

MASSACHUSETTS CITIZENS FOR LIFE

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The ProLife Legacy Society

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A Message From President Myrna Maloney Flynn

About this time each year, as winter melts into spring and blessed daylight still streams through the windows even as evening approaches, the same famous movie scene comes to mind as I navigate accumulated clutter: Luke Skywalker and friends battling the trash compactor in Star Wars. As those characters did, I, too, experience the walls of my house seemingly closing in. Time for spring cleaning!

While refreshing once it's done, the inevitable purging of once-valuable treasures brings with it nostalgia, wistful memories and reminders of time passing ever so quickly. As my second child prepares to head off to college, though I swear she was just born last week, the time has come to clear her old things out of the nest.

"Acceptance" floats through my mind a lot lately, and I happened to recall this piece I wrote back in 2019, in a whole different era. As you flip on the tunes and embark on your own spring cleaning endeavors, perhaps you'll find it useful. Perhaps the woman named Grace will tap you on the shoulder as you work.

A Woman Named Grace

Have nothing in your house that you do not know to be useful, or believe to be beautiful. -William Morris

"It's time to let it go."

We were cleaning out the garage a few years ago—a long-overdue chore, apparent by the fact that making our way into the car each morning had begun to resemble a track team running hurdles. And not successfully.

The double stroller had served us well. We had needed functional, and it was: cushy, reclining seats that allowed our weary ones to doze; an oversized basket underneath to accommodate both a diaper bag and the ever-critical snack stash; massive wheels with treads deep enough to navigate both beaches and springtime slush; cup holders.

But we had come to accept it: our youngest two were well past the point of being buckled in, much to our sentimental dismay, and, reluctantly, we recognized we'd entered a different phase of life. So down to the curb went the stroller to await a new home.

This week, my 11-year-old daughter's classmate lost her father. He suffered a massive heart attack while gardening. He was just 46. After the funeral, hundreds showed up at the house to support his family: a mother and her three young children moving out of one chapter and into another, both unimaginable just days before.

But it was time to let him go.

And somehow, they got that. Instead of black, they donned vivid summertime colors. Pop music blared. Caterers served mounds of food. Friends celebrated the wonderful guy they all agreed they'd been fortunate to know.

There in the yard at sunset, I ran into an older woman I've long admired. I'd met her back in the preschool days, when she and her husband, well into their 60s at the time, were met with the challenge of raising their grandson. In the past couple years, they have, in one of the most authentic displays of "love in action" I have ever observed, welcomed two more grandchildren into their care. One of the pigtailed toddlers

zipped by as the woman and I chatted; her husband quickly followed, slowing only long enough to adjust his hearing aid.

We both grinned at the scene. "How's it going?" I asked her. "They're wonderful," she said of the grandkids. "I mean, it's been hard." She paused and confided, "I didn't expect to start over again at this point in my life. I thought we'd be taking it easy. I want to do things. I want to see Italy."

Then, returning to her characteristically shining optimism, she smiled and said, "But I just have to thank you for getting rid of that double stroller a while back. You can't imagine how often it's come in handy."

In that moment, amidst the grieving family and this selfless grandmother, I recognized the guest named Grace.

Human nature opposes acceptance. We've managed to evolve by willfully resisting perceived obstacles and forging self-directed paths. I'd rather do things my way, thank you very much. I'll take that unanticipated road when I'm good and ready.

But weeks like this one remind me that sustained resistance to "the plan" is like a garage with too much stuff; it hinders forward momentum. Acceptance often hurts. But it's what I must at least aim for. I just hope I can pull it off with the kind of grace others display.

Acceptance is a familiar concept to pro-lifers. We tend to preach it quite a bit, in fact. Here's to being capable of gracefully embracing it ourselves, when the time comes—keeping it in our house, so to speak, as it is both useful and beautiful.

President Myrna Maloney Flynn's Remarks at Leadership Institute January 22 Event

"Under Pressure: Our Duty to Protect Women From Coerced Abortion"

Society wants you to believe that abortion is a choice. The truth is that many, if not most, women abort their children because they believe they have no choice.

Coerced abortion exists on a massive scale. Is there anything that can be done to reverse the trend of coerced abortion?

Let me tell you a story. At the age of 41, my mom received a phone call from her doctor, who told her she was expecting her 7th child. My dad was supportive, telling her everything would be fine. When the news spread through their group of friends, one of their friends came up to them after Mass and said, "You know. There is something you can do about that now."

My parents rejected this. My parents chose life. Despite the fact that the friend didn't coerce them, it shows how quickly the culture adopted abortion as a good choice. This thinking has led to the high rate of coercion today.

Coercion occurs when someone pressures, blackmails, or tricks a woman into having an abortion. Coercion omits or limits choice. It is illegal in all 50 states. The U.N. considers it a human rights violation. It is opposed by Democrats and Republicans. It is a common ground issue.

