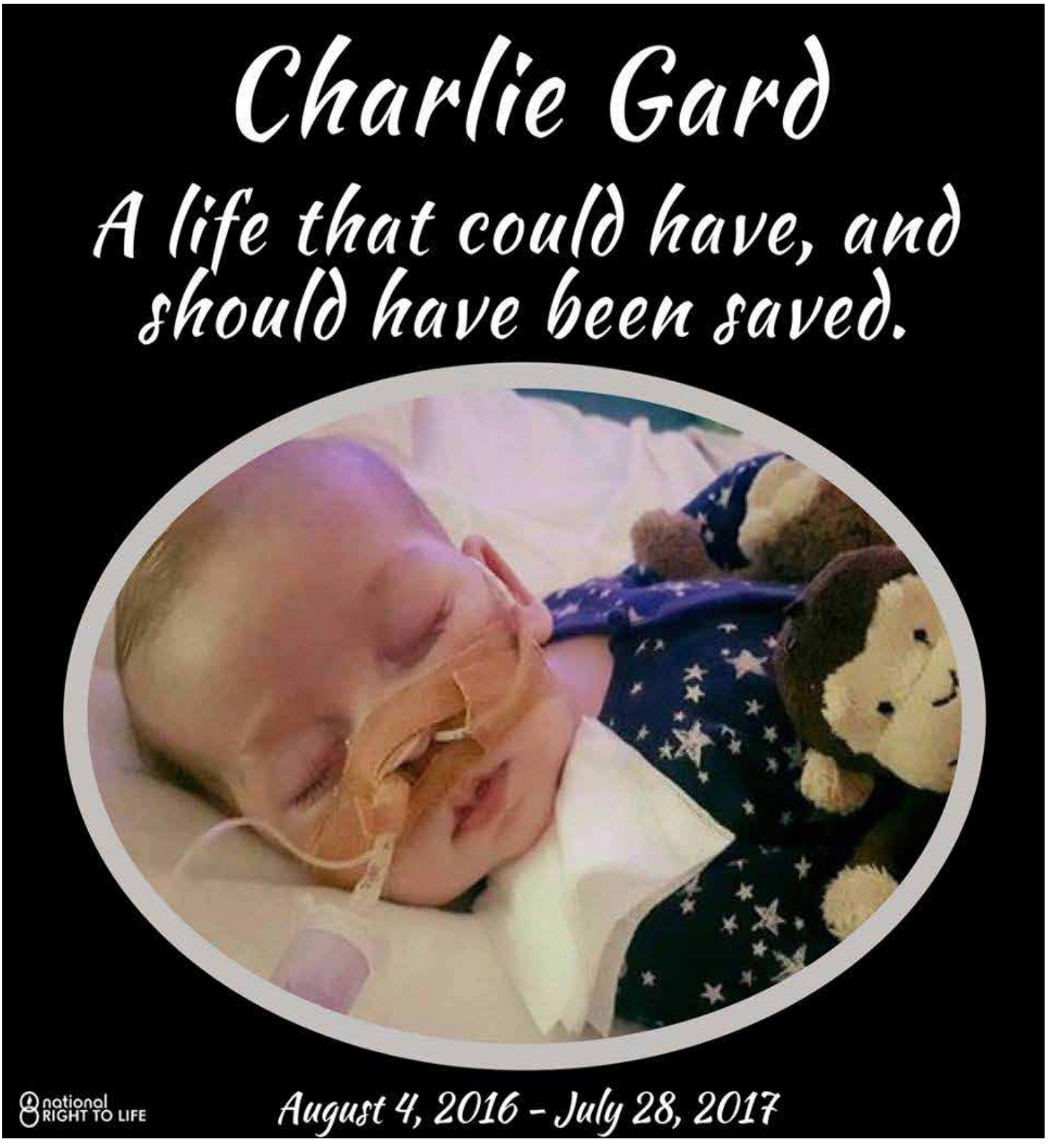
national RIGHT TO LIFE NEWS

August 2017



national RIGHT TO LIFE NEWS

RIP Charlie Gard, "the absolute warrior"

By Dave Andrusko

At first glance it might seem odd that one extremely ill baby born to one working class couple from Bedford in West London would have the world-wide impact of little Charlie Gard. But stories of extraordinary parental devotion running headfirst into the most powerful medical and legal institutions in Great Britain only needed exposure to arouse our deepest sympathies and to enlarge "Charlie's Army."

And that's what the support of President Trump and Pope Francis accomplished. Suddenly everyone knew that Connie Yates and Chris Gard were battling an unresponsive judiciary in the form of Justice Nicholas Francis and a famous children's hospital-- Great Ormond Street Hospital (GOSH)--which steadfastly refused their plea to permit them to take their own son to the United States for experimental therapy.

Chris Gard clutched one of his son's toy monkeys as he listened to Katie Gollop, the attorney for Great Ormond Street Hospital.

Born August 4, 2016, Charlie seemed perfectly healthy. Taken early there is a "touching video," as the *Daily Mail* put it, where "Charlie Gard looks up at the camera in peak health." Instead they were to learn only a month later that Charlie

See "Warrior," page 37

The NRL Academy: A five-week adventure in learning how to make the case for life

By Rai Rojas, Program Director, NRL Academy

The end of our 11th annual National Right to Life Academy on August 4th was, as always, bittersweet. The Academy first began when college students from across the country met at the NRL Convention in Milwaukee this year on June 28 and continued with a rigorous 5-week adventure that took them from Milwaukee to our National offices in Washington, D.C.

And an adventure it was. The students studied every aspect of the pro-life movement. Seriously – all the subjects were covered. Topics included, but were most certainly not limited to; Legal Developments on Abortion and Religious Freedom; the complicated nuances of the *Roe v. Wade* and *Doe v. Bolton* decision; Grassroots lobbying; Bioethics; Public Speaking; Social Media;

See "Academy," page 30

Editorials

What might have happened if Connie Yates and Chris Gard had prevailed?

To the outsider it was always difficult to fully understand why London's Great Ormand Street Hospital (GOSH) and Justice Nicholas Francis were so dead set against allowing Chris Gard and Connie Yates to take their son Charlie to the United States for experimental therapy to try to ameliorate his exceedingly rare and debilitating chromosomal condition –encephalomyopathic mitochondrial DNA depletion syndrome (MDDS)–in which his cells cannot replenish essential energy.

I would **never** say they didn't care for Charlie. Clearly they did.

But "care" for them meant Charlie's death, which came 12 minutes after Charlie's respirator was turned off. But why did these pillars of the Medical and Legal Establishments feel that way? Because "he has no quality of life and no real prospect of any quality of life," as GOSH said repeatedly.

In other words, what's the point? Since they were the experts (never mind that the parents had their own experts who disagreed), they knew what was in Charlie's "best interests," not his parents who were blinded by love (my characterization of GOSH's and Justice Francis' position which I am convinced is 100% accurate).

But there were other even more fundamental reasons, addressed by Wesley J. Smith in a thoughtful column headlined, "Another Charlie Gard?" that we ran in *NRL News Today* [http://bit.ly/2uShsvs].

Wesley reminded us that GOSH wanted Charlie's ventilator disconnected not because it wasn't working but because it **was**. If Charlie had no quality of life, continuing to ventilate the little boy was just a step or two removed from ventilating a brain-dead patient. It served no purpose--on GOSH's scale of values.

Tom Evans and his son, Alfie

There is another similar case taking place in England. The staff at Alder Hey Children's Hospital in Liverpool wants little Alfie Evans's life support removed. His dad, Tom, told the *ECHO* last month

> **"They have said several times they want us to turn the life support machine off, and to consult our lawyers.**

See "Prevailed," page 33

Judge's ruling overturning ban on dismemberment abortion is steeped in dehumanizing euphemisms

Sometimes the real underpinnings of a judicial ruling–even one that runs a hefty 140 pages–can be captured in a paragraph.

You'll recall that early last week, *NRL News Today* posted a story that contained good news and bad from Arkansas.

The upside was that the previous Friday, the 8th U.S. Circuit Court of Appeals vacated a preliminary injunction issued in 2015 by activist Federal Judge Kristin Baker. Baker's ruling prevented Arkansas from enforcing its law requiring abortion clinics proving chemical abortifacients to maintain a contract with another physician with admitting privileges at a hospital who agrees to handle any complications.

The downside was that this same federal judge, just a few hours later, took a judicial scythe to four other pro-life Arkansas laws. The most prominent is Arkansas's Unborn Child Protection from Dismemberment Abortion Act which bans the grotesque practice of dismembering living unborn babies.

You might remember how even a vociferous pro-abortion advocate almost gulped at its sheer barbarism. Prof. Sherry F. Colb wrote

> **The method of abortion at issue in the Texas statute is not for the faint of heart. It involves dismembering the fetus while it is still in the woman's womb and removing its parts, piece by piece, through the birth canal. One Texas legislator described the procedure as drawing and quartering, an old (and torturous) method of execution. ….**
>
> **The notion, accepted by the Court, that D&X [partial-birth abortion] is uniquely barbaric was questionable, to be sure. It is not obvious that dismembering a fetus after removal from the womb is more barbaric or**

See "Judge's," page 36

From the President
Carol Tobias

National Right to Life --Your team at work in the Nation's Capital and the 50 states

It's already August. Congress is in recess, families are finishing vacations, getting kids ready for their return to school, and things have quieted down for just a short while. But if you've been watching the news, I don't have to tell you that NRLC has been very busy in Washington over the past few months.

From the confirmation of Justice Neil Gorsuch to the U.S. Supreme Court to passing state laws that protect unborn babies from brutal dismemberment abortions to the tenacious debate over how to rollback Obamacare, and how best to cut off funding to the nation's largest abortion provider, **your** team at National Right to Life has been working overtime. Rest assured NRLC--which pro-life champion Rep. Chris Smith has described as the "hub, the nerve center, of the pro-life movement"--has been doing everything possible to advance the pro-life cause at each and every turn.

Let's start with the Hill. NRLC's legislative team has been meeting regularly – often several times a week – with key pro-life allies and leaders. We are there on your behalf to ensure that pro-life provisions and protections are part of any abortion-related legislation moving through Congress.

The chapter development and convention team outdid themselves. They organized and executed another amazing National Right to Life convention in Milwaukee, Wisconsin, in June-- our 47th annual convention. There local and state right-to-life leaders and activists from all walks of life came together to learn from the experts we were blessed to have join us for this year's convention. If you haven't purchased MP3s or CDs of this very special time, please do so today. (Go to nrlconvention.com.)

The expertise on display was breathtaking. David Daleiden told of how his Center for Medical Progress exposed Planned Parenthood's gruesome baby body part harvesting business (and how he has been harassed since); Ann McElhinney literally wrote the book (and produced the movie) on what really went on in abortionist Kermit Gosnell's "House of Horrors," and shared how these projects came to fruition; and syndicated columnist and author Ben Shapiro displayed the qualities that make him such a formidable foe to those who lurk in the shadows of the culture of death.

Just last week college students from Nevada, Rhode Island, and South Carolina completed our 11th National Right to Life Academy. This 5-week course, taught by key leaders in the movement and the NRLC organization, sends these young leaders back to their states ready to make a difference.

We are very proud that college students who go through this very rigorous course are eligible to receive three credit hours from Franciscan University of Steubenville. The number of Academy graduates now actively working with their National Right to Life state affiliate is truly amazing (and energizing!) Start thinking now of a college student who may benefit from the program next year.

Dave Andrusko, editor of *National Right to Life News*, single-handedly produces, edits, and curates dozens of news stories every week that are posted daily at *National Right to Life News Today* (nationalrightolifenews.org).

The state legislative team continues to work in close harmony with our state affiliates to advance pro-life legislation. A recent triumph was when Texas became the 8th state in the nation to ban the gruesome abortion procedure that dismembers a living unborn baby limb-by-limb.

This summary does not even mention that already this year, there have been five special elections. The National Right to Life Victory Fund was heavily involved in all of them to encourage pro-life voters to get out to the polls.

In every one of those special elections, the pro-life candidate WON!

That's only a small portion of what's been going on at your National Right to Life headquarters – and much of it in just the past two months!

national RIGHT TO LIFE
Protecting Life in America Since 1968

Where does our influence as the largest and most effective single issue pro-life organization come from? It comes from you-- that army of volunteer grassroots activists, local chapters, and state affiliates. From members of Congress to state legislators across the country, all of them know that when they hear from National Right to Life, they're hearing from a collective voice of the countless pro-lifers we're here to represent.

It is because of your support through your donations, your prayers, and your activism that National Right to Life stands apart.

Be assured that we will keep fighting thoughtfully, strategically, and untiringly.

I consider it my highest honor to work with you and for you as we fight the abortion industry at every turn.

May God continue to richly bless you for everything you do on behalf of the most vulnerable members of our society.

WE NEED YOU!

By Carol Tobias, NRLC President

As you read in my column on page three, your National Right to Life team has been extremely busy over the past few months. I'm proud of the work we do every day in Washington representing you and working on behalf of the most vulnerable members of our society.

You have played an integral role in all of our activities and our successes, and I'm turning to you for help. Our influence as an organization comes from you and our entire base of grassroots activists, local chapters, and state affiliates. **From members of Congress to state legislators across the country – all of them know that when they hear from National Right to Life, they're hearing from a collective voice of the countless pro-lifers we're here to represent.**

Your support through your generous donations, your prayers, and your activism is the reason **National Right to Life stands apart as the most effective pro-life organization in the country.**

We're all in this together. I'm hoping I can count on your support now, because there is still much to be done. Congress is still in session. Some state legislatures are still in session, while others are already gearing up for next year. **We need to remain ever-vigilant. But we need you now, more than ever.**

All of these activities have taken a toll on our finances.

Very rarely do we use the pages of *National Right to Life News* to ask for financial support. But we find ourselves in a very unique situation with all that we have accomplished so far in 2017, and all of the challenges that yet lay ahead in the last half of the year.

We are facing off against a billion-dollar abortion industry that will stop at nothing to protect their financial bottom line at the cost of harming mothers and killing their unborn babies.

I ask that you prayerfully consider making a contribution so that we can have your National Right to Life staff start preparing to face the upcoming challenges head-on. A sacrificial gift of $500 or $250 would provide a tremendous financial boost as even a gift of $100 or $50 would. The fact is, a financial contribution in any amount will help make a difference.

You can donate securely online by going to www.nrlc.org/donate or you can mail a contribution, payable to National Right to Life Committee, Inc. to my attention at our national headquarters (512 10th Street NW, Washington, DC 20004).

Thank you for any assistance you can provide at this time. May God continue to richly bless you for everything you do on behalf of the most vulnerable members of our society.

Planned Parenthood Rep: 'No Good' Just Throwing Away Aborted Babies

By Katie Yoder

It's standard operating procedure: the liberal media consistently censor or twist coverage of the undercover Planned Parenthood videos. That's why, as new footage emerges, it's critical for American citizens to watch it for themselves.

In light of recent attempts by Congress to defund Planned Parenthood, the Center for Medical Progress (CMP) released a new video of a Planned Parenthood medical director revealing late-term "dismemberment" and partial-birth abortion protocols.

CMP first made headlines in 2015, when the self-described "group of citizen journalists" began publishing videos exposing Planned Parenthood's harvesting of aborted baby parts in the name of science. Because, as the Planned Parenthood official admitted in this latest video, "no good" comes from just disposing of them.

The new footage, never before released, showed CMP representatives, posing as fetal-tissue buyers, speaking with Dr. Suzie Prabhakaran, the vice president of medical affairs for Planned Parenthood of Southwest and Central Florida.

Because Prabhakaran's affiliate aborted babies only up to 16 weeks, she advised CMP to speak with the Orlando affiliate, which her affiliate was currently merging with, because it performed abortions past 22 weeks.

Prabhakaran emphasized that her affiliate didn't abort "many" 16-week-old babies – "probably like one" per week. In all, she added, her affiliate performed 5,000 abortions per year among five health centers.

For their abortion "procedures," both she and Orlando abortionists are trained to not use digoxin, a feticidal chemical that stops unborn babies' "cardiac activity" before it's taken from the womb.

Here's why: according to a CMP press release accompanying a previous video, "Feticidal chemicals like digoxin cannot be used to kill the fetus in a tissue procurement case," which also means a "fetus delivered intact for organ harvesting is likely to be a born-alive infant."

"Just document and you're fine," Prabhakaran said of not using digoxin. She listed two reasons why an abortionist would use digoxin: "One is to comply with the partial-birth abortion ban… and or they think that digoxin makes the procedure easier."

According to CMP, the federal Partial-Birth Abortion Ban "prohibits abortions in which a fetus is extracted alive up to certain anatomical landmarks." And an abortionist can easily avoid conflict with the ban based on his or her intent, suggested Prabhakaran.

"So some people train to just document that like, you know to comply with the Partial-Birth Abortion Ban, you basically have to say, 'I intend to utilize dismemberment techniques for this procedure,'" Prabhakaran stressed.

"So every time you do a procedure, that's how you document. So, like, there's like a checkbox," she added, "so it would be before the procedure, you do your evaluation, you write, 'I intend to utilize dismemberment techniques for this procedure.'"

Besides that, she also admitted a need to document whether she used suction or forceps to "extract the fetus in multiple parts."

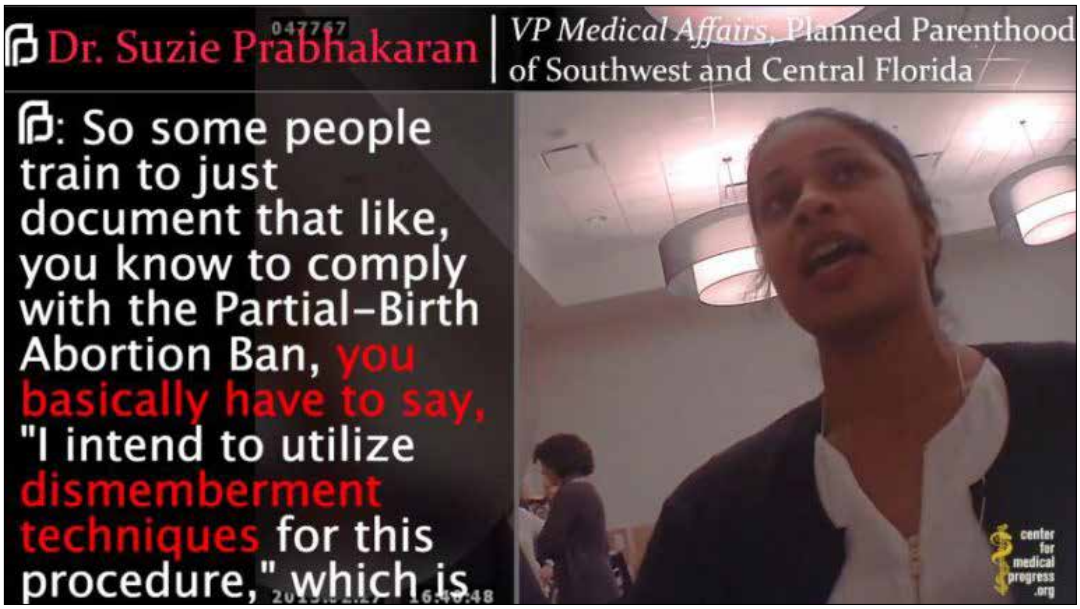
She concluded that she would like to help the investigators acting as buyers.

