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Do You Know Roe?

*We continue our educational analysis of the 1973 Supreme Court decisions *Roe v Wade* and its companion decision *Doe v Bolton*.*

At our last Information Table for Life, several people who visited the table asked, “How far into a pregnancy can a woman get an abortion?” Everyone was shocked when we told them that *Roe v Wade* (and the companion decision *Doe v Bolton*) legalized abortion through all nine months of pregnancy.

- *Roe* says abortions may not be restricted at all during the first three months, and in the second three months may be regulated only for the mother’s health.¹
- After “viability”- that is when the baby is potentially able to survive outside the womb of the mother, *Roe* allows abortion to be prohibited but must make an exception for the woman’s life or health.²

HOWEVER in *Roe*’s companion case, *Doe v Bolton*, the Court defined “health” to include “all factors—physical, emotional, psychological, familial, and the woman’s age—relevant to the well-being” of the mother.³ In most states, that is broad enough to permit virtually any abortion in the seventh, eighth, or ninth months of pregnancy⁴ if any of these reasons is invoked.⁵

1 In the first trimester, “[T]he abortion decision . . . must be left to the medical judgment of the pregnant woman’s attending physician.” In the second trimester, the State may “regulate the abortion procedure in ways that are reasonably related to maternal health.” *Roe v Wade*, 410 U.S. 113 (1973) at 164.

2 After viability, the State may “proscribe” abortion “except where it is necessary, in appropriate medical judgment, for the preservation of the life or health of the mother.” *Roe*, at 164–65.

3 *Doe v Bolton*, 410 U.S. 179 (1973) at 192. The “*Doe v Bolton* . . . opinion and this one, of course, are to be read together.” *Roe*, at 165.

4 In *Planned Parenthood v Casey*, the Court abandoned the trimester framework but reaffirmed the legality of abortion “subsequent to viability” for the “preservation of the . . . health of the mother.” 505 U.S. 833 (1992) at 879.

5 The Supreme Court, however, has yet to be confronted with a challenge to a post-viability ban that will test *Doe*’s breadth. Indeed, 20 states currently ban late-term abortions subject to a narrow exception for the mother’s life or physical health (not for emotional,

Abortion stops a beating heart

We use heart beat and brain waves to determine “end of life” i.e. death, wouldn’t it make sense to use the same criteria to define the beginning of life?

Studies have detected a fetal heartbeat as early as 16 days after fertilization. That’s just slightly over two weeks of development. The vast majority of abortions in the United States are done well after the fetal heart has begun beating.

The chief strategist for legalizing abortion lied about deaths from illegal abortions

The late Dr. Bernard Nathanson, a chief strategist for legalizing abortion, said he and his associates invented the “nice, round shocking figure” of “5,000 to 10,000 deaths a year” from illegal abortions for political reasons:

I confess that I knew the figures were totally false, and I suppose the others did too if they stopped to think of it. But in the “morality” of our revolution, it was a useful figure, widely accepted, so why go out of our way to correct it with honest statistics?⁶

Research confirms that the actual number of maternal deaths resulting from abortion in the 25 years prior to 1973 averaged 250 a year, with a high of 388 in 1948.⁷ In 1966, before the first state legalized abortion, 120 mothers died from abortion.⁸ While any death is a tragedy, by 1972, when abortion was still illegal in 80 percent of the

psychological, familial, or age-related reasons). Most of these laws have gone unchallenged, but they are hard to enforce even if they are constitutionally permissible.

6 Bernard Nathanson, *Aborting America* (New York: Doubleday, 1979), 193.

7 *Ibid*, 42.

8 From the U.S. Bureau of Vital Statistics Center for Disease Control, as cited in Dr. and Mrs. J. C. Wilke, *Abortion: Questions and Answers*, revised edition (Cincinnati: Hayes Publishing, 1990), 169.

country, the number dropped to 39 maternal deaths from abortion.⁹

Furthermore, a groundbreaking 2012 study of abortion in Chile published in a peer-reviewed scientific journal found that Chile's abortion prohibition in 1989 did not cause an increase in the maternal mortality rate (MMR). On the contrary, after abortion was prohibited, the MMR decreased by 69.2% in the following fourteen years.¹⁰

Is Birth Control Abortifacient?

I recently looked up the term “conception” in a medical dictionary and discovered the following, somewhat contradictory definitions:

1. The union of the sperm and the ovum. Synonymous with **fertilization**.
2. The onset of pregnancy, marked by **implantation** of the blastocyst into the endometrium.

Let's review some basic biology... Fertilization is the moment when the 23 chromosomes of the male sperm unites with the 23 chromosomes of the female ovum(egg) and a new cell, a human person is created.

A sperm can survive as long as a week within the female genital tract but is probably only capable of fertilizing the ovum for about 48 hours after intercourse. During the women's monthly ovulation an egg breaks out of the surface of the ovary. From the time ovulation occurs, the egg is capable of being fertilized for probably only about twelve hours. It is because of these rather narrow time frames that the great majority of acts of natural intercourse do not result in a pregnancy.

From the moment the sperm penetrates the egg, until the first cell division is about 24 hours. At the moment of fertilization an entire new human person exists, even though it is just a single cell; this is the most complicated cell in the universe, for it contains within itself all of the information that is needed for this human person to develop into a mature adult.