A Charlotte Lozier Institute study showed that 24% of women reported coercion. 43% had an abortion even though it was inconsistent with their values. 60% did not want the abortion, but had little support.

Overall, in this study, about 70% of women reported abortions that were coerced, unwanted, or inconsistent with

their values. It is agreed that coerced abortion is widely underreported. It disproportionately affects disadvantaged women, teens, and women of color.

If it is illegal, why is it so common? Women in crisis pregnancies don't know that they have the right not to choose an abortion. Women who are in harmful, unhealthy relationships who are pressured don't know that they have recourse, that they can seek law enforcement to protect them and their baby.

There are several strategies in helping to prevent coerced abortion: enacting protective, pro-life legislation, promoting the support of pregnancy resource centers, and litigating in court against forced use of the abortion pill.

MCFL introduced a bill this session with bipartisan support to ensure that a woman who enters an abortion facility is told verbally and in writing that she has a right not to have that abortion.

Pregnancy resource centers serve women who are in abusive relationships, women who are in the sex trafficking industry, who are in the centers looking for help. PRCs provide loads of emotional and material support to women who need it.

We are seeing a rise in litigation relating to the abortion pill and how it is being used to force a woman to have an abortion. A Louisiana mother and a New York abortionist have been indicted for shipping abortion pills across state lines to coerce a pregnant minor daughter into an abortion she didn't want.

In another case, a married Ohio surgeon who impregnated his girlfriend ordered the abortion pill and shoved it into her mouth while she was sleeping. The baby died, and the surgeon is now being prosecuted.

A former Planned Parenthood employee in Minnesota has described horrific coercion and lies that she, as a clinic worker, was told to tell women. The witness said women will call the clinic, crying, that they have seen their baby's face, feet, and hands. The former employee told Planned Parenthood, "What you have been selling has never been freedom, not for the woman, not for the child. What you have been selling is pain and darkness. And it's bloody. It's all about money."

"What you have been selling has never been freedom, not for the woman, not for the child. What you have been selling it's pain and darkness. And it's bloody. It's all about money."

—Former Planned Parenthood employee

TRUTH ABOUT CHOICE

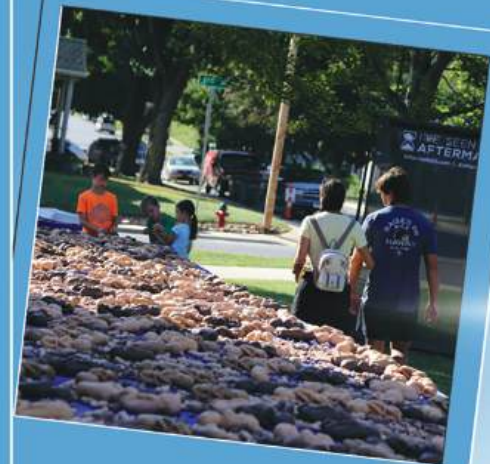
A Special Project of Massachusetts Citizens for Life



Springfield:
April 12



Photo Credit: Kansans for Life



Boston Common:
May 2

REMEMBER AND HONOR

Tens of thousands of Massachusetts infants in the shadow of the State House

Truth About Choice is a memorial to the 26,000 in Massachusetts who lost their lives to abortion – within a single year. The events will honor every person impacted by their loss.

The project is the state’s first-ever exhibit of lifelike pre-born babies lost annually to abortion. Through interactive educational content and a fetal model display representing each life ended in the violence of elective abortion, Massachusetts Citizens for Life shines light on the uncomfortable truths about “choice.”

Featuring life-affirming resources, post-abortive support services, and opportunities for pro-life advocacy, our event is designed to comfort, inform, convert and mobilize. We believe it will move visitors to action, inspire change in the hearts of those who can no longer look away and, ultimately, result in justice for our most vulnerable women and children.

The Truth About Choice memorial is geared for ages 10 and over. We ask that attendees view our displays with reverence and maintain a solemn and respectful tone



throughout their visit. Truth About Choice is free and open to the public, thanks to Massachusetts Citizens for Life grassroots supporters along with major sponsorship-level contributions.

Visit truthaboutchoice.org

From Despair to Hope: The Jean Marie Davis Story

“Put on the armor of God so that you may be able to stand firm against the wiles of the devil. For we wrestle not against flesh and blood but against principalities, against the darkness of this world.”

On a December 15 webinar, “From survival to advocacy: a journey of hope and life,” Jean Marie Davis shared her journey from trafficking and homelessness to advocacy and leadership. She offered insight into the realities faced by women in crisis and the hope found through compassionate support.

Davis described herself as a survivor and overcomer of horrific circumstances. “I was sex trafficked from the age of two to twenty-nine,” she said. “Mine started with my family. I was groomed, I was taught, I was trained. I started doing drugs at age twelve. Sleeping around when I was thirteen. I was gang raped multiple times throughout my life by the age of eighteen. I walked into prostitution. I walked into selling my body.”

