

Queensland Walk for Little Feet 2013

Saturday May 18 was a beautiful warm sunny day in Brisbane – maybe too nice, as some potential walkers may have gone to the beach instead! The number who did walk wasn't high – about 100 people would have done at least part of the Walk – but the enthusiasm was.

Most encouraging was the large proportion of young people who took part. They are keen to make sure the Walk is better promoted amongst their peers for next year's Walk so we'll start painting more signs now! At the other end of the scale, one 90-year-old lady was determined to be part of it and managed to walk half a kilometre despite having a knee problem.

We almost had no difficulties from the pro-abortionists (in contrast to recent years).

Graham Preston



Queensland walkers on 18th May, 2013.

The Real Tasmanian Devil – The draconian abortion bill

At the time of writing, the infamous Reproductive Health (Access to Terminations) bill 2013 has passed the Tasmanian Legislative Assembly (13/11) and we now wait, with bated breath, for the outcome in the Legislative Council which we are told will be debating the bill by the end of June.

The very articulate and outspoken young Tasmanian mother Mishka Gora has continued to use her pen very effectively in defence of Tasmania's unborn.

We must compliment the excellent work of a group of Tasmanians who are leading the fight against the bill.

The Right to Life Australia has participated in the campaign in particular in organising a large letter-writing campaign and placing ads in the Hobart Mercury and Launceston Examiner. See page 6.

Margaret Tighe

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Gillard and Abortion

Prime Minister Julia Gillard has helped the cause of the silent unborn victims of abortion in Australia – more than 100,000 per year and still rising with the abortion pill RU486 now on the Pharmaceutical Benefits Schedule," said Margaret Tighe, President of The Right to Life Australia

She went on, "By raising the issue she has now managed to make it an election issue – an issue that most politicians hope will go away."

Margaret Tighe said, "As one of the convenors of the ALP women's group Emily's List, Ms Gillard has helped into our legislatures women who must agree to vote for freely available abortion. They have played a substantial role in cementing in stone the epidemic of abortion that flourishes in this country."

"Frankly," said Mrs Tighe, "I find her constant TV images with children hypocritical in the extreme – especially when she appears with Down syndrome children when more than 90% are killed in Australia's culture of government funded eugenic abortions."



"To those M.P.'s who shrink from the thought of abortion as an election issue I say let's bring it on. They should take note of our successful campaign at the 2010 Victorian election where we campaigned successfully in nine seats, replacing seven proabortion M.P.'s with seven prolife M.P.'s. Maxine Morand, who introduced the Victorian abortion bill, lost with an 8% swing against her, and Independent Craig Ingram lost with a 21% swing against him. Both publicly blamed the Right to Life Australia for their defeat."

The Abortion of Reason

MISHKA GORA

The Official Blog of Mishka Gora, Reprinted with permission

There is something about abortion that seems to encourage people to take leave of their senses. When it comes to the sacred cow of women's rights, feminists totally lose the plot.

Last week, Frances Kissling, the former head of the absurd heretical group Catholics for Choice, declared that pregnancy "is not natural".

Now, I presume that if you have sufficient grasp of the English language to read and comprehend what I write on this blog I don't need to go into the nitty-gritty of pregnancy and its cause. Suffice to say, if pregnancy is so unnatural perhaps we should all take vows of chastity and embrace the monastic life... or hitch a ride in the Tardis to twelfth-century southern France and join the Cathars.

Sadly, even the Tasmanian-born Crown Princess of Denmark has fallen prey to the sophistry of 'abortion rights', declaring that 'reproductive rights' are "at the core of human life". She is quite correct, of course. Whether or not an unborn child survives its sojourn in its mother's womb is "at the core of human life". How this could ever justify the wanton destruction of that life is more difficult to grasp. Perhaps Her Royal Highness relinquished her common sense along with her Australian citizenship.

These examples, of course, reflect the calibre of the pro-choice movement as a whole. Dr Leslie Cannold, who has been hailed as one of Australia's "most influential thinkers", heads up Reproductive Choice Australia (RCA) which currently has a campaign to "end the stigma" of abortion.

According to RCA, abortion is "a fact of life", part and parcel of a woman's 'right to choose'. This, it seems, is RCA's definitive argument for legalising abortion at all stages of gestation. This is what lies behind their rejection of Senator Madigan's attempts to end the government funding of sex-selection abortion. This is why they instead advocate "referral obligations" and "enforcement mechanisms" and the "requirement" that undergraduate medical training include abortions; that all federally-funded hospitals "regardless of faith-based affiliations" be forced to provide the "full range of reproductive health services" including abortions; and for a national curriculum of "comprehensive" sex education.

