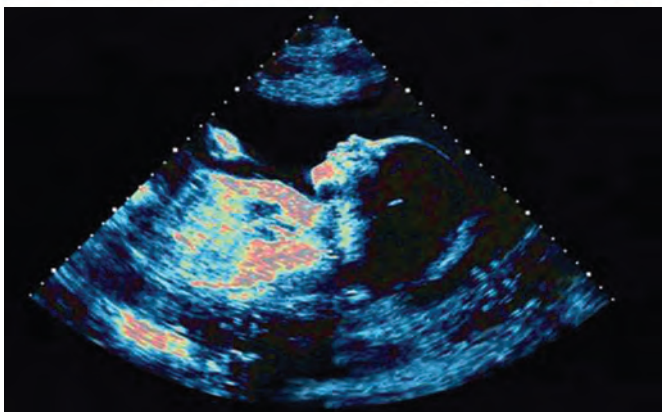


MARCH-APRIL 2015



26 week unborn baby

## THESE BABIES ARE PRECIOUS!

Twins Bede and Samuel were born to a Right to Life mother of 5- these make 6 and 7 - on 15/12/14 weighing less than 1 kg each when born at 27 weeks.

How sad that babies like Bede and Samuel can be aborted under Victorian Law. These beautiful little boys are now home with Mum and Dad and their siblings. – Margaret Tighe

And just to add, the irony that they were born at RWH because of their expertise in keeping very premature babies alive. I could not fault them in their care of the twins, they did everything possible to give them the best chance while on the floor below they are busy killing babies. – Tahlia Cacarello

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## Join Life Hike 2

to help raise funds for the defenceless unborn

**Life Hike 2**  
RIGHT TO LIFE AUSTRALIA  
GREAT OCEAN WALK HIGHLIGHTS

Thursday 28  
Friday 29  
Saturday 30  
May 2015

3 DAYS (40 KM) TREKKING IN SPECTACULAR SCENERY TO RAISE MONEY FOR THE PROLIFE CAUSE

(See page 5)

## Tony Abbott commits to free vote on euthanasia

Prime Minister Tony Abbott has promised a dying man that he will allow Liberal Party members to vote with their conscience on a euthanasia bill being developed by a Greens Senator.

Peter Short, 57, afflicted with terminal oesophageal cancer, said receiving the commitment during a half hour phone conversation with the Prime Minister was like reaching "the top of the mountain."

He devoted the final stage of his life to campaigning for legislation that would enable terminally ill people to choose when and how they die.

Mr Short said Mr Abbott had shown genuine interest in



discussing some of the issues around voluntary euthanasia and listened carefully to his responses.

While Mr Abbott indicated that he was unlikely to personally support voluntary euthanasia legislation, he told Mr Short that he would not "whip" his members into taking a party line on the issue.

Mr Short said the commitment was vital for a bill being developed by Greens Senator Richard Di Natale to have a chance of passing the Senate.

Dr Di Natale's draft bill would make it legal for medical practitioners to help a terminally ill, mentally competent adult to end their life.

In what constitutes the first consideration by Federal Parliament of national euthanasia laws, a multi-party Senate Committee recommended last November that party leaders allow MPs a free vote on the issue of euthanasia. Labor MPs automatically have a conscience vote on the issue. However, the Liberal Party's position has previously been unclear.

Ref: Sydney Morning Herald 20/12/14

Below are two advertisements we used in recent elections. The one in the Gippsland Times was in support of new MLA Danny O'Brien who won the seat, formerly held by Peter Ryan, then head of the National Party and Deputy Premier. Well done Danny O'Brien!

The second appeared in Sydney's Daily Telegraph – the newspaper with the highest circulation in Australia. We could not remain silent in the face of the threat of Dr Mehreen Faruqi, backed by her Greens party, to move to decriminalise abortion in N.S.W.

It pays to advertise

Page 4 – Times Spectator, Friday, 13 March, 2015

ADVERTISEMENT

### Abortion, the issue in Gippsland South

**Baby Nicholas born at 25 weeks 6 days, alive and well now because of good medical care, just started school Jan 2015!**

Yet – Victorian law allows babies like Nicholas – even up to birth – to be aborted. Some are aborted live and left to die. In October 2008, the Victorian Parliament voted to allow abortion till birth. Since then late term abortions, after 20 weeks, have increased.

