The 46th annual National Right to Life Convention is right around the corner, and it’s coming to Herndon, Virginia, July 7, 8, & 9. It is time to make arrangements to be at the premier pro-life educational event of this, or any, year! See NRLConvention.com for details.

The Convention not only educates pro-lifers from around the world, it is also a tremendous motivator for people who value the right to life and who use their voices to speak for those who cannot speak for themselves — the innocent unborn.

I am very excited about our opening general session guest speaker, Guy Benson, who is the Political Editor of Townhall.com, a Fox News Contributor, and co-author of End of Discussion. His address to the Convention Thursday morning is titled: “Be Kind, Be Smart, Speak Up: The Pro-Life Message Resonates.”

See “Convention,” page 20


Rep. Holding, who was endorsed by National Right to Life in March, was in the contest with Ellmers due to a redrawing of district lines resulting from a federal lawsuit. Rep. Holding was also strongly endorsed by North Carolina Right to Life.

“There is no member of Congress in recent memory who did greater harm to a major piece of pro-life legislation, while claiming to be pro-life, than Renee Ellmers,” said Douglas Johnson, National Right to Life legislative director.

National Right to Life’s political committees were actively involved in the race. Through mail, phone, and social media, the National Right to Victory Fund and the National Right to Life Political Action Committee reached out

See “Holding” page 15
Men, Father’s Day, and Abortion

June 19 is Father’s Day, where children (occasionally with assistance from their moms) will splurge on their dads. Personally, if each of my kids gave me the same exact tie, I would treasure each one of them just because I love being a dad.

But there will be many men who are not fathers because of their role in an abortion. They will not experience the joy of fatherhood, only the guilt, remorse, and pain that so often accompanies a decision they either acceded to, did not oppose, or, worst of all, coerced the woman in their life into making.

You would not expect pro-abortion feminists to fathom how much pain a man might feel after the death of his child, even if he had done everything he could to persuade the mother not to end the child’s life. Especially if he had moved heaven and earth in a futile attempt to save the child’s life. If he had, it’s harder to treat him like a sleaze ball which is their customary response.

Asking for a role for men reminds me of those card games where you take every trick but one—and then lose the game when a trump card from another suit is laid down. You can offer every reasonable justification why a father should have a voice in a life-or-death decision made about their child only to be trumped by “Autonomy,” the “right to control her own body,” and all the other buzzwords and catch phrases which are unfairly given a higher status.

The last thing the abortion industry wants is more players in the decision-making process. Expanding the range of what is possible is our goal, not theirs. They are one-trick ponies—they want women (and girls) to be placed on a conveyor belt which moves without interruption until she reaches the destination that will “solve” her “problem.” They want their finely tuned propaganda engine running smoothly. A father’s involvement risks throwing sand in the gears.

There are so many bitter ironies. The abortion industry’s campfire story version is that women and girls come to the clinic firm in their conviction, having carefully considered the pros and cons. Is this true in some cases? Of course.

But there is a reason the Planned Parenthoods are so desperate to besmirch and belittle peer-reviewed research revealing a whole...
From the President
Carol Tobias

No matter how disguised, abortion is not “care”

Last week the Los Angeles Times did a story on the so-called “abortion desert,” a term used to describe a number of states that have few abortion facilities. By way of preface, pro-lifers see the “desert” as an oasis, where commonsense abortion laws are like a spring of compassion. But back to Molly Hennessy-Fiske’s article.

Hennessy-Fiske credits/blames the “desert” mostly to the enactment of pro-life legislation. Women have to travel farther to find a facility willing to abort their children.

I’m sure that the principle purpose of the article was to make the reader feel sorry for women who have to drive a longer distance. Why do I think that? Because nowhere in the article is there a whisper about the reason for the trip: the unborn baby.

Willie Parker, who performs abortions in Alabama, Georgia, and Mississippi, told the reporter that many providers in the region won’t handle abortion beyond 15 weeks. “If they don’t make the cutoff, they’re [the women] coming over to Tuscaloosa,” he stated.

It’s unfortunate that Hennessy-Fiske didn’t inform the reader Parker is an itinerant abortionist who aborts babies well past 15 weeks, or that by 15 weeks the unborn baby is fully formed—organs are functioning, blood is pumping, the baby can make a fist, etc. No, we are to focus solely on the perceived roadblocks to abortion and the difficulties placed on the women.

One of the facilities mentioned is South Wind Women’s Center (SWWC) in Wichita, Kansas. In a video accompanying the article, SWWC founder and CEO Julie Burkhart refers to “abortion care,” trying to associate a warm fuzzy feeling to one of the most gruesome procedures imaginable. (NRL News and NRL News Today have run many stories about Burkhart, a former associate of the late abortionist George Tiller, who was infamous for performing abortions so late in pregnancy virtually no one else would do them.)

Burkhart’s effort to make us think positive thoughts about abortion reminded me of the abortion “spa” that opened in Maryland a couple years ago. Women who entered the facility to get an abortion would be given a cup of hot tea and a nice bathrobe. But no matter how hard they try, the abortion industry can’t make us forget that there are two human beings involved in each abortion—the mother and the unborn baby.

Knowledge about the development of the unborn child and the use of sonograms to see that baby moving about in the amniotic sac create too powerful an image. We see two lives.

Whether the abortion performed is the dismemberment procedure, tearing the arms and legs off a fully formed little unborn girl or boy, or the swallowing of a dangerous abortifacient just six weeks after that new life has begun, a human being dies.

No matter how hard the abortion industry tries to remove the stigma of abortion from our consciences, they can’t do it. Too many Americans know that an innocent human life is ended each time an abortion is performed. The myriad of women who have been involved in abortion and who now oppose it can’t be ignored.

At our upcoming National Right to Life Convention July 7-9 in Herndon, Virginia (see page four), we will hear from women who worked in the abortion industry and what pulled them away from it. We will hear from women who have had abortions. We will hear the stories of abortion survivors. We will learn more about how abortion is contributing to the rise of breast cancer. We will hear how abortion is not “care” for women.

The abortion industry argues that abortion is a “safe” procedure for the woman. However, as Olivia Gans Turner, director of NRLC’s American Victims of Abortion, says about her own abortion--she will always be the mother of a dead baby.

Summer is often a time to slow down, take a family vacation, read that book that’s been on the shelf or e-reader for a while, but we can never stop. The lives of unborn children and their mothers are at risk.

We are making great strides but we have been called to do a job many of us consider sacred. Let’s keep on doing it.
The National Right to Life Convention is:
- 3 Full Days
- More Than 100 Pro-Life Speakers
- More Than 100 Sessions

LOCATION:
Hilton Washington Dulles Airport
13869 Park Center Road
Herndon, VA 20171

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Visit NRLConvention.com for more details.
In Hillary Clinton, Abortion Establishment finally has “one of their own”

By Dave Andrusko

Now that pro-abortion Hillary Clinton has “officially” garnered the number of delegates needed to be her party’s presidential nominee, there will be a period of pushing and pulling, testing and trying, as her campaign negotiates with rival Democratic Socialist Sen. Bernie Sanders for what he wants in order to play nice.

Abortion will not be an issue they have to finesse. Both are pro-abortion without reservation.

But there was and is a huge difference between the former Secretary of State and the senator from Vermont. Sure, Sanders says the “right” things and votes the “right” way, but there was a fundamental reason (beyond gender) all the pro-abortion groups lined up behind Mrs. Clinton. Clinton has a long and passionate track record of an unyielding commitment to abortion on demand, not just at home, but to expanding “access” to abortion around the world.

In a word, from the perspective of Planned Parenthood and NARAL and EMILY’s List, she is “one of us” in a way former President Bill Clinton and President Obama cannot begin to match. Clinton can be relied upon to do everything administratively she can to advance the abortion agenda, nominate reliably pro-abortion justices to the Supreme Court, and do everything in her power to make life miserable for the Pro-Life Movement.

Here are just a handful of examples of why Clinton is the darling of the never-enough-abortions-never-late-enough-in-pregnancy crowd. Let’s start with what the Planned Parenthood Action Fund had to say on when Clinton officially announced her candidacy and then work backwards. Remember this is just a partial list.

PPAF “hailed” Clinton’s announcement. “There has not been a candidate for president with a stronger commitment to women or a clearer record on behalf of women’s health and rights,” gushed Planned Parenthood’s president Cecile Richards.

What are these “issues that matter deeply to women?” That would be the usual “access to preventative health care, affordable birth control,” and, of course, “access to safe and legal abortion.”

The release notes that Hillary had a 100% record on the PPAF congressional scorecard for every year she was a U.S. Senator.

In the Senate, Clinton “beat back attacks on safe and legal abortion,” PPAF said, and worked “to ensure low-income women and those serving in the military had access to abortion.”

PPAF says “Clinton has long fought for access to safe and legal abortion.”

PPAF approvingly quotes her testimony at a 4/22/09 hearing before the House Committee on Foreign Affairs, in which she declared “Family planning is an important part of women’s health, and reproductive health includes access to abortion.”

And that’s just for starters.

In 2003, Senator Clinton voted against the Partial-Birth Abortion Ban Act. The bill banned a gruesome abortion procedure, used in the fifth month and later, in which an abortionist delivers a living baby, except for her head, then punctures the base of the skull and suctions out her brain, after which the now-dead baby is removed from her mother. The law was ultimately upheld by the U.S. Supreme Court.

Senator Clinton also voted against the Unborn Victims of Violence Act, which passed in 2004. The UVVA allows federal and military prosecutors to bring charges on behalf of an unborn child when he or she is the victim of a violent federal or military crime.

In March 2003, Clinton voted for the Harkin Amendment to endorse Roe v. Wade, which allows abortion on demand for any reason.

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

More recently, 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.

We are witnessing across the country.

In just the first three months of 2015, more than 300 bills have been introduced in state legislatures – on top of the nearly 30 measures introduced in Congress – that restrict access to abortion.

As Marie Smith, of the Parliamentary Network for Critical Issues, wrote, just a few weeks ago Clinton addressed the last day of the Women Deliver 2016 conference in Copenhagen via video message. Clinton called for renewed efforts to “break down the barriers holding back women and girls around the world” and stated, “Gender equality, including sexual and reproductive health and rights, must be a core priority.”

See “Clinton,” page 15
Abandoned in college laundry room, “Baby Jane Doe” graduates 32 years later from same school

By Dave Andrusko

A friend recently forwarded a story from *Minnesota Public Radio*, the first sentence of which perfectly captured the heart of the story: “Here’s your daily dose of sweetness.”

32 years ago, a student at San Francisco State University, who happened to be “taking a course in newborn care,” found a baby in a box in the laundry room.

“Her body temperature had dropped precipitously and her skin had turned blue,” wrote Bob Collins. “She’s been putting up a fight ever since.”

That fight culminated for Jill Sobol when she graduated from the same university at which her mother had abandoned her in 1984!

“I know I’m a capable person, but I had difficulties in high school,” Sobol, now 31, told the *San Francisco Chronicle*. “I had dyslexia, and some ADD (attention deficit disorder) and learning disabilities. I’ve gone to a lot of tutors, and people who taught me learning techniques.”

Sobol’s story of pluck, persistence, and loving adoptive parents will make anyone’s day.

Collins writes

Success in school eluded Jillian, but not because she wasn’t bright. When she read, letters appeared flipped around, evidence of a learning disability. She suffered from migraines. At 12, depression settled in. Her adoptive father, who had graduated from Yale, and mother, a UC Berkeley grad, loved education and didn’t hesitate to let

Sobol knew she was adopted from her earliest years. But it was not until she turned 16 that her mother told her about the circumstances surrounding

her try a new school if the old one wasn’t working.

In all, Jillian attended four high schools,

Sobol’s birth, Collins wrote, “and how she [her birth mother] must have been very young and scared,” Jillian Sobol said. “I’m not certain of her actual words. It’s more the feelings of feeling special and feeling loved.”

Then came the shock: “That couldn’t be me!” She and her father visited the library and read the old newspaper articles

together. “There was an outpouring of love from the people who found me, and the people at the hospital. And this army of people trying to help me and find (the parents). I do feel so grateful for all of that — and how it led me to my amazing parents and family.”

If her story weren’t already amazing enough, consider this. Sobol had written a letter years before to her birth mother but got no reply. She also tried Facebook. “The woman friended, then unfriended, Sobol on Facebook.”

Having learned last month that some Facebook messages can be hidden from view, Sobol looked to see if she had any.

She found one. It had been sitting, unseen, for nearly two years.

“I have something to tell you,” her biological mother had written. “I’m very proud of you. And thank you for being you.”

The stunning message capped off the years Sobol had spent considering her mother’s predicament.