"And you know, the reality is right now, that tissue is going to a – it's going to Stericyle," or a medical waste company, she said. **"So it's not like, like no good is coming from it really."**

In addition to Prabhakaran, Planned Parenthood official Deborah Nucatola, who starred in past CMP videos, also made an appearance.

Along with the video, CMP project lead David Daleiden released the following statement:

Planned Parenthood medical directors and abortion doctors feign compliance with the federal partial-birth abortion law on paper, knowing full well that 'what ultimately happens doesn't matter' so long as no one is scrutinizing what they actually do to women and children in the operating room. And the fact that Planned Parenthood has a 'dismemberment'



See "No Good," page 40

Pro-life President Trump's victories on behalf of life

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

Pro-life President Donald Trump has amassed numerous victories in the fight to protect innocent human life in just the first year of his Administration.

One lasting life-affirming legacy comes in the form of his appointment of strict constructionist Neil Gorsuch to the U.S. Supreme Court. Prior to coming to the Court, Justice Gorsuch wrote that "human life is inherently valuable and that the taking of human life by private persons is always wrong."

In order to overturn the tragic 1973 U.S. Supreme Court decision *Roe v. Wade*, which legalized abortion for any reason during all nine months of pregnancy, we need Justices on the High Court who recognize that the taking of an innocent human life is not a Constitutional right.

The President has also restored and expanded the Mexico City policy, which blocks taxpayer dollars from being awarded to organizations that perform or promote abortions overseas. President Trump also signed a law which ensures that individual states can redirect Title X funds away from unsuitable organizations, such as Planned Parenthood, which performs more than 320,000 abortions annually and has been mired in controversy. The President also cut off funding for the United Nations Population Fund because of its involvement in China's egregious forced abortion program.

Pro-life President Donald Trump

Research has consistently shown that government funding of abortions increases abortion totals, so countless lives may be saved as a result of these critical executive actions.

In addition, President Trump has made numerous pro-life appointments to his Administration, including Human Services Secretary Tom Price and counselor to the President Kellyanne Conway. Not to mention the fact that his Vice President, Mike Pence, accumulated an impressive 100 percent pro-life voting record while serving in Congress and has fought for compassionate alternatives to abortion.

The President has made good on his campaign pledge to protect precious preborn children and their mothers from the harm of abortion. In doing so, he has reversed the drastic course set by the pro-abortion Obama Administration, which openly feted the nation's largest abortion operation at the White House.

The People's House is no longer providing an open house for the abortion industry–and that is very good news indeed for women, children, and their families.

You can learn more about the Presidential Record on Life by visiting our website at paprolife.org.

Exclusive or inclusive? Two views of human rights

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

Human embryos and fetuses are living human organisms. They are members of the species *Homo sapiens* at the earliest stages of their lives.

But many people believe that these human beings *in utero* do not have a right to life. Why not? Because they are different from the rest of us in some way that (allegedly) matters.

They are younger, smaller, less developed, more dependent. They look different. They can't think and reason the way we do. They don't meet the criteria necessary to be a "person" with rights.

This is an *exclusive* view of human rights because it holds that only some (not all) humans have rights.

The exclusive view excludes valuable people

What's wrong with the exclusive view? One problem is that it doesn't just exclude unborn children. It excludes other human beings as well—anyone who does not yet (e.g., the very young) or no longer (the old and sick) or never will (the disabled) have the required characteristics.

This is true regardless of the specific criteria that are offered. If independence from the bodies of others ("viability") is necessary to have rights, then some conjoined twins do not have rights. If a stereotypical "human" appearance is necessary, then people with extreme deformities are excluded. If being wanted or loved by others is necessary, then some homeless people don't count.

Many bioethicists and philosophers believe that an individual must have an immediate capacity for certain higher mental functions in order to qualify as a person. But this standard may exclude people who are temporarily comatose. It may exclude people with serious mental disabilities or dementia. And it excludes human infants.

That's why a number of prominent ethicists who support abortion argue that infanticide is also permissible. "The moral status of an infant is equivalent to that of a fetus," write two philosophers in the *Journal of Medical Ethics*, "in the sense that both lack those properties that justify the attribution of a right to life to an individual."

But killing newborn children is obviously wrong.

The exclusive view undermines equality

Another problem with the exclusive view is that any of the proposed criteria come in degrees. People are more or less intelligent, more or less biologically developed, more or less self-aware, more or less sentient, more or less dependent on others. No two people are exactly equal according to any of those characteristics. So if those traits are the basis for having a right to life, then some people have a greater right to life than others. Some people are more valuable and some people are less valuable. Equality then is a myth.

"It is hard to avoid the sense that our egalitarian commitments rest on distressingly insecure foundations," acknowledges philosopher Jeff McMahan defender of abortion. McMahan worries about "the compatibility of our all-or-nothing egalitarian beliefs with the fact that the properties on which our moral status appears to supervene are all matters of degree."

But there is an alternative. The alternative is an *inclusive* view of human rights.

The inclusive view

Human beings have rights, on this view, simply because they are human (hence the term "human rights"). We have rights not because of what we can do, or what we look like, or what other people feel or decide about us, but rather because of what (the kind of being) we are. Nothing else is required. There is no other test or threshold we must meet.

Thus human rights, according to the inclusive view, are universal—they belong to every human being. Infants are included. People with dementia are included. People who are unwanted and neglected and marginalized are included.

Moreover, we are all fundamentally equal because the basis for our worth and dignity is something we share in common. We are equally human. We are all the same *kind* of being regardless of our countless differences.

So we all matter. And we are all equal.

What about unborn children? Unborn children are human beings. If the inclusive view is true—if all human beings have human rights—then unborn children have human rights too. That's why the inclusive view usually goes by a different name. It's called the pro-life view.

Two options

These, then, are the two options when it comes to the scope of human rights. Either all human beings matter because they are human (the inclusive view) or only some

See "Exclusive," page 16

Abortion Advocates Wary of New Artificial Womb Technology

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

With artificial wombs moving from the realm of science fiction to scientific fact, abortion sympathizers are starting to get concerned about the ethical and legal implications.

In an 7/28/17 article from *Gizmodo* titled "How New Technology Could Threaten a Woman's Right to Abortion," reporter Kristen V. Brown says that an "artificial womb" recently successfully used by researchers at the Children's Hospital of Philadelphia to bring several premature sheep to viability (ability to survive outside the womb) presents real problems for abortion advocates. *(NRL News Today* wrote about this new technology at http://bit.ly/2ve1H2b.)

This could "complicate – and even jeopardize – the right to abortion in an America in which that right is predicated on whether a fetus is 'viable,'" says Brown.

While *Roe v. Wade* and *Doe v. Bolton* essentially authorized abortion on demand for all nine months of pregnancy, in 1992, in *Planned Parenthood v. Casey*, the court asserted that "viability" was a key milestone in the state's ability to intervene on behalf of the unborn child.

In *Casey*, Justice Sandra Day O'Connor said this standard put *Roe v. Wade* on a "collision course with itself" as technology would inevitably push fetal viability back earlier and earlier in pregnancy.

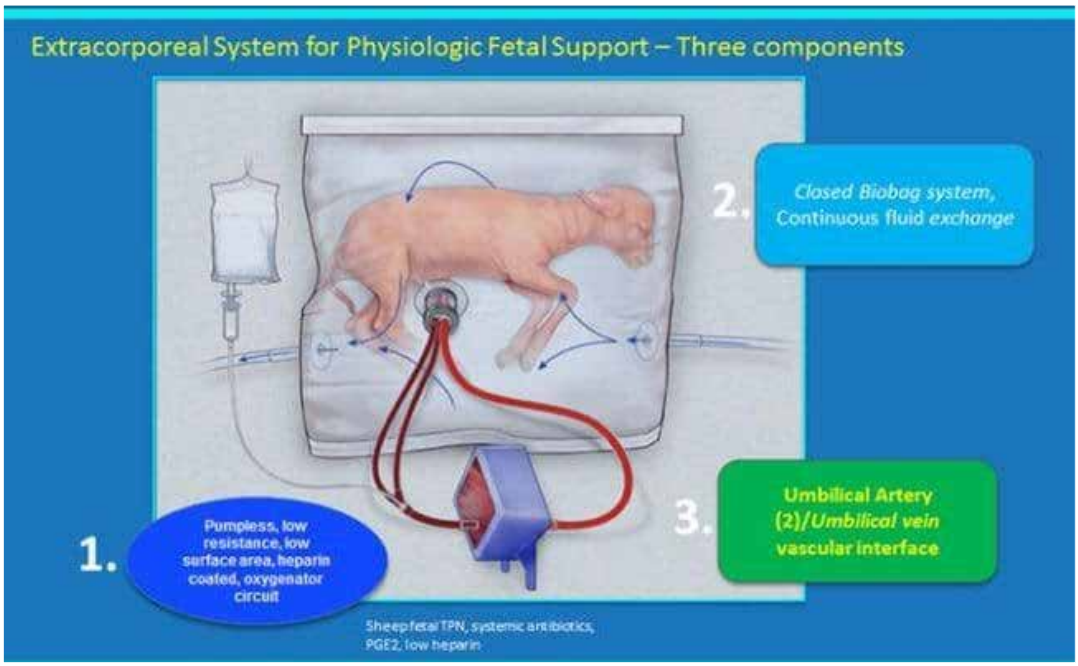
When abortion was first declared legal by the Supreme Court, viability was considered to occur somewhere around the beginning of the third trimester. Today, babies born at 24 weeks' gestation (pregnancy measured from a woman's last menstrual period, fetal age would be about 22 weeks) often make it and babies born as early as 22 weeks (20 weeks fetal age) have sometimes survived (more on current survival rates at *NRL News Today* at http://bit.ly/2vH1XJV).

But what if technology could make it so that even younger unborn children could make it to viability, albeit outside the woman's womb? The idea is not so farfetched as once thought. Brown says that researchers are hoping to test the artificial womb on human babies within the next five years.

"The Supreme Court has pegged the constitutional treatment of abortion to the viability of a fetus," I. Glenn Cohen, a Harvard bioethicist, told Brown. "This has the potential to really disrupt things, first by asking the question of whether a fetus could be considered 'viable' at the time of abortion if you could place it in an artificial womb." Brown writes

In the future, Cohen said, it stands to reason that this technology could save the lives of fetuses born even earlier. Imagine then, that you had made the decision to terminate a pregnancy at 18 weeks, but that such a technology technically made it viable for the fetus to be born at that point in development, then finish developing outside the womb. Would an abortion still be legal?

"It could wind up being that you only have the right to an abortion up until you can put [a fetus] in the artificial womb," said Cohen. "It's terrifying."



Brown says that the new technology offers a real test of the legal and ethical arguments made for a "woman's right to control her own body."

"Under that logic," says Brown, "the law could simply compel a woman to put her fetus into an external womb, giving her back control of her body but still forcing her into parenthood."

In paraphrasing Prof. Cohen, Brown says that while Cohen told her the law has thus far

See "Artificial," page 32

Only in PPFA's alternate universe is abortion an act of "kindness"

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

I was reading a magazine spotlighting celebrities recently when I noticed a paragraph that was supposed to highlight acts of kindness.

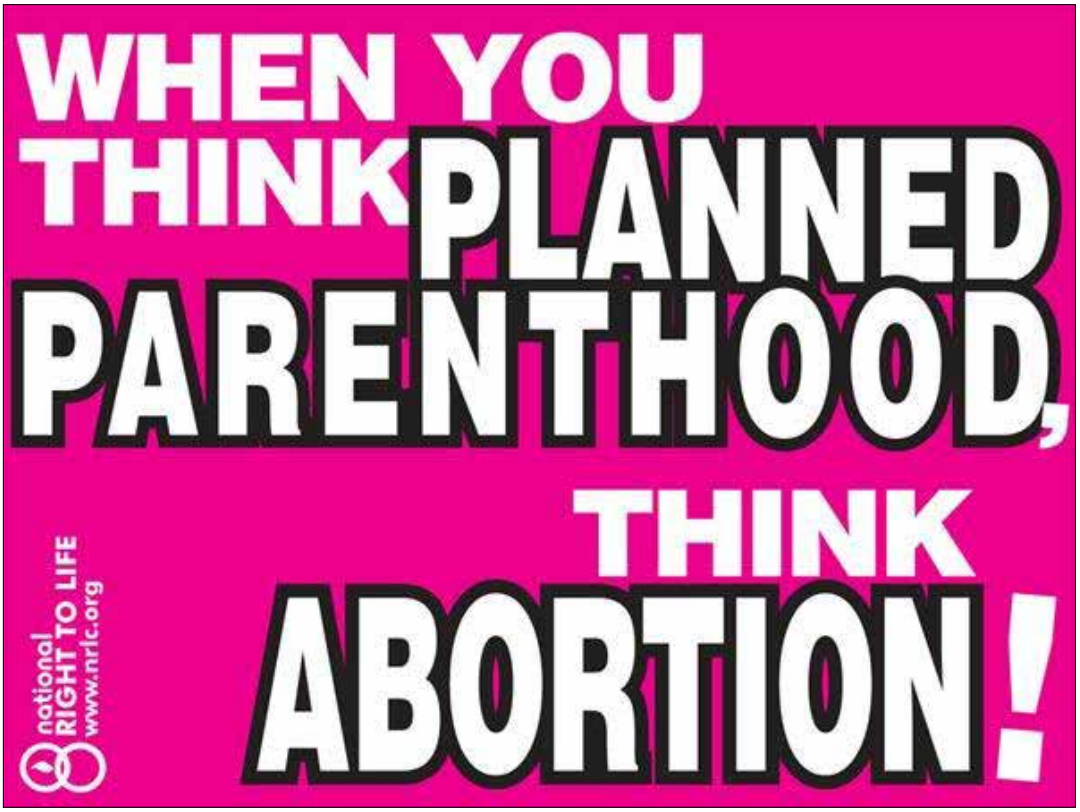
The "act of kindness" was fundraising by an actress on behalf of Planned Parenthood, the nation's largest abortion operation, which snuffs out more than 320,000 unborn lives annually.

The blurb made no mention of abortion, focusing entirely on "health care." It also failed to note that breast cancer screenings are actually on the decline at Planned Parenthood facilities, even as abortion totals increase.

A few days later, a friend told me she had been watching the *ABC* program "Family Feud," where a "family" of female comics was playing to raise money for Planned Parenthood. It is certainly ironic that a game show named for families was promoting an organization that eliminates the children so critical to family life.

The fact that Tinsel town stars support the abortion giant Planned Parenthood is nothing new, but the pervasiveness of it, in all different forms of media, is startling. It is all the more disturbing given Congressional investigations into the alleged sale of baby body parts by Planned Parenthood affiliates.

Also, this Planned Parenthood-palooza comes after the release of shocking undercover videotapes showing the organization's high-ranking officials blithely discussing the harvesting of baby body parts while sipping wine and chomping salad.



But celebrity fundraising for Planned Parenthood brings up a larger point: why is taxpayer funding of the abortion operation needed, given all the charity dollars it is generating? Why should a single mother's hard-earned paycheck bankroll an organization supported by a millionaires' club of entertainers?

The lion's share of Planned Parenthood's clinic income comes from abortion—the taking of an innocent child's life. Only in PPFA's alternative universe is this act of cruelty against both mother and child an act of "kindness."

Contrary to the "Family Feud" episode, the "work" that earns Planned Parenthood the most money is not the stuff of fun and games. It is a bloody business which thrives on secrecy and deception. It is not something to be celebrated, but to be mourned.

Last November's elections showed that a large segment of the American population is tired of political business as usual. For many, that means an end to taxpayer subsidies to a business built on abortion.

The stars are actually aligning against continued government promotion of Planned Parenthood. It is unfortunate that many in the media constellation are ignoring the message.

Next to Abortion Mill, Pregnancy Center Helping Moms Fall in Love with Their Babies via Ultrasound

By Jay Hobbs

When Jessica saw her son, Jayden, for the first time via ultrasound in 2014, the "crisis" of her unplanned pregnancy took an immediate back seat. She had fallen in love, and there was no going back.

Jessica and her son, Jayden, were rescued from abortion by Women's Care Center of Duluth in 2014. Photo By: Jaclyn Grace Photography

Working a full-time job and planning to start college the next semester, Jessica would have been an easy target for the abortion industry and its Duluth outpost—kitty-corner from Women's Care Center. Instead, she's now the mother of a 3-year-old and pursuing her newfound goal of working with babies in the medical field.

"The ultrasound made it so real," Jessica said. "He kept moving his little arms like, 'Hey, I'm here!'"

Adding a new, upgraded ultrasound machine this summer, Women's Care Center is hoping the machine's 4-D capabilities will help even more women like Jessica fall in love and choose life for their babies.

Jennifer Woodall, executive director for Women's Care Center of Duluth, told reporters at a local Fox affiliate the donation was "an incredible blessing," especially considering the need represented by Duluth's poverty rate—which is 10 percent higher than the state's average.

"Being able to offer this no matter what their financial background is or whether they have health insurance or not—it's a way to give back to our community," Woodall said.

The machine was donated by a local chapter of the Knights of Columbus, a Catholic fraternal organization that has raised over $36 million to place 752 ultrasound units at local pregnancy help medical clinics in all 50 U.S. states since 2009.

Located just across the street from the only abortion mill in Northern Minnesota, Women's Care Center of Duluth is part of a 25-site group that serves in five Midwestern states.

Since opening its doors in March of 2013 the center has performed more than 800 free ultrasounds and reached over 1,500 individual clients just a matter of steps from an abortion business that claimed 398 preborn lives in 2015.

Over 40 locally funded pregnancy help centers offer ultrasound in Minnesota, compared to just six abortion businesses and a total of 12 abortionists still in practice throughout the state, where a recent report shows 2015 overall abortion numbers at their lowest since 1980.

