THE WHITE HOUSE
WASHINGTON

February 26, 1996

MR. PRESIDENT:

Here are the partial birth abortion letters for the chairmen and ranking members of the House and Senate Judiciary Committees.

This is text you have already signed off on. One word change has been made, in consultation with George, Leon and Jack: in the second to last paragraph, the word "election" has been replaced with "selection" out of concern that "election" is too close to "elective" and might confuse the issue of when you believe the procedure should be permitted (i.e., only when the *procedure itself* is deemed necessary to save the woman's life or avoid serious adverse health consequences -- even though the decision to have the abortion in the first place might have been elective rather than medically required).

**The letters will be dispatched tomorrow, after Alexis and others have had an opportunity to make the appropriate calls. We should not say anything about the letters until tomorrow.**

Todd Stern

THE WHITE HOUSE

WASHINGTON

The Honorable Orrin G. Hatch
United States Senate
Washington, D.C. 20510

Dear Senator Hatch:

I understand that the House is preparing to consider H.R. 1833, as amended by the Senate, which would prohibit doctors from performing a certain type of abortion. I want to make the Congress aware of my position on this extremely complex issue.

I have always believed that the decision to have an abortion should be between a woman, her conscience, her doctor, and her God. I strongly believe that legal abortions -- those abortions that the Supreme Court ruled in Roe v. Wade must be protected -- should be safe and rare. I have long opposed late-term abortions except, as the law requires, where they are necessary to protect the life of the mother or where there is a threat to her health. In fact, as Governor of Arkansas, I signed into law a bill that barred third trimester abortions except where they were necessary to protect the life or health of the woman, consistent with the Supreme Court's rulings.

The procedure described in H.R. 1833 is very disturbing, and I cannot support its use on an elective basis, where the abortion is being performed for non-health related reasons and there are equally safe medical procedures available. As I understand it, however, there are rare and tragic situations that can occur in a woman's pregnancy in which, in a doctor's medical judgment, the use of this procedure may be necessary to save a woman's life or to preserve her health. In those situations, the Constitution requires that a woman's ability to choose this procedure be protected.

I have studied and prayed about this issue, and about the families who must face this awful choice, for many months. I believe that we have a duty to try to find common ground: a resolution to this issue that respects the views of those -- including myself -- who object to this particular procedure, but also upholds the Supreme Court's requirement that laws regulating abortion protect both the life and the health of American women.

I have concluded that H.R. 1833 as drafted does not meet the constitutional requirements that the Supreme Court has imposed upon us, in Roe and the decisions that have followed it, to provide protections for both the life and the health of the mother in any laws regulating abortions.

I am prepared to support H.R. 1833, however, if it is amended to make clear that the prohibition of this procedure does not apply to situations in which the selection of the procedure, in the medical judgment of the attending physician, is necessary to preserve the life of the woman or avert serious adverse health consequences to the woman.

I urge the Congress to amend H.R. 1833 to ensure that it protects the life and the health of the woman, as the law we have been elected to uphold requires.

Sincerely,

THE WHITE HOUSE

WASHINGTON

The Honorable Joseph R. Biden, Jr.
United States Senate
Washington, D.C. 20510

Dear Joe:

I understand that the House is preparing to consider H.R. 1833, as amended by the Senate, which would prohibit doctors from performing a certain type of abortion. I want to make the Congress aware of my position on this extremely complex issue.

I have always believed that the decision to have an abortion should be between a woman, her conscience, her doctor, and her God. I strongly believe that legal abortions -- those abortions that the Supreme Court ruled in Roe v. Wade must be protected -- should be safe and rare. I have long opposed late-term abortions except, as the law requires, where they are necessary to protect the life of the mother or where there is a threat to her health. In fact, as Governor of Arkansas, I signed into law a bill that barred third trimester abortions except where they were necessary to protect the life or health of the woman, consistent with the Supreme Court's rulings.

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Sincerely,

THE WHITE HOUSE

WASHINGTON

The Honorable Henry J. Hyde
House of Representatives
Washington, D.C. 20515

Dear Mr. Chairman:

I understand that the House is preparing to consider H.R. 1833, as amended by the Senate, which would prohibit doctors from performing a certain type of abortion. I want to make the Congress aware of my position on this extremely complex issue.

I have always believed that the decision to have an abortion should be between a woman, her conscience, her doctor, and her God. I strongly believe that legal abortions -- those abortions that the Supreme Court ruled in Roe v. Wade must be protected -- should be safe and rare. I have long opposed late-term abortions except, as the law requires, where they are necessary to protect the life of the mother or where there is a threat to her health. In fact, as Governor of Arkansas, I signed into law a bill that barred third trimester abortions except where they were necessary to protect the life or health of the woman, consistent with the Supreme Court's rulings.

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Sincerely,

THE WHITE HOUSE

WASHINGTON

The Honorable John Conyers, Jr.
House of Representatives
Washington, D.C. 20515

Dear John:

I understand that the House is preparing to consider H.R. 1833, as amended by the Senate, which would prohibit doctors from performing a certain type of abortion. I want to make the Congress aware of my position on this extremely complex issue.

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I urge the Congress to amend H.R. 1833 to ensure that it protects the life and the health of the woman, as the law we have been elected to uphold requires.

Sincerely,

THE WHITE HOUSE

WASHINGTON

April 10, 1996

The Reverend Anthony Mangun
3411 Bayou Rapides Road
Alexandria, Louisiana 71303

Dear Anthony:

I wanted to let you know my thoughts regarding H.R. 1833, a bill banning a certain abortion procedure.

This is a difficult and disturbing issue, one which I have studied and prayed about for many months. I am against late-term abortions and have long opposed them, except where necessary to protect the life or health of the mother. As Governor of Arkansas, I signed into law a bill that barred third trimester abortions, with an appropriate exception for life or health, and I would sign such a bill now if it were presented to me.

Indeed, when I first heard the procedure referred to in H.R. 1833 described, I thought I would support the bill. But as I studied the matter and learned more about it, I came to understand that this is a rarely used procedure, justifiable as a last resort when doctors judge it necessary to save a woman's life or to avert serious health consequences to her.

In the past months, I have learned of several cases of women who desperately wanted to have their babies, who were devastated to learn that their babies had fatal conditions and would not live, who wanted anything other than an abortion, but who were advised by their doctors that this procedure was their best chance to avert the risk of death or grave harm which, in some cases, would have included an inability to ever bear children again. For these women, this was not about choice. This was not about having a headache or fitting into a prom dress, as some have regrettably suggested. This was not about choosing against having a child. These babies were certain to perish before, during or shortly after birth. The only question was how much grave damage was going to be done to the woman.

In short, I do not support the use of this procedure on an elective basis where it is not necessary to save the life of the woman or prevent serious risks to her health.

That is why I implored Congress to add a limited exemption for the small number of compelling cases where use of the procedure is necessary to avoid serious health consequences. The life exception in the current bill fails to cover cases where the doctor believes not that the mother's death is probable, but rather that, without the procedure, serious physical harm, often including losing the ability to have more children, is very likely to occur. I want to say again that if Congress will amend the bill as I have suggested, remedying its constitutional and human defect, I will sign the bill.

Again, I thank you for your concern. These are painful and sobering issues. I understand your desire to eliminate the use of a procedure you see as inhumane. But to eliminate it without taking into consideration the rare and tragic circumstances in which its use may be necessary would be, in my judgment, even more inhumane.

Although I know you disagree with me on this matter, I hope we can continue our dialogue and continue to work together on the broad array of issues on which we do agree. I need your help and your insight.

Sincerely,

Bill Clinton

THE WHITE HOUSE

WASHINGTON

April 10, 1996

Mr. Don Argue
President
National Association
of Evangelicals
450 Gunderson Drive
Carol Stream, Illinois 60188

Dear Don:

I wanted to thank you for your thoughts regarding H.R. 1833, a bill banning a certain abortion procedure.

This is a difficult and disturbing issue, one which as you know I have studied and prayed about for many months. I am against late-term abortions and have long opposed them, except where necessary to protect the life or health of the mother. As Governor of Arkansas, I signed into law a bill that barred third trimester abortions, with an appropriate exception for life or health, and I would sign such a bill now if it were presented to me.

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Sincerely,

Bill Clinton

THE WHITE HOUSE

WASHINGTON

April 10, 1996

The Reverend Gordon MacDonald
Grace Chapel
Three Militia Drive
Lexington, Massachusetts 02173

Dear Gordon:

I want to thank you for your letter on H.R. 1833. I appreciate and considered the strong moral convictions you expressed.

This is a difficult and disturbing issue, one which I have studied and prayed about for many months. I am against late-term abortions and have long opposed them, except where necessary to protect the life or health of the mother. As Governor of Arkansas, I signed into law a bill that barred third trimester abortions, with an appropriate exception for life or health, and I would sign such a bill now if it were presented to me.

