February 21, 2020

Dear Senator:

I write to urge your support for the "Pain-Capable Unborn Child Protection Act" (S. 3275), a bill that protects the right to life of unborn children beginning at 20 weeks after fertilization. Not only is the United States one of only seven countries worldwide to allow abortion after 20 weeks, putting us in company with the likes of China and North Korea, but the overwhelming majority of Americans oppose late-term abortions as well.¹

The Catholic Church remains clear and consistent in asserting that true justice demands the right to life, the most basic human and civil right, for *every* child, from conception onward. No person or government has the right to take the life of any innocent human being, regardless of its stage of development. Furthermore, the Catholic Church has been, and remains, committed to providing life-affirming solutions to the real problems that lead women to consider abortion--solutions that support both mother and child. Although we will never cease working for laws that protect human life from its beginning, we think that S. 3275 is a place to begin uniting Americans regardless of their views on abortion.

First, the Supreme Court's past insistence that unborn children must be "viable" to warrant even nominal protection is not meaningful or workable. "Viability" is a *prediction* about whether a given child will survive indefinitely outside the womb *if* given medical support. And, as predicted in past abortion rulings by the Supreme Court, medical technology is moving the point of viability earlier in pregnancy, putting *Roe* on a collision course with itself. Stories of children being born earlier in pregnancy, as early as 20 weeks post-fertilization, are becoming more common.

Furthermore, science continues to reveal more about various characteristics of babies at 20 weeks such as their ability to respond to music, to his or her mother's voice, and to other stimuli. And there is significant scientific evidence that babies can feel pain at this age or even earlier.² As eminent Oxford scholar Dr. Kanwaljeet Anand said in his 2004 expert witness report, "Fetuses have been observed to exhibit hormonal stress responses to painful stimuli from as early as 16 weeks gestation, which provides additional evidence that the fetus can experience pain." He further explained that these stress responses ceased when the painful stimuli was removed, and did not occur if analgesics were given to the baby prior to the introduction of the stimuli (in this case a needle for blood transfusion). Even more recently, two scientists (one pro-choice and the other pro-life) collaborated on a study of fetal pain before 24 weeks. They summarized their findings in part: "Overall, the evidence, and a balanced

¹ Seventy-nine percent of Americans oppose late-term abortion according to a survey conducted by you.gov. Valerie Richardson, "Most pro-choice adults oppose late-term abortion, denying newborns care: Poll," The Washington Times, Feb. 12, 2019, https://apnews.com/dec1f82c4c630cb97ab7cefc58cf0866. A recent Marist Poll similarly reports that 79% of Americans want abortion banned after the first 6 months of pregnancy. Americans Opinions on Abortion (Jan. 2020), http://www.kofc.org/un/en/resources/news-room/polls/americans-opinions-abortion.pdf.

² Expert Report of Kanwaljeet S. Anand (Jan 15, 2004), http://www.nrlc.org/uploads/fetalpain/AnandPainReport.pdf; Stuart W.G. Derbyshire & John C. Bockmonn, "Reconsidering Fetal Pain," *J Med Ethics* 2020;46:3–6, https://jme.bmj.com/content/medethics/46/1/3.full.pdf.

³ Anand Report, *supra* at 7.

reading of that evidence, point[] towards an immediate and unreflective pain experience...from as early as 12 weeks...we no longer view fetal pain...in a gestational window of 12–24 weeks as impossible based on the neuroscience."⁴

Second, abortion procedures after the mid-point of pregnancy pose increased dangers to women—as evidenced in medical journals⁵ and by a disturbing number of news stories about the death or serious complications of women undergoing such procedures.

Finally, late-term abortions kill thousands of babies each year. Even using conservative estimates of both the total number of abortions and the percentage which occur at or after 20 weeks gestation, this legislation could save the lives of well over 6,000 babies. And that number could be thousands more since some states with high abortion rates (e.g. CA and DC) have no abortion reporting requirement.

Please join me in saying no to late-term abortions, and yes to life-affirming alternatives that support and protect both mother and child. I strongly urge you to support S. 3275.

Sincerely,

Most Reverend Joseph F. Naumann Archbishop of Kansas City, KS

Chairman, Committee on Pro-Life Activities

⁴ Derbyshire & Bockmon, *supra* at 6.

⁵ Lohr et al., 2008; Bartlett LA, Berg CJ, Shulman HB, Zane SB, Green CA, Whitehead S, Atrash HK. Risk factors for legal induced abortion-related mortality in the United States. Obstet Gynecol. 2004; 103(4):729-737; Hammond C, Recent advances in second trimester abortion: an evidence-based review. Am J Obstet Gynecol. 2009;200(4):347-356; Diedrich J, Steinauer J. Complications of Surgical Abortion. Clin Obstet Gynecol. 2009;52(2):205-212; Shah PS, Zao J. Induced termination of prepregnancy and low birthweight and preterm birth: a systemic review and meta-analysis. Brit J Obstet Gynecol. 2009;116(11):1425-1442.