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NEWS

May 2018



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HAPPY MOTHER'S DAY



# national **RIGHT TO LIFE** NEWS

## NRLC 2018....50 days and counting

By Dave Andrusko

50 days...and counting. In just seven weeks, pro-lifers from around the country will converge on the Sheraton Hotel in Overland Park, Kansas for the annual National Right to Life Convention. (For information about the June 28-29-30 convention and how to register, please go to <http://nrlconvention.com>.)

Adding history to this gathering of pro-life America, this is the 50<sup>th</sup> anniversary of National Right to Life, the nation's preeminent single-issue pro-life organization.

Mary Kay Culp, executive director of Kansans for Life, reminds attendees what they can expect from this three-day educational bonanza.

"For starters, the convention

brings together in one place national experts on every phase of the life issues in order to equip grassroots pro-lifers not only with the knowledge and skills they need to advance our

cause, but provide enthusiasm and motivation," Culp says.

NRLC convention director Jacki Ragan agrees. "Learn

*See "NRLC 2018," page 34*



*See you in Kansas!*

**NATIONAL RIGHT TO LIFE  
CONVENTION 2018**

**JUNE 28, 29, & 30**

## Pro-lifers continue to make gains in 2018 Legislative Session

By Ingrid Duran, State Legislative Director

Pro-lifers were very active during the 2018 State Legislative session, introducing and/or passing many bills ranging from the Unborn Child Protection from Dismemberment Act to Pain-Capable Unborn Child Protection Acts to bans on abortions based on a diagnosis of Down syndrome to limiting state funding of abortion, and everything in between.

For background, here is how the pro-abortion Guttmacher Institute described 2017:

**States continued their assault on abortion in**



**2017, with 19 states adopting 63 new restrictions on abortion rights and access.**

What about just the first three months of 2018?

**By the end of the first quarter, five states had adopted 10 new abortion restrictions and 347 measures to restrict access to either abortion or contraception had been introduced in 37 states.**

*See "Legislative," page 32*

# Editorials

## Latest polling numbers very discouraging for pro-abortion Democratic senators in competitive races

On page one NRL Political Director Karen Cross updates you on the three important senatorial primaries that took place yesterday in Ohio, West Virginia, and Indiana. Please take a few minutes to read her always-keen analysis.

This editorial addresses the over-all topic of the 2018 off-year elections. Because the results of the latest Reuters/Ipsos poll results about President Trump came out Monday, we'll talk about those first.

Then we'll pivot to take a look at a Morning Consult poll from last week that had a startling message for almost all pro-abortion Democrats in competitive Senate races: there are **far** more people who believe it is "time for a new person" than believe the incumbent deserves another term!

Reuters/Ipsos introduces its own poll with this disclaimer:

**This week's Reuters/Ipsos Core Political release presents something of an outlier of our trend. Every series of polls has the occasional outlier and in our opinion this is one. So, while we are reporting the findings in the interest of transparency, we will not be announcing the start of a new trend until we have more data to validate this pattern.**

In other words, whatever this is, it is so unlike what Reuters/Ipsos **wants** to report "mum's the word" until they find data that contradicts what they just found.

Which was, you ask? Here's a wonderful summary of "what has them so distressed" provided by Jazz Shaw over at Hotair.com:

**Well, the President's approval rating rang up at 48% among all Americans and 49/49 with registered voters.**



**That's within the margin of error in terms of having his head above water and within two points of the Rasmussen numbers that came out Friday. Approval of his handling of the economy came in at 57% and he even managed 44% on the question of how Trump "treats people like me." The Democrats' lead on the generic ballot also slipped to 5%. Those are, without a doubt, the best number's President Trump has seen out of that polling firm in pretty much forever.**

*See "California," page 22*

## How far we have come, thanks to you

On page 10 of the May digital edition of *National Right to Life News*, NRL State Legislative Director Ingrid Duran provides readers with a terrific summary of pro-life victories won this legislative session. In the other editorial on page two, we talk about a new poll from Morning Consult which replaced the gloom-and-doom predictions of widespread pro-abortion victories this November with a far more optimistic truth, along with the latest polling numbers which show pro-life President Donald Trump's popularity is gradually approaching 50%.

I try always to be realistic, not Pollyannaish. While the ebbs and flows of public opinion continue on an over-all upward swing, proliferators know the battle can never be over until legal protection is returned to unborn children. And we know even then the forces of darkness will do everything in their power to burrow pro-abortion initiative into public policy.

But this is not to say we shouldn't periodically take stock of just how far we have come. There have many dark days when, if there had not been a firm hand on the tiller and dedicated grassroots

volunteers in the 50 states, it could have been easy to give in to calls to get out of the public arena.

As National Right to Life celebrates its 50<sup>th</sup> anniversary, we ought to be truly thankful its informal mission statement is to "make a difference, not a statement."

I thought of the power of steady leadership recently when I re-read a story I wrote about the media's gleeful response to the *Roe v. Wade* decision. It wasn't just that they wanted us to go away. They fully expected we would!

Here are just two examples.

In a January 24, 1973 editorial, the *New York Times* pronounced that it was time to close shop on the abortion debate: "The Court's seven-to-two ruling could bring to an end the emotional and divisive public argument over what always should have been an intensely private and personal matter," it intoned.

*See "NRL News," page 39*

# From the President Carol Tobias

## One Life That Made a Difference to Millions

During the final days of Alfie Evans' all-too-brief life, I didn't sleep well. I went to bed praying for him and woke up, way too early, wondering if he was still alive. As one member of "Alfie's Army," I knew that people around the world were also watching the drama unfold, hoping against hope.

Alder Hey Children's Hospital, where Alfie was being held, wanted to disconnect the 23-month old toddler from his ventilator so he could "die with dignity." Tom Evans and Kate James, Alfie's parents, refused to give up on their son and, with the help of Pope Francis, received an offer of help from Gesu Bambino hospital in Rome.

The hospital and multiple courts said, "It is in Alfie's best interests to stay here and die," even though the Italian government granted Alfie citizenship and sent a plane to England to pick up their newest citizen.

But the hospital and UK courts prevailed. After five long days, Alfie died.

The battle to save one precious little boy became an international controversy. Why? What was it about Alfie that grabbed the world's attention?

Was it because he was just sooo adorable? The last photo I saw was Alfie being carried by his mom, after the ventilator had been removed. How could anyone think that cuddly little darling would be better off dead?

Did Alfie grab the world's attention because his young parents were fighting so hard for him? It was not difficult for parents to identify with Tom, 21, and Kate, 20. Parents around the world could easily imagine how they would react if any hospital told them their son or daughter was no longer worth the effort; that no other hospital would be allowed to see what they could do for him; or even that their child would not even be allowed to go home to die.

I ask again, why did this one life move people? Many were shocked and angered that Alder Hey and the British government were adamant that they alone knew what was best for Alfie. It was not as though Alfie's dad did not fully understand how bleak the prognosis was. In a moving letter to Malcolm Patrick McMahon, Archbishop

of the Roman Catholic Archdiocese of Liverpool, Tom wrote:

"I am aware that my son's death is a real possibility and maybe is not a long way off. I know that heaven is waiting for him as I cannot imagine which kind of sin that innocent soul, nailed to his bed as to a cross, may have committed.



"But I'm also aware that his life is precious before God's eyes and that Alfie himself has a mission to accomplish. Perhaps his mission is to show the entire world the cruelty behind the judge's words. For this judge stated that Alfie's life is 'futile', thus supporting the same opinion of the hospital which wants him to die by suffocation.

"...We don't want to force ourselves upon him and we don't want therapeutic obstinacy but we would at least like his disease to be diagnosed and we would like him to receive the best possible treatment."

Unfortunately, and in my opinion inexcusably, Archbishop McMahon sided with the hospital, saying they had done all that was humanly possible. Maybe the medical staff at Alder Hey had done all that was possible there, but the Archbishop doesn't explain why other doctors were not allowed to try something else that may have been possible for them.

Alder Hey and the UK courts—the trial judge, the Court of Appeal, and the Supreme Court—wanted Alfie dead perhaps rather than risk the fallout from what the world might learn from a second opinion.

Removing Alfie to Italy would have relieved Alder Hey of any financial burden for caring for Alfie. But because Alder Hey couldn't diagnose his mysterious brain disease, they claimed that continuing care compromised his "future dignity."

How smart must these cold clinicians be, to know better than Alfie's loving parents what was a burden on Alfie?

The battle to save Alfie brought together people from around the world with one loud unified voice to speak on his behalf. As I read through my Twitter feed with #AlfieEvans or #AlfiesArmy, I could see encouragement and solidarity expressed in many different languages.

This one precious soul, following so closely after last year's similar situation with Charlie Gard, woke up a world to the injustice happening under our very eyes. Why? Because a critical number of people finally became aware that cases like this have happened before and, unless things change, will happen more often.

They could happen to you or your loved ones.

Parents in this country have lost children because medical care and treatment were denied because of a genetic anomaly.

Senior citizens and people with disabilities or illness are encouraged, in letters from an insurance company or a state government insurance, to "take advantage" of physician-assisted suicide, rather than seek expensive medical treatment.

And we remember that every baby, including those not yet born, deserves this same outpouring of affection.

This battle to save Alfie Evans reminds us that every human being is precious-- born or unborn, young or old, healthy or not-so-healthy. To all those working to save the Alfies of the world, born and unborn, thank you!

If you aren't already fighting for these lives, please join us today.

# How to become a “Patron for Life” and help the NRLC 2018

By Dave Andrusko

In a page one story, we bring you up to date on the rapidly approaching NRLC 2018, which takes place June 28-30 in Kansas City, Kansas.

There will be hundreds of speakers and workshops that cover every imaginable topic from politics through the promise of adult stem cells to the Abortion Reversal Process—and everything in-between.

With all this and much more waiting for you, we are asking

a special favor. Could you help NRLC by defraying a portion of the expenses of putting on a three-day convention and flying and housing experts from around the nation?

Could you become a “Patron for Life”? Every attendee to NRLC 2018 will receive a specially-made yearbook, a year-round educational resource.

If there is someone you’d like to honor, any name you choose can be listed as “in memory of”

or “in honor of” and will appear in the Convention Year book. You can become a patron here.

It is a great way of expressing your gratitude.

There are options for every budget. Whether you can contribute \$1,000 (“Titanium”) or \$10 (“Angel”), every Patron for Life will help us pay for the pro-life educational event of the year.

You can just click here and the Patron for Life form will appear. You can download it,

fill it out, and send it in along with your check.

Or, you can just click here and choose from the same broad range of Patron categories.

Either option helps you assistance would be extremely helpful to us and the unborn babies whose lives we all are fighting to save.

Please consider helping out the convention by making a check out to NRLC 2018 or by going on line and paying using your credit card.



loving hearts & saving lives

# Good News - Pro-Life Victories!

Good News!

On Tuesday, May 8, strong pro-life Republican candidates Mike Braun, Jim Renacci, and Patrick Morrisey WON their respective Senate primaries in Indiana, Ohio and West Virginia! They are challenging Democratic Senate incumbents Joe Donnelly, Sherrod Brown and Joe Manchin. Each of these Democrats has voted repeatedly in favor of funding Planned Parenthood which performs about one out of every three abortions in America and still receives **Hundreds of Millions** of our tax dollars each year!

And Planned Parenthood and its pro-abortion allies have pledged to spend **Thirty Million Dollars** to defeat pro-life candidates and elect the kind of pro-abortion senators who will keep the dollars flowing to the abortion industry! If they succeed more babies will die.

We must see that pro-lifers know exactly where the candidates stand – both those who stand for life and those who stand for abortion. No one does that better than National Right to Life!

The pro-abortion side is already hard at work. We must do no less. **Please help now!** May God bless you for all you do on behalf of these defenseless children.



# The future of the pro-life movement is happening now!

The National Right to Life Academy is a fun, fast-paced, and intense five-week academic summer course for pro-life college students eager to put their pro-life passion to work and the opportunity of earning 3 college credits.

Register Today at [www.nrlc.org/site/academy/](http://www.nrlc.org/site/academy/)

You will want to be a part of this amazing opportunity!

## National Right to Life 2018 ACADEMY



The National Right to Life Academy is a fun, fast-paced, and intense five-week academic summer course for pro-life college students eager to put their pro-life passion to work and the opportunity of earning 3 college credits.

\$3600 tuition includes lodging near NRLC headquarters in Washington, D.C., registration & lodging at the 2018 NRL Convention in Kansas City, KS and transportation from Kansas City to Washington, DC.



loving hearts & saving lives



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### WHEN?

June 28, 2018 -

August 3, 2018



Fighting to Keep the Hearts Beating

### WHERE?

Kansas City, KS (4 days)

Washington, DC (5 weeks)

the future of the pro-life movement is happening now

**be a part of it and apply today!**

For More Information or To Apply: [nrlc.org/academy](http://nrlc.org/academy)



# Cecile Richards says Michelle Wolf was ‘doing her job’ when she made jokes about abortion

By Dave Andrusko

By now we are more than a week removed from “comedian” Michelle Wolf’s reprehensible performance at the White House Correspondents’ Dinner in Washington, D.C. We commented on her noxious remarks extensively at *National Right to Life News Today*. Here in our monthly edition of *NRL News*, I would like to ponder the collective media’s response to Wolf and Cecile Richards’ observations about Wolf’s disgusting comments about abortion.

The *Washington Post* is, of course, as Establishment Media as you can possibly get. In their reaction to Wolf, if you could giggle in cyberspace, they would have.

Interestingly former *Post* writer Chris Cillizza tried to have it both ways. Writing for *CNN*, he gave Wolf kudos for various attacks; asked how anyone could “celebrate abortion — even jokingly”; and pointed out that Wolf “couldn’t buy better publicity” for her forthcoming Netflix series, “The Break With Michelle Wolf.”

Not so with his former colleagues. They celebrated Wolf’s foul-mouthed race to the bottom as she verbally gouged the President, his family, Vice President Pence, Sarah Sanders, the White House press secretary, to name just a few.

The Posties loved that Wolf tore into the President whom they collectively loathe. Besides, can’t they take a joke?

A lot of attention was paid to Wolf’s very personal attack on Sanders. Defenders of Wolf insist, in that respect, she was misunderstood. (Which is posterous but....)

However there was no mistaking the animosity of Wolf’s remarks about Mr. Pence. They were stupendously offensive on many different levels. She said

**Mike Pence is very anti-choice. He thinks**



Michelle Wolf  
Photo by Erin Nekervis

**abortion is murder, which, first of all, don’t knock it till you try it. And when you do try it, really knock it. You know, you’ve got to get that baby out of there.**

**And yeah, sure, you can groan all you want. I know a lot of you are very anti-abortion, you know, unless it’s the one you got from your secret mistress. It’s fun how values can waver, but good for you.**

In one story *Post* media reporter Paul Farhi congratulated Wolf for livening up what was a snooze fest before her appearance. But in a story he subsequently wrote for the *Post*, it’s clear while the staff was in seventh heaven over Wolf’s take-no-prisoners attack, the higher ups apparently have some concerns

**[S]everal news organizations indicated their support next year [for the dinner] could be jeopardized if another controversial comic is hired. People involved in the discussions said executives from Politico, CBS News and The Washington Post were among those urging the change.**  
[Underlining added.]

But what does Cecile Richards think about Wolf’s abortion comments? Richards, whose long leadership at Planned Parenthood ended last week, appeared on *CNN*’s “New Day.”

The headline to the *CNN* story about the interview written by Donald Judd, read, “Ex-Planned Parenthood leader: Wolf was ‘doing her job’ when she made abortion jokes”

Here is the two paragraph lead:

**Former Planned Parenthood President Cecile Richards stopped short on Tuesday of criticizing Michelle Wolf over her jokes about abortion at the White House Correspondents’ Dinner, though she did**

**say it’s not “a topic that I make jokes about.”**

**“She’s a comedian, that was her job,” Richards told CNN’s “New Day” co-anchor Alisyn Camerota.**

Richards added the obligatory caveat—abortion “isn’t a topic that I make jokes about, because, of course, I see what women face in this country just to access this care, and how much stigma and shame there already is in America”—before returning to what she really liked about Wolf’s abortion comments: that she hammered pro-life men in general, Vice President Pence in particular.

