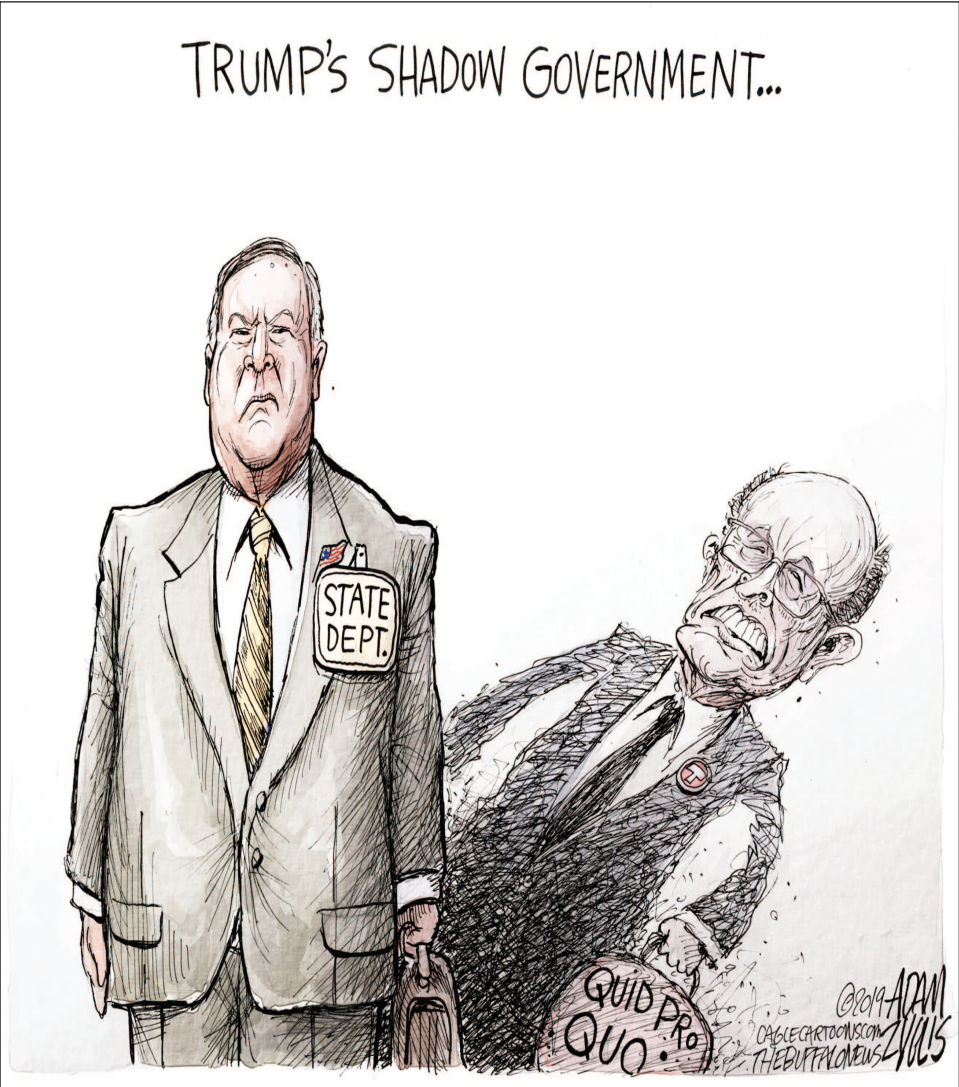




On the Fence

Should late-term abortion be legal in the U.S.?

Focus on ‘late-term abortions’ an attempt to end all abortions

Viability not accurate portrayal of basic intrinsic human value

In his Feb. 5, 2019, State of the Union address, President Trump asked Congress to ban “late-term abortion” (a phrase used by abortion opponents to refer to abortions performed after about 21 weeks of pregnancy), repeating a talking point popular among Republicans recently: that Democrats want to pass legislation that would “allow a baby to be ripped from the mother’s womb moments from birth” as a common form of abortion.

We cannot brush off this lie as just another of the president’s many falsehoods because this particular lie serves a specific and dangerous purpose. The GOP wants to drum up outrage over so-called “late-term abortion” as a way to distract from their extreme — and deeply unpopular — move to ban early abortions and make it impossible for women to end their pregnancies at all.

