State Fair Season

Look for NRLC Affiliate Booths at State Fairs Nationawide!
LIFE at the County Fairs!

By Jacki Ragan, Director, State Organizational Development Department

The county fair has been an American tradition for more than 2 centuries, and we find ourselves right in the middle of the season! Some 48 states host county fairs, totally more than 2,000 county fairs, that are attended by millions of families.

The reason the National Right to Life Committee is talking about county fairs (and state fairs, too!), is that it is a perfect place to educate those attendees about what WE do, how we help, and that unborn babies are alive and growing in their mother’s wombs. And we have an obligation to

Takeaway From Republican Presidential Debate: What the Candidates Don’t Know About How to Discuss Abortion

By David N. O’Steen, Ph.D.

The first Republican presidential candidate debate gave a clear picture of the present state of the national political debate on abortion. The picture isn’t always pretty.

On the bright side, all of the candidates who debated are pro-life, though their positions and priorities may vary as is to be expected. Former president Trump, who did not participate, has proven himself to be pro-life as well. Any of them would be preferable by a measure of light years to Joe Biden, Kamala Harris, Michelle Obama, Gavin Newsom or anyone the Democratic party would nominate in 2024.

It would be very irresponsible for any pro-life group to withhold support or endorsement from any of them, if they were the nominee, because they failed to adhere to some arbitrary litmus test.

None of the candidates seemed fully able to articulate either their own position or discuss the issue itself in a way that would win over and alleviate the fears of the tens of millions of voters in the middle on this issue. Those are the people who polls show are actually closer to the pro-life
Editorials

The realities of age continue to weigh President Biden down

At a certain point—and I am guessing it will happen by the end of the year—the media consensus will move from protecting pro-abortion President Joe Biden at all costs to writing 4 alarm fires-like stories signaling deep dismay.

How many times can the Associated Press’s Calvin Woodward and Emily Swanson write stories under such headline as “Biden is widely seen as too old for office, an AP-NORC poll finds” before the unease with Biden—who turns 80 in November—moves from dread to sheer panic?

For “balance” they write that former President Trump “has problems of his own.” The first paragraph read:

Americans actually agree on something in this time of raw discord: Joe Biden is too old to be an effective president in a second term. Only a few years his junior, Donald Trump raises strikingly less concern about his age.

Here are some representative quotes from their story:

In the poll, fully 77% said Biden is too old to be effective for four more years. Not only do 89% of Republicans say that, so do 69% of Democrats. That view is held across age groups, not just by young people,

Warren Hern: A portrait in abortion absolutism– Parts One and Two

Give her her due. Elaine Godrey flatly calls late-late term abortionist Warren Hern what he clearly is: “The Abortion Absolutist.” Her profile in the Atlantic of the 84-year-old Hern minces no words, although at some level she admires what he does “for women.”

Hern is reluctant to acknowledge any limit, any red line,” she writes. “He takes the woman’s-choice argument to its logical conclusion.”

These much later abortions “are the less common cases, and the hardest ones,” Godrey writes. “They are the cases that even stalwart abortion-rights advocates generally prefer not to discuss.”

Indeed even Frances Kissling, the founding president of the National Abortion Federation, the professional association for abortion providers, will draw a line. She “admires Hern and his commitment to women. But she has misgivings about his work.”

“Later-term abortions are more serious, ethically, than earlier abortions,” Kissling, who left NAF after a few years and went on to lead Catholics for Choice, told me—and only more so in cases that involve women who have not received any serious fetal diagnoses. “My ethics are such that I would say to them, ‘I’m terribly sorry, but I cannot perform an abortion for you. I will do anything I can to help you get through the next two or three months, but I don’t do this,’” she said.

Usually, profiles of Hern talk about how he aborts unborn babies with devastating anomalies. And so does Godrey but who adds Abortions that come after devastating medical diagnoses can be easier for some people to understand. But Hern estimates that at least half, and sometimes more, of the women who come to the clinic do not have these diagnoses.

“At least half, and sometimes more.” In these other cases, healthy babies, healthy moms.

Pro-abortionists understand that to even indirectly acknowledge what Hern is doing—and to whom— is risky. The following paragraph explains why:

During the first 13 weeks of pregnancy, when about 90 percent of abortions in America
The Republican presidential primary is underway. The first GOP debate is over; the second one is scheduled for Wednesday, September 27. The first debate showed there is no singular answer as to how to handle abortion at the federal level. That shouldn’t be a surprise to anyone. Following the Dobbs v Jackson decision, many different groups have proposed many potential solutions and suggestions.

In the early years of the pro-life movement, following the devastating Supreme Court decisions in Roe v Wade and Doe v Bolton, there was strong disagreement as to how to proceed. Pro-life people found it incomprehensible that the Court would show such utter disregard for innocent preborn children.

The immediate, and natural, response was to work for an amendment to the U.S. Constitution to restore full legal protection to unborn children. However, many in the movement thought the possibility of amending the constitution was much more likely to succeed if the amendment returned decision-making ability to Congress and the individual states jointly, with the most baby-protective law being preeminent.

There was strong disagreement over which path to follow. It wasn’t until 1983 that the U.S. Senate finally voted on the Hatch-Eagleton amendment to the constitution, which would have returned abortion law to the states and Congress. Two-thirds of the Senate needed to approve the amendment in order to continue the process but only 49 senators supported the effort, with 50 opposing.

Much like the years following 1973, we are in a new era. After all, it’s not often that the Supreme Court reverses itself after almost 50 years of precedence. It wasn’t surprising that candidates at the Republican debate had different answers.

They come from different states and have different experiences. They differ on how to interpret the Constitution.

But NONE of the Republican candidates accept the premise that abortion is, as abortion advocates posit, a woman’s “right.” NONE of the candidates argued that killing unborn children should be considered necessary “health care.”

Several of the candidates did contrast their position with President Joe Biden and his fellow pro-abortion Democrats who support unlimited abortion up to the moment of birth.

After the debate, former Biden press secretary Jen Psaki tweeted, “No one supports abortion up to birth.” She was ridiculed by thousands on X (Twitter) who gave examples of Democrats and abortion advocates saying there should be NO limits on abortion. Others asked what limits she, or abortion activists, would support. Not surprisingly—Psaki didn’t answer those questions.

While there was much discussion about the different answers given by the presidential candidates, Law Professor Mary Ziegler, who frequently researches and writes on abortion, honed in on an important matter that wasn’t asked by the moderators.

Ziegler tweeted, “Quietly losing my mind on the irrelevance of these abortion questions. What about executive orders…? Or enforcement of the Comstock Act? We know nothing about the areas where a GOP president could actually *do* something.”

Ziegler focused on what NRLC has encouraged candidates and voters to focus on as well. (https://www.nrlc.org/wp-content/uploads/RoleoftheFederalGovernmentList.pdf) Rather than support initiatives that sound good but save very few babies, there are actually things Congress and the Executive branch could do to save lives.

“We’re familiar with the adage “personnel is policy.” The President appoints approximately 4,000 people to various positions at the federal level with around 1,200 of them needing to be confirmed by the US Senate.

Of course, we are familiar with Biden’s high-level appointees:

- Secretary of Health and Human Services Xavier Becerra, who is using all resources available in a large, influential department to promote abortion and to make it easier to kill innocent unborn babies.

- Attorney General Merrick Garland, challenging pro-life laws enacted by states and using the Department of Justice to harass pro-life people who peacefully pray outside abortion facilities.

- Secretary of State Antony Blinken, who, as “The Hill” wrote, “issued a rare statement commenting on the U.S. Supreme Court’s decision overturning the constitutional right to an abortion, committing to protecting reproductive health services for State Department staff and others around the world.”

- Secretary of Defense Lloyd Austin, who directed the Department of Defense to pay expenses for military personnel to travel to procure an abortion.

These are high-profile names, but most presidential appointees are usually nameless, faceless bureaucrats to the American public. However, the good—or the damage—they can do is experienced nationwide.

One example is Neera Tanden, President Biden’s Director of Domestic Policy. Her appointment did not require Senate confirmation. Tanden worked in the Obama administration, helping to write the “healthcare” plan known as Obamacare. She served as president of the Center for American Progress (CAP), a liberal think tank in Washington, DC, which said the U.S. Supreme Court “attacked freedom” when it overturned Roe v Wade.

In a 2015 op-ed for MSNBC, Tanden attacked Congress for its efforts to defund Planned Parenthood. In 2016, while working on pro-abortion Hillary Clinton’s presidential campaign, she cheered a Supreme Court decision striking a pro-life Texas abortion law.

Be assured, Tanden is making sure the administration does everything it can to advance the killing of preborn children. And she has many allies throughout several departments in the federal government doing the same.

Over the coming year, as candidates do their best to convince the American public to vote for them, some are going to be more eloquent or appear more committed than others. We can argue over who the “really pro-life” candidate is, but come November 2024, let’s make sure our disagreements don’t elect an enemy of life.
New NRLC Special Report Shows Critical Elements Media Missed in Fifth Circuit Opinion

Case against FDA exposed mifepristone dangers, flawed drug approval process

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

At this point, the media has reported and largely moved on the U.S. Fifth Circuit’s ruling in Alliance for Hippocratic Medicine v. FDA, waiting for the Supreme Court to weigh in. This is the federal case where a group of pro-life doctors brought a challenge against the U.S. Food and Drug Administration’s approval of the abortion pill mifepristone and subsequent decisions to deregulate its distribution.

For the most part, they accurately reported the court’s ruling. The court decided that the pro-life doctors filed their case against the agency’s original 2000 approval of mifepristone too late and said that they hadn’t made any real separate case against the generic the FDA granted approval in 2019.

But the court also unanimously ruled that changes the FDA made to regulations in 2016--dropping required visits, extending gestational deadlines, broadening the prescriber pool, and dropping the reporting of non-lethal complications--were not adequately studied or scientifically justified. The same was true about modifications the FDA made in 2021, dropping required visits, extending gestational deadlines, and allowing the challenge to the abortion pill mifepristone were much greater than the FDA wanted to let on. The FDA had declared that mifepristone was “safe” and “effective” and didn’t appreciate the doctors from AHM challenging the agency’s official declaration.

Judge James C. Ho, joined the main opinion but dissented in part (he would have gone farther and allowed the challenge to the FDA’s 2000 approval) Judge Ho noted that the FDA had disparaged the earlier federal District Court ruling as “an unprecedented assault on a careful regulatory process.”

The full court argued that in holding the FDA to account it was merely doing its duty, that is, to “hold unlawful and set aside agency action, findings, and conclusions found to be arbitrary, capricious, an abuse of discretion, or otherwise not in accordance with the law.”

1. The FDA doesn’t think that anyone, much less pro-life doctors, has the right to challenge their decisions.

The FDA and Danco, the abortion pill distributor who is their codefendant in this case, both spent a great deal of time in their arguments claiming that the doctors from the Alliance for Hippocratic Medicine (AHM) lacked “standing.” They argued that as pro-life doctors not prescribing mifepristone, they really weren’t affected by any of the FDA’s actions.

Quoting extensively from doctors who filed the complaint, the court ruled that pro-life doctors having to take time away from other patients to treat complications often associated with mifepristone and sometimes being forced to finish abortions that had started but were incomplete suffered sufficient physical and emotional stress to qualify for standing. Lost income from higher liability associated with the sort of emergency treatment involved demonstrated financial impact on those physicians as well.

The Fifth Circuit looked at the record and said that it made clear that the rate and seriousness of injuries associated with the abortion pill were much greater than the FDA wanted to let on. The FDA had declared that mifepristone was “safe” and “effective” and didn’t appreciate the doctors from AHM challenging the agency’s official declaration.

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2. The FDA thinks it can bend the rules to do whatever it wants.

One of the more egregious examples of the FDA’s misapplication of its regulatory power noted by the court and elaborated upon in Ho’s concurrence/dissent was the agency’s use of the Subpart H element of the Administrative Procedures Act to approve mifepristone. Subpart H allowed for the “accelerated approval” of drugs meant for “serious” or “life-threatening illnesses,” and allowed for the acceptance of truncated study data. The reasoning was that in circumstances when a patient’s life was in immediate risk, a drug that had shown some promise might be given a limited approval even if final testing results on the drug were not yet available.

As Judge Ho pointed out, everyone knew that normal pregnancies were not “life threatening illnesses” and that there was no real basis for cutting corners in the approval process.

The FDA proceeded anyway. It maintained that the statute allowed for use of the Subpart H provision on the grounds that while pregnancy was not technically an “illness,” it was a “serious or life threatening condition” (emphasis added) with “condition” being close enough.

See Report, Page 29
The 2024 presidential race is officially underway! We have seen one Republican Primary debate and the next one is scheduled for Wednesday, September 27th, less than a month away. On the other side of the aisle, it appears the Democratic Party will not hold any primary debates despite the wishes of its rank-and-file members. A USA Today/Suffolk University poll found eight in ten Democrats want their party to hold primary debates. (That included 72% of those who support President Biden for a second term.)

What is crystal clear even at this early stage are the fundamental differences between the Republican and Democratic presidential candidates on the issue of abortion.

Each of the GOP candidates we saw on the debate stage (as well as former President Trump who did not attend the debate) provide a stark contrast to the Biden-Harris ticket on the issue of abortion. While the GOP candidates may have differences on policy specifics, each one opposes the extreme Biden-Harris abortion agenda, which calls for a nationwide policy allowing unlimited abortions for any reason, even late in pregnancy, and the use of your tax dollars to pay for abortions. As National Right to Life President Carol Tobias noted in NRLC’s press release following the debate, “The Biden-Harris Administration and the Democratic Party have yet to hear of an abortion they would not support.”

In 2024, a top goal for the pro-life movement must be the election of a pro-life president as well as pro-life majorities in the House and Senate. To achieve this, we must do all we can to register pro-life voters, educate those in our circles about where the candidates stand, encourage pastors and religious leaders to address the abortion issue from the pulpit, volunteer with campaigns in our area, and more. Just as important, what we do during elections must not hinder the success of pro-life candidates by repeating the mistakes of past cycles.

The following are common ways that we as pro-life advocates can unintentionally cause a pro-life candidate to lose an election and contribute to a pro-abortion victory. Heading vote for that candidate. Pro-life candidates need the active support of all pro-lifers and, all too often, without that full support, a pro-abortion candidate wins.