“That’s a horrible spot to be in for a woman, where the only choice she had was to abandon her child in a box,” Sobol said. “I’ve faced it by not letting it dictate my life. The

See “Abandoned,” page 11
Midwest Planned Parenthood Affiliates Merge to Form “Powerhouse”

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

On July 1, 2016, Planned Parenthood of Kansas and Mid-Missouri will merge with Planned Parenthood of Central Oklahoma to form a new regional “powerhouse affiliate”—Planned Parenthood Great Plains (PPGP).

The merger is part of a larger consolidation trend that has been occurring at Planned Parenthood for some time. In May, two major affiliates in Michigan, Planned Parenthood of Mid and South Michigan (itself part of previous mergers) and Planned Parenthood of Western and Northern Michigan, merged to form a new $20 million statewide affiliate, Planned Parenthood of Michigan (PPMI), with twenty clinics scattered across the state.

Laura McQuade, current president and CEO of the Kansas and Mid-Missouri affiliate, told reporters that though the move in her region will involve some consolidation, it will not require layoffs or clinic closings.

“It’s harder and harder to carry a CEO and four to five VPs when you’re in a smaller geographic area,” McQuade told the Wichita Eagle. The change “has to do with creating a powerhouse, regional delivery health care model.”

The merger “makes us a stronger and a more sustainable affiliate,” McQuade told the Kansas City Business Journal. “We believe it enables us to look as expanding access to patients, bringing services closer to them, and it also enables us to look at expanding types of services in each of our health centers.”

Clearly a conscious theme for the merger, McQuade echoed to the KC Business Journal what she told the Wichita Eagle, the change “has to do with creating a powerhouse, regional delivery health care model.”

The merger gives the new Planned Parenthood Great Plains affiliate a total of eight clinics, two in Kansas (Wichita and the headquarters at Overland Park), four in Missouri (Columbia, Gladstone, Independence, Kansas City), and two in the Oklahoma City area (Oklahoma City and its suburb, Edmond).

Plans are already in the works to open a new clinic in Oklahoma City soon after the merger becomes final, bringing the total in that metropolitan area to three. While none of the clinics in Oklahoma City are currently offering abortion, Bonyen Lee-Gilmore, a spokesperson for the Kansas and Mid-Missouri affiliate, told the Wichita Eagle, “[W]e’re always keeping our options open.”

The new PPGP affiliate will be a $12 million operation, with the former Central Oklahoma affiliate contributing about a quarter of that, according to the Planned Parenthood of Kansas and Mid-Missouri (PPKM) is proud to announce we are expanding to Oklahoma City! Planned Parenthood

Great Plains (PPGP) will launch July 1, 2016. This means more health centers and greater access to specialized health care services including annual exams, STI testing and treatment, transgender care, Pre Exposure Prophylaxis (PrEP) and abortion.”

See “Midwest,” page 10
At the end of May Gov. John Bel Edwards signed into law Louisiana HB 1081, the Unborn Child Protection from Dismemberment Act, now known as Act 264. The bill, authored by Rep. Mike Johnson, R-Bossier, and carried on the Senate floor by Sen. Beth Mizell, R-Franklinton, protects unborn babies by ending the brutal practice of dismemberment abortion in Louisiana. In a dismemberment abortion, the abortionist uses forceps to seize and tear body parts from a live, unborn child.

The following comments were made after the governor signed the bill:

* Author Rep. Mike Johnson: “As I explained on the House floor, the Unborn Child Protection from Dismemberment Act legislation is more than just good public policy. This legislation is a statement about who we are as a people. In Louisiana, we believe every human life is valuable and worthy of protection, and no civil society should allow its unborn children to be ripped apart. Incredible as it seems, we needed a law to say that. We have it now.”

* Louisiana Right to Life Legislative Director Deanna Wallace: “Dismemberment abortion kills a baby by tearing her apart limb from limb. Before the first trimester ends, the unborn child has a beating heart, brain waves, and every organ system in place. Dismemberment abortions occur after the baby has reached these milestones. Thankfully, the Unborn Child Protection from Dismemberment Act will stop these abortions in Louisiana, of which 1,000 are performed each year in Louisiana.”

* Louisiana Right to Life Executive Director Benjamin Clapper: “Thanks to Gov. Edwards’ signature, Louisiana becomes the sixth state in the nation to protect unborn babies from the brutal practice of dismemberment abortions. We appreciate Rep. Mike Johnson and Sen. Beth Mizell for their leadership in passing this law through the Louisiana Legislature.”
Kudos to LEGO for baby-in-the-womb minifigure

By Dave Andrusko

I’m guessing many of our NRL News readers will have the same reaction I did to the life-affirming, babies-are-just-like-us announcement from LEGO: will pro-abortionists go nuts just as they did when the Doritos ad ran at the last Super Bowl?

On May 31, LEGO announced that it had created a graphic that depicted a LEGO baby in the womb. If you go to the LEGO Facebook page, you read, “It’s a big day! The first ever LEGO baby minifigure says HEY! to the world, arriving with the LEGO City 60134 Fun in the Park set, tomorrow June 1st.” [For those of us not familiar with the minutiae of LEGOS, minifigures are miniature figurine toys that accessorize LEGO sets.]

As of earlier this week, there were 64,000 comments and 14,446 “shared.”

As you can see above, the graphic looks like a regular birth announcement coupled “with a ‘photo of the toy baby on an ultrasound screen’,” as the Society for the Protection of Unborn Children described it. “The hazy gray ultrasound ‘photo’ shows the smiling ‘baby,’ its size and estimated date of birth.”

Melissa Conway, the spokeswoman for Texas Right to Life, told Independent Journal Review:

“LEGOS’s introduction of the LEGO baby acknowledges that life, including preborn life, is literally and figuratively a growing industry. LEGOS, a widely-loved learning tool, used an ultrasound image to announce the new addition to the LEGO family.

“This campaign and expansion to the toy line is a fun way to acknowledge that life begins in Mom’s tummy and affirms that children can easily and undeniably grasp the importance of life, growth, and family.”

The Facebook responses are wonderful, each one better than the one before. Here are a few:

See “LEGOS,” page 10

The inclusive Old Pledge is still the Best Pledge

By Jean Garton

On May 30, 2016, the United States again observed Memorial Day.

First called Decoration Day, it is a date set aside in 1868 to remember the men and women who lost their lives in wars fought in the then short history of our beloved country.

While always a poignant day, it also a grateful day. Together, as a nation, we remember the freedoms we enjoy because of the valor and sacrifice of the members of our military services.

Memorial Day is marked with parades, services of all sorts, singing of patriotic songs and, of course, citizens reciting the Pledge of Allegiance.

Those key words-- With Liberty And Justice For All--have long been taken at face value. However, in practice today, they have been amended and revised and revamped.

There is the Elitist Version. With Liberty and Justice for All, except for those who are “inconvenient” or “unwanted.”

There is the Materialist Version. With Liberty and Justice for All, but not for the poor, dependent, or those who existence some deem too costly to preserve and defend.

There is the Escapist Version. With Liberty and Justice for… It all depends.

There is the Pro-Abortion Version. With Liberty and Justice for All who have a right to control their own bodies and because a fetus is not a person and because a woman has a right to choose and because, and because, and because....

It is an anti-democratic version of the Pledge that has become one, long run-on sentence that evades the Pledge’s core meaning.

But, then, there is the Pro-Life Pledge. It comes without exceptions but with quotation marks because the words of the Pledge are not ours to change: “With Liberty and Justice for All.” Period!

That phrase speaks of an inclusive, not an exclusive, society. It is that great and historic truth to which Pro-Lifers pledge themselves.
Kudos to LEGO for baby-in-the-womb minifigure

From page 9

couple of typical examples that were posted May 31:

Good timing LEGO!
My wife and I just had an ultrasound of our first child today! AND June 1 is my birthday! June 1st (tomorrow) is our due date! Thanks Lego!

Maybe our very own ‘Minifigure’ will finally arrive today, Darryl!? If he does, this will have to be his first toy!

I can’t say I made an exhaustive search, but I didn’t readily access any pro-abortion feminist gnashing her teeth. If they are able to hold their tongues, that would be far different than their grumpy, snarky response to the Doritos ad.

As you recall, Doritos chose the “ultrasound” ad to play during the Super Bowl. The 30-second ad was one of three finalists in the tenth (and final) year of Doritos’ “Crash the Super Bowl” campaign in which fans submit home-made commercials. It was so good that it finished third in the USA Today survey of all the commercials!

The ad was supposed to be—and was—a humorous take on a dad oblivious to his unborn child moving about on the ultrasound monitor until the baby tries to snatch the chip that the dad is extending in his/her direction.

But in its typical tone-deaf manner, NARAL went bonkers. NARAL wrote about the “anti-choice tact of humanizing fetuses.” Thoroughly annoyed, NARAL grumpily added for good measure, “& sexist tropes of dads as clueless & moms as uptight.”

NARAL was thoroughly lambasted for its clue-less, humor-less, over-the-top response. It just invited parody, the best of which you can watch at www.youtube.com/watch?v=7VU0n0XZa1I

Well done, LEGO.
Arizona Governor signs law ensuring abortion clinics “fully segregate” Medicaid dollars so that none pays for elective abortions

By Dave Andrusko

Arizona Gov. Doug Ducey has signed legislation that would give new powers to the director of the Arizona Health Care Cost Containment System, the state’s Medicaid program, “to decide that certain individuals or entities cannot participate in the system,” reported Howard Fischer of Capital Media Services.

The measure most significantly allows AHCCCS at its ‘sole discretion’ to disqualify any entity that did not fully segregate the tax dollars it is getting to ensure none of those went to providing elective abortions.”

The legislation is in response to a federal appellate court decision that rejected an amendment to the program in 2012 that said any organization that provides abortions cannot be a “qualified provider.”

Fischer interview Gov. Arizona Gov. Doug Ducey Ducey’s health policy adviser, Christina Corieri, who said this measure is legally distinguishable in that it does not bar Planned Parenthood from providing family planning services solely because it also does abortions. More to the point, she said it’s justified.

“It has been longstanding policy that taxpayer funds cannot be used for abortions,” she said. Corieri said this simply ensures that policy — and the legal restrictions around public dollars — remains in place.

Corieri said there’s another difference. The 2012 law permanently barred abortion providers from participating in AHCCCS. The new law simply allows the agency to suspend any organization that does not adequately segregate its expenditures, meaning there’s an ability to once again become part of the Medicaid program.

Abandoned in college laundry room, “Baby Jane Doe” graduates 32 years later from same school

Abandoned in college laundry room, “Baby Jane Doe” graduates 32 years later from same school

love and support I’ve been raised with has allowed me to embrace it and not run from it or be scared by it.”

Sobol is still considering her response. “This summer, I hope to think about it,” she said.

And then this utterly amazing conclusion:

Joining her at commencement was Esther

Raiger, 53, the student who found a baby in a box in a laundry room. Her biological father was there, too.

Sobol is starting work at an events company in San Francisco.

“I take a lot of pride in San Francisco,” she said of the city that once helped her. Now, “I think they need my help.”
In Aldous Huxley’s classic novel *Brave New World*, natural human reproduction has been replaced by laboratory-based methods. All children are conceived and grown in laboratory “hatcheries,” observed and in some cases manipulated during their gestation to predestine them for certain roles in society, and then “decanted” from their vats rather than born. There is complete control over what has become a manufacturing process, disconnected from nurturing as well as from the attitude that each individual human life is intrinsically valuable.

While still some distance removed from Huxley’s futuristic reproductive process, two research groups—one in the U.K. and one in the U.S.—have succeeded in growing human embryos in the laboratory for 13 days, almost twice the time that upper limit for the amount of time in which human embryos may be grown and experimented on in the laboratory. Now they want to go further. The shadow of Huxley’s *Brave New World* is growing, preceded by the attitude that embryonic humans are merely experimental fodder.

The research papers were published in the journals *Nature* and *Nature Cell Biology*. *Nature* also published its own science news story, as well as a commentary on the scientific results. But perhaps most troubling of all is publication of a proposal by several bioethicists advocating for expansion of the currently-recognized limit on the age allowed for experiments on human embryos.

The 14-day limit on laboratory experiments with human embryos has been adopted into law in at least 12 nations (including the U.K.) and included in ethical research guidelines in other countries (such as the U.S.). That particular time point was supposedly adopted because in the next stage of development, the embryo forms the primitive streak, the first sign of a rudimentary nervous system, and is also supposedly past the point at which twinning can occur.