Abortion numbers are falling steadily in Minnesota—even while the state has seen a recent uptick in taxpayer-funded abortions—in large part because of the life-saving work going on every day at outreaches like Women's Care Center.

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

Notorious late-term abortionist again in serious legal trouble

By Dave Andrusko

While every abortionist could be considered a candidate for the Hall of Shame, it is also true that some have accumulated a trial of offenses so heinous that they are shoo-ins.

One of those, without question, is abortionist James Pendergraft, IV. He has long since attained a kind of legendary status—in a wholly negative way—for performing late, late abortions and for his numerous run ins with medical authorities. His license has been suspended multiple times by the Florida Board of Medicine.

We last wrote about him in February 2016. He had been arrested the month before in South Carolina and, as a consequence, four of his abortion clinics, including two in Orlando, faced the loss of their licenses, according to the *Orlando Sentinel's* Margie Menzel.

Recently Liberty Counsel issued an update, stating that Pendergraft

> **"is now scheduled for criminal trial in Spartanburg following his arrest in 2015 during a routine traffic stop. The outcome of the trial by jury will have implications on the future of a chain of four Central Florida abortion businesses."**

What I had not known, until I read the Liberty Counsel statement was that this past May "the Florida Department of Health revoked the facility licenses of four abortion facilities where Pendergraft serves as Chief Financial Officer."

What did the South Carolina arrests and the revoking of the licenses of EPOC Clinic, LLC in Orlando; Ft. Lauderdale Women's Center, LLC in Ft. Lauderdale; Orlando Women's Center, LLC in Orlando; and Ocala Women's Center, LLC, an Ocala abortion facility that closed in 2015 have to do with the status of Pendergraft's medical license?

"According to Florida law, criminal arrests are disqualifying acts, meaning that even an arrest without a conviction disqualifies the person from employment that requires licensure," according to Liberty Counsel.

Abortionist James Pendergraft

"If convicted, Pendergraft should lose his Florida medical license."

Let's double back to the South Carolina arrests before mentioning just a few examples of the trail of disaster Pendergraft has left in his wake.

Back in 2016 *World Magazine* reported that Pendergraft was arrested October 5, 2015, by Spartanburg County Sheriff deputies. He and the woman passenger, identified as his wife, were pulled over for a traffic violation.

According to Bob Brown

> **A search of Pendergraft's car turned up illicit drugs and forceps covered in blood and human tissue, leading Sheriff Chuck Wright to speculate that Pendergraft was operating an illegal mobile abortion business in the state.**
>
> **"He traveled around the state of South Carolina without a medical license, with drugs and with medical tools performing in-home abortions," Wright said at an Oct. 9 press conference. "So basically we've got an illegal baby killer and his wife was charged with possession with intent to distribute marijuana"**

Previous to all this, here's one example of Pendergraft's amazing ability to circumvent authorities that we wrote about back in July 2013.

At the time there had been a couple of stories out of local television stations that the same abortion clinic that had been shut down in June because he had made only minor payment on a lawsuit he lost was now reopening. Everything from office furniture to patient exam beds had been taken, filling two moving trucks.

Pendergraft's Orlando Women's Center would not only be re-opening (using borrowed equipment and furniture), it would be performing abortions seven days a week. He still does not have his license back but, according to *WFTV*—Channel 9, six other "doctors" (abortionists) would be working at his abortion clinic.

As Channel 9 reported at the time, "Pendergraft has been in the news before. He has lost his license five times in the Florida, most recently in April after he failed to pay another debt to the state of Florida for fines related to a former license suspension for an illegal third-trimester abortion. The doctor has been accused of botched abortions and performing that illegal third-trimester abortion."

The unpaid $36 million medical malpractice judgment against Pendergraft goes back to a 2001 abortion. "Pendergraft wouldn't go into detail about what happened, but attorneys for the woman said the child suffered a brain injury resulting in cerebral palsy, blindness and severe mental and physical disabilities," Channel 13 news reported. "A jury found the doctor and woman's center negligent, and awarded the family more than $36 million in damages."

"The most recent suspension came in April after he failed to pay more than $120,000 in fines for a 2006 botched abortion," according to *World Magazine*. "He has also been in trouble

See "Notorious," page 13

National Right to Life Academy: Equipping Pro-life Students for Life

By Karen Cross, National Right to Life Political Director

The 11th annual National Right to Life Academy officially ended on Friday, August 4. Pro-life students who attended the accredited course came away with a fuller understanding of the movement as a whole: from bioethics to post-abortion syndrome, political action to legislation and lobbying, communication and effective use of social media, the history of the pro-life movement, and much more.

"The Academy has given me the tools to be an effective pro-life advocate," said Emily Barnhill, from South Carolina. "I am so thankful they took time to invest in me and my classmates."

The Academy, a five-week summer program, is an accredited course in which students may receive three college credits through the Franciscan University of Steubenville.

The Academy began on June 29, at the 47th Annual National Right to Life Convention in Milwaukee where students were immediately immersed in all aspects of the movement. They continued their education at the National Right to Life headquarters in Washington, D.C. through August 4.

The Academy is an excellent resource for students wishing to be active in the pro-life movement, whether seeking a job or wanting to volunteer. Many past Academy students are currently serving in various capacities across the country. Some have been employed by National Right to Life, employed by NRL state affiliates, and others serve on right to life boards or as chapter leaders. In fact, many NRL state affiliates look to Academy students when job openings occur, as they are bright and committed to the pro-life cause.

Students heard from a variety of experts in the pro-life movement, including bioethicist Wesley Smith and members and National Right to Life staff.

"The Legislative team at NRLC has provided instructional materials to the academy students in order to understand the tenets of the legislative process and how important grassroots lobbying is to the right to life issue," said Ingrid Duran, the director of the State Legislative Department of National Right to Life.

"By the end of their training, academy students will be able to effectively lobby their leaders on life issues such as the Unborn Child Protection from Dismemberment Abortion Act, Pain-Capable Unborn Child Protection Act, and a wide variety of pro-life laws that are legislative priorities for NRLC," she added. "The students will also be prepared to respond to pro-abortion arguments in order to defend these vital pieces of legislation."

"Attending the National Right to Life Academy has been nothing short of a blessing," Barnhill added. "Every single person in the National office is a hero in the pro-life movement and I consider it a great privilege to have met every single one of them."

"The experience was memorable and immersive, challenging and intense, and ultimately rewarding," said Conor Clement, from Nevada.

"I am very impressed with the quality of our students, with their intelligence, their drive, and their dedication," said Dr. Randall K. O'Bannon, National Right to Life Academy director. "I had taught some Academy classes in years past, but this was the first year that I really got a chance to see just how deep and comprehensive our training program is."

O'Bannon explained, "We've spent a great deal of time not only discussing pro-life political action and the latest legislation, but have also devoted considerable attention to our history and to the biological and ethical background that undergirds our movement. These young people are going to come out of this course not just prepared to talk about our issues but to make a difference!"

Destiny Smith, of Rhode Island, told **NRL News**,"The National Right to Life Academy has equipped me with the tools to become an advocate for life, dedicated to seek the pursuit of justice." She noted, "The Academy professors established the importance of active engagement, relentless action, and passionate people. I am thankful for National Right to Life, and their investment in my future. It is an honor to be a part of their influential legacy."

Baby aborted at 35 weeks, teenage mother later learns baby had survived

Maternity nurse secretly saves child

By Dave Andrusko

A story almost beyond belief whose conclusion came about last May, four years after "Lil" aborted her child in the 35th week.

In 2013, Lil was 18, the *Daily Mail's* Sophie Williams tells us, when the young woman from inner Mongolia found out she was pregnant.

She did not tell anyone until the 35th week when evidently she told her brother who then accompanied her to an unnamed abortion clinic where she "successfully" aborted.

Or, so she thought. Incredibly three days later police told Lil that her baby had been saved by the maternity nurse! According to Williams

Liang Xiaohua said that she heard the child crying and took it out from the plastic bag to rescue. She attached the baby to oxygen and gave it water while she hid it in a cupboard.

The nurse was overheard calling someone and asking if they wanted a child and telling them that she did not know if it was a boy or a girl.

She sold it to her cousin who took the child to her home.

Local villagers became suspicious of the cousin and informed police of the baby.

The story's chronology is a bit hazy, but evidently the villagers' suspicions convinced police in the Hongshan District to investigate. Lil learned that her child was alive but claims that authorities would not reveal where the child was.

"She claimed that officers then became unresponsive," Williams reported. She had no more luck with the Health Bureaus and Family Planning Bureaus.

Eventually the "Hongshan District Public Security Bureau deputy commander Zhang said he came to the conclusion that the baby was abducted," Williams reported. In January 2014, Liang Xiaohua was arrested on suspicion of child abduction and sentenced to two years in prison.

Lil asked for approximately $164,000 in compensation, Williams reported, for "medical costs, lawyer's fees and support costs." This was not granted and her appeal failed as well.

"In February 2014, Hongshan District Public Security Bureau deputy commander Zhang and three other members of staff were found guilty for dereliction of duty but were not handed sentences," according to Williams. Best guess is this was because Zhang had not filed a petition (presumably meaning criminal charges).

"The court case was finally closed in May 2017."

Notorious late-term abortionist again in serious legal trouble

From page 11

with authorities in Maryland, where he once ran an abortion business despite having no medical license in the state."

Pendergraft and an associate, Michael Spielvogel. were convicted February 1, 2001, for fraudulently accusing a Marion County official of threatening them and later demanding millions of dollars from the county, the *Star-Banner* reported. They were sentenced to 46 and 41 months in prison, respectively. Pendergraft was released after serving only seven months of his sentence.

I ended that story with this:

Pendergraft, in his mid-50s, runs a website–latetermabortion.net–where he advertises that he performs "late second and third trimester pregnancy terminations."

Here is now Liberty Counsel finished their story:

"James Pendergraft has a long history of hurting women and killing innocent babies," said Mat Staver, Founder and Chairman of Liberty Counsel.

"Liberty Counsel represented a mother whose perfectly healthy son, Rowan, was born alive after a botched, late-term abortion at one of Pendergraft's abortion facilities. Cradling Rowan's moving body, the mother screamed for help and pleaded with abortion clinic workers to call 911, but she was ignored until her son died in her arms. Pendergraft should be locked up and lose his medical license so that he can never hurt women and children. We must make the womb a safe place again," said Staver.

A "solution" that sidesteps the real reason for the huge male/female imbalance in India

By Dave Andrusko

Sex selection is a straightforward issue for pro-lifers but much trickier for pro-abortion "feminists."

We oppose abortion. Period. It only adds to what is already morally and ethically wrong if the motivation is the child is not the "right" sex (almost always a girl).

Pro-abortion feminists want to decry a lethal preference for boys over girls but not by "banning" abortions based on the sex of the child. So they jump through hoop after hoop trying to find a "solution" that evades the real source of the problem.

I don't happen to have heard of Sital Kalantry who wrote a piece late last month for the *New York Times* headlined, "How to Fix India's Sex-Selection Problem." She is described as a professor at Cornell Law School and the author of *Women's Human Rights and Migration: Sex-Selective Abortion Laws in the United States and India*.

A quick tour of the Internet reveals this op-ed is a kind of advertisement for her new book. Here's how she describes it:

> **In this new book, I examine prohibitions on sex-selective abortion that are sweeping state legislatures across the United States from a critical race, empirical, and feminist perspective. I argue that supporters of the bans use misinformation and stereotypes about India and Indian-Americans.**

She then provides a link to her *Times* piece, adding it "flows from the book though is not directly related to its core themes."

For our purposes, there is some useful information in Prof. Kalantry's op-ed. She begins

> **There are too many men in India today. Over the course of several decades, 300,000 to 700,000 female fetuses were selectively aborted in India each year. Today there are about 50 million more men than women in the country.**
>
> **While selective abortion of female fetuses accounts for most of the excess of men, another reason for the disparity in the population is that some people are believed to kill female infants, and some girls die because of medical or nutritional neglect. This oversupply of men is harming women and girls.**

As you would expect, sex-selection abortion is more common in urban areas whose inhabitants are middle-class, educated, and richer—meaning more access to ultrasounds that reveal the child's sex and the ability to pay for abortions.

Prof. Kalantry is sceptical about what's being done in India to address what is, after all, an emerging demographic crisis. The government, she argues, is "failing to catch and prosecute illegal ultrasound providers." (A law adopted in 1994 "prohibits medical professionals from revealing the future sex of a fetus to a pregnant woman.")

"Frustrated with government inaction, some civil society groups have started guerrilla campaigns in which pregnant women seek out the sex of their fetuses, after which they report ultrasound operators that provide that information," she adds.

Then Prof. Kalantry makes this statement: "Even if greater enforcement efforts are made, it is likely impossible to completely eliminate the black market for fetal sex detection."

This, of course, is the standard response to **any** attempt to restrict/eliminate abortions: there will always be "illegal abortions." But what if the Indian government were far more diligent in tracking down "illegal ultrasound providers"? What if what amounts to a sting operation by Indian women really catches on and large numbers of these providers are unmasked and evidence provided to prove their criminal behavior?

What makes for curious reading is her convoluted argument that there is some unmet desire for female babies—the suggestion that the idea there still remains a "son preference" and "daughter aversion" may be overblown.

See "Solution," page ??

Missouri Gov. Greitens signs wide-ranging pro-life measure

By Dave Andrusko

It was by no means easy–it took a special session–but on July 26, Missouri Gov. Eric Greitens signed HCS SB 5, a wide-ranging pro-life measure, into law.

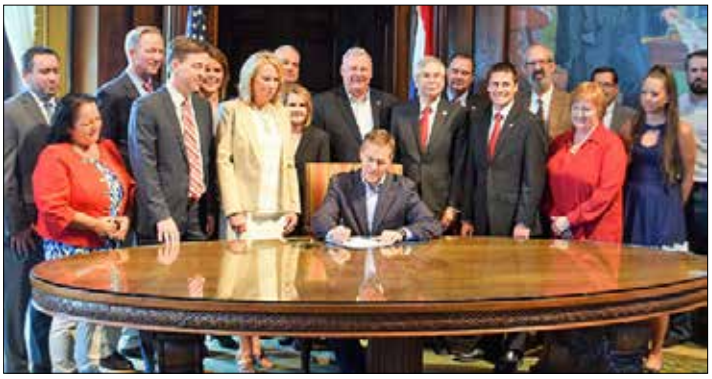
"Today is a great victory for pregnancy care centers that help women and children all over the state," a happy Greitens said in a statement. "I'm proud that many of Missouri's lawmakers stood strong to protect the lives of the innocent unborn and women's health."

Missouri Right to Life said, "We are especially grateful to Governor Greitens for calling this special session and for his support of this pro-life legislation." NRLC's state affiliate called the measure "one of the strongest pro-life bills to be passed by the Missouri Legislature in many years!"

"This is probably one of the most important bills I've ever been involved with in my legislative career," Assistant Senate Majority Leader Bob Onder, told the *Kansas City Star*.

Six weeks after Gov. Greitens called the legislature back to Jefferson City (the regularly scheduled session ended in May), the Senate voted 22-9 to pass a measure with a number of provisions which include, according to Missouri RTL:

- "Ensuring that our top law enforcement officer, the Attorney General, has equal jurisdiction with a local prosecutor. This is needed when a local prosecutor is pro-abortion and refuses to uphold the laws when an abortion clinic or abortionist breaks the law."



Governor Eric Greitens signing HCS HB 5 into law on July 26.

- "Annual on-site unannounced abortion clinic inspections to make sure abortion clinics are following the law."
- "Whistleblower protections for employees of abortion clinics who see law after law being broken inside these abortion clinics and want to report it, but are afraid of the repercussions by the abortionists."
- "Protection for pregnancy resource centers and faith communities not to be forced to participate in abortions."

The latter alludes to what we reported here previously. In February, the city of St. Louis passed Ordinance 70459, which pro-life opponents said creates an "Abortion Sanctuary City." The ordinance prohibits any organization, church or business from hiring or firing employees—even excluding from membership in the case of churches—on the bases of what the code refers to as, "reproductive health decisions or pregnancy status."

State Sen. Onder and others said that amounted to forcing pro-life entities to support and even fund abortions of their own employees.

A "solution" that sidesteps the real reason for the huge male/female imbalance in India

From page 14

With that as her assumption, she adds

> **Some parents may desire to have female children but do not act on that preference. The Indian government could allow those parents to conceive a girl. One way to do this is by sperm sorting, a process whereby X chromosome-bearing and Y chromosome-bearing sperm are sorted.**

Conclusion?

> **[I]f sperm sorting, which is 93 percent effective in conceiving girls, were made available to any woman who wanted to select in favor of a girl, we might see both poor and middle-class people conceiving girls, in that way helping to equalize the male surplus.**

But consider: Earlier in the op-ed, she tells us

> **in the northern state of Haryana there is a large male surplus. The scale of sex selection is so enormous that one demographer estimates that if current levels of sex selection persist, nearly 10 percent of Indian men will be single at age 50 in 30 years.**

As this single statistic illustrates, the problem is that babies are aborted on a gigantic scale **because** they are girls. At the risk of stating the obvious, sperm sorting to ensure a miniscule increase in the number of baby girls could only make the smallest of small dents in this imbalance for the simple reason it conspicuously avoids the real reason for this massive human rights abuse.

Oregon Law Forces Taxpayers to Pay for Abortions

Editor's note. This analysis comes courtesy of the Alliance Defending Freedom.

Recently, the state of Oregon passed a law (which Governor Kate Brown is expected to sign) requiring insurance companies to provide full coverage for all abortions, for any reason, up until the day of delivery.

Let's take a look at a couple of points.

The first point comes from ADF Legal Counsel Elissa Graves, writing at the ADF blog:

> **As if that weren't troubling enough, this law—which claims to provide women "equity," presumably with men—is inherently anti-feminist.**
>
> **That is, the law allows free abortions based on the sex of the baby.**
>
> **Sex-selective abortions disproportionately affect baby girls in the womb. Sex discrimination in the form of selective abortion has resulted in millions of missing girls throughout the world.**
>
> **Even though polls have shown that a majority of Americans would be in favor of banning sex-selective abortions, the practice still occurs in the United States and is deeply engrained in some cultural traditions.**

Oregon's extreme laws allow for abortions for any reason at any point prior to birth. There are no protections for the unborn at all, which leads to disproportionate harm to unborn girls.