Originally from California, Davis lived in 33 different states. She had over two dozen pimps. “I had two children by pimps, which was not common at the time in New England. I was on crystal meth for ten to eleven years. At age 29, I was threatened and told to get out of the state or die.

“I went back to California and found out I was pregnant. The police told me I needed to leave California because family members and other people wanted to kill me. They gave me the option of Alaska, Washington, Maine, and New Hampshire. I called 27 shelters, and they all denied me because they said my situation was too difficult

and that I would put other women in danger.

“I called one shelter in New Hampshire, and they said we’ll take you. The woman who was running the domestic violence shelter said that there was a pregnancy center, but they believe in Jesus. I said I didn’t really care; if they wanted to help me, that would be great. I went to the pregnancy center, and I wanted to abort my child.

“Phyllis Phelps was running the center and told me she wanted to help me. There was something different about her eyes. When I looked at her, I knew she understood where I was coming from. I knew she had been where I was. She said, ‘I can’t help you, but I know a man named Jesus.’ At that moment, I accepted Christ. Then I said, Now what? I’m homeless, and I’m pregnant, and I have \$138. How are you going to help me? What are we going to do? You’ve convinced me to keep my child.”

Davis enrolled in an educational program, graduated, and went to Bible college. She began working with Phyllis Phelps in a women’s shelter program that helped women off drugs and alcohol, domestic violence, and sex trafficking. Phyllis told Jean that she was supposed to be in full-time ministry. “God picked me to run Branches in Brattleboro, Vermont,” she said.

“A few years ago Vermont was considering anti-pregnancy center legislation. I was asked by a Right to Life representative in Vermont to speak to the senators and try to convince them not to make it into a law. When I went to testify, I said to them, ‘I come to you, not as a director, but as a client.’ I explained why it was crucial to have



Jean Marie Davis

pregnancy centers because of people like myself who were sleeping on the streets.

“I was working in the HR department at Heywood Hospital in Gardner, Mass. I learned a lot, including what they were looking for. They were fixated on the fact that we were dealing with pregnancies. I told the senators, ‘You are focusing on one-eighth of what pregnancy centers actually do.’ They said, ‘Your pregnancy centers are isolated. You don’t communicate, you don’t get involved with the community or anything like that.’ I said, Okay, let’s see what we can do about that. I started knocking on doors.”

Davis also worked to educate legislators on the deleterious effects of a Vermont bill to legalize prostitution. “I met with the chief of police, the fire department chief, and the town manager and explained my purpose. They were trying to legalize prostitution throughout the whole state. I called the chief of police, a 60-year-old black woman from New York who is pro-choice. She paid for a table at my banquet. She supports Branches, knowing what we do and knowing that we don’t support abortion. The bill is still active. It got pulled from the floor. I got one senator to withdraw their name from the bill, so the bill has been returned to committee.

“If Vermont legalizes prostitution, as they have in Burlington, if a woman has a transaction with a man, and he

rapes her, she cannot claim rape. The police cannot help her. The pregnancy centers cannot help her. Our hands become tied because it is a legal transaction. We looked at what goes on in Brattleboro, how many arrests? What is the police department dealing with? The police department is your best friend. They will work with you. In the lawsuit against pregnancy resource centers, when the town manager came against us, the police chief said no, leave Branches alone. Now, they ask us to speak on their behalf on many things.

“This is what we can do. We bring resources. Yes, we deal with abortion-minded women. Yes, we deal with ultrasounds and everything, but that’s not just the focus. I was homeless, and I needed a place to live. You got me to keep the baby, now what? What else, and how else? That word ‘resource’ is a very key word. You have to have the resources. I have clothes. We partner with two different Walmart’s that donate and sell us everything from clothes to baby monitors.

“You start to broaden the focus for what pro-choice people are screaming about. You don’t care about the woman, the family, or anything else. Okay. Let me answer the call.

“In our center, we have a program called WHIS where we help women who have come out of domestic violence, and they are single mothers who want to go to college and finish their careers. They go through a program with us, and we will be their mentors. They can have their college costs covered: tuition, books, child care, and rent. I went through that program. I went to Bible college and only spent \$1,100; everything else was paid for.

“We work with job recruiters, we work with the community. Everybody knows who Branches is. We go to town meetings. We go to school board meetings. We are present at all city

meetings. We go to make our presence known in our community. How many overdoses? What’s going on? The chief of police was on her way to Florida. She called me on her way, asking me questions. We got a call today asking me if we had a place for a girl. That’s how we do it in Vermont.

“Anytime you start a new PRC, add new directors, or start a ministry that God has called you to, you have to look at what we are dealing with. Why is this information key? Most women who are being trafficked or sold have had at least two pregnancies. There are girls who have had nine or maybe more abortions. Not choosing, being forced, they can’t make money if they are pregnant. This is a normal situation; most people don’t know about this.