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Sincerely,

Bill Clinton

THE WHITE HOUSE

WASHINGTON

April 10, 1996

The Reverend Fred C. Kammer, S.J.
President
Catholic Charities USA
Suite 200
1731 King Street
Alexandria, Virginia 22314

Dear Fred:

I want to thank you for your letter on H.R. 1833. I appreciate and considered the strong moral convictions you expressed.

This is a difficult and disturbing issue, one which I have studied and prayed about for many months. I am against late-term abortions and have long opposed them, except where necessary to protect the life or health of the mother. As Governor of Arkansas, I signed into law a bill that barred third trimester abortions, with an appropriate exception for life or health, and I would sign such a bill now if it were presented to me.

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Sincerely,

Bill Clinton

THE WHITE HOUSE

WASHINGTON

April 10, 1996

Mr. Greg Warner
Associated Baptist Press
Post Office Box 23769
Jacksonville, Florida 32241

Dear Greg:

I wanted to let you know my thoughts regarding H.R. 1833, a bill banning a certain abortion procedure. I understand that you feel very strongly about this matter.

This is a difficult and disturbing issue, one which I have studied and prayed about for many months. I am against late-term abortions and have long opposed them, except where necessary to protect the life or health of the mother. As Governor of Arkansas, I signed into law a bill that barred third trimester abortions, with an appropriate exception for life or health, and I would sign such a bill now if it were presented to me.

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Sincerely,

Bill Clinton

THE WHITE HOUSE

WASHINGTON

April 10, 1996

The Reverend Bill Hybels
Willow Creek Community Church
67 East Algonquin Road
South Barrington, Illinois 60010

Dear Bill:

I want to thank you for your letter on H.R. 1833. I appreciate and considered the strong moral convictions you expressed.

This is a difficult and disturbing issue, one which I have studied and prayed about for many months. I am against late-term abortions and have long opposed them, except where necessary to protect the life or health of the mother. As Governor of Arkansas, I signed into law a bill that barred third trimester abortions, with an appropriate exception for life or health, and I would sign such a bill now if it were presented to me.

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Sincerely,

Bill Clinton

THE WHITE HOUSE

WASHINGTON

April 10, 1996

The Reverend Rex M. Horne, Jr.
Immanuel Baptist Church
1000 Bishop Street
Little Rock, Arkansas 72202

Dear Rex:

I wanted to let you know my thoughts regarding H.R. 1833, a bill banning a certain abortion procedure. I know that you feel very strongly about this matter.

This is a difficult and disturbing issue, one which I have studied and prayed about for many months. I am against late-term abortions and have long opposed them, except where necessary to protect the life or health of the mother. As Governor of Arkansas, I signed into law a bill that barred third trimester abortions, with an appropriate exception for life or health, and I would sign such a bill now if it were presented to me.

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Sincerely,

Bill Clinton

THE WHITE HOUSE

WASHINGTON

April 10, 1996

Mr. Herb Hollinger
Baptist Press
Suite 750
901 Commerce Street
Nashville, Tennessee 37203-3699

Dear Herb:

I wanted to let you know my thoughts regarding H.R. 1833, a bill banning a certain abortion procedure. I understand that you feel very strongly about this matter.

This is a difficult and disturbing issue, one which I have studied and prayed about for many months. I am against late-term abortions and have long opposed them, except where necessary to protect the life or health of the mother. As Governor of Arkansas, I signed into law a bill that barred third trimester abortions, with an appropriate exception for life or health, and I would sign such a bill now if it were presented to me.

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Although I know you disagree with me on this matter, I hope we can continue our dialogue and continue to work together on the broad array of issues on which we do agree. I need your help and your insight.

Sincerely,

Bill Clinton

THE WHITE HOUSE

WASHINGTON

April 10, 1996

The Reverend Jim Henry
First Baptist Church
3701 L. B. McLeod Road
Orlando, Florida 32805-6691

Dear Jim:

I wanted to let you know my thoughts regarding H.R. 1833, a bill banning a certain abortion procedure. I understand that you feel very strongly about this matter.

This is a difficult and disturbing issue, one which I have studied and prayed about for many months. I am against late-term abortions and have long opposed them, except where necessary to protect the life or health of the mother. As Governor of Arkansas, I signed into law a bill that barred third trimester abortions, with an appropriate exception for life or health, and I would sign such a bill now if it were presented to me.

Indeed, when I first heard the procedure referred to in H.R. 1833 described, I thought I would support the bill. But as I studied the matter and learned more about it, I came to understand that this is a rarely used procedure, justifiable as a last resort when doctors judge it necessary to save a woman's life or to avert serious health consequences to her.

In the past months, I have learned of several cases of women who desperately wanted to have their babies, who were devastated to learn that their babies had fatal conditions and would not live, who wanted anything other than an abortion, but who were advised by their doctors that this procedure was their best chance to avert the risk of death or grave harm which, in some cases, would have included an inability to ever bear children again. For these women, this was not about choice. This was not about having a headache or fitting into a prom dress, as some have regrettably suggested. This was not about choosing against having a child. These babies were certain to perish before, during or shortly after birth. The only question was how much grave damage was going to be done to the woman.

In short, I do not support the use of this procedure on an elective basis where it is not necessary to save the life of the woman or prevent serious risks to her health.

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Sincerely,

Bill Clinton

THE WHITE HOUSE
WASHINGTON, D.C.

The Honorable Raymond L. Flynn
American Ambassador
The Vatican
APO AE 09624

The Honorable Raymond L. Flynn
American Ambassador
The Vatican

Dear Ray:

I want to thank you for your letter on H.R. 1833. I appreciate and considered the strong moral convictions you expressed.

This is a difficult and disturbing issue, one which I have studied and prayed about for many months. I am against late-term abortions and have long opposed them, except where necessary to protect the life or health of the mother. As Governor of Arkansas, I signed into law a bill that barred third trimester abortions, with an appropriate exception for life or health, and I would sign such a bill now if it were presented to me.

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Sincerely,

Bill Clinton

THE WHITE HOUSE

WASHINGTON

April 10, 1996

The Reverend Anthony Campolo
Eastern College
10 Fairview Drive
St. Davids, Pennsylvania 19087

Dear Tony:

I wanted to let you know my thoughts regarding H.R. 1833, a bill banning a certain abortion procedure. I know that you feel very strongly about this matter.

This is a difficult and disturbing issue, one which I have studied and prayed about for many months. I am against late-term abortions and have long opposed them, except where necessary to protect the life or health of the mother. As Governor of Arkansas, I signed into law a bill that barred third trimester abortions, with an appropriate exception for life or health, and I would sign such a bill now if it were presented to me.

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Sincerely,

Bill Clinton

THE WHITE HOUSE

WASHINGTON

April 10, 1996

Kate Britton
8708 Brook Road
McLean, Virginia 22102

Dear Kate:

I want to thank you for your letter on H.R. 1833. I appreciate and considered the strong moral convictions you expressed.

This is a difficult and disturbing issue, one which I have studied and prayed about for many months. I am against late-term abortions and have long opposed them, except where necessary to protect the life or health of the mother. As Governor of Arkansas, I signed into law a bill that barred third trimester abortions, with an appropriate exception for life or health, and I would sign such a bill now if it were presented to me.

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Sincerely,

Bill Clinton

THE WHITE HOUSE

WASHINGTON

April 10, 1996

His Eminence Roger Cardinal Mahony
Archbishop of Los Angeles
1531 West Ninth Street
Los Angeles, California 90015-1194

Dear Cardinal Mahony:

I want to thank you for your letter on H.R. 1833. I appreciate and considered the strong moral convictions you expressed.

This is a difficult and disturbing issue, one which I have studied and prayed about for many months. I am against late-term abortions and have long opposed them, except where necessary to protect the life or health of the mother. As Governor of Arkansas, I signed into law a bill that barred third trimester abortions, with an appropriate exception for life or health, and I would sign such a bill now if it were presented to me.

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Although I know you disagree with me on this matter, I hope we can continue our dialogue and continue to work together on the broad array of issues on which we do agree. I need your help and your insight.

Sincerely,

Bill Clinton

THE WHITE HOUSE

WASHINGTON

April 10, 1996

His Eminence Bernard Cardinal Law
Archbishop of Boston
Cardinal's Residence
2101 Commonwealth Avenue
Brighton, Massachusetts 02135

Dear Cardinal Law:

I want to thank you for your letter on H.R. 1833. I appreciate and considered the strong moral convictions you expressed.

This is a difficult and disturbing issue, one which I have studied and prayed about for many months. I am against late-term abortions and have long opposed them, except where necessary to protect the life or health of the mother. As Governor of Arkansas, I signed into law a bill that barred third trimester abortions, with an appropriate exception for life or health, and I would sign such a bill now if it were presented to me.