Official figures show an increase in babies born alive from 32 in 2008 to 40 in 2011.\* These babies are born alive and left to die.

In 2011 a baby was aborted at 37 weeks for "psychosocial" reasons.

National Party candidate Danny O'Brien said, "Had I been in Parliament I would have voted against the legislation which is now law, including the clause which compels doctors who object to abortion to refer patients to another doctor they know does not."

**VOTE FOR LIFE – VOTE FOR DANNY O'BRIEN**

Life: the basic human right  
Right To Life Australia

\*Consultative Council on Obstetric and Paediatric Mortality and Morbidity, 2008, 2011.  
Authorised by Margaret Tighe, 161A Donald St, Brunswick East Vic 3057

Advertisement

### NSW ELECTION

## ABORTION THE ISSUE

**BABY NICHOLAS**, born at 25 weeks 6 days in a NSW hospital. Given good medical care. Just started school! (Jan 2015)

- Victorian law now allows babies like Nicholas and older to be aborted – even up to birth\*
- Some are aborted live and left to die!\*
- A 37 week baby aborted for psychosocial reasons\*
- 32 week twins aborted because one had a heart defect

**GREENS MLC DR MEHREEN FARUQI PLANS THE SAME FOR NSW!**

**ALL GREENS AGREE**

## VOTE GREENS LAST

www.righttolife.com.au

RIGHT TO LIFE AUSTRALIA INC,  
161a Donald Street, East Brunswick VIC 3057

Authorised by: **MARGARET TIGHE**

\*Vic Consultative Council on Obstetric and Paediatric Mortality and Morbidity (CCOPMM) Report 2010/11



## Letter from the President



Dear Friends of Life,

Thank you to all the very generous people who have responded so magnificently to our recent special appeal and that means all of you – those who could afford a large donation and those who sent in just what they could manage. You are truly helping us to keep the furore over the killing to continue.

You may wonder why we have to keep on asking. It's not because we are spending up big on administration. We currently employ one full-time and one other who works four days a week and is paid for three days. Then we have a young man who is a computer whiz who is employed two half days a week and a recent addition of a young woman trainee accountant for one day a week. I volunteer three days a week for 4 -5 hours a day.

We have reduced our rent by moving to smaller premises. The Co-Ordinator of Pregnancy Counselling Australia is now a voluntary position.

Just two people have criticised the paper we used for the recent appeal. Yes it was more costly but fundraising advice given us was that using better paper was more effective.

One very thoughtful supporter wrote to us pointing out that we badly need new supporters – a much bigger mailing list. Most important is having more supporters with email addresses. So what about trying to recruit some for us?

Finally though, what we all know is that the consciences of so many have been sadly affected by the change in the law on abortion. And that is why the fight against euthanasia now looms.

In life, **Margaret Tighe**

## Pregnancy Counselling Australia

**Meet Lois Dean**, our new voluntary Co-Ordinator of Pregnancy Counselling Australia (PCA). Lois is married with six children, two of whom are adopted from China and six grandchildren.



Lois has been involved in PCA as a telephone counsellor for several years and is deeply committed to working to save the lives of the unborn and their mothers from the trauma of abortions.

Lois's commitment to the value of every human life is illustrated in her personal life and that of her husband with the time that they spent as volunteers in China in 2010- 2012 working with children with special needs. In earlier life Lois worked as a physiotherapist.

If you would like to become a PCA counsellor, Lois would like to hear from you

## The 2015 Hope International Symposium

**22nd & 23rd May 2015 Adelaide S.A. Rydges Hotel, South Park. International gathering opposing euthanasia & assisted suicide**

On May 22nd & 23rd 2015, people opposing euthanasia & assisted suicide will assemble from across the globe in Adelaide, South Australia for the Fourth International Symposium on Euthanasia. The first event of its type in the southern hemisphere organiser, Paul Russell, says he is looking forward to hosting 'the best event yet!' Adelaide has been for some years the 'canary-in-the-coal-mine' for euthanasia bills; in recent years as many as three euthanasia bills were being debated at the same time.

Keynote Speaker: **Professor Theo Boer (NL)**. Professor Boer made international headlines earlier this year when he announced that, after supporting the Dutch euthanasia laws and being a nine-year member of a regional euthanasia evaluation committee, that he had completely changed his mind.

