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NEWS

October 2015

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national RIGHT TO LIFE NEWS

NRLC urges support for bill that would deny 89% of all federal funds to PPFA

By Dave Andrusko

National Right to Life has sent a letter urging members of the U.S. House of Representatives to support the *Restoring Americans' Healthcare Freedom Reconciliation Act*, which the House of Representatives will consider on October 23.

H.R. 3762 includes language that would block, for one year, most federal payments to affiliates of the Planned Parenthood Federation of America (PPFA).

As NRL President Carol Tobias, NRLC Executive Director Dr. David O'Steen, and Legislative Director Douglas Johnson explained, the bill "would close the largest pipeline for federal funding of Planned Parenthood, Medicaid, as well as the CHIP program and the Title V and Title XX block grant programs, thereby covering roughly 89% of all

See "Funds," page 23

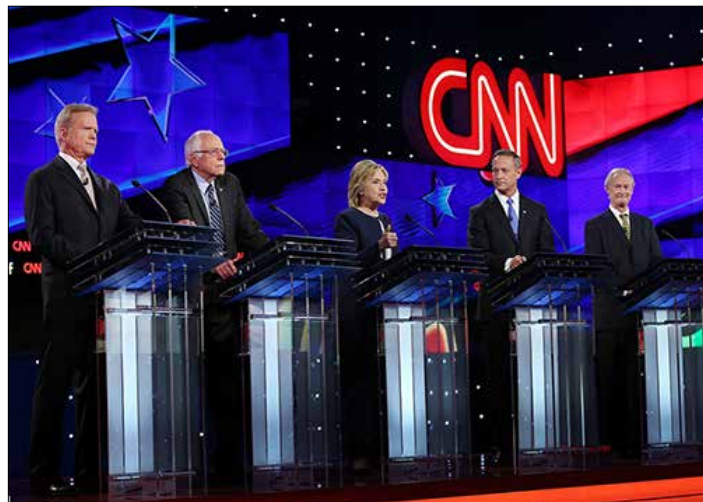


PPFA President Cecile Richards testifying before Congress

So why was abortion so conspicuously absent in the Democrats' debate?

By Dave Andrusko

We talk elsewhere in the October issue of *NRL News* about "Five Takeaways" from the first Democratic presidential debate in which four men bowed deferentially to their fellow pro-abortionist, former Secretary of State Hillary Clinton. (See page 26.) It was less that Clinton shined than it was that Vermont Senator Bernie Sanders, former Virginia Senator Jim Webb, former Maryland Governor Martin O'Malley, and former Rhode Island Governor Lincoln



Chafee simply bumbled and stumbled their way through.

And if you read stories in the days that followed the October 13 gathering in Las Vegas, more than a few made the obvious point: Clinton, while smiling and verbal, left a trail of whoppers that her Republican opponents, unlike the four on stage, will not allow to go unanswered.

We also talked about how CNN moderator Anderson

See "Absent," page 34

Editorials

More than ever Planned Parenthood is on the defensive

My, how things can change, how life (and the fate of the purveyors of death) can turn on a dime.

You recall PPFA President Cecile Richards' September 29 testimony before the House Oversight Committee which extended almost five hours. While we punctured the myths and bogus analogies and feigned ignorance [www.nationalrighttolifenews.org/news/2015/09/myths-and-misstatements-from-ppfa-president-cecile-richards/#.ViUPFtKrRko], plenty of media outlets tripped over their tongues in panting admiration for Richards.

If you believed their stories, which could have come off the PPFA website, Richards so carried the day that the only question remaining was would the House Oversight Committee have the good sense to pack up its bags.

But that was then....

Since that performance (and Richards was slick), PPFA's president, who makes over a half-million dollars a year, decided that the largest abortion provider in the world would no longer accept reimbursement for the fetal tissue (a term which includes whole body parts) it provides to medical researchers.

Not you understand that Planned Parenthood was operating from a position of weakness or was conceding by its change in policy that it had done anything wrong. No, not at all, we were assured.

In her letter to the NIH, Richards doubled down on her claims that PPFA "adheres to the highest legal, medical, and ethical standards" as it scavenges tissue and body parts from aborted babies. Okay, then why the change?

"[I]n order to completely debunk the disingenuous argument that our opponents have been using." Once that "smokescreen" is removed, Richards wrote, PPFA will be able to push "forward with our important work on behalf of millions of women, men, and young people."

Media outlets dutifully parroted the line that this was a brilliant stroke which would put PPFA (so to speak) on the high moral



ground. Of course, it was nothing of the sort.

PPFA will still harvest organs (out of the goodness of its institutional heart), supplying a "service" that women want--aka "preserving the ability of our patients to donate tissue."

Of course that is hokum as well. As we have written before, look at the consent form and listen to what various PPFA officials said on the videos released by the Center for Medical Progress.

Women aren't beating the walls down to "donate" their baby's remains. They are at their most vulnerable and the staff preys on that to convince them that their baby's organs can cure everything from Alzheimer's to the common cold.

See "Defensive," page 32

The closed pro-abortion mind

Can it be more obvious? The walls are closing in on the closed pro-abortion mind. As evidence, let me offer three recent examples, three of many.

Just to be clear, what do I mean by the closed pro-abortion mind? I mean robotic answers that are so bizarre, so disconnected from reality it resembles answering "Sunny and 70" to the question "What day of the week is it?"

It also involves a kind of one-upmanship that if we did likewise, we'd be denounced to high heaven. And a kind of intellectual surrender masked as smug superiority.

Each of the three answers is whacky in its own peculiar way.

Let's begin with the exchange last week between Rep. Randy Forbes (R-Va.) and Ms. Caroline Frederickson, at the House Judiciary Committee's second hearing on "Planned Parenthood Exposed: Examining Abortion Procedures and Medical Ethics at the Nation's Largest Abortion Provider,"

Forbes showed a brief excerpt from the first undercover video published online by the Center for Medical Progress in which investigators talked with Dr. Deborah Nucatola, senior director for medical services for the Planned Parenthood Federation of America. Her remarks were, in a word, nauseous. Her off-hand cruelty is utterly amazing.

"Is that procedure too brutal for you?" Forbes asked Frederickson.

"Ultimately this is an attack on women's..." Forbes moved on before she could say (yet again) reproductive rights.

"Too brutal or not?"

"Abortion should be safe and legal..."

"Is that procedure too brutal?"

"I am not a doctor and I can't..."

See "Closed," page 41



From the President Carol Tobias

The End Game

A lot of well-deserved time and attention has been given to the Planned Parenthood Federation of America (PPFA) and the videos released in recent months. Planned Parenthood is a vile organization that kills more than 300,000 unborn children every year. Pro-lifers are understandably upset that this behemoth receives approximately half a billion dollars from federal, state, and local governments.

Are Planned Parenthood affiliates making money from the sale of body parts from these babies? Are they manipulating the abortion procedure so as to keep the baby's body in better condition for harvesting organs and tissue? Are they getting "consent" from the women whose babies are being killed and harvested for parts? Several congressional committees are investigating these questions and more. I look forward to their official findings.

The U.S. House has twice this year passed legislation to de-fund PPFA, and passed a third bill to grant states broader powers to remove abortion providers from the Medicaid program. Senate efforts to pass such legislation have been blocked by filibusters by Democratic senators who support continued monies to PPFA.

In the weeks leading up to October 1, the beginning of the new fiscal year for the federal government, there was much discussion about whether or not Congress should refuse to pass a "continuing resolution" ("CR"), leading to a shutdown of the federal government, in the [mistaken] belief that President Obama could be "forced" to agree to enactment of a new law that would block PPFA from receiving federal funds.

For more details on what a CR is and does, you can read our summary here: www.nrlc.org/communications/ppfundingbackground/

On September 30, the CR cleared Congress and was signed by President Obama; it includes the programs covered in regular appropriations bills – virtually all discretionary spending for the entire federal government. Basically, federal programs were put on "auto-pilot" by this CR, which runs until December 11.

Neither this CR nor any other federal spending bills include "line items" that specifically designate money for Planned Parenthood. Rather, individual Planned Parenthood affiliates tap into funds from various on-going health programs. The greatest amount of federal monies, comes from so-called "mandatory spending" programs, mostly Medicaid, a huge program

a majority vote. Such a bill cannot carry airtight language to totally defund PP, but it may attack their major funding streams, the so-called mandatory funding programs. If passed in the House and Senate, the bill will be sent to President Obama. At National Right to Life's urging, the 2015 reconciliation bill includes language to curb 89% of federal funding to PPFA and we strongly support passage of the bill.


When reporters ask me about what Planned Parenthood is doing with the remains of the dead babies, I will frankly say, "What is even more disturbing is that these babies are being killed in the first place."

We want PPFA to lose their funding from tax dollars, but that is not the end game. The goal of the pro-life movement is to stop abortion and save these helpless little ones. To do that, we need a pro-life president who will sign bills, not just to defund Planned Parenthood but to protect unborn babies. We need a president who will sign bills like 1) the Pain-Capable Unborn Child Protection Act, to ban abortions on unborn babies past 20 weeks fetal age who feel pain, 2) the Dismemberment Abortion Ban Act, to protect unborn children from being killed by the dismemberment abortion method, and 3) the Born-Alive Abortion Survivors Protection Act, to establish federal penalties for killing or failing to care for a baby who is born alive during an abortion.

These, of course, are just interim measures until we have a Supreme Court which will further scale back or nullify *Roe v Wade*.

In the meantime, our state affiliates will continue to press as hard as they can to save as many babies as they can within their own states by introducing the above-mentioned bills as well as many others. Possible legislation would prevent the chemical abortion method from being prescribed over the internet (webcam abortions) to women who never see the abortionist in person, or to require that a woman be given the opportunity to see an ultrasound of her baby before she gets an abortion, or requiring that parents be notified before an abortion is performed on their minor daughter.

And in the months leading up to the election of a new president, I hope we are all doing everything we can to make sure that our pro-life friends are registered to vote, then voting.



The end game of the pro-life movement is to stop abortion

created by federal law in which states collaborate. The Congressional Budget Office recently estimated that PPFA receives an aggregate amount of approximately \$450 million annually in federal funds, of which roughly \$390 million, or 87%, comes through the Medicaid program.

Thus, there is no "line item" to strike in the CR, no place where insertion of a zero will do the trick. Rather, in order to deny federal funds to PPFA, a NEW LAW must be enacted to specifically block funding, either for PPFA by name, or to abortion providers, however described. To pass a new law would require a majority in the U.S. House, 60 votes in the U.S. Senate to overcome a filibuster, and the signature of President Obama, a staunch defender of PPFA.

One bill that would go to the president that only requires 51 votes in the Senate is known as the "reconciliation bill." This once-a-year type of legislation, by law, is not subject to a filibuster and can pass the Senate with

2016 Election: Overview of Likely Competitive U.S. Senate Races

By Karen Cross, National Right to Life Political Director

In 2016, 34 of the 100 U.S. Senate seats will be contested on November 8, 2016. Of those, 24 are seats currently held by Republicans, and 10 are seats currently held by Democrats.

Following is an overview of what are shaping up to be some of the most competitive Senate races in the country.

Arizona

In Arizona, pro-life Senator John McCain (R) faces a likely challenge by pro-abortion Rep. Ann Kirkpatrick (D). McCain has a pro-life voting record, while Kirkpatrick has voted against legislation to protect babies who survive abortions, and against a bill that would protect from abortion babies 20 weeks and older. Most political pundits consider this a “lean Republican” seat.

Colorado

Colorado’s Senate seat, currently considered “lean Democrat”, is one of the potential pickups in 2016. Pro-abortion Senator Michael Bennet (D) won the seat in 2010 with 47.7% of the vote. Bennet’s Republican opponent will be determined on June 28, 2016, when the congressional primary election is held.

Florida

Because pro-life Senator Marco Rubio (R) is retiring to run for president, Florida has an open Senate seat. Currently there are more than 20 candidates vying for the open seat. Nominees will be determined during the August 30, 2016, primary election. The race is considered a pure tossup by all of the major political pundits.

Nevada

In Nevada, with the retirement of pro-abortion Senator Harry Reid (D), the open seat is considered a tossup. Pro-life Rep. Joe Heck (R) and pro-abortion former Nevada Attorney General Catherine Cortez Masto (D) are vying for the open seat.

New Hampshire

In New Hampshire, pro-life Senator Kelly Ayotte (R) will face a challenge by pro-abortion Governor Maggie Hassan (D). Ayotte has maintained a 100% pro-life voting record, while Hassan supports the current policy of abortion on demand. As governor, Hassan signed legislation placing a 25-foot buffer zone outside abortion clinics to thwart the ability of pro-lifers to offer alternatives to abortion.

North Carolina

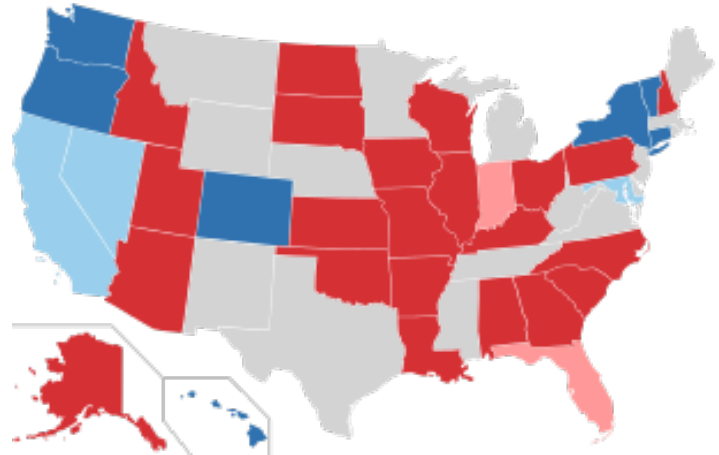
In North Carolina, pro-life Senator Richard Burr (R) was elected in 2004, and won reelection in 2010 with 55% of the vote. Pro-abortion former Assemblywoman Deborah Ross, Spring Lake Mayor Chris Rey, and Durham businessman Kevin Griffin are vying to be the Democratic nominee. Burr’s Democratic opponent will be determined in the March 15, 2016, Democrat primary election. Ross, a former ACLU attorney, has formerly been backed by EMILY’s List, a pro-abortion group which supports only women with extreme pro-abortion positions. This seat is considered “lean” or “likely” Republican.

Ohio

Pro-life Senator Rob Portman (R) faces a challenge by

either pro-abortion Cincinnati City Councilman P.G. Sittenfeld (D) or pro-abortion former Governor Ted Strickland (D), depending upon who wins

rematch with pro-abortion former Senator Russ Feingold (D), whom he defeated in 2010 with 51.9% of the vote. Johnson has a 100% pro-life



the Democratic nomination on March 16, 2016. As a member of the U.S. House of Representatives (1993-1995 and 1997-2007), Strickland had a pro-abortion voting record.

Pennsylvania

Pro-life Senator Pat Toomey (R) will be challenged either by pro-abortion former Congressman Joe Sestak (D), or Katie McGinty (D), former Secretary of the Pennsylvania Department of Environmental Protection. Toomey has a solid pro-life voting record. Both Sestak and McGinty support a policy of abortion on demand. The primary will be held on April 26, 2016. Toomey won his election in 2010 with 51% of the vote.

Wisconsin

Pro-life freshman Senator Ron Johnson (R) is facing a

voting record, while Feingold amassed a solid pro-abortion voting record, including a vote endorsing *Roe v. Wade*, the Supreme Court decision that legalized abortion on demand. The race is considered a tossup, or even “lean Democrat” by political pundits.

Currently, the Senate leadership is in pro-life hands, with 54 Republican seats. In order to take control back into pro-abortion hands, Democrats would need a net gain of five Senate seats in 2016 (or see a net gain of four seats, if the Democrats retain the White House).

Look for updates in future *National Right to Life News* and *National Right to Life News Today*.

“I wonder if we’re going to be able to strike the video from your memory?”

House Judiciary Committee’s second hearing on PPFa

By Dave Andrusko

On October 6, the House Judiciary Committee, chaired by Rep. Bob Goodlatte (R-Va.), held the kind of remarkable hearing on Planned Parenthood that you knew would garner almost no media attention.

Because nothing of substance happened? No, to the contrary. The committee’s work had to be largely ignored because in holding a second hearing on “Planned Parenthood Exposed: Examining Abortion Procedures and Medical Ethics at the Nation’s Largest Abortion Provider,” PPFa’s business of baby-body-part



Rep. Bob Goodlatte

harvesting and trafficking was exposed in all its gruesomeness and soul-crunching brutality. Fortunately you can watch the entire hearing here.

There were moments of absolutely riveting testimony, beginning with former abortionist Dr. Antony Levatino. He described D&E abortions, and even though I have heard him explain this before, my stomach again got queasy.

Dr. Levatino told the House Judiciary Committee

The toughest part of a D&E abortion is

extracting the baby’s head. The head of a baby that age [24 weeks] is about the size of a large plum and is now free floating inside the uterine cavity. You can be pretty sure you have hold of it if the Sopher clamp is spread about as far as your fingers will allow. You will know you have it right when you crush down on the clamp and see white gelatinous material coming through the cervix. That was the baby’s brains. You can then extract the skull pieces. Many times a little face will come out and stare back at you.

Congratulations! You have just successfully performed a second trimester Suction D&E abortion. You have affirmed her “right to choose.”

Speaking personally, I will most remember two extraordinary moments. The first involved an exchange between Rep. Randy Forbes (R-Va.) and Ms. Caroline Frederickson, a pro-abortion sloganeer extraordinaire.

Forbes showed a brief excerpt from the first undercover video published online by the Center for Medical Progress in which investigators talked with Dr. Deborah Nucatola, senior director for medical services for the Planned Parenthood Federation of America.

