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CONGRESSIONAL CANDIDATE QUESTIONNAIRE, FEBRUARY 2010

ABORTION

The National Right to Life Committee (NRLC) believes that unborn children should be protected by law, and that abortion should be permitted only when necessary to prevent the death of the mother. Under what circumstances, if any, do you believe that abortion should be legal?

(a) Only to prevent the death of the mother (the NRLC position).

(b) To prevent the mother's death, in cases of incest committed against a minor, and in reported cases of forcible rape.

(c) Other (please explain): _____

For your information: In every question below, a "yes" response indicates agreement with the position of NRLC.

ROE V. WADE

In its 1973 rulings in *Roe v. Wade* and *Doe v. Bolton*, the U.S. Supreme Court created a "right to abortion" for any reason until "viability" (into the sixth month), and for any "health" reasons -- including "emotional" health -- even during the final three months of pregnancy. These rulings invalidated the abortion laws that were in effect in all 50 states at the time. In the 1992 ruling of *Casey v. Planned Parenthood*, the Supreme Court reaffirmed the "core holdings" of *Roe v. Wade*, but adopted a new standard of review under which any restriction deemed to be an "undue burden" on access to abortion would be struck down.

(1) Do you support the reversal of the *Roe v. Wade* and *Doe v. Bolton* decisions, so that elected legislative bodies may once again protect unborn children by limiting or prohibiting abortion?

YES NO

"FREEDOM OF CHOICE ACT" (FOCA)

Pro-abortion members of Congress, and President Barack Obama, have proposed federal legislation called the "Freedom of Choice Act" (FOCA). As introduced in past congresses, this legislation would invalidate virtually all state and federal laws limiting abortion, including the federal Partial-Birth Abortion Ban Act and state laws requiring waiting periods or parental notification.

(2) Would you vote against the "Freedom of Choice Act" or any other proposed federal laws that would limit the authority of legislatures to restrict abortion?

YES NO

THE PAIN OF UNBORN BABIES

There is now overwhelming scientific evidence that abortion methods used by the fifth month (and perhaps earlier) such as the "dilation and evacuation" (dismemberment) method, and the partial-birth abortion method, cause excruciating pain to the unborn child.

(3) Would you support legislation to strictly limit abortion at least from the point in development that evidence suggests an unborn child has the capacity to experience pain?

YES NO

ULTRASOUND INFORMED CONSENT

Many women who undergo abortions later regret that they were not given full information about their unborn child beforehand.

(4) Would you support federal legislation, such as the Ultrasound Informed Consent Act (H.R. 649 in the 111th Congress) to require that before an abortion is performed, the abortionist must perform an ultrasound and display the ultrasound images for the mother, so that she may view the images?

YES NO

PROTECTION OF HUMAN EMBRYOS BAN ON HUMAN CLONING

The right to life of human beings must be respected at every stage of their biological development. Human individuals who are at the embryonic stage of development should not be used for harmful or lethal medical experimentation. This applies equally to human beings whether their lives were begun by in vitro fertilization, by somatic cell nuclear transfer (human cloning), or by some other laboratory technique. NRLC opposes harvesting stem cells from living human embryos, since this kills the embryos.

Note: NRLC is NOT opposed to other research on stem cells that are obtained without killing embryos -- for example, stem cells harvested from umbilical cord blood and from adult tissue.

(5) Will you vote for measures to protect living human embryos from being used for medical experiments that would harm or kill them, including so-called "embryonic stem cell research" that would require the killing of human embryos, regardless of the method used to create these human embryos?

YES NO

Human cloning is a process (technically known as "somatic cell nuclear transfer") in which genetic material from one person is artificially transferred into a human or animal egg cell, thereby beginning the life of a new human individual who has only one parent and who is genetically nearly identical to that parent. NRLC believes that human life at every stage of biological development is deserving of respect and protection regardless of the circumstances under which that human life was created.

It has been proposed to create human life through cloning for the purpose of destructive experiments on those humans, resulting in their deaths, a process sometimes referred to as "therapeutic cloning." In Congress, the Stupak-Wamp Human Cloning Prohibition Act (111th Congress, H.R. 1050) would prohibit the use of somatic cell nuclear transfer (cloning) to create any humans, including human embryos.

(6) Would you support a legal prohibition on all human cloning (i.e. the creation of human embryos by cloning), along the lines of the Stupak-Wamp Human Cloning Prohibition Act (H.R. 1050)?

YES NO

As an alternative to a genuine ban on all human cloning, some members of Congress have proposed legislation that would permit the use of cloning to create human embryos to be used in medical research (so-called "therapeutic cloning"), but make it unlawful to implant such an embryo into a uterus. These bills are sometimes misleadingly referred to as "bans on reproductive cloning," but they really do not ban human cloning at all – rather, they ban the survival of human clones. Such a bill would impose a legal mandate that every human clone must be killed or allowed to die.