Book for the event at [www.conf.no euthanasia.org.au](http://www.conf.no euthanasia.org.au) or contact Paul Russell at [director@no euthanasia.org.au](mailto:director@no euthanasia.org.au)



## Vic – a Win for peaceful assembly

The Victorian Legislative Assembly has eased its protest laws with the passage of the Summary Offences (Move-on Laws) Amendment 2015. It repeals the arrest powers, requirements to provide name and address and making exclusion orders for repeat protestors. You can be asked to move on only if you are breaching the peace, endangering another's safety or likely to cause injury to a person or damage to property. It now goes to the Upper House where many MP's are undecided about it.

## Vic Parliament Protest

Des Kelly and his group continue to hold their banners outside the car park entrance on sitting days, from 8 – 9.30am. Please join them – contact Des on 9561 3784 or [deskelly3150@bigpond.com](mailto:deskelly3150@bigpond.com). Sitting days are: May 5,6,7, 26,27,28, June 9,10,11, 23,24,25.



## Graham Preston reports

I am planning to fly to Tasmania on Monday, 13 April, with the intention to once again challenge the law there that prohibits protests within 150m of places where abortions are done. Following last year's actions in Hobart when I was arrested twice in March, only to have the charges dropped at the hearing in September, the police said they would review the law. There have been no changes to the law however and thus if there is no further challenge there is every reason to believe that this very restrictive and highly oppressive law will remain in place indefinitely.

Not only is this law bad for Tasmania but a precedent has been created that is likely to be followed by other State governments as they come under pressure from pro-abortionists. In contrast, in the USA last year the full Supreme Court ruled 9-0 against the constitutionality of "bubble zones" that some States had in place at abortion "clinics". Those zones were of just a few metres too, not 150m as the Tasmanian law mandates!

...I have also been encouraging the Australian Human Rights Commissioner, Tim Wilson, who often speaks of his concern about threats to freedom of speech and expression in Australia, to say something about the Tasmanian law. A report by Mr Wilson came out today and states, "Anti-protest laws diminish our right to freely express our views with others. Restrictions on this require serious justification, and must be limited to only what is necessary. Hindering the expression of views – even where others may strongly disagree with those beliefs – undermines the strength of Australia's liberal democracy." True, but rather vague and so not particularly helpful.

*Rescue those being led away to death. Proverbs 24:11*

## NSW Voluntary Euthanasia Party fails

In the Legislative Council, with 86% of the vote counted, the Voluntary Euthanasia Party is 8th after Liberal/Nationals, Labor, Greens, Shooters and Fishers, Christian Democratic Party, No Land Tax, and the Animal Justice Party, so it is unlikely to have a representative elected. Unfortunately some good pro-life representatives were replaced with Emily's Listers. The Greens have won three seats in the New South Wales Lower House. The party had just one MP in the Lower House before the election.

### SILVER CIRCLE WINNERS

	1st Prize (\$100)	2nd Prize (\$40)
Feb. 2015	No. 46 Noreen Dooley Aireys Inlet VIC 3231	No. 58 Anne Marie De Bono East Hawthorn VIC 3123
March 2015	No. 101 Kevin Wilson Murchison VIC 3610	No. 59 Peter Philips Springvale VIC 3171

The Silver Circle raises money for Pregnancy Counselling Australia  
Please join for \$24 per year Contact [christine.wong@goodshelp.com.au](mailto:christine.wong@goodshelp.com.au)

*Speaking Up Peacefully  
for the Unborn*

**Walk  
for  
Little  
Feet**

**Brisbane  
2015**

**Saturday May 30th**

**START 11:00am**

**Bowen Hills**

**Cnr Markwell St & Campbell St,**

**Lunch 12:30 - 1:00pm**

**Kangaroo Point Park**

**Cnr River Terrace & Main St**

**FINISH 2:30pm**

**Parliament House**

**Cnr George St & Alice St**

**BYO Lunch - fruit & Water will be provided.**

**All Placards and Posters will be provided. The Walk  
will go ahead whatever the weather. Total distance for  
the Walk - 9km: 4km before lunch, 5km after lunch.**