I'll have to remember that cogent argument. It is, after all, the basis for society's acceptance of abortion. Let me try it out: "Rape is a fact of life. We must ensure that it is safe, legal, and rare. To do this, we should provide more rape clinics, discard restrictions on the age of the rape vessel, and ensure that a man can never be prosecuted for a rape. We mustn't shame men for their choice to rape women. It's their bodies, after all. No one should tell them what they can and can't do with their bodies. As a woman, I could never understand what it's like to be desperate and have no real choice but to rape. It's not an easy decision, and we mustn't shame men by protesting against rape. Those who protest against rape and intimidate men about their choice ought to be arrested. We need special access zones so that men can rape without being harassed about what's just a basic biological procedure. Hotels that have a conscientious objection to men raping women in their rooms should have



mandatory referral obligations, and all federal government properties should be forced to provide rape rooms. Schools should also offer a curriculum that covers rape." Convinced?

I can already hear the howls of outrage. How dare I compare rape, which is intrinsically wrong, to abortion, which some seem to think is a fundamental human right? I suppose I dare because I think for myself. I don't accept abortion as a right any more than I accept rape as a right. Indeed, rape is easier to comprehend, because at least the rape victim isn't usually one's own child.

I can well believe that our government funds the balderdash of women's rights through pointless academic organisations like the Gender, Leadership and Social Sustainability Research Unit, but what I find difficult to fathom is that ordinary men and women who have enough common sense to see that the emperor isn't wearing any clothes don't dare to exercise their grey matter on this topic. Abortion has become a no-go zone where otherwise sensible and confident people become meek conciliators for whom not offending 'desperate' women takes precedence over saving lives. Men trot out the line "I'm not a woman, so I could never understand..." to absolve themselves of responsibility, as if having a uterus magically turns women into moral arbiters and men into slaves bereft of opinions. And women defend their sex by suggesting that there is no choice, that they are victims of society and male coercion, as if women lose the responsibility of moral agency upon becoming pregnant. In one breath, there is no choice, but in the next it's a woman's right to choose. Talk about exercising a woman's prerogative to change her mind! It seems women's rights includes the right to talk utter nonsense and be treated as a great thinker.

How did we become so duped as to think that a woman who refuses to take responsibility for her own child, the child whom she has a duty to protect and nurture, should be given the sole legal choice of whether her child (who is also her sexual partner's child) should live or die? How did we get to the point where maternal instinct and fatherly protectiveness are derided, where terminating a life with so much potential is hailed as a public good?

So, yes, let's end the stigma. Let's end the stigma of the truth. Let's stop talking about "pregnancy termination" and "contents of the uterus" and "reproductive rights". Let's talk about conceiving a child, motherhood, and responsibility. Women can do better than kill their offspring when they find themselves in a tight spot. Forget the "my body, my choice" mantra. It's your child, your responsibility. A real woman doesn't respond to unanticipated motherhood by killing her child, and a society worth its salt doesn't accord her the legal right to do so. Being a woman doesn't give you any more right to kill than a man. That's equality.

Letter from the President



Dear friends,

The attacks on human life continue. It is hard to understand why this is so, when we live in an age where there is increasing knowledge and wonderment of life in the womb. Yet any attempt to try to stop the killing in the womb of more than 100 000 Australian unborn children each year is met with shrill outrage by the proabortion lobby, given lavish coverage by the media.

Similarly the gradual and creeping push to legalise patient killing in an age where so many strides have been made in medical science, patient care, pain control etc. is also hard to understand. Yet "The Age" continues to promote it.

Recently the Federal Health Minister Tanya Plibersek, was reported in The Age (11/5) as giving \$10 000 000 to allow people to store so called Advance Care Directives on their electronic health record.

"Advance Care Directives" may sound like a harmless idea, in fact they are very dangerous. Those who sign them – often when in good health- do not have any idea of what may befall them in the future. And they may well be signing their lives away because treatment that may well be warranted and necessary to them, will be denied to them, leading to death.

What does all this tell us?

The sad reality is that we face an increasingly aging population with too many old people and not enough young coming on to provide, through their taxes, health care, social welfare and pensions.