The second point comes from Georgi Boorman, writing at *The Federalist*:

> **Notice, too, how the old mantras of pro-abortion rhetoric have fallen away. Who proclaims abortion should be "safe, legal, and rare" anymore? Do Oregon Democrats care if abortion is rare, considering they want to make it free? It's even doubtful they care much about its safety, if one considers the lack of hospital admitting privilege requirements, informed consent, tracking abortion-related maternal deaths (something every state should be doing), or even a definition of an illegal abortion, which is extremely hazardous to a woman's health, much less a penalty for it.**
>
> **[…]**
>
> **Ironically, the same radicals who support explicit consent for the act that creates life don't think they need your consent to have you pay for its destruction.**

Pro-abortion Gov. Kate Brown

The bottom line is this: No government should require its citizens to pay for abortion, particularly when a significant number of them recognize that abortion wrongfully terminates a life.

Exclusive or inclusive? Two views of human rights

From page 7

human beings matter because they possess certain attributes that other humans lack (the exclusive view).

The exclusive view, of course, has a very long and very unflattering track record. People have thought that rights belong only to those with a specific gender, or skin color, or ethnicity, or social status. This history should make us deeply skeptical of today's exclusion of unborn children.

"Every previous division of humankind into two classes in which one half was permitted to dispose of the other at will … [is now] universally recognized as evil," writes philosopher Christopher Kaczor. "In every case, the powerful judged the vulnerable as lacking some characteristic which, in the view of the powerful, made the weaker human beings unfit for basic respect. Do we really have reason to believe that for the very first time in human history we are justified in treating some human beings as less than fully persons?"

The exclusive view has always been wrong. And it will always be wrong. Only the inclusive view provides a basis for justice and equality.

The euthanasia slippery slope: a failure of memory and imagination

When the splash of assisted-suicide and euthanasia blinds us to their far-reaching ripples.

By Margaret Somerville

Very recently, two senior physicians who have championed the legalization of euthanasia in their jurisdictions, Dr. Boudewijn Chabot in the Netherlands and Dr. Guy Robert in Quebec, have rejected current "appalling" developments in euthanasia in their countries. Yet, these developments should have been anticipated. So, why weren't they?

Pro-euthanasia advocates focus just on individuals and only in the present – a combination of radical autonomy/ intense individualism and "presentism" – which blocks out considering both lessons from the past and likely future developments. In other words, the pro-euthanasia stance rests on a failure of people's individual and collective human memory and imagination.

Those opposing euthanasia look to human memory – history and what the past can teach us – and imagination – what the future might hold – as well as the present. They also look beyond euthanasia's impact just on individuals to the wide-ranging and multitudinous major issues and consequences it raises for medicine and law, for practitioners of these two professions, and for all of us as families, communities and a society.

Human memory

Human memory warns us of the "slippery slopes" euthanasia opens up: The "logical slippery slope," the situations where euthanasia is allowed constantly expands, and the "practical slippery slope," euthanasia is undertaken not in compliance with the law.

Once euthanasia becomes normalized slippery slopes are unavoidable, because, as British moral philosopher Dame Mary Warnock explains, "You cannot successfully block a slippery slope except by a fixed and invariable obstacle," in the case of euthanasia, the rule that we must not intentionally kill.

Pro-euthanasia advocates dismiss the nearly 2,500 year history of the Hippocratic Oath's guidance of medicine – cure where possible, care always, never kill – and, especially, any lessons from the Nazi regime. No one believes euthanasia will lead to a second Holocaust, but as the distinguished Canadian historian, Margaret MacMillan, has said, without knowing the past, we deprive ourselves of an important source of understanding.

Renowned Canadian disability rights advocate Professor Catherine Frazee, who says that what happened to people with disabilities in Nazi Germany is "part of my history as a person with severe disabilities", explains "that one key to tackling complex problems is to ask the right questions, and history, through its cautionary tales and analogues, is a rich vein of 'right questions'" to ask about euthanasia.

We can also look to indigenous people's practice of looking to Elders past and present, to argue it is wrong and dangerous to exclude human memory from informing our important societal decisions, and legalizing euthanasia is clearly such a decision.

Psychiatrist Dr. Boudewijn Chabot, a very prominent pro PAS-E [Physician Assisted Suicide-Euthanasia] advocate in the Netherlands, who has been called the "patron saint of euthanasia," is horrified at what is currently happening in his country.

He's not anti-euthanasia (he is prepared to accept tens of thousands of euthanasia cases) but aghast at the rapid rise in the number of people with psychiatric illness or dementia who have been euthanized.

Writing in a leading Dutch newspaper, Chabot says that "legal safeguards for euthanasia are slowly eroding away and that the law no longer protects people with psychiatric conditions and dementia."

He recognizes "we are dealing with a morally problematic act: how do you kill someone who does not understand that he will be killed?" And he concludes bitterly, "I don't see how we can get the genie back in the bottle. It would already mean a lot if we'd acknowledge he's out."

Why did the Dutch not look to the past for warnings? Why did they fail to use their imaginations to foresee these future consequences?

We need to ask these questions in relation to vulnerable Australians, those who are elderly and fragile, especially those with dementia, people with disabilities, including newborn babies, who can also be euthanized in the Netherlands.

Human imagination

A failure to look to the future is resulting in an extreme

See "Euthanasia," page 41

"Real Alternatives" offer a life-affirmation option for pregnant women and girls

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

Family and friends have abandoned the young woman, believing that her pregnancy is a problem to "be gotten rid of." Abandoned, the "easy" path leads to her baby's death.

But there is an alternative, another road, driven by compassion. In our state the woman or girl can turn to Pennsylvania's Pregnancy and Parenting Support Program.

The program is administered by Real Alternatives, Inc. which supports both the woman and her baby, equipping her with the tools that will help her succeed at motherhood, college, relationships, and the rest of the elements of her life.

Over the past two decades, Real Alternatives has provided kind-hearted, clear-thinking, and loving support to more than 275,000 women and their families. They have helped women and girls to find solace, hope, and encouragement for the future.

As writer Frederica Matthews-Green stated so eloquently,

> **"They (Women) have said if I'd only had one person to stand by me, and it could have been a stranger, but they'd say I needed somebody to be a sister to me, I needed someone to be a friend . . . I would have had that baby. And, that's what you do in maternity homes and crisis pregnancy centers and in offering adoption services. You are that friend . . ."**

The statewide network of 91 non-profit centers and close to 350 counselors reaches out to women of all backgrounds and walks of life with services that are 100 percent free. The success stories are inspiring…women finishing their GED and obtaining gainful employment… women leaving dangerously abusive relationships…women empowered to become effective decision-makers for themselves and their families.

As Kellyanne Conway, now a counselor to the President, once said, "Your trophy does not sit on a shelf . . .the trophy for your hard work plays on a swing, moves a tassel during a graduation ceremony, and yes even one day experiences the joy of motherhood."

One incredible aspect to Real Alternatives is the cost savings it provides for taxpayers. For instance, in fiscal year 2015-16, the taxpayer savings amounted to an estimated $317 million because more than 15,000 clients were receiving proper prenatal care. Add to that a tax savings of $106 million because of clients ensuring that their children received proper immunizations.

Pennsylvania's abortion totals are now at the lowest level recorded since the 1973 U.S. Supreme Court decision Roe v. Wade which legalized abortion on demand. Part of that success story has to be attributed to the milestones achieved by Real Alternatives.

The award-winning program has had a ripple effect throughout the country. As Real Alternatives President & CEO Kevin Bagatta stated, "If it wasn't for the keystone state – 14 states wouldn't have programs helping women and saving babies."

When he was governor of Indiana, Vice President Mike Pence had this to say about Real Alternatives' impact on the Hoosier state:

> **"Real Alternatives provides positive, life-affirming services for Hoosier women and families. It is important to not only ensure that pregnant women receive proper prenatal care, but also the emotional and physical support they need for a healthy pregnancy. Real Alternatives helps ensure that women in need are connected with all the community and social services resources available to them to support them both during and after their pregnancy."**

Since November of 2014, Indiana's Pregnancy and Parenting Support Program has served nearly 30,000 clients, according to Real Alternatives. CEO Bagatta adds that, tellingly, the number of Indiana residents obtaining abortions declined 9.62 percent in 2016.

Meanwhile, in Michigan, since June of 2014, the state's Pregnancy and Parenting Support Program has served more than 4,650 clients, with the resident abortion totals declining 2.5 percent last year, according to Bagatta.

Real Alternatives provides an important safety net to women and their families as they face the challenge of an unexpected pregnancy. Born in the Keystone State, it is an idea which should bloom and flourish throughout the U.S., according to a bipartisan group of Pennsylvania leaders.

"Hopefully, one day, there will be programs like Real Alternatives helping women and their children in all fifty states," said Pennsylvania Senate President Pro Tempore Joseph Scarnati.

"There are many important lines in the state budget. But there are not many lines that you can point to and say that every dollar we put into the program is saving lives. Real Alternatives and the work you do is important, and we are saving lives."

For more information about Real Alternatives' life-saving and life-changing program, visit www.realalternatives.org.

Putting Infants "Down like Dogs"

By Wesley J. Smith

The Charlie Gard tragedy has renewed public advocacy for legalizing infanticide. Writing in the *New York Times* early last month, Gary Comstock recounted the tragic death of his son, Sam, who was born with a terminal genetic condition. Many years later, Comstock believes that his son should have been killed instead of being taken off of life support:

> **It seems the medical community has few options to offer parents of newborns likely to die. We can leave our babies on respirators and hope for the best. Or remove the hose and watch the child die a tortured death. Shouldn't we have another choice? Shouldn't we be allowed the swift humane option afforded the owners of dogs, a lethal dose of a painkiller?**
>
> **For years you repress the thought. Then, early one morning, remembering again those last minutes, you realize that the repugnant has become reasonable. The unthinkable has become the right, the good. Painlessly. Quickly. With the assistance of a trained physician.**
>
> **You should have killed your baby.**

We should empathize with Comstock in his grief. But emotion must not tempt us to reject the venerable principles of human exceptionalism. Babies—even those with dire prospects—are precious human beings whose lives have intrinsic dignity and inherent moral value beyond that of any nonhuman.

Acceptance of Comstock's premise—that parents should kill babies who are "likely to die"—would be culturally catastrophic. It would lead to the legalization of murder. At Nuremberg, the German infanticide program was deemed a crime against humanity. Let's not abandon that wisdom.

The death of his son is not the only motive driving Comstock's advocacy. Comstock is a moral philosopher who rejects human exceptionalism and embraces animal rights and transhumanism. From his webpage:

> **Comstock's current project explores the central dogma of the humanities, that humans are singular among and superior to other life forms, a belief recent developments in the life and information sciences seem to call into question. . . .**
>
> **If we may no longer consider ourselves morally superior to all nonhuman animals, there is reason to wonder, too, whether cyborgs might one day be morally considerable. . . . If scientific advances in human self-understanding and developments in computer technology are in fact narrowing the presumed gap between the capacities of humans, animals and machines, dramatic implications for practical ethics follow.**

Judging by Comstock's *Times* column, it seems these "practical" implications include legalizing infanticide. Indeed, in my decades of work around issues such as euthanasia, utilitarian bioethics, animal rights, transhumanism, and other associated agendas, I have found that the more one rejects human exceptionalism, the more likely one is to declare that immoral and (still) illegal wrongs—like infanticide—are virtuous.

The evolutionary biologist Jerry Coyne is an even more vivid case in point. Coyne authors a blog titled "Why Evolution is True," where he extrapolates evolutionary theory into highly questionable conclusions of morality, philosophy, and ethics.

Using Comstock's pro-infanticide column as his launching pad, Coyne argues that if we can abort a fetus diagnosed with serious health issues, we should also be allowed to kill born babies with those conditions. He then makes the predictable claim that since we euthanize our sick pets, we should also be permitted to kill seriously ill and disabled babies:

> **Although discussing the topic seems verboten now, I believe some day the practice [infant euthanasia] will be widespread, and it will be for the better. After all, we euthanize our dogs and cats when to prolong their lives would be torture, so why not extend that to humans? Dogs and cats, like newborns, can't make such a decision, and so their caregivers take the responsibility.**

Coyne then brings in anti-human exceptionalism:

> **The reason we don't allow euthanasia of newborns is because humans are seen as special, and I think this comes from religion—in particular, the view**

See "Infants," page 23

Evil and the need to remember…always

By Dave Andrusko

> **"Thousands of medical ethicists and bioethicists, as they are called, professionally guide the unthinkable on its passage through the debatable on its way to becoming the justifiable until it is finally established as the unexceptionable."**
> — Richard John Neuhaus

There are many powerful pro-life quotations but none seems as apt and as application in so many areas as the late Fr. Neuhaus' admonition.

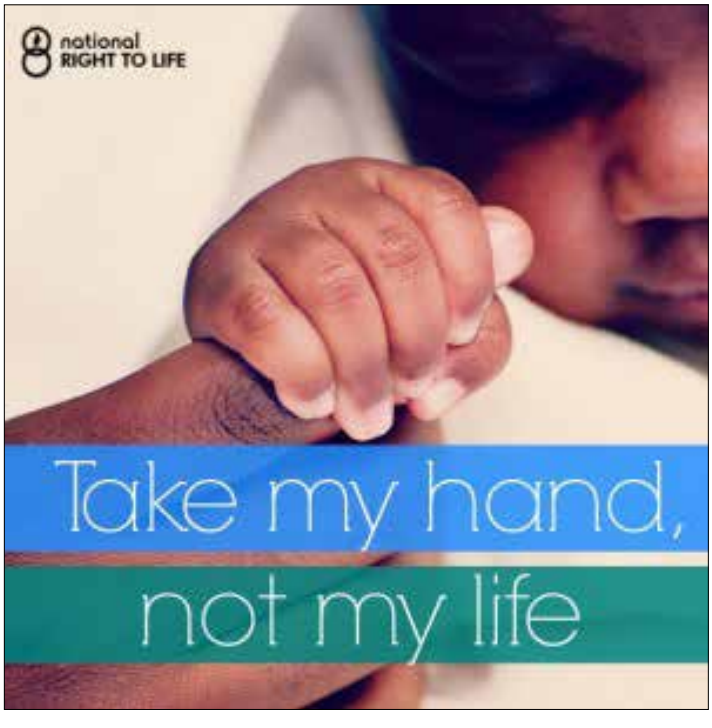
Remember when assisted suicide was for the "terminally ill"? Now not a day goes by that some "bioethicist" doesn't decide to add another category of defenseless people to the pool of those who can be escorted out of this life, with or without their consent, with or without clear evidence they are legally competent, and with or without a concern who is next.

I would like to take his astonishing insight to make a point about how this race to the bottom takes place. Consider what is happening to David Daleiden, head of the Center for Medical Progress.

His "reward" for exposing the sickening underbelly of Planned Parenthood's trafficking in fetal tissue (and entire organs) is to be attacked in state and federal courts. Now, the usual suspects are, of course, wanting to silence Mr. Daleiden. But it is service of the larger objective: to take people's attention away from the horrors of what the CMP documented.

I cannot stress enough how important that is. And I don't simply mean the famous observation about the "banality of evil," its routineness and the way what seem to be ordinary people come to be complicit in incomprehensibly evil actions.

If we forget it, we will lose our sense of righteous indignation. For many people—but not us—a shrug will replace a head shaking in disbelief.



We wrote about nearly all the CMP videos. I recall one in which Dr. Carolyn Westoff, Planned Parenthood's Senior Medical Advisor, exclaimed

> **"We've just been working with people who want particular tissues, like, you know, they want cardiac, or they want eyes, or they want neural. …Oh, gonads! Oh, my God, gonads."**

And in case anyone should ask

> **"Everything we provide is fresh."**

And there's Dr. Mary Gatter, president of the Medical Directors Council of PPFA, who casually discussed the possibility of using a "less crunchy [abortion] technique" to preserve intact baby organs.

And who can forget Dr. Deborah Nucatola talking about "crushing" where

> **"you try to intentionally go above and below the thorax, so that, you know, we've been very good at getting heart, lung, liver, because we know that, so I'm not gonna crush that part, I'm gonna basically crush below, I'm gonna crush above, and I'm gonna see if I can get it all intact"**

and

> **"with the calvarium [the skull], in general, some people will actually try to change the presentation so that it's not vertex [head first], because when it's vertex presentation you never have enough dilation at the beginning of the case, unless you have real, huge amounts of dilation to deliver an intact calvarium."**

And that's just for starters. We're already sick to our stomachs **before** we hear lab techs laughing and joshing as they manipulate to secure whole baby body parts, or listen to Gatter as she jokes, "I want a Lamborghini."

My point is a simple one. We must never allow pro-abortion ruses to take our eyes off what they do—unspeakable evil—and to whom they do it—the most defenseless among us.

Another dubious interpretation of Gallup's survey on abortion

By Dave Andrusko

As we've explained before Gallup annually conducts what it calls its "Values and Beliefs poll" which it then mines for the rest of the year. Each subsequent post builds on the previous one[s]. Suffice it say, some analyses make more sense than others.

The latest iteration is "On Abortion, Americans Discern Between Immoral and Illegal," by Frank Newport and Robert Bird which came out July 20 but which I just saw.

Let's quote their opening paragraph and then reflect on a prior post (dated June 9 and which we've already deconstructed) and consider what together they truly tell us.

It is complicated so please stay with me. (Spoiler alert. Newport and Bird go way overboard in what they conclude, as we will see momentarily.) They begin

> **Americans are often more likely to view behaviors as morally wrong than they are to advocate that these behaviors be made illegal. This underscores a general tendency for Americans to hesitate before deciding that banning an action is appropriate. As a result, one can come away with a somewhat different impression from looking at Americans' views of the morality of a behavior versus looking at their views of whether the behavior involved should be made illegal. …**
>
> **Abortion provides the most striking example of the disparity between these attitudes.**

The prior June 9 post written by Lydia Saad summarized views on when abortion ought to be legal (and under what circumstances) and what the public feels about abortion's morality. Let me address just two points from that analysis before moving onto to what Newport and Bird do with this and related data.

#1. Saad is correct when she looks at the numbers and concludes, "Thus, the slight majority of Americans (54%) favor curtailing abortion rights — saying abortion should be illegal or legal in only a few circumstances. Slightly fewer, 42%, want access to abortion to be unrestricted or legal in most circumstances." That is good news, good news which has been consistent over time.

#2. Saad writes, "Slightly more U.S. adults today believe the procedure is morally wrong (49%) than morally acceptable (43%). This has also been the case in most readings since Gallup started tracking this annually in 2001."

I would remind readers of an important point made in April when we discussed what Pew Research found when it asked about abortion and morality.

"More than four-in-ten Americans (44%) say having an abortion is morally wrong, while 19% think it is morally acceptable and 34% say it is not a moral issue," Michael Lipka and John Gramlich of Pew tell us.

What explains the huge difference? One is the question. Gallup's is more abstract: is abortion "morally wrong " or "morally acceptable"?