**[facebook.com/walkfor littlefeet](https://facebook.com/walkforlittlefeet)**

**[info@walkforlittlefeet.org](mailto:info@walkforlittlefeet.org) 0402 718 382 07 3122 2111**

*When you write or update your Will, please include a bequest  
to The Right to Life Australia. "I bequeath to The Right to Life  
Australia, ABN number 12 774 010 375, the sum of \$xxxxx  
( or xx% of my estate), for the general purposes of The Right  
to Life Australia, 161A Donald St. East Brunswick VIC 3057.*

*On behalf of the most vulnerable  
members of our community,  
thank you.*





# Join Life Hike 2 to help raise funds for the defenceless unborn

Gourmet cook Dianne Cutler is catering for the event with delicious homemade meals

- Cooked breakfast
- Delicious evening meals
- Muffins and scones
- Hearty soups

## Are you able to sponsor a walker?

Download the sponsor form from [www.righttolife.com.au](http://www.righttolife.com.au) or phone (03) 9385 0111 and we will post a copy. You may like to sponsor a walker on this page!



Bert and Kym van Wyk are seasoned campers.

They will travel with their caravan from distant Queensland to join us!

## Meet some of our 2015 life walkers

Sharan Saville walks on the beach during a 3 day walk at Wilsons Promontory (Vic) earlier this year



Seasoned walker Johnathan Saville prepares the tent at Wilsons Promontory National Park.



## 3 DAYS (40 KM) TREKKING IN SPECTACULAR SCENERY TO RAISE MONEY FOR THE PROLIFE CAUSE

Come and experience one of Australia's most spectacular stretches of coastline.

Join Right to Life Australia in an invigorating and unique 3 days on the great Ocean Walk, in Victoria. Life Hike 2015 is a guided trek fundraising to support the important work of Right to Life Australia in advocating for the human rights of the unborn child.

Most importantly we need you to ask family and friends to sponsor you, or you may pay our corporate rate for the trip. Sponsorship commitment is \$1000.

Accommodation is at Bimbi Park, Cape Otway in an area of magnificent forests, beaches, secluded bays and spectacular coastline.

The route planned combines highlights of the Great Ocean Walk.

### Planned Itinerary:

Day 1: Thurs 28 May 2015

Aire River to Johanna (12-14 km)

Day 2: Fri 29 May 2015

Ryans Den to Wreck Beach (15 km – 5-6 hrs)

Day 3: Sat 30 May 2015

Wreck Beach to 12 Apostles 15 km – 4-6 hrs)

Route will be adjusted to group ability, subject to weather and tides.

Participants are advised that this walk is classified as "medium" to "hard" and there are some steep sections on each segment of the walk. Participants need to be physically fit—a 12 km walk in this environment could take 6 hours.

Need to know more?

Visit Right to Life Australia website on [www.righttolife.com.au](http://www.righttolife.com.au) send us an email [rt@rtlaustr.com](mailto:rt@rtlaustr.com) or telephone us on (03) 9385 -0100



## Physician-Assisted Suicide: Improving the Debate

-- By John Keown 30/3/15 National RIGHT TO LIFE News Today  
Editor's note. Dr. Keown refers to PAS—Physician Assisted Suicide—and VAE—Voluntary Active Euthanasia.



John Keown, D.Phil., Ph.D.

The *Washington Post* reported on Valentine's day that since the death of her husband, Diane Rehm, the NPR talk show host, is emerging as a "key force" in the "right to die" debate. The Post relates that she is addressing fundraising dinners for "Compassion and Choices," a pro-PAS pressure-group. The Post quotes her as saying:

**As strongly as I feel, I don't want to use the program to proselytize my feelings ... But I do want to have more and more discussion about it because I feel it's so important.**

She is right. It is important. And it is worthy of more discussion, not least because more discussion, if fair and balanced, allows opponents of PAS to refute the superficially attractive arguments of pressure-groups like "Compassion and Choices"—arguments that have, with very few exceptions, been rejected by legislatures, expert committees, courts, professional healthcare associations, and disability groups around the world.

What are the main arguments for changing the law to allow doctors, at the patient's request, to write a lethal prescription (PAS) or to administer a lethal injection (voluntary, active euthanasia, or VAE)? In *Debating Euthanasia*, a book in which I debate a leading advocate of PAS and VAE, I considered ten arguments for relaxing the law. To illustrate their weakness, let us consider just three of the most popular arguments.