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Although I know you disagree with me on this matter, I hope we can continue our dialogue and continue to work together on the broad array of issues on which we do agree. I need your help and your insight.

Sincerely,

Bill Clinton

THE WHITE HOUSE

WASHINGTON

April 10, 1996

His Eminence James Cardinal Hickey
Archbishop of Washington
Post Office Box 29260
Washington, D.C. 20017

Dear Cardinal Hickey:

I want to thank you for your letters on H.R. 1833. I appreciate and considered the strong moral convictions you expressed.

This is a difficult and disturbing issue, one which I have studied and prayed about for many months. I am against late-term abortions and have long opposed them, except where necessary to protect the life or health of the mother. As Governor of Arkansas, I signed into law a bill that barred third trimester abortions, with an appropriate exception for life or health, and I would sign such a bill now if it were presented to me.

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Although I know you disagree with me on this matter, I hope we can continue our dialogue and continue to work together on the broad array of issues on which we do agree. I need your help and your insight.

Sincerely,

Bill Clinton

THE WHITE HOUSE

WASHINGTON

April 10, 1996

His Eminence Joseph Cardinal Bernardin
Archbishop of Chicago
Post Office Box 1979
Chicago, Illinois 60690

Dear Cardinal Bernardin:

I want to thank you for your letter on H.R. 1833. I appreciate and considered the strong moral convictions you expressed.

This is a difficult and disturbing issue, one which I have studied and prayed about for many months. I am against late-term abortions and have long opposed them, except where necessary to protect the life or health of the mother. As Governor of Arkansas, I signed into law a bill that barred third trimester abortions, with an appropriate exception for life or health, and I would sign such a bill now if it were presented to me.

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Although I know you disagree with me on this matter, I hope we can continue our dialogue and continue to work together on the broad array of issues on which we do agree. I need your help and your insight.

Sincerely,

Bill Clinton

**Partial Birth Letter**
(4/17[2]/96)

A great deal has been written in recent days and weeks about legislation banning a certain abortion procedure, commonly referred to in the press as partial birth abortion. In late March, Congress passed that legislation, H.R. 1833, and on April 10, I vetoed it because of its failure, in certain rare and compelling cases, to prevent serious threats to women's health.

My position on this bill has been widely misrepresented and misunderstood. Some, including those more interested in creating a political issue than in putting real, meaningful limits on the use of this procedure, have deliberately distorted my views. But I know that a great many people of good faith -- and of all faiths -- are sincerely perplexed about the veto. It is to these people that I address these comments -- not because I believe that you will necessarily come to share my view, but so that you will understand the genuine basis of my position.

Let me begin with a word of background. I am against late-term abortions and have long opposed them, except, as the Supreme Court requires, where necessary to protect the life or health of the mother. As Governor of Arkansas, I signed into law a bill that barred third trimester abortions, with an appropriate exception for life or health, and I would sign a bill to do the same thing at the federal level if it were presented to me.

The particular procedure aimed at in H.R. 1833 -- generally referred to by doctors as dilation and evacuation -- poses a most difficult and disturbing issue, one which I studied and prayed about for many months. Indeed, when I first heard a description of this procedure, I anticipated that I would support the bill. But after I studied the matter and learned more about it, I came to believe that this rarely used procedure is justifiable as a last resort when doctors judge it necessary to save a woman's life or to avert serious consequences to her health.

Last week, I was joined in the White House by five women who desperately wanted to have their babies and were devastated to learn that their babies had fatal conditions and would not live. These women wanted anything other than an abortion, but were advised by their doctors that this procedure was their best chance to avert the risk of death or grave harm which, in some cases, would have included an inability to bear children. These women gave moving, powerful testimony. For them, this was not about choice. This was not about choosing against having a child. Their babies were certain to perish before, during or shortly after birth. The only question was how much grave damage they were going to suffer. Here is what one of them had to say:

> "Our little boy had...hydrocephaly. All the doctors told us there was no hope. We asked about in utero surgery, about shunts to remove the fluid, but there was absolutely nothing

we could do. I cannot express the pain we still feel. This was our precious little baby, and he was being taken from us before we even had him. This was not our choice, for not only was our son going to die, but the complications of the pregnancy put my health in danger, as well. If I carried to term, he might die in utero, and the resulting toxins could cause a hemorrhage and possibly a hysterectomy. The hydrocephaly also meant that a natural labor risked rupturing my cervix and my uterus."

Some have raised the question whether, as a matter of medical practice, this procedure is ever the safest for a woman. I can only say that there are many doctors -- some of whom testified before Congress -- who believe that this procedure is, in certain rare cases, the safest one to use. In those rare cases, where a woman's serious health interests are at stake, I believe her doctors, in the best exercise of their medical judgment, should have the option to use the procedure.

The problem with H.R. 1833 is that it provides an exception to the ban on this procedure only when a doctor can be certain that a woman's life is at risk, but not when the doctor is sure that she faces real, grave risks to her health.

Let me be clear. I do not contend that this procedure, today, is always used in circumstances that meet my standard -- namely, that the procedure must be necessary to prevent death or serious adverse health consequences. The procedure may well be used in situations where a woman's serious health interests are not at issue. But I do not support such uses, I do not defend them, and I would sign appropriate legislation banning them.

At the same time, I cannot and will not countenance a ban on this procedure in those cases where it represents the best hope for a woman to avoid serious risks to her health. I recognize that there are those who believe it appropriate to force a woman to endure real, serious risks to her health -- including, sometimes, the loss of her ability to bear children -- in order to deliver a baby who is already dead or about to die. But I am not among them.

I also understand that many who support this bill believe that any health exception is untenable. In a letter sent to me on April 16 by our leading Catholic Cardinals, they contend that a "health" exception for the use of this procedure could be used to cover most anything -- for example, youth, emotional stress, financial hardship or inconvenience.

*That is not the kind of exception I support.* I support an exception that takes effect *only* where a woman faces real, serious adverse health consequences. Those who oppose this procedure may wish to cite cases where fraudulent health reasons are relied upon as an excuse -- excuses I could never condone. But people of good faith must recognize that there are also cases

where the health risks facing a woman are deadly serious and real. *It is in those cases that I believe an exception to the general ban on the procedure must be allowed.*

Further, I flatly reject the view of those who suggest that it is impossible to draft a bill imposing real, stringent limits on the use of this procedure -- a bill making absolutely clear that the procedure may be used only in cases where a woman risks death or serious damage to her health, and in no other case. I know that it is not beyond the ingenuity of Congress, working together with this Administration, to fashion such a bill.

Indeed, that is why I implored Congress, by letter dated February 28, to add a limited exemption for the small number of compelling cases where use of the procedure is necessary to avoid serious health consequences. Congress ignored my proposal and did so, I am afraid, because there are too many there who prefer creating a political issue to solving a human problem. But I reiterate my offer now: if Congress will work with me to produce a bill that meets the concerns outlined in this letter, I will sign it the moment it reaches my desk.

As I said at the outset of this letter, I know that many people will continue to disagree with me about this issue. But they should all know the truth about where I stand: I do not support the use of this procedure on demand. I do not support the use of this procedure on the strength of mild or fraudulent health complaints. But I do believe that we cannot abandon women, like the women I spoke with, whose doctors advise them that they need the procedure to avoid serious injury. That, in my judgment, would be the true inhumanity.

I continue to hope that a solution can be reached on this painful issue. I hope as well that the deep dialogue between my Administration and people of faith can continue with regard to the broad array of issues on which we have worked and are working together.

Sincerely,

Mrs. Norris Love
1175 Pelham Road
Winnetka, IL 60093

President Bill Clinton
The White House
Washington, D.C.

Dear Mr. President:

Congratulations and thank you for vetoing that horrible anti-choice dilation-and-evacuation bill!

As I said when I met with you at The White House in December, Republican Women must hear loudly that you are the pro-choice candidate in 1996, that you are the one who will protect their fundamental rights. I hope that your message which accompanies your veto will strongly emphasize those points.

I'm a life-long, fourth generation Republican. I worked and voted for your election in 1992 and, because of your continued commitment to choice, plan to work and vote for you again this year.

Sincerely,

Marcena W. Love

BOB DOLE
KANSAS

# United States Senate

OFFICE OF THE REPUBLICAN LEADER
WASHINGTON, DC 20510-7010

96 FEB 29 All :18

February 28, 1996

The President
The White House
Washington, D.C. 20500

Dear Mr. President:

Senator Hatch today shared with me your letter regarding your position on H.R. 1833, the "Partial-Birth Abortion Act." I must say I am very disappointed in your response, and urge you to rethink your position so that we can stop this brutal and indefensible procedure.