Margaret Tighe

Assisted Suicide Bill defeated in NSW

On Thursday 23 May 2013, The Upper House of the NSW Parliament soundly rejected "The Rights of the Terminally Ill" Bill by 23 to 13 votes. It was introduced by Kate Faehrmann, Greens M.P. Everyone was given a conscience vote on the bill. However Kate Faehrmann said that her campaign will continue and the bill will be introduced to the Lower House by her Greens colleague Jamie Parker. CONGRATULATIONS AND THANK YOU to all those who communicated to their Upper House representative in opposing this dangerous bill, but still be vigilant about it being introduced into the Lower House.

South Australia Assisted Suicide bill

By Dr Toni Turnbull, Vice-President, The Right to Life Australia



Written by Independent M.P. Bob Such, the "Ending Life With Dignity" bill 2013, has been partly debated and will continue to be debated on 20 June/ 4 July and/ or 29 July 2013. Several politicians intend to speak to the bill, so we are asking all South Australians to keep up the pressure and keep writing to your representative asking him or her to vote against this bill. Now is the time to redouble our efforts, as the vote will be very close. The last similar bill was defeated 22/20. This bill would give one group of people - doctors- the power to kill another group of people – their patients. The professionals are opposed to this bill – the Australian Medical Association, The Law Society and The Financial Services Council (representing among others, Life Insurance providers). We must communicate that the people are opposed to this bill, so that the politicians will oppose this bill. Don't delay – act today.

Late Term Abortions loses medical licence

Dr Mark Schulberg, the late-term abortionist at the Marie Stopes abortuary in Croydon, had his registration cancelled for a year, due to "serious misconduct" in over-prescribing addictive drugs to his patients.

At the Victorian Civil and Administrative Tribunal hearing on 24th May 2013, Ms Deveson-Crabbe, vice-president of Marie Stopes International and chief executive officer of its Australian operation, told the Tribunal that, "were Dr Schulberg unable to practise, the clinic would find itself in a very parlous state" and that "there are few doctors available to perform terminations generally and very real paucity of those available for post 16 week terminations." The Tribunal reported, "What we found concerning was that the evidence of Ms Deveson-Crabbe made it clear there was no audit of morbidity at the clinic beyond the day procedure."

The purpose of the determination is to "protect the public, by preventing persons who are unfit to practise from practising as medical practitioners." The Tribunal continued, "His conduct was consistent with poor practice, it endangered the patients, it continued over a number of years and we viewed the pattern of prescribing as reckless."

They got him on the drugs but he'll be able to kill the unborn again in a year's time. Al Capone got caught on tax evasion and went to jail for life.

Margaret Tighe

From our U.S. Correspondent, **Kathy Edgeworth**



As I am writing this column Dr. Kermit Goswell of Philadelphia has been convicted of roughly 200 charges, the most serious that he murdered three babies who had survived illegal late-term abortions. Eight of his nine employees, including his wife, pled guilty to a variety of charges. He chose to waive his right to appeal and accept two

life terms in exchange for the prosecution's agreeing not to seek the death penalty. His crimes made him eligible for the death penalty in Pennsylvania. In practice, since the average time between sentencing and carrying out of the death penalty is 10-12 years, and he is past 70, he would probably die of natural causes before his appeals ran out. The details of the charges against him are sickening (like something out of a horror film) and in fact the prosecutor in his summation asked if Mr. Goswell were human. The charges included performing abortions after the state limit of 24.5 weeks, using unlicensed personnel and a whole host of other crimes. \$250,000 in cash was found in his home. The pro-abortion folks are trying to paint him as an outlier, contending he got the punishment he deserved. However, they still feel that giving medical aid to a baby who survives an abortion procedure should be up to the parents, thus supporting infanticide. Whenever a case like this comes up, pro-abortion forces try to paint the abortionist as the exception. However, it is my opinion that the abortion industry attracts many doctors who are one step away from having their medical licenses revoked, especially for things like alcohol or drug use. One abortionist in Baton Rouge had failed an ob/gyn residency. Abortion patients are probably the least likely to complain to the medical board about unsanitary conditions or sue for malpractice. (Malpractice insurance in the U.S. can easily run \$60,000 - \$100,000, depending on the specialty and state). One of the upsetting things about this case is that Dr. Goswell was not initially investigated for illegal abortions, but rather for writing too many prescriptions for pain killers, such as oxycotin. Apparently, he was writing the third most prescriptions in the state for various regulated drugs. He is scheduled to face trial on those charges later this year.