[The following is the full quote]

[Y]ou’re just kind of cognizant of where you put your graspers, 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



Dr. Anthony Levatino

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.

“Is that procedure too brutal for you?” Forbes asked Frederickson. Dodge One:

“Ultimately this is an attack on women’s...” Forbes moved on before she can say (yet again) reproductive rights.

“Too brutal or not?” Dodge Two:

“Abortion should be safe and

legal...”

“Is that procedure too brutal?” Dodge Three:

“I am not a doctor and I can’t...”

Forbes then asked if Frederickson had a small dog that needed to be put to sleep, “Would you think it would be too brutal for the veterinarian to crush that dog in two different places?” Dodge Four:

“I trust a woman and her doctor...”

The second came later when a testy Rep. David Cicilline’s (D-RI) demanded a vote to have a video presented by Dr. Levatino stricken from the record. Just after the first [voice] vote, which failed, Rep. Trent Franks (R-Az.) asked Cicilline a question, make that the question: “I wonder if we’re going to be able to strike the video from your memory?”

Democrats then asked for a recorded vote and because a number of committee Republicans were out of the room they succeeded. A subsequent vote reinserted the video back into the record.

Earlier in the hearing, Rep. Forbes made the point to Frederickson that “the reality is there is no point that our friends on the other side [the Democrats] would look at this organization and say we might like you but that’s just too far and we can’t condone that.”

If ever that assertion was in question, it could no longer be after yesterday’s hearing.

Fortunately you can watch the entire hearing at <http://judiciary.house.gov/index.cfm/hearings?ID=BBD5EE15-388A-4726-B659-27F6B2A71D32>

Unborn babies “sing and dance” to music, proving that “learning begins in the womb”

By Dave Andrusko

How much drier can the headline to a study in the journal *Ultrasound* be? “Fetal facial expression in response to intravaginal music emission”

But then, having glanced at the study, you zip back to *The Inquisitr* story that alerted you to its existence and what do you see (and hear)?

Unborn babies singing and dancing in response to music piped into their mother’s womb. Alright, technically, the 3D images taken at the Institut Marqués in Barcelona, Spain, show that the babies have “responded to the music by moving their mouths and their tongues as if they wanted to speak or sing,” according to the study’s authors.

But watching the video it’s hard not to conclude these kids are moving to the groovin’ (as us oldster used to say).

Reporting for *The Inquisitr*, Anne Sewell explains that the

scientists had concluded from previous research that the auditory system in a unborn baby “does not start working until at least the 26th week of pregnancy. By testing using the new system, however, they have discovered that the

advantage over playing the music externally is that while “reportedly a fetus can hear his or her mother talking, hear her heartbeat and even the sound of her heels clicking as she walks on the floor..., those sounds are only heard as a murmur,

circuits, stimulating language and communication,” a statement on the institute’s website says. “

“It proves that learning begins in the womb.”

Sewell adds



The results of the study will also help to improve ultrasound scans, due to the movement of the fetus brought on by hearing the music in the womb. It also helps the fetus respond to the sound of music with movements of vocalization – a prelude to singing and speaking.

fetuses can hear from week 16 and using the new system, the sound reaches them effectively and distortion-free.”

The “new system” is called a Babypod and is inserted directly into the mother’s womb. The

distorted by the stomach wall,” Sewell reports.

In addition to potentially providing the baby with an early musical education, “Our study suggests that music induces a response that activates brain

You can watch the facial expressions at www.inquisitr.com/2479502/spanish-study-shows-fetuses-sing-and-dance-to-music-in-the-womb-video/

Feeling the heat, PPFA says it will no longer take money for providing fetal tissue

By Dave Andrusko

In a letter dated October 13 widely and distributed to the media, Planned Parenthood President Cecile Richards wrote Dr. Francis Collins, the director of the National Institutes of Health, announcing that PPFA will no longer accept reimbursement for the fetal tissue (a term which includes whole body parts) it provides to medical researchers.

what we do. In fact, just 1% of our health centers currently facilitate tissue donation for fetal tissue research.”

In English that means that of the roughly 700 PPFA clinics, six or seven clinics in two states (Washington and California) are involved in harvesting aborted babies. Planned Parenthood’s executive vice president, Dawn Laguens told

ridiculous laws and this media that doesn’t understand the big picture.”

VanDerhei demurs and says (referring to a conference they were attending)

I don’t think anybody was suggesting that you curtail. The message to me, that I heard today, was, “Go for it.” We think it’s a great idea. Just do it right.

In Richards’ letter, she insists **As the nation’s leading women’s health care provider, our promise to both our patients and the medical community is that we will never bow to political pressure and we will never back down from advancing women’s health every way we can.**



In the letter, Richards tells Dr. Collins that PPFA has done nothing wrong in its fetal tissue procurement program—PPFA “adheres to the highest legal, medical, and ethical standards,” she insists—but will no longer accept reimbursement “in order to completely debunk the disingenuous argument that our opponents have been using.”

Once that “smokescreen” is removed, Richards writes, the “extremists” agenda will be exposed and PPFA will be able to push “forward with our important work on behalf of millions of women, men, and young people.”

Richards recycles several of PPFA’s most prominent talking points. For example, “Our role in fetal tissue research is an extremely small part of

reporters that the Washington state affiliate already accepts no reimbursements, a policy the California affiliate will now adhere to.

Let’s think about that. In the tenth undercover videos released by the Center for Medical Progress, there is a very telling exchange between Vanessa Russo, the Compliance Program Administrator for Planned Parenthood, Keystone, Pennsylvania, and Deborah VanDerhei, the national director for the Consortium of Abortion Providers at PPFA.

In the video Russo is transparently impatient with anything or anyone that gets in the way of harvesting fetal tissue/intact baby body organs. She tells VanDerhei, “I feel like we’re sometimes bullied by

To which Russo responds

Exactly, and I understand that. But like, a company like this [the pretend buyer] that wants to pay us, that wants to give our organization money for the tissue, I think that that’s a valid exchange.

Later VenDerhei adds for emphasis [the “Roger” is Roger Evans, head of Litigation and Law for PPFA]

Because Roger said, “I’m gonna say a number of things and I only want you to go away with one message: I think this is a good idea. Now, here’s what you need to look out for,” and at the end of it, he said, “And I just want to reiterate, I think this is a good idea.”

The point simply being before the CMP videos, there was evidently plenty of interest in expanding their “fetal tissue” involvement. Will that continue unabated? Nothing in the letter suggests otherwise.

Which means that out of the goodness of their hearts, they will continue to harvest fetal tissue and fetal body parts. “Our decision is first and foremost about preserving the ability of our patients to donate tissue,” Richards writes, “and to expose our opponents’ false charges about this limited but important work.”

And just to make sure everyone understands how little in the way of reimbursement the clinics in the two state affiliates have received, Laguens added, “I don’t think it will have a huge impact on their budget.”

Two closing points. **Nothing** in this pity party/self-congratulatory letter addresses what shocked virtually everyone (other than pro-abortion Democrats on various committees): the callous, brutal, wholly cavalier attitude displayed by assorted PPFA officials and the lab assistants who scavenged the remains of recently aborted babies.

Second, while Richards extols the wonderfulness of the nation’s largest abortion

See “Heat,” page 33

Five Takeaways from House Oversight Committee hearing on PPFA's governmental funding

By Dave Andrusko

In a nearly five-hour-long hearing held September 29, PPFA President Cecile Richards sparred with critics on the House Oversight and Government Reform Committee and basked in praise from supporters.

Here are five takeaways from the hearing which centered on taxpayer funding of the largest abortion provider in the United States. As was noted early and often, government funding makes up 41% of PPFA's \$1.3 billion in revenues.

#1. After watching every minute, it's easy to understand why Ms. Richards was paid a tidy sum of \$590, 928 in 2013. Regardless of how a given question was initially asked, and no matter how many different ways it might have been asked subsequently, her answers went as far as she wanted them to go and no further. When she was repeatedly non-responsive, Richards would smile and tell the questioner that Richards and the questioner must agree to disagree, the clear implication being the questioner was incapable of understanding plain English.

#2. Richards was asked by Rep. Jim Jordan (R-Ohio) about the video PPFA produced after the first undercover video was released by the Center for Medical Progress. In their official rebuttal, Richards said

Our top priority is the compassionate care that we provide. In the video, one of our staff members speaks in a way that does not reflect that compassion. This is unacceptable, and I personally apologize

for the staff member's tone and statements.

What "statements" had Dr. Deborah Nucatola made to the CMP investigators for which Richards felt the need



to apologize? Richards simply refused to answer. Instead she rewrote history.

What she'd been talking about was that it was "Inappropriate to have a clinical discussion in a non-confidential setting in a nonclinical setting." (This, by the way, could have been said about a number of other Planned Parenthood officials as they haggled over prices for baby body parts.) Asked repeatedly what the "statements" were, Richards continued to duck, feint, and evade. Eventually she recycled a line from the video—that "it did not reflect the compassionate care PPFA gives."

#3. A lot of numbers came out in the hearing that to a less

confident and self-assured (and politically-wired) CEO would have been extremely unnerving. Not just the hefty salaries a number of PPFA executives are paid (40 executives were paid over \$200,000 for the

every single service to every single woman without federal money.

Richards dusted off the old abortion is just 3% of the services PPFA provides. But, as Richards said repeatedly, PPFA serve 2.7 million clients, if there are roughly 327,000 abortions, how can Richards say that abortion constitutes 3% of its services? (It's more like 12%.)

Richards slid off into the usual, usual about repeat visits. But even the *Washington Post* Factchecker has seen through that charade.

And one question Richards skated by over and over: how many affiliates receive a majority of their revenue from abortion—and who are they?

#4. Richards was asked by Rep. Mick Mulvaney (R-S.C.) what should be done if a baby survives an abortion. She paused and said she had never heard of such a circumstance happening, which, to put in the politest terms, is impossible to believe. She then quickly added none (no babies surviving) that she was aware of at a PPFA facility. "We don't provide abortions after viability."

Another evasion, since live births can occur a month or more before "viability."

Moreover, Richard's claim warrants scrutiny. As NRLC's director of Education Dr. Randall K. O'Bannon wrote in 2013, "The truth is that Planned Parenthood clinics advertise and perform abortions well into

years 2009-2013), or the \$14,000 dollars a day Planned Parenthood spends on travel, or the \$34.8 million it spent to purchase corporate office space two blocks from Madison Square Garden. Richards was unfazed.

When it was noted that PPFA had an endowment of more than \$100 million (various affiliates have their own endowments), Richards said that was or would be used to build new clinics or provide additional health services to women. This evasion was important. Committee members showed how PPFA annually has considerably more revenue than expenses and could have provided every health service

See "Takeaways," page 16

“When They Say You Say”: Tremendous Positive Response to EWTN / NRLC Five-Part Mini Series

By Ernest Ohlhoff

Eternal Word Television Network’s (EWTN) airing of the five-part miniseries *When They Say You Say* during the first week of October was an outstanding success. The miniseries was a joint project of National Right to Life and EWTN.

This powerful miniseries is designed to prepare pro-lifers for addressing the tough questions about abortion, euthanasia and other life issues.

on EWTN’s Facebook page were over 500 “likes”, and the last show received 880 “likes” and was shared 93 times! “LIKE” statements included:

- Excellent show!!! Thank you so very much!!!
- This is just so fantastic. And such a good presentation.

the start; just great!
Very empowering!

“EWTN was proud to partner with the National Right to Life Committee on this one-of-a-kind program, which educates pro-life people on how to effectively engage pro-abortion people in dialogue that stands a chance of changing hearts and minds,” said Doug Keck, President and Chief Operating Officer of EWTN. “We had a tremendous reaction to this series from our viewers who sent us letters and emails, and who flooded our social media sites. We hope many pro-life groups will purchase the series through EWTN Religious Catalogue so everyone they know can be better educated about the most effective way to reach out to others on this foundational issue!”

When They Say You Say featuring Olivia Gans Turner is available on DVDs from EWTN (contact info) and should be part of every pro-life educational resource collection. The miniseries is expected to be aired again by EWTN early next year.

When They Say You Say was created by Mary Spalding Balch, JD, and Olivia Gans Turner as a teaching tool which has helped thousands of individuals learn how to effectively answer tricky questions asked about life issues. The miniseries is based on an extremely successful workshop developed over the years and presented at numerous conventions.

National Right to Life and EWTN worked together for more than a year to bring this important miniseries to



*Doug Keck
President and
Chief Operating Officer
Eternal Word Television Network*



*Olivia Gans Turner, NRLC Director
American Victims of Abortion*

Whether you are talking to a friend over coffee or being interviewed by the media, now you will understand the true nature of the questions being posed and how to skillfully answer them.

FACEBOOK pages around the county were heralding the miniseries. EWTN’s own Facebook reflected extremely positive responses. Each night the comments about the show

- That’s so awesome, so overdue, and yet so timely. Bravo!
- I have it on now! What a GREAT show!!! LOVE IT!!! Please reshoot it! PLEASE AND THANK YOU!!! LOVE YOU GUYS
- Been watching from

completion. NRLC is extremely grateful to all EWTN staff and management who made this series such a wonderful success.

Over the last three years, EWTN and NRLC have cooperated in a variety of activities. Mr. Keck has attended and participated in two National Right to Life Conventions and supports expanding cooperation between EWTN and NRLC.

NRLC president Carol Tobias, and other NRLC staff have been interviewed numerous times on EWTN’s *News Nightly* and other EWTN programs.

Gov. Jerry Brown's "humble, humane decision" to abandon the poor, the disabled, the marginalized, and the elderly

By Dave Andrusko

What a surprise. A relentlessly enthusiastic advocate of abortion on demand to infinitely and beyond praises California Gov. Jerry Brown for his "humble, humane decision" to unleash the dogs of doctor-prescribed

this "former Jesuit seminary student"?

Why did I mention Lithwick's unswerving and unswervable advocacy of abortion? Because her objective is unmistakable. It's to contrast Brown's

Brown supposedly checked off all the boxes (that is, consulted "experts") and then having contemplated his own existential navel, concluded, "In the end, I was left to reflect on what I would want in the face of my own death. I do not know what I would do if I were dying in prolonged and excruciating pain."

Never mind that the issue isn't pain and hasn't been for years and years. Rather pain was a stalking horse used by the Compassion & Choices crowd to get their foot in the door before kicking the door in. It's about "autonomy," which will be little comfort to all those helpless people whose lives pose an inconvenience to their "betters." Their autonomy will be exercised for them.

One other quote from Lithwick, her stem-winder of a conclusion:

What's staggering about Brown's statement isn't how much he grappled with a thorny ethical question with profound theological implications. That in itself would be novel in this political climate.

But the truly amazing thing is the fact that he struggled and concluded that he couldn't imagine what he would do in the face of a tragedy. That kind of admission has become all but unthinkable in political discourse today. The sooner our lawmakers learn that

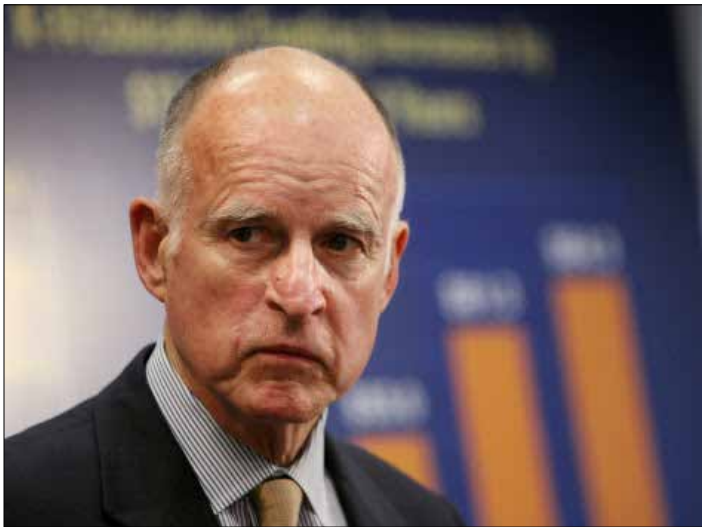
they can't know what the unimaginable will look like, the more likely they are to start passing laws crafted for the messy lives we lead, and not the lucky lives they demand.

Let's consider imagination, and moral imagination. Here's what Tim Rosales, a spokesman for the group Californians Against Assisted Suicide, which includes doctors, religious leaders and advocates for the disabled, said about this "dark day for California and for the Brown legacy."

"As someone of wealth and access to the world's best medical care and doctors the Governor's background is very different than that of millions of Californians living in healthcare poverty without that same access – these are the people and families potentially hurt by giving doctors the power to prescribe lethal overdoses to patients."

That's the tragedy, and it's a tragedy that Brown (and Lithwick, for that matter) will never face or even be able to conceive. The "messy lives" that they lead are lives of privilege and power.

For the victims of "End of Life Option Act," however, there will be few options, if any, certainly not when their fates depend upon the tender mercies of the likes of Gov. Jerry Brown.



Gov. Jerry Brown

suicide against "the poor, the disabled, the marginalized, and the elderly" (to quote Prof. O. Carter Snead).

Of course none of those non-elite people make an appearance in Dahlia Lithwick's latest Slate opus. She is too busy harrumphing about how "All lawmakers should follow his example, especially when thinking about life and death," as the subhead to her piece reads.

In case we miss how deeply Brown pondered "life and death" questions, her post is accompanied by a photo of a somber Brown, his eyes cast downward as if the weight of the whole world were on his weary (but humble) shoulders. And, besides, who better to help these powerless people shuffle off this mortal coil than

modesty with the dreaded "moral certainty" of—guess who?—pro-life legislators "who would deny a woman the right to end her pregnancy..."

