion.

Deceptive reporting

How have the results of the study been reported? According to the authors and their acolytes in the media, the study results are nothing short of gospel proving that women don’t regret abortions. ANSIRH claimed the study proves over 95% women do not regret having an abortion, and that it was the right decision for them to make.

It was just one single

question that led them to make that conclusion, of which the available responses were merely “yes,” “no,” or “uncertain.” Yet Foster and her fellow pro-abortion activists wasted no time painting the results as “proof” that 95% of women do not regret their abortions.

Among the women who did not have an abortion, there were some interesting results: Six months after giving birth, just one in eight women (12.5%) said they still wished they had been able to have an abortion; after five years, only one in 25 (4%) wished they still would have had the abortion. Most of the women who had a child said they were happy with their baby — yet there were no

headlines trumpeting the fact that 96% of women didn’t regret giving birth.

Meanwhile, countless women have spoken about how abortion has negatively impacted their lives. On websites like Silent No More and Abortion Changes You, thousands upon thousands of post-abortive women (and men) have left heartbreaking testimonials about the grief and pain they feel; somehow, the Turnaway Study entirely disregards the existence of these individuals.

There is no sound science behind the Turnaway Study. It was an agenda-driven production with the abortion industry behind it, meant solely to promote abortion at the expense of women.

Amazon Prime Day Starts October 11th

Help NRLC continue our life-saving work by designating The National Right to Life Educational Trust Fund on Amazon Smile.

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You shop. Amazon gives.

nrlc.org

Quebec College of Physicians slammed for justifying infant euthanasia

From page 47

because everybody was so abysmal towards being diagnosed with a disability.”

Léveque ends the article by quoting me. I told Léveque that infant euthanasia is not about “autonomy” or “choice” and it opens the door to further expansions.

“Now, it’s not about my autonomy, my choice. If I can do that to a newborn, why can’t I do that to someone who never asked for it, who never showed any interest in it but now has Alzheimer’s?”

Schadenberg added that the accepted criteria have evolved quickly since C-14 was passed in 2016 and C-7 in 2021. The sunset clause that temporarily restricts MAID for people whose sole underlying medical condition is mental illness will expire in March 2023.

Catherine Lévesque has

written a thorough article. But the Netherland’s Groningen Protocol is not limited to children who will almost certainly die anyway. It also approves death for infants

who are suffering or are likely to experience possible future suffering.

Once the door to killing without consent is completely opened, the swath of people

who become eligible for being killed expands exponentially.

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



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

William Wilberforce