Roe v. Wade, the 1973 Supreme Court decision that recognized abortion as a constitutional right, said that abortion is allowed until the time a fetus could survive outside the womb, a point (known as viability) that medical science now generally considers to be at about 24 weeks of pregnancy. The Supreme Court has also specified that abortion is legal after viability in certain cases. When they occur, it is usually because the fetus has been found to have a fatal condition that could not be detected earlier, such as a severe malformation of the brain, or because the mother’s life or health is at serious risk.

Late-term abortions are very rare. The most recent data from the Centers for Disease Control and Prevention show that about 1.3% of abortions performed in the United States in 2015 occurred in or after the 21st week of pregnancy, which includes a period that is about three weeks prior to viability. Abortions after 24 weeks comprise

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less than 1% of all abortions. The vast majority (91%) of abortions take place at or before 13 weeks of pregnancy.

New York’s Reproductive Health Act — the law referenced by President Trump in his address to Congress — was passed to make sure the state would continue to ensure the right to an abortion if the Supreme Court were to overturn all or part of Roe v. Wade. Like the Supreme Court, the New York law says a health provider may perform an abortion in the state before 24 weeks — and later if the fetus is not considered viable or if the procedure is considered necessary to protect the woman’s life or health.

If the GOP wants to curb later abortions, they could remove the hurdles women face to access an early one. But the GOP’s point has never been to stop late abortions, but to stop all abortions.

The problem for Republicans is that this is decidedly not what Americans want. Support for Roe v. Wade is at an historic high. Of those surveyed, 58% say abortion should be legal in “all or most cases.” Those are difficult numbers for the GOP, the most difficult they’ve faced in years. Pontificating about “third trimester abortions” or “infanticide” shifts the focus away from their unpopular agenda.

The next time you hear a Republican talking about late-term abortion, remember what they’re really arguing: that women are not to be trusted, that we should ignore how their laws make early abortion nearly impossible, and that faux outrage should trump the health of women and families.

Earlier this year, Democratic Virginia Gov. Ralph Northam was involved in controversy after a photo of him wearing blackface in a 1984 medical school yearbook became widespread. Many called for his resignation, others suggested impeachment. Just a few days prior, however, he spoke on a radio show about Virginia House Bill 2491, which would remove restrictions on late-term abortions. He stated: “The infant would be delivered. The infant would be kept comfortable. The infant would be resuscitated if that’s what the mother and the family desired. And then a discussion would ensue between the physicians and the mother.” These two controversies occurred in the same week, but only one sparked the flames of impeachment and resignation.

The perceived acceptability of late-term abortion is entirely contingent on the point during the pregnancy at which it is no longer moral to perform — the line between harmless procedure and termination of life. But where precisely does that line fall?

A functional heart seems to be a reasonable place to start — after all, the end of heart function is typically what signals the end of a life; by logical extension, so heart function ought to signal the beginning as well. At only five weeks along, a fetus has an independently beating heart. At six weeks, it has measurable brain activity, and at seven, functional nerve endings. Keep in mind that this falls within the euphemistic “clump of cells” phase that many categorize as fair game for abortion. By these standards, an adult might as well be “just a clump of cells.” Late-term abortion (which falls after 20 weeks of pregnancy) is far outside of these standards.

But what about the first breath, at birth, when an infant is finally separate from its mother and viable outside the womb? This is the most widespread standard in American politics, seeing as the fetus can be aborted at

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any time in the pregnancy. This standard is convenient but has no scientific backbone. One’s ability to freely breathe does not determine their personhood. If the ability to survive outside of the womb is what determined moral value, then people wouldn’t begin to have moral value until their adolescent years, when they gain the ability to fend for themselves. A newborn baby is technically “viable,” but I’ve known no infants that have been able to provide for themselves on their own. Viability is simply not an accurate measurement of a person’s intrinsic human value.

Proponents of late-term abortion typically assert that the procedure is reserved exclusively for patients who discover a fetal abnormality late in their pregnancy. The Guttmacher Institute, a reproductive health organization that is openly pro-choice, found in a study that “a fetal problem diagnosed late in pregnancy” only accounts for 2% of late-term abortions. The most common reasons for a late-term abortion were misjudgment of gestational progress, and difficulty making arrangements for an earlier abortion, which accounted for 71% and 48%, respectively. A different study found the termination rate of fetuses detected to have Down syndrome to be 75%.

To answer our question: The only morally consistent place to draw the line is at conception, where a fetus has separate DNA from its mother and the ability to grow into a fully fledged human being. Especially in the late term, a fetus is a human being. No amount of inconvenience or predicted hardships can change that fact. The sanctity of life must have the utmost protection under the law.

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