On the state front, we have been making some progress. There have been some victories in Arkansas, North Dakota and Virginia. The Arkansas legislature overrode Democratic Governor Beebe's veto and passed legislation banning most abortions after ten weeks. His stated objection was the possibility that the legislation would not survive a court

challenge, thus trying to avoid offending anybody. Gov. Darymple of North Dakota signed legislation banning most abortions as early as six weeks or when a fetal heartbeat can be detected. In addition, doctors performing abortions would have to have admitting privileges at hospitals. This holds them to a higher standard of competence. Many doctors simply don't want to perform abortions; with luck this may make it harder for clinics to recruit. In Virginia, Gov. McDonnell, a Republican, has signed legislation which would ban the sale of health insurance which paid for abortions.

In-justice Ruth Bader Ginsburg has gone on record as believing that Roe v. Wade actually caused more opposition to abortion than would have been the case had the decision not been so sweeping. She contends that the momentum was in legalizing abortion state by state. Given that pro-lifers enjoyed great success in defeating state measures legalizing abortions in the 1972 elections (the last before Roe v. Wade), I would question that opinion.

The current scandals will make it harder for Mr. Obama to push his agenda, but even if there is an impeachment (unlikely) he won't be convicted in the Senate. Senate Democrats will protect him as they did Mr. Clinton. This is the downside of a presidential system. It is interesting to hear Mr. Obama and Mr. Nixon mentioned in the same sentence. This is the 40th anniversary (to the week) of the beginning of the Watergate hearings, which lead to Mr Nixon's resignation.

Graham Preston – Australia's leading anti-abortion protestor

14 May 2013 – "This morning I went to Court to get the date for my hearing on the failure to move on charge – it will be held on Friday 23 August at the Holland Park Magistrates Court. One piece of good news – a couple of days after my arrest at Salisbury I was outside the Greenslopes "clinic" when a cyclist rode past me and then turned around and came back. It was only then that I recognised him as a friend I hadn't seen for quite some years. We talked for a while and he gave me his business card – he is a barrister! Soon after he left, the police came and moved me on, so that prompted me to contact Simon (Fisher) and yes he is happy to represent me on this case. He is doing it pro bono too but if anyone would like to make a donation we'll pass it on. With the possibility of the six month suspended jail sentence being triggered if I am convicted, I am very grateful for Simon's help. Please pray.

Advanced directives a response to the Austin Hospital's programme

Recently media attention has focussed on the issue of advanced directives, particularly a programme offered through the Austin Hospital, but rapidly becoming available in nursing homes and hospitals throughout Australia, called "Respecting Patient Choices."

Advanced directives raise a number of issues, particularly for people who work in hospitals and nursing homes who are familiar with the problems people face as they near the end of their lives. Often in these situations, when people fall seriously ill aggressive resuscitation measures, such as CPR are not likely to help the person, and hence a discussion may take place in advance of such an event suggesting that CPR not be done. This in my view is quite appropriate.

There may be other measures that it may be appropriate not to undertake if they are unlikely to provide significant benefit to a person reaching the end of their life, in a similar way to not undertaking CPR. Such measures may include intubation (putting down a breathing tube) or forms of intensive care treatment, such as dialysis. However these treatments may or may not benefit the person, depending on their underlying condition. For example, if someone had end-stage heart disease or heart failure, or end-stage emphysema, it is unlikely that dialysis or intensive care ventilation is going to help that person. Hence, in my view it may be appropriate for a person to not undergo such treatments, but a discussion would need to take place in the context of a condition that had been present for some time and with a reasonable degree of certainty that such ICU treatments would not help.

Some people raise the objection that you never know unless you try and that advanced directives represent a "giving up" on people before their time is up. These may be valid arguments, and so again, I believe it is best to involve the family in these decisions where possible. There is an element of judgement about these decisions and I think it is advisable to be cautious. However I do believe there are situations where one can be reasonably sure, and in such cases I don't believe advanced directives are unethical.

So what is the danger of advanced directives? Advanced directive programmes, including the "Respecting Patient Choices" programme, often include issues such as tube feeding and intravenous hydration as part of an end of life care plan. In other words they allow people to refuse such things, which raises the issue of whether such programmes are allowing euthanasia to occur by removing basic food and fluids. This, I believe is a real danger of these programmes.

The other issue is whether people are really informed about their condition when they sign up for these programmes and whether it is right to act in such a way as to refuse certain forms of treatment before you are really confronted with the actual situation. In my view, this is one of the main problems with these programmes, and I believe it is better to be making such decisions with the real situation at hand wherever possible. Only then can people be properly informed about their condition and its likely consequences.