But now the bioethical apologists claim that 14 days was “never intended to be a bright line denoting onset of moral status,” but was simply “a public-policy tool” that allowed policymakers to “carve out a space for scientific inquiry and simultaneously show respect for the diverse views on human-embryo research.”

The 14-day rule is indeed arbitrary. A zero-day limit would be the accurate biological marker, since fertilization delineates the beginning of the human organism. No human being should be used for lethal experimentation, no matter what age or stage of development.

But allowing experiments on human embryos beyond 14 days post-fertilization risks the lives of untold more human beings, in creation and destruction for research purposes. The deadly research on young human embryos has yielded no benefit; meanwhile, morally unproblematic avenues are delivering treatments and even cures for some of the most pressing health issues of our day. No potential, promising scientific results can justify lethal experimentation on any human being, especially the youngest and most vulnerable.

The “arbitrariness” of the 14-day limit can be seen in its success; it worked only as long as it was technically impossible to break. Now that it is possible to move beyond that length of time in human embryo culture, the limit is inconvenient.

There is no discussion about whether to proceed, only how to proceed, and what is the next expedient limit to set, until that new limit also becomes inconvenient. This is a risky venture which encourages further eugenic attitudes and actions.

There needs to be a pause for a deeper discussion about just why such research is being done, and if there are any ethical lines that should not be crossed. How many lives are worth sacrificing? One? One thousand? One million? The real question is not when human life begins, but when do we value any human life.

*Editor’s note. This appeared at cmda.org and is reprinted with the author’s permission.*
Baby Dezmond’s Mom Was Looking to Abort Him. What She Found Instead Was Help

By Amanda Parsley

2015 was a big year in the small town of Artesia, New Mexico, and later you’ll find it was a life-changing year in the life of one special teenager.

While it may have gone by unnoticed on a national scale, the year marks the first in the existence of Pregnancy Help Center of Artesia, the first of its kind in the area reaching out to women in unexpected pregnancies.

Before the center opened its doors in February 2015, the nearest pro-life center was 39 miles away in Roswell, a long distance to traverse in the midst of a crisis.

It took Amanda Ramsey and her team over 18 months to make their dream a reality, from planning committees to board elections and acquiring a building. After all these months of prayer and preparation, Pregnancy Help Center of Artesia was finally set to open in February 2015.

What happened on that first day of the center came as quite a disappointment—but also a valuable learning opportunity—to Ramsey and her co-workers.

“Nothing. Nothing happened that first day,” Ramsey said. “We had more work to do to get the word out.”

The staff and volunteers at PHC of Artesia did just that. As of Dec. 2015, they served their 101st client since first opening their doors.

Though the first handful of clients were expectant moms who were planning to carry to term but were primarily in need of material aid, relational support or education on parenting, Ramsey’s heart to reach clients in the valley of an abortion decision came to fruition in April.

On a day, when the office was closed, Ramsey was out working on the flowerbeds in front of the center when two teenaged girls came around the corner. “They both looked a little rough around the edges,” Ramsey said. “They asked me about a pregnancy test. Even though the office was closed, a girl began asking a different set of questions—starting with adoption and moving into single parenting.

From the initial conversation, the young woman started attending the pregnancy center’s parenting class. She never missed a session.

“I just saw this transformation in her as she became this beautiful child of God,” Ramsey said. “She decided to go ahead and parent her child.”

She just recently gave birth to a beautiful baby boy, Dezmond Ray. He was born on Jan. 23, 2016 at 6:38am. He weighed in at 6lbs 5oz.

That’s just one example of the day-to-day work at PHC of Artesia, which currently provides pregnancy tests, peer counseling, pregnancy follow-up, post-abortive healing and 18 weeks of parenting classes—after which the staff throws a new mom-to-be a baby shower.

The center’s services also include a baby boutique, where a mother can spend “baby bucks.”

Ramsey said they also have big plans for the future.

“In 2016, our goal is to have a sexual integrity program,” Ramsey said. “Currently, we are not a medical facility, so in three years, our goal is to have ultrasound services. In the next five years, we plan to have STD/STI testing for our clients as well.”

All these accomplishments and plans have not been without struggles. There has been opposition in the community, and occasionally Ramsey has been heckled at speaking engagements.

“When they asked for volunteers, I thought that would be neat,” Jamie Heady, peer counselor with the center, said. “I wanted to learn as much as I could, so that I could be prepared for any questions someone might have. Knowledge is power. And if I am going to dive in God’s work, then Satan is going to come at me hard. I wanted to be ready.”

Celebrating its one-year anniversary, the Ramsey and Heady are invigorated by an abundance of women and their families who have been hungry for the hope the pro-life message brings.

Around the center, they have had a tagline to focus them on their work: “We’re saving babies, sharing the Gospel with parents, and doing it all again tomorrow,” Ramsey said.

Editor’s note. This appeared at pregnancyhelpnews.com [https://pregnancyhelpnews.com/phc-artesia].
I was pleased but not surprised at the response to “Ethically sound stem cells provide “meaningful” recover in stroke victims” that ran June 2 in NRL News Today. Good news sometimes really does travel fast.

The research at Stanford University School of Medicine is so encouraging and potentially applicable to such a wide range of disorders that I thought I’d take a second pass for NRL News readers, and in so doing, address a couple of questions that came up.

A brief summary. One of the “givens” for researchers forever and a day is that after a certain point in time, the brain will not regenerate. In the research, which was reported on in the journal Stroke, 18 patients who had suffered strokes between six months and three years previously, allowed surgeons to bore holes in their skulls and inject adult stem cells from the bone marrow of two donors into the damaged areas.

In our post June 2, I don’t think I did justice to how much improvement the patients had made. According to the story written by Sarah Knapton, Science Editor for the Telegraph.

“The remarkable recovery we saw in many of these chronic stroke patients was quite surprising,” said Prof Gary Steinberg, Chair of Neurosurgery at Stanford, who has spent 15 years researching stem cells. “This wasn’t just ‘they couldn’t move their thumb and now they can’. Patients who were in wheelchairs are walking now. Their ability to move around has recovered visibly. That’s unprecedented.

Dr. Steinberg told New Scientist, “One 71-year-old woman could only move her left thumb at the start of the trial,” adding, “She can now walk and lift her arm above her head.”

From our perspective, along with the sizable improvement, there were a string of positives. At the top of the list is that the source was not embryonic stem cells but adult stem cells about which there are no ethical objections.

Then there is the possible application of the therapy to other neurodegenerative conditions such as Alzheimer’s disease, Parkinson’s, and Lou Gehrig’s Disease [amyotrophic lateral sclerosis].

On top of that, more and more evidence that previous thinking—that the affected brain circuits are “dead”—is not the case. Says Dr. Steinberg, “Now, we have to rethink this, and I personally think the circuits are inhibited, and our treatment helps to disinhibit them.”

Dr. Ralph Sacco is chairman of neurology at the University of Miami’s Miller School of Medicine. He told UPI

“The latest thinking is that the big virtue of stem cells — in addition to their anti-inflammatory and immunological effect — may be their ability to secrete chemicals that activate those surrounding brain cells so that they can start to pick up function for the parts of the brain that no longer work right.”

I asked our resident expert on stem cells, Dr. David Prentice, what appears to have happened in the brains of the patients. He told NRL News

What they are saying is just that it doesn’t look like the bone marrow adult stem cells go make lots of new brain cells. Rather, the adult stem cells seem to go into the brain and wake up endogenous repair mechanisms within the brain. This may be a bit like a general ordering the troops into action, making the brain cells more flexible to engage in repair.

Dr. Steinberg (as we previously noted) is properly cautious and is already talking of a larger study.

But Sonia Olea Coontz, understandably, was less restrained.

“The other treatments before surgery didn’t work,” she told UPI’s Alan Mozes. “Not really. I felt like my whole body was dead. Like it wasn’t working at all. Rehab didn’t help. But after the surgery, it felt like my body was all of a sudden awake.”
Do “even jokes have their limits”? Yes, concluded *Newsbusters’* Katie Yoder in a typically astute recent column.

Context? Pro-abortionists believe the more women “tell their stories” about their abortions, the more at ease the public will be with dismembering tiny members of the human family. But Latasha Leggero, a recent convert to Judaism, figured it was okay to drag her new found faith into the mud and take the storytelling many steps further.

Appearing on *Conan*, she tastelessly added to the absolutely correct observation that “You’re part of this beautiful religion seeped in culture,” the idea that “ Abortions are cool.”

Worse yet she mocked her new religion, quipping, “I mean, you could get an abortion on every Jewish holiday and it would be okay,” leaving O’Brien looking for the nearest exit.

“I don’t think they go around saying ‘abortions are cool,'” he said. “Not like the Fonz” (the famously “cool” character from the 1974-84 television series, *Happy Days*).

During one of the several awkward pauses, Leggero erupted, “I’m not saying I am going to get an abortion but, you know, it’s just nice to – it’s like AAA. Like, you’re not going to use all those tows, but – no, it’s just nice to know.”

Unfortunately, such boorishness on such a sensitive topic—and her determination to drag others into her tastelessness— is nothing new. Yoder concludes Leggero has long made abortion a topic of her career. In 2013, she asked in a Facebook post, “What are the most popular abortion names?” while in 2014 she tweeted that she would “no longer perform in states where abortion isn’t legal.”

During Comedy Central’s 2015 Roast of Justin Bieber, Leggero laughed about Bieber’s (non-existant) close call with abortion as he sat next to her.

“Justin was born to a teenage single mom. No wonder he’s got moves. He was in the womb dodging a coat hanger,” she said.

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Actress Latasha Leggero “joking” about abortion on a recent Conan O’Brien program.

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**In Hillary Clinton, Abortion Establishment finally has “one of their own”**

*From page 5*

Smith added

Activists have pushed for expansion of the sexual and reproductive agenda since the 1995 Women’s Conference in Beijing when Clinton led the US delegation as First Lady. In her remarks she referenced Beijing and stated,

“...and the gains we’ve made since then prove that progress is possible. But as you all know too well, our work is far from finished. This is an important moment as we chart a course to meet the new Sustainable Development Goals.

We have to break down the barriers holding back women and girls around the world.”

Clinton’s embrace of abortion is worldwide. She would eagerly lend her administration’s support to the efforts already well underway to undermine protective abortion laws.

Hillary Clinton is being hailed in some quarters at least, for smashing the ultimate glass ceiling. Pro-lifers look at her possible accession through a different lens.

We know, were she to become President, that there would be countless more unborn babies whose bodies would be smashed.
Providing PPFA with free advertising is media’s stock and trade

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

It can be argued that Planned Parenthood does not need a communications department, because there are plenty in the news media who are willing to promote the organization, free of charge, and without charging for overtime.

As if I needed another reminder, I recently ran head-first into another case of blatant media bias when it comes to the abortion giant known as Planned Parenthood.

The Scranton Times-Tribune this week ran a glowing endorsement of Planned Parenthood in an op-ed piece entitled, “Trained, ready to fight for freedom of choice.”

The author, Laura Quinones, spoke of her unbridled support of Planned Parenthood, including her enthusiasm for the Planned Parenthood Action Fund’s “largest volunteer training in history,” which took place in the Commonwealth of Pennsylvania. This training, the activist writes, was to “make a difference in the 2016 elections and beyond.”

She further spoke of “reproductive rights” being “under attack,” and touted both the Roe v. Wade decision and abortion.

It occurred to me that this column screamed out for a response—especially given the fact that the newspaper’s home city, Scranton, was once dubbed the “pro-life capital of the U.S.”

I penned a letter to the editor making the following points:

1.) some gravely important facts were missing from the op-ed;
2.) the abortion giant performed more than 327,000 abortions in fiscal year 2014—a rate of one abortion every 90 seconds;
3.) a series of undercover videos have shown high-ranking Planned Parenthood officials blithely discussing the proposed sale of baby body parts while eating salad and sipping wine;
4.) Planned Parenthood receives $500 million taxpayer dollars a year while showing a complete unconcern for the health of women inside their mothers’ wombs.

An editor rejected my letter? Why? I hadn’t addressed what the columnist had said in her column, I was told.

But I had taken on the column head-on—noting its glaring omission of key facts—facts that could arguably change a person’s view of Planned Parenthood. Sometimes omission is a greater sin than commission, and I felt it was clearly true in this case.

The editor’s response to my retort was that abortions account for “3 percent of (Planned Parenthood’s) medical services.” That is an accurate regurgitation of a Planned Parenthood talking point. But it is incredibly misleading, since PPFA arrives at the figure by counting every STD test, every packet of pills given out, and even a woman’s initial pregnancy test as a separate service, even though these may all be bundled and sold together as part of the abortion.

And, oh by the way, abortion is PPFA’s largest profit center.