According to Judd’s story, “echoed Wolf’s point on Tuesday,” Richards said

**“I think she was also making the point that a lot of the folks, male politicians in particular, who rail against access to safe and legal abortion do so until it’s something that they actually find benefits themselves.”**

Richards has made a living—a very, very comfortable living—by making sure she never allows the discussion to move to what happens in an abortion, and to whom. Her response is invariable to impugn the motives of pro-lifers, as if no one could possibly find it revolting that innocent unborn children are torn apart in a manner straight out of the Middle Ages.

Richards criticizing Wolf? Impossible.



# AMA still says no to assisted suicide

By Wesley J. Smith

The AMA was asked by legalization activists to revisit its decades-long opposition to legalizing assisted suicide, specifically, to distinguish between suicide and the euthanasia movement's favorite euphemism, "aid in dying."

Big mistake. The Ethics Committee reiterated its opposition to legalization in full, with some wisdom worth recounting here.

First, the AMA rejects the nonsense that assisted suicide somehow isn't suicide. From "Report of the Council on Ethical and Judicial Affairs," CEJS Report 5-A-18 (all underlining mine):

**The council recognizes that choosing one term of art over others can carry multiple, and not always intended messages. However, in the absence of a perfect option, CEJA believes ethical deliberation and debate is best served by using plainly descriptive language.**

Exactly what I have been saying. But I digress:

**In the council's view, despite its negative connotations, the term "physician assisted suicide" describes the practice with the greatest precision. Most importantly, it clearly distinguishes the practice from euthanasia. The terms "aid in dying" or "death with dignity" could be used to describe either euthanasia or palliative/ hospice care at the end of life and this**

**degree of ambiguity is unacceptable for providing ethical guidance.**

Yes! But of course, those are the very reasons activists want to use the term.

**assisted suicide, nearly 4 percent "reported only psychological suffering."**

That may be old news. Recently published data show that more than 80 mentally ill

**of cases in which psychiatric patients obtained euthanasia found that physicians' reports "stated that psychosis or depression did or did not affect capacity but provided little explanation regarding their judgments" and that review committees "generally accepted the judgment of the physician performing EAS [euthanasia or physician-assisted suicide]."**

The report notes that quality end-of-life care is unequally available in the country, and is a particular problem for poor populations.

The report concludes:

**After careful consideration, CEJA concludes that in its current form the Code offers guidance to support physicians and the patients they serve in making well-considered, mutually respectful decisions about legally available options for care at the end of life in the intimacy of a patient-physician relationship. The Council on Ethical and Judicial Affairs therefore recommends that the Code of Medical Ethics not be amended.**

Good. A doctor's role is to heal, palliate, counsel, and treat. It should never be to help kill

*Editor's note. Wesley's great columns appear at National Review Online.*



The opinion also notes that the "guidelines will prevent abuse" meme hasn't exactly worked in Netherlands and Belgium:

***Although cross-cultural comparisons are problematic, current evidence from Europe present a cautionary tale. Recent findings from studies in Belgium and the Netherlands, both countries that permit euthanasia as well as physician-assisted suicide, mitigate some fears but underscore others. For example, research in the Netherlands has found that "requests characterized by psychological as opposed to physical suffering were more likely to be rejected...At the same time, however, among patients who obtained euthanasia or***

patients were euthanized in 2017 in the Netherlands, which happens in Belgium too.

The report shows that oversight in Netherlands tends to be a rubber-stamp affair, which I assert also happens in Oregon.

**Studies have also raised questions about how effective retrospective review of decisions to provide euthanasia/assisted suicide is in policing practice. A qualitative analysis of cases that Dutch regional euthanasia committees determined had not met legal "due care criteria" found that such reviews focus on procedural considerations and do not "directly assess the actual eligibility" of the patients who obtained euthanasia.**

A separate study

# YouTube Suspends Life-Saving Abortion Pill Reversal as “Harmful” or “Dangerous” Content

By Danielle White, J.D.

Recently YouTube suspended the Abortion Pill Reversal (APR) account for “repeated or severe violations of [the] Community Guidelines.” Four videos were posted to the account. The “offending” videos included one webinar explaining APR in scientific and medical terms. The remaining three told the stories of women who chose life for their babies using the APR protocol.

Citing its policies on “harmful or dangerous content,” YouTube opted to suspend the APR account entirely, explaining that it “doesn’t allow content that encourages or promotes violent or dangerous acts that have an inherent risk of serious physical harm or death.” Examples of videos that violate this policy are videos about “instructional bomb making, choking games, hard drug use, or other acts where serious injury may result.”

Above is one of the videos that YouTube deemed “harmful or dangerous.”

The move comes mere weeks after a new study found that the Abortion Pill Reversal protocol is both safe and effective for women who change their mind after beginning a chemical abortion. The study, which followed 754 women who wanted to stop their in-progress chemical abortion, reported a 68 percent success rate in reversing the effects of mifepristone, the first pill in the two-part chemical abortion process.

The APR protocol involves administering progesterone to counteract the first abortion pill. Progesterone is FDA-approved and has been used to prevent

miscarriage since the 1950s. Since 2007, over 500 women have used the APR protocol to save their babies from abortion. Today, the protocol is backed

“It’s hard to understand why YouTube would treat the rescuing of babies from an abortion pill the same as terrorism videos,” said

Although Abortion Pill Reversal is credited with saving hundreds of lives, Planned Parenthood, the world’s most aggressive and largest provider



*One of hundreds of women who have reversed their abortions to give birth to a healthy baby  
Photo Courtesy: Abortion Pill Reversal*

by a network of 350 medical providers.

Heartbeat International, which took the reins of the APR Network and Hotline (1-877-558-0333) just weeks ago, has begun the formal appeal process with YouTube.

Heartbeat International is no stranger to efforts to silence the life-saving APR message. Despite its safety and efficacy, the protocol has come under fire from abortion advocates, who oppose a woman’s right to choose not to finish an unwanted abortion. Since early 2016, Heartbeat International has successfully defeated multiple efforts by California bureaucrats to prevent nurses from learning about the life-saving protocol.

Jor-El Godsey, President of Heartbeat International. “On closer investigation, we believe YouTube will find that these videos in no way resemble such dangerous or harmful content.”

Since the protocol’s inception in 2007, abortion advocates have derided it as “junk science,” even though some doctors who support abortion acknowledge that Abortion Pill Reversal is built upon a sound scientific foundation.

Speaking with *The New York Times* this July, for instance, Yale School of Medicine’s Dr. Harvey Kliman said the protocol, “makes biological sense,” and went as far as to say he would recommend the treatment to his own daughter.

of abortion, still has its YouTube account.

Heartbeat International initiated YouTube’s formal appeal process on April 30. They are hopeful that rather than taking sides in the abortion debate, YouTube’s decision was a mistake.

“We are confident that YouTube did not intend to silence a woman who was merely telling her own abortion story, simply because that story ended with a healthy baby boy,” said Godsey. “We look forward to the account being restored quickly.”

*Editor’s note. This appeared at Pregnancy Help News and is reposted with permission.*

# Wide-scale female infanticide in Karachi, Pakistan

By Dave Andrusko

The sickening headline only begins to describe the horror that is taking place in Pakistan: “Karachi becoming a killing field for newborn girls.”

Writing last week for *The News*, Fakhar Durrani reports that the Edhi foundation and Chhipa Welfare organisation “have found 345 new born babies dumped in garbage in Karachi” between January 2017 to April 2018.

**“And 99 percent of them were girls.”**

Karachi is the capital of the Pakistani province of Sindh and is the most populous city in Pakistan

Anwar Kazmi, a senior manager in Edhi Foundation Karachi, told *The News*, “We have been dealing with such cases for years and there are a few such incidents which shook our souls as much. It left us wondering whether our society is heading back to primitive age.”

Kazmi disagrees with the police that the root cause of this infanticide is poverty and illiteracy, Durrani reported. According to Kazmi

**in [the] majority of cases infanticide is occurring due to out-of-wedlock births. Normally, people kill girls if they are born out of wedlock as this is considered a stigma.**

**However if the baby is a boy the family try to protect him.**

**“We have seen**

**so many horrible incidents. One such incident which still I remember despite passage of more than a decade is the stoning**



*The bodies of hundreds of newborn girls have been found dumped in garbage piles in Pakistan over the last year amid a cultural preference for boys, it has emerged (File photo, Daily Mail)*

**of a new born baby who was found outside mosque.”**

The numbers and the scale of the barbarism are just incredible.

**As many as 72 dead girls have been [found] buried in the first four months of this year by Edhi Foundation alone in the metropolitan city. The given data is just tip of the iceberg as Edhi foundation maintains the data of those cities where it provides services.**

**Chhipa Welfare Foundation, another NGO, came across 93 cases in Karachi where newborn girls were killed; around 70**

**their desired number of sons and daughters in Pakistan.**

**The study suggests that many families in Pakistan are increasingly making reproductive decisions based on the number of sons they have.**

Indeed, Durrani begins his story with an account of an anonymous report in February which led authorities to a dead baby whose remains were dumped in the garbage in Karachi. “They found a dead body of a new born. It was a four-day girl whose throat was slit with a sharp knife,” Durrani writes. “While girls were buried in pre-Islamic period as unwanted creature, cruel souls in Karachi are a step ahead: they kill and throw them at garbage.”

And then this chilling forewarning: “This nameless girl is not the only victim of barbarity.”

In Pakistan, both child abandonment and infanticide are criminal offenses and punishable crimes. However, “Normally, nobody reports such cases in police station and during last one year the Karachi Police registered only one case of infanticide,” a police official from the Additional Inspector General office told *The News*. “The police can properly investigate the causes of such cases whether they are illegitimate children or there are any other reasons only if the people register complaints.”

**babies in 2017 and 23 in this year.**

Durrani says the trend of female infanticide is rising, building on the well-known cultural preference for boys.

**According to a study carried out by Oxford Institute of Population Ageing, University of Oxford, over the past two decades, son preference has become more strongly associated with the practice of continuing to bear children until couples have achieved**

# Two very personal reasons Tucker Carlson hates abortion

By Jonathan van Maren

Whenever I see a media figure passionately defend the pro-life position, I always get curious. It's not surprising that there are pro-life people in the media, of course, especially on the right side of the spectrum. But when someone chooses to dedicate his time and energy in the media sphere to exposing the truth about abortion, revealing the lies of abortion activists, and advocating for the rights of pro-lifers to bring the truth to the public square week after week, I want to know what drives that passion.

Tucker Carlson, host of the wildly popular *FOX News* show *Tucker Carlson Tonight*, covers the abortion issue almost weekly, and he frequently brings pro-life activists on his show – from students experiencing censorship to well-known leaders like Lila Rose of Live Action. He's forced an apologist from Planned Parenthood to defend her views on abortion, interviewed a former Planned Parenthood director who changed her mind, condemned the promotion of abortion, and demanded that Democratic politicians explain when life begins. There are other pro-life anchors at *FOX News*, but none who so intelligently and consistently addresses the

issue from nearly every angle. So what makes Carlson so passionate about the issue?

As it turns out, the abortion issue is deeply personal one for Carlson. His father Richard was born in Boston in 1941 – to a fifteen-year-old girl – before being sent to an orphanage. If abortion had been legal at the time, Carlson believes, his father probably would never have been born. “If it had been 1973,” he told a pro-life audience, “I wouldn't be here.”

The story of his father's growing-up years is “a really messy story,” Carlson related. “Just because you make the right decision doesn't mean it's easy. That's one of the reasons people make the wrong decisions – because they fear that messiness.” For Carlson, though, that story had a happy ending. “In the end it worked out great, and I'm here because of that decision,” he said. “I have lunch with my dad every Friday, and talk to him every single day.”

Carlson's pro-life convictions have been strengthened by his own experiences as well. When he and his wife discovered they were expecting their second child – they now have four children, three girls and a boy – their physician informed them that testing showed that their

pre-born son had Spina Bifida. As doctors so often do, he recommended that the Carlsons



*Tucker Carlson*

procure an abortion.

“My wife responded with a very bad word,” Carlson recalled. “THE very bad word, to indicate that no way this was happening.” Susan Carlson informed the doctor in no uncertain terms that “you're not allowed to kill that child. You know why? Because you're not God.”

That son, incidentally, is a tall, strapping young man with no health issues whatsoever. The doctor who had advised the Carlsons to abort him had gotten in all wrong – and only the pro-life convictions of Tucker and Susan gave him the chance to grow up and embark

on his own career. Sadly, many stories do not end the same way. His father and his son are two reasons why Tucker Carlson is so passionate about the pro-life issue.

Carlson's story is a reminder that behind every abortion is a person who never got the opportunity to grow up, go to university, get married, or have children of his own. The millions upon millions of babies who have been aborted are not only individual lives that have been snuffed out; they represent entire generations that will never exist.

Abortion is a tragedy on many different levels, and that is something that should give us pause for somber reflection. Carlson, for his part, is grateful for pro-life organizations like Vitae – because he realizes this. “You can have the right views, but if no one hears them, then it's irrelevant,” he said. “Someone needs to be thinking deeply about how to make that case to the rest of the country.”

Pro-lifers are grateful that Tucker Carlson has been thinking about it, too.

*Editor's note. This appeared at LifeSiteNews and is reposted with permission.*

# I am Alfie Evans

By Leticia Velasquez, Co-founder of KIDS (Keep Infants with Down Syndrome) and author of "A Special Mother is Born"

*Editor's note. This was written just before Alfie died, five days after Alder Hey Children's Hospital disconnected his ventilator over his parents' vehement opposition.*

I am Alfie Evans. Unlike Alfie's, my genetic anomaly is known. It has a name: Down syndrome.

Yet up to 99% of babies like me are aborted in places in Europe. Iceland brags (and that is not too harsh a description) that it will be "free" of Down syndrome because this anomaly can be discovered via prenatal testing with deadly accuracy.

Seems that not many moms and dads want to raise a child

and assistance at many if not all stages of my life.

So much so that many powerful people (like the UN) have done the cost/benefit analysis and have determined that ending my life is more cost effective than giving me expensive care.

Up until till two decades ago, children like me were

by lethal injection.

Later they tried out the gas chambers on us, saving our clothing, of course. That was worth something.

Sound familiar?

Today aborting us is considered by some a human right. But I ask you, are we that threatening to your happiness, that you can't just let us live?

Alfie Evans is all of us, whether we have a disability now or not. We forget that most everyone of us will at some point in our lives be sick or feeble, have diminished capacity for self care, or forget who we are.

We will be considered a "burden" by those who pay our bills, whether family or the state, and will be "helped" to die.

**Quickly.**

**Cost effectively.**

**Quietly.**

But there is hope if only we heed the words of poet Dylan Thomas.

"Do not go gentle into that good night.

Rage, rage against the dying of the light."

We who are Alfie Evans will rage for you, and against those who would usher you too soon into that good night. We will rage because we, too, are Alfie Evans.

Please DONATE to: [www.justgiving.com/crowdfunding/sarah-evans-791](http://www.justgiving.com/crowdfunding/sarah-evans-791)

**RELEASE ALFIE EVANS**

Please sign PETITION

[www.change.org/p/we-demand-alder-hey-to-release-alfie-evans-to-a-hospital-of-his-parents-choice](http://www.change.org/p/we-demand-alder-hey-to-release-alfie-evans-to-a-hospital-of-his-parents-choice)



When you devalue Alfie Evans' life because of his bleak prognosis, and when you seek to take away his parents' God-given rights to secure better treatment, you devalue my life, which is still in jeopardy.

