

5-6-2019

A Pro-Life Re-Alignment: Proposing a Shift in Focus Toward Demand-Side Anti-Abortion Advocacy

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A PRO-LIFE RE-ALIGNMENT: PROPOSING A SHIFT IN FOCUS TOWARD
DEMAND-SIDE ANTI-ABORTION ADVOCACY

by

Dylan Patrick Fink

A thesis submitted to the faculty of The University of Mississippi in partial fulfillment of
the requirements of the Sally McDonnell Barksdale Honors College.

Oxford May 2019

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ABSTRACT

DYLAN PATRICK FINK: A PRO-LIFE RE-ALIGNMENT: PROPOSING A SHIFT IN FOCUS TOWARD DEMAND-SIDE ANTI-ABORTION ADVOCACY

The purpose of this thesis is to inspire a change in the conversation within the pro-life community and to create a new approach for anti-abortion proponents to use to reduce the number of abortions in the United States. Based on a supply and demand theory of economics, any pro-life strategy to destroy the market for abortion falls into one of two categories. Until now, the pro-life movement has been focused almost exclusively on limiting the supply of abortion services. While the pro-life movement should continue its efforts to ban and restrict abortion, these efforts will fail to fully end abortion because there will still be an illegal market for abortion. The pro-life movement should also decrease demand for abortion by addressing the principal causes of abortion. Abortion rates remain extremely high in the United States despite a recent downward trend. Half of the women who have abortions, 49%, are in poverty (<100% of the FPL). Another 26% are classified as low income (<200% of the FPL), which means that 75% of women who have abortions are poor or low income. The government has created several poverty relief programs that have successfully reduced the rate of abortion. However, these programs are insufficient because they only reach a fraction of the families in need of assistance. This thesis advocates for the expansion of social services, increased access to non-implantation preventing contraceptives, and the creation of free childcare providing pro-life non-profit organizations to fully confront the abortion problem in the United States.

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Chapter 1

Introduction

My purpose in writing this thesis is to inspire a change in the conversation within the pro-life community and to create a new approach for anti-abortion proponents to use to reduce the number of abortions in the United States. The pro-life movement is presently fixated almost exclusively on supply side-oriented anti-abortion campaigns; while I agree with abortion bans in principle, an abortion ban is an incomplete solution. Overwhelming empirical evidence points to a direct relationship between poverty and abortion demand. Therefore, the pro-life movement should advocate for increased social services to supplement ongoing efforts to enact an abortion ban. In this paper, I discuss low income families' need for child care services and how these services might decrease demand for abortion. In addition, decreasing poverty-related abortions could increase public support for an abortion ban by decreasing abortion's perceived necessity. My overall objective is to help decrease the number of abortions in the United States.

I start from the premise that life begins at conception and that any termination of a human being within the womb is immoral. I should note that my suggestion that the pro-life movement focus on providing social services does not mean I support disadvantaged women's right to choose abortion. Even in these situations, abortion is morally wrong and should be illegal. My suggestions simply acknowledge the nature of abortion in the United States. However, I place no moral restrictions on the use of any non-implantation preventing contraceptives. Since life begins at conception, it is not morally wrong to utilize contraceptive birth control options. I will make no attempt to defend this anti-abortion stance within this paper or to address any errors in the

opposition's logic or motivation for disagreement. It is not my intent to persuade individuals who disagree with pro-life principles to accept an anti-abortion stance or to explain the moral reasoning of the same.

Abortion rates remain extremely high in the United States despite a recent downward trend. According to the Guttmacher Institute, the United States' abortion rate has been in a state of steady decline since the early 1980s, reaching an all-time low in 2014¹. Immediately following *Roe v. Wade* (1973), the national abortion rate was 16.3 abortions per 1000 women aged 15-44, which quickly rose over the following decade to reach an all-time high of 29.3 in 1982. The abortion rate decline is most likely a combination of several factors, which will be discussed in a later chapter. Still, in 2017 there were an estimated 882,000 abortions in the United States.

In this thesis I argue that increased social services would greatly reduce the perceived need for abortion. According to Guttmacher, the “three most common reasons” why women have an abortion are that they had “concern for or responsibility to other individuals, an inability to afford raising a child, and the belief that the baby would interfere with work, school or the ability to care for dependents.”² Half of the women who have abortions, 49%, are in poverty (<100% of the FPL)³. Another 26% are classified as low income (<200% of the FPL), which means that 75% of women who

¹ Induced Abortion in the United States. (2019, February 14). Retrieved from <https://www.guttmacher.org/fact-sheet/induced-abortion-united-states>

² Induced Abortion in the United States. (2019, February 14). Retrieved from <https://www.guttmacher.org/fact-sheet/induced-abortion-united-states>

³ Abortion patients are disproportionately poor and low income. (2016, June 30). Retrieved from <https://www.guttmacher.org/infographic/2016/abortion-patients-are-disproportionately-poor-and-low-income>

have abortions are poor or low income⁴. Guttmacher also found that around 74% of women who had an abortion stated that they “can't afford a baby right now.”⁵ Based on these surveys, it is reasonable to conclude that many women have poverty or opportunity related reasons for having an abortion. Therefore, the pro-life community should strive to eliminate the situations that lead women to choose abortion through poverty relief.

The pro-life movement should be working towards both legal restrictions on abortion and increasing social services. The bipartisan structure of United States politics presents challenges to pro-life reform since these interests are divided between the parties. In general, the Republican Party in the United States is viewed as the “pro-life” party, as it officially advocates for an abortion ban.⁶ However, the pro-life movement’s alliance with the Republican Party reduces the likelihood of passing legislation to increase social services. Meanwhile, the Democratic Party maintains a “pro-choice” agenda and opposes an abortion ban⁷. However, the Democratic Party advocates for expanded social benefits. Therefore, the pro-life initiatives that I propose require substantial bipartisan support.

Considering these political difficulties, I propose creating a non-profit organization. This non-profit organization, which I have tentatively named “Life

⁴ Abortion patients are disproportionately poor and low income. (2016, June 30). Retrieved from <https://www.guttmacher.org/infographic/2016/abortion-patients-are-disproportionately-poor-and-low-income>

⁵ Reasons U.S. Women Have Abortions: Quantitative and Qualitative Perspectives. (2016, December 06). Retrieved from <https://www.guttmacher.org/journals/psrh/2005/reasons-us-women-have-abortions-quantitative-and-qualitative-perspectives>

⁶ Republican Party Platform. (2016). Retrieved from <https://prod-cdn-static.gop.com/static/home/data/platform.pdf>

⁷ Democratic Party Platform. (2016). Retrieved from https://democrats.org/wp-content/uploads/2018/10/2016_DNC_Platform.pdf

Support,” will primarily focus on providing free child care services to families that are financially struggling. Life Support will also study the effects of free child care on communities by collecting data on poverty and abortion rates. This data will be useful to demonstrate the effectiveness of increasing social services to combat abortion. In addition, it is my hope that the creation of this non-profit will improve public support for the reversal of Roe v Wade and a federal abortion ban. Moderates who feel abortion is wrong, but that it should be accessible for mothers with financial burdens might have their concerns alleviated if substantial support structures are available to aid disadvantaged families. If a significant number of people perceive that abortion will no longer be necessary for poverty or opportunity related reasons, public support for abortion restrictions could increase.

Even if abortion is banned in the U.S., child care is made universal, and social services are substantially increased, abortion will persist. The purpose of these measures is to decrease the abortion rate as much as possible. There is no policy that will end abortion entirely. However, it is the responsibility of the pro-life movement, and society in general, to make a concerted effort to eliminate abortion.

This thesis consists of three main parts. In the next chapter, I discuss the history of the pro-life movement by considering the challenges it has faced, the progress it has made, and the obstacles that stand in the way of future progress. I also discuss how the pro-life movement has paid insufficient attention to providing social services. Based on the history of the pro-life movement and the present political climate, in the next chapter I discuss the relationship between public opinion and abortion policy. This discussion includes a general outline of the possible political avenues that could result in an abortion

ban and an analysis of the likelihood that an abortion ban will become a reality in the United States. In the next chapter I discuss the situation of families in poverty and address the need for increased social services to combat abortion. This discussion includes an explanation of the services available to low income families. Finally, I suggest a shift in the emphasis of the pro-life movement towards social services by proposing universal child care vouchers for families under 200% of the FPL and a model for a non-profit organization that provides child care.

Chapter 2

A Brief History of the Pro-Life Movement in the United States (1959-Present)

Intro

In order to discuss the appropriate course of action the modern pro-life movement should take to end abortion in the United States, it is important to consider its history, to determine the strategies that have and have not worked. Landmark legislation and Supreme Court cases have signaled turning points in both the law and public opinion. Since the federal legalization of abortion in 1973, the pro-life movement has been largely focused on reversing *Roe v. Wade* or passing counter legislation to limit the supply of abortion.

Definition of Terms

The “pro-life movement” is a modern term given to the political efforts of anti-abortion proponents to increase abortion restrictions and to establish a federal or re-establish statewide abortion bans. Historically, the term “pro-life” has been used to denote support for a variety of policy positions, such as opposition to euthanasia, the death penalty, and birth control. However, the term “pro-life” is typically used to define an individual who opposes abortion in all or most cases. Individuals who consider themselves pro-life often having widely varying opinions on abortion. In some cases, individuals may define themselves as “pro-life” to express a distaste with abortion while simultaneously supporting legal abortion. Conversely, the “pro-choice” movement is a modern term given to the political efforts of abortion rights advocates who seek to maintain or expand women’s right and access to abortion. The term “pro-choice,” when applied to an individual, could denote an equally broad array of policy positions.

However, the label is typically used to express the belief that abortions should be legal in all or most cases.

Overview

In the decades before the 1960's, there was no discernable pro-life movement; states were permitted to criminalize abortion during every stage of pregnancy. In 1967 abortion was a felony in 49 states and a misdemeanor in New Jersey.⁸ American society was not yet embroiled in a contentious debate over the issue; instead, abortion only existed in the background of American life where it was discussed in hushed tones away from potentially judgmental ears. American society was permeated by strong sexual taboos before the sexual revolution of the 1960's sparked open conversation and debate over issues like birth control.⁹ Since the issue was not yet readily discussed, most people did not take time to develop in-depth opinions about abortion.¹⁰

While abortion may have been socially unacceptable, the exact reasons for its cultural stigma were muddled. The Catholic Church preached to its congregations that abortion was wrong because the life of the unborn child was sacred.¹¹ Some scholars argue that abortion was only considered wrong because sex itself was considered wrong, not because it involved the termination of a life¹². Abortions were scandalous because they were proof of sexually nefarious behavior, which would damage a woman's

⁸ (n.d.). Retrieved from <https://www.ewtn.com/library/PROLIFE/LIFBFROE.TXT>

⁹ The Pill and the Sexual Revolution. (n.d.). Retrieved from <https://www.pbs.org/wgbh/americanexperience/features/pill-and-sexual-revolution/>

¹⁰ Luker, K. (1984). *Abortion and the Politics of Motherhood*. University of California Press. Retrieved from <http://www.jstor.org/stable/10.1525/j.ctt1ppck8>

¹¹ Luker, K. (1984). *Abortion and the Politics of Motherhood*. University of California Press. Retrieved from <http://www.jstor.org/stable/10.1525/j.ctt1ppck8>

¹² Luker, K. (1984). *Abortion and the Politics of Motherhood*. University of California Press. Retrieved from <http://www.jstor.org/stable/10.1525/j.ctt1ppck8>

reputation if it were made public. The lack of public awareness about abortion made its rapid legalization alarming and deeply distressing to early anti-abortion activists, many of whom assumed that society ubiquitously regarded abortion as deeply morally wrong.¹³

The political pro-life movement was created in response to the increasingly liberalized abortion laws resulting from the successful campaigns of abortion rights activists. In 1959 the American Law Institute (ALI) began a campaign to liberalize abortion laws by allowing legal abortion in the case of “rape, incest, or fetal deformity.”¹⁴ These more moderate policy amendments were accompanied by calls for more changes, such as instances where “the pregnancy impaired the physical or mental health of the mother.” During the early 1960s, the abortion liberalization movement developed a strategy to frame abortions as necessary healthcare and focused their discussion on how abortion affects the mother rather than the pre-born child.

While early pro-choice movement progress was slow during the 1960’s, the movement was gaining national attention. In 1961, the New Hampshire state legislature passed a liberalized abortion law that allowed for “therapeutic abortions,” which would have become law if the governor had not vetoed the bill. “Therapeutic” abortion bills allowed for abortions when there was “substantial risk that continuance of the pregnancy would gravely impair the physical or mental health of the mother.”¹⁵ Although the New Hampshire bill failed, therapeutic abortion bills found success in other states. Towards

¹³ Luker, K. (1984). *Abortion and the Politics of Motherhood*. University of California Press. Retrieved from <http://www.jstor.org/stable/10.1525/j.ctt1ppck8>. Page 130.

¹⁴ Karrer, R. N. (2011). The National Right to Life Committee: Its Founding, Its History, and the Emergence of the Pro-Life Movement Prior to *Roe V. Wade*. *The Catholic Historical Review* 97(3), 527-557. The Catholic University of America Press. Retrieved February 2, 2019, from Project MUSE database.

¹⁵ Brian Pendleton, *The California Therapeutic Abortion Act: An Analysis*, *Hastings Law Journal*, Volume 19, Issue 1 Article 11 1-1967.

the end of the decade, the pro-choice movement began to break through with their policy reform. Successful abortion law liberalization campaigns in Colorado (1967) and California (1967) alerted social conservatives and demonstrated the need for coordinated pro-life activism.

The modern pro-life movement was founded in 1967 with the creation of the National Right to Life Committee (NRLC), then the “National Right to Life League.” This organization was founded at the request of the National Conference of Catholic Bishops (NCCB), but later became independent of the Catholic Church when it was formally incorporated in 1973. The NRLC was founded with a budget of \$50,000 and was directed to inform voters about the various state campaigns to legalize abortion. Most of the NRLC’s activism began in 1973 in response to the *Roe v. Wade* decision. After abortion was legalized, the NRLC proposed the “Human Life Amendment,” which would make abortion illegal and prohibit Congress from making it legal in the future. The Human Life Amendment has been presented to Congress with various wordings and titles, notably in 1974, 1975, 1981, and 1983. The amendment has reached the Senate floor only once, in 1983, under the title “Hatch-Eagleton Amendment,” which narrowly failed by a vote of 49-50. The NRLC has sponsored various newspapers and magazines including its publication “National Right to Life News,” which has been in circulation since 1973. The NRLC has engaged in lobbying activities, endorsed and campaigned for pro-life politicians and created SuperPACs such as the “National Right to Life Victory Fund”. The NRLC has affiliates in every state and remains the largest pro-life organization in the United States.