But the whole premise of the article (and many like it) is a farce, a half-baked talking point repeated over and over by those who have no interest in looking at the real life implications of a law that had been defeated over and over and then "rammed through a 'special' session of the legislature convened to address the state's Medicaid budget," as Diane Coleman, President and CEO of the disability right group Not Dead Yet, explained.

What a sick joke—to turn a decision to abandon those who most need protection into the triumph of modesty.

Abortion clinic owner: “Planned Parenthood should be defunded”

By Sarah Terzo

Diane Derzis, owner of the only abortion clinic in Mississippi, was on “The Alan Colmes Show” defending abortion and complaining about laws requiring abortionists to have admitting privileges. She says many interesting things in



Jackson Women's Health Organization owner Diane Derzis
(Associated Press)

the video, some of which I'll address in future articles.

As you can see in this video of Colmes' radio show, he is a very sympathetic interviewer. He lobs Derzis softball question after softball question, setting her up to spout the typical pro-abortion rhetoric. For example, Colmes makes sure to maneuver Derzis into saying that regulations requiring clinics to meet basic health standards and hire abortionists with admitting privileges have nothing to do with women's health – it's just those nasty, evil anti-choicers trying to take women's rights away. And, of course, he makes sure to bring up the horrors of self-induced and illegal back alley abortions that were allegedly rampant before *Roe v. Wade* (even though much of that has

been debunked and, in fact, the former medical director of Planned Parenthood wrote in 1960 that the 90% of all illegal abortions were performed by “licensed physicians... in good standing” and that “abortion, whether therapeutic or illegal,

is in the main no longer dangerous”).

Yet despite the fact that Colmes handles Derzis with kid gloves, there is one major surprise in the interview. Things get strange when the subject turns to Planned Parenthood.

Colmes: Are there Planned Parenthood facilities where you are? Do they exist in Mississippi? What is their relationship to clinics like yours?”

Derzis: The Planned Parenthood in Mississippi does not do abortions. They do – we actually do not have a relationship....

This prompts Colmes to launch into the typical defense of Planned Parenthood that

we've all heard so many times:

Colmes: I see. So most of what Planned Parenthood does is not abortion, with Republicans, this is a cause célèbre, they want to defund it, when in fact, the Planned Parenthood in Mississippi doesn't go anywhere near what you do.

Then Derzis says is something that shocks Colmes and probably all of the program's pro-choice listeners as well.

Derzis: I agree that Planned Parenthood should be defunded. Absolutely. They actually do more



Alan Colmes

abortions than anyone in the country, even though they talk about doing only 3%, that's not quite accurate – they do more than anyone in the country.

And they are the Wal-Mart of abortion. I'm not a Planned Parenthood defender here.

Colmes: I guess I'm surprised to hear that.

Derzis: I know it, because everyone else goes along with the, what we're supposed to say, and the PC thing, and I'm just-

Colmes: All right.

Derzis: Not like that.

So here we have an admission that Planned Parenthood is mostly about abortion – something that pro-lifers have been saying all along. We already know statistically that they do the majority of abortions in the US (around 40%), now we have it straight from the mouth of another abortion provider. Planned Parenthood, according to Derzis, is all about abortion.

Derzis is not the only abortion provider to compare abortion to Walmart.

In her 2007 book *Safe, Legal and Unavailable? Abortion Politics in the United States* pro-choice author Melody Rose writes:

For example, Peter Bours, a physician in Oregon, reports that new Planned Parenthood franchises in his area are making one of his offices financially untenable; whereas he has once provided 100 or more

See “Defunded,” page 18

Planned Parenthood's defense of using fetal organs to 'treat and cure' is a sham

By Bill Cassidy and David Prentice

In the wake of videos exposing its involvement in trading fetal organs, Planned Parenthood has resorted to a "silver lining" defense. The taking of brains, hearts, lungs and livers from the unborn, even the delivery of intact fetal bodies to commercial middlemen, is hailed as a valid scientific procedure. The words "treat and cure" are used.

Proponents of using fetal body parts from induced abortion claim three areas of medical research need harvested tissue: transplantation to treat diseases and injuries, vaccine development and basic biology research. Yet the facts show neither necessity nor therapeutic success when relying on an aborted baby's organs and tissues.

First, a little history. Human fetal tissue transplant research began decades ago. The first recorded fetal tissue transplants were in the 1920s in the U.K. and Italy; the transplants failed. In the United States, the earliest documented attempts came in the 1930s, to treat diabetes, and they also failed, as did transplant attempts in succeeding decades. By 1991 approximately 1,500 people had received fetal pancreatic tissue transplants in attempts to treat diabetes, mostly in the former Soviet Union and the People's Republic of China.

Up to 24 fetuses were used per transplant, but fewer than 2 percent of patients responded. Today, rather than failed fetal tissue, patients take insulin shots and pharmaceuticals to control their diabetes, and adult stem cell transplants

have shown initial success at ameliorating diabetes.

Between 1960 and 1990, numerous attempts were made to transplant fetal liver and thymus for various conditions. According to a review just last year, "the clinical results and patient survival rates were largely dismal." Conditions such as anemias and immunodeficiencies are now



treated routinely with adult stem cells, including umbilical cord blood stem cells, in some instances even while the patient is still in the womb.

Between 1988 and 1994, roughly 140 Parkinson's disease patients received fetal tissue (up to six fetuses per patient), with varying results. But this glimmer of utility faded when subsequent reports showed that severe problems developed from the transplants, including growth of non-brain tissues (e.g., skinlike tissue, hair, cartilage) in the brain.

The first full clinical trial (funded by the National Institutes of Health—NIH) using

fetal tissue for Parkinson's patients was prominently featured in *The New York Times* in 2001, documenting the tragic results. Doctors described the patients writhing, twisting, and jerking with uncontrollable movements, further noting the results were "absolutely devastating," "tragic, catastrophic," "a real nightmare." A second large,

boy developed tumors on his spine resulting from fetal stem cells injected into his body.

In decided contrast to results from fetal tissue, a recent review found that as of December 2012, over one million patients had been treated with hematopoietic (blood-forming) adult stem cells (the basis of bone marrow or cord blood transplants), with uncounted additional patients benefiting from other adult stem cell types and transplants.

In terms of claims regarding vaccine development, it is true that early attempts (1940s and 1950s) at growing viruses used cultures of mixed human fetal tissue, because it was the only human tissue that scientists knew how to grow in the lab at that time. For the same reason, viruses including poliovirus were often grown in human fetal cell lines such as WI-38 and MRC-5 in the 1960s and 1970s.

But now most manufacturers of polio vaccine and other vaccines use other, more suitable cell types including monkey cells, and most do not use fetal cells. Newer cell lines and better culture techniques make reliance on fetal cells antiquated. Moreover, the Centers for Disease Control and other leading medical authorities now say, "No new fetal tissue is needed to produce cell lines to make these vaccines, now or in the future."

A clear example of the lack of necessity for further fetal tissue is development of the new vaccine — rVSV-ZEBOV — against

controlled study published in 2003 and also funded by NIH showed similar results, with over half of the patients developing potentially disabling tremors caused by the fetal brain tissue transplants.

These two large studies led to a moratorium on fetal tissue transplants for Parkinson's. Long-term follow-up of a few of the patients in these studies showed that even the grafted fetal tissue that grew in patients' brains took on signs of the disease and were not effective.

Disastrous results for patients are seen not only with fetal tissue but also with fetal stem cells. In a recent report, a young

Told her twins only had 5% chance of survival, Mom refuses abortion, girls now the picture of health

By Dave Andrusko

It's been a long, remarkable journey for Lily and Darcy Ellis. Two years ago doctors advised their mother, Rachel, that she should abort. A year later they had role on the BBC hospital drama "Casualty." Today "The inseparable twins" are "a picture of health – and love nothing more than bouncing up and down on the trampoline in their garden wearing matching skirts," according to the British publication *The Mirror*:

In 2013, Rachel heard the startling diagnosis. At 18 weeks her twins had TTTS, an exceedingly rare and potentially lethal condition that occurs only in identical twins. In TTTS, one sibling, called the recipient, takes too much blood from the other—the "donor twin"—who can suffer stunted growth as a result, or die.

"The shared placenta contains abnormal blood vessels, which connect the umbilical cords and circulations of the twins," according to the Twin to Twin Transfusion Foundation. "The common placenta may also be shared unequally by the twins, and one twin may have a share too small to provide the necessary nutrients to grow normally or even survive."

In her post for *Friday Magazine*, Rachel said doctors gave the twins only a 5% chance of survival. The first option doctors presented to Rachel was abortion, but she refused.

"I didn't have to hear any more on the subject," Rachel wrote. "I knew that wasn't an option for me."

According to *The Mirror*, Rachel underwent called selective laser ablation. She

had the radical operation at Fetal Medicine Unit at St Michael's Hospital in Bristol – watching the whole procedure on a screen because she was only under a local anaesthetic.

Doctors inserted a camera and fibre optic laser down a tiny endoscope into her womb, using it to seal off some

of the shared blood vessels to ensure the girls received a more equal supply of blood.

Under a local anesthetic, Rachel watched the entire procedure on a video screen. "At first I couldn't make anything out but then [my fiancé] Stephen [Ellis] said: 'Look! Look at that!'" Rachel recalled. "The camera was moving up behind one of the twins and I could see her tiny clenched hand on the screen. 'That's incredible!' I gasped."

The very next day Rachel's water broke. She wrote

"I was convinced it was the end, that I'd lost the twins. I was still only 19 weeks pregnant. How could they survive being born at such a young age?"

Rushed to the hospital, instead of losing the twins, a more detailed scan revealed that the twins' sacs had both resealed and filled up with amniotic fluid again – an event the ultrasound technician called "incredibly rare."

When one of the twins started to fall behind the other in growth again, at 34 weeks doctors recommended

a C-section. Lily and Darcy were born weighing about 5 pounds.

"They were perfect. My little miracles," Rachel wrote for *Friday Magazine*

As *The Mirror* explained the twins appearance on BBC hospital drama "Casualty," playing "the same role of a baby of a homeless family; the director of the show told Rachel the pair were the best babies he had ever worked with in the industry."

Two years after their miraculous births, the twins are a bouncing bundle of energy. Rachel, 29, told *Wales One*

"They are just brilliant and are both growing up so fast.

"They are so close, I caught them feeding each other the other day – it was so cute.

"Wherever one goes, the other follows, it's wonderful to see them together and to see that they are so close to each other."



The twins celebrated their birthdays by dressing in their favorite blue tutus

Abandoned in cardboard box, little baby saved when neighbors hear her cries

By Dave Andrusko

At first neighbors in the town of Corby, Northamptonshire, England, thought it was just garbage set out for collection. After all it was just a Tommee Tippee box, the kind that would have contained a starter

I left. It was found around 9am so it could have been there for anything up to an-hour-and-a-half.

‘When I found out the box had been found

She was wearing a nappy and wrapped in two blankets when she was found in late September. It is not known how long she was there before she was discovered.

According to the *Daily Mail*'s Martin Robinson, Janet Barr, a local resident, said

‘I saw police in the road knocking on doors and heard from a friend that a little baby had been found. I was very upset but thank God the little one sounds like she will be okay. My friend said she overheard a PCSO [a police community support officer] say that several people walked past the box before anyone realized what was inside. The recycling bins are collected around here on a Wednesday so it's perfectly possible someone thought it was a bit of rubbish and left it out for the bin

men. It doesn't bear thinking about what could have happened to the little baby. It's a miracle someone heard her crying and had the presence of mind to investigate.

Authorities have released a photo of the little one and are urging the mother to come forward. Robinson wrote

In a direct appeal to the mother, Detective Superintendent Steve Lingley said: ‘Your baby is safe and being well cared for.

‘My worry is you. It must have been an awful decision you made to have left this baby where you did in Corby.

‘As a parent my plea to you, as another parent, is to come forward and let us help you.

‘We would like the mum to come forward and tell us she is well.’



kit for mothers beginning to breastfeed, with a “sold” sticker on it.

And then....cries...the unmistakable cries of a little baby.

According to the *Daily Mail*

Mother-of-three Nana Konadu, 40, lives in the house closest to where she was found.

The Argos shop-assistant said: ‘In went to work at about 7.30am. I don't think the box was there when

by my house I was shocked. Who could do such a thing?

‘My cousin told me the box was found under a tree. It is possible no one could have found the baby. It's so lucky someone found her.’

The abandoned baby girl, estimated to be between four and six weeks old at the time she was found, is doing well at Kettering General Hospital.



The horror of Planned Parenthood and how to stop it

By Tony Lauinger

The grotesque spectacle of Planned Parenthood abortionists callously, cavalierly selling the organs of babies they've killed has enraged the American public. We've known Planned Parenthood aborts one-third of a million unborn children each year, as it operates the biggest chain of abortion mills in the country — but now we learn it is harvesting and trafficking in the body parts of the innocent children it slaughters.

This nauseating scandal has made it starkly clear that this

death-dealing organization, engaged in the grisly, systematic marketing of human organs for money, has forfeited any claim to taxpayer dollars for any part of its budget. More than half a billion dollars from taxpayers currently go each year to Planned Parenthood. How is it that abortion advocates seek to justify killing unborn children based on a so-called right of “privacy” — and then demand “public” funding?

See “Horror,” page 33



The Unasked Question during the Democratic Debate: “Is there an abortion you would not allow?”

By Karen Cross, National Right to Life Political Director

In a nutshell, while the recent Democratic debate was rather boring, I watched on the chance that the biased, pro-abortion media who panders to candidates on the left would ask a challenging question, exposing the extreme position of each of the Democratic presidential candidates on abortion.

It didn't happen. The word “abortion” never left the lips of *CNN* moderator Anderson Cooper nor the five Democratic presidential candidates.

In light of the recent undercover videos exposing Planned Parenthood's complete and utter disregard for the lives of preborn babies in which the sale of their body parts was discussed over dinner, Republican presidential candidates were grilled about their abortion positions. But even when they weren't asked specifically, they brought up their support for life.

Because the abortion question

was not asked during the Democratic debate, we must look at past records and statements.

Following is an overview of the abortion positions of the Democratic presidential candidates who participated in the October 13 debate (in alphabetical order).

Former Governor Lincoln Chafee

Chafee supports the current policy of abortion on demand, which allows abortion for any reason. While in the U.S. Senate, he voted against the Partial-Birth Abortion Ban Act.

After the release of the undercover videos, Chafee tweeted:

“I support Planned Parenthood. Planned Parenthood has a long record of helping women.”

Former Secretary of State Hillary Clinton

As a U.S. senator, Hillary Clinton maintained a 0% pro-

life record, voting against the pro-life position on every vote.

In 2003, Clinton voted against the Partial-Birth Abortion Ban Act, and voted to endorse *Roe v. Wade*, which allows abortion for any reason.

When the U.S. House passed the Pain-Capable Unborn Child Protection Act on May 13, 2015, Clinton issued a statement opposing the bill, referring to it as part of a “dangerous” trend.

In 2009, Clinton was awarded Planned Parenthood's Margaret Sanger Award.

Clinton, following the revelation of the undercover videos, reiterated her support for Planned Parenthood. She remarked:

“I think it is regrettable that Republicans are once again trying to undermine, even end those services that so many women have needed and taken advantage of. I think that it's another effort by the Republicans to try to limit the health care options of women and we should not let them

succeed once again.”

Here are 10 times so far in the 2016 campaign that Hillary Clinton has showed her extremism on abortion: www.nationalrighttolifenews.org/news/2015/09/10-times-hillary-clinton-revealed-how-extreme-she-is-on-abortion/#_Vh_3o_IVhBc

Former Governor Martin O'Malley

O'Malley supports the current policy of abortion on demand, which allows abortion for any reason.

In April 2014, O'Malley received Planned Parenthood of Maryland's Betty Tyler Award “for advancing reproductive rights in Maryland.”

In July, while admitting he had not seen the videos, O'Malley dismissed them, saying:

“... I don't generally make a habit of responding to right-wing videos.”

See “Unasked,” page 36

Pro-Life Sen. Kelly Ayotte to Face Pro-Abortion Gov. Maggie Hassan in NH Senate Race

By Andrew Bair

On October 5 the 2016 New Hampshire Senate race began in earnest when Gov. Maggie Hassan, a pro-abortion Democrat, announced she will challenge pro-life incumbent Sen. Kelly Ayotte. Prior to Hassan's announcement, the Rothenberg & Gonzalez Political Report rated the contest "Leans Republican," although many observers expect the race to turn into a dead heat.

Serving in the U.S. Senate since January 2011, Kelly Ayotte holds a 100% rating from National Right to Life. Key votes include the Pain-Capable Unborn Child Protection Act (protecting unborn babies 20 weeks and older), cutting off federal funding for Planned Parenthood, repealing Obamacare, and preserving parental involvement when a minor crosses state lines in order to obtain an abortion.

Pro-life advocates will also remember that Kelly Ayotte, while serving as Attorney General of New Hampshire, fought Planned Parenthood all the way to the U.S. Supreme Court in defense of

New Hampshire's parental notification law, enforcement of which had been blocked by a federal court. The Supreme Court revived the law, while ruling that it could not be applied in certain circumstances.

By contrast, Maggie Hassan

2012 endorsement of Hassan for Governor, EMILY's List said, "Now, more than ever, our states need the leadership of strong, pro-choice Democratic women like Maggie Hassan."

Following the series of undercover videos at Planned

is the result of an ideological and political attack against Planned Parenthood and a woman's right to make her own healthcare decisions."

In 2014, Gov. Hassan signed into a law a measure requiring a 25-foot buffer zone outside the entrances of abortion centers in an attempt to limit the free speech of pro-life demonstrators and sidewalk counselors offering alternatives to abortion.