You say there is no cure for Alfie's condition. There is no "cure" for mine, either. That does not make my life less valuable, less important, less significant.

with my issues: heart and intestinal defects, flattened face, short fingers and toes, increased probability of leukemia, diabetes, and Alzheimer's, reduced intelligence, increased probability of obesity, and thyroid problems.

I cost the state much more money than a typical kid (those who stay out of prison and drug rehab, that is). I need special education and therapy, housing

left to rot in state institutions. Sometimes my parents signed a death certificate, relinquishing all responsibility and all connections to me.

Not many people know that the dress rehearsal for the Holocaust of 6 million Jews started with programs like the T4 Program to have people like me (whom they labeled "useless eaters" ) killed by my own doctors, by starvation, by cold exposure, or

# Abortionist pleads guilty to lesser charge in death of woman he aborted at 25 weeks

By Dave Andrusko

Abortionist Robert Rho, who said he has performed 40,000 abortions over his career, pleaded guilty Friday afternoon to criminally negligent homicide in the 2016 death of Jamie Lee Morales. Rho aborted her 25-week-old unborn baby for which he charged Morales \$6,000.

Lichtman “and DA Brown struck their deal a little after 3 p.m. – on the third day of deliberations,” the *New York Post* reported.

In a statement, Queens District Attorney Richard A. Brown said, “Sadly, a 30-year-old woman lost her life as a result of the surgery.” He went on to say, “The doctor has now accepted responsibility and admitted he failed to realize the damage he’d done and did not provide appropriate and timely medical care following the surgery.”

By contrast Jeffrey Lichtman, Rho’s attorney, called the agreement a “monumental victory.”

Rho “had faced a top charge

second-degree manslaughter, punishable by 5 years and 15 years in prison,” the *Associated Press* reported. Rho, who will be sentenced by Justice Gregory Lasak on June 26, faces up to four years in prison,



Abortionist Robert Rho (left) in Queens Criminal Court.  
(Todd Maisel/New York Daily News)

but Lichtman insists he expects a sentence of less than a year.

“It’s about greed and arrogance,” Assistant District Attorney Brad Leventhal said in closing arguments. “Jaime

Morales bled to death because this defendant did nothing.”

Morales went to Rho’s Liberty Women’s Health of Queens with her sister on July 9, 2016. “During the surgery, Rho caused a laceration in her

with appropriate and timely medical attention” when she bled profusely, *Newsday* reported. “Rho performed a second surgery to stop the bleeding, prosecutors said, but didn’t realize Morales needed emergency medical care.”

After collapsing in a vehicle during the drive to her sister’s home, Morales was transported to a hospital where she was treated for vaginal bleeding, Zachary R. Dowdy reported. “She was pronounced dead the same night, officials said.”

After Ms. Morales’s death, Rho closed his abortion clinic and surrendered his medical license.

Buried near the end of the *AP* story is this insight into Rho’s history.

**Even before Morales’ abortion, the doctor had been investigated by state officials over concerns that he was performing procedures improperly and using assistants who lacked medical training, witnesses said at the trial.**

cervix, a perforation of the uterine wall and a disruption and transection of the uterine artery, officials said.”

Officials said Rho then “failed to provide the woman

# Young truth-tellers show they are ready to make the case for life with wisdom beyond their years

By Maria Gallagher, Legislative Director, Pennsylvania Pro-Life Federation

Steve Jobs, Tim Tebow, Celine Dion, and Pope John Paul II. Aside from their celebrity status, what did these luminaries have in common? The answer was that each one of them could have died in their mothers' wombs through the tragedy of abortion.

This was just one of the insights from the young people who recently competed in a pro-life speech contest that I helped judge. The winner of the senior high school division will win an all-expense-paid trip to the National Right to Life Convention June 28-30 in Kansas (See <http://nrlconvention.com/> for details about the convention's fabulous agenda.).

There, these bright young pro-life advocates will join

these contestants demonstrated was truly incredible. It made me wonder, if a pro-abortion politician such as Hillary Clinton or House Minority Leader Nancy Pelosi (D-Ca.) spent ten minutes with these young scholars, would the politicians be left speechless?

The arguments these students presented were so well-crafted, so compelling, that it would be difficult for anyone to effectively counter their presentations.

These are students who know that 60 million preborn children have been aborted in the U.S. since the 1973 U.S. Supreme Court decision *Roe v. Wade*. They have never known a time when abortion wasn't legal, when euthanasia wasn't a threat. And yet, rather than

current culture this way: "A few days ago, right here in Pennsylvania, a dog was strangled nearly to death. The man who committed the act

conception. A simple truth that many reject. And no matter how many times they shut me down for saying such a truth, I will stand up and say it again."



*Telling the truth*



*Truth-tellers: 2017 NRLC Oratory Contest Contestants*

students from around the country at National Right to Life's impressive National Oratory contest.

The knowledge about current events and the life issues which

embrace the country's culture of death, they want to defeat it with a peaceful, articulate response.

A young man named Gerard explained the poison in our

was charged with cruelty to animals. He was put in jail and fined \$15,000. Meanwhile, preborn babies are being strangled and suffocated in the womb, and the world is turning a blind eye."

A young woman known as Jessie eloquently stated, "There is no place to draw the line on the quality of life in a baby. There's no room in the life cycle to declare when the baby is really alive. Not in the first trimester, not in the second, not in the third. Not in the passage through the canal, not when your baby has eyes, not when you watch it kick during an ultrasound. Life starts at

I would like to see her in a debate with the next president of Planned Parenthood!

From statistics to scientific facts about fetal development, from personal stories of older relatives courageously living out their last days to powerful statements about the pain of women suffering from abortion, these young truth-tellers are ready to make the case for life with wisdom beyond their years.

If only the rest of the country will listen to them, a culture of life will be rebuilt in America sooner than we could have dared to hope.

# Alfie Evans: the NHS, from the cradle to the grave?

## *Does the controversial case represent the failure of Britain's public health system?*

By Ann Farmer

Following the death at Alder Hey Hospital of little Alfie Evans, who had a rare neurological condition, Christina Odone recalled her brother Lorenzo, who at six years old developed a rare neurological condition that “robbed him of hearing, sight, gait and swallow.” Her parents’ ultimately successful quest to find a remedy was immortalised in the film *Lorenzo’s Oil*, but had her parents lived not in America but in the United Kingdom, she doubts that they would have been allowed to make the same choices.

In the UK, the Children Act of 1989 is clear that the state should intervene to safeguard the child’s best interest. In other words, medics, lawyers, and judges can step in to protect a child from ... his parents.

Despite the best efforts of Alfie’s parents and his supporters worldwide, hospital officials, backed by judges, flatly refused to allow the little boy to be transferred to a hospital willing and able to offer an alternative to the treatment that they proposed – death by withdrawal of life support and, apparently, nutrition — although when Alfie continued to breathe on his own after his apparatus was disconnected, water and some oxygen were given.

Nigel Farage [a British politician and analyst] described the Hospital’s action as “state-sponsored euthanasia.” Such comments have been seen as melodramatic and even

dangerous for undermining public confidence in Britain’s National Health Service (NHS). But the NHS has undermined confidence in itself by doggedly refusing to allow second opinions in such cases.

Most reasonable people would ask why it continues to refuse to allow such children to be transferred elsewhere for treatment which, if it failed, would increase confidence in their approach, while parents would be consoled that at least all avenues had been tried. Sadly, they have concluded that the answer to this question is that the NHS wishes to avoid the “risk” of an alternative approach proving successful, as with little Aysha King.

It is unsurprising that public confidence is at a low ebb when the law, which regularly turns a blind eye to people going to commit suicide in Switzerland, stationed uniformed police officers outside little Alfie’s hospital room, apparently to protect him from being saved.

The same approach has been adopted in establishing “safe” areas around abortion clinics so that unborn babies can be killed – safe from being saved by offers of help from concerned individuals, when the State only offers death.

Abortion has been described as pre-birth euthanasia, and it was always the aim of the inter-linked abortion and euthanasia campaigns to introduce infanticide for babies whose disabilities are not detected in the womb; indeed, prominent

abortion activist Madeleine Simms, instrumental in the legalisation of abortion, tried to interest Parliamentarians in a campaign to introduce infanticide on the same basis as the Abortion Act – a sort of

child’s “best interests,” which are now seen as death rather than disability.

When the NHS began on July 5, 1948 it was hailed as a benign institution that would care for people “from the cradle to the



post-birth parents’ right.

Unfortunately for this approach, however, while couples who are not given full information on the care of the disabled can be scared into agreeing to abortions, when disabled children are born or later become disabled, their parents tend to fight tooth and nail to protect them.

In the face of “problems” like the parents of Alfie Evans, Charlie Gard and Aysha King, what better way to introduce infanticide by the back door than by applying a child protection law – the 1989 Children Act – to protect a

grave.” Seventy years later, it has prevented nearly nine million children from being born, but if they do make it to the cradle it will now hasten their journey to the grave.

In Victorian times the poor were fearful of entering hospitals in case they never came out alive; it seems that this country is going back to those days.

*Editor’s note Ann Farmer lives in the UK. This appeared at Mercatornet and is reposted with permission.*



# A baby's "first kick": it changes everything about abortion

By Dave Andrusko

I became "pro-life" long before I realized that abortion had been legalized nationwide in 1973. And I didn't even know it.

Though it more than five decades ago, I still can recall that moment in 1964. My mom, over 40 and already the mother of myself and my five younger siblings, encouraged me to touch her by-then prominent belly and then place my ear on it.

Talk about black and white becoming Technicolor. The abstraction that my youngest brother had been previously had now become a concrete, living, moving human being.

Wow.

That vivid memory was the first thing that crossed my mind when I read, "A Baby's Kick Changes Everything about Abortion," by Georgi Boorman.

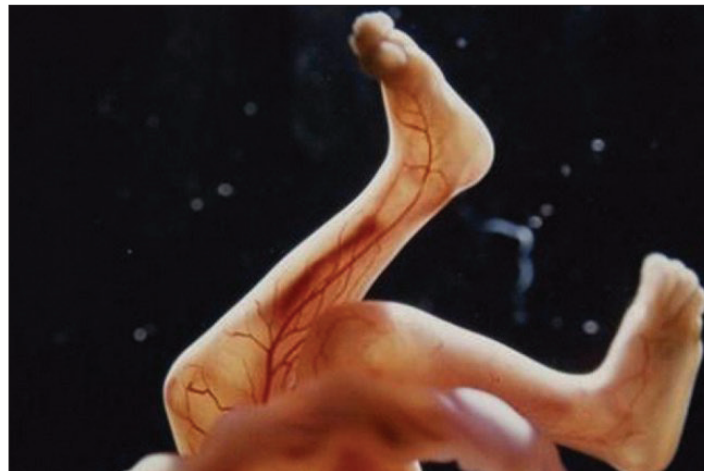
After I read the post, it occurred to me how infrequently we talk about an unborn baby's first kick these days, what we used to call "quickening." Because ultrasound pictures are almost ubiquitous (and take place earlier in pregnancy), comparatively little attention is paid to that moment which occurs somewhere around the 20th week.

Boorman's baby packs a wallop. As she writes,

**No, it's not comfortable. No, it doesn't feel "natural," not because it isn't, but because there's nothing I've felt quite like it. My husband told me our baby never felt more real than after she started**

**kicking. The ultrasounds were beautiful, especially seeing her heartbeat. But it was still more conceptual at that point. When you feel her move, it's like she's saying, "I'm here! I'm real! I'll be out in the world soon!"**

Then, a few paragraphs later **For the first time in my life, the life of my**



**baby is more than a concept, and so now all my reactions to pro-abortion articles are physical, not just intellectual or even emotional.**

These reassuring comments are bracketed by her thoughts on abortion and help the reader understand her responses. First, quoting Lindy West, the pro-abortion author of a new book excerpted in *Glamour* magazine, she wonders how anyone can write the following:

**I don't give a damn**

**why anyone has an abortion. I believe unconditionally in the right of people with uteruses to decide what grows inside their body and feeds on their blood and reroutes their future. There are no 'good' abortions and 'bad' abortions, there are only pregnant people who want them**

thought [came] to cover my anger."

That all women who've aborted not only "need healing" but also "need divine forgiveness and grace, as we all do." She continues

**The empathy I have with these mothers is that of a fellow sinner in need of redemption. ... But grace has already come through Christ, and he mends what is torn. It is through him that we can love fully; he replaces the turmoil of our wrongdoing with a peace "that transcends all understanding."**

One other thought about Mrs. Boorman post at the *Federalist*.

**My baby is real— not just real to me, but objectively real. She shows up in my blood test and on the ultrasound, and others can feel her kicks. She is very much a human being.**

However, as the quote from Ms. West reveals, to the pro-abortion mind the child is not "objectively real." Or, better put, it doesn't make any difference. The only question is "wantedness."

Thank goodness it would never have occurred to my mother that the lives of the seven Andruskos depended on us being "wanted."

But they do. In more polite, more discrete language, that is precisely the view people like Hillary Clinton subscribes to.

On the back side of this quote, Boorman is particularly distraught by women who have already given birth to children but who, nonetheless, abort. I was encouraged that "a gentler

# Eric Schneiderman, the now ex-AG of New York, and Planned Parenthood's bizarre response

By Carol Tobias, President

Amazing... and disgusting. Eric Schneiderman, the pro-abortion Attorney General of New York, resigned Monday after *The New Yorker* shared the story of four women who accused him of physical and verbal abuse.

According to the article, one of the women "told several friends about the abuse. A number of them advised her

to keep the story to herself, arguing that Schneiderman was too valuable a politician for the Democrats to lose."

Schneiderman claimed to be a proud champion of women's rights and vigorously defended abortion. In an effort to silence pro-life counselors outside a New York abortion facility, he stated, "We are not a nation where you can choose your

point of view, choose your facts, and choose your laws."

Evidently Schneiderman is convinced only his point

Kellyanne Conway, Counselor to the President, tweeted, "Gotcha."

As amazing and disgusting as



**Eric Schneiderman** @AGSchneiderman · May 3

A year before Roe v. Wade, I graduated from high school, went to Washington DC, and got a job working in an abortion clinic.

I learned an important lesson at a young age.

If a woman does not have the right to control her own body, she is not truly equal. She is not truly free.

of view is relevant! And as the chief law enforcement official in the state government, it appears clear he believes the law is for other people.

As an activist Democrat, Schneiderman attacked President Donald Trump with a passion matched only by his sanctimonious tone. He aggressively challenged many Trump administration policies, which is his right.

But consider a tweet from last October where Schneiderman went so far as to write, "No one is above the law, and I'll continue to remind President Trump and his administration of that fact every day."

Whether abortion or administration policy, Schneiderman thinks the law should be whatever he decides it should be.

After Schneiderman announced his resignation,

Schneiderman's behavior was, consider this from the Planned Parenthood Federation of America, the nation's largest abortion provider. PPFA replied to Conway, telling her to "delete your account."

In Twitter lingo that is basically meant as a biting insult, that your opinion is of no consequence and you shouldn't be spouting your nonsense.

The details these four women shared of Schneiderman's actions and words are revolting. And yet, PPFA was defending him so they could attack Conway.

PPFA wants everyone to believe their primary concern is "helping women." They have proven, once again, that they don't care about unborn babies or women.

Disgusting? Absolutely! Surprising? Absolutely not!



*Eric Schneiderman*

*Photo: Office of the Attorney General*

# Children with Down syndrome have the right to live even if you do not want them

*An open letter to The Washington Post Editor Ruth Marcus*

By David G. Lejeune, President, Jerome Lejeune Foundation USA

*Editor's note. Mr. Lejeune drafted this open letter in response to The Washington Post op-ed titled "I would've aborted a fetus with Down syndrome. Women need that right" by deputy editorial page editor Ruth Marcus. It was composed on World Down Syndrome Day.*

Dear Ruth Marcus,

In your op-ed in *The Washington Post*, you claim that you would have terminated your pregnancies had the testing for each child come back positive for Down syndrome. While you are free to voice your personal opinion, even an ill-considered one, I am compelled to publicly refute the statements you made regarding aborting children with Down syndrome.