1. **Fall in love with your candidate**

   We encourage pro-life advocates to get involved in campaigns. Your active participation and volunteer activities can help a pro-life candidate build a strong campaign. It also puts you in a position to build and strengthen a relationship if the candidate wins. Sometimes, pro-life advocates get so excited about their candidate that if they lose to another pro-life candidate (especially in a primary), they can become like the child who lost a game – he takes his toys and goes home. In this scenario, some refuse to support the pro-life candidate who won the primary. They decline to volunteer with the campaign and will not work to get others to vote for that candidate. Pro-life candidates need the active support of all pro-lifers and, all too often, without that full support, a pro-abortion candidate wins.

2. **Believe that your candidate is the only “real” pro-life candidate in the race and bash other pro-life candidates**

   A primary where there are several pro-life candidates, pro-life individuals should select the candidate they think is best. Sometimes, unfortunately, some pro-life advocates attack the other pro-life candidates for not being “pro-life enough.” For example, if a candidate has a decades-long pro-life voting record, they pick out the one or two votes in which the candidate did not vote correctly and attack him as not being sufficiently pro-life. Yet both share the same pro-life platform. By doing this, the pro-life advocate demoralizes fellow pro-life advocates and weakens enthusiasm for the pro-life candidate who does win the primary. Pro-abortion groups will, of course, take advantage of this circular firing squad. Pro-abortion candidates will highlight these divisions in pro-life circles to hold down support for their opponents. Ironically, at the same time, pro-abortion candidates will go to other voters and label the same pro-life candidate as an “anti-choice extremist.”

3. **Support a really nice candidate who is pro-life but has no chance of winning**

   The lives of countless unborn children and their mothers hang in the balance. That is why the viability of a candidate must be considered when determining how to cast our votes. Sometimes, there may be a wonderful pro-life individual running who is active in your right-to-life chapter or attends your church. They have the best of intentions and care deeply about the issue. But, if they cannot gain enough support to be a viable candidate, they should be encouraged to step aside for a pro-life candidate who can win the general election.

4. **Expect candidates to sound like Right to Life chapter leaders**

   People who are not directly involved in the pro-life movement are not going to be as articulate or well-versed in all the pro-life issues. At the onset, they may not know all the ins and outs of Roe v. Wade or Dobbs v. Jackson, or why we prefer the term “pro-life” as opposed to “anti-abortion” or “anti-choice.” Unless there has been some prior discussion with active pro-life advocates, some candidates may not realize that there are certain “code words” that are interpreted differently by the pro-life community. Just because the wrong word comes out of their mouth does not necessarily make the candidate a phony. Sometimes a truly pro-life candidate can be tripped up by the media, confused, ill-informed, or quoted out of context. Give candidates a chance to explain what they really believe. In most cases, they will do what is right once they are in office, but that does not mean they will be comfortable or articulate talking about the killing of unborn
Will CNN’s Newest CEO Create a Non-Partisan and Balanced News Network?

By Laura Echevarria, Director of Communications and Press Secretary

CNN’s ouster of its Chairman and CEO Chris Licht a few short months ago was just another item the network checked off in a long list of issues troubling CNN and its ratings failures over the years.

After a search lasting a little over two months, the CEO of Warner Bros. Discovery, which is the parent company of CNN, announced that CNN’s new CEO will be Mark Thompson, formerly the CEO of The New York Times and, from 2004-2012, the Director-General of the British Broadcasting Corporation (BBC).

David Zaslav, CEO of Warner Bros. Discovery, said in a statement, “There isn’t a more experienced, respected or capable executive in the news business today than Mark, and we are thrilled to have him join our team and lead CNN Worldwide into the future.”

But what does this mean for CNN and the future of the network and what does it mean for viewers who were hoping for more balanced coverage of the news? Specifically, what does it mean for the pro-life movement and coverage of the abortion issue?

Under Chris Licht, CNN started to move toward a more non-partisan, news-oriented format with less opinion and more straight news. CNN called for comments from National Right to Life several times and NRLC spokespersons were interviewed on camera on issues such as the abortion pill and the U.S. Supreme Court decision in Dobbs. But Licht may have moved too fast in some ways and not fast enough in others. Licht fired recognized liberals like Don Lemon and Chris Cuomo but failed to establish key anchors viewers could connect with and watch regularly.

What does Mark Thompson bring to the table?

As the chief executive of The New York Times, Thompson crucially brought The Times back from the brink of destruction as it faced the challenges of a print newspaper in a digital world. What is concerning is that Thompson’s tenure at The New York Times was as late as 2020 when op-ed staff writer Bari Weiss resigned—publicly announcing her departure by posting her resignation letter on her website.

In her resignation letter, Weiss recognized that she was brought on in 2017 “with the goal of bringing in voices that would not otherwise appear in your pages: first-time writers, centrists, conservatives and others who would not naturally think of The Times as their home.”

But, Weiss notes, the honeymoon did not last long. In her resignation, Weiss observes that following the 2016 election, ...lessons that ought to have been learned. Instead, a new consensus has emerged in the press, but perhaps especially at this paper: that truth isn’t a process of collective discovery, but an orthodoxy already known to an enlightened few whose job is to inform everyone else. ...Stories are chosen and told in a way to satisfy the narrowest of audiences, rather than to allow a curious public to read about the world and then draw their own conclusions. I was always taught that journalists were charged with writing the first rough draft of history. Now, history itself is one more ephemeral thing molded to fit the needs of a predetermined narrative.

But was this Thompson’s fault or did the failure lie with news executives? While Thompson served as CEO of The New York Times, his primary goal of bringing it into the future was realized. Under Thompson, The New York Times was the first news outlet to reach over 1 million digital-only subscribers. Today, the paper is primarily digital with over 9 million digital subscribers and less than 700,000 print subscribers.

In 2007, while Thompson was leading the BBC, the British network was rocked by accusations of editorial guideline violations that involved a handful of staff that engaged in lying to the public during promotional viewer call-in competitions. The lies damaged the BBC’s reputation. In an email circulated to BBC staff, Thompson wrote,

"Many were, like me, shocked and disturbed to learn that a small number of our colleagues were prepared to risk the reputation we have all fought so hard to build at risk by deceiving the public...."

I wanted to underline to you again that I and the BBC’s directors are together taking action because we believe that trust is the cornerstone of the BBC’s brand and heritage across the world. Nothing matters more than that. We cannot, and will not, allow anything to risk our reputation for integrity with our audiences.

Does Thompson’s reaction signal that he willing to control the editorializing by hosts and bring balance to the network or will his sole goal be to bring CNN back from the brink with special programs and by reinstating the streaming service that was shunted aside under Licht?

Only time will tell.
Extreme Pro-abortion State Ballot Initiatives: Let’s Educate

By Casey Romanoff Coffin, Legislative Assistant, Department of State Legislation

Since the 2022 Dobbs decision, abortion advocates have been successful in using state ballot initiatives to force their abortion-on-demand agenda on millions of unwilling citizens. These initiatives are either introduced by a state legislature or initiated by advocacy groups or members of the public. Defeating these initiatives has been a tough battle for the pro-life movement since we are always outspent and always face a hostile media. We need to focus on the wording of these extreme measures and their effect: abortion with no limits during all nine months of pregnancy.

In 2022, abortion-related initiatives were on the ballot in California, Kansas, Kentucky, Michigan, Montana, and Vermont. The Kansas and Kentucky initiatives would have added abortion-neutral language to their respective state constitutions by affirming that there is no expressed “right” to abortion, or the funding thereof; they did not pass. By contrast, pro-abortion initiatives in California, Michigan and Vermont did pass and enshrined abortion-on-demand into the states’ constitutions. These abortion initiatives threaten the enforcement of existing pro-life laws as well as prevent elected representatives from enacting future common sense protections for the unborn and her mother.

Pro-lifers must be vigilant in confronting and defeating pending pro-abortion ballot initiatives by exposing how extreme they are. This November in Ohio, the pro-abortion “Right to Reproductive Freedom with Protections for Health and Safety” initiative says, “in no case may such an abortion be prohibited if in the professional judgment of the pregnant patient’s treating physician it is necessary to protect the pregnant patient’s life or health.”

A “health” exception paints broad strokes to include physical, mental, familial, emotional reasons – anything the abortionist deems as sufficient to justify ending an unborn child’s life. This language illustrates that these initiatives are written with intentionally vague language so that abortion advocates can “protect” an unfettered right to terminate unborn life.

In November 2024, Maryland residents will vote on the pro-abortion “Right to Reproductive Freedom Amendment.” Passed by the state legislature, it is another good example of pro-abortion advocates using intentionally vague language.

It allows a “fundamental right to reproductive freedom, including but not limited to the ability to make and effectuate decisions to prevent, continue, or end one’s own pregnancy.” Like Ohio’s initiative, it would invalidate state protections for unborn children and prevent future life-saving initiatives.

Pro-abortion initiatives could possibly appear on ballots in 2024 and beyond, including Arizona, Arkansas, Florida, Minnesota, Missouri, Nebraska, New York, and South Dakota.

So, what do we do when facing adversaries with a lot of money and an advocacy media who repeats their every word verbatim?

One thing we do is what we’ve done for over 50 years: we never give up; we never get discouraged or back away from any challenge. We continue to educate, whether it be legislators in state capitals, or fellow citizens at the state fair. We present unassailable facts when we educate, like scientific advances that continue to reinforce the truth about the development of an unborn child.

We educate about the importance of informed consent laws, which allow a woman to see her unborn child on an ultrasound before she has an abortion. We educate about waiting periods that allow a mother to contemplate life-saving options for her child. We educate about the importance of abortion alternative programs like pregnancy resource centers, which offer real help to moms and families.

The decline of annual abortion numbers is a result of protective laws like these that provide legal protection for unborn children and offer help and hope to their mothers. We must remember, we are the voice for the voiceless.

In the case of pro-abortion ballot initiatives, it is crucial to educate voters about how far-reaching they are, and their implications, especially regarding “health” exceptions, which allow for elective abortion for any reason. We must educate about how the initiatives will prevent legislators from enacting future pro-life protections like parental notification laws. We must tell people that life-affirming laws already on the books would likely be nullified.

Pro-abortion advocates are using these ballot initiatives simply to circumvent the will of the people; they hide their real objective – unlimited abortion-- in vague language that can be expansively interpreted by pro-abortion judges under the guise of a ballot initiative. This is their strategy.

“The truth is incontrovertible; malice may attack it, ignorance may deride it, but in the end, there it is,” said Winston Churchill. The truth is: an unborn child is a person who needs our protection.
Did YOU Know Sometimes Babies Survive Abortions?

Did you know that every state in our wonderful country has abortion survivors? They may not be known to the public yet, they may not be known to themselves yet, but they are there. It is estimated that 85,817 infants have been born alive after failed abortions since 1973, and the average number of abortion survivors each year is approximately 1,734.

Regardless of what the pro-aborts, press, and some politicians say, sometimes, babies survive abortion. They make it out alive. They have a story to tell, and we need to make sure those stories are heard. And we can help each other with this task.

Below is information that can help your state organization and help the Abortion Survivors Network as well. See below for several valuable resources and information. Take a moment and sign up here to receive the newsletter of the ASN.

See the latest in a continuing series of videos, telling the stories of survivors and learn how we can work together and help each other. Watch the video here: https://www.youtube.com/watch?v=ieFqLaIz3-A and help spread the word by sharing on social media!

Here is a one pager on the month (September) and promoting September as Babies Survive Abortions Awareness Month.

If you need help or have questions, please contact Emily with the Abortion Survivors Network here: emily@abortionsurvivors.org

Check out the link below and make sure your House Members have signed onto the Born-Alive Abortion Survivors Protection Act (H.R.26) and if they haven’t, get calls going in asking them to sign on. This is an important bill!

Thank you for all you do. And remember, sometimes, babies survive abortion. Sometimes, their stories don’t end with the abortion. Sometimes, that is where they begin.

We're all human, aren't we? Every human life is worth the same and worth saving.

J.K. ROWLING
To build a pro-life culture in Minnesota, we can’t settle for only talking to other pro-life people. We must reach out to those around us who do not yet share our view. If we don’t, who will?

But engaging in these discussions can seem daunting. Here are three keys to conversation that will make you a persuasive ambassador for the pro-life view and an effective defender of innocent human life.

1. Start naturally

People aren’t receptive if they feel cornered, so don’t force conversations at awkward or inappropriate times. But when the opportunity emerges, be ready to engage. Open-ended questions are a great way to get dialogue started naturally and without any pressure. You might mention a current event, a new law, or a recent article or video about abortion, and ask something like “What do you think about this?” or “Did you see the law that passed this year? It legalizes abortion all the way through pregnancy.”

2. Engage graciously

No matter how powerful your message, it won’t really be heard if you don’t communicate it in the right way. Respect is essential. Show respect by listening to the other person, trying to understand their view, and asking questions. Avoid name-calling, anger, and condescension, which only serve to close off the person you want to influence. Try for dialogue, not debate. Aim to win the person, not just the argument.

3. Argue compellingly

The more you know, the better. It helps to know how to articulate your pro-life view and to expose problems with pro-abortion arguments. You can point to science, which demonstrates that unborn children are members of our species, and human rights, which belong to all humans regardless of their age or ability. You can show that arguments excluding unborn children undermine equality for everyone, that tough circumstances call for compassion rather than violence, and that the right to bodily autonomy is not a right to harm the bodies of others. For detailed information about making this case for life in a compelling way, visit mccl.org/whyprolife or contact MCCL.

Manage your expectations

When you have a conversation about abortion, don’t expect to completely change someone’s mind on the spot. That usually doesn’t happen. Just aim to give them something to think about—to plant a seed that will produce fruit over time with additional conversations.

And remember this: Each positive encounter—each softening of someone’s heart or piquing of someone’s mind—makes a difference. It’s one more step toward the Minnesota we want to be: a state where every unborn child counts.
“Take a trip with me on my first abortion at-home”

By Dave Andrusko

You don’t have to read far into Alice Gibbs’ review for Newsweek to know where she is coming from. In fact, under the category “Wellness & Fitness,” the tell-all headline for her story is “Mom Films At-Home Abortion to Destigmatize Termination: ‘Nothing to Hide.’”