“I want to help Massachusetts fight so that pregnancy centers can function because there’s a whole world of women. You have to understand that human trafficking is an almost four billion dollar industry. So you have women who are out there. I have prostitutes that come to my center. I have prostitutes that are pregnant right



now, that are needing help. And so that’s kind of what I do. That’s kind of what we at Branches do. That’s why we try to come in as a help, but we also hold our ground.”

Branches

branchesfrc.org
486 Main St., Greenfield
Call: (802) 254-6734.



Jean Marie Davis said pregnancy resource centers such as Branches in Greenfield are key to helping women in dangerous and difficult circumstances

State Action Teams Make Headlines

MCFL congratulates the work of Action Team members in posting Baby Safe Haven signs across the state. New or replacement signs have recently been installed in Brewster and Wilbraham.

The efforts of Vickie Cohen in the Attleboro area were featured in the Winter 2025 issue of the MCFL Magazine. Shortly after the Magazine went to press, we received word that her story was picked up by the *Sun Chronicle*.

The article begins with Cohen's motivation to join the life-saving project. She was volunteering at the MCFL's pro-life booth at Big E in Springfield, where she noticed the Baby Safe Haven display. A bright yellow card asked, "Does your town have a sign yet?" Cohen decided to investigate. Ultimately, Cohen saw the installation of signs at the Attleboro's Police and Fire Departments and at Sturdy Memorial Hospital.

The *Sun Chronicle* article quoted Corey Blais, a lieutenant with the Attleboro Fire Department. "Some people are just in a lot of trouble, so anything we can do to help and

obviously make the situation better for a young child is great." Blais noted that leaving a child at a manned Fire Department with 24-hour emergency capabilities is rare. "I think most people go to the emergency room, but I do know every once in a while, the stories will show up," he said.

The *Sun Chronicle* article continued with a quote by Alyssa Jolicoeur, director of cardiac and emergency services at Sturdy Memorial Hospital. "We believe the Baby Safe Haven law is an important initiative that helps keep newborns safe, and the hospital maintains protocols to provide immediate care and coordinate with the appropriate agencies if an infant is surrendered."

Under the Baby Safe Haven Law, parents in crisis can legally and safely surrender a newborn (7 days old or younger) at any hospital emergency room, manned fire station, or police department—no questions asked, no legal risk.

Call the 24/7 Child-at-Risk Hotline: 1-800-792-5200.

Learn more at: masscitizensforlife.org/safe_havens



Does Your Town Have a Sign Yet?



Celeste Ferris replaces a faded Baby Safe Haven sign at the Wilbraham Fire Department with the assistance of Captain Anthony Arventos



Action Team member Vickie Cohen was featured in a front page article in the *Sun Chronicle*



Baby Safe Haven sign newly posted at the Brewster Fire Department

Riley Gaines to Keynote MCFL Banquet, September 25

For 53 years, Massachusetts Citizens for Life has defended human life in the Commonwealth with clarity, courage, and perseverance. This anniversary dinner is more than a celebration. It is a chance to strengthen our mission, support the work ahead, and stand for life.

The keynote address will be delivered by Riley Gaines. A 12-time All-American swimmer and five-time SEC champion, Riley became nationally known after being forced to compete against a biological male at the 2022 NCAA Women's Swimming Championship and watching officials refuse to stand up for women. That experience launched her advocacy for fairness, women's dignity, and the protection of the most vulnerable.

Today, Riley speaks boldly for women, for truth, and for the sanctity of life. Her message reflects the heart of MCFL's work: silence is not an option when human dignity is at stake.

Join us for an engaging evening featuring inspiring reflections on recent victories, a clear look at the challenges ahead, and a few surprises we can't wait to share.



Sponsorship Opportunities

Platinum Rose \$10,000

20 Dinner tickets (2 tables), 20 VIP tickets,
2 VIP seats at head table with Riley Gaines
recognition at the Dinner.

Program recognition: Full-page ad, first placement on
sponsor list, logo included.

Website recognition: First placement on sponsor list,
logo included with link to website.

Event signage: Stand alone.

Gold Rose \$5,000

10 Dinner tickets (1 table), 10 VIP tickets,
and recognition at the Dinner.

Program recognition: Half-page ad, Prominent
list placement, logo included.

Website recognition: Secondary placement on
sponsor list, logo included with link to website.

Event Signage: Shared.

Silver Rose \$2,500

10 Dinner tickets (1 table) and recognition at the Dinner.

Program recognition: Quarter-page ad,
Prominent list placement.

Website recognition: Secondary placement on sponsor list.

Event Signage: Shared.

Bronze Rose \$1,000

4 Dinner tickets and recognition at the Dinner.

Program recognition: Prominent list placement

Website recognition: Inclusion on sponsor list.

Event Signage: Shared.

Red Rose \$500

2 Dinner tickets and recognition at the Dinner.

Program recognition: Included on sponsor list.

Website recognition: Inclusion on
sponsor list.

Event Signage: Shared.