Lives are at stake. If your advice were accepted by others, the lives of innocent children would be eliminated and families would be deprived of loving, beautiful human beings who contribute immensely to human flourishing.

Here are five reasons why your views are dangerous:

## **I. EUGENICS IS ALWAYS WRONG**

The policy you are advocating has its genesis in the dark world of eugenics, where children are selectively eliminated because something about them is considered to be undesirable. You believe that it is acceptable to terminate a pregnancy if you do not want a child, but you go a step further – you celebrate the right to selectively terminate a pregnancy when the particular

child is not wanted.

Eugenics, by its very definition, is “the practice or advocacy of controlled selective breeding of human

millions, along with infanticide, to enforce it. In China, there is a traditional preference for boys, and in a one-child world female children are considered to be

eugenics, and it is wrong. Once you go down this path, where does it end?

I think you know that what I am saying is right, because you



populations to improve the population's genetic composition” (Merriam-Webster). Eugenics has a long history that goes hand-in-hand with racism, hatred, and disability discrimination.

We don't have to go back in history to understand the practical impacts of the policy you are advocating – the elimination of a particular child because something about them is considered to be undesirable. We need look only at China's “one child” policy to understand the implications.

In China, families have been strictly limited to one child, and forced abortions occur by the

undesirable. As a consequence, it's estimated that 100 million female children have been aborted in China.

As a feminist, how do you reconcile tacit support for the underlying principle of eugenics that has resulted in the death of so many female children?

Of course, people with genetic abnormalities or disabilities stand no chance of being accepted in a society that tolerates eugenics. Abortion for the sole reason of eliminating a particular child, one with Down syndrome, is no different that eliminating a child because she is female. It's simply modern

are forced to admit that, “There are creepy, eugenic aspects of the new technology that call for vigorous public debate.” But in an “ends justify the means” equivocation, you quickly pivot to affirm that the absolute right to abortion trumps any concern over elimination of human beings with certain characteristics. So you justify abortion of children with Down syndrome in the same way that China justifies abortion of children of the female gender.

*See “Children,” page 25*

# The pro-abortion, truth-shaving Irish media

By Dave Andrusko

We don't need to rehash at length what we've documented time and time again. The Irish media is pro-abortion from its collective head to the soles of its feet. It is not a debatable proposition.

In the category "it would be funny if it weren't so malevolent" is the constant drumbeat that the under-funded and out-gunned opposition to gutting the Eighth Amendment to the Irish Constitution is deliberately playing fast and loose with the truth.

But as is always the case, this is the pro-abortion side attributing to the pro-life side what the anti-life forces excel at: distortion and misrepresentation.

"Save the Eighth" is exactly what it sounds like. A coalition of Irish pro-life organizations attempting to defeat this month's referendum which, if passed, would first eliminate the equal protections to mothers and unborn children guaranteed by the 8th amendment. But it would also authorize the government of the Republic of Ireland to legislate on abortion.

At a minimum the government proposes to legalize abortion through the first twelve weeks but the door is wide open for virtual abortion on demand if any of a variety of conditions are meant.

Which brings us to the *Independent*, which has its self-important fact-checking

department geared up to answer this question: "Are 1 in 5 babies in England aborted? We look at

babies beginning at conception, if you add in miscarriages to live births and abortions, fewer

1 in 5. Perfectly accurate."

But the *Independent*, like the *Irish Times* and the other



the facts behind a Save the 8th campaign poster."

Their conclusion?

**Verdict: Unproven, which means that "the evidence available is insufficient to support or refute the claim."**

Stay with me because this combines hair-splitting and misdirection culminating in bald-faced absurdity.

The Factchecker argument (if what he/she writes can be called an "argument") is that since pro-lifers see all babies as

more than 1 in 5 babies are aborted.

Two obvious answers. First, does anybody not understand the difference between deliberately aborting and what is sometimes called a spontaneous abortion—a miscarriage?

Does anyone besides this "Factchecker" not see what the poster is saying? That in a conscious choice between life and abortion, 1 in 5 babies are lost to abortion?

Second, as one respondent noted online, "As a proportion of live births to abortions – it is

major secular Irish media, is determined not just to pass the referendum but in the process to smear pro-lifers—to pretend that we can't make a legitimate argument in defense of the 8th Amendment. This has long-term consequences.

Remember, if the referendum passes, the government will move to formally unleash the abortion industry, step by step. And if pro-lifers can't be trusted....

It makes their job of misrepresentative and truth-shaving all the easier.

# Goal of abortion extremists is to force Americans to embrace abortion as mainstream health care and to pay for it

By Greg Schleppebach

To those who see abortion for what it is—an abortionist purposefully and brutally killing an innocent, defenseless human life in her or his mother’s womb, —advocating for its legality (even as a constitutional “right”) is nothing less than extremism.

So, it seems hard to imagine an even greater level of extremism being advanced by the abortion industry and its adherents in elected office, the media, and elsewhere. But the evidence is clear and plentiful.

For starters, the abortion industry has been shifting its euphemistic mantras from “freedom of choice” and “if you don’t like abortion, then don’t have one” to “abortion is health care.” This rhetorical shift is necessary for its pursuit of a more extreme policy agenda to force Americans to embrace abortion as mainstream health care and to pay for it.

This agenda includes forcing health care providers and institutions to provide, participate in, or refer for abortion—and to force all Americans to pay for abortions through their health care plans. Tragically, we can already see this agenda becoming reality.

Just in the past few years, California, New York, Oregon, and Washington have begun forcing churches and/or others who oppose abortion to provide

coverage for it in their health care plans. A growing number of health care providers are being forced to choose between

oppose bills that ban late-term abortions or prohibit abortions solely because a child is disabled or is the “wrong”

industry opposes or wants to eliminate these policies.

Equally extreme is the “Women’s Health Protection Act” (S. 510/H.R. 1322), a federal bill with a title as deceptive as its provisions are dangerous. It would invalidate almost every state or federal law that seeks to restrain or regulate abortion by demanding that the law treat abortion like a routine women’s health procedure.

Abortion extremism goes beyond policy advocacy. Just one example was in the recent March 9 edition of the *Washington Post*: an opinion columnist proudly declared that she “would’ve aborted a fetus with Down syndrome” because, she said, “that was not the child I wanted.” It’s hard to imagine a more extreme, cold, and grotesque view than that.

I believe that most Americans would be appalled by—and oppose—an industry that embodies such extremism, if only they know about it.

It’s up to us to make sure that they do.

*Editor’s note. Greg Schleppebach is the Associate Director of the Secretariat of Pro-Life Activities of the United States Conference of Catholic Bishops. This appeared at Life Issues Forum.*



involvement in abortion via participation or referral, or losing their jobs. Several states and municipalities have passed laws forcing pro-life pregnancy centers to tell women where they can get abortions.

The abortion industry also wants to force taxpayers to fund abortion by repealing the Hyde and Helms amendments and any other laws that prohibit use of taxpayer funding for abortions. Abortion advocates

sex. They even oppose bills that would require providing the same degree of care to a child born alive following an abortion as is provided to any other child born alive at the same gestational age.

All of these pro-life policies enjoy overwhelming public support that transcends an individual’s party affiliation, sex, race, and economic status. Yet, in line with its inherent extremism, the abortion

# Is abortion justified after an adverse prenatal diagnosis?

By Paul Stark, Communications Associate, Minnesota Citizens Concerned for Life

Sometimes, in the course of pregnancy, testing reveals a genetic or developmental problem with the unborn child—a “defect,” “abnormality,” “anomaly,” “deformity,” or condition “incompatible with life” (an odd way of saying “fatal”).

These revelations can be gut-wrenching. Many people think abortion is justified. In fact, medical professionals have frequently presented abortion to parents as the only or default option.

In a speech earlier this year on the floor of the U.S. Senate, Sen. Elizabeth Warren pointed to such “devastating stories” as a reason to oppose any legal limit on abortion late in pregnancy. Denying abortion would be “cruel,” she said.

Is she right?

## A disability, disease, or deformity doesn't justify killing

An unexpected prenatal diagnosis often isn't fatal. Non-terminal conditions range from cleft palate and Down syndrome to heart defects and sickle-cell disease.

These diagnoses pose real challenges to families. But is abortion an appropriate response? Not if the unborn child is a valuable human being.

Parents may not kill their toddler if they learn that she will be less intellectually capable than other children. They may not execute a 10-year-old with spina bifida because they think she would be better off dead. They may not terminate a Down syndrome teenager because raising her has become too burdensome.

If unborn human beings have a right to life, like toddlers, 10-year-olds, and teenagers, then killing them because of a disability or disease is equally unjustified.

Of course, some people think that unborn humans



(whether or not they are sick or disabled) do *not* have the same value and right to life as older human beings. But this is only a different form of wrongful discrimination. Just as ability and health are irrelevant to human rights, so too are age, size, location, and the desires and decisions of others.

All human beings are equal by virtue of their shared humanity. That's why killing disabled, sick, or “deformed” people, whether in the womb or out, is unjust.

The fears that drive abortion, moreover, are often unfounded. Many parents worry about the difficulties of raising a child with special needs. But caring for sick or disabled children, though hard, is enriching and rewarding, as many parents and caregivers attest.

Researchers at Boston Children's Hospital found that 79 percent of parents of children with Down syndrome say their child has given them a better outlook on life. Only 4 percent regret having their child in the first place.

emphasizing that they share similar hopes and dreams as people without Down syndrome.”

Frank Stephens, a man with Down syndrome, testified last year before a congressional committee. “[People with Down syndrome] are the canary in the eugenics coal mine,” he said. “We are giving the world a chance to think about the ethics of choosing which humans get a chance at life.”

Everyone deserves that chance.

## A life-limiting condition doesn't justify killing

What about when a child in the womb is diagnosed with a lethal condition, such as anencephaly, Trisomy 18, or Potter's syndrome? She will likely die before, during, or shortly after birth. Surely, many people think, a pregnant woman should not have to endure such a traumatic pregnancy.

But the fact that someone will soon die is no justification for killing her. We may not kill terminal patients in the cancer ward or elderly grandparents in the nursing home. Indeed, all of us will die at some point in the future, but we ought to be treated with dignity and respect in the present.

Natural death (by disease) doesn't make unnatural death (intentional killing) okay.

Nor is the alleviation of trauma a good reason for killing. Imagine a father whose 5-year-old daughter is dying of leukemia. This is an agonizing

“[T]he experience of Down syndrome is a positive one for most parents, siblings, and people with Down syndrome themselves,” the researchers conclude.

Some parents express concern about their child's future “quality of life.” Yet people with disabilities or medical limitations live meaningful and often happy and fulfilling lives. A major study published in the *American Journal of Medical Genetics*, for example, found that 99 percent of people with Down syndrome are happy.

“In our [survey], people with Down syndrome encouraged parents to love their babies with Down syndrome, mentioning that their own lives were good,” the researchers note. “They further encouraged healthcare professionals to value them,

*See “Justified,” page 41*

# Carrie Buck and the old eugenics, Alfie Evans and the new eugenics

By Dave Andrusko

About once a week my search for “Today in History” turns up a reminder, positive or negative, of something that pro-lifers should carefully ponder.

On May 2, I discovered that on that day 91 years before, in *Buck v. Bell*, the United States Supreme Court upheld a Virginia law that allowed the forced sterilization of people to promote the “health of the patient and the welfare of society.”

Specifically, the 8-1 decision, written by Justice Oliver Wendell Holmes permitted an innocent woman by the name of Carrie Buck to be involuntarily sterilized.

Carrie Buck’s “crime”?

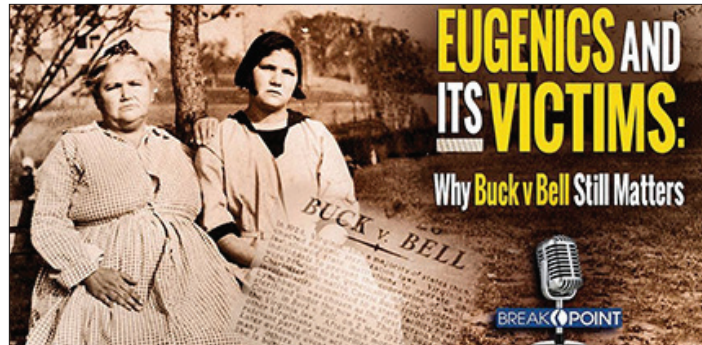
She was supposedly “feeble-minded.” As Social Darwinist Justice Holmes pronounced, in one of the ugliest declarations ever from our nation’s highest court, “Three generations of imbeciles are enough,” referring to Carrie, her mother, and her infant daughter.

Two years ago the *Washington Post*’s Charles Lane reviewed Adam Cohen then new book, “Imbeciles: The Supreme Court, American Eugenics, and the Sterilization of Carrie Buck.”

**As Cohen shows, everything had to go wrong in the legal system to produce this horror, and everything did, starting with a crooked local process that declared Buck intellectually inferior based on her out-of-wedlock pregnancy — an indicator, state doctors averred, of promiscuity,**

**which connoted feeble-mindedness.**

**In fact, she had been raped by her foster parents’ nephew;**



**the couple then sought to cure this embarrassment by having Buck sent away to the state colony for her “kind.”**

There is a particular poignancy that the anniversary of the *Buck v. Bell*, decision should come just a few days after the death of 23-month-old Alfie Evans. The elite in Great Britain—the trial judge, the Court of Appeal, the Supreme Court, and, of course, the heralded Alder Hey Children’s Hospital—all concluded Alfie Evans was “better off dead.”

(His parents’ wishes counted for absolutely nothing. They could not even persuade the hospital to allow Alfie to die at home.)

Of course, they were too adroit to put it that baldly. Rather maintaining Alfie on his ventilator [removal which virtual guaranteed he would die] was not in his “best interest.”

Mr. Justice Hayden, the trial judge, went further. He announced that if they did not

take Alfie off his ventilator, it could compromise his “future dignity.”

The connection to Carrie Buck and “American Eugenics”?

Lane wrote

**At its peak, in the years before, during and just after World War I, the pseudo-science of “eugenics” was a national fad, almost a mania.**

**Advocates were not only or even especially right wing; state sterilization laws emerged first in the North and West, and many progressives embraced “racial hygiene” along with pure food and drug laws or urban sanitation.**

Actually “The ‘right wing’ was not the driving force behind eugenics” at all, as Wesley J. Smith explained. “Progressives were, and those in the ruling class”:

**Indeed, the progressive elite and ruling class of the era almost unanimously and enthusiastically embraced the**

**pernicious notion with authoritarian zeal that human beings could be invidiously divided between the so-called “fit” and “unfit.”**

Eugenics was also that era’s scientific consensus. Those who opposed it were branded as anti-progress, perhaps even, anti-science.

We see similar agendas at work today; in the sex selection and pre-implantation genetic diagnosis practiced in the assisted reproductive industry; transhumanism’s push for developing “post human” genetic enhancement technologies, eugenic abortion of fetuses testing positive for Down syndrome and dwarfism, the push for infanticide of babies born with disabilities, among other supposedly progressive causes.

Wesley said it all in his conclusion:

**These “new eugenics” ideas will end up as tyrannical as the original version was. Here’s why: All eugenics—new and old—spring from the same toxic well—denial of human exceptionalism and the intrinsic and equal dignity of each and every one of us.**

**Once that dark vision is embraced, the weak come into mortal danger.**

## High school student has “bond” with baby, still aborts

By Sarah Terzo

Elizabeth became pregnant and had an abortion when she was in high school. Later, she had a second abortion. She says of the second abortion:

**“Over the months...**

**I had formed this bond with my baby. I used to talk to her and try to do things that would be good for her. I knew that I was going to get rid of her, but until then I wanted her to be healthy. This will probably sounds weird, but I really did love her...**

**“I am now taking precautions so that this will not happen again. The emotional part was a lot worse than the first time because I**

**had grown to know and love my baby. She was there when Bruce was not. But I could not**

**keep her. Selfishness probably had a part in it, I must admit. Also, I will never forgive**

**myself for the fact that Bruce’s father died.... I killed his granddaughter on the day that his life ended. I have always looked at it this way and I still feel guilty about it. I have also always thought that my baby would have been a girl. I guess you could call it a woman’s intuition or motherly instinct.”**



Carl Jones, *Should I Have This Baby?* (Secaucus, New Jersey: Carol Publishing Group, 1996), pp. 9 – 10.

