

SCOTUS and the lives of the unborn

States' rights and the right to life are on the Supreme Court's agenda once again. This time it's Mississippi's proposed law that will limit the number of weeks that abortions may be performed in that state to fifteen. In my opinion, it is high time that this specific aspect of America's abortion policy is up for debate. At stake are hundreds of thousands of lives...unborn lives but human lives nonetheless, gestating in the wombs of mothers around the country.

To put things in perspective, here are a couple paragraphs from the CDC's website on abortions...

"Each year, (the) CDC requests abortion data from the central health agencies for 50 states, the District of Columbia, and New York City. For 2018, 49 reporting areas voluntarily provided aggregate abortion data to CDC. Of these, 48 reporting areas provided data each year during 2009–2018.

A total of 619,591 abortions for 2018 were reported to CDC from 49 reporting areas. Among 48 reporting areas with data each year during 2009–2018, in 2018, a total of 614,820 abortions were reported, the abortion rate was 11.3 abortions per 1,000 women aged 15–44 years, and the abortion ratio was 189 abortions per 1,000 live births. From 2017 to 2018, the total number of abortions and abortion rate increased 1% (from 609,095 total abortions and from 11.2 abortions per 1,000 women aged 15–44 years, respectively), and the abortion ratio increased 2% (from 185 abortions per 1,000 live births). From 2009 to 2018, the total number of reported abortions, abortion rate, and abortion ratio decreased 22% (from 786,621), 24% (from 14.9 abortions per 1,000 women aged 15–44 years), and 16% (from 224 abortions per 1,000 live births), respectively.

In 2018, approximately three fourths (77.7%) of abortions were performed at ≤ 9 weeks' gestation, and nearly all (92.2%) were performed at ≤ 13 weeks' gestation. In 2018, and during 2009–2018, the percentage of abortions performed at >13 weeks' gestation remained consistently low ($\leq 9.0\%$). In 2018, the highest proportion of abortions were performed by surgical abortion at ≤ 13 weeks' gestation (52.1%), followed by early medical abortion at ≤ 9 weeks' gestation (38.6%), surgical abortion at >13 weeks' gestation (7.8%), and medical abortion at >9 weeks' gestation (1.4%); all other methods were uncommon ($<0.1\%$). Among those that were eligible (≤ 9 weeks' gestation), 50.0% of abortions were early medical abortions. In 2017, the most recent year for which PMSS data were reviewed for pregnancy-related deaths, two women were identified to have died as a result of complications from legal induced abortion.

Among the 31 areas that reported race/ethnicity data for 2018, non-Hispanic White women and non-Hispanic Black women accounted for the largest percentages of all abortions (38.7% and 33.6%, respectively), and Hispanic women and non-Hispanic women in the other race category accounted for smaller percentages (20.0% and 7.7%, respectively). Non-Hispanic White women had the lowest abortion rate (6.3 abortions per 1,000 women) and ratio (110 abortions per 1,000 live births), and non-Hispanic Black women had the highest abortion rate (21.2 abortions per 1,000 women) and ratio (335 abortions per 1,000 live births)."

While this data is over two years old, we can still base some assumptions on it and ask some important questions about it. We can also draw some conclusions from it. The first is that while only two women died from legal induced abortion in 2017, all of the over half a million fetuses died. That's an indisputable fact.

Here's a bit more data from the Guttmacher Institute (for more information on the institute and how it is funded, go to: www.guttmacher.org): "- Physician and Hospital Requirements: 38 states require an abortion to be performed by a licensed physician. 19 states require an abortion to be performed in a hospital after a specified point in the pregnancy, and 17 states require the involvement of a second physician after a specified point.