Perhaps this explains why Roe v. Wade has been able to survive for so long and why more than 58 million preborn babies have perished since the tragic 1973 U.S. Supreme Court ruling.

The general public is shielded from the facts about abortion and Planned Parenthood by a news media that are willing to defend the abortion operation and its grisly trade at all costs, including balanced and comprehensive coverage of a controversial issue.

When I went to Northwestern, I was taught that journalism was a profession that was ennobled because it was dedicated to a pursuit of the truth. But the truth is absent in editorial pages that fail to include hard and fast abortion statistics and opt instead to present a pristine cheerleading piece about an entity that takes the lives of more children than any other, while ignoring the searing pain of women who mourn their dead babies.

No wonder the newspaper business is dying. They might have had 327,000 more subscribers, but Planned Parenthood aborted them—news the newspapers were not willing to print.
“Culture of Death”: a mother lode of insight and wisdom

By Dave Andrusko

“There is one view of bioethics which says that it should somehow work to bring social harmony and peace. To that my response is, Who says so? It seems to me that bioethics, to be serious, has to ask hard, even nasty questions. If that leads to peace, fine. If it doesn’t, that is also fine.” — Daniel Callahan, Nov./Dec. 1993 Hastings Center Report Special Supplement

“Our culture is fast devolving into one in which killing is beneficent, suicide rational, natural death is undignified, and caring properly and compassionately for people who are elderly, prematurely born, disabled, despairing, or dying is a burden that wastes emotional and financial resources. Indeed, it is alarming how far the [bioethics] movement has already pushed medical ethics away from the ideals and beliefs that most people count on to protect them when they or a loved one grows seriously ill or disabled.” — Wesley J. Smith, Culture of Death

“Culture of Death” book is a mother lode of insight and wisdom and deserves all the attention we’re giving it at NRL News and NRL News Today.

Smith traces the triumphant arc of what he describes as a “medical intelligentsia” — “moral philosophers, academics, lawyers, physicians” who make up what we commonly call bioethicists. To be sure, there is your run-of-the-mill bioethicist nothing to you and me, other than the infamous Peter Singer, the first full-time professor of bioethics at Princeton University’s Center for Human Values. (John Leo once said of him, “As a thinker, Peter Singer is consistent, clear, the not-everyone-who-is-human-is-a-person flag. It is this handful of men and women have insisted that bioethicists be the final court of appeals in matters of life and death.

Why are they so incredibly dangerous? The answer is actually quite simple. With the exception of the rare dissenter, they don’t think like we do. It is a point of pride to them that nothing is self-evidently true, no matter how deeply a part of our tradition, no matter how deeply a part of our tradition, no matter how crucial a buttress to protect us from our worst instincts.

In the 1993 essay from which I quoted at the beginning, bioethicist extraordinaire Daniel Callahan wrote about “Why America Accepted Bioethics.” For our purposes today, what is most revealing is how Callahan believed that bioethics took a “middle course” between Joseph Fletcher (whose world view Smith aptly describes as “paradoxically anarchic and totalitarian”) and religion.

In a keen moment of semi-candor, Callahan tells us, “The first thing that...bioethics had to do — though I don’t believe anyone set this as a conscious agenda — was to push religion aside.” And while there are surely bioethicists who are believers, when it comes to public policy, to invoke “God-talk” is bad manners, akin to chewing your nails at the dinner table.

Smith helps us see why this antipathy (and it has become nothing less) is crucial. If one believes that people are of inestimable worth simply because they are — that it is preposterous to believe that some but not all human beings are also legal “persons” who in some ways reminds you of 19th century lawyers: anyone who hangs up a shingle qualifies for this ill-defined specialty. But that’s not whom Smith is concerned with in his book.

Rather, Smith focuses on a subset, a small cadre, an elite society within the brotherhood. Most of their names mean nothing to you and me, other than the infamous Peter Singer, the first full-time professor of bioethics at Princeton University’s Center for Human Values. (John Leo once said of him, “As a thinker, Peter Singer is consistent, clear, the not-everyone-who-is-human-is-a-person flag. It is this handful of men and women have insisted that bioethicists be the final court of appeals in matters of life and death.

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By Melissa Ohden

Editor’s note. Melissa Ohden is the survivor of a “failed” saline abortion in 1977. She speaks all over the world including at the last five National Right to Life Conventions. Melissa will also speak at the upcoming convention in Herndon, Virginia.

“How do you know that you are not part of a book? That someone’s not reading your story right now?” – Jodi Picoult.

Everyone has a story. Everyone. But every story is different, and how we are called to use our story is also different. We are not all called to share our stories publicly; we are not all called to write a book. What we are each called to do, however, is live out the story of our life as God has written it, and believe it or not, as we live out the story of our lives, others are reading it, right along with us. What are they reading in the story of your life? The story that you’ve worked to edit or even create for yourself, or the story that God wrote for you?

Life, Unplanned. Unexpected.

“Nearly all the best things that came to me in life have been unexpected, unplanned by me” – Carl Sandberg.

The words unplanned and unexpected are often faced with fear and dread in our world, especially when it comes to pregnancy. But behind the unplanned lies great opportunity for unexpected joys and blessings. Yes, great challenges, also, but even greater potential for growth.

The most powerful blessings in my life have come in very unplanned, unexpected ways. I may not have experienced an unplanned pregnancy, but both of my daughters and the son that I miscarried have brought me the most unexpected of gifts—love, lessons about life and faith, and yes, the most unplanned of difficulties from time to time.

Facing our youngest daughter’s medical issues has been one of the most defining moments of our lives. I did not expect for her to face so much in her first year of life, and although it was hard, it was an unexpected blessing. She taught us so much more than we even knew before about God’s presence in the midst of suffering, His healing power, His purpose and plans for every life.

We were never promised that life would be easy. What we were promised is that God would never forsake us. And His promise is true.

I’ve lived out the unplanned, the unexpected in my life in many ways, and I understand how frightening the unknown in our lives can be. I want to encourage you, though, to take that first step out into the unplanned, the unexpected, and experience the amazing blessings that come from living out the story of your life, even when you can’t see the story in its entirety to know how it will end.

Life Comes Full Circle.

“The life of every man is a diary in which he means to write one story, and writes another; and his humblest hour is when he compares the volume as it is with what he vowed to make it” – J. M. Barrie, The Little Minister.

The little girl who was supposed to die in an abortion grows up to be a woman that brings life and restoration to others.

Over 30 years later, while encouraging others to pray for the mothers, the fathers, the children who are being impacted by abortion, the baby who was prayed for (along with all of the babies at risk of being aborted) comes face to face with a number of the very people who had prayed outside of St. Luke’s Hospital in Sioux City, Iowa, in 1977–the very year, the very hospital where she survived the failed abortion.

The very hospital where her life was supposed to end in the abortion, a place that signified death and suffering to her, is transformed thirty years later into a place that holds the most beautiful memories of her life, when she gives birth to her first daughter there, herself.

There are no coincidences in this world.
National Right to Life Celebrates Holding Victory over Ellmers

From page 1

to pro-life households in the district encouraging them to vote for Holding.

Holding has maintained a 100% pro-life voting record during his years of service in the House of Representatives. He co-sponsored and consistently supported the Pain-Capable Unborn Child Protection Act (H.R. 36), landmark legislation to protect unborn children at 20 weeks (i.e., after the fifth month), a point by which the unborn child is capable of experiencing great pain when being killed by dismemberment or other late abortion methods.

“North Carolina is a pro-life state and Representative Holding reflects North Carolina’s pro-life values,” said Carol Tobias, National Right to Life president. “George Holding provides a strong voice for the most vulnerable members of our society.”

Holding’s record on this legislation contrasts sharply with the words and actions of Rep. Ellmers. In early 2015, Ellmers suddenly launched an extended public campaign against the Pain-Capable Unborn Child Act, although the bill was identical to legislation she had voted to pass on June 18, 2013.

This extraordinary campaign, which lasted for months, included multiple interviews with liberal news media outlets, in which Ellmers made many highly disputable statements about the bill, for example claiming that it would alienate “millennial” voters (despite polling data to the contrary).

Although the bill ultimately passed the House, the delay and damage inflicted by Rep. Ellmers diminished its chances in the Senate, where pro-abortion senators were able to organize a successful filibuster to prevent the ban from advancing despite the support of a majority of senators.

“North Carolina voters are concerned about the right to life, and with the protection of the most vulnerable members of the human family, and voted for Representative Holding so that he can continue to work to advance vital pro-life public policies,” said Tobias. “George Holding is a true pro-life leader.”

The full text of the National Right to Life letter endorsing Congressman Holding is available at www.nrlc.org/uploads/communications/HoldingEndorsementLetter.pdf
WASHINGTON — The National Right to Life Committee is praising the selection of Sen. John Barrasso (R-Wyo.), Rep. Virginia Foxx (R-N.C.), and Gov. Mary Fallin (R-Okla.) as co-chairs of the Republican Platform Committee.

“In selecting Sen. Barrasso, Rep. Foxx, and Gov. Fallin to head the Platform Committee, the Republican National Committee has sent a strong message that the pro-life planks in the Republican platform will steadfastly reflect commitment to the right to life, and that the GOP will proudly stand as the party of life,” said Carol Tobias, president of National Right to Life.

Sen. Barrasso has maintained a 100% pro-life voting record since joining the U.S. Senate in 2007. Rep. Foxx also has a 100% pro-life voting record, and has been a faithful and articulate leader for life as a member of the U.S. House. Gov. Fallin has been a stalwart defender of society’s most vulnerable members, first with a 100% pro-life record in the U.S. House, and now as a strong pro-life leader as governor of Oklahoma.

“As governor, Mary Fallin signed into law 18 pro-life bills protecting unborn children and their mothers during these past five and a half years,” said Tobias.

As adopted in Tampa, Florida, in 2012, the current Republican platform reads, “Faithful to the ‘self-evident’ truths enshrined in the Declaration of Independence, we assert the sanctity of human life and affirm that the unborn child has a fundamental individual right to life which cannot be infringed.”

“We applaud Sen. Barrasso, Rep. Foxx, and Gov. Fallin, and look forward to working with them to ensure that the pro-life values embodied in the Republican platform continue to move us toward a society that welcomes the vulnerable in life, and gives them the full protection of our laws,” Tobias added.

Have you arranged to attend 46th annual National Right to Life Convention?

From page 1

Guy Benson is a familiar voice on the nationally-syndicated Hugh Hewitt radio show, which he regularly guest hosts, and had anchored the Guy Benson Show from February 2008 until September 2015. He was named one of the ‘Top 30 under 30’ conservatives in America by Red Alert politics in 2013. Forbes magazine named Guy to its ‘30 under 30’ law & policy roster in 2015.

Later that same day will feature a panel discussion titled “The Deadly Consequences of Medical Discrimination” with panelists Bobby Schindler (the brother of Terri Schindler Schiavo), Nailah Winkfield (the mother of Jahi McMath), and Sheryl and Scott Crosier (the parents of baby Simon Crosier after whom the bills Simon’s Law in Missouri and Kansas are both named, respectively).

Thursday will be concluded by a panel discussion titled “Sharing Our Stories: How Abortions Affects Women’s Lives.” This panel of pro-life women will discuss abortion from every angle: those who have had an abortion, those who have survived an abortion attempt, and those who have worked for the abortion industry.

These women will provide a powerful testimony against the pro-abortion movement which thinks that the public will become more pro-abortion if they hear more about it. But the pro-abortion movement chooses to tell only one side of the story. The whole truth is more powerful and it prevails.

And this is just the opening day of a three-day Convention!

The National Right to Life Convention is a goldmine of information, with nearly 100 expert pro-life speakers, dozens and dozens sessions covering countless topics.

And that’s not all: in addition to all the vital activist training, we have pro-life exhibitors, a separate “Teens for Life” Convention called “LIFE Camp,” and even affordable childcare for all three days.

Check out the Convention website (NRLConvention.com) for all the exciting details.

And be sure to share this information with your pro-life family, friends, and contacts.

See you in Herndon, Virginia, July 7, 8, & 9.
Attempt to end abortion discrimination against disabled babies

A bill has been introduced in the House of Lords which seeks to end the abortion up to birth of disabled babies.

Editor’s note. This comes from the Society for the Protection of Unborn Children–SPUC.

Lord Shinkwin, the Conservative peer, who is himself, disabled, has introduced a bill on the subject.

Under the 1967 Abortion Act, abortion is currently permitted at any stage of pregnancy if two doctors give the opinion that “there is a substantial risk that if the child were born it would suffer from such physical or mental abnormalities as to be seriously handicapped”.