Although your letter indicates that you view partial birth abortions as "very disturbing," you then indicate that you would only support the bill if it was amended to provide for an exception in the case of "serious adverse health consequences." As I wrote to you in my letter of January 17, 1996, this argument has already lost on the Senate floor and for good reason: this type of abortion procedure takes place over several days and there was testimony before Congress, as a result, that "health" is simply not an issue. Clearly, "health" continues to be defined by those with the most extreme abortion agenda in ways that would ensure that this exception swallows the rule.

Moreover, Senator Bob Smith and I offered an amendment, which was accepted, that provides for an exception in the case of "a mother whose life is endangered by a physical disorder, illness, or injury." A broader exception would simply defeat the purpose of the bill, which is to stop this grisly procedure.

You also suggest that you do not support this procedure on "an elective basis." But just a cursory glance at the record shows that this is exactly what is being done, and what your suggested change would protect. One doctor has admitted publicly that of the cases where he uses this procedure -- more than 1,000 apparently -- "80% are purely elective." Many of these are done for "health" reasons that turn out to be no such thing.

Mr. President, I call attention to these facts, all a matter of the public record, in the hopes that you will reconsider your position. Please sign this legislation when it reaches your desk.

Sincerely,

BOB DOLE

Jeremy Ben-Ami
DPC

TO: Hillary Rodham Clinton
FROM: Jennifer Klein
DATE: 4/8/96
RE: H.R. 1833

You are holding letters to Cardinal Hickey and Mother Teresa about H.R. 1833 (the so-called "partial birth" abortion bill). I wanted to let you know that the President is scheduled to sign the bill on Thursday.

In addition, Cardinal Hickey sent a letter to the President in December. A draft response was prepared and sent to the President, but the President didn't sign it. Hickey has sent two subsequent letters, and Melanne has heard from Father Donovan at Georgetown that Cardinal Hickey is unhappy about having received no response from the President. Staff Secretary is planning to send the President a new response to Cardinal Hickey.

THE WHITE HOUSE
WASHINGTON

April 8, 1996

MR. PRESIDENT:

As you may recall, Cardinal Hickey sent you a letter on the partial birth abortion issue in December. A draft response was prepared and sent up to you, but you didn't sign it. Hickey then sent a letter in February (which I did not see until last week) and another on April 1.

Melanne has now heard from Father Donovan at Georgetown that Cardinal Hickey is quite unhappy about having received no response from you.

It is obvious that Hickey is never going to be pleased with your position, but it is probably not a good idea to compound this problem by giving him cause to say he didn't even get a response to his letters. Consequently, I have tried my hand at preparing a new letter for you.

Todd Stern

ARCHDIOCESE OF WASHINGTON

5001 EASTERN AVENUE
POST OFFICE BOX 29260
WASHINGTON, D.C. 20017

OFFICE OF THE ARCHBISHOP

April 1, 1996

Dear Mr. President,

I make one last urgent appeal that you sign into law the Partial Birth Abortion Ban Act.

I beg you to do this because the late term procedure takes the life of the child in a particularly heinous fashion. This procedure is repugnant, even to many so-called "pro-choice" physicians, since it so clearly involves the slaying of a developed child already partially born.

Mr. President, for you to veto this legislation during a time so sacred to the Christian and Jewish traditions is a true slap in the face to all those who believe in the sanctity of life. Moreover, many other people not of these traditions grasp the wrongness of partial birth abortions. As President of all the people, please do not allow the strongly entrenched and well financed campaign of Planned Parenthood and other allied groups to negate, not only the will of Congress, but indeed the will of the clear majority of Americans.

Sincerely in Christ,

James Card. Hickey

Archbishop of Washington

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The President of the United States
The White House
Washington, D.C.

MEMORANDUM 96 APR 1 P6:10

**TO:** PRESIDENT CLINTON

**FROM:** JOHN HART, Deputy Assistant to the President and Deputy Director of Intergovernmental Affairs

**DATE:** APRIL 1, 1996

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Cardinal Hickey asked me to personally convey the attached letter to you.

I also want to let you know that at six o'clock this evening members of the Catholic community will hold a vigil on the abortion legislation outside the White House. The vigil will be led by Cardinals Hickey, Law and Bernardin, as well as other prominent archbishops. The vigil reflects the depth of feeling within the Catholic community.

THE WHITE HOUSE

WASHINGTON

**February 28, 1996**

The Honorable Henry J. Hyde
House of Representatives
Washington, D.C. 20515

Dear Mr. Chairman:

I understand that the House is preparing to consider H.R. 1833, as amended by the Senate, which would prohibit doctors from performing a certain type of abortion. I want to make the Congress aware of my position on this extremely complex issue.

I have always believed that the decision to have an abortion should be between a woman, her conscience, her doctor, and her God. I strongly believe that legal abortions -- those abortions that the Supreme Court ruled in Roe v. Wade must be protected -- should be safe and rare. I have long opposed late-term abortions except, as the law requires, where they are necessary to protect the life of the mother or where there is a threat to her health. In fact, as Governor of Arkansas, I signed into law a bill that barred third trimester abortions except where they were necessary to protect the life or health of the woman, consistent with the Supreme Court's rulings.

The procedure described in H.R. 1833 is very disturbing, and I cannot support its use on an elective basis, where the abortion is being performed for non-health related reasons and there are equally safe medical procedures available. As I understand it, however, there are rare and tragic situations that can occur in a woman's pregnancy in which, in a doctor's medical judgment, the use of this procedure may be necessary to save a woman's life or to preserve her health. In those situations, the Constitution requires that a woman's ability to choose this procedure be protected.

I have studied and prayed about this issue, and about the families who must face this awful choice, for many months. I believe that we have a duty to try to find common ground: a resolution to this issue that respects the views of those -- including myself -- who object to this particular procedure, but also upholds the Supreme Court's requirement that laws regulating abortion protect both the life and the health of American women.

I have concluded that H.R. 1833 as drafted does not meet the constitutional requirements that the Supreme Court has imposed upon us, in Roe and the decisions that have followed it, to provide protections for both the life and the health of the mother in any laws regulating abortions.

I am prepared to support H.R. 1833, however, if it is amended to make clear that the prohibition of this procedure does not apply to situations in which the selection of the procedure, in the medical judgment of the attending physician, is necessary to preserve the life of the woman or avert serious adverse health consequences to the woman.

I urge the Congress to amend H.R. 1833 to ensure that it protects the life and the health of the woman, as the law we have been elected to uphold requires.

Sincerely,

Bill Clinton

THE WHITE HOUSE

WASHINGTON

**February 28, 1996**

The Honorable Joseph R. Biden, Jr.
United States Senate
Washington, D.C. 20510

Dear Joe:

I understand that the House is preparing to consider H.R. 1833, as amended by the Senate, which would prohibit doctors from performing a certain type of abortion. I want to make the Congress aware of my position on this extremely complex issue.

I have always believed that the decision to have an abortion should be between a woman, her conscience, her doctor, and her God. I strongly believe that legal abortions -- those abortions that the Supreme Court ruled in Roe v. Wade must be protected -- should be safe and rare. I have long opposed late-term abortions except, as the law requires, where they are necessary to protect the life of the mother or where there is a threat to her health. In fact, as Governor of Arkansas, I signed into law a bill that barred third trimester abortions except where they were necessary to protect the life or health of the woman, consistent with the Supreme Court's rulings.

The procedure described in H.R. 1833 is very disturbing, and I cannot support its use on an elective basis, where the abortion is being performed for non-health related reasons and there are equally safe medical procedures available. As I understand it, however, there are rare and tragic situations that can occur in a woman's pregnancy in which, in a doctor's medical judgment, the use of this procedure may be necessary to save a woman's life or to preserve her health. In those situations, the Constitution requires that a woman's ability to choose this procedure be protected.

I have studied and prayed about this issue, and about the families who must face this awful choice, for many months. I believe that we have a duty to try to find common ground: a resolution to this issue that respects the views of those -- including myself -- who object to this particular procedure, but also upholds the Supreme Court's requirement that laws regulating abortion protect both the life and the health of American women.

I have concluded that H.R. 1833 as drafted does not meet the constitutional requirements that the Supreme Court has imposed upon us, in Roe and the decisions that have followed it, to provide protections for both the life and the health of the mother in any laws regulating abortions.

I am prepared to support H.R. 1833, however, if it is amended to make clear that the prohibition of this procedure does not apply to situations in which the selection of the procedure, in the medical judgment of the attending physician, is necessary to preserve the life of the woman or avert serious adverse health consequences to the woman.

I urge the Congress to amend H.R. 1833 to ensure that it protects the life and the health of the woman, as the law we have been elected to uphold requires.

Sincerely,

Bill Clinton

THE WHITE HOUSE

WASHINGTON

**February 28, 1996**

The Honorable Orrin G. Hatch
United States Senate
Washington, D.C. 20510

Dear Senator Hatch:

I understand that the House is preparing to consider H.R. 1833, as amended by the Senate, which would prohibit doctors from performing a certain type of abortion. I want to make the Congress aware of my position on this extremely complex issue.