MaProLife.org/banquet



NRLC Introduces the **APPLE** Act

Ensuring Informed Consent on the Use of Abortion Pills

As reported by *NRL News Today*, “National Right to Life (NRLC) announced the introduction of the APPLE Act — the **Abortion Pill Provider Liability and Education Act** — a new model law designed to protect women by ensuring honesty, transparency, and accountability in the use of abortion pills.

“The APPLE Act responds to mounting evidence that women are not being fully informed about the risks of chemical abortions and are too often left without recourse when serious complications occur. The law empowers women and their families to hold abortion pill manufacturers, prescribers, and providers accountable for injuries, complications, trauma, or death — while preserving women’s privacy and dignity.

“Recent data and firsthand accounts underscore the need for reform.

According to the most recent FDA reporting, at least 36 women in the United States have died after taking mifepristone, with additional deaths reported internationally. Large-scale insurance and international studies have found that between nearly 5% and more than 10% of women who take abortion pills end up seeking emergency medical care, often for hemorrhage, infection, incomplete abortion, or other serious complications. Women’s own accounts describe prolonged bleeding, severe pain, psychological trauma, and emergency hospitalization.

“The APPLE Act focuses on common sense protections rooted in long-standing principles of informed consent and patient safety.”

**EDUCATED
HOPEFUL
FREE
RESPECTED
STRONG
ABLE HEARD
SURE
BELIEVED
COURAGEOUS
CAPABLE
ENGAGED
EMPOWERED
HEALTHY
CONSIDERED
TRUSTED
SAFE
INFORMED
SUPPORTED
RESPECTED
CONFIDENT
PROTECTED
DETERMINED**

**National
RIGHT TO LIFE**

About the Abortion Pill Provider Liability and Education Act (APPLE ACT)

Why should we pass this act?

- Women will be made aware of risks, abuses and misinformation
- Opponents participating in debate over the APPLE Act will be forced to admit they have not talked honestly about risks
- Providers may reconsider offering abortion pills when lawsuits and negative publicity expose dangers
- Opponents participating in debate over the APPLE Act will be held to account for arguing that women should not have legal recourse for serious complications

Graphic : *NRL News Today*

Among its key provisions, the APPLE Act:

- Requires abortion pill providers to give women clear, written information about known risks and potential complications, including excessive bleeding, infection, and incomplete abortion.
- Ensures women are told they may seek emergency medical care without fear of penalty for disclosing abortion pill use.
- Mandates the reporting of abortion pill complications to state agencies to create an accurate public record.
- Implements a public awareness campaign informing the public about a woman’s right to know about the risks associated with chemical abortion and the right to sue.
- Allows women or their families to pursue civil action when abortion pill providers or manufacturers cause harm or fail to obtain proper informed consent.
- Protects the anonymity of women who bring legal action.

APPLE Act Model Law Enables Educational Efforts in the States

On January 15, National Right to Life President Carol Tobias hosted a series of national tele-town halls to officially launch the Abortion Pill Provider Liability and Education Act (APPLE Act.) The APPLE Act is a model law designed to help states design legislation mandating education on the risks and dangers of abortion pills.

As *NRL News Today* reported, Randall K. O'Bannon, Ph.D., NRLC's director of education and research, talked about the mailing of abortion pills into states regardless of their having protective laws.

"You can't stop chemical abortions just by passing a law to make it more illegal to sell the pills or increasing the fines and penalties on abortionists who break the law," O'Bannon said. [Many states, including Massachusetts, have shield laws that protect those participating in the abortion pill industry from prosecution.]

Safety claims made by the abortion industry and its allies in the media are left unexamined including a recent study of more than 865,000 patients by the Ethics & Public Policy Center. The study found nearly 11% of women facing serious complications.

"If mifepristone is as safe and benign as they say it is, they have nothing to fear," O'Bannon told the audience. "But if they have been denying, if they've been soft pedaling or ignoring the risk, if they've been inflating the efficacy, minimizing the pain, the bleeding, if they've been covering up the complications, if they've been callously dismissing the horror of encountering one's own aborted child, they are going to pay a heavy price."

The *NRL News Today* report continued with Ingrid Skop, MD, the Vice President and Director of Medical

Affairs from the Charlotte Lozier Institute. Dr. Skop pointed out how the Food and Drug Administration (FDA) during the Biden administration weakened the protections over administration of the abortion pill:

- 1) "No pre-abortion testing is required, no doctor, no follow-up, no federal requirement for complication reporting, and no confirmation of who is obtaining the drugs.
- 2) "Without an ultrasound, potentially deadly ectopic pregnancies may remain undiagnosed. Without an ultrasound, if a woman underestimates her gestational age, she may take the drugs at a higher gestational age when they are less effective, increasing her risk of complications.
- 3) "Hemorrhage, infection, retained pregnancy tissue, and even continuing living unborn children who may later suffer serious birth defects from misoprostol are all common complications, affecting about 1 in 20 women, even when the drugs are taken, as the FDA recommends.
- 4) "But if accidentally or intentionally taken in the second trimester of pregnancy, 4 in 10 women may need surgery for a failed abortion. The surprise most women express when they experience these complications demonstrates conclusively they are not receiving adequate informed consent."