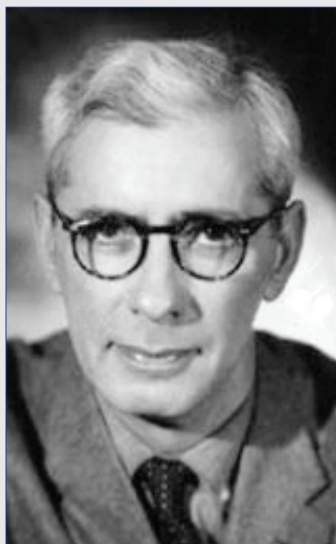
*Editor’s note. This appeared at Clinic Quotes and is reposted with permission.*

## Famous Anthropologist: giving birth to disabled children is a “crime against humanity”

By Sarah Terzo

When the fight to legalize abortion was just beginning in the late 1960s, some in the academic community supported legal abortion because they felt that abortion could prevent the birth of children with disabilities. Disabled people’s lives, they believed, were not worth living. Here is one example of a very famous anthropologist [Ashley Montagu] saying that it’s morally wrong to have a disabled child:

**“If life is sacred [referring to the argument of the writer**



*Ashley Montagu*

**of a previous letter to the editor]... then it is about time we begin treating it as such, instead of continuing to commit the frightful tragedies we do in permitting individuals to be brought into the world who will suffer all the days of their lives from seriously disabling defects. ... The initial basic right of the individual should be to be born without handicap. Anyone who, in the light of**

**the facts, assists in bringing a seriously handicapped child into the world in my view commits a crime against humanity.**

**Abortion could prevent that “crime.”**

Ashley Montagu, “Letters to the Editor,” *New York Times*, February 28, 1969.

*Editor’s note. Sarah Terzo is a pro-life author and creator of the Clinic Quotes website where this appeared.*



# Pennsylvania's Down Syndrome Protection Act Achieves Astounding Victory

By Maria Gallagher, Legislative Director, Pennsylvania Pro-Life Federation

Children with Down syndrome and their families achieved an astounding victory recently when the Pennsylvania House of Representatives overwhelmingly passed legislation designed to protect preborn babies who have been diagnosed with an extra chromosome.

House Bill 2050, the Down Syndrome Protection Act, achieved passage by an incredible vote of 139-56. The bill passed with a veto-proof majority—extremely important in a Commonwealth led by a pro-abortion Governor, Tom Wolf.

The bill now moves onto the Pennsylvania Senate for consideration. Pennsylvania residents are urged to call their state Senators and encourage them to support House Bill 2050.

The disability rights bill has tremendous crossover appeal—it is being backed by both Republicans and Democrats, men and women. In fact, legislators who have voted pro-abortion in the past embraced the legislation because of its laser focus on children with disabilities.

The Speaker of the House, Rep. Mike Turzai (R-Allegheny County), was one of the prime sponsors of the bill. He eloquently stated the case for the legislation:

“I believe in the dignity of every human being. None of us are born perfect, and we all have something beautiful to contribute. Pennsylvania is a loving, compassionate community, and we want to extend welcome and support to Down syndrome families. They need to know they’re not alone,” Turzai said.

Another prime sponsor, Rep. Judy Ward (R-Blair), spoke of the tremendous potential of people with a Down syndrome diagnosis.

“The future has never been brighter for babies born with Down syndrome,” Ward said. “Medical and social advances have changed what it means to live with this condition. Down syndrome means that opportunities exist in every area of school, community and even professional life. We’ve learned too much to accept that Down syndrome citizens should be considered anything less than full members of the

community. They deserve respect and the protection of our laws.”

During a well-received media event at the Capitol in

making so much progress, a whole industry has grown up focused on prenatal screening – screening that would end our lives before we take our



Harrisburg, Karen Gaffney, who has Down syndrome, impressed the crowd with her impassioned remarks. Gaffney defied the odds by swimming the English Channel and receiving an honorary doctorate for her many accomplishments.

“Those of us with Down syndrome and our families face a very difficult future. We face a possibility of wiping out all of the tremendous progress we have made. Just as we are

first breath. Now that you can test for Down syndrome before birth, there are many experts in the medical community that say this extra chromosome we carry around is not compatible with life. Not compatible with life?” asked Gaffney. “After everything we have done, I would say we are more than compatible. We are what life is all about. Our lives are worth living and our lives are worth learning about.”

# Minnesota Senate approves ultrasound right-to-view measure

*More medical information would empower women*

ST. PAUL — Mainstream pro-life legislation to ensure women's right to view their ultrasound was approved on a bi-partisan vote today by the Minnesota Senate.

S.F. 2849 would provide women with factual medical information prior to an abortion. The bill would add a paragraph to the state's existing Woman's Right to Know informed consent law.

The informed consent measure has the strong support of Minnesota Citizens Concerned for Life (MCCL), the state's oldest and largest pro-life organization.

S.F. 2849, authored by Sen. Michelle Benson, R-Ham Lake, would simply allow women to view their ultrasound prior to an abortion, if an ultrasound is performed. The legislation would require the physician or person performing the

procedure to offer the woman the opportunity to view her ultrasound as it is being done.

The measure has earned bipartisan support in both chambers, and was passed on a bipartisan vote of 37-30 in the Senate today.

Even though most abortion facilities perform ultrasound prior to an abortion to determine the development and location of the unborn child and the appropriate abortion method, they typically do not offer women the chance to see the ultrasound.

"This bill is about informed consent for women," said MCCL Legislative Director Andrea Rau. "Women have a right to comprehensive information prior to an abortion, empowering them to make the best decision for them."

More than two dozen states have enacted laws related

to ultrasound, though many are much more prescriptive than S.F. 2849. The MCCL-supported initiative would ensure that women are given

access to their ultrasound, enabling them to make a truly informed decision regarding abortion.



*MCCL Legislative Director Andrea Rau*

## Children with Down syndrome have the right to live even if you do not want them

*From page 18*

What's next? What other characteristics that people might consider to be undesirable should justify a particular child's elimination? Race? Prospective IQ? Disability like blindness or deafness? The slippery slope you are on has no principled ending point. The issue of whether a child should be allowed to live even if he or she is not wanted due to minor characteristics should not even be a question. We all have a basic right to life.

**II. There is no constitutional right in the U.S. to abortion an unborn child with Down Syndrome**

**III. You appeal to morality, but there is nothing moral about your position**

**IV. The purpose of prenatal testing is not to decide whether to kill a baby**

**V. Your statements devalue the lives of those living with Down Syndrome**

### Conclusion

Ms. Marcus, today is World Down Syndrome Day as established by the United Nations, and I stand with millions of people across the globe to raise public awareness and support for individuals with Down syndrome. This year we emphasize "how people with Down syndrome can and do make meaningful contributions throughout their lives, whether in schools, workplaces, living in the community, public and political life, culture, media,

recreation, leisure and sport."

A life with Down syndrome is a life worth living, and a life worth defending. I stand with my brothers and sisters with Down syndrome and ask you to reconsider your beliefs and the dangerous effect your words may have on vulnerable children in the United States and beyond.

Sincerely,  
David G. Lejeune

# Studies show preborn children can form memories in the womb

By Nancy Flanders

The first memories you ever made were made when you were just a preborn baby in your mother's womb. At least that's what researchers from a variety of studies are concluding. At what point they are first capable of making memories is still up for debate, but with each study, the proof was found that these little humans are capable of creating memories.

A 2009 study published by *Child Development* looked at short-term memory in preborn children ages 30-38 weeks gestation. Nearly 100 pregnant women participated in the study, which tested how their preborn children responded to specific vibroacoustic stimulation – a low sound that makes a vibration. The reactions were observed by performing an ultrasound.

Researchers found that the first time the fetuses received the stimulation, they were startled. However, after repeated exposure to the stimulus – about 13 times, each thirty seconds apart – the fetuses stopped reacting. This showed that they got used to the sound. Researchers call this habituation, which is something we all do. For example, we get used to the sounds around us such as the hum of a heater or air conditioner to the point that we don't even notice it anymore.

“Habituation is a form of learning and a form of memory,” explained Dr. Jan Nijhuis, a co-author of the study and an obstetrician.” He and his colleagues found that 30-week-old fetuses had a memory of 10 minutes and with each round of stimulation they



were able to become habituated to the sound faster. They also discovered that at 34 weeks, preborn children were able to “store information and retrieve it four weeks later.”

“So that shows that there is a sort of remembrance of 4 weeks,” he said.

A separate study by researchers at the University of Helsinki asked a group of pregnant women to play a track of the nonsense word “tatata” to their preborn child every so often. Another group of pregnant women acted as the control group and did not

play the track at all.

After the babies were born, the researchers watched their brain activity while playing the track of “tatata” and found that those who had heard the sound while in the womb registered brain activity when they heard it after birth, while those who

rhyme. Testing was performed at 28, 32, 33, 34 weeks to learn whether or not the preborn child recognized the nursery rhyme.

Then, the mothers stopped reading the nursery rhyme at 34 weeks and researchers performed the testing again at 36 and 38 weeks. They found that by 34 weeks, the fetuses' heart rates slowed when they heard the rhyme, showing that they responded to it. In a control group who had not been reading the nursery rhyme, the babies' heart rates accelerated when they heard it for the first time.

Each of these studies indicates that preborn children are capable of forming memories. The information researchers have learned can help doctors to better care for both preborn children and newborns, especially those who are premature. But this research also shows the humanity of the preborn child. Not only are they physically capable of hearing, but they are also capable of having an emotional connection with the sounds they hear, including the voices of those around them.

Fetuses — preborn children — are human beings who should have the same rights as the rest of us.

were not exposed to the sound in the womb did not register brain activity when they heard it after birth. Researchers concluded that a fetus's memories last beyond birth.

In a more recent study, published in 2013, researchers used “cardiac orienting response” – a small change in heart rate – to learn when a fetus is capable of memory. Pregnant women were asked to read a nursery rhyme that they had never read to their preborn children before. Twice a day between 28 and 34 weeks gestation the mothers read the

*Editor's note. This appeared at Live Action News and is reposted with permission.*

# “Baby Doe,” Down syndrome, hardened hearts, and Alfie Evans

By Dave Andrusko

The recent blowback to a deeply insensitive and in many ways creepy op-ed written by Ruth Marcus, deputy editorial page editor for the reliably pro-abortion *Washington Post*, has not lessened. Nor should it.

Indeed, the *Post* itself revisited the entire issue raised by Marcus—aborting children for no reason other than that they are diagnosed with Down syndrome—in a story written by Paige Winfield Cunningham under the headline, “Abortion debate turns to Down syndrome.”

Although Cunningham saves her merely passing reference to Marcus until the very end, in fact it was Marcus’ article and her doubling down when criticized that is the latest example of a phase of the abortion debate whose visibility continues to grow.

Why?

Because states are beginning to pass laws that say you can’t wipe out children because, and only because, they have an extra chromosome.

The headline to Marcus’ op-ed was an accurate representation of her argument: “I would’ve aborted a fetus with Down syndrome. Women need that right.” It was her snarky attitude that aggravated an already awful thesis.

Go ahead and have your Down syndrome baby but not me, a big-shot newspaper type. Referring to her own two children, Marcus remarks, “I would have terminated those pregnancies had the testing come back positive. I would have grieved the loss and moved on.” Ah, yes, “and moved on.”

Cunningham makes the point that not all pro-choicers are comfortable with what is (although never described as such) modern day eugenics. As she put it

**The debate doesn’t cut cleanly across traditional lines in the abortion fight. While some who favor abortion rights**



**feel women should be able to terminate their pregnancies for any reason, others worry that certain populations are being discriminated against or even at risk of being wiped out.**

She then talks at length about a brand new book written by bioethicist Chris Kaposy, whose son has Down syndrome. He wrote a recent *New York Times* op-ed in which he summarizing the core of “Choosing Down Syndrome: Ethics and New Prenatal Testing Technologies” (which she shortens to “Choosing Down Syndrome”).

But, as we noted (and as Cunningham alludes to) pro-

choicers like Kaposy merely “worry” about people with Down syndrome “being wiped out”—and seen as a good thing (see Iceland).

They want children with Down syndrome to be accepted—of course—but doing something about protecting them in utero fights a losing battle with their “pro-choice” credentials.

Two quick concluding

**the parents of a baby with Down syndrome declined surgery to fix an esophageal atresia, which led to his death. The baby’s doctor had argued the parents declined the surgery because he was intellectually disabled, not because the procedure was risky.**

I followed that case intently, during and after, and wrote many columns. Here is what George Will wrote back in 1982

**The baby needed serious but feasible surgery to enable food to reach its stomach. The parents refused the surgery, and presumably refused to yield custody to any of the couples eager to become the baby’s guardians. The parents chose to starve their baby to death.**

**Their lawyer concocted an Orwellian euphemism for this refusal of potentially life-saving treatment—“Treatment to do nothing.” It is an old story: language must be mutilated when a perfumed rationalization of an act is incompatible with a straightforward description of the act.**

thoughts. First, Cunningham includes some tweets from Republican Rep. Cathy McMorris Rodgers, “who has a son with the condition.” One of them read

**After reading the opinion piece in the @washingtonpost about aborting babies with Down syndrome, I struggled to put into words how offensive it is.**

Indeed!

Second, is another passing reference, this one to how “Kaposy first became interested in the topic.” It was

**upon learning of the “Baby Doe” case in the 1980s, in which**

*See “Baby Doe,” page 30*

# Surgeons perform life-saving operation on unborn baby in her mother's womb

By Dave Andrusko

In utero surgery, although no longer rare, can still be dicey. But more and more success stories, like Ruth and Ross Elder's, reminds us that the unborn is just another "patient," no less human, no less deserving of protection and care than the rest of us.

The Elders, who live in

lungs," Gavin Havery reported, "a rare fetal condition, known as hydrops fetalis."

The first procedure to drain the fluid was performed by Dr. Therese Hannon. However a more permanent solution was required when fluid re-accumulated, Mike Kelly reported.

Here's Kelly's explanation of the intricate surgery:

**Using ultrasound as a guide, he placed a chest shunt (a small plastic tube) through Ruth's abdomen, through the wall of the womb and into the baby's chest wall to relieve the fluid around the lungs.**

**Prof Robson said: "We have a very small but highly specialised team here at the RVI and we would usually see around 10 to 15 cases of hydrops fetalis a year, however only one in 10 of these cases are amenable to fetal surgery.**

**"The baby was very poorly and while placing the shunt carries a risk it was the only option available. Had this procedure not taken place, the chances of the baby surviving were very low."**

But the in utero surgery was a success! In July 2017, Ruth gave birth to Harriet, at 34 weeks via emergency C-section, six weeks after the surgery.

Harriet was discharged in September 2017 "after time on the RVI's neonatal intensive care unit, then on the paediatric intensive care unit, and then ward 2 at the Great North Children's Hospital," Kelly reported.

Mrs. Elder was effusive in her

praise of all parties involved:

**"When Harriet was born we were terrified, we had a desperately ill baby and a two year old who wondered where his mummy was. We just couldn't have got through it all without all of the amazing staff at the RVI and the Great North Children's Hospital, they were all so kind and became like a second family to us."**

Ruth recently arranged a tea party to raise money for the Fetal Medicine Fund "to say thank you to the amazing team of heroes who are working so hard to save the lives of desperately ill babies in the womb, and caring for the mothers with the most difficult of pregnancies," Kelly reported. "The event was a huge success" and the Elders recently present a check for £5,000 to the fetal medicine Team at the Newcastle Hospitals.