I have always believed that the decision to have an abortion should be between a woman, her conscience, her doctor, and her God. I strongly believe that legal abortions -- those abortions that the Supreme Court ruled in Roe v. Wade must be protected -- should be safe and rare. I have long opposed late-term abortions except, as the law requires, where they are necessary to protect the life of the mother or where there is a threat to her health. In fact, as Governor of Arkansas, I signed into law a bill that barred third trimester abortions except where they were necessary to protect the life or health of the woman, consistent with the Supreme Court's rulings.

The procedure described in H.R. 1833 is very disturbing, and I cannot support its use on an elective basis, where the abortion is being performed for non-health related reasons and there are equally safe medical procedures available. As I understand it, however, there are rare and tragic situations that can occur in a woman's pregnancy in which, in a doctor's medical judgment, the use of this procedure may be necessary to save a woman's life or to preserve her health. In those situations, the Constitution requires that a woman's ability to choose this procedure be protected.

I have studied and prayed about this issue, and about the families who must face this awful choice, for many months. I believe that we have a duty to try to find common ground: a resolution to this issue that respects the views of those -- including myself -- who object to this particular procedure, but also upholds the Supreme Court's requirement that laws regulating abortion protect both the life and the health of American women.

I have concluded that H.R. 1833 as drafted does not meet the constitutional requirements that the Supreme Court has imposed upon us, in Roe and the decisions that have followed it, to provide protections for both the life and the health of the mother in any laws regulating abortions.

I am prepared to support H.R. 1833, however, if it is amended to make clear that the prohibition of this procedure does not apply to situations in which the selection of the procedure, in the medical judgment of the attending physician, is necessary to preserve the life of the woman or avert serious adverse health consequences to the woman.

I urge the Congress to amend H.R. 1833 to ensure that it protects the life and the health of the woman, as the law we have been elected to uphold requires.

Sincerely,

Bill Clinton

THE WHITE HOUSE

WASHINGTON

February 28, 1996

The Honorable John Conyers, Jr.
House of Representatives
Washington, D.C. 20515

Dear John:

I understand that the House is preparing to consider H.R. 1833, as amended by the Senate, which would prohibit doctors from performing a certain type of abortion. I want to make the Congress aware of my position on this extremely complex issue.

I have always believed that the decision to have an abortion should be between a woman, her conscience, her doctor, and her God. I strongly believe that legal abortions -- those abortions that the Supreme Court ruled in Roe v. Wade must be protected -- should be safe and rare. I have long opposed late-term abortions except, as the law requires, where they are necessary to protect the life of the mother or where there is a threat to her health. In fact, as Governor of Arkansas, I signed into law a bill that barred third trimester abortions except where they were necessary to protect the life or health of the woman, consistent with the Supreme Court's rulings.

The procedure described in H.R. 1833 is very disturbing, and I cannot support its use on an elective basis, where the abortion is being performed for non-health related reasons and there are equally safe medical procedures available. As I understand it, however, there are rare and tragic situations that can occur in a woman's pregnancy in which, in a doctor's medical judgment, the use of this procedure may be necessary to save a woman's life or to preserve her health. In those situations, the Constitution requires that a woman's ability to choose this procedure be protected.

I have studied and prayed about this issue, and about the families who must face this awful choice, for many months. I believe that we have a duty to try to find common ground: a resolution to this issue that respects the views of those -- including myself -- who object to this particular procedure, but also upholds the Supreme Court's requirement that laws regulating abortion protect both the life and the health of American women.

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I am prepared to support H.R. 1833, however, if it is amended to make clear that the prohibition of this procedure does not apply to situations in which the selection of the procedure, in the medical judgment of the attending physician, is necessary to preserve the life of the woman or avert serious adverse health consequences to the woman.

I urge the Congress to amend H.R. 1833 to ensure that it protects the life and the health of the woman, as the law we have been elected to uphold requires.

Sincerely,

Bill Clinton

# FAX COVER SHEET

Date June 6, 1996

To Flo McAfee

The White House

Office Phone 202/456-5188

Fax Phone 202/456-6218

FROM: *Sandi Mathis*
*Office of Pastor Jim Henry*
*First Baptist Orlando*
*3701 L.B. McLeod Rd*
*Orlando, FL 32805*

Office Phone: 407-425-2555 ext. 233

Fax Phone: 407-422-2663

Total Number of Pages Including This Cover Sheet 4

## COMMENTS:

Thanks for calling. Attached is a copy of what I mailed yesterday. (We were waiting to receive all the signatures in the mail)

You can reach Jim Henry, through Friday morning, June 14, at the Hyatt Regency. 504/561-1234 fax 504/587-4141.

I'm leaving tomorrow morning. Let me know if there is anything else I can do for you today.

# THE SOUTHERN BAPTIST CONVENTION

Jim Henry, President

June 5, 1996

The President
The White House
1600 Pennsylvania Ave.
Washington, D.C. 20500

Dear Mr. President,

It is with heavy hearts and profound disappointment that we express our united and unambiguous opposition to your veto of the Partial-birth Abortion Ban Act. This grisly procedure cannot be morally justified.

We appeal to you not only as religious leaders, but as many of the former presidents of the Christian denomination you claim as your own, the Southern Baptist Convention. You should know that our concern is felt very deeply, as evidenced by the fact that this is the only time in the 150-year history of our denomination that such a letter has been sent to a United States President.

Partial-birth abortion is, by any civilized moral measurement, inhumane and unconscionable. With ultrasound for guidance, a doctor uses forceps and hands to deliver an intact baby feet first until only the head remains in the birth canal. The doctor pierces the base of the baby's skull with surgical scissors. He or she then inserts a canula into the incision and suctions out the brain of the baby so the head can be collapsed. That you could countenance this procedure, and with one stroke of your pen, veto a ban on partial-birth abortions is unimaginable to us.

Your often-repeated rationale for an exception "for the mother's health" is a discredited, catch-all loophole which has been demonstrated to include any reason the mother so desires.

You stated that you had prayed about this issue before deciding to veto the Partial-birth Abortion Ban. It is difficult for us to understand that God somehow would condone this procedure in the light of what the Bible says about unborn human life, or perhaps, you were gravely misinformed about the barbaric nature of the procedure.

The Old Testament scriptures demonstrate that every human being is made in the image of God (Genesis 1:27). Furthermore, God told the prophet Jeremiah that he was known intimately from even before he was formed in the womb (Jeremiah 1:4-5). Every human life is sacred and possesses unique dignity. Jesus our Lord showed special love and regard for children during His earthly ministry and cursed those who would despise His little ones (Mark 10:14-16). Partial-birth abortion is not defensible in light of God's revelation. As our friends, the American Roman Catholic Cardinals, said in their April 16, 1996 letter to you, partial-birth abortion is "more akin to infanticide than abortion."

The Apostle Paul enjoined Christians to restore with gentleness those who are caught in "any trespass" (Galatians 6:1). We appeal to you in that spirit to repent of your veto of the Partial-birth Abortion Ban Act and to express publicly your personal regret at having made such a decision in the first place.

Mr. President, should you, under the leadership of the Holy Spirit, reverse your thinking on this matter and sign the Partial-birth Abortion Ban Act into law, we will defend you and your decision in the face of the enemies of the sanctity of every human life.

We further pledge that we, and the overwhelming majority of Southern Baptists, will do everything we are able to encourage Congress to override this shameful veto. As you know, Southern Baptists are on record for their decade-and-a-half-long, adamant opposition to abortion. We can assure you that Southern Baptists are even more vigorously opposed to the partial-birth abortion procedure.

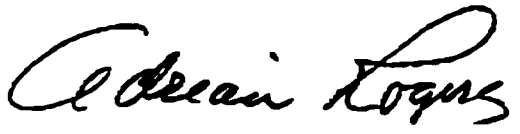
We pray for you and for the awesome responsibilities of the high office which God has allowed you to hold. We know these duties can only be fulfilled responsibly by God's grace and wisdom. God bless you, Mr. President, and God bless America.