In 1969, the pro-choice movement founded its first national advocacy group known initially as the National Association for the Repeal of Abortion Laws (NARAL), but the National Abortion Rights Action League after 1973. The organization ultimately changed its name to NARAL Pro-Choice America in 2003. NARAL is still in operation, serving as a pro-choice counterweight to the political action of the NRLC. NARAL supports abortion rights through its sister organizations the “NARAL: Pro-Choice America Fund,” which serves as the “policy and educational component” of NARAL’s advocacy campaign and the “NARAL Pro-Choice America PAC,” which “endorses pro-choice champions and challengers in federal and state races across the country.”¹⁶ NARAL has 20 state affiliates, making it a smaller organization than the NRLC.

The most well-known pro-life activism event is the annual “March for Life” rally in Washington. In 1974, Nellie Gray organized 20,000 supporters to protest the *Roe v. Wade* decision. Pro-Life activists have gathered at the nation’s capital to advocate a ban on abortion every year since 1974, turning the annual march into the largest pro-life gathering in the United States. The March for Life features prominent pro-life politicians and speakers such as conservative activist Ben Shapiro in 2018. The annual March for Life has also featured many prominent former pro-choice activists who later became pro-life; in 1998, the March for life featured Dr. Bernard Nathanson, founder of NARAL, Norma McCorvey, the plaintiff in *Roe v. Wade*, and Sandra Cano, the plaintiff in *Doe v.*

¹⁶ About. (n.d.). Retrieved from <https://www.prochoiceamerica.org/about/>

Bolton¹⁷. Pro-life presidents such as Ronald Reagan, George W. Bush, and Donald Trump typically address the movement every year to express their support for the event.

Strategies

There are a large number of organizations that describe their efforts as pro-life or anti-abortion, which would make compiling a comprehensive list of all pro-life organizations impractical. These groups tend to share common policy goals and use similar strategies to accomplish these goals. A great deal of effort has been made by the pro-life community to focus the national discussion of abortion on legally defining the personhood of the unborn child¹⁸. Personhood debates have caused pro-life advocacy to be historically fetus-centric, meaning that pro-life activists tend to focus on abortion's effects on the child rather than the mother carrying the child.

Because pro-life activists want to point out the effects of abortion on the unborn, activists commonly employ the use of disturbing images. The pro-life movement has been using this strategy since the 1970's; for instance, prominent activists John and Barbara Wilke advocated the use of abortion pictures to humanize the unborn when they wrote their *Handbook on Abortion*¹⁹. This book included four pictures that were used in anti-abortion advocacy.²⁰ Image-related anti-abortion advocacy has only become more popular with the rise of the internet. For instance, Abortionno.org publishes thousands of

¹⁷ History of the March for Life. (n.d.). Retrieved from <https://marchforlife.org/history-of-the-march-for-life/>

¹⁸ Cassidy, K. (1995). The Right to Life Movement: Sources, Development, and Strategies. *Journal of Policy History*, 7(01), 128-159. doi:10.1017/s0898030600004176

¹⁹<https://tah.oah.org/november-2016/abolishing-abortion-the-history-of-the-pro-life-movement-in-america/#fn8>

²⁰ Dr. and Mrs. J.C. Willke, *Handbook on Abortion* (Cincinnati, OH: Hiltz Publishing Co., 1972).

pictures of aborted fetuses for the purpose of anti-abortion advocacy.²¹ These disturbing images typically depict the body of an unborn child after the child has been killed. For these purposes, anti-abortion proponents tend to select later term abortion victims since their bodies are more clearly human than those in earlier term abortions. However, abortionno.org publishes images from early stage pregnancies, beginning at seven weeks. Images of fetuses post abortion are effective for anti-abortion activists making an emotionally driven argument with significant shock value.

Some anti-abortion extremists have marred the public image of the pro-life movement by engaging in terrorist activities. In some instances, these terrorists consider themselves part of a larger organization. For instance, the Army of God (AOG) has actively utilized violent measures to bring about the end of abortion. The third edition of *The Army of God Manual* is still available on the terrorist group's website, supposedly recorded for historical purposes. The manual contains information on how to conduct covert violence against abortion providers. In response to murders in the early 1990's, abortion rights activists advocated for the would investigation of the alleged Violence Against Abortion Providers Conspiracy (VAAPCON).²² Since its founding in 1982, the AOG has been connected to several instances of anti-abortion terrorism, including kidnapping, bombing, and murder. The violent measures of the Army of God and other self-identifying anti-abortion rights groups have been explicitly denounced by

²¹ <https://www.abortionno.org/abortion-photos/>

²² https://www.washingtonpost.com/archive/local/1996/01/26/abortion-clinic-violence-probe-was-over-at-the-start/23bcc74d-f2cd-43e5-9dac-106a35e20a1c/?utm_term=.6ea2ecb454e9

mainstream pro-life groups. For example, the NRLC condemned the high-profile murder of abortionist George Tiller in Wichita, Kansas in 2009.²³

Landmark Decisions

Roe v. Wade (1973) and *Doe v Bolton* (1973) represent the turning point in the history of United States abortion policy. *Roe v. Wade* was a Supreme Court case brought by Norma McCorvey under the pseudonym “Jane Roe.” Under Texas Law, McCorvey was restricted from procuring an abortion due to Texas Article 1191, which banned abortion except when continued pregnancy endangered the life of the mother.²⁴ Article 1191 was struck down by the Supreme Court, thereby establishing the constitutional right to have an abortion. The Supreme Court’s 7-2 decision cited the due process clause in the 14th Amendment and found that “the word ‘person,’ does not include the unborn.”²⁵ This stance also rejected the unborn child’s right to life under the 14th amendment. Meanwhile, the Supreme Court’s *Roe v. Wade* decision simultaneously made any existing state laws to restrict abortion before fetal viability unconstitutional. The *Doe v. Bolton* decision, which struck down a similar Georgia anti-abortion law, was made on the same day; *Doe v. Bolton* extended abortion rights by making allowances for the health of the mother even after the point of fetal viability and by extending abortion rights to single women. At the time of *Roe v. Wade* and *Doe v. Bolton*, 33 of the 50 states still criminalized abortion, while 17 states had liberalized their abortion laws to some extent. *Roe v. Wade*

²³

https://web.archive.org/web/20090603190150/http://www.nrlc.org/press_releases_new/Release053109.html "National Right to Life condemns the killing of Dr. George Tiller". National Right to Life. May 31, 2009. Archived from the original on June 3, 2009.

²⁴ Brief for Appellant - Statutes Involved. (n.d.). Retrieved from

<https://law.jrank.org/pages/11631/Brief-Appellant-STATUTES-INVOLVED.html>

²⁵ FindLaw's United States Supreme Court case and opinions. (n.d.). Retrieved from <https://caselaw.findlaw.com/us-supreme-court/410/113.html>

eliminated all existing abortion laws and centralized the decision-making process in the federal courts.

The Hyde Amendment (1976), named after its sponsor Representative Henry Hyde of Illinois, is one of the most successful pieces of anti-abortion legislation. The Hyde Amendment stipulates that federal money cannot be used to fund abortion, except in the cases of rape, incest, and when the pregnancy endangers the life of the mother.²⁶ Seventeen states responded by creating state-sponsored funding mechanisms for abortion while 33 states only fund abortions in the cases of rape, incest, or maternal endangerment.²⁷ Pro-choice activists have criticized the Hyde Amendment for its impact on low-income Medicaid recipients. Since women who acquire abortions are most often low income, abortion costs are likely to decrease demand by ensuring that low income women cannot afford to have one. The Supreme Court upheld the Hyde Amendment in the *Harris v McRae* (1980) decision.

Planned Parenthood of Southeastern Pennsylvania v Casey (1992) is notable for its plurality opinion, which was written by three members of the court. The plaintiffs, five Planned Parenthood abortion clinics, brought a complaint over five Pennsylvania abortion laws. These laws established requirements such as that abortion clinics must acquire the woman's "informed consent" by supplying her with necessary information at

²⁶ Text - S.142 - 113th Congress (2013-2014): Hyde Amendment Codification Act. (2013, January 24). Retrieved from <https://www.congress.gov/bill/113th-congress/senate-bill/142/text>

²⁷ State Funding of Abortions Under Medicaid. Retrieved from <https://www.kff.org/medicaid/state-indicator/abortion-under-medicaid/?currentTimeframe=0&sortModel=%7B%22colId%22:%22Location%22,%22sort%22:%22asc%22%7D>

least 24 hours in advance of the procedure, that the clinic must ensure spousal notice of the abortion, and that the parents of a minor seeking an abortion had to consent to the procedure. The plaintiffs also issued a complaint over certain reporting requirements and Pennsylvania's definition of a medical emergency. The Supreme Court's decision struck down the spousal notice law as a violation of the 14th Amendment and an "undue burden" on the mother. However, state requirements that abortion clinics acquire informed consent, establish a 24-hour waiting period, and ensure parental consent for minors were upheld as valid restrictions on abortion.

During the Republican presidency of George W. Bush, Congress passed the Federal Partial Birth Abortion Ban (2003), which places criminal restrictions on the partial birth abortion method.²⁸ The partial-birth abortion method laid out in the law refers to a procedure, during which the physician "deliberately and intentionally vaginally delivers a living fetus until, in the case of a head-first presentation, the entire fetal head is outside the body of the mother, or, in the case of breech presentation, any part of the fetal trunk past the navel is outside the body of the mother, for the purpose of performing an overt act that the person knows will kill the partially delivered living fetus; and performs the overt act, other than completion of delivery, that kills the partially delivered living fetus."²⁹ The bill does not mention timelines in the process of gestation; however, before

²⁸ Santorum, & Rick. (2003, November 05). S.3 - 108th Congress (2003-2004): Partial-Birth Abortion Ban Act of 2003. Retrieved from <https://www.congress.gov/bill/108th-congress/senate-bill/3>

²⁹ Santorum, & Rick. (2003, November 05). S.3 - 108th Congress (2003-2004): Partial-Birth Abortion Ban Act of 2003. Retrieved from <https://www.congress.gov/bill/108th-congress/senate-bill/3>

the ban was enacted the procedure was most common during the 2nd trimester.³⁰ The federal ban was upheld in the Supreme Court's *Gonzalez v. Carhart* (2007) decision wherein the Court ruled that since alternative abortion methods are sufficiently available the ban does not constitute an undue burden on the mother.³¹

Effectiveness of Laws at Reducing Abortion

Given that the pro-life movement concentrates its efforts on advocating for restrictive legislation, it is critical to establish whether legal measures are effective means of limiting abortion. Pro-life advocacy groups like the NRLC claim that “pro-life laws are in fact leading numbers of women to forego abortion and give birth to their babies.”³² Meanwhile, pro-choice advocates like the World Health Organization (WHO) argue that laws restricting abortion do not limit abortion because women will procure illegal abortions instead.³³ The WHO emphasizes that illegal abortions are unsafe and that limiting abortions only serves to further endanger the life of the mother.

Dr. Diane Foster, Director of Research at the center for Advancing New Standards in Reproductive Health (ANSIRH), is the project leader of the Turnaway Study at the University of California and an abortion rights advocate. Foster also strongly

³⁰ D&E Abortion Bans: The Implications of Banning the Most Common Second-Trimester Procedure. (2018, August 30). Retrieved from <https://www.guttmacher.org/gpr/2017/02/de-abortion-bans-implications-banning-most-common-second-trimester-procedure>

³¹ FindLaw's United States Supreme Court case and opinions. (n.d.). Retrieved from <https://caselaw.findlaw.com/us-supreme-court/550/124.html>

³² States News Service. (October 8, 2018 Monday). NOTED ABORTION RESEARCHER ADMITS PRO-LIFE LAWS STOP ABORTIONS. *States News Service*. Retrieved from Nexis Uni.

³³ Abortion. (2017, September 28). Retrieved from https://www.who.int/reproductivehealth/publications/unsafe_abortion/abortion_infographics/en/

rejects WHO's efficacy-based arguments against pro-life laws and calls for the pro-choice community to "Stop saying that making abortion illegal won't stop people from having them."³⁴ According to Foster, "Abortion restrictions which cause the closure of clinics, bans on public insurance coverage of abortion care, and gestational limits all prevent women from getting abortions."³⁵ Foster adds that "more than two-thirds of women who were denied abortions because they were too late in pregnancy carried their unwanted pregnancies to term."³⁶ Foster criticizes WHO's comparison of country-wide data and points out that WHO conflates abortion rates per capita with abortion demand statistics. Foster reasons that since "only 48 percent of unintended pregnancies are aborted in countries where abortion is illegal compared to 69 percent where it is legal indicates that many women have to carry unwanted pregnancies to term."³⁷

The rate at which abortions were performed skyrocketed after *Roe v. Wade* in 1973. The abortion rate gradually increased from 193,491 estimated abortions in the United States in 1970 to 1,297,606 by 1980.³⁸ From 1970 to 1980, the number of abortions increased by an average of 110,412 abortions per year before stabilizing at

³⁴ Greenlee, C. (2018, October 04). Stop Saying That Making Abortion Illegal Won't Stop People From Having Them. Retrieved from <https://rewire.news/article/2018/10/04/stop-saying-that-making-abortion-illegal-doesnt-stop-them/>

³⁵ Greenlee, C. (2018, October 04). Stop Saying That Making Abortion Illegal Won't Stop People From Having Them. Retrieved from <https://rewire.news/article/2018/10/04/stop-saying-that-making-abortion-illegal-doesnt-stop-them/>

³⁶ Upadhyay, U. D., Weitz, T. A., Jones, R. K., Barar, R. E., & Foster, D. G. (2014). Denial of abortion because of provider gestational age limits in the United States. *American journal of public health, 104*(9), 1687-94.

³⁷ Global, Regional, and Subregional Trends in Unintended Pregnancy and Its Outcomes from 1990 to 2014: Estimates from a Bayesian Hierarchical Model

³⁸ "[Morbidity and Mortality Weekly Report \(MMWR\)MMWR Surveillance Summaries](#)". **57** (SS-13). Centers for Disease Control and Prevention. November 28, 2008. Retrieved December 12, 2011.

roughly 1,300,000 abortions per year in the early 1980s. This data suggests that the liberalization of abortion directly led to increased rates of abortion.