In order to retake control of the U.S. Senate, Democrats need to win a net 5 seats in the 2016 elections (or 4 seats, plus the White House). Strategists view New Hampshire, Florida, Illinois, Pennsylvania and Wisconsin as the most likely seats to change hands from Republican to Democrat.

In a perfect storm for Democrats, other potential pickups could include Arizona and North Carolina and Ohio. In addition to defending those 7 seats, Republicans have opportunities to pick up seats in Colorado and Nevada.



Sen. Kelly Ayotte speaking at a National Right to Life convention.

is a favorite candidate of EMILY's List, the political action committee that only backs female Democrats who support abortion without limits. Hassan was endorsed by EMILY's List when running for state Senate and running for Governor. In announcing their

Parenthood revealing the harvesting and trafficking of unborn baby body parts, the New Hampshire Executive Council voted against state contracts with Planned Parenthood. Gov. Hassan blasted the decision, saying, "It is clear that today's vote

Five Takeaways from House Oversight Committee hearing on PPFA's governmental funding

From page 8

the second trimester, even up to 24 weeks (with hints it can 'help' if the woman is even more advanced)."

Note that a recent *New England Journal of Medicine* study found that 23% of infants are surviving at an 22 weeks of pregnancy (20 weeks after fertilization) with treatment.

#5. Give pro-abortion Democrats on the House

Oversight and Government Reform Committee their due. In their world to ask Cecile Richards exactly what she meant and ask if she would agree to provide certain information was "disgraceful," evidence of misogyny, beating up on a woman, "insensitive," an "offensive approach" filled with "badgering" rhetoric.

Meanwhile, of course,

committee Democrats had no trouble lambasting committee Republicans for aligning themselves with "radical extremists who manipulate the facts." Nor were they shy about insisting the committee's "integrity" had been compromised by even having this hearing. And, they mimicked Richards' self-serving claim that the

committee's inquiry was not, in the end, about Planned Parenthood, but was an attack the 2.7 million women who receive "health care" from Planned Parenthood.

But committee chairman Jason Chaffetz (R-Utah) ended by summarizing the areas the committee still had questions about. There were plenty.

Stay tuned.

Planned Parenthood “Baby-Free” Fetology

By Randall K. O’Bannon, NRL Director of Education & Research

Imagine a full nine and half months of pregnancy – without a mom or a baby. Impossible, you say? Well, not if you’re Planned Parenthood.

It doesn’t pop up right away as soon as you hit the website, but look a while and you’ll find Planned Parenthood’s section on “Pregnancy.” But then look far and wide for the words “mother” or “baby.”

Little success. Why, it’s almost like they don’t even exist.

You won’t find “mother” or “baby” in the section on “Considering Pregnancy” or “Pre-Pregnancy Health.”

Nothing in “How Pregnancy Happens.” There is no mention of the “baby” a potential “mother” would be looking for in the entire section on “Pregnancy Test.”

By contrast, “Abortion” is mentioned seven times in the opening section on “Pregnancy Options” but not “baby,” “mom” or “motherhood.”

“Baby” does show up two times, in a single paragraph of a 2,100-word-long description of “Prenatal Care,” which is supposed to be all about making sure a mother [whoops! There’s that word again] provides a healthy environment for her developing child. But that’s about it.

“Miscarriage” and “Ectopic Pregnancy” are written without any mention of a “mother” losing a “baby,” and the section on “Infertility” proceeds without reference to the “baby” or “child” whose absence is what defines the condition!

Pregnancy without a baby

Take a look at the section “Pregnancy Week by Week.” No mention of “mother” or “mom” there either, despite

the fact that that is precisely what the process of pregnancy is about. Sure, they’ll mention “woman” or “women” 37 times (which, even for Planned Parenthood) would seem to be a prerequisite, but you can obviously be a woman without being a mom.

“Baby” gets short shrift too. You won’t find it anywhere, not mentioned once in any of the week by week descriptions. That would seem hard to do,



but they pull it off.

Okay, they mention “embryo” ten times and “fetus” 36 times, but these are simply stages of a baby’s life up until birth, right?

You’d think they could say the “B” word after birth, but you’d be mistaken. We do get three mentions of the “newborn,” a slightly more humanizing term allowable after birth, but that’s about the best Planned Parenthood can manage.

It is hard to pick up any of the celebratory tone that accompanies so many pregnancies in the “week by

week” narrative. You get long descriptions of the risks and burdens of pregnancy, but not a lot of wonder.

Oh, you’ll read of fatigue, nausea, deal with bloating, frequent urination, mood swings, tender or swollen breasts, weight gain, etc. that many moms feel early in their pregnancies, but none of the wonder, the excitement, the anticipation and the joy that are equally real and in the end,

so much more memorable for many moms.

You do get some details about fetal development, details that are sorely lacking in their descriptions of abortions performed at the exact same stages.

Of course, everything is complicated by the fact that, according to Planned Parenthood, pregnancy doesn’t actually begin until the third or fourth week of pregnancy. Yes, you read that correctly.

For Planned Parenthood, though the pregnancy is dated from the first day of a woman’s

last menstrual period (LMP), the actual pregnancy itself does not begin, Planned Parenthood says, until the “fertilized egg” implants in the uterus some time about 6 to 10 days after fertilization.

Confusing fetology

While it is true that the tradition of dating by the LMP method goes a long way back to the time before there was any way to actually scientifically determine fetal age, it is clear that Planned Parenthood is relying on this ambiguity to sew some confusion about the development of the unborn child, scant enough as the information they provide already is.

So, when “egg meets sperm,” somewhere late in weeks 1-2, “they combine to form...” well, not a new, unique, exciting individual human being with a world of potential, but simply “...one cell.” That’s “fertilization” for you.

Then, in weeks 3-4, the “fertilized egg” travels down the fallopian tube and “divides into more and more cells” that head for the uterus and “form a ball” and finally attach to the uterine wall after floating free for a few days.

Well, sort of.

From the moment of conception, the DNA of that single first cell is already packed with full instructions about the new individual’s sex, eye color, shoe size, brain capacity and other physical traits. Multiplying and dividing rapidly, within just a matter of days, the cells of this tiny new human begin separating into those that will form the

Woman sees ultrasound, realizes she's pregnant with "a little person"

By Sarah Terzo

From a woman who was being tested to see if her baby had Down syndrome or another handicap; she had been considering abortion if the baby was discovered to be disabled. She's describing what she saw on the ultrasound:

"I was on this incredible high, like I saw the head and the little shoulders and then I came home and I suddenly crashed because I thought, there was this little person, I mean, it looked like

a little person. And I was more upset than I'd ever been because what would I do? You know, would I have an abortion? Because here I've seen it, and it looks like a little person."

Rayna Rapp "Testing Women, Testing the Fetus: the Social Impact of Amniocentesis in America" (New York: Routledge, 1999) 129

Editor's note. This appeared at clinicquotes.com.



Abortion clinic owner: "Planned Parenthood should be defunded"

From page 11

abortions per month in his Portland office, he now performs around 20. Referring to Planned Parenthood as "the Wal-Mart of abortion clinics," Bours contends that the larger providers offer inferior services, and that as a result women are being poorly served by the expansion of the organization in abortion provision.

Although very competitive in terms of price, Bours maintains that their level of care is lower, and that patients often see clinicians with less training than physicians at smaller facilities might have.

One gets an idea of mass-produced products;

substandard abortion procedures and clinics which process woman after woman, giving them abortions and sending them on the way.

Faltering, Colmes tries to get the interview back on familiar ground, attempting again to defend Planned Parenthood.

Colmes: But as I understand it, because of the Hyde Amendment, they can't, federal dollars don't go to Planned Parenthood for abortions.

Derzis: Well it's... That is exactly what they say, but it, I will tell you now, that Planned Parenthood has done remarkably well through this fiasco, even though they drug the rest of us through the mud ... They had

done remarkably well.

Colmes: But what I don't understand is, in many communities, Planned Parenthood is the only place women have to go, why would you want money taken away from them since many women –

Derzis: Alan, they make tons of money. That's what I'm telling you here. They make so much money – check out what the CEO makes a year, and I'll tell you that it's right under \$500,000. [In fact, CEO Cecile Richards makes over \$500,000. Her income in 2012 was \$523,616.]

In just a few minutes, Derzis has blown a hole through all

of the propaganda surrounding Planned Parenthood. Her candor shows that:

1. Planned Parenthood is all about abortion.

2. The 3% statistic is misleading, and

3. Planned Parenthood doesn't need public funding.

Prolifers knew this all along, of course. But it's nice to see the facts verified by an unexpected source.

And, just in case there are any doubts about Derzis' probationary credentials (doubts which would seem impossible to have after seeing the video) she says:

I thank God every day I had an abortion. I am not ashamed of that. I have no problem talking about it.

“The toughest part of a D&E abortion is extracting the baby’s head”

Editor’s note. The following is a portion of the October 8 written testimony of Anthony Levatino, MD. Dr. Levatino, who once performed abortions, appeared before the House Committee on the Judiciary which was holding its second hearing on “Planned Parenthood Exposed: Examining Abortion Procedures and Medical Ethics at the Nation’s Largest Abortion Provider.”

of her head to the bottom of her rump not counting the legs. Your patient has been feeling her baby kick for the last month or more but now she is asleep on an operating room table and you are there to help her with her problem pregnancy.

The first task is remove the laminaria that had earlier been placed in the cervix to dilate it sufficiently to allow the procedure you are

catheter through the cervix and instructing the circulating nurse to turn on the suction machine which is connected through clear plastic tubing to the catheter. What you will see is a pale yellow fluid the looks a lot like urine coming through the catheter into a glass bottle on the suction machine. This is the amniotic fluid that surrounded the baby to protect her.

With suction complete, look

is a blind procedure. The baby can be in any orientation or position inside the uterus. Picture yourself reaching in with the Sopher clamp and grasping anything you can.

At twenty-four weeks gestation, the uterus is thin and soft so be careful not to perforate or puncture the walls. Once you have grasped something inside, squeeze on the clamp to set the jaws and pull hard – really hard. You feel something let go and out pops a fully formed leg about six inches long. Reach in again and grasp whatever you can. Set the jaw and pull really hard once again and out pops an arm about the same length. Reach in again and again with that clamp and tear out the spine, intestines, heart and lungs.

The toughest part of a D&E abortion is extracting the baby’s head. The head of a baby that age is about the size of a large plum and is now free floating inside the uterine cavity. You can be pretty sure you have hold of it if the Sopher clamp is spread about as far as your fingers will allow. You will know you have it right when you crush down on the clamp and see white gelatinous material coming through the cervix. That was the baby’s brains. You can then extract the skull pieces. Many times a little face will come out and stare back at you.

Congratulations! You have just successfully performed a second trimester Suction D&E abortion. You just affirmed her right to choose.



Dr. Anthony Levatino

Imagine if you can that you are a pro-choice obstetrician/gynecologist like I once was. Your patient today is 24 weeks pregnant. At twenty-four weeks from last menstrual period, her uterus is two finger-breadths above the umbilicus. If you could see her baby, which is quite easy on an ultrasound, she would be as long as your hand plus a half from the top

about to perform. With that accomplished, direct your attention to the surgical instruments arranged on a small table to your right. The first instrument you reach for is a 14-French suction catheter. It is clear plastic and about nine inches long. It has a bore through the center approximately $\frac{3}{4}$ of an inch in diameter. Picture yourself introducing this

for your Sopher clamp. This instrument is about thirteen inches long and made of stainless steel. At the business end are located jaws about $2\frac{1}{2}$ inches long and about $\frac{3}{4}$ on an inch wide with rows of sharp ridges or teeth. This instrument is for grasping and crushing tissue. When it gets hold of something, it does not let go. A second trimester D&E abortion

Judge upholds one pro-life Oklahoma law, puts a hold on second

By Dave Andrusko

On October 14, after hearing arguments from both sides, District Judge Patricia Parrish upheld one pro-life Oklahoma law — HB 1409 — and issued a temporary injunction that blocked a second — HB 1721 — from taking effect.

“The temporary injunction will last until a full hearing is held on the center’s challenge to the laws, and Parrish gave



District Judge Patricia Parrish

attorneys three months to prepare briefs,” according to the *AP*’s Sean Murphy.

Both HB 1409 and HB 1721 were due to go into effect November 1. HB 1409, like HB 1721, passed by a huge margin in both houses of the Oklahoma legislature and was signed into

law by Gov. Mary Fallin. The Soonier state joined Missouri, South Dakota, and Utah in allowing women considering an abortion 72 hours to ponder this life-and-death decision.

Tony Lauinger, State Chairman of Oklahomans For Life, told *NRL News Today* that HB 1409 improves Oklahoma’s current abortion-informed-consent law by increasing from 24 hours to 72 hours the waiting period before an abortion, by requiring that abortion facilities, on their websites, link to the state’s Woman’s Right to Know website, and by providing that mothers considering abortion be informed that “abortion will terminate the life of a whole, separate, unique, living human being.”

“The purpose of the law,” he added, “is to provide a better opportunity for adequate reflection — following receipt of informed-consent information about risks, alternatives, and the development of the unborn child — before undertaking the irrevocable act of taking a child’s life.”

However Judge Parrish temporary enjoined HB 1721, the *AP* reported. HB 1721 is titled the “Unborn Child Protection from Dismemberment Abortion

Act” and is on the books in Oklahoma and Kansas. What is a dismemberment abortion?

“Dismemberment abortion kills a living unborn baby by tearing his body apart piece by piece,” said National Right to Life Director of State Legislation Mary Spaulding Balch, J.D. “This is done to an unborn child who has a beating heart, brain waves, and every organ system in place. Dismemberment abortions occur after the baby has reached these milestones.”

Lauinger pointed to the on-camera statements of Dr. Deborah Nucatola, Senior Medical Director for the Planned Parenthood Federation of America, in the first of the undercover Planned Parenthood videos released this summer regarding the dismemberment abortions she performs.

Dr. Nucatola said

“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.”

“Imagine what the Humane Society would say if the dog pound were eliminating unwanted pets by ripping the legs off living animals,” Lauinger said. “As U.S. Supreme Court Justice Anthony Kennedy wrote of dismemberment abortions in *Stenberg v. Carhart*: ‘The fetus, in many cases, dies just as a human adult or child would: It bleeds to death as it is torn apart limb by limb.’ “This tragic decision demonstrates the insidious nexus that exists between the abortion industry and their willing accomplices in black robes as they jointly carry on their bloody assault on our human family’s most vulnerable, helpless little members.”

On June 25, Shawnee County District Court Judge Larry Hendricks issued an injunction that barred Kansas’ first-in-nation law [Senate Bill 95] from going into effect July 1. The judge’s order will remain in effect while the state appeals the ruling. The full state court of appeals will hold a hearing on the matter December 9.

Nancy Pelosi's dubious "smackdown"

Editor's note. This appeared on the blog of Secular ProLife and is reprinted with permission.

Today's guest post is by JoAnna Wahlund.

Maybe someone out there can explain this, because I am really confused.

Nancy Pelosi held a weekly briefing on October 1. You can watch the video at www.c-span.org/video/?328473-1/house-minority-leader-nancy-pelosi-dca-weekly-briefing

At one point, a CNS news reporter asked, "In reference to funding for Planned Parenthood: Is an unborn baby with a human heart and a human liver a human being?"

Pelosi responded: "Why don't you take your ideological questions—I don't, I don't have—"

Point of Confusion #1: "Ideological" is defined as "an adjective that describes political, cultural, or religious beliefs." The question "Is an unborn baby with a human heart and a human liver a human being?" isn't a question about political, cultural, or religious beliefs. It's a question regarding scientific fact. So why does Pelosi call it an ideological question?

In fact, the reporter follows up with yet another scientific (not ideological) question. "If it's not a human being, what species is it?"

Pelosi's baffling response is decidedly unscientific and rife with logical fallacies:

Pelosi: "No, listen, I want to say something to you. I don't know who you are..."

Point of Confusion #2: So what? How does his identity change his questions or make them less relevant?

Pelosi: "...I am a devout practicing Catholic, a mother of five children. When my baby was born, my fifth child, my oldest child was six years old."

Point of Confusion #3: How is that relevant? What does this have to do with the scientific question as to whether or not an unborn baby with a human heart and a human liver is a human being?

Pelosi: "I think I know more about this subject than you, with all due respect."

Point of Confusion #4: How does her response prove that she "knows more about this subject" than the reporter? He asked her a scientific question and she responded with, "I'm a Catholic with five kids, so I know more about this than you." Um, what? That makes no sense. As Secular Pro-Life's very existence proves, you don't have to be a Catholic, Christian, or theist to know that abortion is wrong (and sadly, some Catholics, like Pelosi, don't know or won't acknowledge that abortion is wrong). Abortion is first and foremost a human rights issue, not solely a religious issue.

Moreover, I happen to be a "devout practicing Catholic" myself. Unlike Pelosi, I actually believe and practice what the Catholic Church teaches regarding abortion, a teaching of which Pelosi, who claims to be both "devout" and "practicing," is ignorant.

In fact, I'm a mother of nine children (five born, one unborn, three lost to miscarriage). My oldest is 10, and will be 11 when his/her youngest sibling will arrive. By Pelosi's logic, I actually know more than she does about this subject. In fact, I can answer the reporter's question with actual science:

It is possible to give 'human being' a precise meaning. We can use it as equivalent to 'member of the



Nancy Pelosi

species Homo sapiens'. Whether a being is a member of a given species is something that can be determined scientifically, by an examination of the nature of the chromosomes in the cells of living organisms. In this sense there is no doubt that from the first moments of its existence an embryo conceived from human sperm and egg is a human being. — [emphatically pro-choice] Dr. Peter Singer, *Practical Ethics*, 2nd ed. (Cambridge: Cambridge University Press, 1993, 2008), 85-86.