Franklin Paschall W. A. Criswell

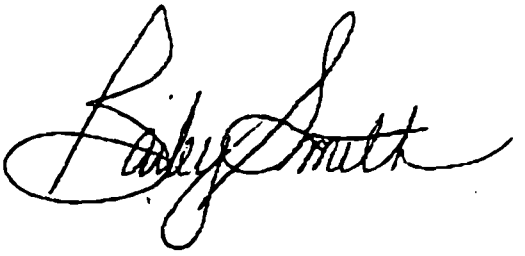
Dr. Franklin Paschall, Pres 1967 & 1968 Dr. W. A. Criswell, Pres. 1969 &1970

James L Sullivan

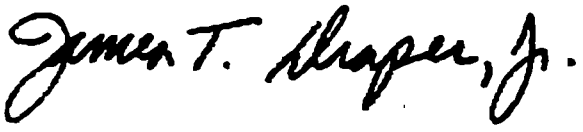
Dr. James Sullivan, Pres. 1977



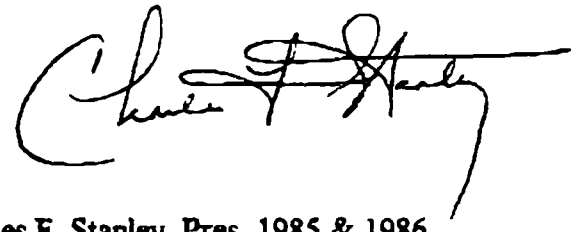
Dr. Adrian Rogers, Pres. 1980, 1987, 1988



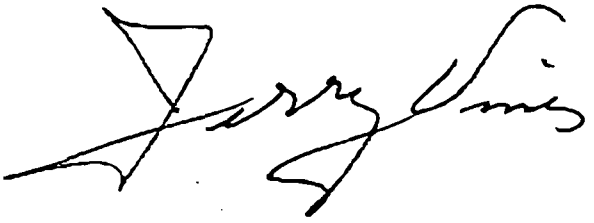
Dr. Bailey Smith, Pres. 1981 & 1982



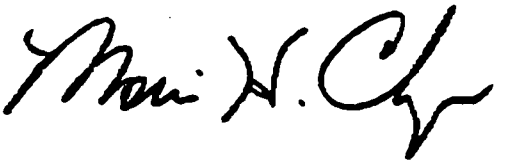
Dr. James T. Draper, Jr., Pres. 1983 & 1984



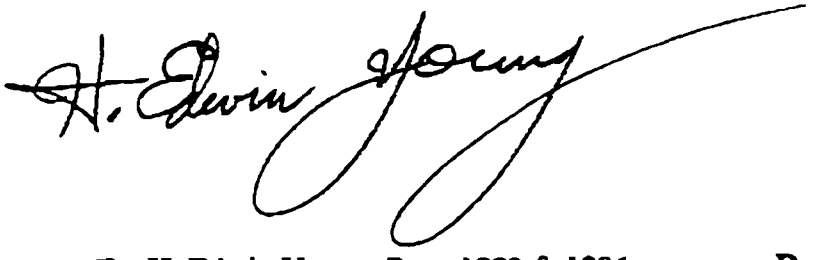
Dr. Charles F. Stanley, Pres. 1985 & 1986



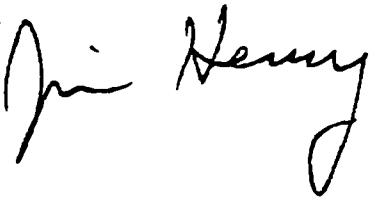
Dr. Jerry Vines, Pres. 1989 & 1990



Dr. Morris Chapman, Pres. 1991 & 1992



Dr. H. Edwin Young, Pres. 1993 & 1994



Dr. James Henry, Pres. 1995 and 1996

THE WHITE HOUSE

WASHINGTON

May 13, 1996

The Most Reverend Edmond L. Browning
Presiding Bishop
The Episcopal Church
815 Second Avenue
New York, New York 10017

Dear Bishop Browning:

Thank you for your letter of May 8 concerning H.R. 1833, legislation banning a certain abortion procedure, commonly referred to in the press as partial birth abortion. I appreciate your explication of the Church's position on this matter. As you know, in late March, Congress passed that bill and on April 10, I vetoed it because of its failure, in certain rare and compelling cases, to prevent serious threats to women's health.

My own position on this bill has been widely misrepresented and misunderstood. Some, including those more interested in creating a political issue than in putting real, meaningful limits on the use of this procedure, have deliberately distorted my views. But I know that a great many people of good faith -- and of all faiths -- are sincerely perplexed about the veto. That is why I would like to take this opportunity to explain the basis for my decision.

Let me begin with a word of background. I am against late-term abortions and have long opposed them, except, as the Supreme Court requires, where necessary to protect the life or health of the mother. As Governor of Arkansas, I signed into law a bill that barred third trimester abortions, with an appropriate exception for life or health, and I would sign a bill to do the same thing at the federal level if it were presented to me.

The particular procedure aimed at in H.R. 1833 poses a most difficult and disturbing issue, one which I studied and prayed about for many months. Indeed, when I first heard a description of this procedure, I anticipated that I would support the bill. But after I studied the matter and learned more about it, I came to believe that this rarely used procedure is justifiable as a last resort when doctors judge it necessary to save a woman's life or to avert serious consequences to her health.

Last month, I was joined in the White House by five women who desperately wanted to have their babies and were devastated to learn that their babies had fatal conditions and would not live. These women wanted anything other than an abortion, but were advised by their doctors that this procedure was their best chance to avert the risk of death or grave harm which, in some cases, would have included an inability to bear children. These women gave moving, powerful testimony. For them, this was not about choice. This was not about choosing against having a child. Their babies were certain to perish before, during or shortly after birth. The only question was how much grave damage they were going to suffer. One of them described the serious risks to her health that she faced, including the possibility of hemorrhaging, a ruptured cervix and loss of her ability to bear children in the future. She talked of her predicament:

> "Our little boy had...hydrocephaly. All the doctors told us there was no hope. We asked about in utero surgery, about shunts to remove the fluid, but there was absolutely nothing we could do. I cannot express the pain we still feel. This was our precious little baby, and he was being taken from us before we even had him. This was not our choice, for not only was our son going to die, but the complications of the pregnancy put my health in danger, as well."

Some have raised the question whether this procedure is ever most appropriate as a matter of medical practice. The best answer comes from the medical community, which broadly supports the continued availability of this procedure in cases where a woman's serious health interests are at stake. In those rare cases, I believe the woman's doctors should have the ability to determine, in the best exercise of their medical judgment, that the procedure is indeed necessary.

The problem with H.R. 1833 is that it provides an exception to the ban on this procedure <u>only</u> when a doctor can be certain that a woman's life is at risk, but not when the doctor is sure that she faces real, grave risks to her health.

Let me be clear. I do not contend that this procedure, today, is always used in circumstances that meet my standard -- namely, that the procedure must be necessary to prevent death or serious adverse health consequences. The procedure may well be used in situations where a woman's serious health interests are not at issue. But I do not support such uses, I do not defend them, and I would sign appropriate legislation banning them.

At the same time, I cannot and will not countenance a ban on this procedure in those cases where it represents the best hope for a woman to avoid serious risks to her health. I recognize that there

are those who believe it appropriate to force a woman to endure real, serious risks to her health -- including, sometimes, the loss of her ability to bear children -- in order to deliver a baby who is already dead or about to die. But I am not among them.

I also understand that many who support this bill believe that any health exception is untenable. In a letter sent to me on April 16 by our leading Catholic Cardinals, they contend that a "health" exception for the use of this procedure could be stretched to cover most anything -- for example, youth, emotional stress, financial hardship or inconvenience.

*That is not the kind of exception I support.* I support an exception that takes effect *only* where a woman faces real, serious adverse health consequences. Those who oppose this procedure may wish to cite cases where fraudulent health reasons are relied upon as an excuse -- excuses I could never condone. But people of good faith must recognize that there are also cases where the health risks facing a woman are deadly serious and real. *It is in those cases that I believe an exception to the general ban on the procedure must be allowed.*

Further, I flatly reject the view of those who suggest that it is impossible to draft a bill imposing real, stringent limits on the use of this procedure -- a bill making absolutely clear that the procedure may be used only in cases where a woman risks death or serious damage to her health, and in no other case. I know that it is not beyond the ingenuity of Congress, working together with this Administration, to fashion such a bill.

Indeed, that is why I implored Congress, by letter dated February 28, to add a limited exemption for the small number of compelling cases where use of the procedure is necessary to avoid serious health consequences. Congress ignored my proposal and did so, I am afraid, because there are too many there who prefer creating a political issue to solving a human problem. But I reiterate my offer now: if Congress will produce a bill that meets the concerns outlined in this letter, I will sign it the moment it reaches my desk.

I recognize that many people will continue to disagree with me about this issue. But they should all know the truth about where I stand: I do not support the use of this procedure on demand. I do not support the use of this procedure on the strength of mild or fraudulent health complaints. But I do believe that we cannot abandon women, like the women I spoke with, whose doctors advise them that they need the procedure to avoid serious injury. That, in my judgment, would be the true inhumanity.

I continue to hope that a solution can be reached on this painful issue. I hope as well that the deep dialogue between my Administration and people of faith can continue with regard to the broad array of issues on which we have worked and are working together. Again, thank you for your letter and for the opportunity to set forth my own views.

Sincerely,

Bill Clinton

Dear [Member of Congress]:

I am writing to urge that you vote to uphold my veto of H.R. 1833, a bill banning so-called partial-birth abortions. My views on this legislation have been widely misrepresented, so I would like to take a moment to state my position clearly.