“Legal and lethal discrimination”

Lord Shinkwin’s Abortion (Disability Equality) Bill proposes to strike that condition from the law, so that the UK’s abortion law would no longer make any reference to disability.

Introducing his bill, Lord Shinkwin said: “Discrimination on the grounds of disability after birth is outlawed. Yet today legal and lethal discrimination on the grounds of disability is allowed up to birth by law.”

Don’t Screen Us Out

There has been an increased focus in recent years on the way the UK’s abortion law discriminates lethally against unborn children with disabilities. In 2013, a cross-party parliamentary commission into abortion on the grounds of disability concluded that there was an urgent need for the government to review the Abortion Act and tackle the discrepancies in the law.

And this year, the Don’t Screen Us Out campaign has raised public awareness about the lethal discrimination faced by unborn children with Down’s syndrome in particular – as well as the complete lack of support many parents faced with a prenatal diagnosis can feel. Over 90% of children diagnosed with Down’s syndrome in the womb are aborted.

Heidi Crowther

A parliamentary rally organised by Don’t Screen Us Out in April also led to a video of one of the speakers going viral. Heidi Crowther, 20, who has Down’s syndrome, wowed onlookers with her powerful defence of the value of all human lives.

According to the latest statistics from the Department of Health, there were 3,213 unborn children aborted in England and Wales last year on the grounds of disability.

‘One-nation’ society

In his speech to the House of Lords, Lord Shinkwin linked his bill to the Conservative Party’s ‘one-nation’ slogan, saying that “For me, a one-nation society is one that does not discriminate on account of disability – a society in which disability equality is a consistent reality.”

He added: “It is illegal for an unborn human being to have their life ended by abortion beyond 24 weeks, but if they have a disability their life can be ended right up to birth by law. Where is the consistency, the justice or the equality in that?”

“Obvious discrimination”

Lord Shinkwin told peers that “such obvious discrimination … is outrageous”.

“If anyone thinks such obvious discrimination is acceptable, I respectfully invite them to imagine the outcry if the same were applied to skin colour or sexual orientation. Such discrimination would rightly be regarded as outrageous.”

As the Abortion (Disability Equality) Bill is a private member’s bill, 12th in the ballot and originating in the House of Lords, it is unlikely that it will make it into law. However, it is to be hoped that by raising the issue with parliamentarians, Lord Shinkwin’s bill might lead to a greater appreciation of the value of all human life – both disabled and able-bodied, before and after birth.
The historic importance of the United Methodist Conference voting against involvement with the Religious Coalition for Reproductive Choice

By Dave Andrusko

Sometimes events that are truly momentous aren’t appreciated as such until much later. My guess is that will be the case—but shouldn’t be—with last month’s decision by delegates to the quadrennial General Conference meeting of the United Methodist Church that two United Methodist entities withdraw immediately from membership in the Religious Coalition for Reproductive Choice (RCRC).

It was not a nail-biter. The vote was 61% to 39%. Delegates first turned down a move by opponents “to refer the petition to the General Council on Finance and Administration,” according to Jessica Brodie, the editor of the South Carolina United Methodist Advocate, “but the UMC gives no money to RCRC.”

Writing in the Detroit News, Mark Tooley described what happened as “The Methodist surprise in Portland.”

Tooley is the author of “Taking Back the United Methodist Church,” and president of the Institute on Religion and Democracy. He offered additional background, beginning with how the delegates “also voted to delete the church’s 40 year old resolution affirming Roe v. Wade.”

Tooley put the role of the UMC—and specifically the United Methodist Women and United Methodist Board of Church and Society, the church’s Washington lobby—in context. (Both are now bound to withdraw immediately from membership in RCRC).

“Mainline” denominations such as the UMC were instrumental in the campaign to marginalize opposition to Roe—it was just “Catholics”; they provided religious cover for the abortion-on-demand crowd; and they portrayed the pro-life cause as Catholic, and RCRC was founded partly to counter the Catholic Church’s pro-life advocacy. For decades RCRC gave religious cover to abortion rights activism. It opposed any legal restrictions on abortion, including parental consent laws, and portrayed abortion as a positive good, even “holy work,” supported by religious ethics.

Please re-read that paragraph. Were were busy telling church folks that abortion was not only acceptable and legal but “holy work.”

As I understand Tooley’s op-ed, the margin of the vote is explained by two primary factors. Methodism is not thriving in the United States but is in places such as Africa. Delegates coming from outside the U.S. are much more traditional. In addition while “Overseas delegates were important” but so too are evolving abortion attitudes on abortion among religious moderates and some liberals. Defending RCRC and its zealous unqualified affirmation of abortion was unpalatable for many especially younger clergy.

The importance of those two developments cannot be over-estimated. Here is Mr. Tooley’s inspirational conclusion:

United Methodism’s departure from RCRC is historic. The once flagship Mainline Protestant denomination is steering a different direction from its longtime liberal church partners as it globalizes and becomes more evangelical.

But the departure also perhaps confirms that overall public opinion, religious and not, especially by the young, is shifting subtly towards pro-life. Many may not politically identify with pro-life advocacy, but they don’t resonate with RCRC-style unalloyed abortion activism.

Methodist lobbyists who in 1973 founded RCRC in the bracing days after Roe v. Wade would likely be surprised by their church’s departure. But history, and God, often have surprises.
On May 25, South Carolina joined the legion of honor by becoming the 14th state to say no, we will not allow you to abort babies who are capable of experiencing pain beyond imagination as they are being torn limb from limb.

The Palmetto State joins Alabama, Arkansas, Georgia, Idaho, Kansas, Louisiana, Nebraska, North Dakota, Oklahoma, South Dakota, Texas, West Virginia and Wisconsin. South Carolina is the second state this year to pass the Pain-Capable Unborn Child Protection Act.

There was a last-minute push by pro-abortionists to pressure pro-life Gov. Nikki Haley into not signing the bill into law. Wasn’t going to happen, but it was good for headlines in the local press.

As you expect—check that, as you would know—the press did its usual number on the bill. Part and parcel of the assault on the Pain-Capable Unborn Child Protection Act everywhere is to act as if nobody in their right mind–or at least no one with academic credentials–could possibly believe that by 20 weeks an unborn baby is capable of experiencing pain.

There is an abundance of evidence which you can find at nrlc.org/abortion/fetalpain and also at doctorsonfetalpain.com. But if you have your mind made up, never lets the facts get in the way.

In that vein, consider the following.

Holly Gatling is the executive director of South Carolina Citizens for Life who was a reporter prior to joining the Movement. She sent a letter to Post and Courier (naturally not printed) in which she challenged the head. Whether it is on the editorial pages or covered/not covered in news columns, you virtually never see even

Congratulations to South Carolina Citizens for Life for a job well done

State becomes 14th to pass Pain-Capable Unborn Child Protection Act

By Dave Andrusko

the reckless comments” of a faculty member of the Medical University of South Carolina “who falsely asserts that the Pain-Capable Unborn Child Protection Act was not vetted by physicians.”

In fact, as Holly wrote, Compelling, academically credible testimony was presented before both the House Judiciary Committee and the Senate Medical Affairs Committee. Witnesses in favor of the Pain-Capable Unborn Child Protection Act included, among others, physicians, lawyers, a doctor of neuroscience, and a 13-year-old athlete, Savanna Duke, who was born missing one leg after her parents withstood heartless pressure to abort her. The sole physician serving in the General Assembly strongly supported the Pain-Capable Unborn Child Protection Act.

All of this is a matter of public record for The Post and Courier to document in the news hole where impartial facts, not ignorant opinions, should be published.

I could write a lot more, but this hits the nail right on the head. Whether it is on the editorial pages or covered/not covered in news columns, you virtually never see even

Congratulations to South Carolina Citizens for Life for a job well done.
Dismemberment abortions are vicious, cruel, barbaric, and not worthy of culture that calls itself civilized

By Dave Andrusko

Emily Crockett, writing at Vox.com informs us (and I kid you not) that “Pro-life advocates are trying to ban abortion by grossing people out about it.”

She’s referring to the Unborn Child Protection from Dismemberment Abortion Act which Louisiana Gov. John Bel Edwards signed the end of May. Six states have banned these grotesque abortions: the other five are Kansas, Oklahoma, West Virginia, Mississippi, and Alabama.

According to Crockett

D&E bans are quickly becoming the latest trend in anti-abortion lawmaking at the state level. They have colorful names like the “Unborn Child Protection from Dismemberment Abortion Act.” And some advocates and lawmakers are using them to focus on the lurid details of later abortion procedures, in hopes of turning more Americans against abortion and making the procedure easier to outlaw or restrict.

“Colorful names,” “lurid details,” “grossing people out…” Wow.

So, what do we have to say about that, fellow pro-lifers? Or is Ms. Crockett’s brilliance so dazzling, we are rendered speechless?

Let’s take her argument apart, which reminds us of the way the abortionist uses steel tools to tear apart a well-developed unborn child. Only we won’t use brute force, but gentle logic.

Of many counters, here are just two.

#1. Crockett tells us that pro-lifers want to “make D&E the new ‘partial-birth abortion,’” admitting (by the way) “[T]he catchy ‘partial-birth’ rebranding by anti-abortion advocates, and “rebranding”—so it’s up to the likes of Crockett to storm around in high dudgeon.

But pro-lifers also believe that the reasoning on display in the Supreme Court Gonzales decision that upheld the federal ban on partial-birth abortions (which are now illegal) is fully applicable to banning a “technique” (such a neutral sounding term) that tears and pulverizes living unborn human beings, rips heads and legs off of tiny torsos as the defenseless child bleeds to death. It is a measure of how trafficking in abortion dehumanizes practitioners and defenders alike that their default position is to tell us that all “surgery” is gross.

#2. There is the usual trotting out of the usual suspects who agree with Crockett, including ACOG which long ago sold its institutional soul to the Abortion Industry. Even though she has the big boys on her side, notice the conditional conclusion: “These bans are catching on, even though they are probably unconstitutional.”

“Probably unconstitutional”?! One could easily make the case—as we have in the pages of NRL News and NRL News Today dozens of times—that the Unborn Child Protection from Dismemberment Abortion Act is completely consonant with the reasoning the justices employed in arriving at the decision they did in the 2007 Gonzales decision.

Dismemberment abortions are more than just “gross.” They are vicious, cruel, barbaric, and not worthy of culture that calls itself civilized.
The contrast: giving birth to Down syndrome baby or aborting

By Sarah Terzo

Louise Drinkwater’s daughter Molly has Down syndrome. Her mother describes why she is grateful she chose life for Molly despite her having Down:

She’s an incredibly happy little girl. She lights up our lives... I’ve been a person who thought academic achievement was really important, and it’s been a beautiful learning experience to realize that value is about the soul of the person. Molly has really helped me to sit back and enjoy the moment rather than racing to get ahead. (1)

Having a daughter with Down syndrome changed Drinkwater and gave her a different perspective on life. She has come to believe that there is more to life than what society considers to be achievement. As you can see, she does not regret giving birth to her daughter. Molly enriches her life.

Drinkwater’s experience is in stark contrast to the experience of another mother, Marie Ideson, who aborted her Down syndrome baby:

I was bullied into going ahead with an abortion,” says Ideson, 46, a GP surgery manager. “I only wish I could turn back the clock. I think of the daughter I never had every day. I’ll always regret it.(2)

Ideson has been left with nothing but the memory of seeing her daughter’s dead body, which was shown to her after her abortion. She named her child Lillie. You can read more of her story here[clinicquotes.com/woman-bullied-into-aborting-her-down-syndrome-baby/].

Choosing life for Molly brought Drinkwater peace and happiness, but choosing (under duress) to abort Lillie only brought Ideson grief and regret. The contrast between these two women, one who chose life and another death, is striking. Drinkwater has no regrets, but Ideson may spend the rest of her life mourning her aborted child.

1. J Robotham and D Smith “Love Me or Let Me Go” Sydney Morning Herald, August 31, 2004
2. Alison Squire Smith ‘I was bullied into aborting my baby” Herald Sun December 4, 2011

Editor’s note. This appeared at Live Action News and is reposted with permission.
Finding happiness in ways that we simply cannot imagine

By Dave Andrusko

A Friday night tradition for my wife and me is to have dinner and attend a movie at a local “arts” theatre. When I recently scanned the menu of films, one of the titles reminded me of a French film we saw way back in 2007.

No doubt my aging synapses had been primed by the stories we posted recently about patients making remarkable recoveries from devastating brain injuries.

To be honest, nine years ago, I knew next to nothing going in about “The Diving Bell and the Butterfly,” which proved to be one of the most remarkably films Lisa and I have ever seen. All I knew was that it was based on a book of the same name by a journalist. At the risk of sounding trite, I came away thinking it was one of the most inspirational stories I have ever encountered.