NRLC strongly opposes such "clone and kill" legislation. One example of such a bill was H.R. 2560 (110th Congress), which was defeated by the House of Representatives on June 6, 2007 (House roll call no. 439).

(7) Would you oppose "clone-and-kill" legislation (i.e. legislation that would permit the creation of human embryos by cloning but prohibit allowing such human clones to live past a defined point of development)?

YES NO

ABORTION FUNDING

The "Hyde Amendment" prohibits federal Medicaid money from being used to pay for abortions or for health care plans that include abortion, except to save the life of the mother, or in cases of rape or incest. Because the Hyde Amendment is attached to the annual appropriations bill for the Department of Health and Human Services, it is currently necessary for Congress to renew it every year. If this annual renewal was ever blocked, the federal Medicaid program would revert to a policy of paying for abortion on demand.

(8) Would you vote to renew the current Hyde Amendment policy without weakening amendments?

YES NO

(9) Would you vote for legislation to make the current Hyde Amendment policy permanent, so that it would no longer be necessary for Congress to renew it every year?

YES NO

The District of Columbia is a federal jurisdiction. Article I of the Constitution provides that Congress has complete legislative authority over the District, and Congress approves the entire District budget in an annual appropriations bill. In December 2009, at the urging of President Obama, Congress approved an appropriations bill that contained a clause that effectively repealed a longstanding ban on government funding of abortions in the District.

(10) Would you vote for legislation that would restore the previous pro-life policy, under which any government funding of abortions in the District would be prohibited, except to save the life of the mother, or in cases of rape or incest?

YES NO

On February 26, 2008, during consideration of legislation to reauthorize and recodify all federally funded Indian health programs, the U.S. Senate adopted an amendment to permanently prohibit these programs from providing abortions, except to prevent the death of the mother, or in cases of rape and incest (Vitter Amendment to S. 1200). However, that bill died without action in the House.

(11) Would you vote for legislation to permanently prohibit the providing of elective abortions in federally funded Indian health programs?

YES NO

Longstanding federal law prohibits performance of abortions at U.S. military facilities, even if privately funded (except to save the life of the mother, or in cases of rape or incest).

(12) Would you vote against any attempt to weaken or repeal this pro-life policy?

YES NO

Title X ("Title 10") of the Public Health Service Act provides more than \$300 million annually for grants to state and private entities for "family planning" programs. Although federal law does not permit such funds to be used directly to pay for abortions, large amounts of Title X funding go to organizations (such as Planned Parenthood) that operate abortion clinics.

(13) Would you support legislation to make organizations that operate abortion clinics (not bona fide hospitals) ineligible for Title X funding, along the lines of H.R. 614 (111th Congress), the Title X Abortion Provider Prohibition Act?

YES NO

ABORTION IN HEALTH INSURANCE

During the 111th Congress, President Obama and some key Democrats in Congress have pushed for enactment of health care restructuring legislation that would have resulted in direct federal funding of abortion, federal subsidies for private insurance plans that cover abortion, and federal regulatory mandates to expand access to abortion, among other pro-abortion provisions. However, on November 7, 2009, the House of Representatives, by a bipartisan vote of 240-194, adopted the Stupak-Pitts Amendment, which removed the pro-abortion provisions from one major version of the health care legislation.

(14) With respect to any health care restructuring legislation, would you vote for language, along the lines of the Stupak-Pitts Amendment, that would cover all provisions of the legislation with strong prohibitions on federal subsidies for abortion and insurance plans that cover abortion, and strong guarantees against federal pro-abortion regulatory mandates, on a permanent basis (i.e. without requiring that Congress renew the pro-life restrictions on an annual basis)?

YES NO

(15) Would you oppose any "health care reform" bill that does NOT contain language, along the lines of the Stupak-Pitts Amendment, that would cover all provisions of the legislation with strong prohibitions on federal subsidies for abortion and for insurance plans that cover abortion, and guarantees against federal pro-abortion regulatory mandates, on a permanent basis?

YES NO

FOREIGN AID FOR ABORTION

The U.S. spends roughly \$650 million annually for birth-control programs overseas. Under President Reagan, George H.W. Bush, and George W. Bush, executive orders collectively referred to as the "Mexico City Policy" established that in order to be eligible for U.S. population-control funds, a private overseas organization must agree not to perform abortions (except to save the life of the mother, or in cases of rape or incest) or to "actively promote abortion as a method of family planning." However, in January 2009, President Obama overturned this pro-life policy by executive order.

(16) Would you support legislation to reinstate the Mexico City Policy, and would you oppose any legislation that would prohibit a future president from reinstating the policy by executive order?