Mrs. Elder told Kelly

**"You can't put a price on the amazing care and support we received from the team and there's no way we can ever thank them enough for what they did for our family but we are great believers in paying it forward and wanted a happy, positive ending to a really tough year."**



*Ruth and Ross Elder present a check for £5,000 to the fetal medicine Team at the Newcastle Hospitals.*

Newcastle in Northeast England, are receiving a lot of deserved applause for their fundraising efforts on behalf of the Fetal Medicine Fund at the Royal Victoria Infirmary and Great North Children's Hospital as an expression of the couple's gratitude for the wonderful work they did in saving their unborn child, Harriet, who is 22 months old.

Mrs. Elder, 32, had been suffering from severe pregnancy sickness. As a consequence she had additional scans.

At the 28 week scan, "the sonographer noticed a significant build-up of fluid around the baby's heart and

"She and her husband Ross, 35, who are also parents to Henry, aged three, were then referred to the fetal medicine team at the RVI" [Royal Victoria Infirmary Newcastle]," Kelly explained. "A decision was therefore made to perform the life-saving in utero surgery."

"It all happened really quickly so there wasn't a great deal of time to worry about what the procedure would entail, I just wanted them to do whatever they needed to do to try to save our baby," Ruth Elder told Kelly." Professor Stephen Robson performed the procedure during the 29th week of Mrs. Elder's pregnancy.

# Irish Govt. proposed legislation is Abortion up to 6 Months

By Save The 8th

*Editor's note. "Save The 8th" is a grassroots pro-life Irish coalition dedicated to protecting the 8th amendment to the Irish Constitution which recognizes the equal rights of mothers and unborn babies. There is a referendum on the 8th scheduled this month.*

After weeks of campaigning most people are now aware that the Irish Government's proposed abortion legislation allows abortion, for any reason at all, up to 12 weeks. But the proposed legislation goes far, far beyond that – it will actually allow abortion up to 'viability', generally put at 24 weeks, on mental health grounds.

The Government say this will be limited, as it requires a risk of 'serious harm' to the health of the mother, and requires signoff from two medical practitioners. But we've seen this before in England.

97% of all abortion in England and Wales are classed as "Ground C" abortions, of which 99.7% are for reasons of mental health. That's over 180,000 abortions, for 'risk to mental health' in 2016 alone.

Only 262 abortion in 2016, out of over 190,000, were carried out to save a woman's life or prevent permanent damage to her health.

Even Ann Furedi, head of the British Pregnancy Advisory Service [BPAS], has said "women have to pretend they will have a nervous breakdown if they continue the pregnancy, and doctors pretend to believe them".

According to a statement signed by 100 legal experts, including several former judges including a former judge of the European Court of justice, [the

proposed legislation] would mean the total removal of constitutional rights from the unborn.

**"The proposed legislation would allow the life of the unborn to be ended for any reason up until twelve weeks, and far beyond that on grounds which have led to abortion on demand**

exactly what laws they will bring in if the [8th amendment to the Irish Constitution is] repealed, and they plan to legalise abortion until 'viability' on vague health grounds. That's abortion to 6 months. This is horrific. You can read the policy paper here.

So , if the 8th is repealed, abortion on mental and physical health grounds up to 6 months

saying this is 'restrictive'. How can aborting a baby at 6 months possibly be restrictive?

If repeal passes this will be the only time you will ever get to vote directly on abortion and what regulation of abortion should look like.

The Government says the repeal of the 8th is necessary to allow for abortion in hard cases, but this is not just abortion in



**in other jurisdictions. In addition, such limitations on abortion as may be set in the legislation could be removed at any time without the consent of the People".**

This is not restricted, this is not limited. This is abortion for any reason at all up to 12 weeks, and abortion on grounds we have seen are massively misused elsewhere. How can a system which allows a baby to be aborted at up to 6 months old, for the flimsiest of reasons, be restrictive?

## Summary of Points

The Government have said

will be legal. Mental Health is the reason for 184,000 of the 190,000 abortions in England and Wales every year.[iii]

So 97% of the abortions in Britain are on 'health' grounds.

Everyone knows it's a fraud, and that 'health grounds' are abortion on demand. And if this abortion proposal passes, It we will legalise that up to 6 months. This goes too far for most Irish people.

Even the people running British abortion clinics admit that the mental health ground is widely seen as being used to allow 'on-demand' abortions after 12 weeks.

Simon Coveney [Deputy Prime Minister of Ireland] is

the hard cases – it's abortion on demand, up to 6 months.

Of the 190,000 abortions in England in 2016, only 262 abortions were performed to either save a woman's life or to prevent permanent damage to her health – there were 3,208 abortions due to 'a substantial risk that...it would suffer from such physical or mental abnormalities as to be seriously handicapped', which is to say there were 3,208 in 2016 abortions due to disability.

*This appeared at Save The Eighth and is reposted with permission.*

# Pennsylvania Governor Wolf and the Issue of Life

By Maria Gallagher, Legislative Director, Pennsylvania Pro-Life Federation

If you're busy raising children, caring for grandchildren, working a job, and/or taking care of your home, you may not have had time to analyze the record of Pennsylvania Democratic Governor Tom Wolf on the life issues.

So, here's a snapshot of the Governor's policy positions and background.

The Governor came into office as what was believed to be the first Chief Executive in Pennsylvania history who had volunteered as an escort outside an abortion center. He quickly named a Planned Parenthood official as his Chief of Staff.

Gov. Wolf came out squarely against a bill that would have banned the outrageous practice of dismemberment abortion, where a baby is torn limb by

limb from a mother's womb. The common sense measure



*Pennsylvania Democratic Governor Tom Wolf*

would have also changed the legal limit for abortions in Pennsylvania from 24 weeks to

20 weeks to reflect the amazing medical breakthroughs that have enabled doctors and nurses to save premature infants at earlier ages.

The dismemberment ban had the support of a vast majority of Pennsylvanians, according to a statewide public opinion poll. The ban also won backing from a majority of Republicans, Democrats, and Independents. Support for the ban was actually higher among women than men.

The Governor's office then said he would veto House Bill 2050, the Down Syndrome Protection Act. This disability rights bill would ban abortions for the sole reason of Down syndrome diagnoses. The bill is a response to the massive tragedy in which the great majority of babies

diagnosed with Down syndrome in the womb are aborted. The bill passed the Pennsylvania House by an overwhelming veto-proof majority and is now being considered by the Pennsylvania Senate.

Gov. Wolf continues to defend taxpayer funding of organizations that perform abortions, such as the abortion giant Planned Parenthood, which takes the lives of more than 320,000 preborn babies each year.

If you know someone who does not know Gov. Wolf's positions on the life issues, please share this information with him or her. It is critically important that the citizens of Pennsylvania, and the rest of the nation, know where our public officials stand.

## “Baby Doe,” Down syndrome, hardened hearts, and Alfie Evans

*From page 27*

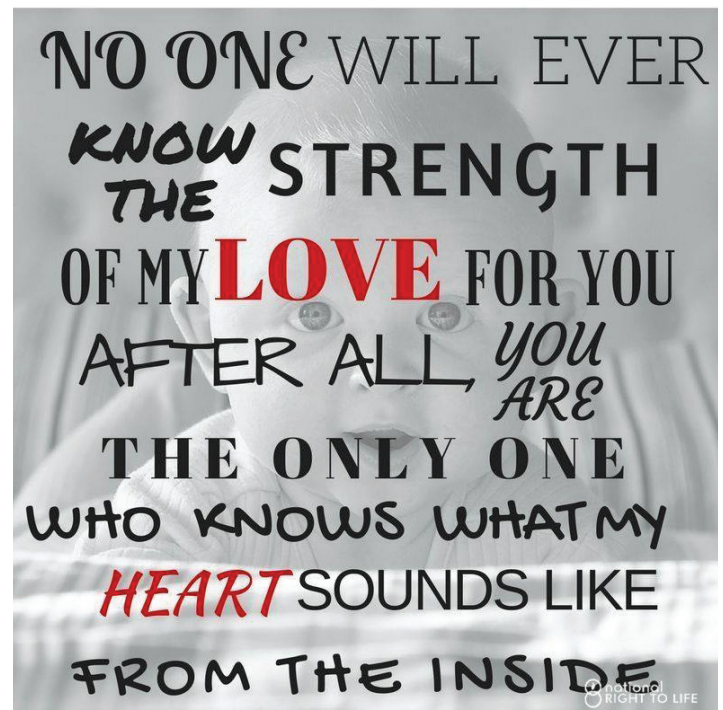
Nothing at the time or since, that I have read, ever concluded it was merely the doctor “arguing” that Baby Doe's parents starved him to death because he had Down syndrome. As Will noted

**There is no reason—none—to doubt that if the baby had not had Down's syndrome the operation would have been ordered without hesitation, almost certainly, by the parents or, if not by them, by the courts.**

Why do I bring this paragraph from Cunningham's story? Because it perfectly illustrates the gushy euphemisms employed to kill babies with Down syndrome, in utero or ex utero. And not just babies with Down syndrome.

Failure to have the surgery performed on the newborn didn't merely “lead to his death,” as if it played a small role. Choosing not to perform surgery meant that food could not reach the baby's stomach.

Baby Doe starved to death.



## Latest polling numbers very discouraging for pro-abortion Democratic senators in competitive races

*From page 2*

In a word, this cannot be. The entire Media Establishment has attacked pro-life Donald Trump for two years, buried him/called for his impeachment once a day and twice on Sunday, and announced that anyone who dares say a favorable word about President Trump is so bad they don't even qualify as a "deplorable."

On the one hand Shaw cites the economy and various foreign policy initiatives as possible explanations of the President's surge. He also suggests, on the other hand, that the public may have simply reached "the point of outrage fatigue."

"When everything is an outrage, nothing is an outrage," he writes. "I can't help but wonder if the media hasn't simply overplayed their collective hand." I concur 100%.

Let's return to those horrific Morning Consult poll numbers for incumbent pro-abortion Democratic senators who are in competitive races. For our purposes, the primary takeaway is the dangerously high numbers of people who responded, vis a vis vulnerable pro-abortion Democrats, that it was "time for a new person" in the seat. Let's take some examples.

Nearly twice as many people said it was time for someone new (53%) as said pro-abortion Sen. Claire McCaskill (D-Mo.) deserves another term (29%).

How about pro-abortion West Virginia Sen. Joe Manchin? Over half—53%—said it was time for "someone else," according to the poll.

Pro-abortion Democratic Sen. Bob Casey, Jr. (Pa.) still has the advantage of being the son of a pro-life Pennsylvania governor. But the Morning Consult poll numbers were shocking. Only 30% said he deserves re-election compared to 45% who say it is time for a new person.

Other pro-abortion Democratic incumbents with bad-to-abysmal numbers include Ohio Sen. Sherrod Brown (32%/42%); Wisconsin

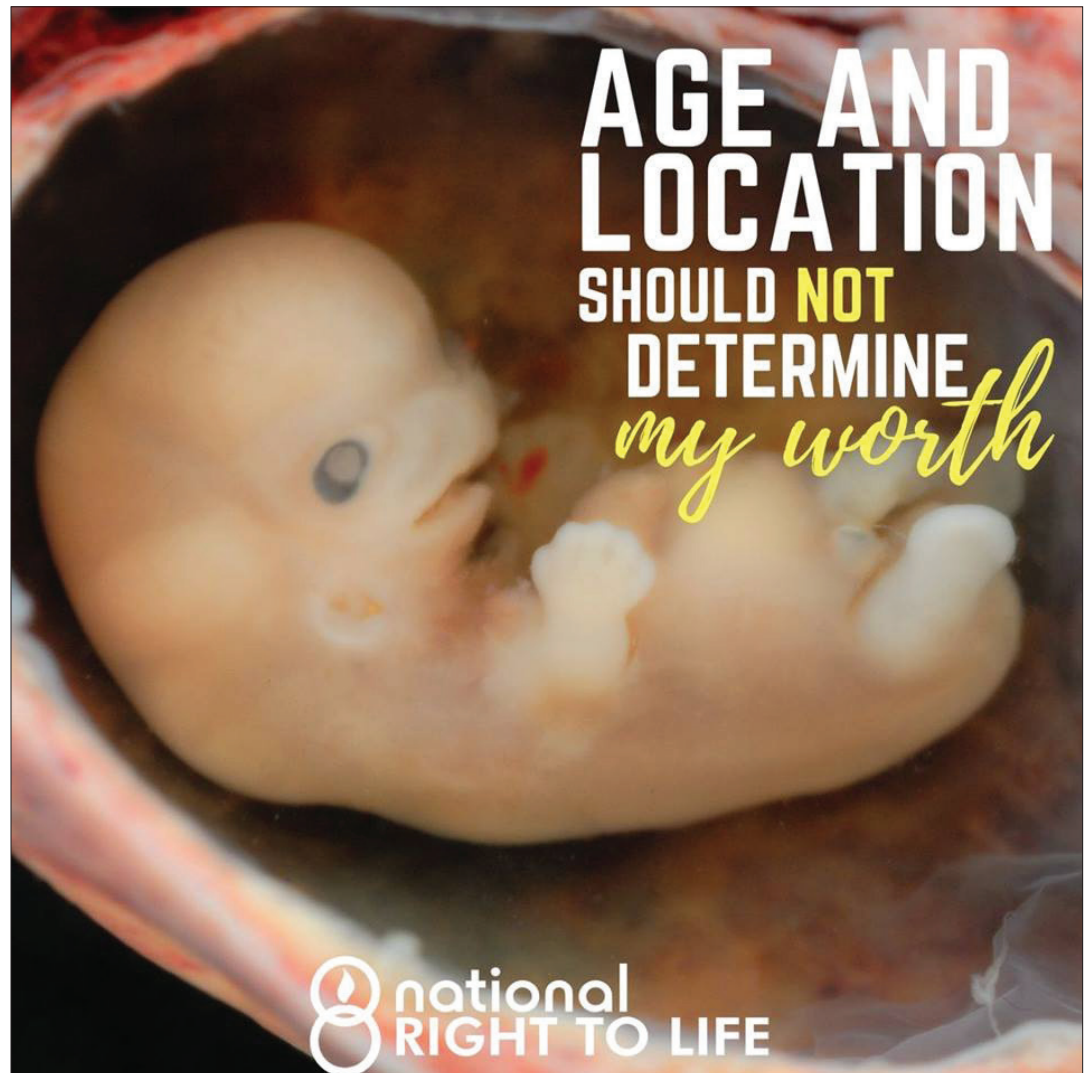
Sen. Tammy Baldwin (34%/48%); Florida Sen. Bill Nelson (31%/46%); Indiana Sen. Joe Donnelly (30%/43%); and North Dakota Sen. Heidi Heitkamp (35%/49%).

The narrative from the pro-abortion Establishment Media has been one of unrelieved doom and gloom for pro-life President Donald Trump and for Republican congressional candidates, who are almost always pro-life and who

virtually without exception face pro-abortion Democrats.

That initial wave of enthusiasm for Democrats and skepticism about the level of support for Republicans was highly unlikely to last over time. But that's a subject for another time.

For now, there is every reason to believe if we do our job, as we always do, Election Day 2018 could well be a good day for unborn babies.





## Pro-lifers continue to make gains in 2018 Legislative Session

*From page 1*

### Dismemberment abortions

In April Kentucky became the 9th state to enact a dismemberment ban, thereby banning a horrific procedure that tears apart a living unborn child, limb from limb. The Bluegrass state joined Oklahoma; West Virginia; Mississippi; Alabama; Louisiana; Kansas; Arkansas; and Texas.

In addition, another seven states (FL, KY, MD, NJ, OH, RI, and SC) introduced a dismemberment ban this session.