In her opening sentence, Gibbs gushes “One woman’s courageous decision to share her personal experience of abortion on TikTok has sparked a wave of discussion online.” “Monica’s” first sentence is “Take a trip with me on My first abortion at-home.”

“First”? Pro-lifers—actually anyone who finds brutality masquerading as “nothing to be seen here” appalling—will gulp at the mugging and sly comments about ordering a hamburger from Wendy’s as the life flows out of her baby. But, of course, we are not the target audience.

The video is less than two-minutes long. We’ll get to the specifics in a second but what cannot be missed is how radically misleading it is to cram hours and hours, even days and days of cramping and bleeding and agony into one minute, 49 seconds.

In the interview with Gibbs, “Monica” is identified solely by her first name. We learn that Monica lives in Los Angles and has one daughter. We know nothing about why she chose to allow her first daughter to live or the reason she chose to abort her second baby. Needless to say, there is not a word about the father(s) but why would there be, right?

In the video, which has been viewed over 3 million times, she “shared how she prepared and went through with an abortion at nine weeks pregnant,” Gibbs writes. “On camera, she shared the items she had stocked up with, including medications, maxi pads and water, and showed the schedule.”

At this juncture, Gibbs inserts a cautionary note. “It is important to note that the information in the video is based on her personal experience and is not medical advice. Anyone seeking support or advice on abortion should contact a medical professional.” Not that you would likely get honest advice. The complication rate is far greater than women are told and I strongly suspect the awful pain of a “medication abortion” is also minimized.

Monica tells Gibbs, “I wanted to create a safe space for women to come forward and share their experiences and stories about their abortions without the fear of being judged or criticized.” She adds, “I’ve noticed that the media tends to ignore the topic of abortion as a whole and I thought, ‘Well, maybe if I come forward and share my own journey, we can finally talk about it.’”

Seriously? You can find an unlimited number of “safe spaces”—“places without the fear of being judged or criticized”—for heaven’s sake.

As for “ignor[ing] the topic of abortion”? Excuse me but is silly. We are inundated with abortion-related stories, the vast majority of which non-judgmentally affirm a woman’s “right” to snuff out her unborn baby’s life.

I mentioned the mugging but that is to reassure her audience that she is one of them and abortion is no big deal. Although she is 25, Monica sounds and acts like a teenager, another sign that, for pro-abortionists, this advice cannot be given too soon.

However it also true that there are parts in her account of her abortion, which took place July 20, especially about the incredible pain of a chemical abortion, that ring true, although it very questionable that many women are essentially pain-free after one-night, as Monica says she was.

At some point (it’s not terribly clear when but soon) after she takes the second drug that makes us the chemical abortion regimen, “I am really starting to pass a lot of blood clots, which is very expected—‘they were huge.” A close up shows Monica in great pain.

A few minutes later and “I’m in so much pain I am just laying down.”

After that passes, she tells us, “I order some Wendy’s.”

The next shot takes place the following morning. Monica concludes, “The pain was unbearable last night but I made it and I’m okay.”

[Photo credit: @monicathehuman/TikTok]
COLUMBIA, S.C. (Tuesday, August 29, 2023) – The South Carolina Supreme Court rejected Planned Parenthood’s petition to reconsider its 4-1 decision upholding the 2023 Fetal Heartbeat and Protection from Abortion Act issued on August 23.

Planned Parenthood petitioned for a re-hearing on the grounds that the definition of a fetal heartbeat was ambiguous and should be identified only when the heart has developed four chambers by the 17th to 20th week of pregnancy. The law states the child is protected from abortion as soon as the heartbeat can be detected after fertilization, usually by the sixth week of pregnancy.

In a two-sentence statement the justices wrote, “After careful consideration of the petition for rehearing, the Court is unable to discover that any material fact or principle of law has been either overlooked or disregarded. The petition for rehearing is therefore denied.”

The order was signed by Justice John Kittredge, Justice John Few, Justice George James, Jr., and Justice Garrison Hill, all of whom upheld the law last week. Chief Justice Donald Beatty was the lone dissenter as he was on the original opinion. He said he would grant the abortion industry’s request.

State Attorney General Alan Wilson, whose office defended the law, said, “as we have always argued and maintained, the constitutional right to privacy does not apply to abortion. The right to life is foremost and absolutely must be protected and prioritized. We’re pleased with the court’s decision to deny a petition to rehear this case. I believe this decision will have a long-lasting positive impact on the future of our state, and I am honored our office was able to fight for the unborn and defend the rule of law.”

Since the August 23 decision, abortions have declined in South Carolina by 70 percent, down from 180 per week. Health officials estimated up to 50 percent of the abortions prior to the August 23 decision were performed on out-of-state women because law protecting the unborn were stronger in Florida, Georgia, and North Carolina.
Alright, let’s cut to the chase. The Democrat party (a) supports abortion until the baby is born (and is, at best, agnostic on passive infanticide) but (b) knows that this is a non-starter with the 99% of the population that is not in Congress, so (c) they have to come up with creative —read evasive—answers that are blatantly misleading when not out and out untrue.

By comparison, their verbal gymnastics put Simone Biles’s double-twisting double somersault from the balance beam to shame. There’s no question—no question—that Democrats support unrestricted abortion until birth.

So how in the world do they evade being called to task? It helps that reporters never pin them done because they insist that since no one is that barbaric, the real villains are (you guessed it) Republicans and/or pro-lifers who are making this stuff up out of whole cloth.

After last week’s Republican presidential debate, Jen Psaki, formerly of Biden’s White House staff and now at MSNBC, tweeted “No one supports abortion until birth.”

TikTok star Harry Sisson was indignant., “Democrats don’t support abortion up until the day of birth. Every single Republican candidate on the debate stage is lying to the American people right now. Disgusting.”

National Review Online’s Brittany Bernstein put some of the lies to bed. She wrote, “But of course, none of these claims square with the facts. The 2020 Democratic Party platform explicitly affirms a universal right to abortion and doesn’t reference a single abortion limitation acceptable to the party. ‘We believe unequivocally . . . that every woman should be able to access high-quality reproductive health care services, including safe and legal abortion,’ the platform states.”

Bernstein went on to add “It also promises to ‘fight to overturn federal and state laws that create barriers to reproductive health and rights’ — in other words, to block any and all limits on abortion, including gestational-age limits. The platform embraces federal funding for abortion businesses, supports repealing the Hyde amendment that precludes taxpayer dollars from directly reimbursing abortion providers, and promises to ‘protect and codify the right to reproductive freedom.’”

And that’s just for starters. The defense? Well, let’s bring in a Washington Post columnist who fairly weighs the evidence and, naturally, decides it’s all phooey.

Philip Bump calls it “a favorite bit of hyperbole”; “misleading, if not…flatly incorrect.” Really? How is the charge that Democrats stand for allowing “abortion all the way up to the moment of birth” “misleading, if not…flatly incorrect”? 

Note, first, that Bump admits something you virtually never see conceded by a pro-abortionist: “There are states in which there are no limits on the point of a pregnancy when abortion is available.” Wow!

How do you get out of that corner? Ridicule and cherry-picking sources:

[T]hat doesn’t mean that a woman can simply walk into a facility at her 40th week and request an abortion. Instead, as PolitiFact wrote when considering this question last year, such procedures “are performed on a case-by-case basis when there are maternal or fetal complications.”

Moreover, these abortions are as rare as hen’s teeth: Importantly, even abortions performed after 20 weeks are rare.

Two points in rebuttal in reverse order. “Rare” is in the eye of the beholder, or, in this case, in the blind eye of the beholder.

Cassy Fiano-Chesser explains how un-rare these abortions 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.
A devastating takedown of the Democrat party which endorses unlimited abortion up until birth

From Page 12

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 CDC — and numerous states, like California and Maryland, do not. Others, like New Jersey, did not have reporting requirements in place, causing the CDC to 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.

The other point I’d like to make is in response to the defense that these “procedures” are “performed on a case-by-case basis when there are maternal or fetal complications.” Again, they are not intimating, they are stating as a fact that these abortions are rare and almost always because the unborn child is gravely injured.

Washington Post “Fact Checker” Glen Kessler chipped in that “Most of the others [that is, cases where the baby has “some serious, catastrophic fetal abnormality”] have severe medical conditions, such as pregnancy-related high blood pressure, severe hypertension or multiple sclerosis, so an abortion will reduce the woman’s risk of death.”

His source? Warren Hern, who runs a Colorado abortion clinic that “specializes in late abortions.” This was for Kessler’s story that ran in the Washington Post last year.

Since that time, The Atlantic did a profile of Hern written by staffer Elaine Godfrey, headlined “The Abortion Absolutist.” This paints a very different picture of Hern. (See also our editorial on page 2.) According to the Peter Laffin of the Washington Examiner Hern admitted that at least half of the late-term abortions he’s performed over the past half-century were elective, meaning that there was no underlying medical condition in the baby or the mother. Abortion advocates regularly assure the public that late-term abortions of this sort are exceedingly rare, if existential at all. But here we have it from the horse’s mouth. Who knows how many thousands of these abortions Hern has performed? Again, he’s been doing this for half a century.

It gets worse. If you have the stomach for it, you can read it at www.washingtonexaminer.com/restoring-america/patriotism-unity/late-term-abortionist-warren-hern-is-secular-materialisms-logical-conclusion

The defenses for abortion on demand up until birth are god-awful in their own right on those few occasions where pro-abortionists concede they exist. But for Democrats and their limitless supply of obliging reporters to attempt to shift the onus to pro-lifers is a stark reminder of just what we are up against.
One can expect to be met with love, compassion, understanding, and critical resources for both mom and baby at pregnancy centers across the country. Yet pro-abortion federal and state lawmakers are attacking these life-affirming centers that aid pregnant mothers in need and make true choice about their pregnancy possible.

Sen. Elizabeth Warren, a prime opponent of these centers, promised that she, along with her extreme pro-abortion counterparts in Congress, would “crack down” on these centers, and insisted, “We need to shut them down here in Massachusetts and we need to shut them down all around the country.” Unfortunately, Warren’s harmful “crack down” has become a reality in many places. During the 2023 legislative session alone, Democratic state lawmakers have introduced or advanced at least 26 bills that seek to aggressively regulate or eliminate pregnancy resource centers altogether.

In Vermont, the state legislature has passed Senate Bill 37 which singles out pro-life pregnancy centers because they don’t provide abortion, and allows the state’s pro-abortion attorney general to fine them for advertising anything she deems “misleading,” up to $10,000 for each violation. The law fails to define “misleading.” Meanwhile, at least 87 pregnancy resource centers have been vandalized and brutally attacked by pro-abortion extremists since the Dobbs decision was leaked in May of 2022, simply because abortion isn’t among the vast number of resources they offer. Even as corrupt pro-abortion politicians seek to eliminate these centers and by their rhetoric fuel the onslaught of violent attacks against them, 91% of Americans recognize the good that pregnancy resource centers do and support them.

In New Jersey and California, consumer alerts have been issued urging residents to file complaints with state officials against these centers.

Illinois Gov. JB Pritzker recently signed a bill into law that gives the state’s attorney general the power to go after pregnancy centers he thinks use “deceptive tactics” to offer women considering an alternative to abortion care and resources. Under this law, the Illinois attorney general may investigate complaints about these charitable centers, prosecute cases, and issue fines of up to $50,000. A federal judge has since enjoined the law because of blatant free speech concerns. It would be far more compassionate, and far smarter politics, if Elizabeth Warren and the numerous others attacking these life-affirming centers would roll up their sleeves and join the effort to help women – not sabotage it.

The nearly 3,000 centers in the country go far beyond offering abortion alternatives. They provide free professional care to vulnerable women including pregnancy testing, options consultation, medical services, prenatal and parenting education, material assistance, after-abortion recovery support, referrals for medical care, and connection to vital community and public health resources.

91% of Americans recognize the good that pregnancy resource centers do and support them.

Stop sabotaging efforts to help women in crisis pregnancies

By Thomas Glessner, founder and President, National Institute of Family and Life Advocates (NIFLA).

Editor’s note: This article was published by Real Clear Politics and is reprinted with permission. Heartbeat International manages Pregnancy Help News where this appeared.
‘Not nice Lucy!’: the fun-loving nurse who is modern England’s worst baby killer

By Michael Cook

Last week English neonatal nurse Lucy Letby was found guilty of murdering seven babies and attempting to kill six others. The attacks took place between June 2015 and June 2016 in a ward for premature babies in Countess of Chester Hospital, in the city of Chester.

Last Monday the 33-year-old nurse was given a whole-life sentence, the severest possible penalty under English law.

Her crimes ought to influence how we perceive “voluntary assisted dying”. But first the facts of the Letby case.

Letby refused to attend her sentencing hearing at Manchester Crown Court and so the judge had to speak to the empty dock. Mr Justice Goss declared that “there was premeditation, calculation and cunning” and “a malevolence bordering on sadism” in her actions. “During the course of this trial, you have coldly denied any responsibility for your wrongdoing,” he said. “You have no remorse. There are no mitigating factors.”

Letby’s trial took 10 months and the jurors deliberated for 22 days. She steadfastly maintained her innocence, so the evidence was largely circumstantial. There had been a spike in deaths while she was working in the neonatal unit. When doctors began to investigate, they concluded that the only common factor was her presence.

Some of the babies were killed with overdoses of insulin, some by injecting air into veins, one by force-feeding him too much milk. Two babies who survived suffered severe brain damage.

After long delays, Letby was assigned to a desk job late in June 2016 and was finally arrested in July 2018.

When police eventually searched her home, they discovered bizarre words scrawled on post-it notes. These included phrases like, “I AM EVIL I DID THIS, I killed them on purpose because I’m not good enough, I don’t deserve to live, I am an awful person.”

As soon as she was removed from the ward, the deaths stopped, according to The Guardian. Since then, more than 2,500 babies have been cared for in the neonatal unit and there has only been one death.

Questions about Lucy Letby

There are two unanswered questions which hover over these ghastly crimes.