However, it is potentially unreliable to use abortion rate statistics before the 1970s as the CDC only began collecting national data on abortion rates and generating reports in 1969.³⁹ It is possible that the abortion rate did not increase as sharply as CDC data shows and that most of the increase in abortions reported by the CDC can be attributed to better reporting capacity. For example, if legalization sharply increased the rate of abortion, the data should show a precipitous increase in the number of abortions from 1973 to 1974. CDC data indicates that there was a similar increase in total abortions in the United States from 1973 to 1974 as there was from 1975 to 1976. In 1974 there were only 147,645 more abortions than in 1973; in 1976 there were around 133,414 more abortions than there was in 1975. In fact, there was an increase of around 110,000 per year for every year of the 1970s. Since there was not a more considerable spike directly after *Roe v. Wade* in 1973 than in other years, it could be argued that abortion legalization did not dramatically alter the number of abortions that occurred.

Still, it is extremely likely that *Roe v. Wade* caused a dramatic increase in the number of abortions performed. The gradual increase in the abortion rate could be explained by society's gradual acceptance of legal abortion. If society gradually accepted the legalization of abortion, more women might choose to have an abortion as the post-*Roe v. Wade* policy environment became normalized.

³⁹ Abortion | Data and Statistics | Reproductive Health | CDC. (n.d.). Retrieved from https://www.cdc.gov/reproductivehealth/data_stats/abortion.htm

State abortion rates can be used to assess the efficacy of abortion restrictions that fall short of a total abortion ban. The Guttmacher Institute has compiled a list of abortion restrictions that have been enacted at the state level; these restrictions include requiring procedures to be performed in a hospital and by a physician, gestational limits, restriction of public funding, restricted coverage of private insurance, allowing for providers' right of refusal, state mandated counseling, required waiting periods, and required parental consent.⁴⁰

According to NARAL Pro-Choice America's grading scale, states such as Mississippi Utah, Nebraska, South Dakota, South Carolina, and Oklahoma are classified as states with "Severely Restricted Access."⁴¹ These states' strict abortion laws are reflected in their low abortion rates; all five of these states had fewer than seven abortions per 1,000 women aged 15-44 years in 2015.⁴² Meanwhile, states such as New York, Massachusetts, Connecticut, and Illinois are classified by NARAL as either "Protected Access" or "Strongly Protected Access," and have correspondingly high rates of abortion; all four states have more than 14 abortions per 1000 women aged 15-44. While these results are subjectively based on what set of laws NARAL deems to be sufficiently pro-abortion, the results suggest a strong correlation between availability and rate of occurrence. There are exceptions to this correlation, as some states have relatively high abortion rates despite their strict laws. NARAL labels states such as Florida, Georgia,

⁴⁰ An Overview of Abortion Laws. (2019, February 05). Retrieved from <https://www.guttmacher.org/state-policy/explore/overview-abortion-laws>

⁴¹ State Governments. (n.d.). Retrieved from <https://www.prochoiceamerica.org/laws-policy/state-government/>

⁴² KFF Rate of Legal abortions per 1000 women, 2015. Retrieved from <https://www.kff.org/womens-health-policy/state-indicator/abortion-rate/?currentTimeframe=0&sortModel=%7B%22colId%22:%22Location%22,%22sort%22:%22asc%22%7D>

North Carolina, and Michigan as severely restricting abortion access; however, these four states have high abortion rates of above 14 abortions per 1000 child bearing aged women.

Low abortion rates in severely restricting states might be explained by women travelling to a neighboring state to have an abortion. For instance, women in a severely restrictive state like Idaho could travel to less restrictive neighboring Washington, Montana, or Oregon. If Idaho women procure an abortion in a neighboring state, the abortion rate per capita in that state would be artificially increased. Meanwhile, the abortion rate in Idaho would be artificially lowered without any real decrease in the number of abortions. While Idaho has several adjacent states with more lenient abortion laws, women in isolated states like Florida have fewer options. NARAL considers Florida, and the entirety of the deep south, to be severely restrictive of abortion access. Florida women lack options, which helps to explain the high rate (19 per 100 women aged 15-44) of abortion in Florida.

While the exact degree to which restrictive abortion laws decrease the number of abortions is unclear, the evidence shows that even a total ban would not end abortion. Stricter abortion laws, an abortion ban, and other means of limiting abortion supply would have a profound effect on the rate of abortions if policies were applied nationwide. State-based abortion restrictions are more likely to affect disadvantaged women who are unable to travel to find a willing physician or a state with more abortion-friendly laws. If all states employed the same restrictions, these laws would be more effective even at limiting abortion for middle class and wealthy women.

Chapter 3

Public Opinion

Intro

The modern pro-life movement in the United States is often considered only by its political component, the political efforts made to reduce or eliminate abortion through legislative advocacy. However, to enact legislative changes that will further reduce the abortion rate, the public must first elect pro-life legislators. For these legislators to win election, it is helpful if public support is in favor of pro-life laws. Therefore, the most important factor in counteracting abortion through policy reform is to improve public support for anti-abortion legislation, which will improve the likelihood of pro-life members being elected to state and federal legislatures. Most importantly, we must elect a pro-life president; the president will then choose pro-life Supreme Court nominees, which are needed to overturn *Roe v. Wade*.

Overturning *Roe v. Wade* would not ban abortion by itself; it would only return the decision of whether to ban abortion to the states. To achieve a federal abortion ban either the Supreme Court must interpret the Constitution to protect the lives of the unborn against abortion or Congress must successfully pass a personhood amendment to the Constitution or a federal abortion ban law. The pro-life movement desperately needs to hold a majority opinion in the Supreme Court; if the Supreme Court remains in favor of abortion rights, any federal abortion ban passed by Congress would be struck down. The only chance to enact a federal abortion ban without a pro-life majority opinion on the Supreme Court would be for Congress to pass a personhood amendment with a

supermajority of two thirds support in both the House and Senate, which would then require passage by three fourths of the state legislatures to ratify the new amendment.

The pro-life movement has won some political battles and has imposed restrictions on abortion at both the federal and state levels, but it has so far been unable to end abortion through legislative measures. The political component of the pro-life movement has two clear objectives: 1) To limit abortion through state laws making procuring an abortion more difficult and 2) to overturn *Roe v. Wade* and work towards a federal ban of abortion.

Public Opinion

Pro-life activists have focused on reversing *Roe v. Wade* and enacting stricter limitations on abortion supply since *Roe v. Wade*. However, the pro-life movement has been unsuccessful due to insufficient public support. Pew Research shows that public opinion on abortion laws has been consistent since 1995. From 1995 to 2018, abortion rights supporters have maintained around a 10% advantage with favorability consistently in the mid to upper 50th percentiles.⁴³ The percent of Americans who feel that abortion should be illegal in all or most cases has remained consistently in the mid to lower 40th percentiles. Support for abortion rights was highest at the beginning of the poll in 1995 with 60% favoring abortion rights while 38% were opposed⁴⁴. The pro-life movement gained support in the 2000s, but abortion rights supporters have since regained their

⁴³ Hartig, H., & Hartig, H. (2018, October 17). Nearly six-in-ten Americans say abortion should be legal in all or most cases. Retrieved from <http://www.pewresearch.org/fact-tank/2018/10/17/nearly-six-in-ten-americans-say-abortion-should-be-legal/>

⁴⁴ Hartig, H., & Hartig, H. (2018, October 17). Nearly six-in-ten Americans say abortion should be legal in all or most cases. Retrieved from <http://www.pewresearch.org/fact-tank/2018/10/17/nearly-six-in-ten-americans-say-abortion-should-be-legal/>

earlier advantage. In 2018, 58% of the U.S. population supported abortion rights while 37% did not.

Gallup also polled on whether abortion should be legal or illegal in all or most cases, but allowed for a third option, "legal only under certain circumstances."⁴⁵ In 2018, Gallup found that 50% of respondents believed that abortion should be legal only under certain circumstances while 29% believed it should be legal in all or most cases and 18% believed that abortion should be illegal in all or most cases. Gallup also gathered data on situations in which abortion should be legal, most recently in 2011. Danger to the mother's physical health was the most compelling argument for abortion, with 82% responding that abortion should be legal in this situation and only 15% responding that it should be illegal. When the pregnancy is the product of rape or incest, 75% responded that abortion should be legal and 22% said it should be illegal. Late term abortions were the least popular situation with 72% of Americans responding that late term abortion should be illegal. When asked whether abortion should be legal when the woman or family cannot afford to raise the child, 36% said that abortion should be legal and 61% responded that abortion should be illegal.

"Pro-life" or "pro-choice" labels are not absolute indicators of the population's stance on abortion. Gallup polling shows that the population is much less consistent when asked whether they identify as "pro-life" or "pro-choice." Most recent Gallup polling from 2018 shows that an equivalent percentage of the population identifies as pro-choice

⁴⁵ Gallup, Inc. (n.d.). Abortion. Retrieved from <https://news.gallup.com/poll/1576/abortion.aspx>

(48%) and pro-life (48%).⁴⁶ While Gallup polling is more encouraging than Pew Research data, these results can be misleading. Gallup polling concerning the popularity of pro-life vs. pro-choice labels has yielded inconsistent results since the poll began in 1995. For example, Gallup reports five lead changes in label popularity since 2009; yearly data shows that the pro-life label had a 9% advantage over the pro-choice label twice in the last decade.⁴⁷ Gallup polling on identity labels varies widely from year to year and does not indicate growing popularity for either label. Furthermore, polling on identity labels does not correspond to Pew Research data to indicate change in public opinion on abortion rights. Neither Pew nor Gallup have produced polling data that shows a direct causal relationship between growing anti-abortion sentiment and the gradual decrease in the national abortion rate shown by Guttmacher.⁴⁸

Factors Influencing Public Opinion

Communities with strong religious beliefs are more likely to be anti-abortion. Americans are increasingly identifying as religiously unaffiliated while most Christian denominations are hemorrhaging members.⁴⁹ Pew Research found that 6.7% more Americans identified as unaffiliated in 2014 than in 2007. Meanwhile, Catholics' share of the U.S. populace went down 3.1%. Likewise, mainline Protestant groups represented 3.4% less of the populace in 2014 than in 2007. Evangelical denominations were less

⁴⁶ Gallup, Inc. (n.d.). Abortion. Retrieved from <https://news.gallup.com/poll/1576/abortion.aspx>

⁴⁷ Public Opinion on Abortion. (2018, October 15). Retrieved from <http://www.pewforum.org/fact-sheet/public-opinion-on-abortion/>

⁴⁸ Induced Abortion in the United States. (2019, February 14). Retrieved from <https://www.guttmacher.org/fact-sheet/induced-abortion-united-states>

⁴⁹ http://www.pewforum.org/2015/05/12/americas-changing-religious-landscape/pf_15-05-05_rls2_1_310px/

affected as the percent of evangelical Protestants only declined by .9%. According to Pew Research data, 22.8% of Americans self-identified as religiously unaffiliated in 2014.⁵⁰ Meanwhile, 70.6% of Americans identified as some Christian denomination, with the largest groups being Roman Catholic (20.8%), evangelical Protestant (25.4%), and mainline Protestant (14.7%).

The Catholic Church has been one of the strongest proponents of the pro-life movement. However, 2018 Pew Research data shows that 51% of self-described American Catholics support abortion rights in all or most cases while only 42% of American Catholics believe that abortion should be illegal.⁵¹ In fact, white evangelical Christians are much stronger supporters of the pro-life movement than Catholics, with 61% of white evangelical Protestants believing that abortion should be illegal in all or most cases and 34% believing that abortion should be legal in all or most cases. Most white mainline Protestants support abortion rights, with 67% believing that abortion should be legal in all or most cases while only 28% believe that abortion should be illegal in all or most cases. All Christian denominations are more likely to be anti-abortion than Americans who describe themselves as unaffiliated, with 74% of religiously unaffiliated people believing that abortion should be legal in all or most cases and only 21% believing that abortion should be illegal in all or most cases.

Strongly held religious convictions are more likely to affect an individual's opinion on abortion. Although both evangelical Protestant and Catholic doctrines

⁵⁰ Religion in America: U.S. Religious Data, Demographics and Statistics. (2015, May 11). Retrieved from <http://www.pewforum.org/religious-landscape-study/>

⁵¹ Public Opinion on Abortion. (2018, October 15). Retrieved from <http://www.pewforum.org/fact-sheet/public-opinion-on-abortion/>

condemn abortion, evangelical Protestants may be more likely to condemn abortion due to higher rates of religious fervor. Gallup polling collected from 2014-2017 finds that only 39% of Catholics regularly attend church services while 45% of all self-described Protestants attend weekly church services.⁵² Overall church attendance in the Catholic church has decreased while Protestant denominations have remained the same since 1955.⁵³ Pew Research reports that individuals from every denomination who attend regular church services are more likely to view abortion as morally wrong than those who do not.⁵⁴

Party affiliation and religious affiliation are related.⁵⁵ Non religiously-affiliated groups overwhelmingly lean towards the Democratic party: 69% of atheists and 64% of agnostics report “leaning Democrat.” Non-Christian religious groups also lean left: 69% of Buddhists, 62% of Muslims, 61% of Hindus, and 64% of Jews report leaning towards the Democratic party. Historically black Protestant denominations overwhelmingly lean Democratic with 92% of African Methodist Episcopal church adherents reporting a Democratic lean. Conversely, 70% of Mormons report leaning towards the Republican party. Evangelical groups also report a significant overall lean to the Republican party. For instance, individuals belonging to the Southern Baptist Convention report a 64%

⁵² <https://news.gallup.com/poll/232226/church-attendance-among-catholics-resumes-downward-slide.aspx>

⁵³ Gallup, Inc. (2018, April 09). Catholics' Church Attendance Resumes Downward Slide. Retrieved from <https://news.gallup.com/poll/232226/church-attendance-among-catholics-resumes-downward-slide.aspx>

⁵⁴ Mitchell, T., & Mitchell, T. (2016, September 28). Very few Americans see contraception as morally wrong. Retrieved from <http://www.pewforum.org/2016/09/28/4-very-few-americans-see-contraception-as-morally-wrong/>

⁵⁵ Lipka, M., & Lipka, M. (2016, February 23). U.S. religious groups and their political leanings. Retrieved from <http://www.pewresearch.org/fact-tank/2016/02/23/u-s-religious-groups-and-their-political-leanings/>

Republican lean. Meanwhile, Catholics are more evenly divided between the parties with 44% of Catholics reporting a Democratic lean and 37% reporting a Republican lean.

Mainline Protestant churches such as Presbyterians and Lutherans show almost no preference between parties, with 47% of both churches leaning towards the Democratic party and 44% leaning towards the Republican party.