Was that so hard?

Pelosi: "And I do not intend to respond to your questions, which have no basis in what public policy is that we do here."

Point of Confusion #5: So

Pelosi believes that matters of science have no basis in public policy? If so, why does the government have an Office of Science and Technology

Policy? Would she say that science has no basis in public policy regarding climate change? Is she learning the "science" of abortion from Bill Nye instead of actual scientists?

Point of Confusion #6: Let's take a look a sampling of headlines following this briefing:

Nancy Pelosi Crushes Reporter's 'Ideological' Parenthood Question: I Know More Than You – Mediaite

Nancy Pelosi smacks down a conservative reporter's anti-abortion talking points – Salon.com

WATCH Nancy Pelosi Put A Right-Wing Reporter In His Place For

See "Smackdown," page 38

WashPost: ‘3 Pinocchios’ to Planned Parenthood Supporters for ‘Slippery’ Mammogram Language

By Erin Aitcheson

Of all the hits Planned Parenthood has taken lately, none must be more demoralizing than the one coming from, of all places, *The Washington Post*. Really.

In the wake of the September 29 congressional hearings on



defunding America’s largest abortion mill, the Post took to “fact-checking” some of the claims PP supporters have been making – specifically regarding the non-abortion services the organization provides.

The Post reported:

‘All of the signatories [of a letter in support of defunding Planned Parenthood] are men. None of whom will get pregnant, or need a cervical screening for cancer, or a mammogram, or a pap smear, or other life-saving services that are provided by Planned Parenthood.’
— Rep. Carolyn Maloney (D-N.Y.), House Committee on Oversight and Government Reform hearing on Planned Parenthood funding, Sept. 29, 2015

Readers asked us to fact-check Planned Parenthood supporters’ claims that the organization “provides”

mammograms. Maloney’s statement above appeared to contradict comments by Planned Parenthood President Cecile Richards’s repeated claim at a Sept. 29



congressional hearing that the organization does not, in fact, offer mammograms or have mammogram machines in its clinics.

According to *Washington Post* fact-checker Michelle Ye Hee Lee, the mammogram argument has been debunked for years. It seems everyone but Planned Parenthood supporters already knew this. According to the Post, it isn’t the fault of the supporters for clinging to the mammasham narrative all these years, it is simply misuse of language.

Ye Hee Lee stated that the mammogram controversy has been an issue for some years now with PP often saying its services include, “... mammograms, cancer screenings, cervical cancer.” President Obama has even echoed the false mammogram argument when he said a few years back that “women ‘relied’ on the organization for mammograms or that it [Planned Parenthood] ‘provides’ mammograms.”

Ye Hee Lee went on to state: **Mammograms have**

come to symbolize whether Planned Parenthood is a health-care organization that does cancer screenings — or a front for an abortion provider that masquerades as a



health-care provider. Democrats point to mammograms, as an example of a service that women can have access to via Planned Parenthood. Republicans seeking to defund Planned Parenthood show that since it doesn’t offer mammography X-rays, federal funding should be diverted to federally qualified health-care clinics that actually do.

Further, **When Democratic lawmakers or other supporters assert that Planned Parenthood “provides” mammograms, this is highly misleading language because it could be interpreted to mean that the group directly administers the X-rays. The group does not ‘provide’ mammograms. Rather, the situation is similar to other clinics where patients are referred to**

a licensed facility that can provide biopsies, X-rays or other specialized services.

So the problem is the “... continued use of misleading language to suggest that it directly administers mammograms.” By using the word “provide” and “administer” supporters are sending the wrong message that Planned Parenthood actually does provide and administer those services.

The solution to this pesky language problem? Ye Hee Lee suggested using a more “accurate term” such as access. All together now, “...women have ‘access’ to mammograms via Planned Parenthood.” Ye Hee Lee admitted, though, that “access” is still “slippery language.”

What’s more, Ye Hee Lee admitted that mammograms aren’t even a core service that Planned Parenthood provides. “So, when people talk about Planned Parenthood clients who need mammography referrals the most,” she wrote, “they are referring to a small percentage of total patients.”

So only a fraction of Planned Parenthood’s clientele need the mammograms it doesn’t provide. Got it.

Because of the slippery language of “access.” Planned Parenthood supporters were awarded three Pinocchios. Tsk Tsk. It is such a comfort knowing that fact checking has turned to splitting hairs over the words “provide” and “access.”

Editor’s note. This appeared at newsbusters.org.

Caught completely by surprise, joyful husband says, “You’re pregnant.... You’re pregnant”

By Dave Andrusko

I cannot do justice to the video Dana Griffin-Graves posted on www.youtube.com/watch?v=c_O4xnGCrKs but I will try.

The following will make you cry but those will be tears of joy.

Over the course of 17 years, Mrs. Graves and her husband Arkell Graves have suffered through four miscarriages and the loss of a baby who was stillborn. As she told *WIRC* Television

“It was definitely a struggle, a rollercoaster [of] emotions, going back and forth. I just got to the point where I wanted to stop trying.”

Recently she’d been trying to take off weight and couldn’t understand how regular exercise and walks with friends didn’t work.

Then she was shocked to discover that she was pregnant—nearly five months pregnant! Mrs. Graves decided to secretly record her husband’s response when she revealed to her unsuspecting

husband that she was pregnant.

In the quiet voice we hear throughout the video, she tells him there’s some “stuff in the oven.” He bends over, looks in and discovers a packet of buns and their unborn child’s first

ultrasound.

The look of stunned amazement and sheer joy on Mr. Graves’ face is priceless.

Then he says, “You’re pregnant.” No response. “You’re pregnant!”

“That’s why I couldn’t lose

weight,” she says softly

“You’re pregnant,” he repeats one more time.

“Guess how far long?”

“How long?” he asks

“19 weeks, almost five months.”

“Come here” he tells his wife tenderly.

“Due February 16,” she responds.

“Come here” he says one last time and with more urgency.

“And it’s a boy.”

At that point Mrs. Graves breaks into uncontrollable weeping.

The *WIRC* story is beautifully done. You couldn’t help thinking of the couples you know who struggle with infertility.

But Mrs. Graves’s concluding remark to the reporter also reminds you of the stories in the Bible of women unable to bear children.

“It shows that God is able to do any and all things,” Mrs. Graves concluded. “I’m grateful, and I said if it can help someone else and give them hope that it can happen, then that’s what it’s about.”



NRLC urges support for bill that would deny 89% of all federal funds to PPFA

From page 1

federal funds to Planned Parenthood.”

That money would be reallocated to community health centers.

The letter goes on to remind members of the House that PPFA is massively funded by the federal government and that a third of all abortions are

performed in PPFA-affiliated facilities. A series of ten undercover videos “illuminate the callous brutality that occurs daily in these abortion mills.”

NRLC has always opposed the Obamacare law and has long advocated its repeal. The letter concludes

“With respect to H.R.

3762, we particularly endorse the components that would repeal the Independent Payment Advisory Board (IPAB) and the ‘excess benefits tax’ (‘Cadillac Tax’), both dangerous mechanisms that would ultimately

contribute to rationing of lifesaving care.”

NRLC has documented the extent of Planned Parenthood’s involvement in abortion at www.nrlc.org/communications/ppfamediaabackground/

California legalization of doctor-prescribed suicide threatens vulnerable nationwide

By Jennifer Popik, JD, and Burke Balch, JD, Robert Powell Center for Medical Ethics

Jubilant death advocates are celebrating the addition of one-tenth of the nation's population to the American jurisdictions in which killing the vulnerable is becoming a standardized form of "medical treatment." They hope, and life advocates fear, that California's action will be the tipping point in their decades-long battle to eliminate those deemed burdensome, initially "voluntarily," next through surrogate decision-making for those unable to speak for themselves, and ultimately mandatorily as ordered by ethics committees or governmental action, regardless of the wishes of the victims.

After a dramatic special session in the California Legislature, on October 5, 2015, Gov. Jerry Brown became only the second governor to sign a law authorizing doctors to prescribe deadly drugs to kill their patients. This makes California the 4th state in the nation to give health care providers the power directly to cause their patients' death through active euthanasia. Oregon and Washington State each legalized doctor-prescribed suicide using ballot initiatives, and Vermont, like California, passed the bill via the legislative process.*

The pro-suicide movement, headed by Compassion and Choices (C&C) (formerly the Hemlock Society) had struggled in state after state this past legislative session to pass even one piece of legislation. C&C arguments were also rejected this year by Tennessee courts along with the New

Mexico Court of Appeals.

C&C had supported bills in 28 states plus D.C. and all had so far failed to advance (a tiny fraction of state legislatures



California Gov. Jerry Brown

currently remain in session).

In California, the regular session had come to a close, and the bill had stalled in a Senate Health committee. However, an extraordinary session, normally meant to finance state health care, was called and the bill was pushed through over the objection of dozens of diverse groups, including those in the disability rights community, the American Medical Association, and pro-life groups.

This new law, modeled on Oregon's, will authorize a doctor to prescribe a massive overdose of drugs for a person to take to end his or her life. This new law was promoted as just another end-of-life option and one that would enhance patient choices — but that could not be further from the truth.

O. Carter Snead, University of Notre Dame law professor and director of the University's Center for Ethics and Culture issued a statement pointing out

its true effect:

Governor Brown and those like him — affluent, privileged, able-bodied, and with

supportive families — are not the ones who will pay the price for this new "freedom." Governor Brown has purchased the right to assisted suicide at the expense of the disabled, the marginalized, the poor, and the elderly. Shame on him for being so selfish and short-sighted.

Because the law is so similar to Oregon's nearly 20-year-old law, we know for a fact that this law will not work the way proponents say it will. One of the major deeply flawed "safeguards" states that the patient is supposed to be terminally ill. Under the new California law, as in the other 3 states with similar laws, the patient is supposed to have six months to live or less.

However, we know that many people in Oregon who receive lethal prescriptions

but postpone taking them long outlive their prognosis. This is not due merely to errors in prediction, commonplace though these are. It is because the term "terminally ill" is interpreted to include those likely to die within the time limit without life-saving treatment, even if they could live indefinitely with treatment.

Consequently, this so-called safeguard has allowed the killing of diabetics, those with HIV, or those with hepatitis simply because without treatment they would die within six months—even though with treatment they could live much longer. Assisting suicide legalization has led people to give up on treatment and unnecessarily lose years of their lives.

Other abuses ranging from patients with dementia and mental illness receiving a lethal dose, to numerous non-terminally ill people getting prescriptions, to pressure from the state health plans to utilize the cheaper suicide option have been documented and exposed. Nevertheless, the real depth and number of abuses is difficult to know.

The law relies on doctors to self-report. However, there is no penalty for physicians who do not report statistics and complications. Furthermore, doctors are not held to the ordinary standard of medical malpractice in implementing the "safeguards," but a far lower one. Under Oregon law, the death certificate is actually falsified so that it lists the

See "California," page 39

Parents choose life for daughter diagnosed prenatally with cancer and Down syndrome

By Nancy Flanders

On August 6th, Erika and Stephen Jones welcomed their second daughter into the world. But as joyous of an occasion as it was, it brought with it a bit of fear and uncertainty. Baby Abigail had been diagnosed prenatally with not one, but two health conditions.

At their 18-week ultrasound, the family was told there was strong likelihood that Abigail had Down syndrome. A follow-up blood test proved that she did.

“Initially, we were shocked and scared, mourning the loss of a ‘normal’ baby,” wrote Mrs. Jones in a blog post. “But God quickly worked on our hearts and His peace surpassed our fear. We were soon very excited and honored to have a child with special needs.”

But as their fears were lifted and they began to accept the

diagnosis of Down syndrome, doctors had more news for them to take in. The 30-week ultrasound revealed a mass growing in Abigail’s brain. It was a rare cancerous tumor that was replacing the baby’s brain matter.

“Our hearts were broken and our minds weighted with questions and fear of the unknown to come,” wrote Mrs. Jones.

As the pregnancy progressed, so did the tumor – and doctors offered little hope.

“Leaning on the grace and perfection of our God, we knew little Abby’s life had a purpose, no matter how long or short it was,” explained Mrs. Jones. “We pray continually for her healing, but our faith in God was/is not based on Abigail’s healing. God is not a god that responds to our plans and how we want things to work out.

Our faith is in the loving Father that His plans are bigger than ours and those plans will bring people to eternity. Sometimes the things He needs to bring others to eternity may cause us to walk through tremendous pain but we need to focus joy of the eternal and not the pain of the temporal.”

Because the mass had grown so large, Abigail was born via C-section. Doctors told the family that she might not live long after birth, but Abigail has done well enough to be able to go home.

Her tumor is not treatable because of how aggressive it is, and chemotherapy could kill a baby her age. In addition, doctors would not be able to remove it all with surgery. Abigail is at home with her parents and big sister with the help of pediatric hospice.

“This situation is tragic and unbelievably difficult,” wrote Mrs. Jones. “[...] We don’t want to lose our daughter. We want to see her laugh, dance, fight with her sister, ride a bike, go to school... we want to see her life. [...] Our hearts are broken and ache for the time that we don’t have. We stand on this – our God is good.”

Abigail likely has just weeks or months to live. But her family is spending that time loving her fully, knowing that her life has value and meaning. Enjoying her for every moment she has and every second they are given.

Editor’s note. This was first published in <http://liveactionnews.org/parents-choose-life-daughter-diagnosed-prenatally-cancer-syndrome/> and is reprinted with permission.



Photo by Mary Huszcza/808 Photography

Five Takeaways from the Democrats' first presidential debate

By Dave Andrusko

According to Nielsen Fast National ratings, last Tuesday's first Democratic presidential debate, moderated by CNN's Anderson Cooper, was seen by an average audience of 15.3 million. That compares with 25 million people who watched the first Republican debate.

Here are five takeaways from the responses of the all pro-abortion lineup of former Secretary of State Hillary Clinton, Vermont Senator Bernie Sanders, former Virginia Senator Jim Webb, former Maryland Governor Martin O'Malley, and former Rhode Island Governor Lincoln Chafee.

#1. It didn't take more than a few minutes to confirm what was anticipated going in: Clinton lapped the field. She has come a long way from 2008 when a grumpy, at times seething Clinton debated then candidate Barack Obama.

The obvious deference paid to her by the four men helped. As much as some headlines talked about the "exchanges" between Clinton and Sanders, the simple truth is that when Cooper asked the other candidates about their ever-so-mild pre-debate critiques of Clinton, they folded like a cheap suitcase. As for Sanders himself, he was on the receiving end of some barbed comments from Clinton which he handled poorly.

#2. On her homerun trot Clinton touched all the

Democratic bases. But Cooper did not ask about abortion. Why? Did he worry that there would not be unanimity? Of course not. Was he concerned Clinton, the frontrunner, would make (for a Democratic audience) a faux pas? Hardly. Clinton has honed her message—and she was in front of friends.

So what did Clinton do? She shoehorned in a fiery defense of Planned Parenthood, after being set up with a soft-ball question from CNN's Dana Bash about some saying paid family leave is too expensive for small businesses:

CLINTON: Well, look, you know, when people say that — it's always the Republicans or their sympathizers who say, "You can't have paid leave, you can't provide health care." They don't mind having big government to interfere with a woman's right to choose and to try to take down Planned Parenthood. They're fine with big government when it comes to that. I'm sick of it.

Is she really positing a kind of inverted moral equivalence between paying for family leave—often to care for a newborn, which Clinton says is good—and protecting those same babies earlier in their lives from being torn to shreds, their arms and legs twisted off by brute manual force, using a

long stainless steel clamping tool, which is bad? Yes, she is.

#3. Since Clinton is the frontrunner and Sanders (at best) a temporary waystation

debates. There were only five candidates on stage, for one thing. For another, the four men walked on eggshells, fearing the inevitable backlash if they

WHERE DO THEY STAND?
PROTECTING UNBORN BABIES FROM LATE ABORTIONS

Candidate	Position
Hillary Clinton	Voted against the Partial-Birth Abortion Ban Act
Bernie Sanders	Voted against the Partial-Birth Abortion Ban Act
Lincoln Chafee	Voted against the Partial-Birth Abortion Ban Act
Martin O'Malley	Supported 1992 MD referendum that declared abortions legal for any reason until the baby is viable
Jim Webb	Supports current policy of abortion on demand

National Right to Life

for the party's outer fringe, you might have expected Webb, O'Malley, and/or Chafee to seize the opportunity and pick up their game. To put it politely, they didn't. In the case of Chafee, it was painful to watch. O'Malley was robotic (a charge usually thrown at Clinton) and Webb is the kind of Democrat who might have run with success twenty-five years ago.

#4. Almost by definition, the less than scintillating debate would be far more sedate than the first two Republican

were seen as piling on (aka criticizing) Clinton. And

#5. I don't think it is partisan to say that the Democratic bench is embarrassingly thin. The Republican presidential field offers a wealth of candidates with impressive careers in government and private business.

Note as well that whomever carries the day for the Republicans, those who don't can look forward to another day. Can anyone say that about Sanders, Webb, O'Malley, or Chafee?

Here's a thought experiment. Watch the Planned Parenthood videos and see if you are not horrified

By Dave Andrusko

There are numerous ways to gauge how much trouble America's largest abortion provider (that would be Planned Parenthood) is in. One instructive way is to put together a flat-out critique with a promotional editorial that advances the line that PPFA's troubles are behind them (not that there ought to have been any to begin with).

Let's take the latter first—from the *Los Angeles Times*—running under the headline “Planned Parenthood wisely moves on.”

The moving on refers to the letter PPFA President Cecile Richards sent to NIH in which Richards announced that, although her organization had done nothing, nothing, wrong, the affiliates harvesting fetal tissue (which includes whole body parts) would no longer be “taking reimbursement for donating fetal tissue to research programs,” as the *Times* put it.