Dr Mathew Piercy

Dr Piercy is an intensive care specialist in a large Victorian regional hospital.

A Sad Story – An unpublished letter

Dear Editor,

I lost my beautiful 30 year old daughter to suicide 3 1/2 years ago. She used a technique she found on assisted suicide websites and it was horrendous both for her and us. She was not terminally ill but rather a brilliant, loving woman who battled for years with substance abuse problems. Unfortunately, she is considered mere collateral damage for leaders in the assisted suicide movement who believe that the so-called right to kill oneself with the assistance of health care professionals should ultimately be expanded to include anyone who perceives himself or herself to be suffering.

Personally and as a nurse for 44 years, I will do anything for suffering people, except kill them. And, I will not discriminate against anyone-the elderly, disabled, depressed, terminally ill, etc. -when it comes to suicide prevention and treatment. I don't regret the many years I spent trying to save my daughter. When she died, I would have spent her last minutes still trying to save her rather than holding her hand and telling her I supported her decision while she asphyxiated.

Suicide is a tragedy to be prevented not a noble "choice" to be celebrated. The assisted suicide movement's gauzy, feel-good assisted suicide scenarios are a myth and Oregon, the first state to legalize assisted suicide, has seen that state's "regular" suicide rate rise 35% above the national average. Misguided attitudes and laws have consequences, especially when we are considering-to put it bluntly- privatized, legal killing.

I agree with Dr. McHugh, especially as a mother, an ICU nurse and a former hospice nurse. The public deserves a patient-safe health care system they can trust with ethical doctors and nurses who will take their hands, not their lives.

Nancy Valko, RN

Editor's Note: Nancy Valko has been an articulate and passionate opponent of physician-assisted suicide in the U.S. for many years. She works at the coalface.



Notice of A.G.M.

Annual General Meeting 2013

Thursday 8 August 2013 6p.m

161A Donald St, Brunswick East 3057

Nominations requested by 5.00pm 22 July 2013

Motions requested by 5.00pm 22 July 2013

Robert went to his lawyer and said, "I would like to make a Will but I don't know how exactly how to go about it." The lawyer smiled at Robert and replied, "Not a problem, leave it all to me."

Robert looked somewhat upset and said, "Well. I knew you were going to take a big portion, but I would like to leave a little to my family too."

From The Horizon March 2013

When you Die, Help Someone to Live

About half of Australians do not have a Will. This means that the government, not you, direct where your assets go and it can take a very long time. When you write or update your Will, consider The Right to Life Australia, and partner with us in saving the lives of the most vulnerable in the human family. They are constantly under attack – unborn children, the elderly and ill and the people with a disability. We fight for the right to life of every member of the human family, regardless of age, stage of development, residence, life expectancy or disability. We need your help, as this is an ongoing battle to achieve the right to life of everyone.

We were most appreciative recently to receive a telephone call from a Funeral Parlour, asking us to send to them envelopes for donations, as the person who died had asked for donations to The Right to Life Australia instead of flowers. So this is a way that you can help others to live.

Silver Circle

April Winners

1st. Prize (\$100) - No. 1 - Mrs Sue Black, North Dandenong VIC.

2nd. Prize (\$40) - No. 205 - Mrs Beverley Jones,
Hoppers Crossing VIC .

May winners

1st. Prize (\$100) - No. 110 - Margherita Griffin, Hawthorn VIC.

2nd. Prize (\$40) - No. 102 - Kevin Kealy VIC .

If you would like to join, please contact Christine Wong
christine.wong@goodshep.com.au

Vale Sheila House R.I.P.

The Right to Life Australia sadly reports the death of Sheila House of Warrnambool, Victoria.

Sheila was an outstanding Right to Lifer, first becoming involved in our first Walk for Little Feet, subsequently known as Life Walk. She walked in every Life Walk for many years raising money for the cause, helping with all other aspects of the Walk – food, drinks, etc.

As well, Sheila worked for Pregnancy Counselling Australia as a telephone counsellor.

If all of our supporters did as much as Sheila we would be a very strong lobby group indeed.

At Sheila's funeral all her grandchildren wore the Little Feet badge - the well known symbol of the cause of the unborn.

May Sheila rest in peace.

*This is the advertisement we placed in the
Hobart Mercury and Launceston Examiner on 12/6/13*



SAVE TASMANIA'S BABIES!