I later found out that at roughly the same time Michael Cook used that story to illustrate an important point.

“What medical condition would definitely make life not worth living? At the top of most people’s lists would be locked-in syndrome: complete paralysis and inability to communicate other than by blinking. It was made famous in ‘The Diving Bell and the Butterfly,’ a book and a film about French journalist Jean-Dominique Bauby.”

But “most people,” of course, are not in that condition. The responses of those who are to their situation was not what you would expect.

“Surprisingly, though, the largest-ever survey of chronic LIS [Locked-In Syndrome] points out how the results “has confirmed other research into how people adapt to catastrophic misfortune.” Part of that adaptation is a thirst for social interaction. Steven Laureys of the Coma Science Group at the University Hospital of Liege in Belgium, was the author of the study and someone whose work we have written about several times before.

Everyone understands that being locked-in presents a tremendous challenge, especially the first year. How could it not?

But the situation a patient faces today is not necessarily the one they will encounter tomorrow, or five years from now. The impact of improvements in medical technology can be enormous—a truth that is crucial to helping patients retain hope.

That is why Dr. Laureys said (and this is nine years ago), “Recently affected LIS patients who wish to die should be assured that there is a high chance they will regain a happy meaningful life.”

Indeed, “I predict that in coming years, our view of this disease is really going to change,” Dr. Laureys said, according to Cook. “It makes a huge difference to be able to read a book or go onto the internet at will.”

But perhaps the important consideration of a study such as this (to quote Cook) is that it “challenge people to reassess what makes life worthwhile and ‘dignified’”

Cook quotes a Canadian neuroscientist unconnected to the study, who told him, “We cannot and should not presume to know what it must be like to be in one of these conditions. Many patients can find happiness in ways that we simply cannot imagine.”
How far will pro-abortionists go to ensure a dead baby?

By Dave Andrusko

Pro-abortionists are often either too cute for their own good and/or believe the public can be bamboozled (if they scream loud enough) into believing anything. If you were to read the pro-abortion blogosphere (which I do so you won’t have to), Purvi Patel is the innocent victim of an overzealous prosecutor. As they habitually do, they attempt to make a martyr out of someone whose behavior most people—and I do mean most—would find abhorrent.

Don’t confuse Ms. Patel with the Tennessee woman who, according to police, decided to self-abort “by filling a bathtub with a few inches of water, then used a coat hanger to repeatedly stab her baby,” as Sam Stockard of the Murfreesboro Post, reported. She grew “alarmed and concerned for her safety when she saw a great deal of blood in the tub, and her boyfriend took her to St. Thomas Rutherford Hospital emergency room,” Stockard wrote. “From there, she was transported to St. Thomas Mid-Town in Nashville where staff members saved ‘Baby Yocca,’ according to police.”

The 24-week baby, who weighed a pound and a half at birth, suffered massive injuries, according to Stockard.

He will need a medically-experienced foster parent, remain on oxygen and take medication daily because of problems with his eyes, lungs and heart stemming from damage caused by the coat hanger. Medical staff also said other physical problems will arise when the child grows older.

Last year St. Joseph Superior Court Judge Elizabeth Hurley sentenced Patel to 20 years in prison for throwing her live-born 25-30-week old newborn son into a dumpster following a chemically-induced abortion in 2013. Her lawyers want the conviction thrown out. Last month a three-judge panel of the Indiana Court of Appeals heard both sides.

There are many very important questions that arise. A key point in Patel’s appeal (as the AP explained) contends she should not have been convicted of neglect, arguing prosecutors failed to prove she knew she had delivered a live baby or that she could have done anything to save its life. It argues that summoning medical help would have been “futile,” citing a forensic pathologist’s testimony that the infant likely would have died within about a minute.

There are several possible responses.

Chief Judge Nancy Vaidik (according to reporter Christian Sheckler writing for the South Bend Tribune) “challenged [one of Patel’s attorney’s] argument that Patel could not have saved the baby by calling for medical help.”

“If someone has cancer and only has hours to live and someone shoots them, that person is guilty of murder,” Vaidik said. “You don’t say, ‘oh, he only had five hours to live.’ That’s what I’m struggling with.”

My question would be this. They insist the baby only lived for a very brief time, so Patel couldn’t/shouldn’t be convicted of child neglect.

But what if the baby had refused to die and Patel “out of panic,” smothered the 25-30-week-old unborn baby or threw the still living baby in the same dumpster?

Pro-abortionists (at least in the accounts I’ve read) skirt around that issue. In other contexts they don’t.

But consider: if there is an absolute right to abortion, why should the mere fact that the baby survived have anything to do with anything? The objective is a dead baby and if the mother “fails” using a coat hanger or a chemical abortifacient, how can she “neglect” someone whose death she foresaw and planned and fully intended to make come to pass?

The obvious response is that if a baby survives—whether the abortion takes place in or out of an abortion clinic, with or without an abortionist’s assistance—there ought to be an affirmative obligation to do what you can to save the baby, knowing, of course, that the
Sex-Selection abortions are terrible for women–unborn baby girls

By Dave Andrusko

I should have known better, of course, but on first glance I honestly misread the intent of the headline at Slate.com: “Why Sex-Selective Abortion Bans Are Terrible for Women—and Unconstitutional.”

Just for a minute, I thought that Mark Joseph Stern was suggesting that killing unborn babies BECAUSE they are girls is “terrible for women,” even if some court might conclude the law is unconstitutional. (A lower court virtually always says protective legislation is unconstitutional. That’s why it is so important to have an attorney general eager to defend the law in court.)

I should have known better. Pro-life columns at Slate.com are as rare as hen’s teeth.

There is nothing original in Stern’s pro-abortion critique of laws banning abortions on the basis of sex. What is particularly interesting are two throwaway comments, intended to disarm anyone silly enough to think this represents the ultimate act of sex discrimination.

Stern starts by saying

These measures might seem to put abortion rights supporters in a tough spot: The American conversation about abortion centers around women’s equality, yet sex-selective abortions would appear to undermine that equality by perpetuating sex discrimination.

Ah….yes. As I say, these remarks are just a set up to tell Slate readers that since these laws do not come out of the feminist movement, they must come from “conservative state legislatures,” the ultimate devils. And therefore these laws are not only wrongly sourced, but merely “symbolic” because, Sanger assures the reader, “if sex-selective abortions happen at all in the United States, they are extremely rare.”

We do know that they take place in New York City’s Asian communities. Writing in the New York Press (“Sex-Selective Abortion in New York”) Rui Miao and Virginia Gunawan note

The number of sex-selective abortions performed in this country is difficult to determine. The reasons women have abortions are not officially tabulated. Major abortion clinics, such as Planned Parenthood, do not ask for reasons on consent forms. The city’s Department of Health does not list reasons in a summary of vital statistics and they do not keep statistics on numbers of females and males that are aborted. …

“We’ll pick out girl fetuses, disabled fetuses, and say: You can’t abort them.

These laws say to women: Hey, we thought you cared about discrimination against women. If you do, support these laws, and put your money where your mouth is.

Ah….yes. As I say, these remarks are just a set up to tell Slate readers that since these laws do not come out of the feminist movement, they must come from “conservative state legislatures,” the ultimate devils. And therefore these laws are not only wrongly sourced, but merely “symbolic” because, Sanger assures the reader, “if sex-selective abortions happen at all in the United States, they are extremely rare.”

But, to be clear, if sex-selection abortions were as common in the United States as they are in parts of Asia, it wouldn’t make any difference to the Sterns and the Sangers. To ban them would be to infringe on “abortion rights.”

However, it would make a difference to most Americans, the overwhelming percentage of which oppose sex-selection abortion. A survey in Great Britain found the same results.

So, Sterns and Sangers aside, people are unnerved by sex-selection abortion.

The issue is not simply one of numbers. Referring to a law recently passed in Indiana, Emma Green, writing in The Atlantic, observed

But whether they intended to or not, these lawmakers exposed a set of difficult moral questions that pro-choice progressives tend to ignore in their quest to defend legal abortion. Should couples be able to abort their female fetuses—and it’s almost always female fetuses—in the hopes of having the boy they really wanted? Should a mom, ashamed at having a mixed-race baby, be able to abort because of race? Should parents give up on a baby with Down syndrome? What about Tay-Sachs, which almost always kills children by the time they turn four?

Sex-selection abortions are a particular point of weakness and inconsistency on the part of pro-abortion feminists.

Stern and Sanger illustrate just how weak is their defense of this lethal discrimination.
About Obama’s smartest guy in the room reputation…

By Dave Andrusko

As pro-abortion President Barack Obama, thankfully, approaches the end of his second term, he is busy polishing his “legacy” and (feeling his oats) beginning to offer snarky comments about not just the usual suspects–anyone who disagrees with him, most particularly Republicans–but about Donald Trump who will be Hillary Clinton’s opponent this fall.

By now you’ve probably seen the video of Mr. Obama in Indiana, trying to make the case that if elected, Mr. Trump will undo all the wonderfulness of Obama’s eight years.

It’s never been a secret that it’s always an adventure when Mr. Obama is not reading off of a teleprompter. But in this case, it’s as if Obama’s thoughts are in the equivalent of what in baseball is called a “pickle.” Caught between first and second base, he’s words desperately race back and forth, forth and back, vainly in search of coherence.

Since we have been told even before he became president that Obama is incredibly brilliant and articulate, to boot, how do defenders reconcile Obama’s off-the-cuff verbal gobbledygook with his image as the smartest guy in the room?

One of the commentators reminded us how today by linking to a 2011 piece by a Los Angeles Times columnist, headlined, “Obama’s fast brain vs. slow mouth.” Meghan Daum wrote

Admittedly, the president is given to a lot of pauses, “uhs” and sputtering starts to his sentences. As polished as he is often applied to his speeches), his impromptu speaking frequently calls to mind a doctoral candidate delivering a wobbly dissertation defense.

But as always the case with President Obama, what in anyone else’s case would be deemed a weakness is, in truth, a sign of his superiority.

But consider this: It’s not that Obama can’t speak clearly. It’s that he employs the intellectual stammer. Not to be confused with a stutter, which the president decidedly does not have, the intellectual stammer signals a brain that is moving so fast that the mouth can’t keep up. The stammer is commonly found among university professors, characters in Woody Allen movies and public thinkers of the sort that might appear on C-SPAN but not CNN. If you’re a member or a fan of that subset, chances are the president’s stammer doesn’t bother you; in fact, you might even love him for it (he sounds just like your grad school roommate, especially when he drank too much Scotch and attempted to expound on the Hegelian dialectic!).

No, the previous quote was not from the parody publication, The Onion, it actually appeared in print five years ago.

And, by the way, I did have grad school friends (not roommates) and none of them sounded like this.
Perinatal Hospice: When an Ultrasound Leads to Heartache instead of Happiness

By Tracy Winsor

Editor’s note. This is Part Two of a series on Perinatal Hospice which appears on the webpage of the Georgia Life Alliance, NRLC’s State Affiliate. Part One was reposted previously at www.nationalrighttolifenews.org/news/2016/04/perinatal-hospice-caring-for-a-frail-child-in-utero-and-those-who-love-them/

Sometimes the happy occasion of a prenatal ultrasound suddenly isn’t.

South Carolina expectant parents, Keith and Katherine Brown, learned that their first pregnancy was complicated by a prenatal diagnosis when abnormalities were detected during an anatomy scan at nineteen weeks gestation.

There were a number of issues, but most notably there was excess fluid in their daughter's skull and abdomen and all four of her limbs were atypical. Additional testing was inconclusive, but the doctors suspected that Baby Grace had a rare genetic condition. The prognosis was grim.

“We were presented with many new medical terms and I just kept thinking that this was not supposed to be happening,” shares Katherine Brown. “Learning our first child had defects that would not likely allow her to live outside the womb was heart breaking.”

The Browns were fortunate that a perinatal hospice service which provided support to parents carrying to term following a life-limiting prenatal diagnosis existed in their community. A genetics counselor at their maternal fetal medicine practice referred them to Perinatal ComfortCare, which provided ongoing contacts and practical guidance for the Browns over the next eight weeks.

Perinatal hospice is a life-affirming care option for parents committed to carrying a baby with a prenatal diagnosis to term.

Tammy Tate, CEO/Founder of Perinatal ComfortCare, met with the Browns to share information regarding how they could cherish the time they had with their daughter, and memory-making options they could request at birth. When Grace was born still at twenty-seven weeks gestation, Tate was there at the hospital providing comfort and consolation, and assisting in coordinating their care.