The first question is the killer’s motivation. What baffled everyone about Lucy Letby, who is the worst baby killer in modern British history, is how normal she was. She appeared to be cheerful, competent, confident, and caring. She enjoyed holidays and partying with her friends. None of her colleagues had the slightest suspicion that she might be responsible for the mounting death toll. “It can’t be Lucy. Not with a doctor and she may have wanted to impress him. Whatever her motives were, she certainly didn’t fit into stereotypes of a psychopath.

The second question is why the hospital administrators reacted so sluggishly.

In June 2015, after three deaths, the chief doctor on the neonatal unit, Stephen Brearey, and the hospital’s nursing director saw that Letby had been involved in all of them. After more incidents, Brearey requested an urgent meeting with hospital executives in February 2016. Nothing happened until May 2016 when the administration wrote a letter in which they said: “There is no evidence whatsoever against LL [Letby] other than coincidence”. It was not until the end of June and two more deaths that Letby was removed from nursing.

One doctor recommended raising the matter with the police. He alleges that he was told that this would risk damaging the hospital’s reputation and would turn the neonatal unit into a crime scene.

Two external reviews were ordered which the hospital executives regarded as exonerating Letby, although they were not actually reviews of her responsibility for the deaths. In January 2017 the hospital administration even demanded that seven doctors sign a letter of apology to Letby for bringing her name into disrepute. “We are very sorry for the stress and upset that you have experienced in the last year,” the letter said. The doctors were also told that Letby’s parents had threatened to report them to the General Medical Council. Two of the doctors were ordered to attend mediation sessions with Letby. One of them complied.

It was only in May 2017, following continuing pressure from the doctors, that the police were called in.

Dr Brearey told the BBC that it seemed that hospital executives were trying to “engineer some sort of narrative” to keep the police from investigating. “If you want to call that a cover-up then, that’s a cover-up.”

Questions about ‘voluntary assisted dying’

These crimes also raise serious questions about whether safeguards, however strict, will deter serial killers like Letby when assisted suicide and euthanasia become legal. Healthcare workers who kill are rare, but they do exist.

See Lucy Letby, Page 16
New CDC head says ‘I’m So Disappointed’ About Abortion Status

By Dave Andrusko

Dr. Mandy Cohen is the new director of the U.S. Centers for Disease Control and Prevention (CDC). She succeeds Dr. Rochelle Walensky who retired. A month into her new position, she gave an interview to Alice Park of TIME magazine.

In case the reader might be tempted to stop reading half-way through and miss the major point of the interview, the headline reads, ‘I’m So Disappointed’ About Abortion Status in the U.S., Says New CDC Director.”

Park asks 

Especially in the past year, women’s reproductive health has been really a hot topic in the country, with the restrictions placed on contraception and abortion. What role does the CDC have in ensuring that women continue to have access to as many healthy, evidence based choices as possible?

Cohen essentially skips answering the abortion part of the question, so Park tees it up again:

Just this week, there was the appeals court decision backing a Texas judge's ruling on restricting mifepristone. The abortion pill remains available for now, but this is going to continue to be debated in the courts. As a physician, and a public health leader, how does that strike you?

Cohen as much as says “thank you” and in answering, throws in

Well, I’m so disappointed that we are here, that we are having the conversation to revisit whether or not women should have access to health care when they need it. And, you know, I will say as a mom of two daughters, a physician, and now the director of the CDC, I’m going to continue to make sure that we are working to make sure women have access to care when they need it, and that they have medical treatment when they need it.

Come to think of it, in responding to the first question, Cohen did say “The mission of the CDC is to protect and improve health.”

Any chance Cohen would push to “protect and improve the health” of the nearly 900,000 unborn babies aborted in this country every year?

As part of an Administration that has richly earned the reputation of the most pro-abortion ever, to ask the question is to answer it.

‘Not nice Lucy!’: the fun-loving nurse who is modern England’s worst baby killer

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English nurse Beverley Allitt was convicted in 1991 of four baby murders. English doctor Harold Shipman was convicted in 2000; he is believed to be responsible for 250 deaths. American nurse Charles Cullen was convicted in 2004 of 29 murders, but he may have killed as many as 400. German nurse Niels Högel was convicted in 2015; he may have killed 300 people.

First, a warm and confident façade can mask a murderer. Letby’s dominant characteristic was “niceness”. Many doctors who regularly perform euthanasia are perceived as caring, compassionate individuals. Most of them, however misguided, probably are well-meaning. But there is no guarantee that some of them will not overstep the mark.

Second, who will ever know? In a normal hospital setting, doctors and nurses are dedicated to saving lives. With euthanasia, their intent is to end lives. The measure of the success of a “voluntary assisted dying” regime is more deaths — always, to be sure, more voluntary deaths. Rising numbers of deaths indicates to euthanasia supporters that there are fewer barriers to choosing VAD. VAD would provide a good cover for someone like Lucy Letby.

Third, the murderer’s bosses are bound to sweep crimes under the carpet. Time and time ago, in settings ranging from sexual abuse to politics, managers stonewall and cover up. Medical murderers are devilishly hard to detect, as Letby’s case demonstrates. The reputational risk for bureaucrats is immense and they will battle to protect their organisation’s image until the evidence is overwhelming.

Canada ought to bear in mind the crimes of Lucy Letby when it considers enlarging the scope of its euthanasia laws.

The latest development is proposed guidelines which practically require doctors and nurse practitioners to recommend medical aid in dying to people who might qualify.

The Model Practice Standard for Medical Assistance in Dying (MAID) was released in March, but the most sinister of its proposals was only noticed recently. Section 6 says that patients must be informed of MAID if “MAID is consistent with the person’s values and goals of care”.

Unless you are clutching a copy of the Qu’ran or a Rosary, activist doctors will probably assume that MAID is consistent with your values. And if a sweet young thing like nice Lucy Letby whispers that MAID would be sooo good for you, wouldn’t you be inclined to agree?

Editor’s note. This appears at MercatorNet and is reposted with permission.
The Washington Post is irrevocably and unequivocally in support of killing babies. Last Tuesday, The Post released a disturbing piece titled, “An abortion ban made them teen parents.” The story walks through the life of a young couple and the struggles they’ve had after becoming parents as teenagers. The Post alluded that all of their life, marital and emotional struggles are because they couldn’t abort their now two-ish-year-old twin girls when pregnant, a fact that even The Post noted. Nonetheless, Brook would have had to travel 13-hours away, to New Mexico, if she really wanted to kill her babies.

Thankfully, Brook and Billy welcomed their twins, Kendall and Olivia, six months later. While this is a beautiful and wonderful testament to how sacred life is, The Post used nearly 5,000 words to talk about all the struggles the High family endured as a result of these two babies NOT being aborted.

“Now, with two children, they are permanently linked,” the piece read.

Much of the piece had a sour attitude about the girls’ existence. The Post noted and harped on the fact that sometimes Billy and Brook think about the “new laws that led them to this moment.” Billy explained to the outlet that “if you’re not planning on having a kid, abortion is a much cheaper option than raising people.” He also added that the laws, since Roe’s overturn, “create a not good situation to be in.” The Post included one portion where Billy looked at his girls after explaining how much harder life is since he couldn’t abort his kids and said, “I don’t know. I’m tired.” The framing of the piece made it seem like Billy was regretful at that moment.

Later in the piece, Brook spoke on how she decided not to go to New Mexico to have an abortion and even commented how her babies were and are people.

“If I would have had the abortion…” she said and then paused. “I can’t even think of it that way now. Those are our babies, and they’re people.”

Yet, The Post lamented how “at least 9,000 extra live births” occurred because of a Texas abortion ban, “making Brooke and Billy an early example of a family compelled into existence by an abortion ban.”

Geez, Louise! Can’t we just be happy these beautiful babies got a chance at life!

I’m not alone in that request. Users on Twitter, or X, were disturbed with The Post’s lament on life.

“Really disgusting attempt by the Washington Post and @CAKitchener to make you think these parents should have aborted their twin daughters, Kendall and Olivia, who will one day read this story,” The Daily Signal’s Mary Margaret Olohan tweeted.

Nick Givas, another conservative commentator said, “The editors and reporters who wrote this are twisted and sick.”

Another made a great point saying, “I’m pretty sure it was NOT the abortion ban that ‘made them parents.’ Wow WaPo. Wow.”

And one more asserted, “WaPo going at this same story again with the nebulous ‘is it good these kids are alive?’ framing is just wild…”

It’s shocking, but not surprising for The Post to allude to every issue that this couple has to deal with to be the result of not getting an abortion. The outlet has this disturbing idea that people’s lives will be ruined if they don’t abort their kids.

SICKENING!

Editor’s note. This appeared at Newsbusters and is reposted with permission.
Even when the *WaPo* Fact Checker lays out Biden’s assaults on the truth he explains it all away

By Dave Andrusko

My first thought was if the Democrats were to lose Glenn Kessler, the *Washington Post*’s Fact Checker and all-purpose defender of the pro-abortion Democrat Party come rain or shine, you might suspect that the walls might be closing in, right?

To be sure the column headlined “Biden loves to retell certain stories. Some aren’t credible” doesn’t signify an end of the honeymoon. Perhaps a trial separation, although that is probably too much to hope for.

The headline is like trying to put lipstick on a pig. Gently suggest that our grandfatherly president may not be aware he is dabbing in whoppers, blithefully repeating untruths, but certainly not consciously telling lies. And besides what harm can there be in retelling “certain stories,” the implication being that the number is small and are no worse than itsy bitsy white lies.

Biden’s penchant for bending the truth, Kessler politely notes, was “most famously in his first presidential campaign, in the 1988 election cycle.” Kessler includes a link to a story he wrote but unless you click it on you don’t know that

Biden’s first run for the presidency more than three decades ago exploded in a controversy over plagiarism. Without credit, Biden’s stump speech included lines lifted from a speech given by Neil Kinnock, then leader of the British Labour Party. …

Biden tried to hang on, but then reporters discovered he had flunked a class in a law school for submitting a paper that borrowed heavily from another law review article without proper citation. The coup de grace came when

Newsweek reported that Biden had made false or exaggerated claims about his law school record during a discussion months earlier with voters in New Hampshire, which had been captured by C-SPAN.

Back to the current column. “As president, Biden has continued a tradition of embellishing his personal tales in ways that cannot be verified or are directly refuted by contemporary accounts.”

“Embellishing”? Well… Kessler rehashes five examples—

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“Embellishing”? Well… Kessler rehashes five examples—

President Biden just keeps on recycling them; and often they make him out to have falsely taken heroic action at the expense of real heroes.

The Establishment Media (of which Kessler most certainly is a member in good standing) is a co-conspirator. Soon after Biden took office, according to Scott Whitlock of *Newsbusters,*

The *Washington Post,* which infamously added “democracy dies in darkness” to its front page once Donald Trump took office, has now apparently decided that everything is just fine. As

fact checker Glenn Kessler on Tuesday tweeted a link to the Biden database, saying, “Here’s the Biden database — which we do not plan to extend beyond 100 days. I have learned my lesson.”

What lesson? Thou shall speak “truth” only when the President is a Republican. *Fox News* contributor Joe Concha remarked that the entire *Washington Post* Fact Checker Staff wrote a book titled “Donald Trump and His Assault on Truth: The President’s Falsehoods, Misleading Claims and Flat-Out Lies.”

So, when will we see a similar book on President Biden?
“I Became Like a Soldier Going to Battle” An Abortion Story

In her book, author Jacqueline Middler talks about her abortions and their aftermath.

By Sarah Terzo

Jacqueline Middler had two abortions and deeply regretted them. She wrote her book, White Stick, to tell her abortion story. (All quotations below are from this book.)

Pregnant Unexpectedly

Middler became pregnant during her first year of college. She didn’t know what to do but was leaning towards choosing life. Then she spoke to a friend who’d had an abortion.

The friend said there were many things Middler wouldn’t be able to do if she had a baby. She wouldn’t finish college, she would lose her scholarship, and her boyfriend, whom she wanted to marry, would break up with her.

Middler said, “But I can’t kill my baby.” (p. 30)

The friend told her there was no baby, only cells. Middler writes, “Finally, words that comforted me. I wouldn’t be killing a baby – just a group of cells.” (p. 31)

Fetal Development in the First Trimester

The fetal development information below is from The Endowment for Human Development, a nonreligious site not affiliated with the pro-life movement, and National Geographic’s DVD The Biology of Human Development, which can be purchased here.

Middler didn’t know that a preborn baby’s heart is beating at 21 days, and some scientists think it starts even earlier. She didn’t know that a child in the womb was already right or left-handed at eight weeks, or that by 10 weeks the baby has fingerprints and sucks her thumb.

Choosing an Abortion

Middler had doubts, but she silenced them. If she had an abortion, she reasoned, no one would ever know. She could continue with her life as if nothing had happened.

When Middler told her parents of her decision, they said they didn’t agree, but they would support her choice. Middler recalls wishing they would step in and forbid her from having an abortion, or at least give her more direction. But the full burden of the choice was placed on her shoulders.

The Abortion’s Aftermath

Middler bled after the abortion. She began to see her abortion as killing a baby:

[My constant pain and blood loss reminded me of what I had done. Within the discharge from my body were pieces of tissue, and I wondered what part of my baby they represented. (p. 42)

She suffered emotionally and became addicted to drugs and alcohol:

I cried so much. I had hoped to never think about my choice again, but now I thought about it every second of every day.

I couldn’t share these thoughts with anyone… As the ugly head of my grief and pain came roaring up to crush me, I beat it back down into the small place in my heart where I let it reign. If the noise got too loud, I reached for drugs or alcohol to quiet the pain. Outwardly, I looked the same… But inwardly I struggled to process the shame and guilt. Somehow, I finished the term and began packing for home.

As I stepped aboard that plane, I was not the same girl who had come to school. My inner being was broken, hardened, and numbed by my choices and my drug use… By taking my baby’s life, some of my own life had died too. (pp. 42-43)

Middler became extremely promiscuous after her abortion, going to parties, drinking and drugging, and going home with various men.

A Second Abortion

At one point, she managed to stay sober for several months, only to find out she was pregnant again. She “celebrated” her decision to have another abortion by drinking again. She got mindlessly drunk and used marijuana.

At the time, she thought that the heavy drinking and drugs had damaged her baby. She says she “didn’t want the baby to suffer in this life with physical deformities or mental incapacities, so ending his or her life before it started seemed like a good thing to do.” (pp. 52-53).