ACT TODAY!
Phone your Members of the Legislative Council
Ask them to: Vote against O'Byrne's Abortion bill which allows abortion up until birth, and has draconian penalties for protestors at abortuaries.

Launceston	The Hon Rosemary Armitage	Office (03) 6212 2353
Windsormere	The Hon Ivan Dean	Office (03) 6212 2295
Derwent	The Hon Craig Farrell	Office (03) 6212 2354
Rosevears	The Hon Kerry Finch	Office (03) 6212 2346
Murchison	The Hon Ruth Forrest	Office (03) 6212 2316
Mersey	The Hon Michael Gaffney	Office (03) 6212 2340
Pembroke	The Hon Vanessa Goodwin	Office (03) 6212 2351
Western Tiers	The Hon Gregory Hall	Office (03) 6212 2347
Huon	The Hon Andrew Harriss	Office (03) 6212 2341
Montgomery	The Hon Laonie Hiscutt	Office (03) 6212 2327
Rumney	The Hon Tony Mulder	Office (03) 6212 2334
Apsley	The Hon Tania Rattray	Office (03) 6212 2350
Elwick	The Hon Adriana Taylor	Office (03) 6212 2319
Hobart	The Hon Rob Valentine	Office (03) 6212 2344
Nelson	The Hon James Wilkinson	Office (03) 6212 2322

If Member unavailable ask for message to be conveyed.
Authorised by Margaret Tighe, Right to Life Australia ABN 12 774 010 375
PO Box 2029 Brunswick East, VIC 3057 Phone (03) 9385 0100
BECOME A MEMBER - JOIN RIGHT TO LIFE AUSTRALIA - www.righttolife.com.au

March for the Babies

Saturday 12 Oct 2013 at 1p.m.

Treasury Gardens, Melbourne

Mark your Diary NOW

The deed that dare not speak its name **David Daintree**

I picked up a cigarette packet the other day (not my own, of course) and was struck by a health warning I hadn't seen before. None of the usual photos of teeth, toes, lungs or eyeballs. One expects to be cautioned about cancer, blindness, emphysema and gangrene, but this was something different: 'Smoking can harm unborn babies.'

I found this startling. Had I blundered into an alternate universe? I live in Tasmania, and here, as everyone knows, our progressive government is poised to take us further down the path towards an ultimate goal of 'women's health': that's the term for free and unrestricted choice about taking whatever measures a woman deems appropriate for her own unwanted tissue.

So by what possible stretch of credulity can one cope with a world in which governments fiercely protect unborn babies from the baneful effects of smoking while also allowing - and even funding - the destruction of unborn foetuses?

Let me be frank. I am a Catholic of orthodox views and I hold that abortion is an absolute wrong, always. But I also hold that good women may be induced by harsh circumstances to view it as the lesser of two evils, and I have come across cases such as that of a young Muslim woman who went weeping to the abortionist, fully conscious in her own mind that she was about to commit a grave sin, but fearing for the alternative: the shame and hostility of her family and community. I trust that God will forgive her.

But this is not my central point. Rather, I want to insist that opposition to abortion is not an exclusively Catholic hobbyhorse. The atheist Dominic Lawson, once editor of *The Spectator*, presented as fine a defence of unborn human life as I have ever read in his article 'Ivan Cameron and the meaning of life' (*Sunday Times*, 1 March 2009). He is by no means the only unbeliever to express such views so persuasively and powerfully. True, such people don't speak of sin and evil as religious people do, but what we have in common is a sense of outrage at the feeble and vacuous subjectivity of those who value human life only in terms of its worth and importance to themselves.

I am outraged by the mere fact of abortion. But I have to confess to being even more appalled by the self-centred callousness of the subjective thinker who thinks that he alone can bestow life and impute value: objectively foetuses and babies are exactly the same thing, but to the subjective mind a baby is defined by being wanted and longed for, while a foetus is not. If it's loved it's a baby; unloved it counts for nothing at all.

Those who think as I do have an unlikely ally in Peter Singer, who has no quarrel with abortion but also believes that post-natal infanticide is justifiable in certain circumstances. I might take issue with his morality, but his logic is impeccable. It is patently obvious (at least to Singer and myself) that the moment of birth cannot rationally be taken as the point at which the unborn foetus acquires humanity. Singer would, I think, agree with the Romans, who took the view that the

newborn creature became a member of the human race when his father, the paterfamilias, raised it with his arms and accepted it as his son or daughter. If he declined to do so for any reason - perhaps he might have doubts about its health, its gender, its paternity or even its looks - then the infant could legitimately be put to death, usually by exposure.