Carrie Snyder, the Executive Director of Ohio Right to Life, spoke about SB 309, Ohio's version of the APPLE Act. Snyder explained that the legislation must withstand Ohio's constitutional requirement that the law does not cause an "undue burden" for

"The surprise most women express when they experience these complications demonstrates conclusively they are not receiving adequate informed consent."



the woman seeking an abortion.

The law has two basic provisions. First, it requires that providers give oral and written disclaimers on the dangers of mifepristone. Second, the abortion pill provider must describe the potential legal recourse against the manufacturer, provider, and/or distributor for the patient and her immediate family in case of an adverse reaction.

NRL News Today reported, "Snyder said that with abortion pills being mailed everywhere there is hardly any controls on who orders the pills or how they are used. It is a 'truly wild, wild west' out there right now, a 'dangerous free-for-all right now.'"

"Savannah Martin, testifying on behalf of Bella Vita Network and the Ohio Coalition of Pregnancy Centers, shared the story of a woman identified as 'Rebecca,' who suffered life-threatening complications after being prescribed abortion pills beyond the legal gestational limit.

"Supporters of SB 309 argue that, regardless of one's position on abortion, informed consent and consumer protection are principles that should apply to abortion-inducing drugs just as they do to any other medical product."

Massachusetts Citizens for Life will continue in its mission to influence public policy through legislative and educational efforts in order that women may make a truly informed choice to decide against the harms of abortion. Choosing life is the better decision.

Young Adult Chapter Hosts Monica Snyder, Executive Director of Secular Pro-life

Teaching activists on ways to engage pro-choice people in discussion

MCFL's Young Adult Chapter hosted a February 12 webinar, "How to engage pro-choice people," featuring Monica Snyder, Executive Director of Secular Pro-life. The presentation was moderated by Young Adult Chapter co-chair John Skalko, Ph.D.

Snyder, executive director of Secular Pro-life since 2021, emphasized the importance of building bridges – connecting with people different from ourselves. "You can save lives in two ways, directly by offering support to abortion-minded women, or indirectly by talking to pro-choice moderates," Snyder said.

The challenges pro-life advocates face are considerable. Abortion proponents have a vast amount of monetary and media support. Pro-choice public opinion has risen post-*Dobbs*. "It's tough right now," Snyder said. "Nontraditional pro-lifers are an underdeveloped resource we can use."

"We want pro-choice moderates to choose life in their personal lives. We want them to value human life and dignity. Speak to pro-choice moderates on why abortion isn't the best choice, and they will come to our side. Find out where they are on a spectrum and get them to focus on something you can agree on. Figuring out where they stand on the spectrum tells you how much effort to expend.

"You can start to move a person from the pro-choice to the pro-life side by creating a little doubt on whether abortion is a good choice or not. Get them to say, 'Huh? I never thought of that.' Though it can happen in a single



Monica Snyder says that non-religious opposition to abortion is based on the recognition that abortion kills a living human being

conversation, a long-lasting conversation happens over time. Be patient.

"Who is our target audience? The problem is identifying what kinds of abortion laws people support that define them as pro-life or pro-choice. Pro-lifers say abortion should be illegal most or all of the time. Many are religious. Pro-choicers in general aren't religious. Secular people are more likely to be pro-choicers, although there is a subset of religious people who are pro-choice because they believe it's a religious thing they can't impose on other people.

"There are different kinds of pro-choicers. From my personal experience, academics, ACOG (American College of Obstetricians & Gynecologists), and reproductive health advocates argue for abortion at any time without restriction. They are the 'white coat

speak' thought leadership. There are very vocal pro-abortion lay people who advocate for abortion at any stage, for any reason. They won't specify any stage or any reason. Pro-choice lay people are very uncomfortable with the idea of interference with their bodies.

"The nominally pro-choice position supports the status quo – abortion for medical emergencies, fatal fetal anomalies, or rape. They think they have a neutral position. However, their position is not that far from pro-lifers. They oppose over 95% of abortions that occur.

"People can change their minds in the context of friendship. It's in your interpersonal relationships where you can build bridges. If you are in a social situation where everyone assumes you are pro-choice and you hear something



Young Adult Chapter members, Co-chairs John Skalko, Ph.D. and Eric Estano, Gabriel Dionisi and Peter Leo conduct a pro-life literature drop in July. John Skalko was recently elected to the MCFL Board of Directors. Welcome John!

negative, you don't have to be quiet or get in a fight. Just say, 'Hey. I don't agree.' The most common reaction isn't aggression; it's awkwardness. If you are confronted with aggression, you don't need to say anything other than 'I don't want to talk about it.' Leave it at that.

"You might awaken curiosity. Someone might be intrigued and say, 'What? What do you mean?' This can be a great opportunity if you are prepared. You might be giving another person joy, letting another pro-lifer know they are not alone.