Pew asks is **having** an abortion morally wrong or morally acceptable. Almost two and one-half times as many people say **having** an abortion is morally wrong as say it is morally acceptable.

Back to Newport and Bird. The conclusion they want us to reach is that when push comes to shove pro-life people are less "consistent" than pro-abortion people.

They write

> **We combined data from the 2013-2017 surveys and found that almost half of Americans see abortion as morally wrong, with only 20% saying it should be totally illegal.**
>
> **"That means that almost three in 10 Americans have the combination of attitudes that is our primary focus: viewing abortion as morally wrong but at the same time believing it should remain legal (at least in some circumstances)."**
>
> **The other group holding contradictory attitudes — that abortion is morally acceptable but should be illegal — is very small (about 2%). Apparently, once Americans have decided that abortion is morally OK, there is little question in their minds that it should be legal.**

What other way–more consistent with reality, in my opinion–could you interpret these numbers? Pro-abortionist are more willing to draw out the extremist "logic" of their position.

If abortion is morally acceptable, why would you put **any** limitation on when an abortion could be performed? When it comes to the unborn child, they've already decided that there is no there there, to paraphrase Gertrude Stein.

Those who take a pro-life position believe abortion is morally wrong but a portion believe there are very rare circumstances—typically when the pregnancy is the result of rape or incest–when "abortion should be legal." This is not a position they embrace; it is one to which they come very reluctantly.

To return to the Pew numbers and why they are so significant. Gallup talks about abortion in a manner that distances the respondents from abortion–it's an almost academic inquiry.

Pew, by contrast, asks the respondent to take the important additional step of imagining **having** an abortion–taking the life of whomever it is you believe resides within a pregnant woman's womb.

Americans are much more pro-life and much less "inconsistent" than Gallup suggest.

Irish Health Minister prepares abortion legislation… before referendum is even confirmed

Editor's note. This comes from SPUC–The Society for the Protection of Unborn Children–and is reposted with permission.

Irish health minister Simon Harris has defended his decision to start drafting legislation that could legalise abortion, before the committee set up to examine the issue has reported.

A special Oireachtas [Parliamentary] committee has been set up to consider under what conditions, if any, abortion should be permitted if the Eighth Amendment [to the Irish Constitution], which protects the equal right to life of mother and child, was repealed.

However, health officials are already drafting laws, including a way to legislate for potential lawful abortions for rape victims without a conviction, to be ready for a referendum in summer 2018, the timescale indicated by Taoiseach [Prime Minister] Leo Varadkar. The committee is planning to start taking evidence in September.

Accelerating preparations

Mr. Harris said he had "great regard" for the committee, which is following the work of the citizens' assembly. "My department, in conjunction with the office of the attorney-general, is seeking to explore and research the issue so that, in so far as is feasible, as much preparation as possible can be drawn upon once the special joint committee finalises its recommendations," he said.

"I am concerned that we are prepared in the event that a decision is made by the Oireachtas to hold a referendum. This will be important if we are to complete the process in line with the timetable set out by the Taoiseach."

However, Mattie McGrath, an independent TD [member of the lower house of Parliament] and one of only two of the 21 on the committee in favour of keeping the Eighth Amendment, asked Mr. Harris if he was trying to accelerate preparations for a vote while it was carrying out its work.

Pro-choice activists have also been agitating for an early referendum, claiming that holding it in June or July, when many students are abroad on holiday, "would effectively mean disenfranchising thousands of young people."

A crucial decision

The significance of a referendum was highlighted when Mr. Varadkar dismissed UN criticism of Ireland's abortion laws. The UN committee against torture told the Irish government that it had a responsibility to explain to the public that if the state kept its constitutional ban on abortion, it would continue to breach the human rights of women.

Simon Harris has been accused of accelerating preparations for a referendum.

Mr. Varadkar responded saying: "One thing I would be very firm about is that whatever laws we have in Ireland, those laws should be determined by either the Irish people through a referendum or through the Oireachtas voting democratically."

Fair debate?

The news comes after Irish pro-life organisation Youth Defence had some of their information boards seized by gardai (police) in Kilkenny, during their annual roadshow.

Spokeswoman Rebecca Roughneen told the *Irish Independent* that the event has left Irish pro-lifers concerned that they won't get a fair debate during the referendum.

"It was a very peaceful street event which was attracting a lot of support since the referendum is in the news so much these days, and everyone is very concerned in regard to what happened," she said. "This has very serious implications for a free and fair debate ahead of the referendum on abortion expected in spring."

Federal Judge Strikes Alabama's Parental Consent law

By Dave Andrusko

At the end of July U.S. Magistrate Judge Susan Russ Walker struck down portions of Alabama's parental consent law on the grounds that the 2014 changes to the law, first passed in 1987, impose an "undue burden" on a minor seeking an abortion.

Like all consent laws, Alabama's law requires minors who can't secure parental consent for their abortion to go to court for permission.

According to the *Catholic News Agency*

> **The 2014 law modified the process to allow a judge to appoint a guardian "for the interests of the unborn child." The law allows the local district attorney to call witnesses and question the girl to determine her maturity level. If the minor's parents or guardians learn of the hearing they may also be involved.**

The state of Alabama defended the law, arguing it allows a meaningful inquiry to judge the minor's maturity

U.S. Magistrate Judge Susan Russ Walker

while providing a "confidential, and expeditious option for a teenager who seeks an abortion without parental consent."

The intent was to end the practice of judicial "rubberstamping" of requests made by minors. State Rep. Mike Jones was the author of HB 494.

At the time Rep. Jones issued a statement in which he said, "This act clarified previous law to provide judges and court officers with much-needed guidance on the procedures for these types of determinations, which are very important to the health and well-being of our minors, all while keeping proper safeguards in place to protect their privacy."

He also told the *Daily Caller* "This law ensures that if a minor is seeking an abortion without parental consent, they fully understand the ramifications of their decision and prove that they are wholly aware of its impact – it's that simple."

Jones added. "This act clarified previous law to provide judges and court officers with much-needed guidance on the procedures for these types of determinations, which are very important to the health and well-being of our minors, all while keeping proper safeguards in place to protect their privacy."

But federal judge Walker brushed all this aside in a 54 page decision.

> **"The judicial bypass option is rendered meaningless if, as in Alabama's bypass statute – which has no counterpart in any other state bypass law – parents or legal guardians can participate as parties under some circumstances, and if there are insufficient safeguards to protect the anonymity of the minor petitioner. ..These are cornerstone requirements for a judicial bypass law to pass constitutional scrutiny."**

According to the *Associated Press*, "The Alabama attorney general's office said it is reviewing the decision."

Putting Infants "Down like Dogs"

From page 19

> **that humans, unlike animals, are endowed with a soul. It's the same mindset that, in many places, won't allow abortion of fetuses that have severe deformities. When religion vanishes, as it will, so will much of the opposition to both adult and newborn euthanasia.**

Contrary to Coyne, human exceptionalism need not rely on religion to demonstrate its validity. But here's the germane point: To reject human exceptionalism is essentially to claim that we are just another animal in the forest, which leads to the logical conclusion that killing should be an allowable remedy to illness and disability. This view has already infected the Netherlands, where babies born with serious disabilities and terminal conditions are allowed by winked-at practice—not law—to be killed by doctors.

Many no longer believe that human life has ultimate, objective value simply because it is human. With human exceptionalism cast aside, our new prime directive is to eliminate suffering, and eliminating the sufferer is now advocated in high places as a moral good rather than a pernicious harm. As a result, dying and disabled babies are in mortal danger of consignment into a killable caste that can—literally—be put down like dogs.

Editor's note. Wesley's column appeared at "First Things" and is reposted with permission.

Bogus complaints about pro-life billboards tossed out

By Dave Andrusko

Pro-abortionists are notoriously bad winners–see any of the dismissive comments they make when a federal judge strikes down legislation enacted by the people's representatives–but are even worse losers.

The following is one of those stories that could only happen because the anti-life crowd is also virulently anti-free speech.

The Northern Ireland pro-life group "Both Lives Matter" put up a billboard that read

100,000 people are alive today because of our laws on abortion. Why change that?"

This is an allusion to the never-ending campaign to scuttle Northern Ireland's protective abortion laws.

Predictably The Advertising Standards Authority (ASA) said it received 14 complaints. Complaints about what, you might ask?

That the advertisement was misleading and that the 100,000 saved lives figure couldn't be substantiated, according to the *Belfast Telegraph*.

Note the initial irony. Pro-abortion advocates never cease to complain about how "draconian" Northern Ireland's abortion laws are and the ensuing "unmet need" for abortion–meaning unborn lives are being saved in large quantities. Anyway….

The ASA threw out the complaints. It said in a statement

"On balance, we concluded that the evidence indicated that there was a reasonable probability that around 100,000 people were alive in Northern Ireland today who would have otherwise been aborted had it been legal to do so.

"Because we considered that readers would understand the figure to represent an estimate, we concluded that the claim was unlikely to materially mislead readers."

"Our opponents said we could not substantiate the claim, despite us producing a robust report," said Dawn McAvoy from Both Lives Matter (BLM). "The ASA have examined our calculations and backed our figure."

McAvoy added

"Their expert concluded that it is reasonable to say that 100,000 people are alive today who would have otherwise been aborted had it been legal to do so.

"This independent verification is a real endorsement of our campaign."

How did BLM come to its 100,000 saved lives figure? The 1967 Abortion Act which is a hugely permissive law in Great Britain, does not apply to Northern Ireland. And because of this, babies who would otherwise have been aborted were not killed.

Specifically, BLM "provided a link to a report it had published on its website, outlining the methodology it had used to arrive at the figure, which considered the abortion rates in other parts of the UK," the *BBC* reported.

So how did pro-abortionists respond? By changing the subject. "When we talk about 100,000 pregnancies, we don't talk about 100,000 women," said Fiona Ferguson from the People Before Profit party which had "concerns" about the billboard.

Ferguson then went into the typical pro-abortion rant about women being "forced to give birth against their will because they weren't able to travel to England," "pregnancies resulted in disabilities or shortened lives," and the like.

Not, you understand, that the 100,000 figure was not a plausible estimate. Rather the complaint was that the advertisement did not include pro-abortion talking points.

Another recycled celebration of a pro-abortion "pioneer"

By Dave Andrusko

Come an anniversary, the publication of yet another pro-abortion rehash of the "history of abortion rights," a partial eclipse of the sun, whatever it takes, large or small, we can be sure that journalists will find a reason to periodically celebrate pro-abortion "pioneers."

Of course those laudatory profiles no longer include Dr. Bernard Nathanson, co-founder of the predecessor to NARAL Pro-Choice America, or Norma McCorvey, the "Roe" of *Roe v. Wade*. Both were converts to the pro-life side. Thus they have been airbrushed out of the glorious history of "abortion rights" just as politicians no longer in favor used to be expunged from official Soviet portraits.

This all came to mind when I ran across a piece that appeared in *City Pages*, a small publication in my home town of Minneapolis. Its lament was captured in the headline–"How hospitals outsourced America's abortion controversy"–to Mike Mullen's story but its real objective was (yet again) to celebrate the wonderfulness of the late Minnesota abortionist Jane Hodgson.

She is a favorite for many reasons. The legend of Jane Hodgson is that this "mild mannered woman" was radicalized by the plight of pregnant women pre-*Roe v. Wade*, going from opposing abortion to become a staunch champion of reproductive rights.

Her fate as a pro-abortion heroine was sealed when she became (as the *New York Times* put it) "the first American doctor charged for an abortion performed in a hospital." She knew she would be charged; Minnesota's abortion law in

Abortionist Jane Hodgson

1970 was, like most state's, very protective.

Hodgson shrewdly chose to challenge the laws by aborting a woman who had contracted rubella during her pregnancy. There was built-in sympathy; babies whose mothers had rubella (German Measles) could be born with very serious birth complications.

She received a minor punishment that was put on hold pending appeal. When *Roe v. Wade* was handed down, her conviction was overturned. She never served a day in jail and took up a "second career" as one of the most familiar faces of the pro-abortion movement.

"For 30 years Hodgson was a lead plaintiff or expert witness in numerous court battles," Mullens writes. "She sided against laws mandating the consent of parents for minors seeking abortions," to name just one example.

If anything more were needed to ensure her place in the pro-abortion Pantheon, we learned from the *New York Times'* Margalit Fox's 2006 Hodgson's obituary that "When she was well into her 70's, Dr. Hodgson continued to make the 150-mile weekly trip from St. Paul to Duluth, Minn., to perform abortions at a clinic she had helped establish there."

Here are a few quotes that give you the flavor of Hodgson's view on abortion.

> **"In my medical judgment, every pregnancy that is not wanted by the patient, I feel there is a medical indication to abort a pregnancy where it is not wanted. In good faith, I would recommend on a medical basis, you understand, that, and it would be 100% … I think they are all medically necessary … Occasionally we will advise these women to carry their pregnancy to term, but most of these are medically necessary because I am considering the woman's physical, mental, emotional and social and welfare and family and environment and all that … I am concerned with the quality of life, not physical existence." …**
>
> **"A medically necessary abortion is any abortion a woman asks for." …**
>
> **"Is adolescent pregnancy a disease? We have laws regarding other epidemics. We have mandatory immunizations, but we have no law prohibiting motherhood before the age of 14 in our supposedly-civilized society. We ought to mandate against continuing pregnancy in the very young say, those less than 14 years."**

But perhaps the most revealing is this from the book "Doctors of Conscience" by Carole Joffe.

> **"I think in many ways I've been lucky to have been part of this. If I hadn't gotten involved, I would have gone through life probably being perfectly satisfied to go to the medical society parties and it would have been very, very dull.**
>
> **"I would have been bored."**

Have you purchased your 2017 NRLC Convention CDs and MP3s yet?

By Dave Andrusko

The depth and breadth of the resources available from NRLC 2017 is truly amazing. NRLC's annual convention hosted 66 workshops, five general sessions a Friday morning Prayer Breakfast, and a Saturday evening closing Banquet. And that doesn't even count 14 teen workshops where the next generation of pro-life leaders sharpened their skills and deepened their commitment to unborn children and their mothers.

You can purchase some or all of these resources, either as MP3s or CDs.

An individual CD is $8. And individual MP3 is $5.00. A complete set of either is $400. An entire set of MP3s on a USB drive is only $250.

To order MP3s selections, go to http://shop.nrlchapters.org/Convention-Recordings_c9.htm

To order CDs, go to http://nrlconvention.com/wp-content/uploads/2017/07/2017-CD-Order-Form.pdf

Once you've perused the list, be sure to alert your pro-life friends and family. They, too, will likely want to be "part of the action" that took place June 29-July 1.

We know that only a tiny fraction of the millions of prolifers can attend National Right to Life's annual convention. That is why the convention goes to such lengths to make sure you have the next best thing to physically being present in Milwaukee.

A hysterical pro-abortion rant against Democrats' pretense they don't have an abortion "litmus test"

By Dave Andrusko

Lindy West is a recent addition (July 1) to the stable of *New York Times* opinion writers who are so far out to sea they make Hillary Clinton and Bernie Sanders look like Republicans. Let me confess: I am old enough to remember the days when although I thoroughly disagreed with the *Times* on virtually everything, I sort of admired the caliber of their writing and ability to turn a phrase.

But now…

Not to put too fine a point on it, everything West writes SHOULD BE IN ALL CAPS. It is not an exaggeration to say that her columns read as if she has cobbled together her ugliest tweets and in lieu of editing was told by her editors to "go for it."

Her background for becoming "the feminism and popular culture contributing opinion writer for *The New York Times*"? According to Wikipedia, "She was a staff writer for Jezebel where she wrote on racism, sexism, and fat shaming."

So the last thing you would expect is cool reason and an appeal to common norms. And your expectations would be fulfilled, judging by her first two *Times'* musings.

Her most recent column is titled "Of course Abortion should be a litmus test for Democrats."

The genius, in a manner of speaking, of writers such as West is that what they pen is such a mishmash of free-association impulse that it is silly to even try to debunk it in detail. It's just venom, mixed with disgust, and baked in hatred for the usual pretend suspects–knuckle-draggers and White Supremacists.

West's exaggerated sense of grievance–it is clear that virtually everything and anyone not associated with her brand of identity politics on steroids sends her over the edge–was stoked when Ben Ray Luján, chairman of the Democratic Congressional Campaign Committee, told *the Hill*, "There is not a litmus test for Democratic candidates." Adding insult to injury, Luján also said, "As we look at candidates across the country, you need to make sure you have candidates that fit the district, that can win in these districts across America."

We wrote about this–"Time again to pretend Democratic Party does not have an abortion 'litmus test' for candidates." In one paragraph, here was my take.

It is preposterous to think that even if the Democratic leadership were to fund pro-life candidates in an attempt to win the House of Representatives, never in a blue moon would

Lindy West

they allow that handful of pro-lifers to have even a scintilla of influence on the party's agenda. Democrats might fund vaguely pro-life candidates but they would be expected without question to support and promote the party's agenda of abortion on demand, at home and around the world, using your and my tax dollars.

So with this obvious truth in mind, what deep, dark impulse led West to write

> **What kind of cringing, bewildered invertebrates roll over and capitulate to the losing side of a debate at a time when they've never had more leverage?**

Quickly: (1) West knows that the party is in a deep hole. Her solution is to dig deeper. Her advice is to separate a party that lost the last presidential election because it was completely out of touch with Middle America even further from the people they need to compete. Her op-ed ends, "Come on, Democrats. Be something. Unite and move left. The center will follow or lose."

(2) Even an insincere profession of making room for pro-lifers suggests "anti-choicers" are not one of the main components of the "basket of deplorables," the characterization Clinton assigned to half of Donald Trump's supporters. Never forget, the more people like West attribute ugliness to others, the more this liberates them to say and write the most horrible things about people who disagree with them.

West should not worry for a nanosecond. Her party has one use and one use only for pro-lifers: a lever to help them take back the reins of power and then to discard as quickly as possible.

Three-judge panel hears challenge to Tennessee's pro-life "Amendment 1"

By Dave Andrusko

In 2014, Tennessee voters added "Amendment 1" to the state Constitution. The key wording was in the beginning: "Nothing in this Constitution secures or protects a right to abortion or requires the funding of an abortion." Eight voters, including a board chair of Planned Parenthood of Middle and East Tennessee, challenged the process by which votes were tabulated and which resulted in Amendment 1 passing 53% to 47%.