“The practical guidance she gave us in terms of preparing us for what we would experience in the hospital was invaluable,” notes Brown.

“I had no idea I could tell the hospital staff what I wanted during delivery or that I could hold my baby and spend time with her,” she adds. “We would’ve never thought of taking pictures of us holding Grace, and I am not sure we would have had a funeral without Tammy’s guidance.”

First introduced in medical literature in 1997, perinatal hospice care provides comprehensive support to expectant parents told that their baby will die at or shortly after birth. Utilizing a multidisciplinary team including genetic counselors, obstetric and neonatal physicians, nurses, clergy, social workers, etc., perinatal hospice services support parents during pregnancy, and for at least one year after delivery.

Parents’ needs are addressed by providing appropriate medical consults, assistance preparing birth plans, guidance regarding options for newborn care, and bereavement support. This specialized service for parents prior to delivery allows them to prepare fully for birth, and to parent their baby for the time they will have no matter how brief or how frail that child’s life may be. The parent response to perinatal hospice is positive.

Nancy Mayer-Whittington, co-founder of Isaiah’s Promise, a perinatal hospice service in Maryland, is herself a mother who carried to term following a prenatal diagnosis.

Mayer-Whittington observes, “I would have felt less isolated and less alienated had I received the care we at Isaiah’s Promise provide to parents. Having the support of someone who can suggest options and understands the experience can make all the difference in the world.”

Tracy L. Winsor, MPA, is Co-founder of Be Not Afraid, a private non-profit corporation whose mission is to provide comprehensive, practical, and peer-based support to parents experiencing a prenatal diagnosis and carrying to term. She can be reached directly at Tracy.Winsor@benotafraid.net.
Clock ticking as Supreme Court approaches deadline for decision on pro-life Texas law HB 2

From page 2

Referring specifically to the requirement that abortion clinics meet the standards of ambulatory surgical centers, in their brief the CRR told the justices that nearly half of the 40 abortion clinics operating in Texas closed after the law passed and “many more would shut down,” if the law is upheld, according to Reuters.

CRR lawyers also insisted abortion is “safer than many other common medical procedures.”

The major new wrinkle, as NRL News Today wrote about extensively, was a brief by over 100 female lawyers touting the significance of their abortions to achieving their aspirations. Not a word about the babies, of course, and (naturally) their families were 100% behind the decision to eliminate one of their members.

Before we address briefs filed by the state of Texas and other defenders of HB 2, it’s important to recall the decision written by Judge Edith Jones for a unanimous three-judge panel of the U.S. Court of Appeals for the 5th Circuit, upholding provisions of Texas’ H.B. 2.

In her 34-page opinion, Jones recalled something never, ever mentioned in press accounts: “Planned Parenthood conceded that at least 210 women in Texas annually must be hospitalized after seeking an abortion.”

Judge Jones also wrote, “Witnesses on both sides further testified that some of the women who are hospitalized after an abortion have complications that require an OB/GYN specialist’s treatment.” She added, “Against Planned Parenthood’s claims that these women can be adequately treated without the admitting-privileges requirement, the state showed that many hospitals lack an Ob/Gyn on call for emergencies.”

Then there is the thorough and thoughtful 44-page brief filed by Texas Attorney General Ken Paxton.

Among many other arguments, Attorney General Paxton reminds the justices that Petitioners ignore the fact that under the Fifth Circuit’s decision, which granted as-applied relief in McAllen, petitioners would have this Court serve as “the country’s ex officio medical board with powers to approve or disapprove medical and operative practices and standards throughout the United States”—a role this Court has specifically declined to assume.

“In addition, he wrote, “States are given wide discretion to pass medical regulations.” Paxton explained that the admitting privileges requirement had already been upheld by courts in a separate lawsuit which “correctly conclude[d] that the challenged provisions of HB2 do not facially impose an undue burden.”

[The abortion providers] wish to proceed as if their first lawsuit against HB 2 never happened,” the state attorney general continued. “But they litigated that case to a final judgment, and arguments and evidence they chose not to present there are barred.”

Last January, NRLC filed a brief in Whole Woman’s Health v. Hellerstedt. James Bopp, Jr., NRLC General Counsel and co-author of the brief, explained that key to the case is the level of scrutiny federal courts should apply to decide if such laws are constitutional.

The NRLC brief addressed the Court’s “undue burden” scrutiny, explaining that the 5th Circuit correctly followed that applicable test.

The brief put the undue burden test in the context of the Supreme Court’s early adoption of the role of national medical board, in which it substituted its judgment for that of legislatures in striking quality-control regulations of abortion providers. It did this though it originally said, in Roe v. Wade (1973), that states could enact such regulation.

See “Clock,” page 33
A “radical shift in outlook,” brought about by the birth of her daughter, enables mother to let go of the grief at losing her own father

By Dave Andrusko

The post is so stunning, so beautifully written, so intense that I will not spend more than a few sentences telling you that rewire news was the last place in this galaxy that I expected to read, “Only Through Becoming a Parent Have I Been Able to Let Go of My Grief at Losing My Own.”

Rewire is the new name for the second iteration of the dismal pro-abortion site Rhrealitycheck.org. The re-named site is just as hysterically pro-abortion, just as vicious in its treatment of our Movement as its predecessor. But…. then….out of the blue….. comes …. This magnificent post by Sharona Coutts. And because I really do want you read her entire tribute to her father, who passed away 21 years ago, and wonder at the power of healing that came in the form of her child who was born late last year, I will highlight just three of multiple points I could make.

#1. I just returned from a celebration of life for a universally loved and admired family member. Perhaps because this man’s children loved him with the same passionate intensity that Coutts loved her father, I could more fully appreciate how the first ten years following his death “were a mix of depression, anxiety, and an all-encompassing bewilderment that these emotions were now cascading over me, unmitigated, untidy, unpredictable.”

I recognized a familiar refrain when Coutts wrote, “If he came back, I caught myself in that delinquent thought. Consciously, you know these things—he’s dead, he’s gone, he will never, ever be back—but your subconscious rebels, riots even.”

I could no longer hold myself under such tight, absolute control. Like water in an old pipe, the emotions had found ways to leak out at weak points. At times, I felt my structural integrity was compromised. I couldn’t help but think just how dark some of the days must have been for Coutts. You read something like the following and you realize the real danger of assisted suicide, particularly for people who do not have Coutts’ inner resources:

I did and said things that I found excruciatingly embarrassing, because I did and said things that I found excruciatingly embarrassing, because I did and said things that I found excruciatingly embarrassing, because I did and said things that I found excruciatingly embarrassing, because

#2. Having read so many stories and personal accounts of people who just gave up with the passing of the person who gave their life coherence, I couldn’t help but think just how dark some of the days must have been for Coutts. You read something like the following and you realize the real danger of assisted suicide, particularly for people who do not have Coutts’ inner resources:

I did and said things that I found excruciatingly embarrassing, because

#3. A few weeks ago was the 21st anniversary of her father’s death. Coutts makes clear she wanted to share a celebration but

“Not of my 21st birthday as a child of grief, but a different birthday: the birth of my daughter late last year. For me, it has only been through becoming a parent that I have been able to let go of the grief over my own parent.

“Why?”

Because “Never in my life have I lived so joyously in the present, looking forward to every increment of the day.”

Because “Having a baby has brought me back to the present in the most profound way I could ever imagine. In fact, I couldn’t imagine it; it has taken me by surprise. Because I know she will need to eat, and I will feed her, I know I will see her every few hours. And I actively, constantly, intensely look forward to that.”

And because “To be able to share it with a partner who is just as overjoyed and present is more than I ever hoped to have. I know that my daughter will have a love for her father just as strong as mine was for the one I lost.”

Read her post at https://rewire.news/article/2016/05/26/becoming-parent-able-let-go-grief-losing/ and share it with others.
panoply of emotional and psychological aftershocks. These offer proof positive that abortion is far more damaging than PPFA wants you to know. It also suggests that many women made a decision they didn’t want to make, indeed took an action that was at odds with their fundamental principles and values.

_Roe v. Wade_ stuffed an undemocratic decision down our gullets which is why abortion is the bone in the throat of contemporary culture. We are all choking on it, and that assuredly includes all those men who failed the woman in their lives at a crucial juncture and whose lives have never been the same since.

A couple of years ago I wrote two posts (and a follow up) about a cover story that appeared in _New York Magazine_. In writing “My Abortion,” Meaghan Winter talked to 26 women who opened up about what they’d experienced.

Pro-abortionists insist by “telling my story” women will contribute to the “destigmatization” of abortion. Pro-lifers look not just at the particular accounts in _New York Magazine_, but also at so many egregiously. The ugly face of abortion—which included many stories of subtle and overt pressure to abort—was everywhere.

For me the most telling observation was

“When I had the ultrasound, I asked for the picture and a nurse said, ‘Seriously?’ A month later, he [the boyfriend] said he regretted it too. When I cry about it, I cry alone. He thinks it would make me sad to talk about, but I don’t want our baby to think we forgot. I’ve never heard of anybody else having an abortion here.”

But if the abortion industry is determined to hide what so many women go through, they are positively apoplectic at the prospect that the public may realize the grief extends outward likes ripples on a pond.

My thoughts and prayers go out to all those men who have lost unborn children out of weakness (or worse) or in spite of every effort they made to dissuade the mother of their child.

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_Clock ticking as Supreme Court approaches deadline for decision on pro-life Texas law HB 2_ (From page 31)

The brief then explained how Justice O’Connor argued in her dissent in _Akron_ (1983) that the Court should adopt a more deferential undue burden test. The brief noted that NRLC submitted a friend-of-the-court brief in _Casey_, the 1992 Supreme Court decision, stating what would be necessary to make an undue burden test workable.

In _Casey_, the Court adopted key aspects of that approach, in a decision that Justice O’Connor co-authored. Casey’s lower-scrutiny, more deferential, undue-burden test got the Court out of the medical-board role.

The NRLC brief explained that the nature of the undue-burden test from _Casey_ must be understood in light of Justice O’Connor’s understanding of it in her _Akron_ dissent. The brief showed that _Casey’s_ undue burden test, properly understood, supports the 5th Circuit’s analysis. And it explained that the concern causing the Court to reaffirm _Roe_ generally in _Casey_ while abandoning the medical-board role by greater deference, require the Court not to abandon the proper understanding of the undue burden test (unless the Court wants to overrule _Roe_).

As Bopp explained, “After striking many reasonable medical regulations, the Supreme Court decided to abandon the medical-board role in _Casey_. It did so with a lower-scrutiny, undue-burden test. The Texas challengers want the Court to again be the national medical board by reviving strict scrutiny. That would damage the rule of law and the Court’s legitimacy.”

Finally it’s important--vital--to re-read the foursome written about the oral arguments by NRLC’s Dr. Randall K. O’Bannon [www.nationalrighttolifenews.org/news/2016/03/issues-raised-as-the-supreme-court-considers-texas-abortion-law-part-4-going-too-far/#.V1fYyOTV9M]. Dr. O’Bannon highlighted assertions made by opponents which were highly questionable, at best, and based on shoddy research, at worst.

[1] Pro-abortionists never challenged the Pain-Capable Unborn Child Protection Act. Also not before the justices is a provision that requires the abortionist to be in the same room as the woman receiving the chemical abortifacients (which is not the case with so-called “web-cam” abortions) and that abortionists follow the protocol approved by the FDA for the use of the two-drug “RU-486” abortion technique.
A “solution” in search of a name

Assisted suicide supporters cannot agree on what to call it

By Michael Cook

Legalisation of physician-assisted suicide in four American states left out one thing: a name for what happens. The laws in Oregon, Washington, Vermont and California specify only that what happens is not suicide. An English name for this phenomenon was a topic raised at the 2016 Conference World Federation of Right-to-Die Societies in Amsterdam earlier this month.

Members of the Alt-Suicide group, an American-based internet forum which includes some of the leading names in “choosing an early exit at the end of life,” considered 31 words and phrases in 2014. These included Cathartic Death, Deliberate Life Completion, Exiting, Rational Life Termination, Non Adscititious [sic] Death, Consensual Murder, and Rational and Loving Suicide. “Dying with Dignity” was the favourite in a small survey. One of the members of the forum, Bill Simmons, a California real estate attorney, has been lobbying hard for the word “dignicide,” even though it was the least preferred in the Alt-Suicide survey. The analysis he presented at the conference is interesting.

The movement needs, he contends, “a more positive, single word that is not burdened with negative connotation.” The members agreed that the word “suicide” should be taboo. The word should be short, so that it is easy to tweet. The task is, he says, to “Replace an undesirable single word with a desirable single word.”