So why, if PPFA (as Richards insists) “adheres to the highest legal, medical, and ethical standards” and is changing the policy “first and foremost” to “preserv[e] the ability of our patients to donate tissue,” why do even some of its admirers concede this is a setback? (For the answer to that, see below.)

Meanwhile back to the editorial. Even though PPFA is cleaner than Caesar's wife and the ten undercover videos do not prove PPFA has done anything wrong, “[I]n light of the controversy stirred up by the videos, the decision to stop payments of any kind for fetal tissue takes away ammunition from critics who have been calling on the government to defund the organization.”

The editorial then plows through the familiar terrain—only a few PPFA clinics are harvesting baby body parts,

abortion is just an itsy bitsy slice of Planned Parenthood's business—and concludes triumphantly

Planned Parenthood's decision to forgo recouping its costs from fetal tissue donation should defuse the ginned-up controversy over this organization's work.

Of course, to state the obvious, to its bevy of supporters, including Hillary Clinton,



PPFA President Cecile Richards GARY CAMERON/REUTERS

there is nothing that PPFA ever does that deserves even a closer examination, let alone criticism. Planned Parenthood is figuratively and literally above criticism. Thus everything negative necessarily must be a “ginned-up controversy.”

Not to Prof. Charles C. Camosy.

The controversy stirred by the Center for Medical Progress videos is not exclusively—or even primarily—about how much money PPFA affiliates received when it “donates” the body parts of unborn babies. (PPFA also has an explanation for why officials in the videos clearly seem to be talking about changing the abortion “technique” in order to harvest

intact organs, so a resolution on that question awaits another day.)

Camosy offers some of the many reasons NRLC has discussed for PPFA's falling approval numbers. It starts with diminished credibility—once saying it did perform mammograms, now admitting it doesn't and the whole abortion is only “3%” charade that even the *Washington Post* has seen through, to cite just two.

But the real reason for PPFA's rising sea of troubles is, as

affiliates and staff talk about harvesting hearts, livers, brains. Listen to them talk about how they “crush above or below” certain body parts to harvest viable organs. Listen to them talk about using a “less crunchy method” of abortion to get usable organs and tissue. Watch a former lab tech talk about how she once saw a colleague playfully tap an intact dead baby's heart to make it beat. Watch them talking about cutting through the faces of babies. Listen to them exclaim “another boy” when they examine one child's remains. Listen to them say, chuckling, how important it is to clearly label boxes of severed heads before you ship them, so the recipient can gird himself against the normal, human, minimally decent reaction to opening such a box. After watching, measure your own reaction. The horror and revulsion you feel. And then ask yourself, is it all ok because the people in the videos are doing it for free?

Camosy is spot on when he concludes that “the writing is on the wall” for Planned Parenthood:

Americans are slowly but surely waking up to a new reality: Planned Parenthood's leadership is shady and dishonest, and the organization depends on the violence of abortion for revenue.

Camosy writes, that “[E]ach new video released during the past several months seems to produce a new level of callousness on the part of Planned Parenthood employees.”

Absolutely true, which is why even nominal “pro-choicers” blanch when they see(or hear) PPFA officials and lab techs talk in such ghastly, dehumanizing language as they poke and prod the remains of babies whose lives they have just taken.

He quotes Notre Dame Law Professor O. Carter Snead. Let me offer a fuller quotation from a post that ran in *NRL News Today*:

Here's a thought experiment. Watch the videos. Watch the Planned Parenthood

Planned Parenthood's latest effort at damage control

By Prof. O. Carter Snead

In a letter sent to the director of the NIH, Planned Parenthood said it will no longer accept reimbursement for the harvesting of tissue from the remains of the hundreds of thousands children it aborts each year (327,653 abortions in 2013 alone, bringing in \$164 million in revenue). This is not altogether surprising, given the recent release of undercover videos showing Planned Parenthood officials speaking callously about the “demand for livers,” the financial benefit of harvesting fully intact remains of unborn children, the techniques of “cutting through the face” to harvest intact brains, and the need to clearly label boxes shipped to companies containing completely intact unborn cadavers.

Planned Parenthood's decision is clearly an effort at damage control — to preserve its carefully cultivated (and ferociously defended) image as merely a women's health care organization. More immediately, it is an obvious effort to try to push back against arguments that neither the federal government nor individual states should provide taxpayer dollars to support this billion-dollar behemoth that provides more abortions than any entity in the world (recently referred to pejoratively as the “Wal-Mart of abortion” by

another abortion provider).

But this feeble attempt to change the subject and repair the public relations damage misses the point. The false mask of Planned Parenthood is cracked, and the truth about who they are and what they do is undeniable. These videos



Cecile Richards, Planned Parenthood President

showed that the business of Planned Parenthood is first and foremost the killing the kind of beings that have human hearts, human faces, human livers, and human brains.

Planned Parenthood is in the business of killing the kind of being that prompts even their own technician to exclaim “Another boy!” when examining his remains. That is, Planned Parenthood is in the business of killing

human beings. And the videos illustrate that they do so with a callous indifference that shocks the conscience of reasonable people on all sides of the abortion question.

Nothing Planned Parenthood has done today will change its role as the world's leading

Listen to them talk about using a “less crunchy method” of abortion to get usable organs and tissue. Watch a former lab tech talk about how she once saw a colleague playfully tap an intact dead baby's heart to make it beat. Watch them talking about cutting through the faces of babies. Listen to them exclaim “another boy” when they examine one child's remains. Listen to them say, chuckling, how important it is to clearly label boxes of severed heads before you ship them, so the recipient can gird himself against the normal, human, minimally decent reaction to opening such a box.

After watching, measure your own reaction. The horror and revulsion you feel. And then ask yourself, is it all ok because the people in the videos are doing it for free?

At a bare minimum, Congress should immediately act to strip Planned Parenthood of its federal funding, and shift these monies to entities such as community health organizations, which offer more comprehensive healthcare, are more numerous and accessible, are less expensive-without providing abortions.

Editor's note. Prof. Snead is the William P. and Hazel B. White Director, Notre Dame Center for Ethics and Culture, and Professor of Law, University of Notre Dame.

abortion provider. Nothing will alter the manner and extent to which its staff and affiliates callously pick through the remains of its unborn victims—just as the videos illustrated.

Here's a thought experiment. Watch the videos. Watch the Planned Parenthood affiliates and staff talk about harvesting hearts, livers, brains. Listen to them talk about how they “crush above or below” certain body parts to harvest viable organs.

Fears of suicide contagion after victory in California

By Michael Cook

Will California's new assisted suicide law actually result in fewer people committing suicide as its supporters have promised?

Dramatic new findings about the Oregon experience with physician-assisted suicide (PAS) were published last week in the *Southern Medical Journal* which suggest that this is not true.

In a fine-grained statistical analysis of the experience in the four American states where PAS is currently legal British academics David Albert Jones and David Paton show that "the introduction of PAS seemingly induces more self-inflicted deaths than it inhibits".

The suggestion that legalisation reduces the total number of suicides and postpones those that do occur is a popular argument on the right-to-die side. It was first mooted [brought up] by libertarian economist and jurist Richard Posner and has subsequently been adopted by assisted suicide advocates around the world. It allows advocates of assisted suicide to claim, paradoxically, that they are against suicide. But there is very little data to support it.

The study by Jones and Paton suggests that Posner's argument is plainly wrong. In fact, PAS could actually increase an inclination to suicide in others.

The evidence from suicide rates in states that have legalized PAS is not consistent with Posner's conjecture that such legal changes would lead to delays and net reductions in suicide. Rather, the introduction of PAS seemingly induces more self-inflicted deaths than it inhibits.



The Werther Effect

Furthermore, although a significant proportion of nonassisted suicides involve chronic or terminal illness, especially in those older than age 65, the available evidence does not support the conjecture that legalizing assisted suicide would lead to a reduction in nonassisted suicides. This suggests either that PAS does not inhibit (nor acts as an alternative to) nonassisted

suicide or that it acts in this way in some individuals but is associated with an increased inclination to suicide in others.

As psychiatrist Aaron Kheriarty points out in a commentary in the same journal: "Several well-studied phenomena in the social sciences and suicide

whether assisted or non-assisted, influence the behaviors of not only one's friends but also of one's friends' friends. No man is an island."

One of the best-studied phenomena of suicide is the Werther effect, named after a disappointed lover who takes his own life in Goethe's 18th century novel, "The Sorrows of Young Werther."

The book was phenomenally popular and sparked a rash of copycat suicides throughout Prussia. The dangers of romanticising suicide are so obvious that the Centers for Disease Control and Prevention in partnership with the National Institute for Mental Health, the World Health Organization, and the Surgeon General recommend the utmost discretion in reporting suicides, lest vulnerable people succumb to the siren call of suicide.

"Suicide is already a public health crisis; do we want to legalize a practice that will worsen this crisis?" asks Dr Kheriarty.

Editor's note. This appeared at bioedge.org and is reprinted with permission.

literature suggest that Posner's hypothesis was dubious, even before empirical testing. You do not discourage suicide by assisting suicide." He goes on to write:

"Many PAS advocates claim that this decision is a purely private exercise of personal autonomy, but ... research suggests that behaviors like suicide,

A very special gift that Autos for Life offers to our supporters first!

By David N. O'Steen, Jr.

Some time ago, a long time supporter in Illinois who had donated two classic cars to us previously, contacted us about donating his restored 1932 DeSoto SA. Yes, 1932! WOW! You see, because of his age, he was moving from his house to an assisted living facility and wanted the car to go to benefit the pro-life cause. Very noble indeed! He had owned this car for well over 40 years, and had restored it top to bottom and inside out. The car never saw

bad weather, was always garaged, and was only driven on nice days and in parades, and the like.

Since our headquarters are in Washington D.C., and the car was in Illinois, it was shipped here by container truck. Once here, it was treated to a carburetor and fuel pump rebuild, as well as new spark plugs and general upkeep. The car runs and drives well, and is a stunningly beautiful piece of American history!

Well, as is the case with all donated vehicles, it's time to sell it on, and we figured that we would give you, our loyal supporters, the first opportunity to own this beautiful automobile before we offer it for sale publicly. This is a chance to own a fully restored, turn-key classic car, and remember that 100% of the proceeds from the sale of this 1932 DeSoto go to benefit the life saving educational work of the National Right to Life.

If you or anyone that you know is interested or has any questions regarding this 1932 DeSoto, or to donate a vehicle yourself, please contact David N. O'Steen Jr. at (240) 418-8860 (cell), (202) 626-8823 (office), or by email at dojr@nrlc.org. I know that the gentleman that donated this magnificent automobile to National Right to Life would be delighted to have his car go to another pro-life supporter!



Planned Parenthood's defense of using fetal organs to 'treat and cure' is a sham

From page 12

Ebola virus. The successful results of the field trial were published on July 31, 2015 in the journal *Lancet*, welcome news in the fight against this deadly disease.

This successful Ebola vaccine was developed without using fetal tissue or fetal cell lines, but rather with Vero, a monkey cell line, demonstrating again that medical science has moved well beyond any need for fetal tissue in productive medical research.

Broad, undefined claims also continue to be made that fetal tissue is needed to study disease biology or generic development. It is telling that these assertions never cite specific results, but only vague promises, still clinging to antiquated science (not to mention medieval ideas of organ harvest).

Current, progressive alternatives such as induced pluripotent stem (iPS) cells

provide an unlimited source of cells for study, and can be produced from the tissue of any human being without harm to the donor. These iPS cells, the creation of which won the Nobel Prize, have the ability to form virtually any cell or tissue type for basic study, disease modeling or potential clinical application. Furthermore, stem cells from umbilical cord blood also show significant potential not only as laboratory models but also

for therapy, and are already treating thousands of patients for numerous conditions.

The long and short of it is that the heyday of fetal tissue research never really happened, and the gift of adult stem cell science has rendered the occasionally barbaric methods of the past functionally obsolete. Congress is right to put an end to this brutal trade once and for all and to defund its remnant of ghoulish devotees.

Research reveals men's sense of grief and helplessness in response to woman's abortion

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

Studies on women's negative responses to their abortions have appeared frequently over the past couple of decades. But research on men's reactions to the abortion of their child have been harder to find.

Now, new research by Catherine T. Coyle and Vincent M. Rue appearing in the October 2015 issue of *Counseling and Values* offers "A Thematic Analysis of Men's Experience With a Partner's Elective Abortion."

Coyle and Rue report on responses to an online survey of 89 men whose partner (wife or more often girlfriend) had undergone an abortion. The size of the sample and the manner of self-selection (it depended on men finding the website) make it difficult to make any broad statistical observations but still offers valuable experiential data.

Accounts of their experiences are compelling and heart-breaking reading. There are painful commonalities, especially among those whose input into the decision was not welcomed.

The researchers found three common themes among the men's responses: 1) loss and grief, 2) helplessness and/or victimization, and 3) spiritual healing.

Coyle and Rue offer several examples of men expressing each of the themes. A sample of the ones on "Loss and Grief" include:

I was a father one day and not the next. She told me she had a miscarriage, then I got a call from the abortion clinic, she forgot her medication. I have

never felt so awful in my life. (2 years postabortion)

I would have made an excellent father, and I feel now at my age (49) my chance has

at baby things. She desperately wants to become pregnant again. I want our baby back. (1 month postabortion)

The abortion

postabortion).

She is going through hell and I can't help her. I only remind her of it. (2 months postabortion)



probably gone. And this makes me sad. (9 years postabortion)

Sometimes, there was an element of guilt involved, even many years later.

The absolute worst thing I have ever done. Words can't describe the pain and overwhelming guilt that is always with me. I have no one to blame but myself. (26 years postabortion).

Relationships were affected.

Since the abortion we have separated. We constantly argue. She constantly looks

destroyed all the good in our relationship and all the hope I had in the kindness of others. (3 months postabortion)

Coyle and Rue say that "Helpless and/or Victimization" are not qualities typical of many males, but were expressed by the group participating in their on-line survey.

I had no control or no say about the abortion. She said she would have one if I agreed or not. She had the abortion without me. I would have taken care of the baby myself if she would have just had the baby. (26 years

Anger was sometimes part of the reaction.

As a man, I was totally in the dark. No one gave me any information or even cared what I thought. (14 ½ years postabortion)

While about 9% (or about one in 11) did not declare any religious affiliation, most (82%) of the men participating in the survey identified themselves as Christian (the remainder labeled themselves as "other" (8%) or said they were Jewish(1%)), and this showed up in responses Coyle and Rue grouped under "Spiritual Healing."

God has given me grace to confess and feel forgiven. (7 years postabortion)

I have now committed my life to Christ ... I know I am forgiven and free but the grief is still felt. (30 years postabortion)

Forgiveness was a common theme, but some men said they were still struggling years after the event.

I know that God forgives me and I am working on my own forgiveness. (27 years postabortion)

More than ever Planned Parenthood is on the defensive

From page 2

Also, as we reported in *NRL News Today*, while Richards keeps talking about how few PPFA clinics are currently involved, at least **prior** to the videos, affiliates were being given the green light to join in.

All this is taking place while carefully constructed myths are being exposed, one by one. As we have written, even the *Washington Post* recognizes that PPFA's assertion that "Three percent of all Planned Parenthood health services are abortion services" is "misleading."

PPFA's claim was given "three Pinocchios."

"Pinocchios refer to how deceptive an assertion is, with four Pinocchios representing the highest degree of distortion. Three Pinocchios means (according to the *Post*) that a statement has " Significant

factual error and/or obvious contradictions."

Likewise on Richards' previous assertion that PPFA provided mammograms (which more recently she admitted was not the case). That doesn't stop supporters from recycling the myth that PPFA "provides" mammograms.

In explaining how this also received Three Pinocchios, Erin Aitchison wrote that the Post factchecker

Ye Hee Lee suggested using a more "accurate term" such as access. All together now, "... women have 'access' to mammograms via Planned Parenthood." Ye Hee Lee admitted, though, that "access" is still "slippery language."

What's more, Ye

Hee Lee admitted that mammograms aren't even a core service that Planned Parenthood provides [BTW, abortion is a "core" service]. "So, when people talk about Planned Parenthood clients who need m a m m o g r a p h y referrals the most," she wrote, "they are referring to a small percentage of total patients."

So only a fraction of Planned Parenthood's clientele need the mammograms it doesn't provide. Got it.

Because of the slippery language of "access." Planned Parenthood supporters

were awarded three Pinocchios.