Abortion is a highly political issue. However, party affiliation is far from a perfect predictor of abortion opinion. The Republican Party's official party platform from 2016 states that "We, however, affirm the dignity of women by protecting the sanctity of human life." The Republican party platform explicitly criticizes the Democratic party for its "limitless support for abortion."⁵⁶ However, according to Pew data only 59% of Republicans believe that abortion should be illegal in all or most cases, while 36% believe that abortion should be legal in all or most cases. Democrats are more in line with their party's abortion stance with 76% of Democrats supporting abortion rights in all or most cases while only 21% believe abortion should be illegal in all or most cases.

Individuals who identify with the extremes of either conservative or liberal ideology are more likely to align with their respective parties' platforms.⁵⁷ Republican partisans who self-identify as "conservative," as opposed to "liberal" or "moderate," are more likely to oppose abortion rights. Pew data shows that 66% of conservative Republicans believe that abortion should be illegal in all or most cases, while the majority of moderate or liberal Republicans (58%) believe that abortion should be legal

⁵⁶ The 2016 Republican Party Platform. (2016, July 18). Retrieved from <https://www.gop.com/the-2016-republican-party-platform/>

⁵⁷ Public Opinion on Abortion. (2018, October 15). Retrieved from <http://www.pewforum.org/fact-sheet/public-opinion-on-abortion/>

in all or most cases. Liberal Democrats are also more likely to align with their party platform as 84% of liberal Democrats believe that abortion should be legal in all or most cases, while 68% of moderate or conservative Democrats share that belief. This data suggests that party affiliation is a stronger indicator of abortion opinion than religious affiliation. Despite stronger correlation, party affiliation still yields imperfect results.

Pew Research also compares data on public support for abortion based on gender, age, ethnicity, and education level.⁵⁸ Pew found that the majority opinion of both genders supported abortion rights, with 57% of men and 60% of women believing that abortion should be legal in all or most cases. Opinions on abortion were similar across age groups. Younger age groups were only slightly more likely to believe that abortion should be legal in all or most cases. Pew found that 63% of adults under 30, 59% of adults in their 30's and 40's, 56% of adults aged 50-65, and 57% of adults aged 65+ believed that abortion should be legal in all or most cases. Although older adults were slightly more likely to believe that abortion should be illegal, results were consistent across age groups. The discrepancy between age groups can be explained by higher religiosity in older age groups.⁵⁹

When Pew Research studied public opinion on abortion based on race or ethnicity, they found that around 60% of both black and white American believed that

⁵⁸ Public Opinion on Abortion. (2018, October 15). Retrieved from <http://www.pewforum.org/fact-sheet/public-opinion-on-abortion/>

⁵⁹ Kramer, S., Fahmy, D., Kramer, S., & Fahmy, D. (2018, June 13). Younger people are less religious than older ones in many countries. Retrieved from <http://www.pewresearch.org/fact-tank/2018/06/13/younger-people-are-less-religious-than-older-ones-in-many-countries-especially-in-the-u-s-and-europe/>

abortion should be legal in all or most cases.⁶⁰ Hispanics and Latinos were “more evenly split” with 49% believing abortion should be legal in all or most cases, while 44% believe it should be illegal. Finally, Pew Research found that those with more formal education were more likely to believe that abortion should be legal in all or most cases. People with only a high school diploma or less were split, with 48% supporting legality and 47% believing abortion should be illegal in all or most cases. Opinions shifted in favor of abortion access as level of education increased, with 60% of those who had some college education and 71% of those with college or graduate degrees in favor of legality. Education level was a much stronger indicator than race, gender, or age.

Religious affiliation, political affiliation, and education strongly correlate with individual’s abortion opinion, while age, gender, and race or ethnicity are less helpful indicators.⁶¹ It is impossible to determine whether individuals feel led by their religious convictions to support a political party. There are many factors that can lead individuals to identify with a specific church or political party. Individuals may not be convinced by religious beliefs but still choose to identify with a denomination. In some cases, religious and political affiliation may cause individuals to change their opinion. Individuals may decide to leave a church if they feel it contradicts their values. Polling that examined party affiliation also showed that not all Republicans or Democrats support their entire party platform: many individuals choose to identify with a political party that opposes one or more of their convictions. Whereas individuals’ choices and reasoning may be

⁶⁰ Public Opinion on Abortion. (2018, October 15). Retrieved from <http://www.pewforum.org/fact-sheet/public-opinion-on-abortion/>

⁶¹ Public Opinion on Abortion. (2018, October 15). Retrieved from <http://www.pewforum.org/fact-sheet/public-opinion-on-abortion/>

unclear, an individual's abortion stance is a personal choice not determined by religious or political affiliation.

Effects of Community Opinion on Abortion Rates

Public opinion could have a direct effect on the abortion rate if societal pressures on individuals considering abortion or the personal convictions of the individuals themselves impacts their decision on whether to have an abortion. For instance, women in majority Republican states may experience pressure from pro-life groups, dissuading them from having an abortion. According to the CDC, most abortions occur during the first trimester.⁶² Since most abortions occur before women appear pregnant, women can likely procure an abortion without the procedure becoming public knowledge. Peer pressure is more likely to become a factor when the pregnancy becomes public knowledge in the later stages of pregnancy. Therefore, women's personal religious convictions likely have a greater effect on the abortion rate than societal pressures. If societal pressures do affect the abortion rate, the effect is probably greatest on pregnancies beyond the first trimester.

External pressures are likely to produce a net increase in the abortion rate according to an article published in the *Journal of American Physicians and Surgeons*. The article, "Women Who Suffered Emotionally from Abortion: A Qualitative Synthesis of Their Experiences," found that "nearly three-quarters (73.8%) of women with a history of abortion surveyed admitted that they experienced at least subtle forms of pressure to

⁶² Abortion | Data and Statistics | Reproductive Health | CDC. (n.d.). Retrieved from https://www.cdc.gov/reproductivehealth/data_stats/abortion.htm

terminate their pregnancies.”⁶³ The study also found that pressures were significant enough to impact women’s decision. The majority (58.3%) of women surveyed reported that they decided to abort "in order to make others happy.”⁶⁴ The study also shows that 66% of the women surveyed had an abortion even though they “knew in their hearts that abortion was wrong.”

Not all pressures are explicit; the community’s general attitude can make women more or less likely to have an abortion. Society helps to define individual's understandings of right and wrong. In heavily pro-life areas, women will be less likely to choose abortion. To examine the relationship between societal pressures and the abortion rate, I look at religiosity, political ideology, and the rate of abortion in specific states.

According to Pew Research statistics from 2014, the percent of Christians in Mississippi is higher than the national average; 83% of Mississippi identifies as Christian.⁶⁵ Along with Alabama, Mississippi is the most religious state in the union with 77% of its adults classified as highly religious.⁶⁶ A large portion of Christians in Mississippi are evangelicals (41%) and historically black Protestant (24%). Meanwhile, the percent of Catholics (4%) and mainline Protestants (12%) is substantially lower than

⁶³ Coleman et al. *Journal of American Physicians and Surgeons*. "Women Who Suffered Emotionally from Abortion: A Qualitative Synthesis of Their Experiences" (2018) Retrieved from <http://www.jpands.org/vol22no4/coleman.pdf>.

⁶⁴ Abbamonte, J. (2018, January 26). Study: Almost 75% of American women who had abortions were pressured. Retrieved from <https://www.lifesitenews.com/news/study-almost-75-of-american-women-having-abortions-were-pressured>

⁶⁵ Religion in America: U.S. Religious Data, Demographics and Statistics. (2015, May 11). Retrieved from <http://www.pewforum.org/religious-landscape-study/state/mississippi/>

⁶⁶ Lipka, M., Wormald, B., Lipka, M., & Wormald, B. (2016, February 29). Most and least religious U.S. states. Retrieved from <http://www.pewresearch.org/fact-tank/2016/02/29/how-religious-is-your-state/?state=alabama>

the national average. Slightly more Mississippians identify as Republican (44%) than Democratic (42%). When asked about political ideology, more Mississippians identify as conservative (45%) as opposed to moderate (30%) or liberal (19%). Mississippi is the most conservative state in the union with 48.9% of its residents identifying as conservative according to 2014 Gallup polling data.⁶⁷ Mississippi's high rate of Republicanism, conservatism, and religiosity is reflected in its opinions on abortion; 59% of Mississippians believe that abortion should be illegal in all or most cases, while 36% percent believe that abortion should be legal in all or most cases. Mississippi's pro-life leanings are further reflected in its low abortion rates; according to the Henry J Kaiser Foundation, Mississippi's abortion rate of 4 abortions per 1000 women aged 15-44 is lower than every U.S. state except South Dakota.⁶⁸ Guttmacher reports a slightly lower abortion rate of 3.8 for Mississippi in 2014.⁶⁹ According to this source, only Idaho, Kentucky, and Missouri have rates as low as Mississippi.

However, not all heavily Republican and Christian states report low abortion rates. Louisiana has a similar percentage of Christians as Mississippi, with 84% of Louisianans identifying as Christian.⁷⁰ However, a much higher percentage of Louisiana's Christians are Catholic (26%). Louisiana also contains significant populations of evangelical Protestants (27%) and historically black Protestants (22%). Louisiana ranks

⁶⁷ Gallup, Inc. (2015, February 06). Mississippi, Alabama and Louisiana Most Conservative States. Retrieved from <https://news.gallup.com/poll/181505/mississippi-alabama-louisiana-conservative-states.aspx>

⁶⁸ Henry J Kaiser Family Foundation, "Rate of Legal Abortions per 1,000 Women Aged 15-44 Years by State of Occurrence" (2015). Retrieved from <https://www.kff.org>

⁶⁹ State Facts About Abortion: Mississippi. (2019, January 04). Retrieved from <https://www.guttmacher.org/fact-sheet/state-facts-about-abortion-mississippi>

⁷⁰ Religion in America: U.S. Religious Data, Demographics and Statistics. (2015, May 11). Retrieved from <http://www.pewforum.org/religious-landscape-study/state/louisiana/>

4th in Pew's listing of the most religious states, with 71% of its adults considered highly religious.⁷¹ Louisiana's party affiliation is similar to Mississippi, with 41% reporting a Republican lean as opposed to a Democratic lean (43%).⁷² Importantly, the percentage of population that reports a Democratic lean is greater than the percentage of the population with a Republican lean. However, even in Mississippi the Republican lean possesses only a slight advantage. When asked about political ideology, a greater percentage of Louisianans identified as conservative (50%) than in Mississippi. Louisiana residents were equally likely to identify as moderates (30%) and less likely to identify as liberal (14%). Louisiana ranked 3rd in Gallup's listing of the most conservative states, with 45.7% of its residents identifying as conservative. Louisiana's high rate of Republicanism, conservatism, and religiosity is reflected in its opinions on abortion; like Mississippi, 59% of its residents believe that abortion should be illegal in all or most cases while 39% percent believe that abortion should be legal in all or most cases.⁷³ However, Louisiana's abortion rate is much higher than Mississippi's. According to the Henry J Kaiser foundation, Louisiana ties with Arizona and Ohio with 10 abortions per 1000 women aged 15-44.⁷⁴ Guttmacher reports a slightly higher rate of 10.8 for

⁷¹ Lipka, M., Wormald, B., Lipka, M., & Wormald, B. (2016, February 29). Most and least religious U.S. states. Retrieved from <http://www.pewresearch.org/fact-tank/2016/02/29/how-religious-is-your-state/?state=alabama>

⁷² Religion in America: U.S. Religious Data, Demographics and Statistics. (2015, May 11). Retrieved from <http://www.pewforum.org/religious-landscape-study/state/louisiana/#social-and-political-views>

⁷³ Religion in America: U.S. Religious Data, Demographics and Statistics. (2015, May 11). Retrieved from <http://www.pewforum.org/religious-landscape-study/state/louisiana/#social-and-political-views>

⁷⁴ Henry J Kaiser Family Foundation, "Rate of Legal Abortions per 1,000 Women Aged 15-44 Years by State of Occurrence" (2015). Retrieved from <https://www.kff.org>

Louisiana.⁷⁵ Despite high religiosity and conservatism, Louisiana has an above average abortion rate.

Conclusion

Public opinion in the United States is in favor of legalizing abortion, but only in certain situations. Religious and conservative states have fewer abortions. Several factors may contribute to this phenomenon, such as the impact of laws restricting abortion access that are prevalent in religious and conservative states, the impact of mothers' personal religious convictions on whether to have an abortion, less pressure from partners to abort, or peer pressure from a majority pro-life community. The pro-life community should try to change public opinion to make further political progress.

⁷⁵ Henry J Kaiser Family Foundation, "Rate of Legal Abortions per 1,000 Women Aged 15-44 Years by State of Occurrence" (2015). Retrieved from <https://www.kff.org>

Chapter 4

The Supreme Court and Abortion

Intro

The goal of the political stream of the pro-life movement is to ban abortion in the United States, a goal that must be achieved through a decision by the Supreme Court. The Supreme Court is not designed to be a political body, but appointments nevertheless tend to be made on a partisan basis. Specifically, prospective justices' positions on abortion are discussed as a major factor in their nomination as Supreme Court nominees are increasingly subjected to partisan debates over their confirmation. Senators and media sources have expressed that much of this politicization hinges on how each new justice's opinion will shift the balance of abortion opinion in the court. Based on official platforms, the Republican Party is anti-abortion and wants to overturn *Roe v. Wade* while the Democratic Party supports abortion rights. However, the Republican party's opposition to abortion has not resulted in its prohibition.

Party Politics and the Supreme Court

The Republican Party has dominated Supreme Court appointments since *Roe v. Wade*. In fact, the Republican Party appointed justices even held a 6-3 majority on the Supreme Court in 1973.⁷⁶ However, five of the six Republican appointments voted with the majority opinion in the 7-2 decision on *Roe v. Wade*. Meanwhile, the two dissenting opinions were split, with one by a Democratic and one by a Republican appointee. The

⁷⁶ Schneider, M. (2016, November 09). *Roe v. Wade* Was Decided By A Republican-Nominated Supreme Court. Retrieved from https://www.huffingtonpost.com/entry/trump-supporters-roe-vs-wade-was-decided-by-a-republican_us_581fbd44e4b044f827a78f87

early lack of correlation between party appointment and justice's political opinions on abortion can be explained by the nature of the court as a non-political entity. In addition, abortion was not as divisive an issue in 1973, so justices were not questioned on their abortion opinions throughout their nomination process. However, organized pro-life efforts to elect pro-life presidents and to reverse the Roe v. Wade decision have failed despite the Republican Party's continued dominance in the Supreme Court.