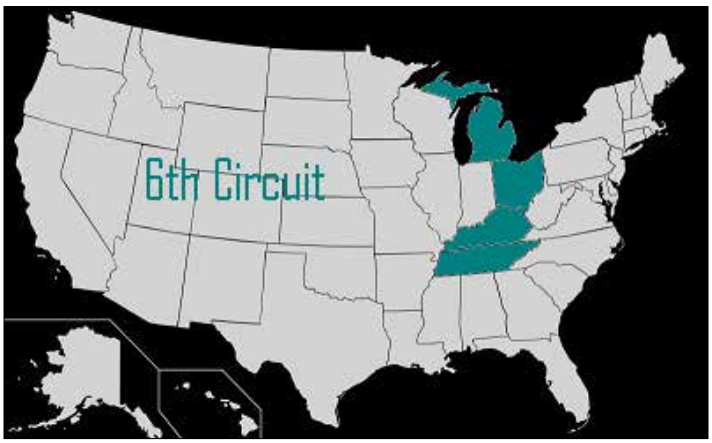
The process was upheld on April 21, 2016 by Circuit Court Judge Michael Binkley who said the language for how votes for amendments should be counted is "unambiguous."

However, subsequently, federal judge Kevin Sharp agreed with the plaintiffs and ordered a recount. That decision has been on hold for a year

On August 2, a three-judge panel of the Sixth Circuit Court of Appeals heard the challengers' arguments.

Judge Brinkley wrote "Article XI, Section 3, (of the Tennessee Constitution) does not restrict or precondition the right of a citizen to vote for or against a constitutional amendment upon that citizen voting in the gubernatorial election." The issue before the panel was not whether the votes were counted in a way different than they had been traditionally but rather whether that the method was unfair, as Judge Sharp concluded it was.

Specifically, under the Tennessee Constitution the universe of voters who count



for purposes of ratifying a proposed constitutional amendment is a majority not of all voters voting but a majority of all those voting for governor.

Put another way, "State election officials have long interpreted the language [in the state Constitution] to mean that passage of an amendment depends on comparing the number of votes cast for governor with the number of votes cast for an amendment," according to Anita Wadhwani of the *Tennessean*. "To succeed, an amendment must get a majority of the number of votes cast for governor."

Plaintiffs maintain that all votes in favor of the amendment should be counted regardless of whether or not those voters also voted for governor.

Moreover, "The lawsuit alleged the vote tabulation method was 'part of a 'coordinated scheme' that 'incentivized proponents of Amendment 1 to forego their own right to vote in the governor's race so as to add 'yes' votes without increasing the number of votes needed to surpass a majority of votes cast in the governor's race," according to reporter Kevin Koeninger of *Courthouse News*.

In asking the panel to lift the injunction granted by Judge Sharp, Attorney Sarah Campbell said that the state "did exactly what the Tennessee constitution requires" when it tabulated the votes and passed the amendment.

Campbell noted there were "no allegations of voter intimidation … or stuffing the ballot box," adding "that even if a state law violation occurred, it does not rise to the level of 'fundamental unfairness' required to plead a federal due process claim," Koeninger reported.

Judging by media accounts, the judges asked pointed questions of both sides.

For example, according to Wadhwani, they

> **expressed skepticism at a system that would require voters to cast a ballot in one race for it to count in another.**
>
> **What about voters who "for whatever reason, chose not to vote for governor?" [Judge David] McKeague asked.**
>
> **"What the district court has done is compelled voting," [Judge Ronald] Gilman said.**

The ballots were preserved "a recount is possible by hand under the method sought by plaintiffs," Wadhwani reported.

Wadhwani concluded, "Both sides have the option to appeal any ruling to the U.S. Supreme Court."

Pro-abortionists resolute that abortion is trouble-free and devoid of complications

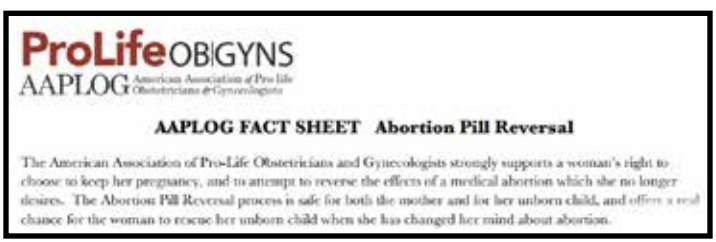
By Dave Andrusko

I suppose to ask the question is to answer it but still… Why do pro-abortionists come absolutely unhinged when the case is made that chemical abortions can be halted, provided the woman does not take the second of the two drugs that make up the chemical abortion regime ("RU-486" for short)?

Why must abortion reversal be (in their opinion) not just ineffective but dangerous?

These questions came to mind as I read, "Abortion 'reversal': the latest sham from anti-choice activists trying to end women's rights," written by Renee Bracey Sherman and Daniel Grossman and published in the *Guardian*.

One obvious answer is money. The last Guttmacher Institute report concluded that for the year 2014, almost a third of the abortions performed (about 29.4% of the total) were chemical abortions (or, as Guttmacher likes to call them, "early medication abortions"). That was an increase of almost 14% in three years and no doubt the percentage is even higher now.


ProLife OB|GYNS
AAPLOG American Association of Pro Life Obstetricians & Gynecologists

AAPLOG FACT SHEET Abortion Pill Reversal

The American Association of Pro-Life Obstetricians and Gynecologists strongly supports a woman's right to choose to keep her pregnancy, and to attempt to reverse the effects of a medical abortion which she no longer desires. The Abortion Pill Reversal process is safe for both the mother and for her unborn child, and offers a real chance for the woman to rescue her unborn child when she has changed her mind about abortion.

Even for the likes of the $1.3 **billion** Planned Parenthood, which bills itself as a "non-profit," that is serious money.

Another answer is that it is an article of pro-abortion faith that anything that puts the slightest bump in the road leading to abortion must be "junk science." It **has** to be or else women (and girls) might question whether abortion is good for anyone, their babies or themselves.

Which is why right out of the box Sherman and Grossman write, "For years, the anti-abortion movement has popularized the myth that patients regret their abortion, or are somehow coerced into having the procedure before they are ready."

This is a "myth." That unborn children by the 20th week will feel excruciating pain as they are torn apart is a "myth." It's a "myth" that parents have any useful contribution to make to their minor daughter's abortion decision.

It's a "myth" that the use of sharp instruments in the area of a woman's reproductive organs the abortionist is associated with an increase in premature and very premature births.

It's a "myth" that there is a clear association between having an induced abortion and increasing the risk for breast cancer, although the biological basis for that conclusion is obvious.

And so on and so on.

Pro-abortionists **must** deny that there are any negative aftershocks–physical, psychological, or emotional–from abortion. To admit even one is to concede that killing your unborn child may not be the trouble-free "solution" the Abortion Industry advertises it to be.

And that could spell serious trouble.

The NRL Academy: A five-week adventure in learning how to make the case for life

From page 1

how to deal with the press; Fetal Pain, Ad Campaigns, Fundraising; US Government Funding of Overseas Abortion; Electioneering, and much, much more.

The students then had to apply what they learned during the incredibly difficult but entertaining practicums (sessions when students demonstrated what they had just learned) where they would demonstrate what they had learned. This year's students had to create (working as a group) an ad campaign with a $5,000 budget to promote a life affirming message.

On another occasion, they had to create a Social Media meme with a strong, catchy, and timely message. Here is their meme:

Lectures were given and presented by some of the most august leaders of the pro-life movement. They learned about the Supreme Court rulings from James Bopp, Jr. Dr. David Prentice Lectured on Cloning and Reproductive Research, and Wesley J. Smith gave lectures on Euthanasia, Infanticide, and Assisted Suicide.

They heard from some of our experts such as Dr. David N. O'Steen, NRLC Executive Director, Scott Fischbach of MCCL, pro-life author Brian P. Johnston, and Jennifer Popik, J.D., NRLC's Federal Legislative Director, with an emphasis on issues regarding healthcare and involuntary denial of treatment.

But they also had to prove their mettle by defending their positions during debates, or by lobbying a tough legislator (a make-believe legislator) as the lawmaker walked from an elevator to the bathroom. The practicums were so necessarily intense that during his closing remark at the closing banquet for the students, Academic Director, Dr. Randall K. O'Bannon, joked that practicum was the Latin word for torture.

It was during the practicums, however, when we saw how each student's personality helped to shape their argument. The students brought a much-varied skill-set with them – all of which were interesting and appreciated. When on the first day, during that first practicum they were asked to explain why they were pro-life, their backstories proved to be touching, funny, and sad.

The most simply stated of those stories happens to be the most memorable.

Conor Michael Clement from Reno, Nevada, when asked why he was pro-life, plainly said, "Because I have a little brother."

As a ten-year-old boy, Conor overheard enough of his pro-life activist's parents' conversations to ask what abortion was finally. He told us about the pained look on his mother's face and the reassuring glance she got from his dad that maybe it was time to explain in ten-year-old terms what abortion was.

They were driving home from church when this conversation took place, and he happened to be sharing the backseat with his little brother – an infant at the time. He projected what his mother had explained on how that could happen to his brother and instinctively knew how wrong it was.

During his presentation to the Academy he spoke eloquently and beautifully about how he felt that day looking at his sibling, staring down into his brother's blue eyes, and soft wisps of hair – he couldn't fathom anyone willingly destroying this human being.

It was beautiful to hear, and it helped set the course for Conor's Academy experience.

As always, it was remarkable to see how the vast majority of Academy students grow from the intensity of the experience. Those of us who bring the Academy to fruition each year are appreciative for the breath we can take now that it's over – but we do miss the challenge and the opportunity to watch these future pro-life warriors grow.

Hawaii to Force Pro-Life Pregnancy Centers to Advertise Free Abortions

By Jay Hobbs

All five of Hawaii's prolife pregnancy centers will be forced to choose between advertising free abortions and defying the state's demands starting Wednesday, after Gov. David Ige allowed a mandatory disclaimer bill to become law.

Mirroring a 2015 California law, Hawaii's edict forces locally funded pregnancy centers to post and distribute to each client a notification that the state offers free abortions, as well as a website link on where and how to schedule a taxpayer-funded abortion.

The mandated signage and disclaimer form must include the following verbiage:

This clinic does not provide abortion services or abortion referrals. Only ultrasounds performed by qualified healthcare professionals and read by licensed clinicians should be considered medically accurate.

Hawaii has public programs that provide immediate free or low-cost access to comprehensive family planning services including all FDA-approved methods of contraception, prenatal care, and abortion for eligible women.

To apply for medical insurance coverage that will cover the full range of family planning and prenatal care services, apply on-line at mybenefits.hawaii.gov.

Unlike abortion businesses, the state provides no funding for the pregnancy centers it targets with the law.

Pregnancy centers found out of compliance could be slapped with a $500 citation for a first-time offense and a $1,000 per-offense fine for subsequent refusal to advertise abortions. The law also opens noncompliant centers up to individual civil suits.

"Hawaii's pregnancy help organizations are delivering caring, compassionate help for women and families at absolutely zero cost to the state's taxpayers," Jor-El Godsey, president of Heartbeat International—an affiliation network that includes three Hawaiian centers—said. "No woman should ever feel so alone or trapped that she feels abortion is her only option, but this is exactly the situation laws like these create."

"Failure is Not an Option For Us"

Out of the five pro-life pregnancy centers in Hawaii, one center—A Place for Women in Waipio—is a direct outreach of a church, located on the campus of Calvary Chapel Pearl Harbor. All the centers are operated and funded by Christians who have formed the organizations as life-affirming alternatives to abortion.

National pro-life groups National Institute of Family & Life Advocates (NIFLA), Alliance Defending Freedom (ADF) and the American Center for Law and Justice (ACLJ) are all three planning to challenge the law in state and federal courts, contending for free speech and free exercise of religion rights on behalf of the centers.

The groups' challenges in court are tied to an ongoing challenge to the California law thatcould be headed to the Supreme Court as early as this fall. The Ninth Circuit Court of Appeals—which covers both Hawaii and California—upheld California's law in October of 2016, so it's unlikely the law would be stopped there.

"Like the California law, this law violates the fundamental constitutional rights of freedom of speech and freedom of religion," NIFLA president Tom Glessner wrote to supporters Tuesday. "The matter is clear—if we win our case against California at the Supreme Court, then we will also win the Hawaii case. Failure is not an option for us."

In addition to the law in California and the bill in Hawaii, the state of Illinois gutted its Healthcare Right of Conscience Act in 2016 to allow all pro-life medical professionals—including those at pregnancy centers—to be liable to civil penalties if they refuse to counsel on the so-called "benefits" of abortion and refer their patients directly to local abortion businesses.

A judge has granted a preliminary injunction for three pregnancy centers in Illinois that pro-life advocates hope will set the stage for a larger victory in that state. ADF, the Thomas More Society, and others have all filed lawsuits challenging the mandate.

Past attempts by local authorities to compel pro-life pregnancy centers to post signage either declaring the services they do not offer or referring patients—even indirectly—to abortion providers have been struck down in New York City, Austin (TX), Baltimore (MD) and Montgomery County (MD), the latter of which cost taxpayers over $330,000 in attorney's fees.

In late June, the Ninth Circuit—which sees as many as eight of its 10 decisions reversed by the Supreme Court—upheld a San Francisco municipal law that allows the City to determine which pro-life statements it considers "false advertising."

See "Hawaii," page 35

Genetic "counselor" prevents abortion minded women from seeing sonograms

By Sarah Terzo

Genetic "counselors" are medical personnel that walk women and their partners though testing (usually amniocentesis) to see if their unborn babies have a genetic illness or disability. If a woman is at risk for having a baby with a disability, or if they already know that they are pregnant with one, these genetic counselors are supposed to be unbiased in helping them decide whether or not to abort. In reality, there are subtle ways that this type of "counselor" can influence a woman's decision.

From one genetic counselor [Felicia Arcana]:

> **As a counselor, I consider it my job to accompany my patients to everything. The sonographer here at City is a right to lifer. When he knows someone has a positive diagnosis, that they are going to abort, he hands them a photo of the fetus. Imagine being forced to take it, to take that picture, when you know the pregnancy is Down's, you know you're going to abort!**

Abortion proponents and providers know the power of ultrasound, and many of them have the desire to shield women from seeing the truth about their unborn babies. Clearly, this activist doesn't want the woman to be swayed against abortion.

One might think that a woman would want (and a medical professional provide) every single bit of information she can get about her own body and her pregnancy that affects her health and future. But abortion proponents encourage women to make these decisions without seeing their babies on an ultrasound and knowing the development of their child.

Even if a woman is reluctant to see an ultrasound of her baby, what happens when years down the line she becomes pregnant again, sees that ultrasound, and realizes that the "product of conception/tissue/collection of cells" that she aborted has a face and hands, and little arms and legs? Isn't it better to know all the facts when one still has a choice? Because many women discover the truth about how developed their babies were when it is too late for them to take back their abortions. Sadly, I have read many such stories and testimonies.

Not only does this counselor believe that women shouldn't get all the relevant information before having an abortion, she does not trust women's ability to make decisions for themselves--including the decision of whether or not to accept and look at picture they are offered.

Source: Rayna Rapp,"Testing Women, Testing the Fetus: the Social Impact of Amniocentesis in America" (New York: Routledge, 1999) p. 67.

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

Abortion Advocates Wary of New Artificial Womb Technology

From page 8

been interpreted to claim that "a woman has a right to stop carrying a child," it does not consider "whether she also has a right to control what happens to the child if she is no longer responsible for carrying it."

The question Brown and Cohen appear to be asking is whether a woman's "right" to have the baby removed from her womb [traditionally by an abortion] also entails a right to decide whether that baby is given a chance to live.

As Cohen put it in a recent article for the *Hastings Center Report* (July 27, 2017), "How would an artificiall womb inflect the state's ability to regulate pregnancy under existing law?"

If it becomes possible for the mother to abort with a method that leaves the baby alive and intact (by something that Cohen speculates might be "minimally invasive surgery beginning at 18 weeks"), can a mother then refuse to allow her baby to be put into an artificial womb where the child could further develop for a few more weeks and be "born" healthy?

Brown sketches out what is for abortion defenders a looming legal and ethical dilemma and notes how doctors, bioethicists, and lawyers "have long taken issue with viability as a standard for legality."

This new technology just further exposes the problematic nature of their premises.

The child's being alive has always been a problem for abortion's defenders. "There have always been problems with this standard," Cohen told Brown gloomily. "But now there's reason to believe it could get even worse."

What might have happened if Connie Yates and Chris Gard had prevailed?

From page 2

"But we have refused, and I always will. Now he opens his eyes and yawns occasionally, and he's grown teeth while in there, changing from a baby to a toddler."

Alfie's condition is a mystery. He's been in a coma in the hospital's intensive care ward since last December, reporter Tom Belger of the *ECHO* tells us, and he suffers regular seizures. But staff cannot figure out why.

Like Connie Yates and Chris Gard, Tom Evans and Alfie's mother Kate James want to take their son overseas for therapy.

Like Connie and Chris, they are fundraising to come up with the money.

But unlike Chris and Connie, Tom and Kate are receiving better responses to their request for medical treatment. More than a dozen American hospitals say they might be able to help.

"I'm pleading for help from anywhere now," Tom told Berger. "I've been getting in touch with lots of hospitals, and I've had a particularly positive response from one in Miami, which has received Alfie's details."