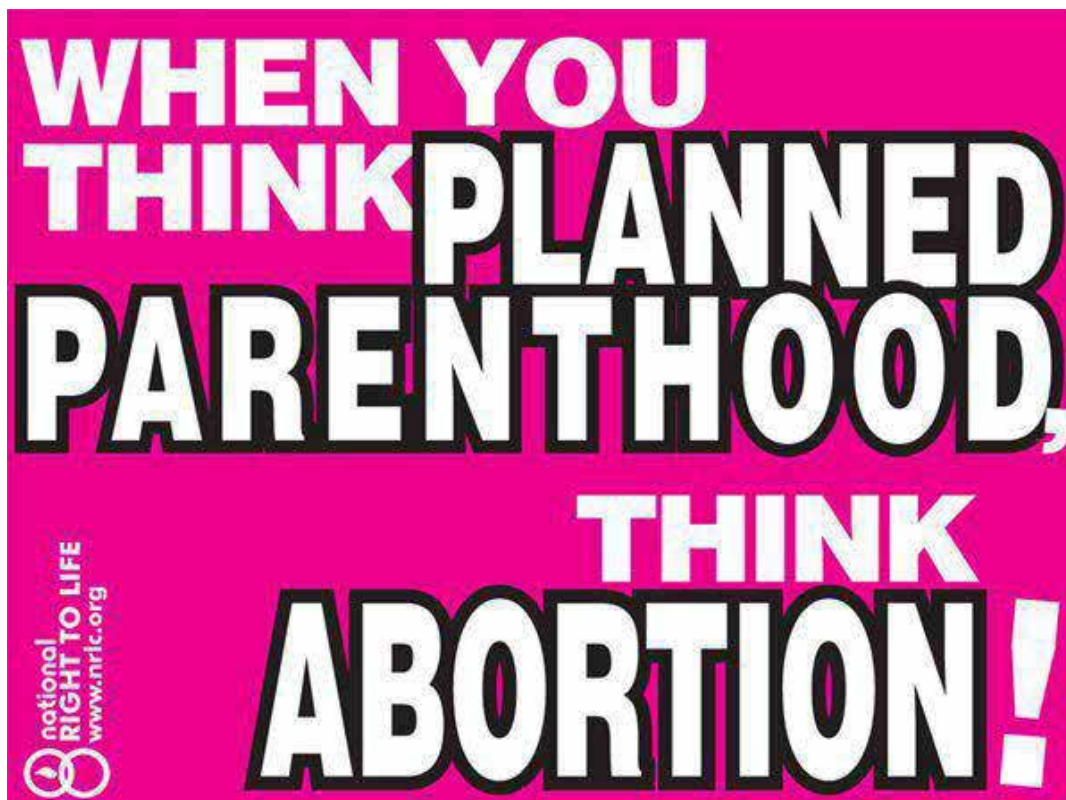
On top of all this there is (from their perspective) the worrisome declining support for PPFA, as measured by public opinion polls. A *NBC News-Wall Street Journal* poll in late September found that PPFA is viewed favorably by 47% of Americans and unfavorably by 31%.

As *National Review Online's* Ramesh Ponnuru reminds us, "In 1989, Gallup found that 82 percent of Americans had a favorable impression" of Planned Parenthood. That is the benchmark against which all recent numbers can be measured.

As Carol Tobias notes in her President's column on page three,

Are Planned Parenthood affiliates making money from the sale of body parts from these babies? Are they manipulating the abortion procedure so as to keep the baby's body in better condition for harvesting organs and tissue? Are they getting "consent" from the women whose babies are being killed and harvested for parts? Several congressional committees are investigating these questions and more. I look forward to their official findings.

There is all this, and much more to come. Far from "turning the corner" or "turning the tables," PPFA is in more hot water than ever before.



The horror of Planned Parenthood and how to stop it

From page 15

Planned Parenthood is responsible for one-third of the nation's annual abortion death toll. Abortions provide more than half of Planned Parenthood's annual non-government "health-services" revenue; abortions comprise more than 90 percent of its "pregnancy services." Yet Planned Parenthood concluded, apparently, that the more than \$150 million it rakes in each year from killing infants could be augmented by then selling the hearts, lungs, brains, genitals and livers of the babies it aborts. Its lust for blood money is evidently insatiable.

Sadly, there are no shortcuts to stopping the funding of the organization responsible for these barbaric acts of inhumanity. There is no silver bullet. Shutting down the government on Thursday would achieve absolutely nothing. The pro-abortion ideologue in the White House would make sure Planned Parenthood got

taxpayer funding, regardless. His veto pen is an instrument of death. Elections have consequences, and we suffer daily the lethal consequences of the 2012 presidential election. The solution is not a government shutdown. The solution is the election next year of a pro-life president.

The bulk of Planned Parenthood's public funding flows from entitlement programs such as Medicaid, and that money would not be even temporarily interrupted if the government shut down.

A government shutdown is not only utterly futile, it is also counterproductive. It would shift the focus — from Planned Parenthood's despicable acts, to our fellow citizens adversely affected by the shutdown.

We know the drill. A Sept. 23 Associated Press headline previews the media game plan: "Gov't shutdown could cut off food stamps." Imagine the fun they'd have each day

in the White House press office as they fed their media sycophants the stories: "child health care curtailed," "school lunches stopped," "Social Security checks held up"... We've been here before. Pro-life members of Congress would become the villains in this blame-the-Republicans game. And there is zero chance of success because Barack Obama will absolutely veto any spending bill that curtailed \$1 of Planned Parenthood funding.

We must win the hearts and minds of our fellow citizens, work through the system of government our founders gave us, and elect a president who respects human life and will sign pro-life laws.

Holocaust survivor Elie Wiesel gave us those immortal words, "Never again." And yet, 25 years after the Nuremberg War-Crimes Trials, our highest court sentenced to death 57 million innocent American

children. That is the legacy of Roe v. Wade: 57 million dead — and Planned Parenthood adds nearly 1,000 more babies to that death toll each day.

Though a child's birth might be considered a burden, it is written on man's heart that we've no right to cause the death of an innocent human being. A compassionate society provides special protection for its youngest members. It doesn't exploit them, kill them, and carve up their bodies for the benefit of those who should be their protectors.

Our nation will one day be judged by how we have treated the weakest and most vulnerable members of our human family. Let us strive, in the midst of this culture of death, to build, instead, a culture that respects human life.

Tony Lauinger is state chairman of Oklahomans For Life and vice president of National Right to Life. This first appeared in the Tulsa World newspaper.

Feeling the heat, PPFA says it will no longer take money for providing fetal tissue

From page 7

provider, it begs the question raised in House committee hearings: why shouldn't federal family planning money go to federally qualified health centers which don't perform abortions?

And, by the way, is Richards going to answer the question asked at one of the hearings — how many affiliates receive a majority of their revenue from abortion, and who are they?

And is Richards going to... clarify her remark that PPFA doesn't provide abortions after viability?

As NRLC's director of Education Dr. Randall K. O'Bannon wrote in 2013: "The truth is that Planned

Parenthood clinics advertise and perform abortions well into the second trimester, even up to 24 weeks (with hints it can 'help' if the woman is even more advanced)."

Moreover, is she going to acknowledge that live births can occur a month or more before "viability"? (Note that a recent *New England Journal of Medicine* study found that 23% of infants are surviving at 22 weeks of pregnancy [20 weeks after fertilization] with treatment.)

Richards' letter is intended to deflect attention away from all this and much, much more.

Nice try, but it won't work.



So why was abortion so conspicuously absent from Democratic debate?

From page 1

Cooper chose not to ask a single question about abortion. It was left to Clinton to transition from an unrelated question to hammer Republicans and defend Planned Parenthood. (By the way, were you as creeped out as I was when Clinton responded to Cooper's question who was the enemy she was proudest to have made by saying "the NRA, the health insurance companies, the drug companies, the Iranians, probably the Republicans"?)

Pro-abortionists, such as Lauren Barbato, were polite—after all the Democrats are their party and Clinton is their candidate—but unhappy. "[R]eproductive rights were sorely missing from the Democratic debate Tuesday even though the Democrats have lauded themselves as the party for women," she lamented.

She compared all the attention Republicans paid at their debate to Planned Parenthood and the wretched behavior and language exposed on the undercover videos (obviously my characterization, not hers) and lamented the "missed opportunity to sort through all the misinformation."

But even if Cooper steered

away from abortion, why didn't multiple Democrats make an opportunity to tout their support early and often for abortion and PPFA? (Besides Clinton, only Chafee made even a passing reference.)

The *Washington Post's* Janell Ross has a couple of answers for why the word 'abortion' never surfaced. "The candidates had been warned." About what?

"[I]t's almost certain that each of the candidates have seen the polling data on abortion. At the very least, they probably understand that even the possibility that any organization sells the tissue of aborted fetuses (something that has not been proven and which Planned Parenthood denies) is an eyebrow-raiser, a stomach-churner and a legitimate and difficult-to-ignore ethical concern. And much of that is true even for those who ardently support abortion rights. ... It's very likely that each candidate received

some kind of advice to stay away from these issues as much as possible."

Wow! In the *Washington Post*, no less. Ross continued **Polling suggests most voters don't support something as big as shutting down the government over funding Planned Parenthood. But how the public feels about abortion keeps shifting.**

That was accompanied by a graph which, while not completely accurate, certainly conveyed the truth that a majority of the public either wants no abortion or abortions only in limited circumstances. Which is why, as Barbato shrewdly noted, Clinton tied paid family leave, a much less divisive subject, to support for abortion.

Finally, as Thomas D. Williams observed

The ever-alert Media Research Center took the trouble of adding up the time devoted to Planned Parenthood and abortion in CNN's Republican primary

debate on September 16. According to the media watchdog group, between Dana Bash and Jake Tapper, CNN spent a total of 10 minutes and 14 seconds questioning the candidates about the topic.

That was 10 minutes and 14 seconds more than the time allotted to Planned Parenthood Tuesday night, despite the fact that the organization was all over the news because of Cecile Richards' promise that Planned Parenthood would no longer accept payment for fetal body parts.

CNN's hosts studiously dodged the topic until Hillary Clinton brought it up, railing against Republicans' hypocrisy over big government.

We will be told six days a week and twice on Sunday that abortion is a winning issue for Democrats. The truth is it is a big loser which they attempt to camouflage by bundling it with more popular programs.

“He’s no burden, he’s our baby boy” *A little boy born without most of his brain defies the odds.*

By Carolyn Moynihan

Baby photos are always a winner on Facebook, but there is one infant whose pictures are melting the hearts of hundreds of thousands as his story spreads through the social networking site and mainstream media.

On the Jaxon Strong Facebook page, Jaxon Emmett Buell’s big blue eyes look out from his chubby face in a way that conquers the heart before the mind has time to object to the size and shape of his head. The little Florida boy was born with anencephaly, a severe neural tube defect which means that most, if not all of the cerebral cortex and the corresponding part of his skull are missing.

His mom and dad, Brittany and Brandon Buell, discovered there was something seriously wrong with their unborn baby’s development after Brittany’s second ultrasound scan at 17 weeks. Doctors were unsure of the exact diagnosis but the prognosis was dire: Jaxon might not survive, or if he did, only with profound disabilities. As is routine, they offered the couple a termination.

But the Buells believed that their baby was going to make it. Experts assured them the baby wasn’t in pain and that there were no added risks to Brittany’s health. In any case both their natural instincts and their religious faith made them unwilling to “play God” by deciding to end the life of the child they had been given. It “was our job to give him a chance to live,” Brandon later wrote.

And live he does; the little battler is now 13 months old, to the surprise of experts. At first

the doctors thought he would die within a two weeks, then a couple of months, then two years, Brittany told Fox News. “Now they say they don’t know.



Jaxon Buell. Photo: Facebook

Jaxon is writing his own book.”

It’s true that both baby and parents have had a difficult time of it. Brandon admits that the first sight of his son was “a bit startling and sobering”. During the first few months Jaxon was hospitalized multiple times for feeding tube issues and two bouts with a virus.

This past summer, in addition to normal teething troubles and fussiness, he developed serious gastrointestinal issues and seizure like episodes. Doctors tried more than a dozen drugs and 11 types of formula, but nothing seemed to help. In early August he was admitted

to hospital in Orlando, but the doctors there ran out of ideas.

The Buells, however, were not giving up their efforts to improve their son’s quality of life.

always so happy in the morning after he wakes up and takes turns looking at both Mommy’s and Daddy’s face, seemingly as if he is so excited to start another day.” He says “mama” and “dada”, scoots along the floor, and his mom and dad believe that if he can get through the irritable stage he will have a lot more life ahead of him.

One thing is clear: they love their little boy to bits, and can’t fathom why some people through the social networks have criticized their decision not to abort the child.

“It’s baffling to hear or see other people’s opinions on our baby that have never met him, that somehow know how he thinks, how he acts, how he feels, how much of what he does is voluntary or involuntary, how he is always in pain, and that we are selfish parents for not choosing to have an abortion, and for having a Facebook and a Go Fund Me page for him,” wrote Brandon.

The GoFundMe page was set up by a former colleague of Brandon’s to help the Buells with medical expenses, explained Brandon, as well to allow Brittany to stay home with Jaxon, who does best when he’s cared for by his mom.

“Had there been any suffering in the womb

They decided to throw themselves on the mercy of Boston Children’s Hospital, one of the premier facilities of its kind in the US, and simply turned up in the emergency clinic there with Jaxon in August.

At Boston they got the current, more precise diagnosis of his condition (microhydranencephaly), and a new medicine recommended by the doctors there is helping the little boy sleep better. A story on the Boston Globe’s website boosted their media profile and brought increasing support.

Recently Brandon has written: “He’s back to smiling at us,

“He’s no burden, he’s our baby boy” From page 35

or a danger involved other than Jaxon possibly not being able to live outside the womb because of the concern for his head and brain, then we certainly would have had a different discussion,” continued Brandon.

“Truthfully, I will never understand how choosing to carry Jaxon and give him a chance to survive could ever be considered ‘selfish,’” he added.

The overwhelming response, however, has been positive and warm. Nearly 195,000 people have “liked” the Facebook page Jaxon Strong, and hundreds of families with similar stories and struggles have contacted the Buells. The couple hope that Jaxon’s story will advance medical research and help more

families in the future. Brandon writes:

“We believe the medical world will also benefit from Jaxon’s story, from his rare neurological condition, and from his diagnosis, because we are certainly seeing firsthand how much there is still to learn about the human brain. We plan to work with the top infant neurological teams in the country, if not the world, for all of these benefits, and we keep our focus as broad as we possibly can so that Jaxon’s story does not end with Jaxon.”

He continued: “No matter who you are or what you believe in, it’s clear that Jaxon’s tiny footprints will have a lasting impression on this world,

and that he has already touched and inspired more lives in one year than most of us ever will in our lifetime.”

As Jaxon’s story continued to spread across the internet this week it was obvious that there is a lot more encouragement outside hospitals and doctors clinics for parents accepting a disabled baby than inside them.

No doubt doctors think they are sparing the parents (and outside the US, the public health system) a terrible burden when they present them with the abortion “option”, but they don’t take into account the love and strength that wells up in a mother’s or father’s heart in response to an especially vulnerable little human being. To paraphrase the familiar song, “He’s no burden, he’s my baby boy.”

Looking at Jaxon’s pictures also exposes the fallacy of the notion that “you are your brain”, and that, when your brain stops

functioning normally, or a large part of it is missing, you are not a person. No one who contemplates without prejudice the image of that child with his head lying sweetly on his mother’s shoulder could deny that there is a little person there.

Let’s stop judging people by their mental and physical constitutions and accept every human being as an equal member of the human family.

One last thing: it is not necessary to be religious in order to see wounded brothers and sisters like that, but as the Buell’s case illustrates, it certainly helps.

Editor’s note. Carolyn Moynihan is deputy editor of MercatorNet. This appeared at www.mercatornet.com/articles/view/hes-no-burden-hes-our-baby-boy/16932 and is reprinted with permission.

The Unasked Question during the Democratic Debate: “Is there an abortion you would not allow?”

From page 15

U.S. Senator Bernie Sanders

Sanders (I-Vt.) has maintained a solid pro-abortion voting record, voting against the pro-life position more than 100 times in his federal legislative career (U.S. House of Representatives 1991-2007, U.S. Senate 2007 to date).

Sanders voted against the Partial-Birth Abortion Ban every opportunity he had. More recently, Sanders voted against advancing H.R. 36, the Pain-Capable Unborn Child Protection Act.

Sanders voted against S. 1881, the bill to ban federal funding of Planned Parenthood. His vote would allow federal funding of the abortion giant to continue.

Sanders admitted he had not seen the video, but had read accounts of it in the news. Referring to Planned Parenthood’s president, he said: *“Obviously, I think Cecile Richards apologized for the tone of that video. I think her apology was exactly right. I think that the staffer, the tone was terribly wrong.”*

Former U.S. Senator Jim Webb

Webb served as a U.S. senator from Virginia from 2007 to 2013. During that six-year term, he had a 0% record, voting 19 of 19 times against the pro-life position.

Senator Webb supports the

current policy of abortion on demand, which allows abortion for any reason.

On April 14, 2011, Webb voted against a bill to cut off federal funding for Planned Parenthood.

Why wasn’t the abortion question asked at the October 13 debate?

Perhaps the pro-abortion media recognizes the disadvantage for pro-abortion candidates? (For an overview of the National Right to Life Advantage for Pro-life Candidates go to: http://nrlpac.org/pdf/ProLife_Increment.pdf.) Perhaps they know that most Americans do not support

abortion for any reason.

All of the Democratic candidates support a policy which allows abortion for any reason.

For National Right to Life’s downloadable flyer “Where Do the Candidates Stand on Life?” go to: www.nrlc.org/uploads/2016/POTUScomparison.pdf

Are your friends unsure where the presidential candidates stand on life? If so, be sure to share it with them as well.

Look for updates in future *National Right to Life News* and *National Right to Life News Today*.

Planned Parenthood “Baby-Free” Fetology

From page 17

child’s body and organ systems and those that will form the placenta.

The way Planned Parenthood tells it, “the ball of cells” develops into an embryo at the start of the sixth week and “all major internal organs begin developing” over the next five weeks or so. They grant that, at weeks 5-6, “a very basic beating heart and circulatory system develop” and that “buds for arms and legs develop.” (Remember, no mention of “baby.”)

However when considered from the baby’s perspective, the heart begins its first halting beats as early as 18 days after conception, before many moms even realize that they are pregnant.

Planned Parenthood admits that the neural tube begins forming around this time, which “will later form the brain, spinal cord, and major nerves.” These are the same brains and spinal cords you can hear them talk about removing and delivering to fetal tissue procurement firms in the Planned Parenthood videos shot by the Center for Medical Progress (CMP).