"Speaking up destroys stereotypes. Get them to say, 'Huh?' Reinforce what is good and right and help them recognize unexamined philosophical assumptions. It's more about the relationship than just about the facts.

"Learn to know how to talk with people so they don't feel defensive. If people feel safe, they will be more likely to talk about this issue. People are less defensive in small groups. You need different strategies for dealing with hostile groups online. Set the tone, listen, don't just talk. Tell stories. Set the

tone so that consent to the conversation. Don't bulldoze them. Clarify that you want to understand each other's perspectives. 'I want to know what you think.'

"Affirm common ground and listen reflectively to understand their position so well that you can repeat it back to them and they will say, 'Yes. That's what I was saying.' If people find this reasonable, you can move them a little bit more towards your view. You don't have to solve all the problems at once.

"I had two miscarriages. It helped to share my grief and talk about it. Relationships can be reaffirmed when people share vulnerabilities. People remember stories better than statistics. You can share life-changing,

difficult experiences. Think about your story: Why I am pro-life. There's an asymmetry. They can't see the baby, but other people can hear your story. Ask them for their stories too."

Afterwards, chapter co-chairs John Skalko and Eric Estano offered their thoughts. "I think she made excellent points about how one-one conversations with those close to us can be quite effective in persuading people to the pro-life view," Skalko said. "Just merely identifying ourselves in person as pro-life is a big first step. It also gives courage to other pro-lifers who may be too afraid to speak. My big takeaway is this: Have courage. Do not be afraid to speak."

"What is most important about her approach in general is that coming from such a neutral background, in terms of what is motivating her convictions, means that she can just simply speak the same language to everyone, and it just works," Estano said. "Christians know that Jesus loves us and wants us to love every child, even the unborn, but as true as that may be, it literally means nothing to a woke atheist, and the moment you say it, your job has just gotten harder, because you are now trying to evangelize at the same time. I have always believed that, since I view God as the plenitude of Truth, Himself, anything I do or say to bring someone closer to an objective moral truth necessarily brings them closer to God. The fact that she can essentially speak from a single place and have it land with people of every persuasion and background, while not compromising Truth, is why she is so effective."

"You can start to move a person from the pro-choice to the pro-life side by creating a little doubt on whether abortion is a good choice or not. Get them to say, 'Huh? I never thought of that.'"

Suicide Through the Courts

Disability Advocates Say Assisted Suicide Laws Promote Discrimination

As New York becomes the newest state to legalize physician-assisted suicide (PAS), states with a longer history of legalization are dealing with its practical consequences. The effects on the disability community were the focus of a January Patient's Rights Action Fund webinar. Assisted suicide policies are driven by financial motivation to cut costs and a devalued notion of human value that sees life with a disability as better off dead.

The Patient's Rights Action Fund has joined a US district lawsuit in Delaware claiming that the Delaware End-of-Life Options Act violates equal protection for people with disabilities.

The law was signed into law in 2024 by a one-vote margin. After years of trying, assisted suicide advocates passed the bill only to have it vetoed by the governor.

The new governor made passing the law a priority, and the law went into effect on Jan 1, 2026. Opponents filed a lawsuit in federal court challenging the act as a discriminatory violation of the Americans with Disabilities Act and as a denial of the 14th Amendment's guarantee of equal protection.

The law makes anyone with a life-threatening illness "suicide ready." The lawsuit's aim is to stop enforcement and implementation through a temporary restraining order while they pursue constitutional challenges.

Disability rights groups see themselves at the forefront of the denial of care. Delaware Adapt cites the case of Daniese, who was diagnosed with polio in 1949 at three years old. She was not expected to live; she survived and now uses a wheelchair. Daniese struggles with

the cost of healthcare. Medicare doesn't cover community-based healthcare and nursing home care.

It scares her that she could have access to lethal drugs. "Some days are dark," Daniese said. "It's like having a loaded gun in the drawer if there are lethal doses waiting on a night table. It scares the loving bejesus out of me." Lacking resources could mean that not being able to take care of her diabetes could become a "terminal diagnosis" and qualify her for assisted suicide.

Another disability rights organization, Not Dead Yet, says that discrimination reflects a societal disdain for people with disabilities. "There is more to living than just having a disability. We want to have power over our own lives. People with disabilities die sooner than people without disabilities. We don't need to hasten that.

"People are way off in their ability to understand why disabled persons might want to kill themselves. They say, 'We understand how much you suffer.' People are shocked and surprised that people with disabilities don't want assisted suicide to relieve their suffering."

PAS proponents might also be surprised that legalized assisted suicide is not a disability community goal. One big problem is that the trigger for being able to have PAS is terminal illness. However, terminal illness has not been defined. Many people living with disabilities may have an expected lifespan of less than six months.

Masking the intentions, telling people who are disabled, "you can't go another day, we will give you the right to end your life," – within two weeks, is



a subtle form of coercion.