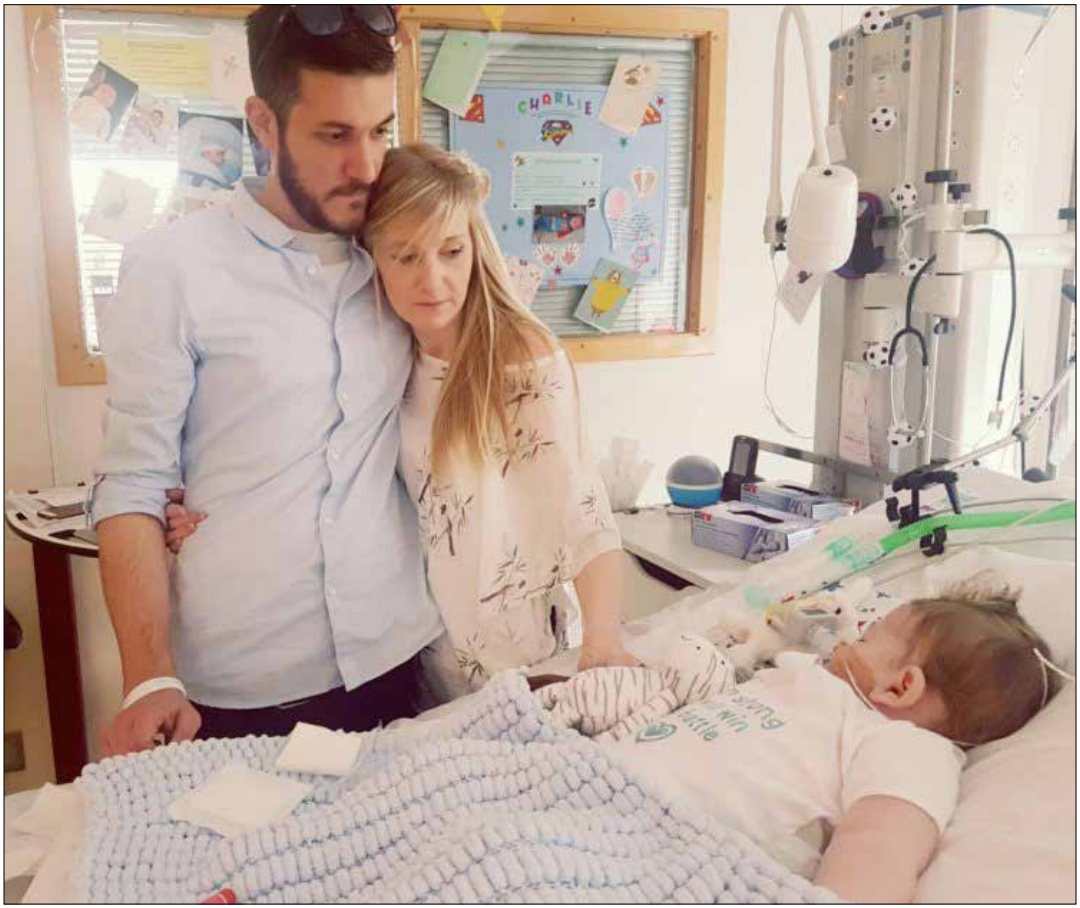
So far, Berger explains, the couple "has not yet faced a court battle and are hopeful it will not come to that."

What has this to do with the response of GOSH and Justice Francis to Connie Yates and Chris Gard? Supremacy.

In England, and many other places in Europe, when it comes to treatment decisions for their children, the wishes of parents come in a distant second to the decrees of the Medical and Legal Establishments .

A win for Charlie, or for Alfie, could set a dangerous precedent --from the perspective of these powerful institutions. They would not have the first, middle, and last word.

And few--very few--ever give up power without a struggle.



(Photo: Featureworld)

Abortion-Expanding Obamacare to Remain Law for Now

By Jennifer Popik, J.D., NRLC Federal Legislative Director

In the early hours of Friday morning, in a stunning blow, 3 Republican Senators, Sen. Susan Collins (R-ME), Sen. Murkowski (R-Ak), and Sen. John McCain (R-AZ), joined with all of the Democrats ending the current attempt to move away from the abortion-expanding Obama Health Care law.

The so-called "skinny bill" would have defunded abortion giant Planned Parenthood for one year and would likely have gone to conference where further pro-life modifications might have been made.

While there have been numerous stops and starts, Congressional Leadership and the White House have both signaled that they would like to move on to other items for the short term.

National Right to Life is deeply disappointed at this missed opportunity to begin rolling back Obamacare with its multiple provisions authorizing federal subsidies for abortion insurance, multiple provisions allowing abortion-expansive federal mandates, and multiple provisions that will result in involuntary denial of life-saving medical treatment by placing unacceptable limits on the right of vulnerable Americans to obtain health insurance that is less likely to ration treatment.

National Right to Life has worked closely with Congressional leaders and will continue to do so.

Prior to the failure of the Repeal Bill this morning, National Right to Life supported several items, sending letters to Senate offices concerning:

- The motion to proceed to the House-passed 1628 which began debate on repealing Obamacare. This was successful by a vote of 51-50, losing Sen. Collins, Sen. Murkowski, and all Democrats. Vice President Mike Pence cast the tie-breaking vote.

- Amendment no. 271 from Sens. Rand Paul (R-KY) and Mike Enzi (R-WY) on "Repeal only." This amendment contained strong Hyde language. The vote on "Repeal only" failed by a vote of 45-55 with 7 Republicans and all Democrats voting against the measure.

- Amendment no. 389 from Sen. Luther Strange (R-Al.) which would extend Hyde Protections to the Senate Bill's Tax Credit provisions. Because this measure did not have a cost-estimate it was held to a 60 vote threshold, and did not pass. Every Democrat, along with Sen. Collins and Sen. Murkowski, voted against the measure. Even so, this amendment received a strong Republican showing.

- Amendment no. 502 from Sen. Dean Heller (R-NV) to eliminate the "Cadillac tax." This tax is designed to create a tax disincentive to suppress private, nongovernmental health care spending beyond a governmentally-imposed limit. The "Cadillac tax" was postponed in both the House-passed version as well as early Senate versions. The measure passed by a vote of 52-48.

Pro-life Rep.Scalise released from hospital, "intensive inpatient rehabilitation" next

By Dave Andrusko

On July 25, six weeks after he was shot while practicing for a charity softball game, pro-life House Majority Whip Steve Scalise was released from MedStar Washington Hospital Center to an unclosed location for "intensive inpatient rehabilitation."

Scalise was the most seriously hurt of five people injured June 14 when a man opened fire. "The 51-year-old congressman was struck in the hip, and the bullet tore into blood vessels, bones and internal organs," KWCH reported. "He has had several surgeries."

The others who were hurt included two members of the Capitol police force– Crystal Griner and David Bailey– Zach Barth, a congressional aide to Texas Rep. Roger Marshall, and Matt Mika, lobbyist for Tyson Foods and a former congressional staffer.

When he was first admitted, the hospital said Scalise was at "imminent risk of death." After making progress, on July 5, he was readmitted to the intensive care unit because of concerns about infection.

As noted in the hospital statement reproduced below, Scalise (R-La.) has made "excellent progress" and the six-term congressman was described as "in good spirits and looking forward to his return to work once he completes rehabilitation."

At the time of the shooting, NRLC President Carol Tobias asked for prayers and remarked, "Steve is not just a friend to the pro-life movement and strong ally of National Right to Life. He is one of us. Saving babies is at the top of his priority list. He is one of the most dedicated and effective pro-life people in Congress. We pray for healing and hope to see him back in his role as Majority Whip soon."

Hawaii to Force Pro-Life Pregnancy Centers to Advertise Free Abortions

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A Politically Motivated Hit Job

From the beginning of its journey through the legislature this spring, the political motivations of Hawaii's crackdown have been difficult to ignore. Prior to one senate committee meeting, for instance, pregnancy center leaders saw their testimony withheld from the committee altogether.

Even as pro-lifers were kept from defending their own ministries against the state's attack, the senate allowed testimony from pro-abortion lobbyists, including staff members at Planned Parenthood Northwest and Hawaii—a vocal supporter of the legislation.

"The fact that we did not have a voice and that a decision is very concerning," Joy Wright, executive director at Malama Pregnancy Center, said. "Even if they're for the bill, it's very important that we have a voice. We are abiding by the process put together by the state legislature, and so if it's not followed through on the other side, then we have a problem that needs to be addressed."

At a hearing before the state's House Committee on Health on March 16, one supporter of the bill, Michael Golojuch, Jr., chair of the state's LGBT Caucus, testified that pregnancy centers are dangerous for women based on his own third-hand account of the sister of one of his friends.

Without providing any substantiating details or even establishing that the pregnancy center had made a mistake of any kind, Golojuch's testimony was markedly similar to the sweeping claims often made by abortion lobby groups and one "undercover reporter" whose vague allegations formed the backbone of California's 2015 law.

One lawmaker, Rep. Bob McDermott, called out the legislation's pro-abortion motivations on the house floor just before his colleagues voted, 41-10, to send the bill to Gov. Ige's desk.

"Ultimately, what was the whole point of this whole thing? Where did it come from? Why is it even before us? It's before us because there's Christian centers that offer alternatives to abortion," McDermott said. "They don't believe in abortion. So, a woman comes in there and they're encouraging, they offer alternatives but they don't do abortions. And that's what this is about.

"These pregnancy centers offer the ultrasound… the young lady will not have the abortion—she won't—and Planned Parenthood loses money."

Judge's ruling overturning ban on dismemberment abortion is steeped in dehumanizing euphemisms

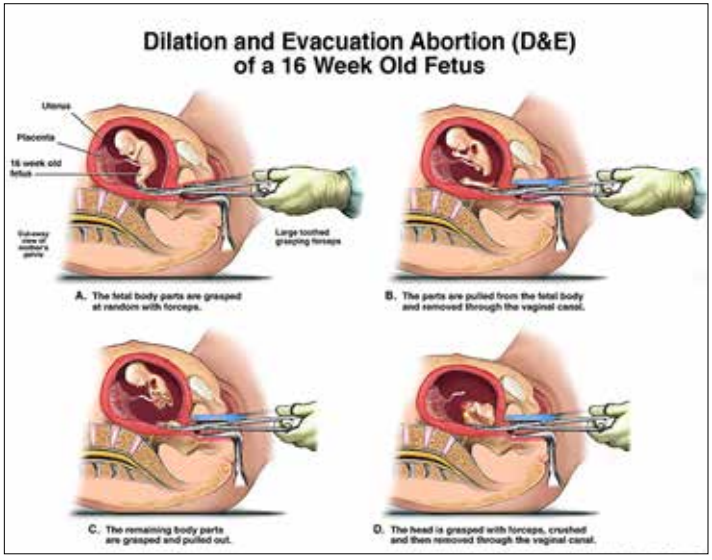
From page 2

terrible than dismembering it inside the womb and then removing its parts. Both methods are stomach turning and would likely upset people learning that they had undergone either one.

So how did Judge Baker describe dismemberment abortions? Did any of the horror seep through?

Here is "Finding of Fact" #36, found on page 8 reads as follows (internal quotes and citations are excluded for clarity):

As for the second method used beginning at approximately 14 weeks LMP [Last Menstrual Period], because suction instruments alone are generally no longer sufficient to empty the uterus, doctors can use a method with instrumentation called standard D&E. This involves two steps: dilating the cervix, and then evacuating the uterus with instruments such as forceps. There are several ways to dilate the cervix. Typically, during the early weeks of the second trimester of pregnancy, a doctor performing standard D&E uses a combination of medications that open the cervix and manual dilators; then, the same day, the doctor uses forceps to remove the fetus and other contents of the uterus. Because the fetus is larger than the opening of the cervix, the fetal tissue generally comes apart as the physician removes it through the cervix. The reason that the cervical opening is smaller than the fetal parts is that, in general, the doctor dilates only enough to allow the safe passage of instruments and fetal tissue through the cervix.



Let's go through that antiseptic description:

- **"Empty the uterus"/"evacuating the uterus"** means, of course, killing the baby and removing her corpse.

- **"Because the fetus is larger than the opening of the cervix"** signals that we are talking about well-developed babies.

- **"the fetal tissue generally comes apart as the physician removes it through the cervix."** "Fetal tissue" includes arms and legs and a head and feet which "comes apart" because the abortionist hasn't torn it off the baby's torso or because the baby's flesh is still attached.

- **"The reason that the cervical opening is smaller than the fetal parts is that, in general, the doctor dilates only enough to allow the safe passage of instruments and fetal tissue through the cervix."** And what if the cervix were dilated further? Who knows how much of the baby's intact body might slide right out.

When you can distance yourself this far from what actually takes place in a dismemberment abortion to a living unborn baby, then, and only then, can you write something as cold-blooded as Judge Baker's decision.

RIP Charlie Gard, "the absolute warrior"

From page 2

had a devastating illness--mitochondrial DNA depletion syndrome.

As *NRL News Today* readers are sadly aware, Charlie died July 28 when his ventilator was disconnected. But perhaps like me, you did not know until late last week that (according to a story in the *Telegraph*) "Charlie Gard battled for 12 minutes after his life support was removed before dying, his parents have revealed."

"Chris Gard and Connie Yates have said their baby lived for twice the predicted time after his ventilator was disconnected and that they subsequently took him home in a specially chilled cot," reported Henry Bodkin. "The couple described their devastation at being denied the chance of a few days' 'tranquillity' at home with their son before he died, but said it 'felt perfectly natural' to take Charlie home with them after his death."

Bodkin's story alternates between heart-warming vignettes and instances on pettiness which made Charlie's last day more difficult for his parents.

For instance, "Once home, it was lovely to sit and watch him, lying there like any other baby, not surrounded by equipment and machinery, without anything obscuring his lovely face, to just see Charlie, at home, sleeping in his cot where he should be," as Connie Yates told the *Daily Mail*.

Or that "Charlie was taken out for a walk in a pushchair in the hospice grounds and had plaster of Paris moulds taken of his feet and hands before staff removed life support. Or that "Charlie opened his eyes and looked at us one last time and closed them before he passed away," according to his mom.

On the other hand, sadly, "The parents revealed they were not allowed in the ambulance with their son on his trip from Great Ormond Street [to the hospice]," Bodkin reported.

NRL News Today posted over 50 stories about Charlie, Connie, and Chris. I trust you read many of them. (If you are not receiving *NRL News* in your inbox, just take 30 seconds to sign up at www.nationalrighttolifenews.org/news/join-the-email-list/#.WYi3qdQrJko.)

The story has multiple levels of meaning. Here are three of 20.

#1. Over and over, Connie and Chris made it abundantly clear if Justice Francis ever unshackled Charlie, they would go the United States to try experimental nucleoside therapy but only for a limited period of time (three months). In one of the most powerful of many statements Connie made, she told the media

> **"We aren't fighting because we cannot bear to lose him. He's my boy. It's what's best for him. … I would do anything for him. He deserves his chance. …We firmly believe that he was sent to us as we are the only ones who look after him. We truly believe that these medicines will work. After three months we would want to see improvement and, if there wasn't, we would let go. This is not the life we want for Charlie. A chance to keep fighting, he deserves that chance. We are doing this for him."**

By contrast the Great Ormond Street Hospital took the position from which it never waivered

> **'It has been and remains the unanimous view of all of those caring for Charlie at Great Ormond Street that withdrawal of ventilation and palliative care are all that the hospital can offer him consistent with his welfare.**
>
> **'That is because in the view of his treating team and all those from whom GOSH obtained second opinions, he has no quality of life and no real prospect of any quality of life.**

Chris and Connie wanted to see if Dr. Michio Hirano's therapy could work for Charlie. GOSH insisted they knew that it was in Charlie's "best interests" to be "allowed to die with dignity."

#2. GOSH and Justice Francis kept intimating as if it were a fact (not a guess) that Charlie was suffering and (even if he wasn't) he might if he were moved to the U.S. But even two of these most utilitarian bioethicists in the world-- even Julian Savulescu and Peter Singer-- sided with the parents.

As they wrote, it is a value judgment, not a scientific judgment **"**whether the pain of three months of intensive care (minimised by sedation and analgesia) is worth taking to gather more information about the prospect of improvement with experimental therapy."

Understand, like many others who come down on the parents' side, if Charlie were their child, they wouldn't take him to the United States.

Which brings us to

#3. Which is that Charlie wasn't their child! Nor was he Justice Francis' child or GOSH's child. He was Chris and Connie's!

Justice Francis groused a lot about "outsiders" and critics who blamed the Britain's National Health Service for the decision not to allow Charlie's parents to take him to the United States. He insisted it was strictly a decision on what was best for Charlie--and that the experts knew better.

Along the way, I regret to say, Dr. Hirano was slimed with hints that there was a monetary reason behind the offer of his services. If that wasn't bad enough, GOSH accused a man who serves as Chief of the Neuromuscular Division and Co-Director of the Columbia University Medical Center Muscular Dystrophy Association clinic and is Director of the H. Houston Merritt Center for Muscular Dystrophy and Related Diseases, of offering "false hope" to Connie and Chris.

That was the undertow of a couple of pieces written by bioethicist Arthur Caplan. Adding insult to injury, he began an op-ed for the *New York Daily News* with these ten words: "Charlie Gard's parents have decided to throw in the towel."

They raised almost $2 million, took their case to three courts, including the European Court of Human Rights, convinced the Columbia University Medical Center to admit Charlie as a patient, persuaded the United States Congress to begin the process of giving the family permanent resident status so they could come here for treatment, tugged on the heartstrings of the Pope and the President of the United States and countless other millions around the world.

"Threw in the towel"? Chris and Connie took on bastions of established power. They were beaten, but not defeated, by a system that gives hospitals' enormous power in determining what course of action will be followed.

Might I add that Dr. Caplan, Justice Francis, and the GOSH administrators would be fortunate indeed to have 1/10th the courage, persistence, and bravery of Connie Yates and Chris Gard.

The week before Charlie died, his parents paid tribute to their 'absolute warrior.'

His father said

> **'Mummy and Daddy love you so much Charlie, we always have and we always will and we are so sorry that we couldn't save you.**
>
> **'We had the chance but we weren't allowed to give you that chance. Sweet dreams baby. Sleep tight our beautiful little boy.**

The Abortion Industry: A Pioneer in Fake News

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

"Fake news" has become a favorite pop culture phrase in 2017. But truth be told the abortion industry was actually a pioneer in the concept, blazing the way for lies and dissimulations that continue to this day.

Dr. Bernard Nathanson, a co-founder of the National Association for the Repeal of Abortion Laws (later the National Abortion Rights Action League), admitted years ago that he had flat-out lied about the number of women who obtained abortions illegally in the U.S. prior to the 1973 U.S. Supreme Court decision *Roe v. Wade*.

He routinely said that one million women were undergoing "back alley abortions." He later confessed the statistic was pure fiction.

Nathanson also lied about the number of women who were dying from abortion prior to 1973--supposedly 5,000 to 10,000 women a year.

"I confess that I knew the figures were totally false, and I suppose the others did too if they stopped to think of it. But in the 'morality' of our revolution, it was a useful figure, widely accepted, so why go out of our way to correct it with honest statistics? The overriding concern was to get the laws [against abortion] eliminated, and anything within reason that had to be done was permissible," he wrote.

Nathanson ultimately had a change of heart and became pro-life. He said in books and speeches that he was converted by the new technologies that showed the development of an unborn baby, particularly ultrasound.

But while the topics change, the fake news about abortion that he had helped originate is a pro-abortion staple. And that includes ignoring what ultrasound said to Nathanson decades ago and to us today.

For instance, abortion activists routinely referred to an unborn child as a "blob of tissue." The advent of modern ultrasound has thankfully put that lie to rest, since parents can now view their children smiling, crying, even giving a "thumbs up" in the womb. But still the baby is a "thing."

Another abortion industry falsehood is that women who undergo abortions are making a freely made choice. A body of research, however, has shown that as many as 60 percent of women who have abortions have been pressured by boyfriends, husbands, parents, or other significant figures in their lives.