YES NO

PARENTAL NOTIFICATION/CONSENT FOR MINORS' ABORTIONS

Laws are already in effect in about half the states that require notification or consent of at least one parent (or authorization by a judge) before an abortion can be performed on a minor.

However, these laws are often circumvented by minors who cross state lines in order to evade parental notification requirements (often with the aid of older boyfriends, abortion clinic staff, or other adults lacking parental authority). The Child Interstate Abortion Notification Act (CIANA) (H.R. 634 in the 111th Congress) would require any abortionist, encountering a minor client from another state, to notify one parent before performing an abortion, unless presented with authorization from a court, or in cases of life endangerment, or in cases of sexual or physical abuse or neglect by a parent, in which case the appropriate state agency must be notified instead of a parent. The bill would also make it an offense to transport a minor across state lines to evade a parental involvement requirement.

(17) Would you vote for the Child Interstate Abortion Notification Act, and oppose weakening amendments?

YES NO

"EQUAL RIGHTS AMENDMENT" (ERA)

The proposed "Equal Rights Amendment" (also called the "Women's Equality Amendment") (H.J. Res. 61 in the 111th Congress) would amend the federal Constitution to invalidate any law or government policy that discriminates "on account of sex." In some of the states that have already added similar provisions to their state constitutions, courts have used them to invalidate limits on abortion. For example, the New Mexico Supreme Court in 1998 unanimously ruled that the New Mexico ERA required state funding of abortion.

NRLC opposes the federal ERA unless this "abortion neutral" amendment is added to ensure that the ERA will not change abortion policy in either direction: "Nothing in this article [the ERA] shall be construed to grant, secure, or deny any right relating to abortion or the funding thereof."

(18) Would you vote against the proposed federal ERA, if it does not contain this "abortion-neutralization" amendment?

YES NO

EUTHANASIA ISSUES

From its inception, the pro-life movement has been as dedicated to protecting people with disabilities and older people from euthanasia as it has been to protecting unborn children from abortion.

INVOLUNTARY EUTHANASIA

Some hospitals have implemented formal policies authorizing denial of lifesaving medical treatment against the will of a patient or the patient's family if an ethics committee thinks the patient's so-called "quality of life" is unacceptable, even though the patient and family disagree. The federal Patient Self-Determination Act currently requires health care facilities receiving Medicare or Medicaid to ask patients on admission whether they have an advance directive indicating their desire to receive or refuse lifesaving treatment under certain circumstances.

(19) Would you vote to prevent involuntary denial of lifesaving medical treatment by amending the Patient Self-Determination Act to provide that, if failure to comply with a patient's or surrogate's choice for life-saving treatment would be likely, in reasonable medical judgment, to result in or hasten the patient's death, a health care provider unwilling to respect the choice for lifesaving treatment must allow the patient to be transferred to a willing provider and must provide the treatment pending transfer?

YES NO

HEALTH CARE RATIONING

The manner in which any restructuring of the American health care or health insurance system is constructed is a matter of central importance to the pro-life movement because when the government rations health care in a way that makes it illegal or impossible for Americans to choose lifesaving medical treatment, food, and fluids, it imposes a type of involuntary euthanasia.

In the name of controlling health care costs, in late 2009, both the House and the Senate passed bills limiting the right of Americans to spend their own money to obtain lifesaving health care. These bills would have empowered government officials to exclude plans from health insurance exchanges if offered by insurers the officials thought raised premiums too much, thus limiting the ability of consumers themselves to balance cost against benefit, and pushing them into health insurance plans more likely to ration health care.

(20) Would you vote against any bill that would prohibit or limit the right to spend one's own money for health care or health insurance?

YES NO

MEDICARE RATIONING

It is well known that because of the impending retirement of the baby boom generation, Medicare faces a fiscal crisis. Broadly speaking, there are three fundamental options. One, substantial tax increases, is widely considered improbable. Another, in which less and less money (adjusted for health care inflation) is available for each beneficiary, would compel rationing.

The third option is to allow older Americans who wish to do so to add their own funds on top of the diminishing government contribution in order to obtain health insurance that is less likely to ration medical treatment and prescription drugs. By voluntarily putting more money into the health care system through this means, middle income Americans will make possible greater private sector cost shifting, allowing more undercompensated and uncompensated health care to be provided to those with low incomes.

In 1997 and 2003, the National Right to Life Committee persuaded Congress to allow such an alternative in the form of "private fee-for-service" plans. Under current law, so long as these plans meet requirements for financial stability, and cover what original Medicare covers, the government places no price controls on what private fee-for-service

plans can pay for health care or prescription drugs, or on what premiums they can charge in addition to the amount provided by the government under Medicare. These are left for the market to determine. However, the health care bills passed by the House and Senate in late 2009 gave the Centers for Medicare and Medicaid Services the authority to exclude any or all of these plans from the choices available to senior citizens.