Years later, she would admit to herself:

These thoughts had nothing to do with the baby’s well-being but had everything to do with my own selfish desires not to be inconvenienced by a damaged baby.

I knew my life would forever be tied to this...
LANSING, MI – On Monday, Planned Parenthood, the ACLU, and NARAL asked the Michigan legislature to repeal common-sense protections for women. These protections include informed consent which the 24-hour waiting period is a component of, abortion clinic regulations, and the Medicaid Abortion Funding Ban. The majority of Michiganders support these protections as they are accepted as common medical practice.

“The suggestion that basic health and safety protections for women must be removed demonstrates the blind fervor with which Planned Parenthood is seeking to expand,” stated Genevieve Marnon, Legislative Director, Right to Life of Michigan. “This has nothing to do with women and everything to do with their bottom line as the nation’s largest abortion provider.”

The current informed consent provisions were developed by the Michigan Department of Health and Human Services, in consultation with medical professionals and enforced by every past administration, regardless of political persuasion. Informed consent, including the 24-hour waiting period, is easily satisfied by logging onto the Michigan Department of Health and Human Services Informed Consent for Abortion Website and clicking through the informed consent provisions. Removal of this protection is contrary to standard medical practice.

As a basic matter of safety, clinic regulations require hallways to be a certain width in case emergency responders need to access the patient,” stated Marnon. “This is the same standard that people expect from every surgical outpatient facility, yet Planned Parenthood seems to want a different set of rules for themselves.”

The use of taxpayer dollars to finance abortion is an affront to people with a conscientious objection to abortion and ignores the will of the people, as 57% of Michigan voters voted to retain the ban on Medicaid-funded abortions the last time the issue was before voters.

“It is high time we move past the politics of abortion and have a serious conversation about what serves women best,” stated Marnon. “No industry is left to regulate itself. The proposed removal of common-sense regulations serves the interests of the abortion industry, not women seeking abortions. We urge Michigan legislators to keep these long-standing, basic protections for women and girls in place.”
Pro-abortion Governor targets pregnancy centers, adoption agencies, and maternity homes throughout Pennsylvania

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

The Shapiro Administration appears to be trying to hijack funds from a successful, decades long program benefiting pregnant women in a blatant political attack against pregnancy centers, adoption agencies, and maternity homes throughout Pennsylvania.

Pennsylvania Democrat Governor Josh Shapiro recently announced his intention to cancel the contract of Real Alternatives, a stellar organization that administers the Commonwealth’s Pregnancy and Parenting Support Services program.

When lawmakers passed the Pennsylvania budget earlier this summer, a line item was included for the program. But now, the Administration has issued a request for applications for a decidedly different program—not the life-affirming counseling and mentoring program that has successfully served more than 350,000 women in its 27-year history.

This new women’s services program does not meet the clear history and legislative intent of the funding line nor the language of the fiscal code, which must be enacted in order for funds to be disbursed.

It is clear that Catholic Charities, maternity homes, and pregnancy support centers are being sent an obvious message: “Need not apply.”

The Governor’s announcement has sent shockwaves through the Commonwealth, prompting thousands of Pennsylvanians to send messages to their state lawmakers, strenuously objecting to the efforts to cancel Real Alternatives’ contract.

But we must continue to lobby legislators to take action to thwart the Governor’s ill-conceived plan.

To take immediate action, please visit the Pennsylvania Pro-Life Federation website at www.paprolife.org.

Pregnant women and their babies are relying on us for their support!
“I Became Like a Soldier Going to Battle” An Abortion Story

From Page 19

baby’s father as well. I knew he would want to be part of the baby’s life. But I knew I did not want to be tied to any one person. I’d grown too numb to think of anyone but myself. (p. 53)

Things got even worse for her after the second abortion. She says, “I felt more than broken – I felt destroyed. In this dark place, I could see no light, no hope.”

Trauma, Guilt, and Alienation
She spent the rest of her time in college in a drunken, drug-induced haze. She says:

I alienated everyone, including good friends. I bought drugs and smoked them by myself, often disappearing into the woods to spend many hours staring endlessly into the vast forest, wishing I could disappear.

I was not the same person anymore. In fact, I knew that the carefree girl I’d been before my abortions would never return. My choices had affected every aspect of my life and had now destroyed it. I sat in a dark place...

When I returned to school this time, my life felt empty. To protect myself, to be able to move through the motions, I shut down my emotions. I locked them up tight within.

I felt more than broken – I felt destroyed. In this dark place, I could see no light, no hope. (pp. 52-53)

Learning to Cope Through a Newfound Faith
Eventually, she stopped abusing substances and began attending church, finding comfort in Christianity. When she got married, she had two miscarriages.

Each miscarriage brought back memories of her abortions and thoughts that God was punishing her. She still had to face her abortion and the harm it had done to her life. She says:

As a result of my choice to murder, I made other bad decisions – one after another. Abusing alcohol and drugs, alienating friends, choosing bad partners, screwing up good jobs – the list goes on and on. (pp. 105-106)

Through church ministries, prayer, and “taking responsibility” she found healing:

I acknowledged what I did – took responsibility – and grieved for my choices. I cried. I got angry. I accepted it. Then I decided to let it go. It wasn’t easy. I still look at my abortions as a time I ruined my life. However, I no longer beat myself up for those choices. I allow myself to feel the grief and then fill myself up with God’s words of love for me instead. (p. 109)

She went on to give birth to three children.

It should be noted that there are secular, nonreligious organizations that support and promote healing after abortion and/or miscarriage. Secular Pro-Life has a list of nonreligious organizations and support groups that can help people come to terms with their loss and cope, as well as instructions on how to find a counselor who can guide you through abortion recovery.

Her Inspiration to Tell Her Abortion Story
Years later, she and a friend went to a concert by a singer they both liked. Before the concert, they were shown a pro-abortion video. The crowd was overwhelmingly pro-choice:

I had no idea that this artist’s concerts had morphed into pro-choice events. I watched and listened as many different women and doctors appeared on the screen talking about how important it was to have the choice of abortion.

The main speaker talked about how she had eight abortions and how she thought abortions were just another form of birth control. Her callous remarks and hardened heart hurt me. (p. 133)

The singer yelled pro-choice slogans into the microphone, and the crowd stood up and cheered. She and her friend were the only ones not standing and applauding.

I wondered if there was a voice for the people like me who had abortions and knew abortion was wrong, knew that choice was life-altering, knew the depths of hatred one could have for oneself, and knew the choice would be with you forever. I wondered if there was a voice for us – someone who could tell others not to go this route.

At that moment, Middler decided to share her abortion story.

A Message to Pregnant People
Middler has the following message for pregnant people considering abortion:

“Choosing abortion will change the direction of your life, but not in the way you might think. Having an abortion is not the easier choice.” (p. 114)

She hopes that her book will change hearts and minds on abortion and encourage people to choose life.

Editor’s note. This appeared on Sarah’s Substack and reposted with permission.

Abortion is not a “human right” when another Human’s Rights are taken away.
Stand Against the Radical Anti-Life Amendment in Florida! Join Florida Right to Life’s DECLINE TO SIGN Campaign

By Lynda Bell President, Florida Right to Life

UPDATE: We are deeply encouraged and thank you for your response to this critical campaign! Please continue to educate . . . send this flyer to as many Floridians as possible. Florida Right to Life will continue to take action making sure this never gets on our 2024 ballot.

TALLAHASSEE FL – Florida Right to Life is currently engaged in the toughest battle for life in recent history! Planned Parenthood and the ACLU have formed an alliance to introduce a radical anti-life amendment to change the Florida Constitution. If passed, this amendment would unravel our recent successes and strip away protections for women and unborn babies in Florida. Since the announcement in May, we have been strategizing to confront this new challenge.

It is evident that Planned Parenthood, driven by the profits it makes from abortion, is unwilling to tolerate any threat to its financial gain. Hence, they are attempting to establish a so-called right-to-abortion in Florida’s constitution, safeguarding their lucrative abortion business.

We urgently request your support by joining the Florida Right to Life DECLINE TO SIGN campaign. We are unwavering in our commitment to fight against this deceitful abortion amendment and will utilize every pro-life resource to ensure its defeat.

What you can do to help us prevent the pro-abortion organizations from successfully gathering petition forms:

- **Do NOT sign the anti-life petition:** urge everyone you know not to sign these petitions. See “Why the amendment is deceptive below . . .”

- **Generous donation:** Florida Right to Life will make this a priority. Your financial contribution will strengthen our fight against this evil amendment.

- **Spread the word:** forward this email to your family and friends. Urge them to join our DECLINE TO SIGN campaign. Together, we can amplify our voice to protect the sanctity of life in Florida.

- **Peaceful intervention:** when you come across gatherings of individuals collecting petition signatures to support this anti-life amendment, peacefully intervene. Stand near the table and kindly request people not-to-sign, explaining why the language in this amendment is deceptive.

- **Pray for Florida Right to Life:** lift us up in prayer, seeking divine guidance and strength to defeat this amendment. Your prayers are essential to our pro-life work.

- **Write letters to local papers:** in your own words write a letter exposing the deceitfulness and dangers of the amendment language. Write about the danger of taking away the parental consent law and the potential for unrestricted abortions.

Here is WHY the amendment language is deceptive . . .

The language of the Ballot Summary and the Full Text are purposely vague and ill-defined. The Ballot Summary and Full Text are as follows:

**Ballot Summary:** No law shall prohibit, penalize, delay, or restrict abortion before viability or when necessary to protect the patients’ health, as determined by the patients’ healthcare provider. This amendment does not change the Legislature’s constitutional authority to require notification to a parent or guardian before a minor has an abortion.

**Full Text of the Proposed Amendment:**

Limiting Government interference with abortion – Except as provided in Article X, Section 22, no law shall prohibit, penalize, delay, or restrict abortion before viability or when necessary to protect the patients’ health, as determined by the patients’ healthcare provider.

As I stated, this amendment is deceptively worded and vague. This is done on purpose and designed to sugarcoat the ugly truth about how this amendment would undo all our prolife work and protective legislation in Florida.

Let me explain – when they state: “to protect the patients’ health, as determined by the patients’ health care provider” “health” is defined as anything in relation to abortion. It could mean mental health or anything the abortionist and the woman seeking an abortion decide, any reason whatsoever. The term “viability” is a ruse as abortions would be accessible through birth with the “health exception.” Notice, the exception does not say “The life of the Mother” just health! This cannot stand.

The next deception: “as determined by the patient’s healthcare provider.” Notice that they do not say Medical Dr, or Physician . . . rather, they say: healthcare provider”. What is that and who is that . . . a nurse, a nurse practitioner, an abortionist? Like I stated earlier, vague, and purposely deceptive.

There is absolutely zero concern for the pre-born baby, the baby is never considered. This amendment, if passed, would legalize abortion through birth with a language health-exception loophole you could drive a truck through. This is why we must stop this, stop it now and we need your help to do it!

Now is the time for action! We, at Florida Right to Life, cannot overcome this challenge without your support. All Floridians who want to protect our preborn babies and minor children from becoming victims of this anti-life amendment need to rally in this crucial fight . . . together, we can make a difference!
Tragically, Texas has high rates of maternal mortality and morbidity. These maternal deaths are extremely heartbreaking and often preventable. In response, Texas formed a Maternal Mortality and Morbidity Review Committee in 2013 to try and remedy this problem.

Since its inception, the Committee’s number one recommendation has been to provide a full year of medical insurance coverage following the end of a pregnancy. This way, mothers could have access to critical preventative care they need to stay healthy in the time period most associated with maternal illness and death related to pregnancy and birth.

During COVID-19, the federal government blocked removal of anyone from Medicaid, meaning that women who had babies in 2020 enjoyed three additional years of coverage when the current status in Texas was only two months of postpartum coverage. However, this COVID rule ended on March 31, 2023, moving coverage back to just two months postpartum. But starting in June, the recently passed House Bill 12 took effect, extending coverage to a full year for women postpartum. This bill will not make more people eligible for Medicaid coverage; rather, it would extend coverage for already-eligible mothers.

As originally drafted, HB 12 would have allowed Medicaid coverage to begin “on the last day of the woman’s pregnancy,” which means that it could apply for a woman following an abortion obtained illegally or out of state. The Senate added an amendment clarifying that the legislative purpose and intent behind the bill is to extend Medicaid coverage for mothers whose pregnancies end in the delivery of the child or through the natural loss of the child through miscarriage, not pregnancies ended through elective abortion.

After 50 years of abortion being normalized, there are now a lot more babies being born as a result of Texas’ Pro-Life laws. Prior to these laws, many women relied on abortion as a form of birth control, because society and the government made it easier to get rid of the child than to overcome barriers to success in parenting. It may take some time to adjust to a world without abortion as a fallback for society’s problems, but extending postpartum medical coverage is one of the proper Pro-Life responses to this.

While Texas works to build a truly Pro-Life state for women and their children, we must remain vigilant to oppose all efforts to legitimize illegal or out of state abortions. But we must also highlight how Texas and the Pro-Life movement are not just anti-abortion, but truly Pro-Life. Policies like this will help us in continuing to build a truly Pro-Life state.
Planned Parenthood admits to SCOTUS that its employees ‘spoke the words recorded’ in undercover videos

By Cassy Fiano-Chesser

The Center for Medical Progress (CMP) has continued its years-long battle against Planned Parenthood, appealing a lawsuit in which the abortion giant was awarded $16 million in fees. David Daleiden and Sandra Merritt, the CMP investigators in the midst of the legal fight, are in the process of appealing the award with the Supreme Court — and Planned Parenthood appears to have dropped a bombshell.

In a filing opposing CMP’s, Planned Parenthood admitted that its employees and executives, filmed in undercover CMP videos showing them discussing the sale of the body parts of aborted babies, actually “spoke the words recorded in the videos.”

According to an emailed press release, “it is the first time Planned Parenthood has acknowledged the authenticity of the footage to the Supreme Court.” CMP’s videos, including full footage, can be found at https://www.youtube.com/@TheCenterforMedicalProgress/videos

Planned Parenthood gained access to the Planned Parenthood executives through deception (emphases added):

“When a plaintiff asserts defamation and non-defamation claims side-by-side, based on the same conduct and statements and alleging the same injury, the actual-malice standard plainly applies. Here, however, respondents did not assert defamation and non-defamation claims in parallel. Nor are respondents’ claims based on facts that would have supported an unplod defamation claim. Respondents “stipulated” that the individuals in the videos lying to gain access to respondents’ conferences, clinics, and staff, and recording surreptitious videos without consent.