A national poll also showed that as many as 80 percent of women who have had abortions would have chosen life for their children, had just one person offered support for the pregnancy.

Dr. Bernard Nathanson

Abortion activists have also led the public to believe that Planned Parenthood, the nation's largest abortion operation, safeguards women's health by performing mammograms. In actually, there is not a single Planned Parenthood facility in the nation that does mammograms, as numerous fact-checking articles have demonstrated.

The abortion industry was built on lies; how else to sell abortion to a reluctant public? The abortion industry continues to lie today. Only the names have been changed to exterminate the innocent.

When the truth of the grisly business is exposed…when pregnant women receive love, compassion, and support… the abortion option loses favor faster than you can say "fake news."

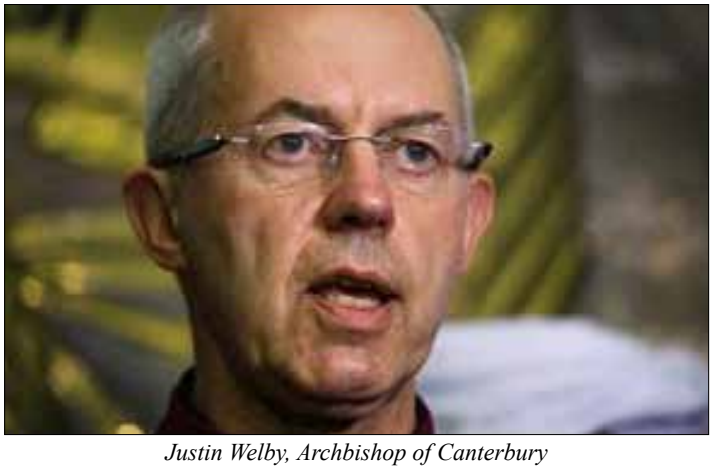
Mere materialism would never explain Connie and Chris's battle on behalf of Charlie Gard

Archbishop of Canterbury: "My heart breaks for Charlie Gard's family"

By Dave Andrusko

A colleague passed along a link to a story that appeared *The Guardian* newspaper under the tender headline, "Archbishop of Canterbury: my heart breaks for Charlie Gard's family."

The subhead spoke volumes: "Justin Welby says any parent would fight for their child's life as he argues rationality alone is not key to making big decisions."



Justin Welby, Archbishop of Canterbury

The larger context, of course, is the death of little Charlie Gard, a week before Connie Yates' and Chris Gard's son would have celebrated his first birthday. The specific context were prior remarks made by utilitarian philosopher and atheist Prof. Richard Dawkins on BBC Radio 4's *Today* programme and Archbishop Welby's subsequent response on the same program.

According to the *Guardian's* Kevin Rawlinson, Dawkins spoke of how people should avoid voting with their gut.

"Of course, we all think with our gut a lot of the time," he said. "But when we're making important decisions, like when we're voting [or] when we're taking important business decisions, don't think with your gut, think rationally. Look for the evidence one way or the other; weigh it up."

But Dawkins didn't stop there. According to Rawlinson, "Dawkins said the scientific method should be applied beyond the lab, adding that 'evidence is the only reason to believe anything about the real world.'"

Archbishop Welby lost one of his own children, Johanna, who died when she was less than a year old. So when he said, "My heart breaks for Charlie Gard's family," his grief was especially poignant.

Referring to Charlie Gard, Welby said any parent would "fight for the life of their child as long as they could," adding, "We know what that's like."

Chris Gard and Connie Yates

And he firmly but politely disagreed with Prof. Dawkins. He said

> **"The world is not entirely materialism. It's not entirely made up of what you can experiment with. There are things we deal with every day – emotions around love, around the value of people, around how we treat those who are weaker and stronger – where mere rationality, even evidence-based rationality, which I hold to as a really important thing, does not answer the whole question adequately."**

No, it doesn't. Few examples better illustrate the limits of materialism than Connie and Chris' noble, selfless, and loving battle against overwhelming odds to save their son.

Planned Parenthood Rep: 'No Good' Just Throwing Away Aborted Babies

From page 5

'checkbox' on their abortion forms should tell the public and policymakers everything they need to know about this barbaric abortion business. The Department of Justice should open an immediate investigation into Planned Parenthood's late-term abortion practices, and the U.S. Congress must stop forcing taxpayers to subsidize Planned Parenthood's brutal abortion empire.

Last week, a San Francisco federal judge held David Daleiden and his attorneys in contempt of court for CMP's disturbing video release in late May showing abortionists laughing at a falling "eyeball" and "pulling off legs."

Network History on CMP Video Coverage

Since the release of CMP's first video on July 14, the broadcast network news shows have worked hard to avoid publicizing the story – and when they did, they refused to even utter the word "baby."

Two months after the first video's release, MRC Culture found that ABC, NBC and CBS had aired a mere 0.13% of the CMP footage during their news shows – or 1 minute, 13 seconds of more than 16 hours. And in early October 2015, MRC Culture discovered that the networks spent more time combined airing Cecile Richards' defense of Planned Parenthood during a congressional hearing than showing the actual videos themselves.

From the beginning, liberal media news outlets raced to defend Planned Parenthood. In the first 9 hours and 30 minutes of news shows broadcast after the story broke, ABC, NBC and CBS, spent only 39 seconds on the first video. It took more than 24 hours before all three covered the story. In the week after the first video, the networks gave a mere 9 minutes and 11 seconds to the story (in contrast, the nets devoted more than three times that to the Susan G. Komen controversy, when the charity temporarily decided to defund the abortion giant).

ABC, NBC and CBS prioritized animals over aborted babies, by covering the shooting of Cecil the lion more in one day than they did these videos in two weeks and in their reporting on birth of the National Zoo's panda cubs.

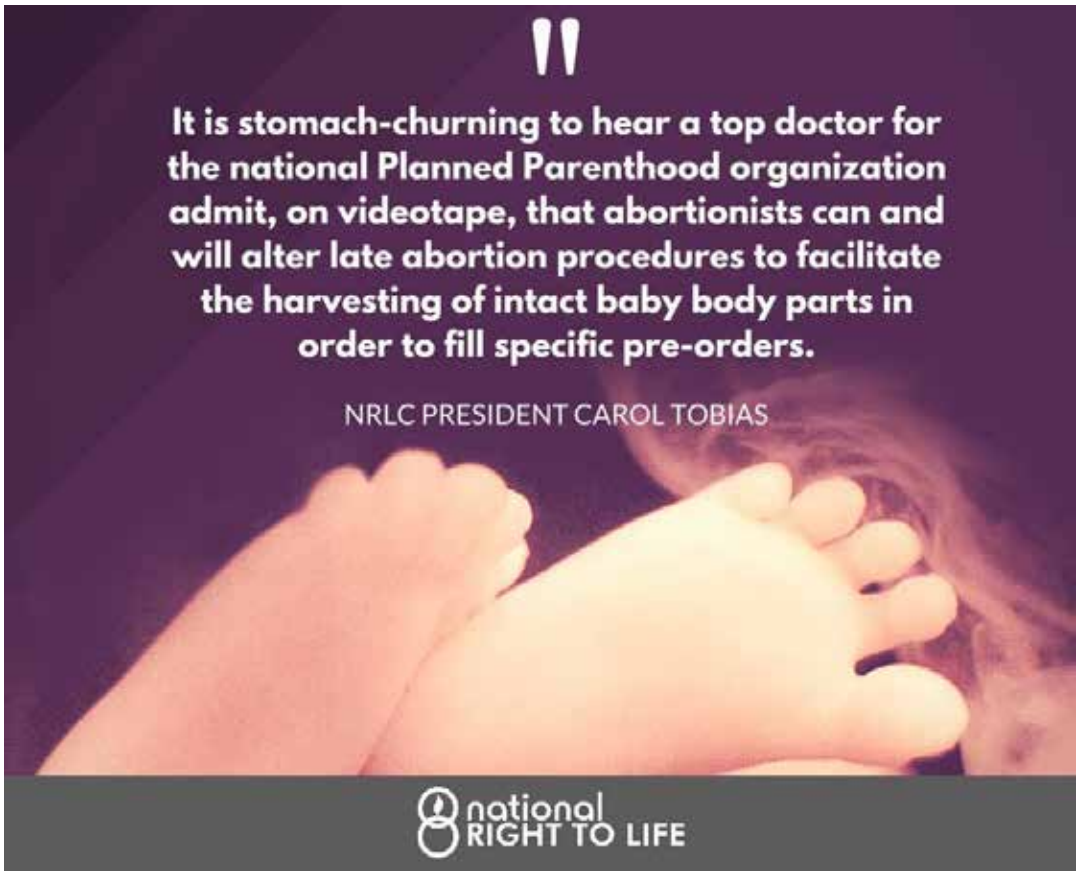
As more videos have been released, the networks have ignored far more videos than they have covered.

Not only that, but also they refused to cover the tens of thousands of Americans speaking out against Planned Parenthood during nationwide rallies held in late August – except as a side note when CBS tried to connect the event to arson.

While the networks covered rallies against Planned Parenthood in Jan. 2017, they omitted from their reports that abortion activists tried to disrupt pro-lifers and clashed with police.

Citing information from MRC studies, both Sen. Mike Lee (R-UT) and members of Congress led by Rep. Louie Gohmert (R-TX) have slammed the media for their lack of coverage on the videos.

Hundreds of media outlets, including the networks, boast a long, cozy history with Planned Parenthood.



The media similarly stayed silent on the case of Philadelphia abortionist Kermit Gosnell. Gosnell's trial, in which witnesses described baby abortion survivors "swimming" in toilets "to get out," attracted a scant 12–15 reporters. Only after 56 days, multiple letters from members of the House of Representatives and a public outcry, did all three broadcast networks report on Gosnell.

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The euthanasia slippery slope: a failure of memory and imagination

From page 17

example of calls for expansion of euthanasia unfolding in Quebec.

Dr. Yves Robert, the registrar of the College of Physicians and Surgeons of Quebec (the provincial medical licensing authority) was a major proponent of legalizing euthanasia and in 2009 the College was one of the main instigators of the movement to do so. Euthanasia was legalized in December 2015.

Robert adamantly rejected claims that effective safeguards were not possible, that euthanasia was not a medical act, and that it should be kept out of medicine. He constantly referred to a "continuum of good end-of-life care," which included euthanasia as part of palliative care.

As in Australia, the claim it would be rarely used (about 100 cases a year in the province) was made. The first year saw over 400 cases. (In the first 7 months, 21 of 262 cases did not meet legal requirements: in two the patient was not terminally ill and in one not seriously ill – she probably had a urinary infection.)

But none of that seemed to raise any questions for the College, or I assume Robert, about whether legalizing euthanasia had been a good idea.

Here is what has, as he explains in a letter dated 10 May 2017, on College letterhead, entitled "Death a la carte." That is, instead of food choices, it's a menu of options for how one wants to die.

There are now calls and possibly the launching of a court case to have "death on demand" declared a constitutional right. The claim is that having to fulfil certain conditions to have access to euthanasia is a breach of the right to control one's life and body and legally actionable discrimination.

Claiming a right to "death on demand" is consistent with and just an extension of the autonomy arguments used to legalize euthanasia.

The discrimination claim is unusual: It's discrimination against people who do not have disabilities because those who do have access to euthanasia and those without disabilities cannot.

Robert notes opinion leaders and the media have denounced cases where people who do not fulfil the conditions for access to euthanasia in Quebec have been refused it. Such denunciations and the refusals being characterized as 'cruelty' are familiar pro-euthanasia strategies.

Robert recognizes the "paradoxical discourse" that calls for safeguards to avoid abuse of "medical aid in dying" (euthanasia) which are meant to limit its availability, while asking doctors to act as if there were no such restrictions.

He continues that if euthanasia is an unfettered right, then it's not within the scope of "medical aid to die," but simply "assisting dying" and society must consider other options than involving the medical profession in that.

He explains it's to transform "medical aid in dying" to "legally authorized aid in dying," a form of assisted suicide which, he says, could be provided by private enterprise as in Switzerland.

Indeed, if society legalizes euthanasia, all euthanasia should be kept out of medicine. Specially trained technicians could provide it.

Robert notes that the Quebec law was "a major opening" to euthanasia and expresses surprise at how quickly public opinion seems to have judged the opening insufficient, when testing the law is still in the "apprenticeship phase and the application and consequences of its provisions are not fully assimilated."

In short, euthanasia has become normalized with astonishing rapidity and that has caused calls for access to it to be expanded, indeed, calls to have no restrictions at all on access.

Robert concludes: "Let us take the time to reflect deeply before going any further. There is no urgency to die."

I totally agree but, to use a common saying, "it's too late to lock the barn door after the horse has bolted."

As for me, after being heavily involved in the euthanasia debate over many years in Quebec, to use another common saying, "you could have knocked me down with a feather" when I read what Robert wrote. That said, I applaud his honesty and integrity.

Why did so many doctors (and likewise lawyers) of goodwill and professional integrity, such as Dr. Robert so adamantly disagree that such expansion would occur – although none of us expected a proposed expansion to this degree?

I believe it was a total failure of individual and collective memory and imagination, including professional memory and imagination, resulting in "intense individualism" and "intense presentism" governing the decision making and leading it astray. Let's avoid that in Australia.

Editor's note. Margaret Somerville is Professor of Bioethics in the School of Medicine at the University of Notre Dame Australia. This appeared at Mercatornet and is reposted with permission.

WashPost: 'Feel-Good' Abortion Play Offsets Crazy 'Anti-Abortion Activists'

By Katie Yoder

When the liberal media call anything to do with abortion "funny," they reveal just how out of touch they are. There's a disconnect both with the pro-lifer who believes one person always dies in abortion, and even with many abortion supporters, who claim it's a serious choice.

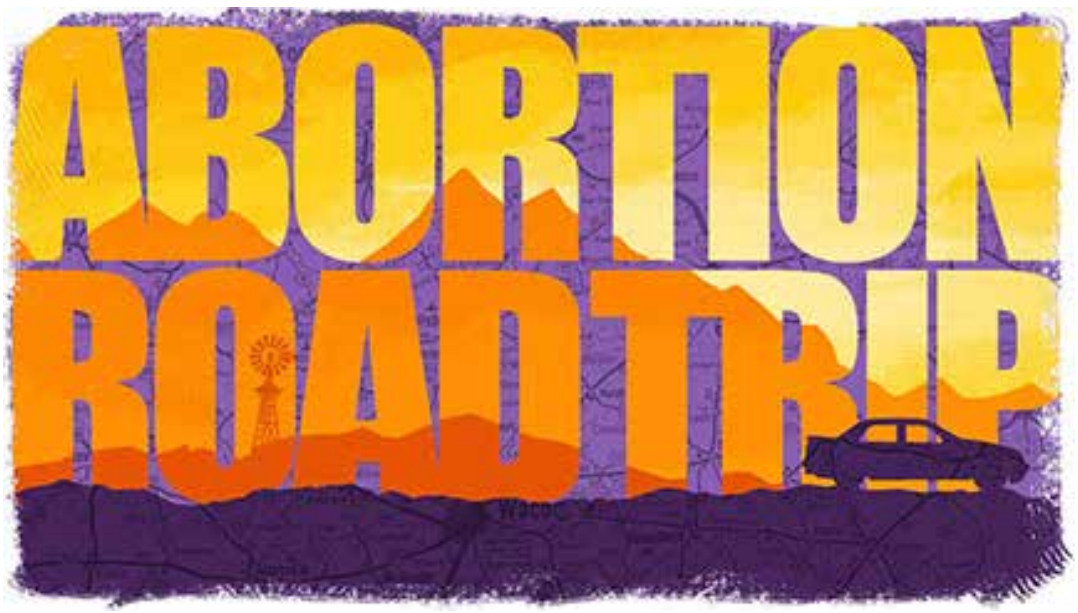
But that's exactly what *Washington Post* staff writer Amanda Erickson did in her recent review of the new Washington, D.C. play *Abortion Road Trip*. Published in the Style section Sunday and in the Arts and Entertainment section Monday, avid Post readers couldn't miss it.

From the beginning, Erickson applauded the "rare thing" by calling the play a "zippy, feel-good comedy that has managed to attract protesters before every performance."

But protesters aren't the only thing a "feel-good comedy" about abortion attracts. The terminology also guarantees glowing media reviews. Besides Erickson's own review, there's *Grandma*, which the liberal media lauded as a "funny" abortion film, or *Obvious Child*, which they praised as an "abortion romantic comedy."

This play centers on the main character, 25-year-old Lexa, as she travels from Texas to New Mexico in a $1,200 taxicab ride for an abortion (or, in Erickson's words, "to terminate").

According to Erickson, the cast boasted perfection. Lexa is played by the "charismatic" Lauren Patton, her sister Minnie by the "caustic, charming" Dominique Brown and the paid driver by a "warm winning" Renae Erichsen-Teal. As for the cast in general, Erickson commended the actors "who infuse[d] their characters with warmth and empathy."



While "most of the show takes place" during the road trip, Erickson insisted that a "series of flashbacks reveals a more complicated story, one that includes sexual assault, substance abuse, betrayal and, yes, love."

But Erickson still worried that her review didn't do the play justice.

"That description makes the show sound like an after-school special where very important lessons are learned," she said, before making another plug. The play, she hyped, "is a blast."

"It's serious but also very funny, with relatable characters and (mostly) believable complications," she added.

Except, she confessed, for those in the pro-life movement.

She agreed that the performance was "unashamedly in favor of abortion rights" with the "sole anti-abortion character" cast as the "villain" (imagine that!). Even so, she justified, the show, "doesn't shy away from abortion's nuances and messy complications."

Then Erickson herself appeared to cast pro-lifers as the villains.

"As the antiabortion activists yelling 'You suck,' and 'You're amoral' into a megaphone remind us," she concluded, "those qualities are often in short supply when it comes to this issue."

I can't speak for Erickson, but when I've visited outside abortion clinics, not once have I heard anything close to those words yelled at the women walking in. Instead, rather, I've heard clinic escorts shout at pro-life counselors for "harassing" women. But the liberal media seem to care about the one narrative here. Not both, as they should.

Now that is a quality "in short supply when it comes to this issue" that Erickson could actually play a role in fixing.

This isn't the first time Erickson has written on the topic of abortion for the *Post*. In February, she complained about the "powerful" Catholic Church's influence on pro-life Guatemala, after the country detained a Dutch vessel offering women abortions onboard.

Presented by D.C. troupe Theatre Prometheus, Rachel Lynett serves as playwright and Tracey Erbacher as director for *Abortion Road Trip*.

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