### Pain-Capable Unborn Child Protection Act

The Pain-Capable Unborn Child Protection Act is already the law in 16 states. The law protects from abortion unborn children who are capable of undergoing excruciating pain while being killed by abortion. Prof. Kanwaljeet “Sunny” Anand is an expert on fetal pain. Prof. Anand has written, “It is my opinion that the human fetus possesses the ability to experience pain from 20 weeks of gestation, if not earlier, and the pain perceived by a fetus is possibly more intense than that perceived by term newborns or older children.” This session, Missouri, New Jersey, and Oregon introduced pain-capable bills. In Missouri, the House overwhelmingly passed the measure 117-31.

There has been little movement in New Jersey and it failed to pass in Oregon. However, this bill is a great educational tool because most people are totally unaware that the unborn child has all the physical structures necessary to experience pain and their hormonal reactions

consistent with pain can be measured no later than 20 weeks post-fertilization age. Another example of the positive impact this law has, in Oklahoma prior to the 2011 passage of the Oklahoma pain-capable law, there were 1,378 abortions on babies 16 weeks or greater in 2007. Their most recent statistics have shown

of 139-56. In Utah, the measure passed the House 54-17, but the session ended before it could receive a full Senate vote.

### APR

This session Idaho became the 5th state to enact a law to amend its informed consent law to include information about Abortion Pill Reversal (APR).



*Nebraska Gov. Pete Ricketts at the bill signing ceremony held at the Nebraska State Capitol in May. Julie Schmit-Albin, executive director of Nebraska Right to Life, was among the invited guests.*

that in 2016 that number has decreased all the way down to 25 abortions.

### Combatting bias against babies with Down syndrome

In December, Ohio enacted a ban on abortions on babies prenatally diagnosed with Down syndrome. Anti-discrimination abortion bans similar to Ohio have been introduced in Illinois, Missouri, Oklahoma, Utah, and Pennsylvania. In mid-April, the Pennsylvania House of Representatives overwhelmingly passed its Down syndrome ban by a vote

Now abortionists must inform women about the possibility of reversing a chemical abortion prior to the woman taking the 2nd drug in the abortion cocktail by flooding her body with progesterone. This creative legislation has the potential capacity to save so many unborn babies.

### More informed consent

South Dakota enacted a law that amended its informed consent law to target the inaccurate disclosures that abortion facilities were distributing along with the

state-mandated materials. Other states brought up bills amending abortion reporting requirements to include complications. Specifically, Arizona, Idaho, and Indiana passed bills requiring that abortion complications be reported. These bills were each signed into law by Governors Doug Ducey, Butch Otter, and Eric Holcomb, respectively.

### Ultrasound

Minnesota and Tennessee have introduced bills that offer a pregnant woman the opportunity to view the ultrasound of her baby prior to an abortion. In Minnesota S.F. 2849/H.F. 3194 has passed the committee process and has been moved to the floors of the House and Senate. The Tennessee House and Senate have passed their bill and it should be on the desk of Gov. Bill Haslam soon.

### Fetal homicide

Indiana was also able to amend its fetal homicide statute to include the unborn child throughout the entire pregnancy as a separate victim of a crime. Previously only unborn children who had reached viability could be considered victims under state law. Maryland had a similar bill introduced. A hearing was held but ultimately the measure failed to pass before the legislature adjourned.

### Helping mothers

Florida passed a law that allows pregnancy resource

## Pro-lifers continue to make gains in 2018 Legislative Session

*From page 10*

centers to apply for grants from the Department of Health. This will be a helpful tool for expectant mothers who receive resources in order to help them carry their babies to term. Indiana's law also included the expansion of the safe haven baby boxes to firehouses. This allows new mothers to surrender newborns to hospitals, police stations, and similar facilities without facing any liability or interrogation.

### Funding

Nebraska Gov. Pete Ricketts recently signed a budget bill that reformed the way federal Title X family planning grants are distributed. Entities that want to receive Title X funding must conform to a legal, physical, and financial separation from any entity that performs or counsels for abortion. Tennessee passed a funding bill codifying Gov. Haslam's 2011 policy, which prioritized funding to local health departments and away from abortion facilities.

Another Tennessee law signed by Gov. Haslam reiterated the State policy of favoring childbirth over elective abortions and allowing the state insurance to exclude payments to abortionists for elective abortions.

The West Virginia legislature passed resolution SJR 12, which provides that a constitutional amendment on abortion funding will be on the November 6 ballot. Once this passes, state funding for abortion would return to the days before the 1993 Panepinto state Supreme Court decision when tax dollars were not spent on willfully taking the life of

the innocent, a policy with which most West Virginians disagree with. Unfortunately, in Washington State, Gov. Jay Inslee signed a bill mandating that if insurers offer coverage for maternity care, then they must offer coverage for elective abortions. This is in line with the pro-abortion flawed thinking that abortion is health care, even though every abortion stops a beating heart. The pro-abortion lobby also challenged laws in Maine and Montana that mandate that only a physician may perform

abortions. In Montana, a court has granted a temporary injunction that prohibits nurses from performing abortions.

Pro-abortionists tout their few successes in 2018 but that is to be expected. The abortion lobby has promised since the Supreme Court's 2016 *Whole Woman's Health v. Hellerstedt* decision struck down several commonsense Texas laws that it would be targeting state pro-life laws.

But pro-lifers have had far more gains in passing laws to

protect both mother and child that pro-abortionists have in taking unborn lives. And there is no debate about the positive impact of pro-life laws. Just recently, we learned that abortion numbers have reached historic lows in Kansas and Utah. In South Carolina, the number of abortions dropped by 10% in 2017, part of an overall decline of more than 63% since 1988.

We must keep the momentum going and continue to strive to protect unborn babies and their mothers.

not a punishment  
not an accident  
not a mistake



**A MIRACLE!**  
NATIONAL RIGHT TO LIFE

## “Real Estate for Life”—A great way to donate to NRLC at no cost to you!

By Dave Andrusko

Self-sacrificial as pro-lifers are, you don't need a personal incentive to work on behalf of innocent unborn children.

your contributions in time and money, you have helped NRLC become the leading voice on behalf of life not only in the

organization pro-life champion Rep. Chris Smith calls “the hub, the nerve center of the Pro-Life Movement.”

Occasionally an opportunity comes along that is literally too good to pass up. A chance to assist the work of NRLC in the course of doing what you would have done anyway at no cost to you.

Most, if not all of us, will move at least once, probably multiple times. That's why the contributions of Real Estate for Life is becoming so valuable to National Right to Life. It works like this.

If you're going to move, you contact Real Estate for Life at 877-543-3871 or visit their webpage at [realestateforlife.org](http://realestateforlife.org).

As they explain, they find you a local experienced realtor in your neighborhood. With their

assistance you complete your residential (or commercial) realty transaction.

A generous donation goes to the pro-life organization of your choice, which we trust would be National Right to Life.

“Instead of going to the Yellow Pages, you can go to Real Estate for Life, find a professional realtor in your community, and after your house is sold, a donation will be made to help NRLC save babies,” explained Jacki Ragan. “This program is already helping to underwrite National Right to Life's work in creating a culture of life.”

And if you are not moving, you might well have a pro-life brother, sister, cousin or friend who is. Just pass the word.

Again that phone number is 877-543-3871 and the webpage is [realestateforlife.org](http://realestateforlife.org).



You do it because it is a sacred obligation and a privilege.

For 40 years you have trusted in the dedication and professionalism of National Right to Life. And because of

United States Congress, but together with our state affiliates in the state legislatures, as well. You know your contributions will be used in the most effective way possible by the

## NRLC 2018...50 days and counting

*From page 1*

from the best, mingle with like-minded people, hear and meet amazing speakers, and leave feeling rejuvenated and ready to go home, get to work and save lives!”

For those who haven't attended an NRLC convention, you can go to [www.youtube.com/watch?v=NTXX7fbngE](http://www.youtube.com/watch?v=NTXX7fbngE) for a snapshot of the fun, camaraderie, education, and team-building that took place last year in Milwaukee, Wisconsin. There is a special emphasis on young people who are the future of our Movement.

The roster of speakers, as always, is first-rate and growing as we approach June 28.

Our Prayer Speaker is Archbishop Joseph Naumann of Kansas City. Earlier this year the Catholic Bishops elected Archbishop Naumann has chairman of the conference's vitally important committee on pro-life activities. He succeeds another pro-life champion, Cardinal Timothy Dolan of New York, and takes over formally in November.

We will be honored to hear from Dr. George Delgado, Medical Director of Abortion Pill Reversal, bioethicist Wesley J. Smith, abortion survivor Melissa Ohden, and Sarah Zagorski. Special projects director for Louisiana

Right to Life, Sarah was rescued from abortion and often shares her story of survival, hope, and healing.

You can register for all three days for one low price: \$50 for teens, \$65 for college students, and \$120 for adults. Plus, one-day registrations are also available!

The convention features 5 general sessions and 60+ workshops to choose from, plus for an extra charge, a Prayer Breakfast on Friday morning, and a Closing Banquet Saturday night.

The late Dr. Jean Garton, author of the pro-life classic, “Who Broke the Baby,” once said at a general session, “The

three days of the National Right to Life Convention represents the annual gathering of America's pro-life 'family' and it is like coming home again.”

You can register right now at <http://nrlconvention.com/register>.

Come join the family in Kansas City, Kansas.



# Advice on how to plant pro-abortion ideas in the minds of little children

## *In advance of Irish abortion referendum*

By Dave Andrusko

To say the mainstream press in the Republic of Ireland is pro-abortion is like saying it's above freezing when the temperature is 100 degrees. True, but it vastly understates the reality.

When the the Irish media are not busy making up accusations out of whole cloth, they are amazing condescending towards pro-lifers.

For example, if you read, say, the *Irish Times* or *The Independent* you'd come away thinking that the upcoming referendum on the Eighth Amendment to the Irish Constitution pits two sides with roughly equal resources.

That is so comically inaccurate that you would laugh were the truth not so painful.

Those who want to maintain "the 8th," which offers equal protections to mother and unborn child, have a fraction of the dollars, none of the major media, and face the opposition not only of pro-abortion billionaires such as George Soros, but (of all organizations) the Irish affiliate of Amnesty international and a UN Human Rights Committee!

Likewise, the Irish reader is told unceasingly that pro-lifers will tell tall tales about abortion, beginning with saying that what Parliament is already gearing up to do (if the 8th is evicted) is allowing abortion not through the 12th week only but well into pregnancy for a myriad of bogus exceptions.

Never mind that it's true. It can't be true. Why? Because otherwise the Irish public

might not vote to gut the 8th amendment.

It really is the pot calling the kettle black.

You see that distortion everywhere, even (and I kid

necessarily go on one side or the other."

(Gosh, I wonder who those extremists peddling scare tactics might be?)



you not) in stories about how to tell children about abortion in the context of this month's referendum. The first one I happen to read a few day ago ran in *The Independent*.

Stella O'Malley is an Irish psychotherapist and was the wise woman interviewed for this story. Naturally the referendum is a time for fostering "critical thinking" in children under 12.

For example, it gives

**"your children an opportunity to get an insight into extremism, into politics, into the way people will use scare tactics to try to convince you over to their side. And to how it's their job to hold their own, and listen to points, and not**

How about up to seven or eight? What can you tell them?

**"[I]t's quite a simplistic conversation where you talk about maybe mammy had a pregnancy, a person had a pregnancy, and they didn't want it to continue, and so they went to the doctor and the doctor fixed it up."**

"Fixed it up." That will surely foster critical thinking.

O'Malley also said, "The good news is there's a wealth of ways to go at this. There isn't only one way." For example?

**"You could say some people believe this is all about the woman's body and it's all about the right for a woman to make decisions of**

**her own, and bodily autonomy is what that's called."**

**"However, other people say 'well if the Mommy is carrying a baby, that might infringe on that woman's rights. And that's a huge thing, and that's why people get into politics because they're interested in these subjects."**

Ah...where is the pro-life side?

Then I read across a piece written by Fiona Ness, also written for the *Independent*.

We are to understand she is the model of dispassionate observer, even though, of course, she wishes she didn't need to tell a seven-year-old and a nine-year-old. (The four year old gets a "hall pass.") So what is her technique?

Well, her seven year old has a rudimentary idea of where babies come from. Read the following carefully, please:

**Now she wants to know, "is there a way of getting a baby out of your body if you don't want it?"**

**I tell her yes there is, and it's called abortion. However, you can't do that in Ireland, but you can in Britain and some other countries. I tell her that is what all the posters she is seeing are about. People are**

*See "Advice," page 36*

# Kentucky ban on dismemberment abortions temporarily blocked

*Judge to rule June 5 on motions filed by the ACLU*

By Dave Andrusko

When the District Court for the Western District of Kentucky temporarily blocked Kentucky's just enacted ban on dismemberment abortions, both sides found something to salvage from the court's action.

The ACLU, which challenged HB 454 said, "This brings immediate relief to women across Kentucky who have had their appointments cancelled and care delayed if not pushed entirely out of reach." Andrew Beck, senior staff attorney with the ACLU Reproductive Freedom Project, added, "In the meantime, we'll continue to fight this law and look forward to seeing the state in court."

Steve Pitt, an attorney for the Kentucky Cabinet for Health and Family Services, issued a statement in which he said that the order will "expedite an ultimate decision."

"This matter is now hopefully on track for a faster ruling," Pitt said, according to Bruce Schreiner of the *Associated Press*. "The sooner this case is decided, the sooner the

commonwealth can stop this horrific and barbaric practice."

The effect of the joint consent order, as Schreiner explained,



*Kentucky State Rep. Addia Wuchner*

is that "state officials agreed to take no action to enforce the law pending a ruling on the ACLU's request for a preliminary injunction."

The ACLU called dismemberment abortions "safe and medically proven."

In a dismemberment abortion, a living unborn baby is pulled out of her mother's womb, a piece at a time. The abortionist

uses clamps, grasping forceps, tongs, scissors or similar instruments that, "through the convergence of two rigid levers, slice, crush, and /or grasp a portion of the unborn child's body to cut or rip it off."

Elizabeth Kuhn, a

spokeswoman for Gov. Bevin, said that while the lawsuit was not surprising, it was disturbing, Darcy Costello of the *Louisville Courier Journal* reported.

"Kentucky's elected representatives voted overwhelmingly this session to safeguard unborn children against the gruesome practice of live dismemberment abortion," Kuhn wrote in an email sent to reporters. "Few issues should be as commonsense as protecting the most vulnerable among us from the horrific act of being torn from limb to limb while still alive."

"Overwhelmingly" is no exaggeration. The vote in the Senate was 31-5, the vote in the House was an equally one-sided 71-11.

Eight states had already passed bans on dismemberment abortions: Kansas (2015); Oklahoma (2015); West Virginia (2016); Mississippi (2016); Alabama (2016); Louisiana (2016); Arkansas (2017); and Texas (2017).

## Advice on how to plant pro-abortion ideas in the minds of little children

*From page 35*

deciding if we can have that choice in Ireland.

I tell her that in this case, remember, the baby does not live. "Awww, sad," she says.

We talk about the differences between the foetus on the posters and a baby in a pram [stroller], and the

reasons that some people might believe that one doesn't necessarily mean the other.

"I think everyone deserves a chance at life," says the nine-year-old dolefully.

This is clearly not the responses Ness is looking for.

She immediately plants the seed that, she obviously hopes, will grow into the right example of "critical thinking":

**I tell her it's good to have an opinion on such an important subject, but that she might think about the topic again as she grows older and has more questions. I say**

**that, in the words of the late professor Stephen Hawking, "All we need to do is make sure we keep talking".**

Granted, it's hard with little ones. Their first instinct is empathy and sympathy and compassion.

Can't let those little ones think wrong thoughts, can we?