First, I am against late-term abortions and have long opposed them, except, as the Supreme Court requires, where necessary to protect the life or health of the mother. As Governor of Arkansas, I signed into law a bill that barred third trimester abortions, with an appropriate exception for life or health. I would sign a bill to do the same thing at the federal level if it were presented to me.

The procedure aimed at in H.R. 1833 poses a difficult and disturbing issue. Initially, I anticipated that I would support the bill. But after I studied the matter and learned more about it, I came to believe that it should be permitted as a last resort when doctors judge it necessary to save a woman's life or to avert serious consequences to her health.

In April, I was joined in the White House by five women who were devastated to learn that their babies had fatal conditions. These women wanted anything other than an abortion, but were advised by their doctors that this procedure was their best chance to avert the risk of death or grave harm, including, in some cases, an inability to bear children. These women gave moving testimony. For them, this was not about choice. Their babies were certain to perish before, during or shortly after birth. The only question was how much grave damage the women were going to suffer. One of them described the serious risks to her health that she faced, including the possibility of hemorrhaging, a ruptured cervix and loss of her ability to bear children in the future. She talked of her predicament:

> "Our little boy had...hydrocephaly. All the doctors told us there was no hope. We asked about in utero surgery, about shunts to remove the fluid, but there was absolutely nothing we could do. I cannot express the pain we still feel. This was our precious little baby, and he was being taken from us before we even had him. This was not our choice, for not only was our son going to die, but the complications of the pregnancy put my health in danger, as well."

Some have raised the question whether this procedure is ever most appropriate as a matter of medical practice. The best answer comes from the medical community, which believes that, in those rare cases where a woman's serious health interests are at stake, the decision of whether to use the procedure should be left to the best exercise of their medical judgment.

The problem with H.R. 1833 is that it provides an exception to the ban on this procedure only when a doctor is convinced that a woman's life is at risk, but not when the doctor believes she faces real, grave risks to her health.

Let me be clear. I do not contend that this procedure, today, is always used in circumstances that meet my standard. The procedure may well be used in situations where a woman's serious health interests are not at risk. But I do not support such uses, I do not defend them, and I would sign appropriate legislation banning them.

At the same time, I cannot and will not accept a ban on this procedure in those cases where it represents the best hope for a woman to avoid serious risks to her health.

I also understand that many who support this bill believe that a health exception could be stretched to cover almost anything, such as emotional stress, financial hardship or inconvenience. That is *not* the kind of exception I support. I support an exception that takes effect *only* where a woman faces real, serious risks to her health. Some have cited cases where fraudulent health reasons are relied upon as an excuse -- excuses I could never condone. But people of good faith must recognize that there are also cases where the health risks facing a woman are deadly serious and real. It is in those cases that I believe an exception to the general ban on the procedure should be allowed.

Further, I reject the view of those who say it is impossible to draft a bill imposing real, stringent limits on the use of this procedure -- a bill making crystal clear that the procedure may be used only in cases where a woman risks death or serious damage to her health, and in no other case. Working in a bipartisan manner, Congress could fashion such a bill.

That is why I asked Congress, by letter dated February 28 and in my veto message, to add a limited exemption for the small number of compelling cases where use of the procedure is necessary to avoid serious health consequences. As I have said before, if Congress produced a bill with such an exemption, I would sign it.

In short, I do not support the use of this procedure on demand or on the strength of mild or fraudulent health complaints. But I do believe that it is wrong to abandon women, like the women I spoke with, whose doctors advise them that they need the procedure to avoid serious injury. That, in my judgment, would be the true inhumanity. Accordingly, I urge that you vote to uphold my veto of H.R. 1833.

I continue to hope that a solution can be reached on this painful issue. But enacting H.R. 1833 would not be that solution.

Sincerely,

THE WHITE HOUSE

WASHINGTON

May 13, 1996

The Most Reverend Edmond L. Browning
Presiding Bishop
The Episcopal Church
815 Second Avenue
New York, New York 10017

Dear Bishop Browning:

Thank you for your letter of May 8 concerning H.R. 1833, legislation banning a certain abortion procedure, commonly referred to in the press as partial birth abortion. I appreciate your explication of the Church's position on this matter. As you know, in late March, Congress passed that bill and on April 10, I vetoed it because of its failure, in certain rare and compelling cases, to prevent serious threats to women's health.

My own position on this bill has been widely misrepresented and misunderstood. Some, including those more interested in creating a political issue than in putting real, meaningful limits on the use of this procedure, have deliberately distorted my views. But I know that a great many people of good faith -- and of all faiths -- are sincerely perplexed about the veto. That is why I would like to take this opportunity to explain the basis for my decision.

Let me begin with a word of background. I am against late-term abortions and have long opposed them, except, as the Supreme Court requires, where necessary to protect the life or health of the mother. As Governor of Arkansas, I signed into law a bill that barred third trimester abortions, with an appropriate exception for life or health, and I would sign a bill to do the same thing at the federal level if it were presented to me.

The particular procedure aimed at in H.R. 1833 poses a most difficult and disturbing issue, one which I studied and prayed about for many months. Indeed, when I first heard a description of this procedure, I anticipated that I would support the bill. But after I studied the matter and learned more about it, I came to believe that this rarely used procedure is justifiable as a last resort when doctors judge it necessary to save a woman's life or to avert serious consequences to her health.

Last month, I was joined in the White House by five women who desperately wanted to have their babies and were devastated to learn that their babies had fatal conditions and would not live. These women wanted anything other than an abortion, but were advised by their doctors that this procedure was their best chance to avert the risk of death or grave harm which, in some cases, would have included an inability to bear children. These women gave moving, powerful testimony. For them, this was not about choice. This was not about choosing against having a child. Their babies were certain to perish before, during or shortly after birth. The only question was how much grave damage they were going to suffer. One of them described the serious risks to her health that she faced, including the possibility of hemorrhaging, a ruptured cervix and loss of her ability to bear children in the future. She talked of her predicament:

> "Our little boy had...hydrocephaly. All the doctors told us there was no hope. We asked about in utero surgery, about shunts to remove the fluid, but there was absolutely nothing we could do. I cannot express the pain we still feel. This was our precious little baby, and he was being taken from us before we even had him. This was not our choice, for not only was our son going to die, but the complications of the pregnancy put my health in danger, as well."

Some have raised the question whether this procedure is ever most appropriate as a matter of medical practice. The best answer comes from the medical community, which broadly supports the continued availability of this procedure in cases where a woman's serious health interests are at stake. In those rare cases, I believe the woman's doctors should have the ability to determine, in the best exercise of their medical judgment, that the procedure is indeed necessary.

The problem with H.R. 1833 is that it provides an exception to the ban on this procedure <u>only</u> when a doctor can be certain that a woman's life is at risk, but not when the doctor is sure that she faces real, grave risks to her health.

Let me be clear. I do not contend that this procedure, today, is always used in circumstances that meet my standard -- namely, that the procedure must be necessary to prevent death or serious adverse health consequences. The procedure may well be used in situations where a woman's serious health interests are not at issue. But I do not support such uses, I do not defend them, and I would sign appropriate legislation banning them.

At the same time, I cannot and will not countenance a ban on this procedure in those cases where it represents the best hope for a woman to avoid serious risks to her health. I recognize that there

are those who believe it appropriate to force a woman to endure real, serious risks to her health -- including, sometimes, the loss of her ability to bear children -- in order to deliver a baby who is already dead or about to die. But I am not among them.

I also understand that many who support this bill believe that any health exception is untenable. In a letter sent to me on April 16 by our leading Catholic Cardinals, they contend that a "health" exception for the use of this procedure could be stretched to cover most anything -- for example, youth, emotional stress, financial hardship or inconvenience.

*That is not the kind of exception I support.* I support an exception that takes effect *only* where a woman faces real, serious adverse health consequences. Those who oppose this procedure may wish to cite cases where fraudulent health reasons are relied upon as an excuse -- excuses I could never condone. But people of good faith must recognize that there are also cases where the health risks facing a woman are deadly serious and real. *It is in those cases that I believe an exception to the general ban on the procedure must be allowed.*

Further, I flatly reject the view of those who suggest that it is impossible to draft a bill imposing real, stringent limits on the use of this procedure -- a bill making absolutely clear that the procedure may be used only in cases where a woman risks death or serious damage to her health, and in no other case. I know that it is not beyond the ingenuity of Congress, working together with this Administration, to fashion such a bill.

Indeed, that is why I implored Congress, by letter dated February 28, to add a limited exemption for the small number of compelling cases where use of the procedure is necessary to avoid serious health consequences. Congress ignored my proposal and did so, I am afraid, because there are too many there who prefer creating a political issue to solving a human problem. But I reiterate my offer now: if Congress will produce a bill that meets the concerns outlined in this letter, I will sign it the moment it reaches my desk.