All four Republican presidents since 1974 have been publicly anti-abortion. Gerald Ford stated during a debate that "I support the Republican platform which calls for a constitutional amendment that would outlaw abortions."⁷⁷ Ronald Reagan called Americans to act during his State of the Union address in 1988 saying "Let us unite as a nation and protect the unborn with legislation that would stop all Federal funding for abortion and with a human life amendment making, of course, an exception where the unborn child threatens the life of the mother."⁷⁸ However, as Governor of California Reagan signed an abortion liberalization bill into law. In 1989 George H.W. Bush ran for president as a pro-life candidate, but his dedication to the cause was often questioned.⁷⁹ George W. Bush also ran for president as a pro-life candidate and officially advocated that abortion "Should be legal only in cases of incest, rape, or when the life of the woman is endangered."⁸⁰

⁷⁷ The Third Carter-Ford Presidential Debate , Oct 22, 1976. Retrieved from <http://www.ontheissues.org/Carter-Ford.htm>

⁷⁸ Pres. Reagan's 1988 State of the Union message to Congress , Jan 25, 1988 Retrieved from http://www.ontheissues.org/Celeb/Ronald_Reagan_Abortion.htm

⁷⁹ Letter from George Bush in All The Best, p.420 , Mar 29, 1989. Retrieved from http://www.ontheissues.org/celeb/George_Bush_Sr__Abortion.htm.

⁸⁰ 1998 National Political Awareness Test , Jul 2, 1998. Retrieved from http://www.ontheissues.org/celeb/george_w__bush_abortion.htm

In 1992, the Republican party held its largest Supreme Court majority in decades with eight of its nine members appointed by a Republican president. However, the *Planned Parenthood v Casey* decision in 1992 still reaffirmed *Roe v. Wade* with a five-justice plurality opinion. In fact, the only Democratic appointee on the 1992 court, Byron White, joined the minority opinion along with Rehnquist, Scalia, and Thomas. This opinion was the most divided on the abortion issue and the closest to overturning *Roe v. Wade*. The court became more favorable to abortion rights with Democratic President Bill Clinton's appointments; Stephen G. Breyer replaced Harry Blackmun in 1994 and Ruth Bayder Ginsburg replaced Byron White in 1993. In 2008, eight justices had been appointed by pro-life Republican presidents and two were appointed by pro-choice Democratic presidents. However, the 8-2 Republican appointed Supreme Court majority did not result in an abortion ban or a repeal of *Roe v. Wade*.

Republican President Donald Trump has already appointed two justices since his election in 2016; Neil Gorsuch replaced Antonin Scalia in 2017 and Brett Kavanaugh replaced Anthony Kennedy in 2018. Neil Gorsuch's appointment did not represent a shift in the court's opinion on abortion, however. Neil Gorsuch replaced Antonin Scalia, who had already written opinions in opposition of *Roe v. Wade*. However, Brett Kavanaugh's appointment represented a potential shift in the court's opinion on abortion since Kavanaugh replaced Anthony Kennedy, who had sided with the plurality to uphold *Roe v. Wade* in the *Planned Parenthood v. Casey* decision.

The United States is held in suspense without enough information on the 2019 court's abortion opinions. Some analysts look to the Supreme Court members' religious affiliation for clues on their opinions on abortion. Five of the nine Supreme Court justices

identify as Roman Catholic and one more, Neil Gorsuch, was raised Catholic although he presently identifies as Episcopalian. Three justices, all appointed by Democrats, identify as Jewish.

Abortion opinions on the court seems to have finally divided on a party line basis. The court is now nearly evenly split with Republicans holding only a 5-4 majority in appointments. Political analysts speculate that Republican appointed Chief Justice John Roberts represents the swing vote opinion on the court.⁸¹ However, in 1990 John Roberts helped author a brief that states that Roe v. Wade “was wrongly decided and should be overruled.”⁸² Analysts also look to Roberts’ wife, a pro-life activist involved with “Feminists for Life,” for clues on the justice’s abortion opinion.

On February 7, 2019, the newly formed Supreme Court made its first decision on abortion. In a 5-4 decision, Chief Justice Roberts sided with Democratic appointees to block a Louisiana law that requires physicians performing abortion to have admitting privileges at a nearby hospital.⁸³ While Roberts granted a temporary stay, the court will again hear discussions on the case in October 2019. Robert’s opinion on the Louisian law seemingly contradicted an earlier 2016 opinion, wherein he voted to uphold a nearly

⁸¹ Scott, D. (2018, July 09). John Roberts is the Supreme Court's new swing vote. Is he going to overturn Roe v. Wade? Retrieved from <https://www.vox.com/policy-and-politics/2018/7/9/17541954/roe-v-wade-supreme-court-john-roberts>

⁸² Scott, D. (2018, July 09). John Roberts is the Supreme Court's new swing vote. Is he going to overturn Roe v. Wade? Retrieved from <https://www.vox.com/policy-and-politics/2018/7/9/17541954/roe-v-wade-supreme-court-john-roberts>

⁸³ Liptak, A. (2019, February 08). Supreme Court Blocks Louisiana Abortion Law. Retrieved from <https://www.nytimes.com/2019/02/07/us/politics/louisiana-abortion-law-supreme-court.html>

identical Texas law.⁸⁴ While Roberts may still side with conservative justices to vote in accordance with pro-life values, Roberts has been inconsistent recently with his voting behavior on abortion.

Newly appointed justice Brett Kavanaugh authored a dissenting opinion joined by Neil Gorsuch, Clarence Thomas, and Samuel Alito in which Kavanaugh supplies an alternative approach. Kavanaugh says that he "would deny the stay without prejudice to the plaintiffs' ability to bring a later as applied complaint and motion for preliminary injunction at the conclusion of the 45-day regulatory transition period."⁸⁵ Analysts describe Kavanaugh's dissenting opinion as a "middle position."⁸⁶ Kavanaugh's opinion on *Roe v. Wade* is yet unknown, but his moderate response to the Louisiana law suggests he may be more moderate than pro-life advocates would prefer.

Based on clues and voting history for each of the present Supreme Court justices, at least four of the nine Supreme Court justices, including Ruth Bayder Ginsburg, Elena Kagan, Sonya Sotomayer, and Stephen Breyer, would certainly vote to uphold *Roe v. Wade* if the issue again came to the Supreme Court. Three justices, Neil Gorsuch, Samuel Alito, and Clarence Thomas would likely vote to reverse *Roe v. Wade*. Of those three, Neil Gorsuch is the least certain. Two justices, Brett Kavanaugh and Chief Justice John

⁸⁴ Liptak, A. (2019, February 08). Supreme Court Blocks Louisiana Abortion Law. Retrieved from <https://www.nytimes.com/2019/02/07/us/politics/louisiana-abortion-law-supreme-court.html>

⁸⁵ Brett Kavanaugh. SUPREME COURT OF THE UNITED STATES JUNE MEDICAL SERVICES, L.L.C., ET AL. v. REBEKAH GEE, SECRETARY, LOUISIANA DEPARTMENT OF HEALTH AND HOSPITALS ON APPLICATION FOR STAY No. 18A774 Decided February 7, 2019

⁸⁶ Liptak, A. (2019, February 08). Supreme Court Blocks Louisiana Abortion Law. Retrieved from <https://www.nytimes.com/2019/02/07/us/politics/louisiana-abortion-law-supreme-court.html>

Roberts, are possible but unlikely supporters of a total reversal of *Roe v. Wade*. Small legislation that chips away at abortion rights in specific cases, such as laws that require admitting privileges at hospitals, are more likely to be upheld under the present composition of the Supreme Court than in previous courts. However, those who stand against *Roe v. Wade* are unlikely to achieve total political victory under the present Supreme Court.

The pro-life movement will have much greater hope for the end of abortion rights in the United States if the Republican party maintains control of the White House. 85-year-old abortion rights supporter Justice Ruth Bayder Ginsburg is largely assumed to be the next Supreme Court Justice to be replaced. If Justice Ginsburg is replaced by a justice who opposes abortion rights, which is most likely under the presidency of Donald Trump or another Republican, the Supreme Court's opinion on abortion may finally be in favor of reversing *Roe v. Wade*.

Despite losing Republican seats, the increased politicization of the Supreme Court in recent years seems to have helped the pro-life movement gain ground in the Supreme Court. There are more Democratic appointees on the Supreme Court in 2019 than in 1973, 1992, or 2008, but there is less support for abortion rights. The Court is now more evenly divided around the abortion issue with more of its Republican appointees remaining faithful to the pro-life and anti-abortion ideals of their nominating president. The increased correlation between party nomination and justice opinions on abortion is likely due to president's increased attention to the political ideology of their nominees. This increased correlation suggests that presidents are now more likely to select nominees based on their opinions on abortion.

Public Opinion's Effect on the Supreme Court

Public opinion helps to explain the hesitancy of Supreme Court justices such as Anthony Kennedy, John Roberts, and Brett Kavanaugh to reverse established precedence on abortion policy. These moderate justices show potential to restrict abortion rights, but often flip to uphold *Roe v. Wade* or other pro-abortion statutes. Justices' inconsistent opinions on abortion likely result from unfavorable public opinion. For instance, conservative justice Anthony Kennedy was the deciding vote when he surprisingly upheld *Roe* in the 1992 *Planned Parenthood v. Casey* decision. Likewise, John Roberts flipped his opinion on abortion from 2016 to 2019 after Roberts became the deciding opinion in 2019. Brett Kavanaugh will likely be placed in the same position in the future. These justices were unwilling to overturn abortion rights if they were the deciding opinion but were willing to dissent if the majority would uphold *Roe v. Wade*. Inconsistent voting habits for swing voters on the Supreme Court is likely a reaction to the inevitable public backlash that would result from public support for *Roe v. Wade*.

Abortion is a social issue, meaning that legislation regulating the issue is heavily affected by public opinion.⁸⁷ In this regard, the abortion issue is like other issues addressed by the federal government in the 20th century like voting rights for women, civil rights for African Americans, and marriage equality for homosexual couples. When any aspect of the Federal government makes laws and decisions about these issues, public opinion is a key factor that policymakers consider.

⁸⁷ Patrick J. Egan, *Public Opinion, the Media, and Social Issues*, from *The Oxford handbook of American public opinion and the media*. Edited by Shapiro, R. Y., & Jacobs, L. R. (2013). Oxford: Oxford University Press.

The Supreme Court should be less affected by public opinion than any other branch of the federal government. It is supposed to be a non-political body that should ignore public opinion entirely. Justices are not supposed to represent any specific constituents. Justices are appointed for life because they are intended to make decisions without the pressures of re-election. However, despite measures intended to reduce the effect of public opinion in Supreme Court decisions there is significant literature that suggests public opinion affects its decisions.

In *The Hollow Hope*, Gerald N. Rosenberg discusses the role of the Supreme Court in key social movements. Throughout his analysis, Rosenberg seeks to answer whether the courts, the Supreme Court in particular, can “bring about social change.” Rosenberg divides his analysis into three parts: “Civil Rights”, “Abortion and Women’s Rights,” and “The Environment, Reapportionment, and Criminal Law.”⁸⁸ Rosenberg finds that in each scenario, the Supreme Court’s decisions are incapable of producing social change by themselves because “Courts depend on political support to produce such reform.”⁸⁹

Rosenberg’s analysis builds on former scholars and confirms that the “Constrained Court” view is the theory to “best capture the capacity of the courts to produce significant social reform.”⁹⁰ The Constrained Court maintains that courts can

⁸⁸ Rosenberg, G. N. (2008). *The hollow hope: Can courts bring about social change?* Chicago: University of Chicago Press. Page vii.

⁸⁹ Rosenberg, G. N. (2008). *The hollow hope: Can courts bring about social change?* Chicago: University of Chicago Press. Page 336.

⁹⁰ Rosenberg, G. N. (2008). *The hollow hope: Can courts bring about social change?* Chicago: University of Chicago Press. Page 336.

never be effective producers of significant social reform because of three constraints.⁹¹

The first constraint is that "The bounded nature of constitutional rights prevents courts from hearing or effectively acting on many significant social reform claims, and lessens the chances of popular mobilization."⁹² The second constraint states that "the judiciary lacks the necessary independence from the other branches of the government to produce significant social reform."⁹³ Third, the "Courts lack the tools to readily develop appropriate policies and implement decisions ordering significant social reform."⁹⁴

Rosenberg's analysis rejects the opposing dynamic court framework, which claims that courts may act as "catalysts" for social change.⁹⁵ Rosenberg applies this framework to his discussion of abortion and concludes that "there is no clear evidence that the growth of women's organizations and the women's movement as a whole were influenced in any important way by the Court."⁹⁶

Based on Rosenberg's analysis, the court system in the United States follows public opinion, and does not determine it. Rosenberg concludes his discussion stating that

⁹¹ Rosenberg, G. N. (2008). *The hollow hope: Can courts bring about social change?* Chicago: University of Chicago Press. Page 9.

⁹² Rosenberg, G. N. (2008). *The hollow hope: Can courts bring about social change?* Chicago: University of Chicago Press. Page 13.

⁹³ Rosenberg, G. N. (2008). *The hollow hope: Can courts bring about social change?* Chicago: University of Chicago Press. Page 15.

⁹⁴ Rosenberg, G. N. (2008). *The hollow hope: Can courts bring about social change?* Chicago: University of Chicago Press. Page 21.

⁹⁵ Rosenberg, G. N. (2008). *The hollow hope: Can courts bring about social change?* Chicago: University of Chicago Press. Page 25.

⁹⁶ Rosenberg, G. N. (2008). *The hollow hope: Can courts bring about social change?* Chicago: University of Chicago Press. Page 246.

“To ask them to produce significant social reform is to forget their history and ignore their constraints.”⁹⁷ In other words, the courts have always reacted to shifts in public opinion, not the other way around. Therefore, the pro-life movement should focus on improving public opinion in opposition to abortion rights before it can have significant hope for overturning *Roe v. Wade*.

⁹⁷ Rosenberg, G. N. (2008). *The hollow hope: Can courts bring about social change?* Chicago: University of Chicago Press. Page 343.

