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## Tin Ear for Corrections at Science Feedback

1 message

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Mon, Oct 7, 2019 at 2:44 PM

On Aug. 30, 2019 Science Feedback/Health Feedback published a fact check of the claim "abortion is not medically necessary," stated in the midst of a speech by pro-life ("anti-abortion") activist Lila Rose.

Zebra Fact Check developed an interest in the fact check after complaints about the fact check resulted in the opening of an investigation by the International Fact-Checking Network. Complaints suggested bias in the Science Feedback fact check.

We at Zebra Fact Check decided to assess the fact check for ourselves.

We found a fact check that fails to meet the most basic standards. Science Feedback highlighted two problems with the Rose speech and then failed to coherently address either one.

### DETAILS

**Inaccurate:** Certain medical conditions such as placenta previa and HELLP syndrome can make abortion a necessary medical procedure in order to prevent the mother's death.

**Misleading:** While it is possible for early delivery to preserve both the life of the mother and child in the event of a life-threatening condition, as the video suggests, it does not mention that this is only applicable when a fetus' gestational age is advanced enough that its survival outside the womb is possible (generally >24 weeks old). In situations where a fetus has not developed sufficiently, it would not be possible for expedited delivery to save its life.

### "Inaccurate"

Science Feedback alleged Rose was wrong to say abortion is not medically necessary but gave short shrift to Rose's clear effort to clarify the definition of abortion.

To help emphasize Rose's right to address the meaning of "abortion," please recall that the mainstream media routinely apply the label "anti-abortion" to Rose and people like her. Is Rose supposed to have no say in what that means? Particularly when the media reject the effort of such groups to wear the label "pro-life"?

Rose defined "abortion" as the **direct** killing of a fetus. She distinguished the direct killing of a fetus from early delivery procedures resulting in the death of the fetus where medical care would have little to no chance of saving it.

Instead of using Rose's description of "abortion" and using that obvious contextual clue to test whether the direct taking of a fetal life is sometimes medically necessary, Science Feedback simply insisted on noting the difference between a cited clinical definition and the one Rose offered. Attacking an argument by changing the meaning of a term is a fallacy of equivocation. That's exactly what Science Feedback did, justifying it by intimating Rose might have been guilty of something like the "No True Scotsman" fallacy.

In fact, Science Feedback's use of equivocation helped confirm Rose's charge of widespread deceit on the issue of abortion (another point in Rose's speech). Why? Because Science Feedback said "abortion" was a procedure used to end a pregnancy. Under that definition, induced delivery of a healthy baby and caesarean section resulting in live birth of a baby would both count as abortions (from the second paragraph of the fact check):

Incidentally, abortion is medically defined as a procedure to end a pregnancy – this definition does not change depending on the reasons for an abortion, i.e. whether the procedure is motivated by an unwanted pregnancy or medical emergency or some other situation has no effect on its medical definition.

Isn't that absurd?

The fate of the fetus matters, doesn't it? The clinical definition lacks something.

Further illustrating Science Feedback's defining blunder, the definition it linked in support of its definition defined

"abortion" as the removal of the fetus and placenta *from the uterus*. Later in the fact check, Science Feedback uses the testimony of clinicians to call abortion in the case of a tubal pregnancy medically necessary. But that procedure isn't an abortion according to the definition Science Feedback linked. Tubal pregnancies do not reach the uterus.

Science Feedback's haphazard reasoning has no place in a fact check. A proper fact check would have sought to understand "abortion" as Rose defined it and fact-checked her claim on its own terms. It's also fine to introduce the clinical definition for contrast. But it's not okay to equivocate between the two.

#### "Misleading"

Science Feedback misleadingly states Rose misled her audience regarding the slim chance of fetal survival after early delivery. Zebra Fact Check found three versions of the Rose speech. We'll call the Small, Medium and Large. Science Feedback did not link to the version of the video it fact-checked, but we think it must have been Small, for the shortest version of the video is the only one that doesn't have Rose averring that we do not have the technology yet to allow fetal survival in the case of "Early delivery or removing an ectopic pregnancy."

We found the Medium version of the Rose speech on Facebook, so we believe that is the appropriate version to examine for the fact check (without denying the importance of the longest version for additional context). Science Feedback could argue the short version is misleading because the context is trimmed away, but that complaint should be moot if the Facebook version of the Rose speech is the Medium version.

Science Feedback's charge that Rose misled her audience also features its most embarrassing and obvious mistake. The fact checkers misquoted Rose in a way that augmented their complaint against Rose. Rose said (bold emphasis added) doctors "could **perhaps** do an early delivery if she's experiencing pre-eclampsia or she has a very severe condition." With the word "perhaps" included, Rose does not make early delivery sound like an easy solution to problems in early pregnancy. It sounds more like a hopeful option. Science Feedback eliminated the "perhaps" from its version of the quotation, making it seem that Rose was saying early pregnancy problems are not a dire threat to the fetus since doctors could do early delivery.

In fact, it was one of Rose's major points in her speech to clarify that her group does not oppose procedures that indirectly result in fetal death. It fits with that point for her to emphasize that early delivery often results in the indirect death of the fetus.

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Sincerely,

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