I recognize that many people will continue to disagree with me about this issue. But they should all know the truth about where I stand: I do not support the use of this procedure on demand. I do not support the use of this procedure on the strength of mild or fraudulent health complaints. But I do believe that we cannot abandon women, like the women I spoke with, whose doctors advise them that they need the procedure to avoid serious injury. That, in my judgment, would be the true inhumanity.

I continue to hope that a solution can be reached on this painful issue. I hope as well that the deep dialogue between my Administration and people of faith can continue with regard to the broad array of issues on which we have worked and are working together. Again, thank you for your letter and for the opportunity to set forth my own views.

Sincerely,

Bill Clinton

THE WHITE HOUSE
WASHINGTON

October 17, 1996

TO: Elena Kagan
Jen Klein

FROM: Todd Stern

The attached is forwarded for your information.

THE WHITE HOUSE

WASHINGTON

October 18, 1996

Dr. Joe D. Bennett
Box 969
Harrison, Arkansas 72601

Dear Joe:

Thanks for your letter about so-called partial-birth abortions. This is a difficult and disturbing issue, one to which I have devoted a good deal of time and study and prayer. I know you are concerned about it. Let me try to explain for a moment where I stand and why.

I do not, as a general matter, support the use of this procedure, but I do believe that a very limited exception is necessary to protect the serious health interests of women. In particular, as I said to Congress on several occasions dating back to February, I would have signed legislation banning the procedure if it had included an exception permitting the procedure to be used in those rare cases where a woman's doctor believes that its use is necessary to save her from death or serious injury to her health. Had Congress responded to my repeated requests to add such a narrow, tightly drawn exception, I would have signed the bill.

As you may know, in April I was joined at the White House by five women who were devastated to learn that their babies had fatal conditions. These women wanted anything other than an abortion, but were advised by their doctors that this procedure was their best chance to avert the risk of death or grave harm, including in some cases, an inability to bear children. Their babies were certain to perish before, during or shortly after birth. The only question was how much damage the women were going to suffer.

I understand that your consultations with doctors have led you to question whether this procedure is ever medically most appropriate. In my view, the best answer to this question comes from the medical community itself, which broadly supports the continued availability of the procedure in cases where a woman's serious health interests are at stake. In those rare cases, I believe a woman's doctors should at least have the option to determine, in the best exercise of their medical judgment, whether the procedure is indeed necessary.

Of course, I do not contend that this procedure is always used in circumstances that meet my standard. But to the extent that it is used in situations where a woman's serious health interests are not at risk, I oppose such uses and would sign legislation banning them.

Joe, I hope this helps clarify my position on this troubling issue. As always, I am grateful for your steadfast support. Please give Mary Jean my very best wishes. Hillary and I are glad to hear that she is doing so well.

Sincerely,

Dear Bill,

Although I'm strongly pro-choice on the abortion issue I've been concerned about the so-called partial birth abortion procedure. As a result I've been asking a lot of questions, especially during the last two or three months. I recently was introduced to and had a chance to visit with Albert D. Zoller, editor of the Catholic Key, a catholic publication for the Kansas City, MO Diocese. He is a strong Clinton supporter and admirer but he is very much opposed to partial birth abortion and told me that his catholic friends and indeed, all religious catholics are opposed to this procedure.

Consequently I promised him to look into this. I actually at that time defended the procedure, believing that obstetricians wouldn't do this operation unless it was

essary to save the mothers life. Did talked with Ob-Gyn Colleagues here in Harrison and talked at length with the Chairman of the Dept of Ob-Gyn at the U A M S. in Little Rock and all were opposed to this procedure. Partial birth abortions aren't done at the U A M S. as policy. The rationale is that if the mothers life is endangered in the third trimester by eclampsia (toxemia of pregnancy) or heart failure C-section should be done instead of killing the fetus and delivering vaginally.

I know that you must have been given substantial advice to the contrary but from my own experience and especially as a result of the opinion of Gynecologists here in Arkansas I wonder if partial birth abortion is the right thing to do medically?

Mary Jean joins me in wishing you the very best. The polls look great at present and we pray that they stay that way until election day. She and I are sincerely grateful for

your friendship and thoughtfulness in asking her to be one of our Kansas presidential electors.

As you know she had open heart surgery in June with a double bypass operation and is recovering better than expected.

We're working hard to elect Winston Bryant to the Senate as well as for our new candidate Ann Henry for the 3rd congressional district. She's coming to Harrison today for a rally. I want you to know that I'm putting up Clinton - Gore signs (yard signs) in my spare time and enjoying doing it. Best of luck on the debates and for your reelection. We have reservations for and are looking forward to your second inauguration.

Sincerely,

Joe

Klein

THE WHITE HOUSE

WASHINGTON

Chicago

September 18, 1996

Dear Neil:

I am writing to urge that you vote to uphold my veto of H.R. 1833, a bill banning so-called partial-birth abortions. My views on this legislation have been widely misrepresented, so I would like to take a moment to state my position clearly.

First, I am against late-term abortions and have long opposed them, except, as the Supreme Court requires, where necessary to protect the life or health of the mother. As Governor of Arkansas, I signed into law a bill that barred third trimester abortions, with an appropriate exception for life or health. I would sign a bill to do the same thing at the federal level if it were presented to me.

The procedure aimed at in H.R. 1833 poses a difficult and disturbing issue. Initially, I anticipated that I would support the bill. But after I studied the matter and learned more about it, I came to believe that it should be permitted as a last resort when doctors judge it necessary to save a woman's life or to avert serious consequences to her health.

In April, I was joined in the White House by five women who were devastated to learn that their babies had fatal conditions. These women wanted anything other than an abortion, but were advised by their doctors that this procedure was their best chance to avert the risk of death or grave harm, including, in some cases, an inability to bear children. These women gave moving testimony. For them, this was not about choice. Their babies were certain to perish before, during or shortly after birth. The only question was how much grave damage the women were going to suffer. One of them described the serious risks to her health that she faced, including the possibility of hemorrhaging, a ruptured cervix and loss of her ability to bear children in the future. She talked of her predicament:

> "Our little boy had...hydrocephaly. All the doctors told us there was no hope. We asked about in utero surgery, about shunts to remove the fluid, but there was absolutely nothing we could do. I cannot express the pain we still feel. This was our precious little baby, and he was being taken from us before we even had him. This was not our choice, for not only was our son going to die, but the complications of the pregnancy put my health in danger, as well."

Some have raised the question whether this procedure is ever most appropriate as a matter of medical practice. The best answer comes from the medical community, which believes that, in those rare cases where a woman's serious health interests are at stake, the decision of whether to use the procedure should be left to the best exercise of their medical judgment.

The problem with H.R. 1833 is that it provides an exception to the ban on this procedure only when a doctor is convinced that a woman's life is at risk, but not when the doctor believes she faces real, grave risks to her health.

Let me be clear. I do not contend that this procedure, today, is always used in circumstances that meet my standard. The procedure may well be used in situations where a woman's serious health interests are not at risk. But I do not support such uses, I do not defend them, and I would sign appropriate legislation banning them.

At the same time, I cannot and will not accept a ban on this procedure in those cases where it represents the best hope for a woman to avoid serious risks to her health.

I also understand that many who support this bill believe that a health exception could be stretched to cover almost anything, such as emotional stress, financial hardship or inconvenience. That is *not* the kind of exception I support. I support an exception that takes effect *only* where a woman faces real, serious risks to her health. Some have cited cases where fraudulent health reasons are relied upon as an excuse -- excuses I could never condone. But people of good faith must recognize that there are also cases where the health risks facing a woman are deadly serious and real. It is in those cases that I believe an exception to the general ban on the procedure should be allowed.

Further, I reject the view of those who say it is impossible to draft a bill imposing real, stringent limits on the use of this procedure -- a bill making crystal clear that the procedure may be used only in cases where a woman risks death or serious damage to her health, and in no other case. Working in a bipartisan manner, Congress could fashion such a bill.

That is why I asked Congress, by letter dated February 28 and in my veto message, to add a limited exemption for the small number of compelling cases where use of the procedure is necessary to avoid serious health consequences. As I have said before, if Congress produced a bill with such an exemption, I would sign it.

In short, I do not support the use of this procedure on demand or on the strength of mild or fraudulent health complaints. But I do believe that it is wrong to abandon women, like the women I spoke with, whose doctors advise them that they need the procedure to avoid serious injury. That, in my judgment, would be the true inhumanity. Accordingly, I urge that you vote to uphold my veto of H.R. 1833.

I continue to hope that a solution can be reached on this painful issue. But enacting H.R. 1833 would not be that solution.

Sincerely,

The Honorable Neil Abercrombie
House of Representatives
Washington, D.C. 20515