People with multiple physical problems are extremely vulnerable, dependent on a vital daily routine to continue living. Ignoring a problem can quickly escalate into a terminal situation. Something like a bowel obstruction can qualify a disabled person for PAS. In these situations, it's easy to lose the desire to live.

Assisted suicide laws have normalized the practice of having a doctor or nurse practitioner to counsel the person with the notion that "there's another option for you." This is the option that is offered to persons with disabilities.

People living with disabilities need lots of support, or they will die. If they are depressed, they can request lethal drugs. There are high rates of suicidality among newly injured spinal care injury patients.

PAS treats people with disabilities as second-class citizens. The line between life and death may depend on who the person talks to. Disability activists warn, "You can find a provider who will write the prescription. People can meet via Zoom with a doctor who doesn't know the patient and get a prescription. PAS deaths are not recorded as suicides. It hides what has gone on."

Suicide prevention counseling is the standard of care. However, life-threatening disability can lead to suicide assistance. It's a crime to assist someone in committing suicide; however, it is

not a crime to assist someone with a life-threatening disability.

Activists say PAS does everything for the medical professional, but nothing for the patient. There is no monitoring. This is designed to shield doctors and nurses from liability. There is no control to prevent doctor shopping.

Medicaid cuts are making it harder to get care. There are fewer services and treatments to keep people going. This is the lifeblood for disabled persons who can become terminal without proper care.

Does the law defining terminal as death foreseeable within six months mean six months with treatment or six months without treatment? The

Delaware law is vague with little or no regulations. There is a fear that the law will eventually be interpreted in the most permissive way to allow people to enter the terminal category.

Post-legalization debate opens the door to expanding the category of the eligible. Is someone denied healthcare coverage terminal? Would the law cause people to forego treatment in order to qualify as terminal?

The debate changes if the law is not ruled as facially discriminatory. You can't have a two-person death panel with power over human life. The risk of failure is that the challenges could be bigger. Would suicide on demand become the next battle?

Pope Leo Sends Greetings to 2026 March for Life Participants

I send warm greetings to those of you participating in the 2026 March for Life. I likewise express heartfelt appreciation, and assure you of my spiritual closeness as you gather for this eloquent public witness to affirm that “the protection of the right to life constitutes the indispensable foundation of every other human right” (Address to Members of the Diplomatic Corps Accredited to the Holy See, 9 January 2026).

Indeed, “a society is healthy and truly progresses only when it safeguards the sanctity of human life and works actively to promote it” (ibid.). In this regard, I would encourage you, especially the young people, to continue striving to ensure that life is respected in all of its stages through appropriate efforts at every level of society, including dialogue with civil and political leaders.

May Jesus, who promised to be with us always (cf. Mt 28:20), accompany you today as you courageously and



File Photo

peacefully march on behalf of unborn children. By advocating for them, please know that you are fulfilling the Lord's command to serve him in the least of our brothers and sisters (cf. Mt 25:31-46).

With these sentiments I entrust all of you, as well as those who support you with their prayers and sacrifices, to the intercession of Mary Immaculate, Patroness of the United States of America, and I gladly impart my Apostolic Blessing as a pledge of abundant heavenly graces.

Memorials

**My parents,
Robert and Dorothy Bond**
Leslie Diggins

Janet Callahan
Gerald Bates

Maurice and Mary Curran
MCFL South Shore Chapter

Manuel
Anthony Sullivan

**Mildred Therese (“Terry”)
Moynihan**
James Moynihan
Manny Pacheco
Susan B. Barber

Joseph O’Donnell
Ciaran O’Donnell

**In memory of those whose names
will never be known**
Kenneth Marshall

Congratulations

**Merry Christmas to
Marilyn T. Walsh**
The Walsh Family”



Donations help us to continue our life-saving work. Mail to: Massachusetts Citizens for Life P.O. Box 920149 Needham, MA 02492-9998



MASSACHUSETTS CITIZENS FOR LIFE

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Mission

In recognition of the fact that each human life is a continuum from conception to natural death, the mission of Massachusetts Citizens for Life is to restore respect for human life and to defend the right to life of all human beings, born and preborn. We will influence public policy at the local, state, and national levels through comprehensive educational, legislative, political, and charitable activities.

COMING EVENTS

RALLY DAY AT THE STATE HOUSE

March 9

WORCESTER CATHOLIC MEN'S CONFERENCE

March 21

LIFE SURGE BOSTON

April 18

MASSHOPE HOMESCHOOL CONVENTION

April 23-25

YOUNG ADULT CHAPTER DAY OF SERVICE

April 25

TRUTH ABOUT CHOICE

April 12

Pioneer Valley

May 2

Boston Common

PRO-LIFE BOOTH AT THE BIG E

September 18 - October 4

West Springfield

ANNUAL BANQUET

Riley Gaines Keynote Speaker

September 25

Newton Marriott



Riley Gaines will be the keynote speaker at
MCFL's 2026 Banquet on September 25