9 Ibid

10 Elard Koch, et al., “Women's Education Level, Maternal Health Facilities, Abortion Legislation and Maternal Deaths: A Natural Experiment in Chile from 1957 to 2007,” *PLoS ONE* 7, no. 5 (May 2012), <http://journals.plos.org/plosone/article?id=10.1371/journal.pone.0036613>

During the first week, this one cell divides until the new human person constitutes millions of cells. At approximately one-week, (s)he implants within the lining of the mother's uterus, burrows into the spongy, nutritive wall of the womb, contacts the mother's blood stream and sends a chemical, hormonal message. This message goes to a gland at the base of the mother's brain and tells the mother's body that there is a new occupant in the womb.

From the above explanation, it would seem obvious that conception occurs, and life begins, at fertilization - the moment when the sperm penetrates the ovum. However, the medical profession has redefined “conception” as the moment of implantation rather than the moment of fertilization.

So why does this matter? Because some methods of birth control do not always prevent fertilization, but rather prevent implantation. Let us briefly examine the process of several of the more common methods of birth control.

The Birth Control Pill, the most popular and widely used method of hormonal contraception, contains two synthetic hormones progestin and ethinyl estradiol, and has three mechanisms:

- 1) it prevents ovulation,
- 2) thickens the cervical mucus, which makes it harder for sperm to enter the uterus
- 3) affects the endometrium or lining of the womb to make it more hostile to implantation.

This means the tiny developing baby (embryo) cannot attach to the uterine lining and dies, which is a very early abortion. So since pregnancy is now defined as starting at implantation, the process that inhibits implantation is therefore defined as “preventing pregnancy.”

The IUD or intrauterine device's primary function is to prevent implantation by the tiny developing human (embryo). Preventing ovulation is a distant second. If fertilization occurs, most likely the tiny unborn child will be prevented from attaching to the lining of the womb, and he or she will die. This is a very early abortion.

NuvaRing is a flexible ring about two inches in diameter. It is inserted vaginally once a month and

continuously delivers the same hormones found in the Pill and functions with the same three mechanisms. The only difference between this and the Pill is the way the drug is administered.

The Patch, called Ortho Evra, is a thin, square patch that adheres to the skin. Women wear it on the lower abdomen, below the belly button, and it is replaced weekly. Its function is identical to the Pill in that it utilizes the common three mechanisms: preventing ovulation, thickening the mucus of the cervix and making the endometrium more hostile to implantation of a tiny developing human.

Depo-Provera is injected every three months into the woman's arm muscle or buttocks. Since it is progestin only, it functions in the same way the pill does, including the prevention of implantation.

Norplant is a number of hormonal matchstick-sized rods implanted under the skin, usually in the upper arm. However, it is no longer available in the United States.

Diaphragm & Condoms: The diaphragm is a flexible rubber, dome-shaped disk that fits over the cervix in the vagina to block sperm from entering the cervix. The condom-both male and female versions-also prevent sperm from entering the uterus. All three of these are barrier forms of contraception and do not involve abortion.

Spermicides/Sponge: The sponge is a soft disk about 1.5" in diameter. It is coated with nonoxynol-9 spermicide and is inserted into the vagina. Its function is to kill sperm or block their entrance into the uterus.

Spermicide comes in various forms: foam, cream, jelly or suppository. Its function is also to kill sperm or block them from entering the uterus. Neither the Sponge or other Spermicides have an abortifacient function.

Sterilization is the surgical process of permanently sterilizing women or men. A tubal ligation severs and ties off the woman's fallopian tubes, which prevents fertilization from occurring. A vasectomy severs and ties off the vas deferens or the tubes to the man's testicles. There is no guarantee that these

procedures can be reversed. Abortion is not involved with either of these forms of sterilization. Natural Family Planning is the process of abstaining from sexual intercourse during the time a woman is fertile and able to conceive. To determine when ovulation occurs, the woman observes changes that occur within her body. There are two methods of natural family planning. One is the process of observing changes in cervical mucus. During ovulation, the mucus becomes stretchy, clear and slick. The other method is a daily monitoring of the woman's temperature, which will slightly rise during ovulation. Natural family planning has no abortifacient function.

Hopefully this brief overview provides you our members with the information to intelligently explain why birth control is sometimes (often?) an abortifacient; that is, it causes an early term abortion.

As stated above, the medical profession tried to redefine conception as starting at implantation... which occurs five to seven days after fertilization. Our position is that life begins at fertilization, and any unnatural interruption of this process is an early term abortion i.e. abortifacient. Thus the claim that "contraception does not cause abortion" is WRONG! Any discussion on birth control must begin by "defining terms" namely that conception, the beginning of a human person's life, occurs at the fertilization of the ovum by the sperm; at this moment the single cell contains within itself all of the information that is needed for this human person to develop into a mature adult.

Calendar of Events

*For the latest updates of events see
www.calendarforlife.org*

40-DAYS FOR LIFE – Sept. 26-Nov. 4, 2018
See: <http://40daysforlife.com/> for a location near you.

LIFE CHAIN – October 7, 2018 in most locations.
For a location nearest you see: <http://lifechain.net/>