Chapter 5

Poverty and the Cause of Abortion

Intro

There is plenty of data showing that women who are denied access to abortion or who may not even be considering abortion are more likely to fall deeper into a state of poverty or near-poverty after giving birth. Guttmacher data shows that 75% of women who had an abortion in 2014 were designated as poor or low income (below 200% of the federal poverty line), including 49% who had an income below 100% of the federal poverty level.⁹⁸ According to the Turnaway study, 86% of women who were denied an abortion kept their child and only 11% placed the child for adoption⁹⁹. 76% of the women who were denied an abortion but kept their child were placed on government welfare as opposed to only 44% of the women who obtained an abortion. Therefore, if abortion were effectively banned and women carried all pregnancies to term that would have ended in abortion, an additional 32% of women who would otherwise have had an abortion would require government assistance.¹⁰⁰

⁹⁸ Induced Abortion in the United States. (2019, February 14). Retrieved from <https://www.guttmacher.org/fact-sheet/induced-abortion-united-states>

⁹⁹ Newitz, A., & Newitz, A. (2015, December 16). What happens to women denied abortions? This is the first scientific study to find out. Retrieved from <https://io9.gizmodo.com/what-happens-to-women-denied-abortions-this-is-the-fir-5958187>

¹⁰⁰ This calculation simply assumes that 44% of women seeking an abortion will receive government assistance whether they have the abortion or not. Since 76% of women who are denied abortion require some form of government assistance and around 44% of these women would have received government assistance anyway, it reasonably follows that 32% of these women have avoided government assistance by having an abortion.

Low income families do not have enough access to child care.¹⁰¹ While the cost of child care can be debilitating for two-income families, the costs can be devastating for single mothers. A significant portion of women (46%) who had abortions in 2014 “had never been married and were not cohabiting.”¹⁰² This statistic implies that many of the women who had an abortion would have become single parents, relying on one income to meet the needs of herself and her children. Women who are struggling with the costs of child care often feel the pressure to quit if daily wages do not significantly offset the cost of child care.¹⁰³

The correlation between poverty and abortion rates is clear: women seeking an abortion are very often in poverty and in need of help. The pro-life community should not ignore their struggles and must take a proactive stance to alleviate their burdens. We must financially support impoverished single parents and families to save the lives of the unborn.

Child Rearing Associated Costs

The first five years of a child’s life require parents to bear significant burdens, but there are some federal and state programs to help parents manage with these costs. A 2015 USDA study breaks down annual child-rearing related expenditures based on the

¹⁰¹ Un. (n.d.). The Child-Care Crisis. Retrieved from <https://www.parents.com/baby/childcare/child-care-crisis/>

¹⁰² Reasons U.S. Women Have Abortions: Quantitative and Qualitative Perspectives. (2016, December 06). Retrieved from <https://www.guttmacher.org/journals/psrh/2005/reasons-us-women-have-abortions-quantitative-and-qualitative-perspectives>

¹⁰³ Cornfield, J. (2018, July 25). U.S. families increasingly feel the pinch from this one expense. Retrieved from <https://www.cnbc.com/2018/07/24/rising-child-care-costs-put-squeeze-on-family-budgets.html>

region of residence, child's age, parents' marital status, and family income level.¹⁰⁴ The USDA included costs for clothing, child care and education, food, health care, and transportation in their data set. The researchers also allowed for "miscellaneous expenses," which could include "personal care products and services, such as haircuts, toothbrushes, etc.; entertainment, such as portable media players, sports equipment, video games, etc.; and reading materials, such as non-school books, magazines, etc." Finally, the study develops a framework for evaluating housing-related child rearing expenditures, since housing costs are indirectly affected by child-rearing. Since the child is not responsible for all the family's housing, the researchers explain that "the average cost of an additional bedroom approach was used to estimate housing expenses on a child in married-couple and single-parent households."

The study accounts for household income variance by collecting data on three household income groups, defined by "before-tax income under \$59,200, between \$59,200 and \$107,400, and over \$107,400 in 2015 dollars."¹⁰⁵ These three groups were created by dividing married households with children into three equal income groups; single parent households were broken into two groups and compared to their married counterparts, divided by whether their income was below or above \$59,200. For middle income families with two parents, the average cost of a child from birth through 17 years of age was \$233,610.

¹⁰⁴ M. Lino, et al. Expenditures on Children By Families Annual Report 2015. Released 2017. Retrieved from <https://www.cnp.usda.gov/expenditures-children-families-annual-report>

¹⁰⁵ M. Lino, et al. Expenditures on Children By Families Annual Report 2015. Released 2017. Retrieved from <https://www.cnp.usda.gov/expenditures-children-families-annual-report>

The research concluded that household income was directly correlated with child related costs. Households with greater income spent more on their children's upbringing. The researchers concluded that the net expenditure decrease for lower income households was because parents reduced "discretionary" spending and bought less expensive, lower quality goods overall. While lower income families generally spend less per child, lower income families spend a greater percentage of their annual salary on child-rearing expenditures: "On average, households in the lowest income group spent 27 percent of their before-tax income on a child, those in the middle-income group spent 16 percent, and those in the highest group spent 11 percent." Therefore, higher income households have more disposable income after paying child related expenses.

USDA research also considered marital status in their analysis, producing data that suggests, "Child-rearing expenses of single-parent households with a before-tax income less than \$59,200 were about the same as those of married-couple households in the same income group."¹⁰⁶ In addition, a higher percentage of single parent households (83%) fall into this income bracket than married couple households (33%). Single parent households within this income group were found to have an average annual income of \$24,400. The total annual expected cost for raising a child, regardless of marital status, was projected to be between "\$9,330 to \$9,980" for families with income levels below \$59,200. The annual cost increased from between \$12,350 and \$13,900 in homes with incomes from \$59,200 to \$107,400, and further increased to between \$19,380 and \$23,380 when considering households with annual income above \$107,400. These

¹⁰⁶ M. Lino, et al. Expenditures on Children By Families Annual Report 2015. Released 2017. Retrieved from <https://www.cnpp.usda.gov/expenditures-children-families-annual-report>

statistics suggest that poorer families would spend more on child rearing related expenses if they had access to more funds. The USDA does not explain whether the variance is due to quality disparity, but does suggest that the increase in wealthier households' spending is due to increased spending on luxury goods. This research also suggests that families closer to the poverty line within the study's lowest income group of households spend less than families on the higher end of this group.

Children rearing costs vary significantly based on the age of the child, and whether the child was the family's first-born. The USDA projects that for single parent homes with incomes lower than \$59,200 the estimated cost of raising a child from ages birth to age 5 is approximately \$58,000, or about \$11,600 per year. This cost decreases with later children due to the recycling of reusable goods such as cribs and clothing. In addition, parents can take advantage of economies of scale to reduce per capita child rearing costs. The USDA projected cost of each additional child by "taking the age category of the older child and adjusting the total expenses downward by 4 percent."¹⁰⁷

Housing represents the largest child-related expenditure regardless of region, income bracket, child age, marital status, or number of children in the home. Other expenses such as healthcare, child care and education, food, and transportation varied depending on marital status and income level. Food represented the second largest expenditure for lower- and middle-income families, and third largest for the highest income bracket.

¹⁰⁷ M. Lino, et al. Expenditures on Children By Families Annual Report 2015. Released 2017. Retrieved from <https://www.cnpp.usda.gov/expenditures-children-families-annual-report>

The USDA also reports that “Child care and education was the only budgetary component for which many households had zero expenditures.” Presumably, low income families do not have direct child care expenditures because “families may be purchasing less expensive forms of child care or it may be provided by relatives at no cost.” The study cited a 2011 Child Care Census report, which found that “a greater number of lower income families relied on grandparents or other relatives for child care.”¹⁰⁸ However, child care represented a considerable expense for higher income families, such that child-care expenditures amounted to 23% of the highest income bracket’s annual child rearing expenditure. This statistic shows the lack of availability of quality child care opportunities for lower income families, as well as a significant burden that tends to be placed on relatives due to lack of funds.

USDA data shows that “Child care and education expenses were generally highest for a child under age 6. Most of this expense may be attributed to child care prior to full day school.” Typically, children do not enter public school until the age of 5, but parents must still have access to child care before that time. Parents who work, especially single parents, are typically forced to pay out of pocket for child care at least during work hours and for any activity that may require absence from the child. These factors cause child care related expenses to disproportionately affect single parents. Because of the lack of a government-supplied option, child-care related expenditures in single parent families within the lowest income bracket are \$1,940 per year for children ages 0-5, but only \$980 per year for ages 6-8. Single parent households in the highest income bracket spend

¹⁰⁸ US Census Bureau. (2015, October 19). Child Care Arrangements: 2011 - Detailed Tables. Retrieved from <https://www.census.gov/data/tables/2008/demo/2011-tables.html>

\$4,000, or roughly twice the annual amount of their less wealthy counterparts, from ages 0-5 and \$3,150 annually from ages 6-8.

To accurately project child rearing costs for each component of child rearing associated expenditure, we should use the USDA's middle-income cost projections. The lowest tier of household income projections likely artificially reduces the cost per child by taking advantage of cheaper and inferior options. In addition, this study points out the pressing need for access to quality child care, as data shows that low income families often forgo child care or rely on relatives. This lack of availability significantly damages single parents' abilities to fully join the workforce.

Availability of Government Services

The U.S. government has developed a number of programs to assist low-income parents with child-rearing associated costs, which would be more effective if these benefits reached a greater percent of their target populations. Programs include the Earned Income Tax Credit (EITC), Temporary Assistance for Needy Families (TANF), the Supplemental Nutrition Assistance Program (SNAP), Nutrition program for Women, Infants, and Children (WIC), Federal Public Housing Assistance, the Low Income Home Energy Assistance Program (LIHEAP), the Children's Health Insurance Program (CHIP) and Medicaid, Headstart, and child care assistance through the Child Care Development Block Grant. However, many families who qualify for these benefits ultimately do not receive them. Information on these programs is available at the USA.gov website as well as Benefits.gov. Additional information can be found on various state government websites that administer these programs to their state populations. Some program benefits and eligibility vary based on state guidelines.

The Earned Income Tax Credit (EITC) provides tax credits for low to medium income working families, typically with children. The Internal Revenue Service (IRS) publishes qualification standards on their website; access to benefits are limited by income and family size. For example, single individuals must earn less than \$15,010 a year to qualify with no children. Single parents' households can qualify with annual incomes lower than \$39,617 for one child, \$45,007 for two children, or \$48,340 for three children as of 2017.¹⁰⁹ Married parents can qualify with annual incomes lower than \$45,207 with one child, \$50,597 with two children, or \$53,930 with three or more children (IRS.gov). According to the Center on Budget and Policy Priorities, the average EITC benefit was “\$3,176 for a family with children.”¹¹⁰ Unlike other programs, EITC is available to all who qualify. Research conducted by the CBPP also suggests that EITC benefits improve infant and maternal health, improve children's academic performance, increase college attendance rates, increase children's future career earnings, and boost social security benefits.¹¹¹

Temporary Assistance for Needy Families (TANF) is a program designed “to help families recover from temporary difficulties and move forward.”¹¹² Benefit packages and qualification requirements vary by state, but assistance is available for “food, housing,

¹⁰⁹ Internal Revenue Service. Earned Income Credit 2017. Retrieved from <https://www.irs.gov/pub/irs-prior/p596--2017.pdf>

¹¹⁰ Policy Basics: The Earned Income Tax Credit. (2018, April 19). Retrieved from <https://www.cbpp.org/research/federal-tax/policy-basics-the-earned-income-tax-credit>

¹¹¹ EITC and Child Tax Credit Promote Work, Reduce Poverty, and Support Children's Development, Research Finds. (2017, October 11). Retrieved from <https://www.cbpp.org/research/federal-tax/eitc-and-child-tax-credit-promote-work-reduce-poverty-and-support-childrens>

¹¹² Unemployment Help. (n.d.). Retrieved from <https://www.usa.gov/unemployment>

home energy, child care, job training, and more.”¹¹³ For example, the Mississippi Department of Human Services (MDHS) describes the Mississippi State program as a “monthly cash assistance program for poor families with children under age 18.”¹¹⁴ The program also prepares participants for future job opportunities “through employment and training activities provided by the TANF Work Program (TWP).”¹¹⁵ Cooperation with TWP, child support, children immunization standards, and children’s satisfactory school attendance are requirements for receiving benefits. Mississippi TANF benefits are based on family size, or Assistance Unit (AU); maximum income levels per month must not exceed \$542 for a family of two, \$680 for a family of three, \$819 for a family of four, and so on in order to qualify for benefits.¹¹⁶ Maximum benefits for each family are \$110 for the first person in an AU, \$36 for the second, and \$24 for each additional person. According to the Center on Budget and Policy Priorities, the national median TANF benefit is \$450 in July 2018. Several states plan to increase TANF benefits in 2019 due to the falling purchasing power of maximum TANF benefits.¹¹⁷ Mississippi maximum benefits amount to only 0-20% of the poverty line, falling into the lowest of four

¹¹³ Government Benefits. (n.d.). Retrieved from <https://www.usa.gov/benefits>

¹¹⁴ TANF. (n.d.). Retrieved from <http://www.mdhs.ms.gov/economic-assistance/tanf/>

¹¹⁵ Economic Assistance. (n.d.). Retrieved from <http://www.mdhs.ms.gov/economic-assistance/>

¹¹⁶ TANF. (n.d.). Retrieved from <http://www.mdhs.ms.gov/economic-assistance/tanf/>

¹¹⁷ TANF Benefits Remain Low Despite Recent Increases in Some States. (2019, January 22). Retrieved from <https://www.cbpp.org/research/family-income-support/tanf-benefits-remain-low-despite-recent-increases-in-some-states>

categories of benefit amounts relative to other states as categorized by CBPP.¹¹⁸ Only 7% of Mississippi's impoverished families received TANF benefits.¹¹⁹

Supplemental Nutrition Assistance Program (SNAP) is a federal program that works with state agencies to supply food to low income families. Recipients receive funds via an electronic benefits transfer (EBT) card which they can use to buy food at participating stores. SNAP eligibility varies by state and, like most government poverty relief programs, is based on the Federal Poverty Level; families at or below 130% of the poverty level are eligible for SNAP benefits. In July 2018, nearly 39 million people in over 19 million households received nearly 5 billion dollars' worth of benefits, or an average of \$246 per household and \$123 per person.¹²⁰ According to analysis of USDA data by the Center on Budget and Policy Priorities, in 2017 more than 68% of American families that received SNAP benefits had children and more than 44% were in working families.¹²¹ In 2017, SNAP benefits reached 13% of the total population.¹²² In 2017 "537,000 Mississippi residents, or 18% of the state population" received SNAP benefits equal to an average of \$115 per person per month or \$1.26 per meal per person.¹²³

¹¹⁸ TANF in the States. (n.d.). Retrieved from <https://www.cbpp.org/topics/tanf-in-the-states>