This is a marked difference from Planned Parenthood’s past statements.

Planned Parenthood has long claimed the CMP videos are fake, calling Daleiden’s investigation a “campaign of deception” and saying the videos were “deceptively edited.” Yet what Planned Parenthood says to the public and what they tell the courts are two different things; under oath, they will admit to the validity of the statements heard on the videos, as can also be seen at https://www.liveaction.org/news/bombshell-planned-parenthood-admits-oath-aborted-parts.

Forensic analyses, including from a firm hired by Planned Parenthood, found that the videos had not been faked.

Judge William Orrick, who awarded Planned Parenthood the $16 million, has ties to the abortion giant, and was one of over 100 judges in a Wall Street Journal investigation accused of violating U.S. law and judicial ethics by overseeing court cases involving companies in which the judges were involved. Judge Orrick founded a Planned Parenthood abortion referral facility, but still refused to recuse himself from the case.

The U.S. Reporters’ Committee also filed a friend of the Court submission in support of CMP, determining that the methods used by CMP are journalistic standard.

Editor’s note. This appeared at Live Action News and is reposted with permission.
If they aren’t human beings, why do women want to baptize them? Secular Pro-Life shared the following screenshot from Shout Your Abortion on their Twitter recently. It’s from a woman who is considering an abortion, and seems to have made up her mind to go through with it:

This woman clearly believes that she is pregnant with a baby, not tissue or a collection of cells.

This is not an isolated incident—many who counsel those considering abortion have run across pregnant people who believe their child is a baby but still want to abort.

To me, this doesn’t show that these pregnant people are heartless, but illustrates just how desperate they are.

But the Twitter post made me recall something that I’ve uncovered in my research that surprised me. This is the fact that some people who have abortions want to have their aborted babies baptized.

Abortion Worker With “Empathy” Baptizes Aborted Children

Another example comes from the book Whose Life? A Balanced, Comprehensive View of Abortion from its Historical Content to the Current Debate. Author Catherine Whitney interviews abortion clinic nurse Nan Patton Harrison, who considers herself a very compassionate person, discussing how some women ask her to baptize their babies after their abortions.

She says, “Perhaps it was because of my empathy that they always asked me to do the baptism.”

Harrison relates the difficulty of finding a small aborted baby’s body among the remains of the uterine lining and the placenta removed by a suction machine. She then describes one “baptism” and says, “After I baptized the fetus, I flushed it down the hopper.”

An Abortion Clinic Treats Aborted Babies “Respectfully”

Another example can be found in the blog Abortion Clinic Days in a post from 2005.

The blogger, an abortion worker, is complaining about how pro-lifers are trying to pass laws regarding the disposal of the bodies of aborted babies.

She says, “There are very strict guidelines about how all human tissue is handled, and medical waste is a very well regulated [sic] business, the Sopranos notwithstanding. It is ultimately buried or burned.”

She then accuses pro-lifers of disrespecting the bodies of aborted children:

[T]his moral outrage comes from the people who have literally stolen fetuses from pathology labs, clinics, etc. and paraded them around in shoe boxes, pawed through them on video, and generally exploited—not respected—fetuses.

In contrast to the awful, disrespectful pro-lifers, her facility, she says, treats aborted babies with respect—after they kill them, of course:
Australia pregnancy help network seeks to expand assistance for women to isolated communities

By Gayle Irwin

Shianne felt overwhelmed when she learned she was pregnant. Already a single mother of five, the Australian woman didn’t know what to do. Learning about a nearby pregnancy resource center, she found hope, help, and encouragement to continue her pregnancy.

“It was a bit shocking,” Shianne said about finding out she was pregnant. “I was confused and very sad. My own head was telling me I couldn’t do it.”

She discovered Eva’s Place where hope began to dawn.

“I was told I had time,” she said. “I did some mentoring and some counseling. If I had a concern, we’d talk it out. It was comforting.”

Shianne found the courage she needed through the encouragement and resources she received and several months later, she gave birth to a baby girl whom she named Grace, and whom she referred to as, “The apple of my eye.”

Eva’s Place is one of several pregnancy resource centers found in Australia, and as such, provides free, confidential, caring pregnancy services. The organization receives referrals in a variety of ways, including Pregnancy Help Australia, a larger group that assists centers in the region and maintains a hotline number. Shianne’s concerns upon learning she was pregnant centered around adding another child to her family and included her ability to go through “sleepless nights” and the impact of having a baby on her career. She found reassurance and understanding at Eva’s Place.

Pregnancy Help Australia (PHA) wants to ensure other women experience that understanding, encouragement, and hope. In June, the organization hosted a special giving day, known as #PHAGivingDay, through which donors could contribute to assist pregnancy centers in Australia through their donations. Through social media such as Instagram, Pregnancy Help Australia raised more than $25,000 in June.

“It’s like #GivingTuesday here,” said Andrea Trudden, vice president of communications (#hubsoflove) where services are currently unavailable, we can elevate our isolated sisters and ensure they have the support and nourishment they deserve. With your donation, we can make a difference and bring essential resources to these centers.”

The organization goes on to say, “Once a new Hub of

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unplanned pregnancy because we know the best alternative to abortion is another person, and that local pregnancy center provided that support that she needed…”

She added, “We are all created for relationship, and it’s important that when we’re facing difficulties, we have others that step up

Helping women around the world

Pregnancy help organizations serve women no matter where they live, and Shianne’s story is similar to many of those who seek and find help from those organizations.

“Pregnancy help centers provide vital assistance to women during one of the most challenging and possibly transformative periods of their lives,” said Tracie Shellhouse, vice president of Ministry Services for Heartbeat International. “The support that was given to Shianne … [is] vital for those who are facing an

alongside [us], and pregnancy help centers do a beautiful job of that.”

“Pregnancy help is something that is needed everywhere,” Trudden said. “It’s good we have organizations like Pregnancy Help Australia that caught the vision from what we were doing here in the States and expanded a network of pregnancy help in their communities. We’re seeing that, of course, world-wide, and I think it’s just a fact that a woman could be anywhere at any phase of her life on any continent, but there’s always a moment where a little bit of extra encouragement and compassion is needed in order to help her realize the value that she has … and that she can still

See Australia, Page 36
Man charged with 2 counts of felony homicides in deaths of girlfriend and her unborn baby

By Dave Andrusko

Donovan Faison, 21, was arrested Tuesday charged with two counts of felony homicide in the shooting deaths of his pregnant girlfriend and her unborn child. Kaylin Fiengo refused to get an abortion, according to police.

Sanford police said Fiengo, 18, was found shot to death in her car at a park in Sanford. “Fiengo had driven to Coastline Park on the night of Nov. 11 to meet up with Faison, according to cops,” Allie Griffin reported for the New York Post. “The same night — after 11 p.m. — she was found dead with a gunshot wound in the driver’s seat of her parked car.”

“Today’s events come after a long, almost ten months, of an exhaustive investigation,” Sanford Police Chief Cecil Smith said in a statement. “Our investigators have made sure every possible shred of evidence was processed and analyzed in order to bring Kaylin’s killer to justice.”

The pair had been having frequent arguments over the teen’s pregnancy in the prior weeks.

Faison reportedly wanted Fiengo to terminate her pregnancy but she refused and investigators believe her refusal was the “probable motive” for her murder, Sanford cops said in a release.

The teen was at the end of her first trimester at the time of her murder.

In her obituary Fiengo was described as a devoted mother to her 1-year-old son named Ace.

“Kaylin loved spending time with her son, siblings, and friends. Kaylin really was a fun-loving child and had an old soul,” the obituary continued.

“This beautiful, young woman and mother, was taken from this world far too soon, and in a horrific way,” Police Chief Smith said. “We hope that today’s arrest brings the slightest amount of peace for Kaylin’s.”

Baptizing Aborted Babies

From Page 26

In my clinic, we wash off the tissue and examine it. It is treated respectfully and put with the woman’s first name into a container. We show it to patients if they ask to see it.

She then says:

People have been known to pray over it, write notes for inclusion, “baptize” it, etc etc. Some clinic staff have also been known to say a little prayer over it—thanking it for its sacrifice so that the woman could continue on the path she was on.

So the abortion workers sometimes pray over the bodies of the babies they just killed, and their mothers also pray and baptize their children.

They Believe the Baby is a Person

All this, of course, contrasts with the commonly held belief that all pro-choice activists and abortion providers believe that a preborn baby isn’t a human being. I have written a short book giving examples of pro-abortion activists and leaders, including one former president of Planned Parenthood, openly admitting that abortion kills human beings.

You can download it for free at https://www.subscribepage.com/sarahterzo

Footnotes


4. Ibid.
While this designation did allow the agency to impose certain controls on the distribution and use of the drug. They loosened them to accommodate Danco and the abortion industry when there was not sufficient scientific basis for doing so.

3. Medical science took a back seat to abortion politics at the FDA with mifepristone.

The FDA asserted that studies and experience had shown that mifepristone chemical abortions were absolutely safe, fully justifying reduced restrictions on the drug’s prescription in ordering changes made to the Risk Evaluation and Mitigation Strategies (REMS) regulations (the regulatory framework that replaced Subpart H distribution limits on mifepristone in 2011) made in 2016 and later in 2021, and then in statements made in this case.

The Fifth Circuit said that this was decisively not the case. Claims made by the FDA that serious complications associated with the drug were “well under 1 percent” simply were not consistent with the evidence.

Beyond the parade of case histories presented by the AHM (the doctors alluded to earlier), the court noted that the FDA’s own published documents showed higher rates of complications or adverse events and higher percentages of mifepristone patients seeking treatment at their local emergency rooms.

Moreover, claims that studies had shown that changes made to the REMS in 2016 – dropping the number of required visits from three to one, extending gestational age to ten weeks of pregnancy, allowing non-physician to screen patients and prescribe pills, etc. – ignored the fact that none of these critical changes had been studied cumulatively.

The court said that agency clearly went too far when it dropped in person visits entirely in 2021 (and formalized this policy in January 2023) and allowed abortion pills to be shipped and delivered by mail.

One of the arguments that the FDA made on behalf of this change in 2021 was that there had been no appreciable increase in the number of complications reported to the agency. But this ignored the fact that the agency stopped requiring the reporting of non-fatal complications or “adverse events” in 2016.

“It’s unreasonable for an agency to eliminate a reporting requirement for a thing and then use the resulting absence of data to support its decision” the court said.

If changes were not made for scientific reasons, it is legitimate to ask why they were made. A couple of facts are unavoidable.

The FDA made many of the changes that the abortion industry asked them to make and made its critical moves when there were abortion friendly administrations in the White House often specifically pushing for such changes.

4. Safe, simple chemical abortions are a crumbling myth.

No one can read the stories of the doctors and patients quoted by the court and come away with the idea that these are safe, simple affairs.

The Fifth Circuit quotes the FDA’s own documents that “the treatment will not work” in “about 2 to 7 out of 100 women” and that “about 5-8 out of 100 women taking Mifeprex [the trade name for mifepristone] will need a surgical procedure to stop too much bleeding.”

If these are undercounts ignored the patients the abortion industry loses to follow-up, those numbers likely represent tens of thousands of women a year.

As bad as that it, the court points out that the changes the FDA made to the protocol, to the certification requirements under mifepristone’s REMS in 2016 and 2021 made the likelihood of complications greater.

Given that effectiveness decreases and complications increase with gestational age, allowing doctors to prescribe these drugs for an additional three weeks almost automatically means more injuries and incomplete abortions. Add to that less trained medical personnel who do not have the same skill in ascertaining gestational age or identifying ectopic pregnancy, and on top of that ask them to do this by phone (or by some online questionnaire) and you have all the elements you need for a wide scale medical disaster.

If the FDA wasn’t going to take the steps necessary to safeguard the lives of American women, the court was legally obligated to step in and halt their actions.

5. Abortion takes the life of an innocent unborn child and that still matter to a lot of people.

News media liked to treat whether or not this particular method would continue to be legal as one more skirmish in the larger political battle over abortion.

But as they were wont to do, they too often leave a critical element out of the discussion – the unborn child.

Because it chose not to deal with the agency’s original decision to approve mifepristone, most of the Fifth Circuit’s attention was focused upon the way that the changes the FDA made to mifepristone REMS did or did not advance the interests of women’s health.

But in giving the pro-life doctors of AHM standing, and recounting their moral and psychological injuries at treating these patients and having to participate in the abortion of their unborn children, the court at least implicitly recognized that the concerns that people have for the lives of mothers and their unborn children are genuine and legitimate.

The Supreme Court in Dobbs recognized that the citizens of any given state can, if they wish, through their elected representatives, put in place legislation that protects the lives of unborn children.

And, as the Fifth Circuit made clear here, the FDA cannot, by some dictatorial fiat, ignore the concerns of these pro-life doctors and scientific evidence about the dangers of mifepristone to declare some national right to have abortion pills mailed to women’s homes.
babies. Remember, words are nice, but action is better.

5. Expect the candidate to always make abortion the major issue in the campaign

According to an August 2023 survey for Newsweek conducted by Redfield and Wilton Strategies, American voters cited the economy (60%) as their top concern heading into the 2024 election cycle. The second most important issue cited was healthcare (33%) followed by immigration and crime, which tied for third (24%). Abortion and the environment tied for fourth (21%).

In order to win, candidates have to address many issues and appeal to a wide electorate. It is our job as the pro-life movement to reach out to friends, family, and neighbors who share our views and inform them of the candidates’ positions on abortion. It is the candidate’s job to build a winning coalition of voters based on a broad range of issues and interests.

Based on the political leanings of particular states or districts, the ways in which pro-life candidates address the abortion issue may vary. For example, winning strategies may look different in Louisiana versus California. However, when abortion comes up in an interview or during a debate, pro-life candidates must clearly and directly articulate their positions. They must also not be afraid to call out their pro-abortion opponents for supporting unlimited abortions and using taxpayer money to pay for them. However, to expect a pro-life candidate to always make abortion the top issue in the campaign can be a sure-fire way to lose an election. To assume every voter takes the abortion issue into account is another.

