Written by Lisa Shaw on August 31, 2015



Ohio Legislature Moves to Protect the Disabled Unborn

Abortion advocates are in an uproar as Ohio lawmakers consider House Bill 135, which would prohibit the abortion of babies diagnosed with Down syndrome (child with Down syndrome shown), a genetic chromosome 21 condition causing developmental and intellectual delays. Statistics show that 50 to 80 percent of pregnancies where this disorder is present end in abortion. If this bill is approved, it would make Ohio the second state in the nation with laws of this nature.



In 2013, North Dakota passed HB1305 banning abortions of infants not only with Down syndrome, but with any "genetic abnormality or a potential for a genetic abnormality." This prohibition also extends to abortions based on the sex of the child.

Why all the fuss over HB 135? This mandate is different in that it seems to address the motive of the woman seeking the abortion. The bill's cosponsor, Republican state Representative Sarah LaTourette, states:

While I make no effort to conceal my pro-life convictions, I firmly believe this bill is about discrimination, not abortion. Choosing to end an individual's life simply because they are different, or might have Down syndrome, is discrimination. There is simply no other way to look at it.

Kellie Copeland, head of NARAL Pro Choice Ohio, a non-profit organization for abortion rights, believes the legislation is a personal affront: "They are trying to shame women," she insists.

A number of prohibitive abortion laws have recently taken effect in Ohio, causing problems for the state's abortion providers. "Over the last four years Mr. Kasich has introduced 16 new restrictions on abortion in Ohio," Copeland complained. Included in these restrictions are a 24-hour waiting period after an in-person meeting with a doctor, a ban on late-term abortions, and mandatory ultrasounds for women planning to have abortions in clinics receiving funds from the state.

According to the *Dayton Daily News*, "The number of abortion providers in Ohio has shrunk by half amid a flurry of restrictive new laws over the past four years." This mandate would place sole responsibility of any infringement of this law on the physician, not the patient. That violation would be considered "a felony of the fourth degree," and could result in jail time and the revocation of the abortionist's license.

Ohio Governor John Kasich — presently pursuing the Republican nomination for president — has not taken a stand on this issue. However, his pro-life reputation and record on abortion regulations lead those on both sides of the issue to believe he will back the bill.

Ohio Right to Life President Michael Gonidakis has little doubt that the bill will pass, as he notes that "23 of 33 senators and 65 of 99 state representatives are Republican and pro-life."

Ohio Right to Life is a prominent anti-abortion group that has worked with Kasich on several pro-life

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bills, not to mention the late-term abortion ban. Gonidakis states of his organization, "We have a track record of being strategic and putting forth an incremental approach to all our initiatives."

This strategic, incremental approach is not appreciated by all, however. As the <u>New York Times</u> reported on Ohio's recent pro-life laws:

They're trying to encroach on the right to abortion, step by step, and turn a woman's health care decision into an issue of discrimination against the fetus," said Sara Ainsworth, the director of legal advocacy at the National Advocates for Pregnant Women. "I can't imagine how any of these laws would be enforceable."

Other opposing arguments target varying motives.

For example, Chrisse France, executive director of the Cleveland abortion clinic Preterm, says of the mothers,

They're very sad, because these are mostly intentional, much-wanted pregnancies, where they paint the nursery one day and find out the next day that something's wrong [with their unborn child]. Most people who have abortions already have children, and they say things like, "I just can't be the kind of parent I want to be to this child."

France claims that the main purpose of restrictive laws is to "squeeze vulnerable women and make them feel more ashamed, and that's what the Down syndrome law would do, too."

NARAL's Kellie Copeland told Fox News,

We believe we should all work to ensure people with disabilities are treated with equality and dignity. However, we oppose this ban because it interferes with the medical decisions of Ohioans and does nothing to help people with disabilities or their families.

Let's briefly examine these motives.

France, revering a woman's comfort and sensibilities above that of human life, claims that women shouldn't be made to feel ashamed about murdering their unborn children so that they won't be inconvenienced.

Copeland insists that those with disabilities should be treated with "equality and dignity," but then moves on to say that banning the murders of infants with disabilities would be of no benefit to "people with disabilities or their families."

On the opposite side of this spectrum are those who truly do believe in the equality and dignity of those with imperfections. Also from the *New York Times*:

Rachel Mullen, 43, a mother of three who heads the recently formed Cuyahoga County chapter of Ohio Right to Life, said in an interview that her doctors had pressured her to have an abortion after an early screening test in one of her pregnancies showed a possibility of Down syndrome.

"They told me that I should get an abortion fast, so no one would know I was pregnant and I wouldn't have the stigma of abortion, that it would be doing the child a favor," she said, adding that subsequent testing ruled out the Down diagnosis. "As soon as babies are born, they're protected by the Americans With Disabilities Act, but we need this bill so that they can be born, and not culled."

Tami Rice of Coeburn, Virginia, is a mother of four. Her youngest, Micah, now 11, has Down syndrome. "I can honestly say I never had any thought about having an abortion," she told *The New American*,



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adding, "I can't say raising Micah is easy or without issues. However, my commitment as a parent to all four of my children is to love them unconditionally. [Micah's] life challenges are real, but so are many other people's."

The murdering of one human being for the convenience of another is not new. Margaret Sanger, founder of Planned Parenthood and a staunch supporter of eugenics, also advocated such action. According to her manifesto, *Woman and the New Race*, "Birth control itself, often denounced as a violation of natural law, is nothing more or less than the facilitation of the process of weeding out the unfit, of preventing the birth of defectives or of those who will become defectives."

What better birth control than abortion? And what better way to ensure the convenience of society than to dispose of those who require more than normal care?

As Gonidakis told Fox News,

What does that say of us as a society if we make decisions about who lives or who dies dependent on if they are going to be an inconvenience, or they are [costing] too much money for health care? Someday we are going to find a genetic marker for autism. Are we going to have a 90-percent abortion rate for people with autism? I hope not.

Elizabeth Nash, senior state issues associate for the Guttmacher Institute, an abortion rights organization, believes that Ohio helps set the pace concerning abortion regulations. She states,

On abortion, for decades it has been incredibly conservative. It's one of the states people look to, to see what the next restriction is going to look like.

If Nash is correct, we can expect to see more protection for the unborn — in not just Ohio, but other states as well.



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