Simmons concludes with a suggested slogan: “Our motto is: ‘Dignicide. You Decide.’” No conclusion was reached about what word to use.

“Culture of Death”: a mother lode of insight and wisdom

and deserving of the law’s protection – it is very difficult to wander off down the bizarre rabbit trails on which you find so many bioethicists hopping. As individuals, some bioethicists are rumbling down the slippery slope faster than others. But the trajectory is so steep that, eventually, even those dwindling few who might like to establish a foothill here and there will fall – – to the lethal detriment of the medically vulnerable.

Smith shows us how this relentless secular (and in my view essentially amoral) elite reduces humanity to “organisms” and “biological matter.” They start from the premise that since we have no special claim to an exalted status – – we’re just one of the animals in the jungle – – most bioethicists spend most of their days like big game hunters in pursuit of formulas which turn more and more people into natural resources.

With rare exceptions, they separate the wheat (personhood) from the chaff (“beings”) on the basis of cognitive capacity. That explains why newborns, disabled people of all ages, those who have suffered brain injuries, and especially the elderly who have Alzheimer’s are in the bioethicists’ cross hairs.

In an ideology that worships at the altar of rationality and self-consciousness, animals can be “persons” and Down syndrome babies disposable refuse. If you are weak and vulnerable, counting on the kindness of these strangers is a losing proposition.

For now, the view that it is better to die than to live cognitively disabled has won out in almost all courts, most legislatures, and most certainly the overwhelmingly majority of hospitals. But it is only natural that pro-lifers would be in the other corner. We begin as passionate believers in the essential goodness of most Americans particularly (as we used to say) when their consciousness is raised.

Words and ideas such as sacrifice, sharing burdens, selflessness (as well as an acceptance that vulnerability is a fact of life) is literally unintelligible gibberish to the bioethics elite. But for most of the rest of us it is our mother language.

The debate on the table is as fundamental as it gets: to whom are we morally obligated? Is that circle confined to the precocious and the Mensa wannabes? Or is our responsibility much wider, extending most especially to the weakest among us?

Perhaps another lawyer posed the question best when he asked, “Who, then, is my neighbor?” Let us hope our answer mirrors the actions prescribed in the truly human answer he received so very long ago.

You can purchase “Culture of Death” wherever books are sold. If a store doesn’t carry, it can be special ordered. It’s in stock at Amazon and Barnes and Noble online and is available in Kindle, Nook, Applebooks, etc.
“Among the evils and injustices in American life in 2016, abortion and euthanasia are different and stand alone”

By Dave Andrusko

As surely as the swallows return to Capistrano, we will hear ten different variations of the same “truth”: the abortion issue just isn’t “that big a deal” to the electorate in 2016. And just as faithfully, pro-lifers will work diligently to provide what NRLC calls the “pro-life increment.”

Why? Because this advantage the pro-life candidate holds over the pro-abortion candidate among voters who base their vote on the abortion issue has, does, and will carry many, many pro-life candidates to victory in highly competitive races.

I mention that true truism before commenting on a column written by Archbishop José H. Gomez of the Archdiocese of Los Angeles which is adapted from his recent foreword to the 4th edition of “Catholics in the Public Square,” by Bishop Thomas J. Olmsted of Phoenix.

It is a polite but firm rebuttal of those who argue for a kind of moral equivalency on “serious social issues.” Without lessening the importance of bringing the “Church’s social witness” to a range of “affront[s] to human dignity,” Archbishop Gomez observes

But the hard truth is that not all injustices in the world are “equal.”

We can understand this perhaps better about issues in the past than we can with issues in the present.

For instance, we would never want to describe slavery as just one of several problems in 18th-century and 19th-century American life.

There are indeed “lesser” evils. But that in our society as what the Catechism of the Catholic Church calls “structures of sin” or “social sins.”

Later, he writes about “this broader mentality — what

means there are also “greater” evils — evils that are more serious than others and even some evils that are so grave that Christians are called to address them as a primary duty.

Among the evils and injustices in American life in 2016, abortion and euthanasia are different and stand alone. Each is a direct, personal attack on innocent and vulnerable human life. Abortion and euthanasia function

Francis and previous Popes have called a ‘culture of death’—that the Church “must confront.”

That is why abortion and euthanasia are not just two issues among many or only questions of individual conscience.

Abortion and euthanasia raise basic questions of human rights and social justice, questions of what kind of society and what kind of people we want to be.

Do we really want to become a people that respond to human suffering by helping to kill the one who suffers? Do we really want to be a society where the lives of the weak are sacrificed for the comfort and benefit of those who are stronger?

That is why any approach that essentially tolerates abortion and euthanasia or puts these issues on a par with others, not only betrays the beautiful vision of the Church’s social teaching, but also weakens the credibility of the Church’s witness in our society.

So, in this culture, the Church must insist that abortion and euthanasia are grave and intrinsic evils — evils that are corrosive and corrupting, evils that are at the heart of other social injustices.

Abortion and euthanasia are “fundamental” social issues, because if the child in the womb has no right to be born, if the sick and the old have no right to be taken care of, then there is no solid foundation to defend anyone’s human rights, and no foundation for peace and justice in society.
Another media outlet gives “One in Three” claim a “Half-True” assessment

Own research suggests the assertion is not true

By Dave Andrusko

My rule of thumb is when sources that are ordinary inhospitable to pro-lifers reveal pro-abortion shenanigans (even if gently), it’s important to bring it to people’s attention, even if it is plowing old ground.

Well, Politifact Virginia (which works in association with the Richmond Times Dispatch) took a look at the above phraseology which appeared, we are told, recently on the website of NARAL Pro-Choice. Politifact Virginia (which works in association with the Richmond Times Dispatch) took a look at the above phraseology which appeared, we are told, recently on the website of NARAL Pro-Choice.

What am I talking about? That the “1 in 3” campaign is, at best, outdated, a worse an ongoing and conscious deception.

You’ll recall the the soundbite: “One in three American women will have had an abortion by the time she reaches the age of 45.”

In a nutshell, (as the concluding paragraph summarizes), the “Half-True” is arrived at even though “the statistic it [NARAL] cites as fact actually is an estimate that might be outdated.”

Got that? An estimate passed off as fact that might (and obviously IS) outdated. Think about this for a moment and this is obviously wrong even to the Washington Post and other Politifact wannabes.

Estimate as fact?

In 2011 the pro-abortion Guttmacher Institute wanted to update its 1992 estimate that “43 percent of U.S. women would have at least one abortion by the time they turn 45.”

Why? “Abortion rates had declined since 1992, and researchers wondered whether that meant that the percentage of women who would have an abortion at some point in their lives also had dropped,” Gorman and Selby write.

NARAL derives its 1 in 3 from the updated study from Guttmacher. What matters is “a caveat,” according to Gorman and Selby.

Guttmacher said its estimate stands as long as “prevailing abortion rates” continue. The abortion rate, however, has not held steady. According to Guttmacher, it fell from 19.4 per 1,000 women in 2008 – when the lifetime incidence estimate was made – to 16.9 abortions per 1,000 women in 2011, the latest figures available.

So, given this–and given the fact that the percentage had already been ratcheted down from 43% to roughly 33%—how could the 1 in 3 lifetime estimate possibly be accurate? Politifact Texas also called it Half True. The Washington Post gave this claim Two Pinocchios (“significant omissions and/or exaggerations”).

Here’s Guttmacher tortuous explanation why the 1 in 3 shouldn’t be abandoned yet:

Rachel Jones, co-author of the Guttmacher report, told us in an email that it’s possible – but far from certain – that the percentage of women expected to have an abortion before age 45 would go down with the abortion rate.

Jones said Guttmacher plans to take another look at the lifetime incidence of abortions. “We will not have an updated estimate for several years,” she said.

Yikes. I wonder if Jones said this with a straight face.

With Guttmacher providing cover, we can be confident NARAL and its sister pro-abortion organizations will spew the same distortion for at least “several years.”
How far will pro-abortionists go to ensure a dead baby?

From page 27

baby’s chances are limited by the violence that has already been inflicted on her.

In the stories, principally from the South Bend Tribune and WSBT, we learned a lot about how Patel considered her baby. During last year’s trial, I quoted WSBT’s Kelli Stopczynski who did an admirable job of summarizing and quoting from the prosecution’s closing argument.

The state told jurors Patel’s intent was to give herself an illegal abortion, and that’s what prosecutors say she did.

“This whole production is about a little boy” said Deputy Prosecutor Mark Roule. “He wasn’t expected, he wasn’t wanted. He lived a brief and horrible life. What happened to him was very, very wrong.” Roule reminded jurors about details they’ve already heard—that the baby was born on the bathroom floor at Patel’s home. She wrapped him in plastic bags and put him in a dumpster behind Moe’s Southwest Grill in Mishawaka—a restaurant her family owns.

Then, when her pain and bleeding wouldn’t stop, Patel went to the emergency room.

“She continued to lie to doctors and nurses—she tried to keep secret the fact that she’d been responsible for another life and done nothing,” Roule said.

Then, six months of text messages between Purvi Patel and her best friend about her irregular period, a positive pregnancy test in June and the abortion pills she ordered online and took, according to those texts. According to WNDU, Channel 16 Patel’s attitude was perhaps captured in a text to a friend that read, “Just lost the baby. I’m going to clean up my bathroom floor and then go to Moe’s.”
Hillary Clinton Again Calls for Global Access to Abortion

By Marie Smith

In a video message, U.S. Democratic presidential candidate Hillary Clinton addressed the last day of the Women Deliver 2016 conference in Copenhagen. It is self-described as “the world’s largest global conference on the health, rights, and well being of girls and women in the last decade,” and the first such gathering since the launch of the UN’s Sustainable Development Goals (SDGs).

Hillary Clinton’s message entitled “A Purpose-Driven Life,” was described as “A thought-provoking video from Former U.S. Secretary of State Hillary Rodham Clinton on women’s rights as human rights, and how to translate that vision from the 1995 World Conference on Women in Beijing to action in the 21st century.”

Clinton called for renewed efforts to “break down the barriers holding back women and girls around the world” and stated, “Gender equality, including sexual and reproductive health and rights, must be a core priority.”

Her message comes at a strategic time as the world is seeking to implement measures to achieve the Sustainable Development Goals and ensure by 2030 “universal access to sexual and reproductive health-care services” and “Ensure universal access to sexual and reproductive health and reproductive rights” as stated in the goals on health and gender equality.

Intense debate has taken place at the United Nations over the terms “reproductive health-care services” and “reproductive rights” which are believed by most to include access to abortion. Concern continues over the yet to be completed indicators which will be used to monitor a country’s progress on achieving the goals and targets.

It is well-known that Clinton has long supported abortion on demand throughout pregnancy calling it not only a woman’s right, a human right and a ‘reproductive right’ but unabashedly proclaimed in testimony before the House Foreign Affairs Committee in April 2009 that “reproductive health includes access to abortion.”

Activists have pushed for expansion of the sexual and reproductive agenda since the 1995 Women’s Conference in Beijing when Clinton led the US delegation as First Lady. In her remarks she referenced Beijing and stated, “And the gains we’ve made since then prove that progress is possible. But as you all know too well, our work is far from finished. This is an important moment as we chart a course to meet the new Sustainable Development Goals. We have to break down the barriers holding back women and girls around the world.”

Laws and policies that ban, restrict, or regulate abortion and religious and cultural beliefs that value life from the moment of conception are all “barriers to progress” from the pro-abortion point of view.

Clinton continued that in order to break down the barriers, “we need greater political will and resources” and praised the conference stating, “The Women Deliver summit is critical to this work.”

Among the 5,500 attendees to the four day conference were HRH Crown Princess Mary and Prime Minister of Denmark HE Lars Løkke Rasmussen, Cecile Richards, President of Planned Parenthood Federation of America, the heads of UNFPA and UN Women, parliamentarians from over 50 countries, leaders of NGOs, health experts, donors including Melinda Gates, business leaders, youth and activists from 168 countries.

Abortion was a topic of official discussion and dominated side events hosted by leading abortion promoters and providers including Ipas, IPPF, and Marie Stopped. Abortion-related topics during the conference and at side events included:

- Increasing Access to Safe Abortion: Solutions from the Front Line
- Working with Faith Leaders on Sexual and Reproductive Health and Rights
- Innovations to increase access to safe abortion
- A 21st-Century Agenda for SRHR
- Supporting Expanded Roles for Abortion services by Healthcare workers
- The Private Sector Role in Safe Abortion Provision
- Sexual and Reproductive Rights Within Communities
- Tackling Stigma to Increase Women’s Abortion Access and Rights
- Partnering with Police to Improve Abortion Access