6. Vote for a third-party or independent candidate who has no chance of winning

There will be times when a third-party or independent candidate enters a race between a pro-life candidate and a pro-abortion candidate from each of the two major American political parties. They claim to be the “real” pro-life candidate. This third-party candidate will often attack the pro-life candidate who has a real chance of winning, try to undermine their credibility with pro-life voters, and siphon away votes the pro-life candidate would have otherwise received. This only serves to help the pro-abortion candidate. There are numerous examples of pro-abortion candidates who won close elections by margins smaller than the number of votes received by a third-party candidate in the race who claimed to be pro-life.

Pro-life voters who support third-party or independent candidates, to the detriment of a pro-life candidate who could have won, may feel like they have not compromised their principles – but if they indirectly aid a candidate who will allow the killing of unborn babies to continue, they have compromised something far more important – innocent lives.

7. Force pro-life candidates to sign public pledges or take positions in a primary that could be politically damaging in a general election

As pro-life advocates, we know the impact that elections can have on whether unborn children and their mothers are protected. With the stakes so high, we want to confirm definitively that candidates who say they are pro-life will deliver on their promises once they are elected. This can make the idea of forcing candidates sign public pledges appealing. But no formal pledge can compel a lawmaker to vote a certain way. What a public pledge can do, however, is provide a

8. Decline to vote if there is no “pro-life” candidate in the race

Sometimes, both major political parties nominate candidates who identify themselves as “pro-choice.” Neither one supports the passage of greater protections for unborn children and their mothers. In these cases, some key considerations are which candidate would do the least amount of harm to the pro-life cause, what impact a candidate’s election would have on the balance of power in a particular legislative body, and which candidate could be open to some persuasion and possibly cast a few pro-life votes once in office.

In these less-than-ideal races, it is worth considering the minor differences between the candidates on the issue. For example, sometimes candidates who characterize themselves as “pro-choice” will take a position against new protections for unborn children and their mothers, but they support keeping in place those currently on the books. Another example is the candidate who generally supports abortion but also happens to be a fiscal hawk and is willing to take a position against the use of tax dollars to pay for abortions. Meanwhile, in both of these examples, their opponent wants to strike down all pro-life protections and actively supports the passage of pro-abortion laws. In these cases, even though there is no “pro-life” candidate in the race, in name at least, there are distinctions between the two major candidates that make one preferable to the other. We can never afford to leave important races on our ballot blank or skip elections altogether. Your vote and your voice matter way too much for that!
Texas sues Planned Parenthood to recover millions in Medicaid funds

By Cassy Fiano-Chesser

The state of Texas is attempting to recover Medicaid funds given to Planned Parenthood during a years-long legal fight, before the abortion giant was eventually cut from the state program.

In 2015, Planned Parenthood was the subject of an undercover investigation, which purported to show that some affiliates and employees of the corporation were participating in the trafficking of aborted body parts, which violates federal law. By 2016, Texas filed to remove Planned Parenthood as a Medicaid provider. After a lengthy legal battle, the state of Texas succeeded. Attorney General Ken Paxton then sought to recover the funds dispensed to Planned Parenthood during that legal battle.

U.S. District Judge Matthew Kacsmaryk, who suspended FDA approval of mifepristone earlier this year, presided over the lawsuit regarding the reimbursement on Tuesday. He did not issue a ruling right away.

“This baseless case is an active effort to shut down Planned Parenthood health centers,” Planned Parenthood Federation of America president Alexis McGill Johnson said in a statement. Yet Paxton said Planned Parenthood wrongly took money to which they knew they were not entitled.

“It is unthinkable that Planned Parenthood would continue to take advantage of funding knowing they were not entitled to keep it,” he said in a statement announcing the lawsuit last year. “I will not allow them to benefit from this abhorrent conduct after they were caught violating medical standards and lying to law enforcement.”

In addition to being accused of breaking the law regarding the sale of human body parts, Planned Parenthood was also fined in 2013 for fraudulently over-billing Texas Medicaid. “Planned Parenthood Gulf Coast improperly billed the Texas Medicaid program for products and services that were never actually rendered, not medically necessary, and were not covered by the Medicaid program – and were therefore not eligible for reimbursement,” Texas Governor Greg Abbott said in a statement at the time.

Texas wasn’t the only victim of Planned Parenthood’s alleged swindling, however.

In Wisconsin, the Department of Health and Human Services found that as many as two-thirds of Planned Parenthood Wisconsin’s Medicaid payments were fraudulent, after auditing eight family planning facilities. Planned Parenthood had the highest percentage of over-billing. Planned Parenthood of the Heartland — now called Planned Parenthood North Central States — was also accused of committing Medicaid fraud, including patient abuses, the “unbundling” of services, and fraudulently tallying patients.

A report from the U.S. House of Representatives also found that Planned Parenthood abused taxpayer funds, giving money to their political action fund for lobbying, spending millions of dollars on travel, and spending hundreds of thousands of dollars on themed fundraisers and lavish parties.

It remains unclear how Kacsmaryk will rule in this case, but what is clear is that Planned Parenthood has demonstrated a lack of prudence with taxpayer dollars.

Editor’s note. This appeared at Live Action News and reposted with permission.
‘I just want my baby back’: Reddit poster shares traumatic abortion pill experience

By Bettina di Fiore

A Reddit poster recently shared the story of her abortion pill experience, including two photos of her 10-week-old deceased baby, which she named “Bean.” Her comments illuminate the trauma and anguish that many women experience after taking the abortion pill.

“20 minutes ago I had an MA [medication abortion] at home and it was the most painful thing I’ve ever gone through. I’m so sorry little bean,” the poster, known by the handle brazen177, wrote. “Bean was moving its legs and heart was still beating when they came out in one push.”

In another comment, the poster described the entire abortion pill process, sharing that she began to vomit and experience severe cramping a few hours after taking misoprostol (the second drug in the abortion pill regimen):

First my water broke, then another push later baby came out quite quickly along with big clots. I immediately felt relief, so I grabbed a glove and fished in the toilet and baby was in there.

As soon as I pulled baby out, legs were moving and I could feel the heartbeat in my hand. Heartbeat slowly faded and stopped moving. Definetely [sic] the most traumatic thing either of us have been through.

Definetely [sic] the most pain I’ve ever felt in my whole life, and wish I was prepared for it.”

In another comment, she said: “I literally gave birth, and nobody told me it would be like that. The contractions were so intense it was unbearable. About 15 mins before it was out I started telling my partner to call someone because I couldn’t handle it anymore.”

She also stated that she was not prepared to see her baby. “I was not informed the fetus would be whole. So it was quite a shocking moment when I saw it. I don’t think I was prepared well enough at all for the entire experience,” the poster shared. “I consulted with a doctor and

The poster expressed that she was not told how painful the experience would be. “I feel like I wasn’t given all the info I needed going into it,” she wrote, adding “I was told it would feel like a period, but my experience was much worse.

Definetely [sic] the most pain I’ve ever felt in my whole life, and wish I was prepared for it.”

In another comment, she posted: “I feel that they sugar coated all of it to make it seem easy but it was one of the hardest things I’ve ever done in my life and one that I regret, I’ll never forget that experience ever.”

Days after the experience, the poster wrote: “Life still feels like a sick fever dream that I can’t escape,” finally concluding, “I just want my baby back. This is so hard.”

For more information about the abortion pill and more personal stories from women who have taken it, see Live Action’s “I Saw My Baby” webpage.

Editor’s note. This appeared at Live Action News and reposted with permission.
The realities of age continue to weigh President Biden down

From Page 2

though older Democrats specifically are more supportive of his 2024 bid.

What else?

Older Democrats are less negative than younger ones on Biden’s decision to run again. In the poll, only 34% of Democrats under 45 want him running for reelection, compared with 54% of those older. Still, about three-quarters of younger Democrats say they’ll at least probably support him if he’s the nominee; others did not commit to that.

You would think that is as close to a consensus as we will ever get. But remarkably it gets worse.

The survey, Woodward and Swanson continue, also “had a word association exercise, asking people to offer the first word or phrase that comes to mind at the mention of each man.”

In those visceral responses, 26% mentioned Biden’s age and an additional 15% used words such as “slow” or “confused.” One Republican thought of “potato.” Among Democrats, Biden’s age was mentioned upfront by 28%. They preferred such terms over “president,” “leader,” “strong” or “capable.” One who approves of his performance nevertheless called him “senile.”

On a different front, Jazz Shaw, writing for HotAir, observed

Meanwhile, Gallup finds that Biden’s approval remains in the toilet on pretty much everything. He’s stuck at 42% for overall approval and below 40 in four of the top categories, including his handling of the economy and immigration. This has already turned into another one of those problems that may simply be too big for people to wrap their heads around or propose any sort of feasible plan.

One other reality hitting President Biden very hard. Steve Cortes writes

Biden finds a new and worsening problem headed into election year: hemorrhaging support among Hispanics, and especially among working-class Latino voters.

Per the latest NY Times/Sienna poll, his general election lead among non-college educated minorities has collapsed. Back in 2020, Biden captured a blowout 48% winning margin among blue-collar minorities, but that lead has plummeted to only 16% right now, asking voters their preference for 2024. For further context, consider that Obama won that demographic of working-class non-whites by a landslide 67% in 2012.

At some point, even Biden’s strongest supporters will have to answer the question: Who thinks President Biden has a second term in him?

“The Biden/Harris Administration have yet to hear of an abortion they wouldn’t support.”

Carol Tobias, President National Right to Life
are carried out, the fetus’s appearance ranges from a small clot of phlegm to an alienlike ball of flesh. At 22 weeks, though, a human fetus has grown to about the size of a small melon. The procedures that Hern performs result in the removal of a body that, if you saw it, would inspire a sharp pang of recognition. These are the abortions that provide fodder for the gruesome images on protesters’ signs and the billboards along Midwest highways, images that can be difficult to look at for long.

“A sharp pang of recognition”? What else could it be? That’s one of us!

Finally, a quote from his early days as an abortionist, is a testimony that Hern didn’t always have a heart three times too small:

He had bad dreams too. In the 1970s, physicians did not induce fetal demise during abortion, and once or twice, during a procedure at 15 or 16 weeks, he used forceps to remove a fetus with a still-beating heart. The heart thumped for only a few seconds before stopping. But for a long while after, a vision of that fetus would wake Hern from sleep. He could see it in his mind, the inches-long body and its heart: beating, beating, beating. In one dream, Hern angled his own body to shield his staff from catching a glimpse.

Hern considers his religious adversaries to be zealots, and many of them are,” Godfrey writes.” But he is, in his own way, no less an absolutist.”

Hern is, as is clear by the second paragraph, a piece of work. “I’d met Hern before, so I wasn’t surprised by his gruffness. He 84-year-old can be a curmudgeon—he’s obstinate, utterly certain of his position, and intolerant of criticism even as he dishes it out.”

But as would occur repeatedly, Godfrey softenes the blow. She immediately added, “Useful qualities, perhaps, for someone in his line of work.”

Again, Godfrey writes that Kate Carson had an abortion in Hern’s clinic in 2012.

Carson and other patients described Hern as brusque. But they seemed to take comfort in that brusqueness, as though Hern’s fierce assurance helped them feel more sure themselves. “I wouldn’t say he has a great bedside manner,” Carson told me. But “the degree of respect that I felt from him was enormous.”

There are several examples of Godfrey attempting to humanize a man who lobbed his humanity over the table nearly five decades ago. Hern, for example, is a photographer of some renown.

Godfrey writes

Hern is known for presenting such gifts to people—and for regularly mailing out his latest published works. In addition to the magnet and the calendar, Hern sent me a copy of his poetry collection and his new book on global ecology. In the latter, titled Homo Ecophagus, he compares mankind to a cancer on the planet, writing that our unrelenting population growth will ultimately lead to the demise of every species on Earth. To view human beings as a scourge seems a rather ominous perspective for a man who ends pregnancies for a living. Could he see his work as, even subliminally, a form of population control?

When I asked about that, Hern shook his head vigorously, waving my question away, as if he’d been ready for it.

“Being concerned about population growth is consistent with the idea of helping women and families control their fertility on a voluntary basis,” he said.

There is a consistency, isn’t there, in what he does on a daily basis—pruning, as it were, the “surplus population”—and his contempt for mankind—“a cancer on the planet.”

Finally, every time I write about Hern, inevitably a quote from a paper presented before the Association of Planned Parenthood Physicians in San Diego titled “What about us? Staff Reactions to D&E”—dilation-and-evacuation abortion—leaps into my mind (Godfrey quoted parts of it back to Hern but without telling the reader the title of the paper).

[T]hose capable of performing or assisting with the procedure are having strong personal reservations about participating in an operation which they view as destructive and violent… Some part of our cultural and perhaps even biological heritage recoils at a destructive operation on a form that is similar to our own…

We reach a point… where there is no possibility of denial of an act of destruction by the operator. It is before one’s eyes. The sensations of dismemberment flow through the forceps like an electric current…

And it does all come back to Hern’s “specialty.” Hern career “has persisted through the entire arc of Roe v. Wade, its nearly 50-year rise and fall. He specializes in abortions late in pregnancy—the rarest, and most controversial, form of abortion. This means that Hern ends the pregnancies of women who are 22, 25, even 30 weeks along. Although 14 states now ban abortion in most or all circumstances, Colorado has no gestational limits on the procedure. Patients come to him from all over the country because he is one of only a handful of physicians who can, and will, perform an abortion so late.”

At least we have that slight consolation. Only a few abortionists have sunk that low.
Alive and Growing

From the moment your life began.
achieve her dreams even when challenges arise. Just being there for her in that moment of light in a world of darkness is always appreciated, no matter where you are in the world.”

Eva’s Place
PHA is among the more than 950 organizations affiliated with Heartbeat International outside of the United States in 89 countries and territories.

“Pregnancy centers exist all over the world, whether abortion is legal or illegal, because they provide loving care and confidential support for a woman facing pregnancy, whether planned or unplanned,” Trudden said. “They will take the opportunity to walk through the moment [with a client].”