Our fetology brochure, *A Baby’s First Months*, points out that an unborn baby’s fingers are forming at six weeks and that his or her mouth and lips are apparent. Using the gestational dating method and counting from LMP, Planned Parenthood makes it sound like these don’t occur until weeks 7-8.

Developed babies Planned Parenthood still aborts

The latest figures show Planned Parenthood performing around 330,000 abortions a year, close to a third of all abortions performed annually in the United States. They are performing these abortions when Planned Parenthood admits that the child has fingers and toes, functioning kidneys,

and is making spontaneous movements (weeks 9-10 LMP for Planned Parenthood).

Planned Parenthood clinics, we know both from the videos and from clinic information on their website, perform abortions up through the end of the second trimester, when the pregnancy section of the site says hair begins to grow, the roof of the mouth is formed, and sexual anatomy can be detected on an ultrasound (weeks 13-14 LMP, according to Planned Parenthood).

Details on newer features after 14 weeks LMP are meager in Planned Parenthood’s description. By this time every basic organ system is already in place and functioning (see NRL’s *Baby’s First Months*, 10-11 weeks).

Though Planned Parenthood’s accompanying illustrations for earlier months appear to be almost deliberately indistinct and amorphous, the humanity of the child is obvious even in their drawings for later weeks.

They don’t mention in this section that they abort babies of just this age and development, but then again, they don’t share any of these details on fetal development, limited though they be, in their sections on abortion.

No “Baby” to Abort?

It isn’t just that there is no mention of the baby by name in the abortion procedures, but that it isn’t even clear, from their descriptions, exactly what “it” is that is removed during the abortion.

In its “In-Clinic Abortion” section describing surgical procedures, the steps of an “Aspiration Abortion” dealing with the moment of abortion are as follows:

- **A tube is inserted through the cervix into the uterus.**
- **Either a hand-**

held suction device or a suction machine gently empties your uterus.

- **Sometimes, an instrument called a curette is used to remove any remaining tissue that lines the uterus. It may also be used to check that the uterus is empty.**

The most you can figure from this description is that the procedure is removing “tissue” from the uterus. The same “tissue” that the earlier description from the pregnancy section described as having a heartbeat, brain, and budding arms and legs.

The description for the “Dilation and Evacuation” procedure used in later gestations is only slightly more informative. After describing in detail the drugs or laminaria that may be used to dilate the cervix, the website says that

- **In later second-trimester procedures, you may also need a shot through your abdomen to make sure that the fetus’s heart stops before the procedure begins.**

This is about as much detail as Planned Parenthood gives, nothing more about the advanced development of the child at this age. After noting that the abortionist will inject a numbing medication into the cervix, Planned Parenthood casually notes that

- **Medical instruments and a suction machine gently empty your uterus.** [www.plannedparenthood.org/learn/abortion/in-clinic-abortion-procedures#sthash.Lwagai3q.dpuf].

If you thought the descriptions of chemical abortions were any more illuminating, you’re out of luck. Of course, there’s no mention of “baby” or “mom” or “mother” there, and even only a passing reference to “fetus” (“danger” to the “health of your fetus” as a reason to abort).

But as to what actually happens during the abortion, the most Planned Parenthood will say is that “You may see large blood clots or tissue at the time of the abortion.”

No talk, as some women who have had such abortions report, of seeing “tiny fists,” “dark spots like eyes,” “a little skeleton not quite formed,” of babies laying in the toilet bowl or swirling in the shower drain. Just “blood clots” and “tissue.”

“Baby” bad for business

It’s almost as if Planned Parenthood was allergic to the words “mom” and “baby.” But not surprising.

Planned Parenthood has built its abortion empire by denying the humanity of the unborn child and devaluing the idea of motherhood. The last thing you want to do if you’re selling someone an abortion is to have them consider the baby in their belly or think of themselves as a mother.

If they seek information about pregnancy, you keep it as bland and impersonal as possible, making sure to play up all the uncomfortable aspects. But make abortion sound clinical and easy.

Try to avoid saying anything that would allow a woman to conjure up an image in her mind of the miraculous marvel growing within her or to think ahead to the day when she is holding that child in her arms lovingly looking up at her face.

Nothing that might possibly facilitate a mother bonding with her unborn baby.

No, no, that wouldn’t do.

Nancy Pelosi's dubious "smackdown"

From page 21

Pestering Her With Abortion Questions – liberalamerica.org

Pelosi shuts down reporter's 'ideological' question on abortion – thehill.com

Let me get this straight: Nancy Pelosi responded to a reporter's scientific questions by calling them "ideological," claimed she knows more than he does by virtue of being

Catholic with five kids, and stating that science has no basis in public policy... and that's a "smackdown"? She "crushed" and "shut down" the reporter with that response?

Were we watching the same briefing?

I saw a dishonest politician engage in egregious non sequiturs and numerous logical fallacies to avoid answering a question that she knows she can't answer without also acknowledging that she

supports and champions the deliberate killing of innocent human beings (after all, abortion is her "sacred ground").

Last time I checked, that wasn't a "smackdown." That was a colossal embarrassment and a shocking display of ignorance. I know this not because I'm a Catholic mother of many children, but because I'm a rational human being with rudimentary skills of logic and reason.

Maybe I should use Pelosi's

criteria and try to find a Catholic mom with even more children to explain this lack of logic to me. Oh wait, this one opposes abortion. So does this one. Hmm. In fact, all Catholic moms of my acquaintance with 5+ kids are pro-life. According to the Gospel of Nancy, we all know more than she does about abortion. Perhaps she'd like to fly us down to Capitol Hill so we can explain things to her?

Research reveals men's sense of grief and helplessness in response to woman's abortion

From page 31

Though this self-selected sample turned out to be predominantly Christian and Caucasian, the authors felt that "the existential questions raised by abortion would seem to present considerable challenges for men of other faiths as well as for men without a religious worldview." Coyle and Rue hoped that future research would shed light on how or whether ethnicity or religious belief would contribute to men's postabortion views.

Coyle and Rue say that the common expressions of guilt and culpability raise important questions about whether men's innate instincts are violated by induced abortion, whether the cultural expectations

surrounding men and their roles are unrealistic or contradictory, and whether men ought to be routinely offered pre- and postabortion counseling.

Men's sense of helplessness and victimization at their partner's abortions may be due, at least in part, to the current legal situation which gives them no rights in the matter. Coyle and Rue suggest that efforts to enhance a couple's communication may help here, but as things stand, the decision will be entirely the mother's.

At a minimum, though, Coyle and Rue argue that counselors should be aware of such issues and be prepared to explore and address these with their male clients, even if the abortion

may have occurred years ago:

When clients appear to be still struggling with the abortion experience, it is helpful to affirm that abortion can be a difficult, even traumatic event. Such affirmation may facilitate awareness and lead to a willingness to work on any unresolved guilt and anger.

Because of the disenfranchisement of men from the abortion decision, men may not feel that they have a "right to grieve" delaying or inhibiting their healing. Forgiveness, both for oneself

and for the others involved, may indeed be valuable here, the researchers argue.

Of course, we recognize that not every man responds the same way as these, at least initially. There are those who coerce their partners to have abortions and threaten to abandon the woman if she has the baby.

But this research shows, once again, that the reality of abortion, the destruction of an innocent human life, is not something a mother or a father can simply psychologically shove aside and act as if it never happened.

It's something a father won't easily forget.

California legalization of doctor-prescribed suicide threatens vulnerable nationwide

From page 24

underlying illness, not suicide, as the cause of death. And much to the dismay of many families who found this out too late, the law does not require families to be notified of a patient's suicidal intent.

We can expect that after a year or two, California will be issuing reports, like those Oregon has published, claiming that there have been few or no "abuses." That is significant not just because these misleading reports will be used to push for legalization in additional states.

Of greater consequence is how they may be used by the United States Supreme Court if just one new Justice is appointed to definitively shift its ideological balance. While the United States Supreme Court in *Washington v. Glucksberg* (1997) unanimously rejected the claim that there was a constitutional "right" to assist suicide, many of the concurring Justices suggested they agreed only because there was not yet enough evidence to show that states could not rationally fear abuses.

Official reports from California, Oregon, and other states where euthanasia is legal, despite their misleading nature, could in the future be cited to claim that fear of abuses has become irrational and no longer allows states the constitutional latitude to prevent assisting suicide.

Indeed, in one concurring opinion in *Glucksberg*, then-Justice John Paul Stevens made a point of saying that he did not intend to "foreclose the possibility that an individual plaintiff seeking to hasten her death, or a doctor whose

assistance was sought, could prevail in a more particularized challenge."

In addition to this open-ended invitation to bring a case in the future, the High Court has also indicated that it likes to look



at trends. In the 2005 *Roper v. Simmons* case (an unrelated juvenile death penalty case), the Court wrote, "It is not so much the number of . . . States [changing their laws] that is significant, but the consistency of the direction of the change."

So while you might not live in one of the states where doctor-prescribed suicide is legal, if more states join the ranks of California, Oregon, Washington, and Vermont, — and above all if 2016 sees the election of a president and Senate likely to use the next Supreme Court vacancy to nominate and confirm a Justice sympathetic to euthanasia, there is the real risk that in the future the U.S. Supreme Court might well follow Canada's in holding there is a federal Constitutional right to assist suicide.

Presidential candidate Hillary Clinton has called assisting suicide "an appropriate right to have."

If the Court were to follow Canada's example, such a ruling might not, even nominally, apply the right only to the "terminally ill." Instead it could include anyone who "has a grievous and irremediable

medical condition (including an illness, disease or disability) that causes enduring suffering that is intolerable to the individual."**

Indeed, as in Canada, the same opinion might suggest that "surrogates" can direct the killing of children with a disabilities or older people with Alzheimer's who have never asked to die but are deemed incompetent to decide for themselves.

No one should suppose that the death advocates will stop with voluntary or even non-voluntary euthanasia — involuntary euthanasia is an ultimate goal. In a book published in 1998, Derek Humphry, the founder of the Hemlock Society (a predecessor of Compassion and Choices), wrote supportively of the use of assisting suicide as "one measure of cost containment."

"[T]he elderly," he wrote, are "putting a strain on the health care system that will only increase and cannot be

sustained." Speaking of people with disabilities, he wrote, "People with chronic conditions account for a disproportionately large share of health care use, both services and supplies."

He wrote of recognizing a "duty to die" and invoked the precedent of hospital ethics committees that, then as now, routinely deny life-saving medical treatment, and even assisted feeding, against the will of patients and their surrogates. Other death advocates have made similar predictions of the need to require that the burdensome with a low quality of life be given lethal prescriptions against their will.

It would be foolish to attempt to understate the magnitude of the impact of California's decision, but it may be hoped that the gravity of this defeat will shock and energize those who recognize that you don't solve problems by killing those to whom the problems happen. It may cause us to redouble our efforts to block further expansion of the culture of death and, above all, to prevent the election of a president and senators who will use every available opportunity to entrench it irreversibly.

*Assisting suicide may have some legal immunity in the state of Montana, due to a state Supreme Court decision.

** "Irremediable," the Canadian Supreme Court stressed, "does not require the patient to undertake treatments that are not acceptable to the individual." Thus, as in the Netherlands, a depressed patient who rejects treatment for the depression has a "right" to be killed.

Local, state, and federal authorities investigate Michigan abortionist after human tissue found in car trunk

By Dave Andrusko

Right to Life of Michigan is applauding authorities for investigating long-time Michigan abortionist Michael Roth after “14 containers of human tissue, possibly fetuses, medical equipment and large amounts of Fentanyl, a drug used for pain and sedation, was found in a car owned by the doctor who works as an OB/GYN,” according to *WXYZ-TV*.

“Sources say one possible theory is the doctor was performing abortions out of the trunk of his car.”

The *Detroit Free Press* is reporting that the investigation has expanded from the West Bloomfield police department to include the state Attorney General’s Office and the federal Drug Enforcement Agency (DEA).

Under the headline “Raid on doctor’s office after possible fetuses found in car – Was he performing illegal abortions?,” *WXYZ* reported that the case began two weeks ago when Roth allegedly struck a 32-year-old disabled man. (Roth has not yet been charged.)

The car was impounded, according to West Bloomfield Deputy Chief Curt Lawson, pending a traffic investigation.

Ironically, the investigation was spurred by a request from Roth. “Roth’s request for items from his car, including a garage door opener, allegedly turned up a drug later identified as Fentanyl, a drug the Drug Enforcement Administration describes as ‘potentially lethal, even at very low levels,’ and

which is frequently used to reduce pain during abortion procedures,” according to Fox News 2’s Cody Derespina. “That discovery prompted cops to open the trunk, where they allegedly found 14 jars containing suspected fetal parts.”

Lawson told the *Detroit Free Press*, “We do have an opinion from the medical examiner’s office that this is remnants of conception, but there was nothing that was seen within the containers that were recognizable.” Derespina says, “The state Attorney General’s Office suspects Roth may be performing illegal abortions.”

Last Tuesday night police raided Roth’s home and office. “The discovery of Fentanyl, a powerful pain medicine, was concerning to police, who said it was not labeled in the container,” the *Detroit Free Press*’ Katrease Stafford reported.

Fox News 2 outlined some of Roth’s many run-ins with authorities:

A state health inspector found during a January 2002 check that Roth’s drug-control license had expired more than 20 years previously and resulted in Roth being placed on professional probation for six months, fined \$15,000 and barred from performing abortions outside of a clinical setting.

He also has been sanctioned for shoddy record-keeping

and improprieties in prescribing medication, and in 2012 was fined \$2,000 and sanctioned by a state disciplinary committee for a range of violations.

according to Right to Life of Michigan.

Right to Life of Michigan released a report in 2012, “Abortion Abuses and State Regulatory Agency Failure,” featuring several of Roth’s violations. In addition to his



Abortionist Michael Roth

In 2005, Roth’s wife claimed in an application for a restraining order that she “lives locked in the basement” out of fear Roth “would continue to assault, attack, molest, wound, follow, confront and otherwise injure her as well as continue to prescribe and administer medication to her.”

Roth has “a long history of violations, including two previous at-home abortions he performed in 1998 and 1999,”

at-home abortions, Roth was disciplined in 2002 for drug-related violations, including prescribing drugs without a license. He was disciplined in 2004 for violating patient consent laws and was accused of falsifying medical records by a former employee.

“He has a long and sordid history,” Right to Life of Michigan’s legislative director Ed Rivet told FoxNews.com. “This isn’t just like, ‘Oh wow, this guy all of a sudden did something off the legal or ethical path.’ This has been a whole career of this stuff.”

The closed pro-abortion mind

From page 2

Forbes then asked if Frederickson had a small dog that needed to be put to sleep

“Would you think it would be too brutal for the veterinarian to crush that dog in two different places?”

“I trust a woman and her doctor...”

Earth to Frederickson

Example Two: The ever-bewildering chair of the Democratic National Committee, Rep. Debbie Wasserman Schultz (D-Fl.) who in an interview with *MRC-TV* adamantly refused to acknowledge that her **own** children were human when she was carrying them.

MRC TV: You have three children, correct?

Wasserman Schultz: I do.

MRC TV: How old are they?

Wasserman Schultz: I have twin 16-year-olds and a 12-year-old.

MRC TV: In your opinion, were they human beings before they were born?

Wasserman Schultz: You know, I believe that every woman has the right to make their own reproductive choices.

MRC TV: But what did you believe about your children?

Wasserman Schultz: That I had the right

to make my own reproductive choices, which I was glad to have and which I was proud to have.

MRC TV: So were they human beings? Just yes or no.

Wasserman Schultz: They’re human beings today, and I’m glad I had the opportunity to make my own

This exchange again is over Biology 101 which pro-abortionists insist needs to be either excised from the curriculum or (ahem) revised.

Pelosi was pontificating as she always does at her weekly briefing when, as Wahlund writes, “At one point, a CNS news reporter asked, ‘In reference to funding for Planned Parenthood: Is an unborn baby with a human heart

with, ‘I’m a Catholic with five kids, so I know more about this than you.’ Um, what? That makes no sense. ...I happen to be a ‘devout practicing Catholic’ myself. Unlike Pelosi, I actually believe and practice what the Catholic Church teaches regarding abortion, a teaching of which Pelosi, who claims to be both “devout” and “practicing,” is ignorant. ... In fact, I’m a mother of nine children (five born, one unborn, three lost to miscarriage). My oldest is 10, and will be 11 when his/her youngest sibling will arrive. By Pelosi’s logic, I actually know more than she does about this subject.”

The common denominator is that the questions and the answers are like two trains passing in the night. Only one train, so to speak, has its lights off.

It chooses to operate in the dark, chooses to pretend that we know no more about the unborn passenger than we did 50 years ago, and chooses to burrow its head deep into the ground lest it be forced to acknowledge the truth.

There is never a good day to be pro-abortion. But knowing all we do today, to regurgitate the same old nonsense is not only morally and ethically bereft, it is also approaching intellectual suicide.

and a human liver a human being?’ Pelosi responded: ‘Why don’t you take your ideological questions—I don’t, I don’t have—.’”

“Ideological”? What a cowardly evasion!

Later Pelosi played what she no doubt considers her trump card.

“...I am a devout practicing Catholic, a mother of five children. When my baby was born, my fifth child, my oldest child was six years old.” But as Wahlund observes, what has that to do with anything.

“He asked her a scientific question and she responded



*Democratic National Committee Chair
Rep. Debbie Wasserman Schultz*

reproductive choices, as – a right that every woman has and should maintain.

“Human beings today” and....what when she carrying them?

Example Three could only have come from Wasserman Schultz or House Minority Leader Nancy Pelosi (D-Ca.) In this case, it was the latter whose combination of arrogance and condescension is matchless. (Thanks go out to JoAnna Wahlund, writing at secularprolife.org, for doing a wonderful analysis.)