# On this National Day of Prayer.....

By Dave Andrusko

The genius of our Movement is that its ranks are filled with people from every walk of life who may disagree about virtually everything else but who come together in solidarity in defense of the sanctity of life.

Many but by no means all are believers, the kind of women and men who put their faith

None of us is under the illusion who our ultimate enemy is, nor do any of us believe we will win this most just of causes in our own power alone. If we are going to be His instruments, we must seek His face for strength, guidance, and reassurance.

I remember a few years

**another, in the promise of our Nation, and in the Almighty.**

Of course it was not Mr. Obama's intent to make what is, to us, the obvious extension: the moral imperative to "keep faith with" the littlest Americans.

Jesus used the parable of the

for "them"—the powerless unborn—it would be a dress rehearsal for a wider attack. The next categories of victims would be babies born with disabilities and the vulnerable elderly, each of whom would be "better off dead."

Now under the ruse of "autonomy," we are willing to starve people to death.

Now under the insanity of supposedly protecting their "best interests," we refuse to allow Alfie Evans' parents to take him elsewhere for treatment, or even home to die.

So what do we take away from the call to "see our own reflection in the struggle of others"? Each of us will have a different take but mine is that I would be a lesser man—and a far lesser Christian—if I stood idly by, if I refused to honor my obligation to do everything I can to protect those who cannot protect themselves.

If I chose to avert my gaze, to shirk my moral and ethical obligation, I am fully confident one day I will be called to account for that cowardice.

Thank you to all those pro-lifers who remind me of the critical significance of praying for each mother in a crisis pregnancy, for each child whose life hangs in the balance.

Every National Day of Prayer in particular, pray that she finds a helping hand and the courage to face down her own fears and the discouraging counsel of others.

Pray that she recalls that she is carrying one of His creations.

Pray that she knows that He loves her and her unborn child more than she could possibly know.

into action in many venues but most particularly in the defense of unborn children, children born with disabilities, and the medically vulnerable.

May 3 was the National Day of Prayer. Here's how its organizers describe it:

**The National Day of Prayer is an annual observance held on the first Thursday of May, inviting people of all faiths to pray for the nation. It was created in 1952 by a joint resolution of the United States Congress, and signed into law by President Harry S. Truman.**

For believers, prayer is instrumental, as essential to sustaining us spiritually as breath is physically.

ago reading something President Obama wrote in his Official Proclamation on the National Day of Prayer. His understanding of our obligation to our unborn progeny is as far from ours as the east is from the west, No doubt that was why I was so struck by the following remark, with which I agreed wholeheartedly:

**In the face of tremendous challenges, prayer is a powerful force for peace, justice, and a brighter, more hopeful tomorrow. Today, as we join together in fellowship, we seek to see our own reflection in the struggle of others, to be our brothers' and sisters' keepers, and to keep faith — in one**

Good Samaritan to turn the inquirer's question back on him. The true question is not "Who is my neighbor?" but rather who "was a neighbor to the man who fell into the hands of robbers?" In other words, rather than look for ways to confine our obligations, Jesus told us we would broaden our moral horizons by especially including the vulnerable.

And who could be more vulnerable, more defenseless, more in need of our willingness to go many extra miles, if necessary, than the unborn child?

The inability to protect them has costs beyond the frightening number of dead babies (more than 60 million) and untold millions of women scarred by their failure to choose life.

Decades ago we understood that once the death ethos came



# Interim PPFA Leader still pushing abortion as Cecile Richards steps down

By Randall K. O'Bannon, Ph.D., NRL Director of Education & Research

With the bodies of more than 3.5 million unborn babies trailing in her wake, Planned Parenthood president Cecile Richards stepped down last week, ending an era, but not an empire.

In her 12 years at the helm, Richards not only ensured that PPFA would remain far and away the leading abortion “provider,” she also made the group much more politically powerful than ever before.

There are no plans to change that, as comments as recently as last week make crystal clear.

Planned Parenthood performed over 320,000 abortions in 2016, according to their most recent annual report. PPFA’s abortion numbers climbed during Richards’ tenure, even though the number of abortions were falling in the United States and even while other services were declining at Planned Parenthood.

This is no accident. Nothing happens at PPFA by accident. Increasing market share is the result of strategic planning and building at Planned Parenthood.

Under Richards, Planned Parenthood closed smaller clinics which did not offer abortions and opened giant new megaclinics which could handle high abortion volume. Revenues skyrocketed to \$1.5 billion a year.

Richards is leaving, but Planned Parenthood clearly has no plans of reversing those trends. If anything, Executive Vice President Dawn Laguens and Planned Parenthood are accelerating.

Laguens takes over day-to-day operations while a search committee looks for

a replacement. Comments Laguens made to *Glamour* magazine make clear the agenda remains the same.

After lamenting laws that “stigmatize” and make getting an abortion “almost impossible,” Laguens told Laura Norkin, “We’re going to fight and do everything we can to reverse that course; to change



who’s in power between now and 2020.”

*Glamour* notes that one of the organization’s PACs—Planned Parenthood Votes—announced plans in March to spend \$20 million to elect pro-abortion candidates and connect online with voters in eight key states.

Norkin does not specify those, but a *CNN* story identified Arizona, Florida, Michigan, Nevada, Ohio, Pennsylvania and Wisconsin, several of the “blue states” that Trump surprisingly won in the 2016 election.

Some of those same voters will be targeted by another new program, “Win Justice,” a \$30 million joint effort of Planned Parenthood with the

Center for Community Change Action, Color of Change, and the Service Employees International Union started in mid-April. They say they aim to specifically mobilize “people of color and young people” in Florida, Michigan, and Nevada, on the heels of new polling data supposedly showing that young people are more likely shift in

Laguens told *Glamour*, “We are paying the price for the elections in 2010; this is their long shadow,” adding in PPFA’s typically understated manner, “We are really clawing our way back to any kind of democracy that actually reflects the true viewpoints of people in this country.”

Laguens is an old family friend of Richards. Laguens’s spouse worked as finance director for Ann Richards when Cecile’s mother ran for governor in Texas 25 years ago. She sees great opportunity in the “seismic” Me Too movement, bringing a wave of new female political candidates and 2 million new supporters for Planned Parenthood in the past year, 350,000 of which are teens. “These are big, big forces that are being unleashed in the culture,” Laguens told *Glamour*, “This is women’s moment.”

As executive vice president and “chief brand and experience officer,” Laguens takes credit for what *Glamour* describes as “heading off budget attacks from Mike Pence.”

As she manages Planned Parenthood Votes in addition to the group’s health services side, Laguens clearly intends for Planned Parenthood to do all it can to thwart Trump’s pro-life policies.

“When it comes to attacking women’s health and reproductive health access, they’re getting a lot done,” she

their views on abortion than older people.

According to an April 20, 2018 USA Today story, the Win Justice coalition feels the problem in past elections has been waiting until election time to try and engage these people. Win Justice aims to build those relationships by “authentically engaging these voters early and often,” with “Peer-to-peer texting, digital organizing, and resourcing and training community leaders to knock on doors and mobilize voters in their communities.”

Organizers added that “This program is focused on both immediate and long-term change by building an army of local leaders to lead this effort.”

See “Interim,” page 41





# The push to starve dementia patients appears in the *New York Times*

By Wesley J. Smith

First, bioethicists said people should be able to refuse being “hooked up to machines” even if that meant almost certain death.

Then, they pushed that meme farther, arguing that the right of refusal (including by surrogates) should also include nourishment by tube so the patient dehydrates to death. Give them an inch . . .

After that, they said patients who are terminally ill (for now) should have access to prescribed poison to make themselves dead. Not good.

Now, they want to force caregivers to starve patients with dementia who eat and drink by mouth if so instructed in an advance directive.

This abusive proposal, which is being pushed aggressively in the professional literature, has now reached the august pages of the *New York Times* in a column by Jane Brody, the Gray Lady’s health columnist. From, “An Advance Directive for Patients with Dementia”:

**Missing in standard documents [advance directives] are specific instructions about providing food and drink by hand as opposed to through a tube.**

There is a logical reason for that. Advance directives cover medical treatments. But *eating and drinking by mouth is not a medical treatment*. It is humane care — like keeping clean, warm, turning to prevent sores, etc. — which are not part of advance directives.

Brody throws up some smoke, stating that the starve-me instructions would apply at the very end of life.

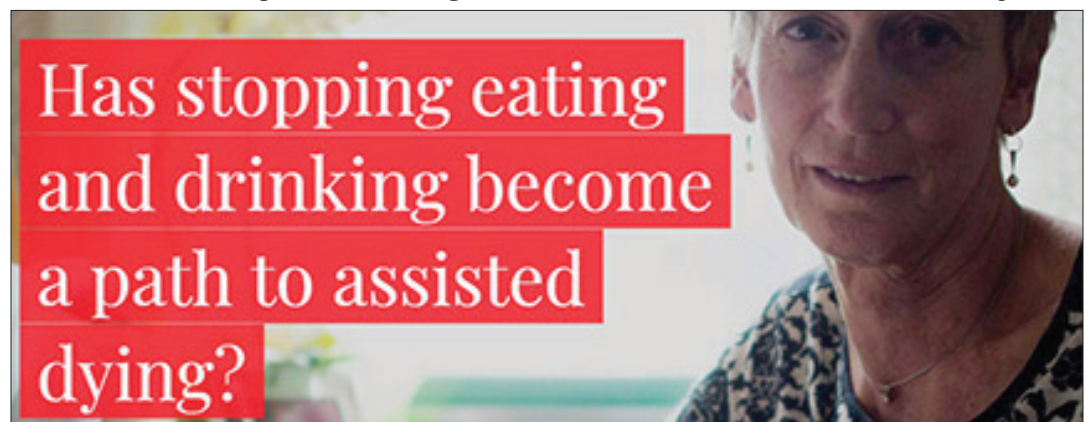
**While trying to provide nourishment for a terminally ill person nearing death is commonly done in the name of comfort and caring, if that person cannot benefit from food or drink, it can become quite**

**speak, recognize loved ones, and control bowel or bladder functioning.**

**Individuals with Alzheimer’s disease who contact End of Life Choices New York want to know how they can avoid the final stages of this disease. It**

**I do NOT want to be fed by hand even if I appear to cooperate in being fed by opening my mouth.**

What if the qualified-to-be-starved patient asks for food? Tough. If incompetent, she would not be deemed qualified



**the opposite. When patients can no longer swallow what they are fed, they may choke and aspirate food or drink into the lungs, resulting in pneumonia that adds to their misery and hastens their death.**

That can be true, and at such times, great care must be shown.

But the document Brody supports, written by an assisted-suicide advocacy group, *does not require forced starvation to be limited to such times* (my emphasis):

**In the final, ‘terminal’ stage of all dementias, a person may become unable to swallow what is placed in his or her mouth, and lose the ability to ambulate,**

**is for those individuals, and others who fear being diagnosed with dementia in the future, that the Directive about assisted oral feeding has been created.**

In other words, it could well *before* the end stages, when the patient can still swallow and enjoy food and drink, when an incompetent patient could no longer feed themselves, *not* when they could no longer safely swallow.

The purpose of the document would be to force caregivers to starve a patient who willingly eats and drinks:

**If I am suffering from advanced dementia and appear willing to accept food or fluid offered by assisted or hand feeding, my instructions are that**

to make that decision. (Such a horror happened in the Marjorie Nighbert case, involving the removal of a feeding tube from a stroke patient who begged for food and was refused nourishment anyway by a court.)

This is very wrong. No one should have the right — no matter how scared of dementia they may be — *to compel others to starve them to death*.

It is a sign of our times that acts and omissions that only a few years ago would have epitomized elder abuse, now receives the full-court bioethical press in the Establishment “paper of record.”

This is precisely how radical proposals enter the policy mainstream. Ugh.

*Editor’s note. Wesley’s great columns appear at National Review Online and are reposted with the author’s permission.*

## Is abortion justified after an adverse prenatal diagnosis?

From page 21

experience for him. May he end her life to “get it over with,” avoid painful conversations when someone asks about his family, and “move on” to his next child? Of course not.

If unborn human beings really matter—like cancer patients, grandparents, and 5-year-old daughters—then they likewise may not be killed on account of a terminal condition.

Moreover, abortion in these circumstances does not actually serve the emotional and psychological health of pregnant women. Research suggests that it does precisely the opposite.

A study in the *Journal of Psychosomatic Obstetrics and Gynecology*, for example, concludes that abortion after a terminal diagnosis is a “traumatic event” that “entails the risk of severe and complicated grieving.” A 2016 Swedish study finds that “women who terminate a pregnancy due to a fetal anomaly express considerable physical and emotional

pain, with psychosocial and reproductive consequences.”

Another study, published in 2015 in the journal *Prenatal Diagnosis*, compares women who aborted because of a fatal condition to women who did not. “Women who terminated reported significantly more despair, avoidance, and depression than women who continued the pregnancy,” the Duke University authors conclude. “There appears to be a psychological benefit to women to continue the pregnancy following a lethal fetal diagnosis.”

Abortion in life-limiting cases isn’t healthy for pregnant women—or for their unborn children.

### A better way: Dignity, equality, and love

Human beings *in utero* are valuable members of the human family. We ought to treat them accordingly.

That means we should respect their dignity, recognize the equal rights of those who

have disabilities or diseases, and love them even when their time is short. It means that, at the very least, we should never choose to dismember or poison them to death.

None of this, of course, is to deny the challenges of an adverse prenatal diagnosis. But support and options are available. Numerous organizations and programs help families deal with unexpected diagnoses. Many couples seek to adopt children with special needs.

In the case of a life-limiting diagnosis, perinatal hospice and palliative care is a healthy alternative to abortion. It acknowledges terminally ill unborn children as real patients and real children. It gives parents time to process and to make memories. It provides support and closure to grieving families.

One study found that 75 percent of parents choose this option if it is simply offered to them. Another study determined that 85 percent

make that life-affirming decision.

Amy Kuebelbeck, a Minnesota writer, authored a book recounting her own pregnancy with a child who received a terminal diagnosis. It’s called *Waiting with Gabriel: A Story of Cherishing a Baby’s Brief Life*.

“I believe that [abortion] would have caused us real emotional harm,” she writes, “as well as closed us off from the extraordinary gifts that we and our families and close friends were able to experience as we all waited with Gabriel.”

Many parents tell a similar story of meaning, beauty, and life in the midst of hardship. Testimonies can be found through organizations and websites like Prenatal Partners for Life, Be Not Afraid, Carrying To Term, and PerinatalHospice.org.

“Yes, Gabriel was going to die,” Kuebelbeck says. “But first he was going to live.”

## Interim PPFA Leader still pushing abortion as Cecile Richards steps down

From page 38

told *Glamour*. “And in one year they have been pushing policies the likes of which we’ve never seen before.”

As noted above, Planned Parenthood’s political arms are keying on the coming midterm election. And it’s not just Congress.

“This is our last chance to flip some of those governors’ seats before redistricting,” said Deirdre Schifeling, the executive director of Planned Parenthood Votes told *CNN*.

Laguens acknowledged that abortion rates are lower, appearing in *Glamour* to attribute this to “more widely available contraception under Obamacare.” But making abortion “rare” has never been Planned Parenthood’s priority and it certainly isn’t Laguens’ priority.

“They used to say, abortion should be safe, legal, and rare,” Laguens told *Glamour*. “[I]t needs to be safe, legal, and fair.”

Laguens defended a bill in Maine earlier this year that would

allow nurse practitioners to do abortions, making her and Planned Parenthood’s agenda plain.

“We need to not just protect access but **expand** to reproductive care that empowers women and their dreams” (*Washington Examiner* 2/13/18). (emphasis added).

With the number of abortions performed up and other services like “cancer screenings,” breast exams, and even birth control down, it’s clear what expanding “reproductive care” means to Laguens and Planned Parenthood.

The day after her puff piece in *Glamour* appeared, Laguens tweeted, “Thanks for talking about @PPFA’s bright future with me, @glamourmag!”