- Gestational Limits: 43 states prohibit abortions after a specified point in pregnancy, with some exceptions provided. The allowable circumstances are generally when an abortion is necessary to protect the patient's life or health.
- "Partial-Birth" Abortion: 21 states have laws in effect that prohibit "partial-birth" abortion. Three of these laws apply only to post-viability abortions.
- Public Funding: 16 states use their own funds to pay for all or most medically necessary abortions for Medicaid enrollees in the state. 33 states and the District of Columbia prohibit the use of state funds except in those cases when federal funds are available: where the patient's life is in danger or the pregnancy is the result of rape or incest. In defiance of federal requirements, South Dakota limits funding to cases of life endangerment only.
- Coverage by Private Insurance: 12 states restrict coverage of abortion in private insurance plans, most often limiting coverage only to when the patient's life would be endangered if the pregnancy were carried to term. Most states allow the purchase of additional abortion coverage at an additional cost.
- Refusal: 45 states allow individual health care providers to refuse to participate in an abortion. 42 states allow institutions to refuse to perform abortions, 16 of which limit refusal to private or religious institutions.
- State-Mandated Counseling: 18 states mandate that individuals be given counseling before an abortion that includes information on at least one of the following: the purported link between abortion and breast cancer (5 states), the ability of a fetus to feel pain (13 states) or long-term mental health consequences for the patient (8 states).
- Waiting Periods: 25 states require a person seeking an abortion to wait a specified period of time, usually 24 hours, between when they receive counseling and the procedure is performed. 12 of these states have laws that effectively require the patient make two separate trips to the clinic to obtain the procedure.
- Parental Involvement: 37 states require some type of parental involvement in a minor's decision to have an abortion. 27 states require one or both parents to consent to the procedure, while 10 require that one or both parents be notified."

Should the right to life or the right to decide fetal mortality be a states' rights or a national question?

Another major conclusion we can draw from our wide disparity of laws is that our American system of governance as a Constitutional republic should be protecting life. Instead, because of the January 22, 1973 Roe vs. Wade decision by the Supreme Court which held that women in the United States have a fundamental right to choose whether or not to have abortions without excessive government restriction during the first six-months of pregnancy, our states' rights were side-stepped. How then do we find our way back or don't we?

Pro-life advocates fear that another national decision from the Supreme Court like Roe vs. Wade regarding pregnancy termination even beyond the first six months would reinforce the practice of unfettered abortions and perhaps even expand them all over the country. This is one reason why they are supporting a 'states' rights' solution to setting abortion termination limits and why the upcoming Mississippi "pre-viability" case of restricting abortions to 15 weeks is so important. The timing is no coincidence. The new 6-3 strict constructionist versus 'progressive' Justices makeup of the Supreme Court is one of the reasons. Because of that makeup, Mississippi and perhaps other states see an opening for a tightening of abortion restrictions.

Restricting abortion termination limits is not going to make abortions go away, completely. However, the hope is to increase the level of personal responsibility and thereby reduce the number of procedures. We are not the only country battling with pro-life versus pro-abortion groups' demands. Many 'modern' countries with sophisticated healthcare systems are as well. To put things into perspective, internationally, here are a few countries' pregnancy termination limits:

Nine weeks: Canada; Ten weeks: Turkey; Twelve weeks: Denmark, Germany, Norway, Ireland, Italy, France, Thailand, Russia, Brazil, Switzerland, Greece; Fourteen weeks: Spain; Sixteen weeks: Austria; Eighteen weeks: Sweden; Twenty weeks: Finland, New Zealand; Twenty-one weeks: Japan; Twenty-two weeks: Australia; Twenty-four weeks: The Netherlands, The U.K., Singapore

Fortunately, in study after study, the overwhelming majority of people around the world view abortion as an extreme measure and not as a replacement for reproductive contraception. That said, the debate about life in the womb and who has the right to end it or preserve it is a subject that is with all of us and one that continues to divide us whether our arguments are political, philosophical, religious or moral. It is a question that must be answered and answered quickly as abortions are still happening at the rate of one every 37 seconds - 20 in just the time that it took to read this article.

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