

Defunding Planned Parenthood not a hard budget choice, cardinal says

WASHINGTON - At a time when federal budget decisions “involve hard choices and much shared sacrifice,” a decision on whether to fund the Planned Parenthood Federation of America “is not one of those hard choices,” the chairman of the U.S. bishops’ Committee on Pro-Life Activities told members of Congress.

Calling the federation “by far the largest provider and promoter of abortions nationwide,” Cardinal Daniel N. DiNardo of Galveston-Houston in an April 13 letter urged support for House Concurrent Resolution, which would amend federal appropriations bills for the current fiscal year to exclude any funding for Planned Parenthood or its affiliates.

The concurrent resolution, sponsored by Republican Reps. Diane Black of Tennessee and Martha Roby of Alabama, passed in the House by a 241-185 vote April 14 but was defeated in the Senate, 58-42, later that day.

Cardinal DiNardo said more than 5 million children have been aborted at Planned Parenthood facilities since 1970. “The organization’s involvement in abortion (now including chemical abortions using RU-486) has substantially increased in recent years, and its provision of other services such as prenatal care and adoption referrals has declined markedly,” he added.

Planned Parenthood also has opposed “any meaningful limits on abortion, including modest measures such as public funding bans, informed consent provisions and parental notice requirements on unemancipated minors,” the cardinal said, noting that one of the organization’s legislative priorities “is to oppose conscience clauses (which it call ‘refusal clauses’), so that hospitals, physicians and nurses will not be allowed to serve the health care needs of women without taking part in abortion.”

Although some argue that the debate over Planned Parenthood funding is about “women’s access to basic health care,” Cardinal DiNardo said Catholic and other faith-based health care providers “generally do provide mammograms,

comprehensive prenatal care and maternity care as well as other life-affirming medical care for women, while Planned Parenthood does not.”

“To the extent that Planned Parenthood does provide any legitimate health services for women, however, those services can be provided by others,” since the concurrent resolution “does not reduce funding for services by one cent,” he added.

“Therefore the question at issue here is: When low-income women need those legitimate health care services, should the federal government insist that they receive them from the local abortion provider?” he said. “Low-income women generally oppose abortion more than other Americans, therefore more deeply oppose being told that an abortion clinic is a ‘good enough’ place for them to receive their health care.”