In our crazy modern world such ruthlessness would be rightly scorned, yet the only difference, surely, between that and late-term abortion is that the latter deed is unseen. And there is something deeply disquieting about the kind of simple mind that disapproves of evil only when it is seen to be done, like the child who enjoys eating meat but cannot stand the sight of a butcher's shop, or those who lived in the neighbourhood of concentration camps, perhaps suspected the true nature of the deeds done within, but preferred to look away.

It is absurd to regard the moment of birth as the boundary between human existence and nonexistence, between 'women's health' and murder. In decades past it might have been possible to pretend that the unseen foetus is not a human child. However, advances in embryology, particularly photography and ultrasound, make it perfectly clear that unborn babies, especially in late term, behave like babies. So let's call it what it is: abortion is nothing other than prenatal infanticide.

More hypocrisy. In Tasmania the Premier and many others have been shedding crocodile tears over the presence of schoolchildren in the demonstrations against the proposed legislation. Yet every political demonstration I have ever seen, of any political colour, gladly admits children (even toddlers in strollers) to its ranks. It seems that the Left are happy for children to march for whales, but not for the unborn, even if those children are clearly well informed and articulate.

Why do I talk about a deed that dare not speak its name? Because of the hardest truth of all: so many families have been affected by abortion. Women who have themselves had abortions are certainly not the only ones. Boyfriends, husbands, mothers and fathers, grandparents, aunts and uncles, sisters and brothers have been touched. Some, like the Muslim girl I spoke of before, have a sense of shame and loss; others consciously refuse to acknowledge that they have done any wrong at all; many more (perhaps the majority) are deeply disturbed but remain in denial. They look away, hoping that they acted rightly, fiercely reactive to any suggestion that it could be otherwise. So much hurt needs healing, but honesty must come first. Let's avoid weasel words like 'terminations' and 'women's health'.

And my final word to governments? Please don't cry for unborn babies unless you really mean it.

David Daintree is former President and now Honorary Life Fellow of Champion College at Old Toongabbie.

Reprinted with permission.

The Spectator Australia, 11 May 2013



IRELAND

Savita's death - caused by infection not pregnancy

Ronnie <<http://www.lifechoice.net.au/?author=8>> | February 15, 2013 cross-sourced from the Life Institute

The Life Institute has said that leaked excerpts from a report on the death of Savita Halappanavar seemed to show that it was now beyond dispute that an infection had caused her tragic death.

Niamh Uí Bhriain said that it was "deplorable" that abortion advocates continued to use Savita's death to have abortion legalised in Ireland.

"Leaking excerpts from this draft report showed no respect or compassion for Savita's family. But abortion advocates, including Minister Pat Rabbitte, have jumped, yet again, to draw conclusions and call for abortion legislation," she said.

"We have not seen the final report, but from these early excerpts it seems to be certain that Savita died because the infection which caused her death was not identified or treated properly."

"From what has been released of the draft report, it also seems that staff were overworked and under extreme pressure at Galway Hospital," she pointed out.

"Furthermore, medical experts at the recent hearings held by the Joint Oireachtas Committee confirmed that they knew of no instance where an Irish woman had lost her life because of any hesitancy to intervene," she added.

"These excerpts from the report on Savita's death do not make it clear as to why action was not taken in Galway, and, as a mother and a advocate for the right to life, I hope the final report provides that clarity," said the Life Institute spokeswoman.

U.S.A. Washington DC

Peter Singer: Women Should Sacrifice Having Kids to Protect Environment

by Population Research Institute | Washington, DC | LifeNews.com | 6/5/13 (abridged)

Bioethicist Peter Singer compared women and children to cows overgrazing a field and said – at the global Women Deliver Conference last week, hailed as the most important meeting to focus on women and girls' human rights in a decade – that women's reproductive rights may one day have to be sacrificed for the environment.

The controversial Princeton University professor, known for championing infanticide and bestiality, was a featured panelist on Thursday at the three-day Women Deliver conference attended by Melinda Gates and more than 4,000 abortion and contraception activists in Kuala Lumpur.

Singer said that since the world's affluent are not likely to restrain their high rate of consumption compared to the world's poor any time soon, and since it's possible that family planning efforts may "turn out to be not enough... we ought to consider what other things there are that we can do... in order

to try stave off some of the worst consequences of the environmental catastrophes..."