(21) Would you vote against any bill that limits, or authorizes government officials to limit, the right of older Americans who choose to do so to add their own funds on top of the government contribution in order to obtain Medicare health insurance that is less likely to ration medical treatment?

YES NO

GOVERNMENT LIMITS ON PRIVATE HEALTH CARE TREATMENT AND SPENDING

The health care bill passed by the Senate in late 2009 provided for an "Independent Payment Advisory Commission" which was directed: 1) to devise Medicare cuts designed to keep Medicare payment increases below the rate of medical inflation, and 2) to recommend to the Secretary of Health and Human Services (HHS) policies to hold private sector health care spending below the rate of medical inflation. The Senate bill empowered HHS to impose "quality" and "efficiency" regulations on all health care providers that could be used to implement the Commission's proposed limits. Instead of treatment decisions in the private sector being left to doctors and their patients, the bill would have implemented government micro-management of private health care decisions in the name of imposing limits on health care spending.

Such government controls prevent access to lifesaving medical treatment that costs more to supply than the limit set by the government. The same is true when price controls are imposed on what people are permitted to pay for health insurance.

(22) Would you vote against any bill that would impose, or authorize government officials to impose, mandatory limits on the practice of medicine in the private sector so as to hold down health care spending?

YES NO

(23) Would you vote against any bill that would impose price controls on health insurance premiums?

YES NO

USE OF "COMPARATIVE EFFECTIVENESS" TO LIMIT TREATMENT BASED ON "QUALITY OF LIFE"

"Comparative effectiveness" research is supposed to determine which of alternative treatments for an illness or injury are most likely to be successful and cost-effective. The danger is that frequently "effectiveness" is judged in a

manner that treats extending the life of an elderly, disabled, or terminally ill individual as of lower value than extending the life of an individual who is younger, nondisabled, or not terminally ill – for example, by using “quality-adjusted life years.” While the health care bill passed by the Senate in late 2009 contained protections against such discrimination in the use of comparative effectiveness research, a loophole meant that “quality” and “efficiency” standards that could be imposed on health care providers by HHS would not necessarily be subject to those protections, and the health care bill passed by the House in late 2009 contained no such protections at all.

(24) Would you vote against any “comparative effectiveness” program that lacked protections to ensure that it is not used in a manner that treats extending the life of an elderly, disabled, or terminally ill individual as of lower value than extending the life of an individual who is younger, nondisabled, or not terminally ill?

YES NO

POLITICAL SPEECH

In its January 2010 ruling in *Citizens United v. FEC*, the U.S. Supreme Court ruled that the First Amendment to the U.S. Constitution protects the right of corporations (which includes nonprofit corporations, such as NRLC) to spend money to express viewpoints regarding those who hold or seek political office. Some members of Congress advocate enactment of new laws to discourage corporations from exercising this right – for example, by telling corporations that if they engage in constitutionally protected speech on political matters, they will lose other rights. For example, it would be difficult for an organization to work with members of Congress on legislation without violating some proposals to restrict “coordination” between officeholders and groups that sponsor ads.

(25) Would you oppose any legislation that would penalize corporations, including nonprofit corporations such as NRLC, for engaging in the types of free speech that the U.S. Supreme Court ruled are protected by the First Amendment?

YES NO

The federal Lobbying Disclosure Act already requires lobbying organizations to report, on a quarterly basis, all of the legislative matters on which they contacted members of Congress or Executive Branch agencies, but the law does not require a listing of specific contacts. In January, 2010, President Obama urged Congress to adopt legislation under which every contact between lobbying organizations and lawmakers would be reported into a publicly accessible database. NRLC believes that such “contact reporting” is an infringement on the First Amendment right to petition government officials, is exceedingly burdensome, and serves no legitimate public policy purpose.

(26) Would you oppose any legislation that would require members of Congress or Executive Branch officials to report, into a public database, every contact they receive from an advocacy organization such as NRLC, or that would require an advocacy organization such as NRLC to report every contact?

YES NO

The following question is for U.S. Senate candidates only:

CEDAW

The Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW) is a treaty that explicitly obligates ratifying nations to ensure equal access to “health care services, including those related to family planning,” and says that parties shall ensure that men and women have “the same rights to decide freely and responsibly on the number and spacing of their children.”

These and other provisions have been construed by official bodies, ranging from the European Parliament to the official United Nations Committee on the Elimination of Discrimination Against Women, to condemn any type of restriction on abortion. This is one of the reasons that the U.S. Senate has never ratified the CEDAW, and it is the reason that NRLC opposes ratification of the CEDAW.

(27) Would you vote in opposition to ratification of the CEDAW?

YES NO

Signature of Candidate

Please Print or Type Name

Date Signed

State Congressional District #

Political Party

Phone Number

Fax Number

Name of Campaign Committee

Contact Person

Email Address

Campaign Address

Campaign Website