¹¹⁹ Wolfe, A. (2018, October 09). 'Food stamps' fraud investigator extorted convenience stores, authorities say. Retrieved from <https://mississippitoday.org/2018/10/08/food-stamps-fraud-investigator-extorted-convenience-stores-authorities-say/>

¹²⁰ Supplemental Nutrition Assistance Program (SNAP). (n.d.). Retrieved from <https://www.fns.usda.gov/pd/supplemental-nutrition-assistance-program-snap>

¹²¹ SNAP Works for America's Children. (2017, October 11). Retrieved from <https://www.cbpp.org/research/food-assistance/snap-works-for-americas-children>

¹²² Center on Budget and Policy Priorities. (n.d.). Retrieved from <https://www.cfpa.net/CalFresh/ExternalPublications/CBPP-SNAPFactSheetCA-2018.pdf>

¹²³ SNAP: State by State Data, Fact Sheets, and Resources. (2018, December 04). Retrieved from <https://www.cbpp.org/research/food-assistance/snap-state-by-state-data-fact-sheets-and-resources>

The Nutrition Program for Women, Infants, and Children (WIC) is a federal program that provides “supplemental foods, nutrition education including breastfeeding promotion and support, referrals, and access to health and social services, at no cost to low-income pregnant, breastfeeding, postpartum women, and to infants and children up to age five who are found to be at nutritional risk” through the USDA.¹²⁴ Eligibility is determined by family income requirements such that a family of one must have a net annual income lower than \$22,459 to qualify; the maximum income level increases by \$7,992 for each additional household member. WIC benefits are not distributed to all individuals who qualify due to funding limitations, so WIC determines which individuals are most needy by selecting individuals with the highest ‘nutritional risk,’ such as “pregnant women, breastfeeding women, and infants.”¹²⁵ Individuals must be determined a nutritional risk by “a health professional or a trained health official.”¹²⁶ In 2017, 7.3 million people received WIC benefits, and among these “3.76 million were children, 1.79 million were infants, and 1.74 million were women.”¹²⁷ WIC reports food cost in 2017 as \$41.23 per participant per month.¹²⁸

¹²⁴ Women, Infants, and Children (WIC). (n.d.). Retrieved from <https://www.fns.usda.gov/wic/women-infants-and-children-wic>

¹²⁵ Women, Infants and Children (WIC). (n.d.). Retrieved from <https://www.fns.usda.gov/wic/frequently-asked-questions-about-wic>

¹²⁶ United States Department of Agriculture. Fact Sheet “The Special Supplemental Nutrition Program for Women, Infants and Children (WIC Program).” Retrieved from <https://fns-prod.azureedge.net/sites/default/files/wic/wic-fact-sheet.pdf>

¹²⁷ Women, Infants and Children (WIC). (n.d.). Retrieved from <https://www.fns.usda.gov/wic/frequently-asked-questions-about-wic>

¹²⁸ Trends in USDA Supplemental Nutrition Assistance Program Participation Rates: Fiscal Year 2010 to Fiscal Year 2015. (n.d.). Retrieved from <https://www.fns.usda.gov/snap/trends-usda-supplemental-nutrition-assistance-program-participation-rates-fiscal-year-2010-fiscal>

Federal Public Housing Assistance includes several programs under the U. S. Department of Housing and Urban Development, such as the Housing Choice Voucher Program, formerly “Section 8,” and public housing. These programs are designed to help low-income people find affordable rental housing.¹²⁹ This benefit can take several forms: it can be provided in the form of a voucher for families to find affordable rental homes from privately owned housing agencies or families can take up residence in a publicly owned housing agency.¹³⁰ Program eligibility is determined by the federal poverty level. Federal rental assistance provided 5 million Americans affordable housing in 2016; 29% of households who benefit from federal rental assistance had children in the home.¹³¹ “In 2014, the federal government provided about \$50 billion in housing assistance specifically designated for low-income households,” and that “assistance has remained relatively stable at about \$50 billion annually.”¹³² HUD housing assistance programs are another example of programs that are unable to reach every qualified applicant due to funding shortages; the Center on Budget and Policy Priorities reports that “For every assisted household in the United States, twice as many low-income households are homeless or pay more than half their income for rent and do not receive any federal rental assistance due to limited funding.”¹³³

¹²⁹ <https://www.usa.gov/finding-home/>

¹³⁰ Find Affordable Rental Housing. (n.d.). Retrieved from <https://www.usa.gov/finding-home/>

¹³¹ Federal Rental Assistance Provides Affordable Homes for Vulnerable People in All Types of Communities. (2017, November 10). Retrieved from <https://www.cbpp.org/research/housing/federal-rental-assistance-provides-affordable-homes-for-vulnerable-people-in-all>

¹³² Federal Housing Assistance for Low-Income Households. (n.d.). Retrieved from <https://www.cbo.gov/publication/50782>

¹³³ Federal Rental Assistance Fact Sheet. (n.d.). Retrieved from <https://www.cbpp.org/sites/default/files/atoms/files/4-13-11hou-US.pdf>

The Low-Income Home Energy Assistance Program (LIHEAP) is designed to “assist eligible low-income households with their heating and cooling energy costs, bill payment assistance, energy crisis assistance, weatherization and energy-related home repairs.”¹³⁴ Qualifications are based on the FPL such that a family of two must have annual income at or below \$24,030, with an increase of \$6,240 for each additional person to a maximum annual income. Applicants automatically qualify for LIHEAP if they already receive SNAP, SSI, or TANF benefits.¹³⁵ However, most qualified applicants will not receive benefits due to lack of government funding. On average, about 20% of households that are qualified for LIHEAP receive benefits; when LIHEAP funds run out for the year, no more benefits can be given until Congress makes more funds available.¹³⁶ Average benefits for those who do receive benefits is around \$1000 a year, but total payout amounts vary heavily from state to state. For instance, maximum energy benefits in Delaware for 2018 are \$1,889 for heat, \$1000 for cooling, and \$5000 for emergency for a grand total of \$7,889 dollars in total possible benefits.¹³⁷ Meanwhile, other states have extremely low maximum benefit amounts, such as Kentucky, which has a total maximum benefit payout of \$250 dollars.¹³⁸ Mississippi’s total maximum benefit payout is \$4,500, \$1,500 allocated for cooling, heating, and crisis situations.

¹³⁴ LIHEAP. (n.d.). Retrieved from <https://www.benefits.gov/benefit/623>

¹³⁵ LIHEAP Frequently Asked Questions for Consumers. (n.d.). Retrieved from <https://www.acf.hhs.gov/ocs/resource/consumer-frequently-asked-questions>

¹³⁶ LIHEAP Frequently Asked Questions for Consumers. (n.d.). Retrieved from <https://www.acf.hhs.gov/ocs/resource/consumer-frequently-asked-questions>

¹³⁷ Benefit Levels for Heating, Cooling and Crisis. (n.d.). Retrieved from <https://liheapch.acf.hhs.gov/tables/benefits.htm>

¹³⁸ Benefit Levels for Heating, Cooling and Crisis. (n.d.). Retrieved from <https://liheapch.acf.hhs.gov/tables/benefits.htm>

The Children's Health Insurance Program (CHIP) according to Medicaid.gov is a “partnership between the federal and state governments that provides low-cost health coverage to children in families that earn too much money to qualify for Medicaid.”¹³⁹ In other words, CHIP helps to fill the gap for low income families who are not quite low enough to qualify for Medicaid benefits. CHIP and Medicaid provide healthcare for an estimated 72.5 million people and is the largest provider of healthcare in the United States.¹⁴⁰ The Affordable Care Act (2010) updated requirements for Medicaid eligibility; under the Affordable Care Act, all adults and children whose annual income is less than 138% of the Federal Poverty Level (FPL) should qualify for Medicaid benefits, but many states have not extended Medicaid to these individuals.¹⁴¹ CHIP benefits vary by state, “but all states provide comprehensive coverage, like routine check-ups, immunizations, doctor visits, and prescriptions.”¹⁴² Basic requirements are that “you must be under 19 or be a primary caregiver with a child under 19, not covered by health insurance (including Medicaid), and a U.S. national, citizen, legal alien, or permanent resident.”¹⁴³ In some states, CHIP will also cover women who are pregnant.¹⁴⁴ Family qualification varies based on the FPL but in almost every state, children in families with income up to 200

¹³⁹ Eligibility. (n.d.). Retrieved from <https://www.medicaid.gov/medicaid/eligibility/>

¹⁴⁰ Eligibility. (n.d.). Retrieved from <https://www.medicaid.gov/medicaid/eligibility/>

¹⁴¹ How Medicaid Health Care Expansion Affects You. (n.d.). Retrieved from <https://www.healthcare.gov/medicaid-chip/medicaid-expansion-and-you/>

¹⁴² Children's Health Insurance Program Description. (n.d.) Retrieved from <https://www.benefits.gov/benefit/1001>

¹⁴³ Children's Health Insurance Program Description. (n.d.) Retrieved from <https://www.benefits.gov/benefit/1001>

¹⁴⁴ Published: Mar 31, 2. (2019, April 01). Where Are States Today? Medicaid and CHIP Eligibility Levels for Children, Pregnant Women, and Adults. Retrieved from <https://www.kff.org/medicaid/fact-sheet/where-are-states-today-medicaid-and-chip/>

percent of the federal poverty level are covered.¹⁴⁵ Qualifications also vary based on children's age; for example, Mississippi covers children age 0-1 if family income is at 194% of the poverty level, but only those at or below 143% of the FPL for ages 1-5, and only those at or below 133% of the poverty rate for children aged 6-18 years old.¹⁴⁶ Medicaid benefits are provided free of premium charges, and "Certain vulnerable groups, such as children and pregnant women, are exempt from most out of pocket costs and copayments and coinsurance cannot be charged for certain services."¹⁴⁷

Headstart is a federal program administered by the Department of Health and Human Services "that promotes the school readiness of children from birth to age five from low-income families by enhancing their cognitive, social, and emotional development."¹⁴⁸ Headstart programs offer preschool educational services as well as nutritional and health support. Some Headstart programs also include Early Headstart (EHS), which focuses on infants and toddlers under the age of 3, and pregnant women under the poverty line.¹⁴⁹ Children in families under 130% of the poverty line qualify for Headstart; however, many children who fit this category do not receive benefits. Headstart serves 35% of children in

¹⁴⁵ Federal Poverty Guidelines. (2018, July 25). Retrieved from <https://familiesusa.org/product/federal-poverty-guidelines>

¹⁴⁶ Medicaid, Children's Health Insurance Program, & Basic Health Program Eligibility Levels. (n.d.). Retrieved from <https://www.medicaid.gov/medicaid/program-information/medicaid-and-chip-eligibility-levels/index.html>

¹⁴⁷ Out-of-Pocket Cost Exemptions. (n.d.). Retrieved from <https://www.medicaid.gov/medicaid/cost-sharing/cost-share-exemp/index.html>

¹⁴⁸ Head Start and Early Head Start(n.d.). Retrieved from <https://www.benefits.gov/benefit/616>

¹⁴⁹ Policy and Program Guidance for the Early Head Start-Child Care Partnerships (EHS-CCP). (2019, February 04). Retrieved from <https://eclkc.ohs.acf.hhs.gov/policy/im/acf-im-hs-15-03-attachment>

families with annual incomes between 100% and 130% of the Federal poverty line.¹⁵⁰ The Headstart program cost the federal government \$9.2 billion in 2017, including administrative costs.¹⁵¹ \$8.9 billion was provided to the states for Headstart programs with a net total enrollment of 899,374 children.¹⁵² Of these programs, “thirty-three percent of grantees operated Head Start preschool services only, twenty-five percent of grantees operated Early Head Start (EHS) services only, and forty-two percent of grantees operated both Head Start and Early Head Start services.”¹⁵³

The Child Care Development Block Grant (CCDB) is a federal grant given to the states for the purposes of supplying low income households with child care subsidies.¹⁵⁴ Congress passed the grant in 2014, which "reauthorized the expense of the Child Care and Development Fund (CCDF) for the first time since 1996."¹⁵⁵ According to the National Head Start Association, the Child Care and Development Fund (CCDF) is designed to "assist low-income families with child-care costs so that they can work or

¹⁵⁰ Head Start and Early Head Start(n.d.). Retrieved from <https://www.benefits.gov/benefit/616>

¹⁵¹ Head Start Program Facts: Fiscal Year 2017. (2018, December 04). Retrieved from <https://eclkc.ohs.acf.hhs.gov/about-us/article/head-start-program-facts-fiscal-year-2017>

¹⁵² Head Start Program Facts: Fiscal Year 2017. (2018, December 04). Retrieved from <https://eclkc.ohs.acf.hhs.gov/about-us/article/head-start-program-facts-fiscal-year-2017>

¹⁵³ Head Start Program Facts: Fiscal Year 2017. (2018, December 04). Retrieved from <https://eclkc.ohs.acf.hhs.gov/about-us/article/head-start-program-facts-fiscal-year-2017>

¹⁵⁴ Child Care Development Block Grant. (2015, September 09). Retrieved from <https://nhsa.org/child-care-development-block-grant>

¹⁵⁵ Early Childhood State Plan. (n.d.). Retrieved from <https://secac.ms.gov/child-care-development-fund-state-plan/>

prepare to work.”¹⁵⁶ Families are expected to pay a co-pay based on their income level. In 2016, the CCDF assisted 1.4 million children in 850,000 low-income working families per month. CCDF subsidies helped pay for child care at 340,000 facilities in 2015.¹⁵⁷ Around one-fourth of these facilities were child care centers and the remaining were home based providers.¹⁵⁸ Eligibility, licensing requirements, and quality ratings are determined at the state level, allowing states greater flexibility for developing programs than Headstart.¹⁵⁹ In Mississippi, subsidies are distributed to families based on family income. Poorer families receive more aid and maximum income eligibility is limited to families under 85% of the state median income. In 2018, the range of maximum eligibility was \$35,000 to \$35,999.¹⁶⁰ The Mississippi Department of Human Services (MDHS) publishes a sliding fee schedule of co-pay amounts based on household income. In 2016, Mississippi CCDF benefits reached 18,000 children in 10,100 families. Of these families, 48% qualify for CCDF subsidies without co-pays.¹⁶¹

¹⁵⁶ Child Care Development Block Grant. (2015, September 09). Retrieved from <https://nhsa.org/child-care-development-block-grant>

¹⁵⁷ Child Care and Development Fund Final Rule Frequently Asked Questions. (n.d.). Retrieved from <https://www.acf.hhs.gov/occ/resource/ccdf-final-rule-faq>

¹⁵⁸ Child Care and Development Fund Final Rule Frequently Asked Questions. (n.d.). Retrieved from <https://www.acf.hhs.gov/occ/resource/ccdf-final-rule-faq>

¹⁵⁹ Child Care Development Block Grant. (2015, September 09). Retrieved from <https://nhsa.org/child-care-development-block-grant>

¹⁶⁰ MDHS Sliding fee schedule, 2019. Retrieved from <http://www.mdhs.ms.gov/wp-content/uploads/2018/08/Copay-Table-Update.pdf>

¹⁶¹ FY 2016 Preliminary Data Table 17 - Average Monthly Mean Family Co-payment as a Percent of Family Income. (n.d.). Retrieved from <https://www.acf.hhs.gov/occ/resource/fy-2016-preliminary-data-table-17>

These programs are insufficient because they reach only a fraction of the families in need of assistance. According to the National Center for Children in Poverty, “families need an income of about twice the federal poverty threshold to meet their most basic needs.”¹⁶² In Mississippi, 56% of children fall below 200% of the FPL, as opposed to 41% of children nationwide. 135,899 Mississippi children are under age 6 and belong to families under 200% of the FPL.¹⁶³ There are around 23 million kids below age 6 in the United States. Of those children, around 5 million are below the poverty line and another 5 million are under 200% of the federal poverty line for a total of around 10 million poor or low-income children under age 6. The CCDB reaches only 1.4 million of these children every month. Head Start reaches around 900,000 children nationwide. Child care access needs to be dramatically expanded to include all families within 200% of the FPL.