Then Singer compared women's right to bear children to the traditional villager's right to graze their cows on "common" grounds. As the villagers get more affluent and their cows die less from disease, he said, until the commons are overgrazed, "yields are falling... and that's a road to disaster."

"Turns out that the right to graze as many cows as you like on the common was not an absolute right," said Singer. "Obviously this is what I think we ought to be saying even about how many children we have... I hope we don't get to a point where we do have to override it... but I don't think we ought to shrink away from considering that as a possibility."

(EDITOR: What next?)

SOUTH KOREA

Pastor's "Drop Box" Saves Abandoned Babies From Infanticide

by Natalie Brumfield | Seoul, South Korea | LifeNews.com | (abridged) 28/5/13

Lee Jong-rak is the creator of the Baby Box. His Baby Box is the first and only box in Korea that is for collecting abandoned babies who are physically or mentally handicapped or are just unwanted by their mothers.

Hundreds of unwanted babies are abandoned on the side of the street in South Korea every year. Jong-rak knew he needed to set up a way to save the lives of these precious babies. He built a drop box on the side of his home with a humble sign reading, "Place to leave babies."

The inside of the box contains a thick towel covering the bottom, and lights and heating to keep the baby comfortable. A bell rings when someone puts a baby in the box, then Jong-rak, his wife, or staff associates come to immediately move the baby inside. His aim was to provide a life-giving alternative for desperate mothers in his city of Seoul. He even admits that he didn't really expect that babies would come in – He was mistaken. The babies came. In the middle of the night, in the middle of the day, some with notes, some without a word, and only a very few mothers actually spoke to him face-to-face. Pastor Jong-rak stated that one of the mothers said, "she had poison to kill both herself and her baby." He responded, "Don't do that. Come here with your baby." One single mother left this heart-wrenching note with her baby. The English translation follows.

"My baby! Mom is so sorry.

I am so sorry to make this decision.

My son! I hope you to meet great parents, and I am very, very sorry.

I don't deserve to say a word.

Sorry, sorry, and I love you my son.

Mom loves you more than anything else.

I leave you here because I don't know who your father is.

I used to think about something bad, but I guess this box is safer for you.

That's why I decided to leave you here. My son, Please forgive me."

THE NETHERLANDS

Disabled newborns are being killed LEGALLY in The Netherlands: here's the proof

By Peter Saunders (abridged) Lifesite News.com 14/5/13

The full reference is *Verhagen E, Sauer P. "The Groningen Protocol—Euthanasia in Severely Ill Newborns." New England Journal of Medicine 2005; 352(10):959-62'*

It says that 'Twenty-two cases of euthanasia in newborns have been reported to district attorneys' offices in the Netherlands during the past seven years' but also highlights underreporting:

"Given that the national survey indicated that such procedures are performed in 15 to 20 newborns per year, the fact that an average of three cases were reported annually suggests that most cases are simply not being reported."

The 22 babies killed all had spina bifida and/or hydrocephalus – conditions which many disabled people live with in Britain today (Here is another report on the protocol from CBHD citing the 22 documented cases).

Under the 'Groningen Protocol' the termination of a child's life (under age 12) is acceptable if four requirements were properly fulfilled:

1. The presence of hopeless and unbearable suffering
2. The consent of the parents to termination of life
3. Medical consultation having taken place
4. Careful execution of the termination

Other issues include:

1. Almost half of Belgium's euthanasia nurses have admitted to killing without consent, despite the fact that involuntary euthanasia is illegal in Belgium and that nurses are not allowed to perform even voluntary euthanasia.
2. In Belgium, nearly half of all cases of euthanasia are not reported to the Federal Control and Evaluation Committee. Legal requirements were more frequently not met in unreported cases than in reported cases and a written request for euthanasia was absent in 88%.
3. A recent study found that in the Flemish part of Belgium, 66 of 208 cases of 'euthanasia' (32%) occurred in the absence of request or consent.
4. According to a recent report Belgium is now the 'world leader' in organ removal after euthanasia with at least nine cases since 2005 but suggestions are that there would have been many more had more euthanasia patients had transplantable organs.
5. The stunning 5,000% increase in Belgian euthanasia cases in eleven years since legalisation.
6. Summary of recent developments in Netherlands documenting a 15-20% increase in euthanasia cases per year since 2006 (gives good overview of overall situation).