Offering the opportunity to reflect and talk about her present fears and concerns and considerations for her future gives a woman “a moment of pause” and time to discover ways to “overcome” challenges they perceive, she added. That can include, as in Shianne’s case, already being a mother. “I’m working 60 hours a week at two different jobs, and I want to be certain I’m able to care for my older kids” is a comment Trudden said she recently heard one woman say.

“That brings a different level of complexity,” Trudden said. However, “they have support and they have resources” from pregnancy help organizations, she added.

Pregnancy centers remain viable through economically challenging times
Perception and reality can meld, especially regarding finances. With rising costs and increasing inflation, women and families currently face greater challenges, especially economically. Yet, pregnancy centers remain a viable option to help jump those hurdles.

“We’re encountering inflation of historical proportions,” said Shellhouse. “We’ve seen food prices rise, and housing and living expenses have become exorbitant. Those are real problems for those who are raising families, whether they’re experiencing an unplanned pregnancy or not. I definitely believe there’s a heightened pressure on women to respond in the midst of a crisis to make rash decisions … We’re seeing outside forces saying, ‘This is not a good time to be raising a child – there’s too many unknowns.’ Yet, we know there’s real support, and there is real help. But that doesn’t lessen the difficulties they’re facing … but what we’re saying is, ‘You don’t have to face them alone.”

Pregnancy centers exist “to meet the need that is there” when a woman faces an unplanned pregnancy, she added. Trudden agreed.

“Our pregnancy help organizations are there to guide them and help them tap into the resources available in their community,” she said.

She learned she didn’t have to sacrifice her career or her child.
“Keeping the vision of her future at the forefront is also part of what we do,” Trudden said. “We can truly help her to achieve her dreams. We know how strong and capable women are.”

“Unplanned pregnancies will continue to be something that women face,” Shellhouse said. “These women deserve respect, support, and hope. They can find [that] in the pregnancy help movement.”

Shianne discovered that at Eva’s Place. She learned she didn’t have to sacrifice her career or her child.

“Shianne, as she shared about her experience, said she felt like she could breathe again,” Shellhouse said. “She was supported, and that she had time. I think it’s important that, when we’re facing a challenge, or something that seems like a crisis, that we have opportunity and the space to slow down, understand all of our options, be educated, and understand all the resources we have available. A local pregnancy center provided that for Shianne and her family. Every woman deserves that opportunity, and the power of pregnancy help provides it.”

Those factors and that help led Shianne to view her situation differently. In the beginning she thought, “I don’t know how I’m going to do this” and through the services and provisions received at Eva’s Place, she determined, “I know what I’m doing.”

“That is empowerment,” said Shellhouse. “Women are created in the image of God, and we have the great opportunity to make wonderful decisions for our families, and so Shianne, being empowered, allowed herself to successfully lead and love her family, including baby Grace, and that’s a win-win situation for everyone.”

Editor’s note: Heartbeat International manages Pregnancy Help News where this first appeared. Reposted with permission.
Editor’s note. Every day when I look back at what we previously posted on this date, I try to choose a story to repost that remain relevant and were very popular. Nancy’s post fills the bill on both scores.

Recently, I saw an amazing in a post on the Nurses&Midwives4Life Ireland Facebook page showing a living, first trimester baby on a surgical field. The baby was moving its tiny head and limbs remarkably like a newborn baby. The image was both beautiful and heartbreaking since this little one could not survive.

The Speak Life video is covered with a warning that “This video may be sensitive to some people” and posted by Jonathan Van Maren, communications director for the Canadian Centre for Bio-Ethical Reform, with the caption “This 8-second video of a first-trimester baby tells you everything you need to know about how wrong abortion is.”

I investigated further and it seems that the unborn baby was about 8 weeks old and that he or she had been removed after an ectopic pregnancy in which the unborn baby develops outside the womb.

Ectopic pregnancies can be life-threatening to both mother and child when the unborn baby develops in one of the Fallopian tubes leading to the womb, although there have been some rare cases where a baby develops in the abdomen and survives.

Several years ago, I had an elderly patient who told me how her unborn baby survived decades ago when the doctors did not know that the baby was in the abdomen and the public are often told by organizations like Planned Parenthood that the unborn baby is just a “clump of cells.” In the first trimester, most babies are aborted by either vacuum suction which destroys the little person or by medical abortion using pills to first disrupt the attachment of the unborn baby to the mother and then expel the baby. However, abortion reversal is possible after the first set of pills.

Women who have abortions rarely see their baby after a first trimester abortion but it has happened, especially with medical abortion. This can be very traumatic to the woman. Contrast the look of the deceased first trimester unborn baby in the article titled “She took the abortion pill, then saw her 7-week-old baby” with the living first trimester unborn baby in the video.

A picture is worth a thousand words

Although the baby in the video could not survive after he or she was removed, the video itself is powerful evidence that abortion takes the life of a real human person even in the first trimester. Most abortions are performed in the first trimester when women and the public are often told during pregnancy.

Conclusion

Years ago, my late daughter Marie became unexpectedly pregnant and found out that the unborn baby was growing in one of her Fallopian tubes rather than her womb. She had to have emergency surgery when the tube ruptured.

Afterwards, the surgeon showed me the picture he had taken (unasked) during the surgery to remove the then deceased baby, my grandchild. The picture was personally so sad to see but I was comforted that the surgeon cared enough to take a picture of this tiny person.

After so many years and so many experiences as a nurse and volunteer in the pro-life movement, I believe that all women should be given the opportunity to know the truth about their unborn baby’s humanity as part of informed consent before abortion.

And I believe the rest of us should also have the opportunity to learn the same truth before we support legalized abortion.

This video of a living, first trimester unborn baby speaks louder than mere words.

Editor’s note. This appeared on Nancy’s blog and is reposted with permission.
work and educate those county and state fairgoers so that they know the truth!

One of my favorite parts of working a state fair was always watching the children say, “Mom, Dad, look at the babies,” when they first saw the fetal models. Kids know instinctively that they are babies and not clumps of cells.

Having good, up-to-date, factual materials, and a strong, friendly, motivated pro-lifer mansing the booth to talk to people and answer questions is also a must. Having a current petition to get signatures and hand out materials and bumper stickers, balloons, and the squishy little babies are a great way to get people to talk.

The State Organizational Development Department of National Right to Life has digitalized the Chapter County Fair Packets and updated them for this summer and fall. They are available at https://nrlchapters.org/county-fair-packets/ and all the information that you need will be at that site.

The following are a few photos from various county fair booths this summer! It is one of the most positive activities you can take part in and if you haven’t yet, I hope you will soon! Contact your state office and volunteer! I know they will put you right to work!
Anti-humanism has been part of the environmentalist movement for decades. For example, as far back as the 1970s, Canadian green radical David Suzuki denigrated humans as “maggots” that walk around “defecating on the planet.” When offered a chance to take that back in an interview ten years ago, Suzuki refused. Even the staid David Attenborough proclaimed us to be “a plague on the earth.”

This deep misanthropy continues to spread. Now, a new book — Homo Ecophagus — argues that we are a “cancer” that will make ourselves extinct. From an interview of the author Dr. Warren Hern, in Salon:

"It’s not an analogy; nobody ever died from an analogy. It’s a diagnosis, and that’s different. The diagnosis is the same as the hypothesis. . . . This hypothesis [humans as a cancer] explains what we see going on in reality around us — and has for a long time — and it predicts what is going to happen. And that means the prognosis, in medical terms, for cancer is death. The cancer continues until the host organism dies.

The difference between us and a cancer — the only difference — is we can think, and we can decide not to be a cancer. If the diagnosis is correct, things will continue until we are extinct. The biosphere can’t go extinct; it can’t die, but we can alter it to the point that we can no longer survive. And that will take out millions of other organisms.

What in the world does “Human Ecophagus” mean? That is my new name for the human species, which currently has the scientific name of Homo sapiens sapiens, or wise, wise man, which makes us the most misnamed species on the planet. Homo ecophagus means the man who devours the ecosystem — and that’s what we are doing.

Do you know who else made up names for his anti-human activism? The ghoul Jack Kevorkian, who was fond of coining terms like “obitiatry,” a word that reflected his deep desire to experiment on people he was euthanizing. Why bring him up? Hern is an infamous late-term abortionist, who admits to killing healthy, viable fetuses. Not that Farah mentioned that cogent fact.

Lest readers dismiss the author and the interviewer as fringe, anti-humanism has become a hallmark of environmentalism. It is also becoming official government policy. Food, fuel, electricity, and other shortages are being created intentionally by policy-makers that will adversely impact human wellbeing and thriving.

For example, Ireland is planning on culling up to 200,000 dairy cows to combat global warming. The U.S. is choking its own energy independence. Developing nations remain mired in destitution. Geological features are being granted human-type rights in the nature-rights movement, while activities such as shale-oil extraction is denigrated as “ecocide,” which activists are striving to criminalize internationally as the “5th crime against peace,” akin to genocide and ethnic cleansing.

We must resist such deep nihilism at all turns. Humanity is not a terminal illness. Our enterprise will not cause the end of us. Of course, we have a duty of responsible environmental stewardship. The real danger comes from Hern and Farah’s brand of virulent misanthropy, which could kill our economies and profoundly impact the sense of self-worth among the young, who have enough mental-health issues already without thinking they are akin to glioblastoma.

Editor’s note. Wesley’s great columns appear at National Review Online and are reposted with his permission.
Takeaway From Republican Presidential Debate: What the Candidates Don’t Know About How to Discuss Abortion

From Page 1

position than to that of Planned Parenthood and the Democrats, but who believe abortion must be allowed in some instances. They will reject a “National Ban on Abortion” and reject candidates they believe would impose a “Ban. To this large fraction of the public, this term means no abortions, even to save women’s lives, or allowed in cases of rape or incest, or in case of a medical emergency. Yet in a close race, without enough of their votes, we lose.

The specter of the “Ban” hung over the whole abortion discussion in the debate. Unfortunately, one element of the pro-life movement and the pro-abortion Democrats seem to be in a de facto agreement that the 2024 abortion debate should center around a “Ban.” However such a measure cannot achieve the necessary 60 Senate votes to pass and will never make it to the next president’s desk. To her credit Nikki Haley tried to make that point.

Nonetheless the candidates’ position on a “Ban” was the question of the day. Never mind the detail that the actual proposal to “Ban” abortions at 15 weeks is no ban at all. 95% of abortions are already performed by 15 weeks and many of the remainder are for life of mother or medical emergency reasons. None of the candidates seemed to know these basic facts and use them to reassure those in the middle that no candidate was actually proposing to “Ban” all abortions.

Don’t expect the Democrats to clarify this. As Democratic pollster Celinda Lake has pointed out, their polling has shown that their best strategy is to portray Republicans as supporting a Ban on Abortion. The pro-abortion press will be all too happy to carry that message into November unless the pro-life movement and its candidates can quickly and successfully manage to do a rhetorical about face.

“Ban” is a powerful word that literally means to prohibit all, allow none, zero, zilch. The connotation of anything called a “Ban” to the average voter can be “absolutely no abortions allowed.” Of course, as we have seen, the 15 week “Ban” does no such thing.

The pro-abortion movement, the Democratic party, its candidates and their media allies are working to cement that understanding into the collective mind of the American electorate. Their incessant campaign is that Republican candidates will impose a “National Ban on Abortion”. Having the 15 week “Ban” front and center in the campaign plays right into that pro-abortion/Democratic strategy.

National Right to Life’s own polling has shown that over 80% of the public believes abortion should be allowed in each of the cases mentioned above, namely, to save the life of the mother, in cases of rape or incest, and in case of a medical emergency. These folks obviously oppose a “National Ban on Abortion” and it’s hard to win an election when 80+% of the voters disagree with you on a very major issue.

It’s very likely that many or most of the candidates in the first debate agree with allowing abortion in those instances, which collectively account for about 5% of all abortions. In fact the Heartbeat law recently passed in Florida and signed by Governor DeSantis and the one passed in South Carolina, home to Nikki Haley and Tim Scott, both contained these four exceptions. However no candidate articulated a position accepting these exceptions. Doing so would have gone a long way towards picking up the support of those who don’t want a “Ban” but don’t support abortion being used for birth control or a method of family planning.

Last March the McLaughlin Group conducted a nationwide poll for National Right to Life which asked:

Would you support or oppose allowing abortion only under these four circumstances?

1. When it is necessary to save the life of the mother
2. When there is a serious risk of substantial physical harm to the mother
3. In cases of rape
4. In cases of incest

Seventy two percent said they would support that proposal!

The NRL McLaughlin poll asked about the same proposal a different way. The same respondents were asked if they would support “prohibiting” abortion “except” in the same four circumstances listed above.

The results? Support dropped to 57.7%, a drop of over 14%! Why? Because instead of hearing that the abortions they felt were necessary would be allowed, those in the middle first heard that abortions would be prohibited, which created a negative mindset. If “banning” had been used in the question instead of “prohibiting” support would most likely have dropped even further.

A Heartbeat question was also included in the McLaughlin poll. Respondents were asked:

Would you support or oppose allowing abortion only before six weeks when there is no detectable heartbeat and later only under these four circumstances?

1. When it is necessary to save the life of the mother
2. When there is a medical emergency
3. In cases of rape
4. In cases of incest

Sixty four percent supported this Heartbeat proposal which essentially describes the Florida and South Carolina laws. Compare that to the results the press loves to publicize when the question is just about a “six week abortion Ban”.

Of course such laws are not bans at all since about 45% to 50% of abortions are performed before six weeks of pregnancy.

Pro-abortion Democrats have made their Congressional goals very clear. They plan to enlarge and pack the Supreme Court to overturn the Dobbs decision and reinstate a constitutional “right to abortion”. They plan to pass a national “abortion with no limits until birth” law and they would love to make Washington DC a state thereby gaining two additional pro-abortion Democratic senators.

That parade of horrors which could put any protection for unborn children out of reach for many, many decades can happen. The Democrats only need to regain the House, hold a majority in the Senate sufficient to end the filibuster and hold the presidency.

That can’t be allowed to happen! The children’s very best hope is for every pro-life group to make the upcoming elections The priority and to not only work hard, but to work smart. That includes helping pro-life candidates learn how to present their position in terms that will win over those voters whose views are really closer to the pro-life position than its opposite, even if they don’t know it yet.

It also includes not forcing pro-life candidates to take useless positions that will drive those very voters away.