Crisis Pregnancy Centers

Some communities have established non-profits known as “Crisis Pregnancy Centers” that devote resources to reducing financial burdens on abortion-prone populations. These organizations often target low-income women and expend resources to meet women's material needs¹⁶⁴. However, Crisis Pregnancy Centers (CPC’s) do not generally provide child care services.

Laura Hussey addresses conflict within the pro-life community in her research entitled “Crisis Pregnancy Centers, Poverty, and the Expanding Frontiers of American

¹⁶² Demographics. (n.d.). Retrieved from http://www.nccp.org/profiles/MS_profile_6.html

¹⁶³ Demographics. (n.d.). Retrieved from http://www.nccp.org/profiles/MS_profile_6.html

¹⁶⁴ Hussey, L. S. (2013). Crisis Pregnancy Centers, Poverty, and the Expanding Frontiers of American Abortion Politics. *Politics & Policy*, 41(6), 985–1011. <https://doi-org.umiss.idm.oclc.org/10.1111/polp.12054>

Abortion Politics.”¹⁶⁵ According to Hussey, there are four different streams with the pro-life community. The political streams presented by Hussey are connected and complimentary, and different aspects of the pro-life community can work together to accomplish the goal of ending abortion. However, there is very little coordination and central leadership between each crisis pregnancy organization or within the various streams of the movement. Hussey describes these four aspects of the movement within the United States stating that “The American pro-life movement, like many other social movements, lacks central leadership. Activists have sorted themselves into four distinct, independent “streams,” defined by their ideas about the most effective way to end abortion. The political stream focuses on elections and legislation. The direct-action stream aims to reduce abortion supply, while the public education stream works to move opinion on abortion. The individual outreach stream, where pregnancy centers are the key institution, addresses abortion demand through relationships with pregnant women. Interaction across streams is minimal, and activists frequently criticize others’ tactics”

According to Hussey’s research, support for social welfare minded and poverty reduction focused anti-abortion policy and activism is dependent on the acknowledgement of women’s struggles as a principle cause of abortion¹⁶⁶. From a political standpoint, more liberal pro-life activists characterize their mission and their organization as focusing on the lives of the women who are pregnant, rather than just the child. The CPC leaders Hussey interviewed characterized the women they served as

¹⁶⁵ Hussey, L. S. (2013). Crisis Pregnancy Centers, Poverty, and the Expanding Frontiers of American Abortion Politics. *Politics & Policy*, 41(6), 985–1011. <https://doi-org.umiss.idm.oclc.org/10.1111/polp.12054>

¹⁶⁶ Hussey, L. S. (2013). Crisis Pregnancy Centers, Poverty, and the Expanding Frontiers of American Abortion Politics. *Politics & Policy*, 41(6), 985–1011. <https://doi-org.umiss.idm.oclc.org/10.1111/polp.12054>

“unintentionally pregnant women” who feel pressured by others and her own financial circumstances, in a cultural context “that places great value on expediency and little value on human life.”¹⁶⁷

Hussey’s discussion of the pro-life movement’s increased focus on crisis pregnancy centers illustrates the ongoing debate between the more conservative and liberal sides of the pro-life movement. Crisis pregnancy centers are responding to the dominant “male-led, fetus-centric perspective of the pro-life movement” by implementing a more female led, women centric approach to pro-life activism.¹⁶⁸ Hussey recognizes that “these developments (increases in CPCs) potentially cross-pressure some pro-life activists, many of whom are not conservative on social welfare and other issues.”¹⁶⁹

Crisis pregnancy centers are poorly understood, and the literature associated with their work is limited. However, crisis pregnancy centers are indicative of an existing movement within the pro-life community focused on poverty reduction to decrease the rate of abortions. The mainstream pro-life movement should highlight the causes of abortion and work to alleviate circumstances that lead to abortion through the work of crisis pregnancy centers and other non-profits.

¹⁶⁷ Shaughnessy, B. (n.d.). About Heartbeat International. Retrieved from <https://www.heartbeatinternational.org/about-us/commitment-of-care/item/28-welcome-to-heartbeat>

¹⁶⁸ Hussey, L. S. (2013). Crisis Pregnancy Centers, Poverty, and the Expanding Frontiers of American Abortion Politics. *Politics & Policy*, 41(6), 985–1011. <https://doi-org.umiss.idm.oclc.org/10.1111/polp.12054>

¹⁶⁹ Hussey, L. S. (2013). Crisis Pregnancy Centers, Poverty, and the Expanding Frontiers of American Abortion Politics. *Politics & Policy*, 41(6), 985–1011. <https://doi-org.umiss.idm.oclc.org/10.1111/polp.12054>

Chapter 6

Proposals

Intro

This thesis has discussed the efforts to end abortion using an economic framework. From an economic perspective, abortion is a service. The goal of the pro-life movement is to destroy the market for abortion services. Based on a supply and demand theory of economics, any pro-life strategy to destroy the market for abortion falls into one of two categories. The pro-life movement can attempt to limit the supply of abortion through a variety of methods or the pro-life movement can attempt to reduce the demand for abortion by addressing the principal causes of abortion. The pro-life movement has been struggling to ban abortion since 1973. Along with continued efforts to restrict abortion, I suggest that the pro-life movement should employ two demand-side strategies: 1) increasing the social safety net provided by the government and 2) establishing a new form of pro-life non-profit that will supply free child care services.

Until now, the pro-life movement has been focused almost exclusively on limiting the supply of abortion services. These efforts have mainly consisted of campaigns to enforce restrictions or complete abortion bans. The pro-life movement has failed to enact an abortion ban and has had minimal success in imposing meaningful restrictions. Other supply-sided efforts have included more direct action such as the organized harassment of abortionists. Fringe groups have tarnished the reputation of the pro-life movement by engaging in acts of domestic terrorism, which have been condemned by mainstream pro-life movement. Supply-sided anti-abortion activism has yielded insufficient results. Public support has not been in favor of strict anti-abortion laws at any point since Roe v

Wade. While stricter abortion laws would help reduce the number of abortions that occur, there would be an illegal market of unknown size for abortions even if abortion were banned entirely.

The pro-life movement should increase its focus on reducing demand for abortion by addressing the reasons women choose abortion. Poverty is the leading cause of abortion. Most women who choose abortion make the choice based on financial concerns. Poverty statistics support this explanation as most women who have an abortion are low income, with household incomes under 200% of the FPL. Raising a child represents a significant financial burden on families. Low income single women and families who keep their child are at greater risk of falling into cyclical poverty and relying on government assistance. Government programs designed to relieve poverty in low income communities are insufficient and fail to reach the entire targeted population. The pro-life movement should encourage local, state, and federal governments to fully fund these programs to increase the number of households that receive aid.

It would cost billions, if not trillions, of dollars to lift all households above 200% of the FPL. The federal government already spends 1.03 trillion dollars across 83 welfare programs a year according to most recent available data from 2011. Expanding the federal welfare budget to this extent would be equivalent to a universal basic income. The viability of this program is already being discussed; for instance, according to projections by Bridgewater Associates' data, universal basic income up to \$12,000, or 100% of the

federal poverty line, would cost the federal government 3.8 trillion per year.¹⁷⁰ It is unlikely that these measures could be passed given the present political climate, but recent polling conducted by Northeastern University found that 48% of Americans support universal basic income.¹⁷¹

According to economic “failure theories” on the roles of non-profits, non-profit organization function as “gap fillers” as they “fill in the gaps left by market failure and government failure.” (Worth, pg. 57, 2018).¹⁷² Michael J. Worth explains in his textbook *Non-Profit Management* (5th Edition) that “sometimes government is simply too constrained by its size and complexity” to meet the needs of communities (Worth, pg. 58, 2018). In this context, the government fails to fully provide the resources that welfare programs are designed to cover. The government does not have the resources to provide poverty relief to all individuals who are meant to be targeted by these programs, leaving a gap in our communities that non-profits must fill through poverty relief. Non-profits can reduce the rate of abortion in the United States by providing services to women with financial situations that place them at high risk of choosing abortion. Non-profits focused on assisting in child-care related areas are a straightforward way that the pro-life community can decrease the occurrence of abortion.

Life Support

¹⁷⁰ Kim, T. (2018, July 12). Universal basic income would cost the US up to \$3.8 trillion per year - Bridgewater estimate. Retrieved from <https://www.cnbc.com/2018/07/12/ray-dalio-addresses-benefits-pitfalls-of-universal-basic-income.html>

¹⁷¹ Nova, A. (2018, February 28). Cash for all: Support mounts for universal basic income programs. Retrieved from <https://www.cnbc.com/2018/02/26/roughly-half-of-americans-now-support-universal-basic-income.html>

¹⁷² Worth, Michael J. (2018). *Non-Profit Management: Principles and Practice*. The George Washington University, USA. Pages 57-58.

"Life Support" is the tentative name for a proposed pro-life non-profit organization. The mission of Life Support is to reduce instances of abortion by identifying the conditions in which abortion is most likely to occur and addressing these causes through services, charitable giving, and a dedication to providing opportunity to the most affected communities. Life Support is officially for laws restricting abortion, but would not function as a legislative action campaign. The sole purpose of Life Support would be to address the circumstances that are most likely to cause abortion. Life Support would provide a myriad of benefits, such as free child care, help covering medical costs of childbirth and pregnancy, allocating donated resources, helping families find suitable housing and cover rent, helping new or expecting parents cover the cost of education, and helping to facilitate adoptions.

In order to provide many of these services, a substantial workforce would be needed. As in many cases, these workers may be on a volunteer basis. However, Life Support would further accomplish its mission by providing employment opportunities to mothers considering abortion. Employees would be given a living wage with benefits.

Life Support would compete with other non-profits for traditional funding sources, such as federal and state grants as well as private donations. Local churches are likely to support Life Support's mission given its pro-life mission. However, Life Support would avoid direct affiliation with specific churches and denominations in the interest of remaining a secular institution. Life Support's only purpose is to reduce abortion, and should avoid mission drift that results in the promotion of religious ideology.

Given high competition and lack of funding, it is unlikely that Life Support will have sufficient financial support to accomplish all of these goals. Therefore, Life Support

should focus its efforts on supplying free child care. Life Support would establish a presence in communities with high abortion rates. Life Support can then study the effects of free child care on the abortion rate in these communities. Since Life Support would not have the funds necessary to provide universal child care vouchers, it would need to be selective. In order to reduce the instance of abortion as much as possible, applications could be turned in to receive benefits from the organization, which would be considered and chosen by a team.

Child care centers Self-Help.org says that the costs to start a childcare center if you're taking over an existing facility can run at least \$55,000 in renovation costs. They also reveal that supplies and equipment can cost over \$60 per child. According to Self-Help.org, educational supplies and equipment can total over \$4,700. Other expenses include marketing costs, furniture and administrative expenses; Self-Help averaged the total costs for a start-up childcare center to be \$95,485.¹⁷³ Regulations vary from state to state. Mississippi state regulations on child care providers stipulate that facilities should provide 25 sq. ft. per child.¹⁷⁴ Child care facilities in Mississippi must also have a student-faculty ratio of at most 20:1.¹⁷⁵ More faculty are required for younger age brackets. Faculty are typically paid an average of \$38,000.

¹⁷³ Huntington, M. (2017, August 19). The Average Start-Up Cost for a Childcare Center. Retrieved from <http://smallbusiness.chron.com/average-startup-cost-childcare-center-16097.html>

¹⁷⁴ Mississippi State Department of Health. (n.d.). Child Care and Youth Camps Regulations and Guidelines. Retrieved from https://msdh.ms.gov/msdhsite/_static/30,0,183,225.html

¹⁷⁵ Mississippi State Department of Health. (n.d.). Child Care and Youth Camps Regulations and Guidelines. Retrieved from https://msdh.ms.gov/msdhsite/_static/30,0,183,225.html

Non-profits, like my proposed “Life Support,” would acknowledge the role of poverty as the principal cause of abortion by addressing women’s lack of access to child care. Life Support would provide free child care services to families under 200% of the FPL selected by application. Providing free child care services to poverty afflicted communities would help further decrease the rate of abortions through the same framework employed by Crisis Pregnancy Centers. CPCs demonstrate the willingness of some members within the pro-life movement to provide a social safety net, typically associated with the political left and the Democratic party, to accomplish the goal of ending abortion, which is a stated goal of the Republican party. Life Support hopes to start a movement compatible with the ideological framework expressed by leaders of CPCs and operate within the “individual outreach” stream. Life Support will show that, by approaching the issue from a place of compassion and understanding for the women’s position, organizations can directly reduce abortions through a blend of conservative and liberal values.

Conclusion

Efforts to reduce both the abortion supply and demand are insufficient by themselves. The pro-life movement should continue its efforts to ban and restrict abortion, but these efforts will fail to end abortion because there will still be an illegal market for abortion. The pro-life movement should also confront poverty and provide aid for low income families most at risk for abortion, but these efforts will also fail to end abortion entirely. To limit the number of abortions that occur in the United States as much as possible, the pro-life movement should concentrate its efforts on eliminating both the supply and demand for abortion.