First: choice. Doesn't respect for autonomy mean that patients have a right to be assisted in suicide, or to be given a lethal injection, if they make a truly autonomous request?

No. Respect for autonomy is important. We have, for example, a right to refuse treatment. We might judge that some treatments would not offer us a reasonable hope of benefit, or that others would be too burdensome to us. But respect for autonomy is not absolute. It has limits. One limit is on choices that seriously undermine the individual's worth or well-being. We do not, for example, allow people to sell themselves into slavery. (And while one can sometimes escape from slavery, there is no return from death.) Nor do we allow people to take hard drugs. Even driving without a seatbelt is generally prohibited. It is often countered that suicide has been widely decriminalized. This is true, but the aim of decriminalization was, by removing the threat and stigma of punishment, to encourage suicidal people to seek psychiatric help. It was not to condone suicide, which is precisely why the prohibition on assisting suicide was retained.

Moreover, if the law were relaxed, how many requests for PAS or VAE would be truly autonomous, truly free, informed and considered, and how many the result of depression, or a sense of being worthless or a burden, or pressure from relatives, or inability to afford medical treatment?

Further, we often rightly restrict individual choice in order to protect others. If allowing some people access to PAS or VAE were

to jeopardize the lives of others, this would be another sound reason for denying that choice. And, relaxing the law surely would jeopardize the lives of others. For: The underlying reason which is thought to justify PAS or VAE turns out, on closer examination, not to be individual choice at all. Not even campaigners for PAS and VAE argue that they should be available to anyone who autonomously wants them. They would be available only to some, who meet a criterion such as "terminal illness" or "unbearable suffering," a criterion established by others, and established because it is thought that those who meet such a criterion would be "better off dead." So: The case for PAS and VAE rests at bottom on the judgment that the lives of people in some conditions (but not others) are no longer "worth living," that they (but not others) would be "better off dead." This realization should raise at least three red flags.

First, because PAS and VAE involve judgments that certain people would be "better off dead," they are deeply discriminatory. The prohibition on one private citizen intentionally killing another innocent private citizen (or on assisting his suicide) is foundational to Anglo-American law. The principle of equality before the law and of equal protection under the law lies at the very heart of our jurisprudential culture. This principle should resonate particularly strongly this year, as we celebrate the 800th anniversary of the Magna Carta.

As the House of Lords Select Committee on Medical Ethics expressed it in 1994, unanimously rejecting the arguments for PAS and VAE, the law's prohibition on intentional killing is "the cornerstone of law and of social relationships" that "protects each one of us impartially, embodying the belief that all are equal."

Laws allowing PAS or VAE reject that cornerstone belief, and are based on the notion that some lives are less equal than others, even to the point that it would be entirely reasonable to end them. Small wonder that disability groups are at the forefront of opposition to PAS and VAE. As one such group wrote in opposition to a proposal to relax the law:

**We are like society's 'canaries in the coalmine' who can often see the dangers of potentially discriminatory legislation before others, as it impacts on us even before the deed is done. We are scared now; we will be terrified if assisted suicide becomes state-sanctioned.**

A second red flag. Relaxing the law takes one onto a precipitous "slippery slope." For example, the various criteria that are thought to justify an intentionally hastened death are intrinsically arbitrary. Why (as in Oregon) "terminal illness"? Why not allow PAS to those who face not just months but years, perhaps a lifetime, of illness? And why PAS but not VAE? Why discriminate against those who, even with assistance, are too disabled to kill themselves?

The Dutch, pioneers of PAS and VAE since 1984, realize that such limitations are indefensible. Their guidelines require not "terminal illness" but "unbearable suffering." But, again, why need the suffering be "unbearable" (whatever that means), rather than suffering that the patient could bear but would rather not? Moreover, Dutch law allows purely mental suffering, unconnected to any physical illness, to count, but not "existential suffering," such as the "tiredness of life" experienced by some, perhaps many, elderly folk. Many Dutch people think this should be a legal ground. And why not? In Belgium, which followed the Netherlands and legalized VAE in 2002, patients euthanized have included a man psychologically distressed by his appearance after several "sex-change" operations. And why not?

Clearly, once one abandons the bright line of the current law—

(Continued on page 7)



## Physician-Assisted Suicide: Improving the Debate

(Continued from page 6)

no intentional killing of any patients—which is grounded in the recognition of the equal, fundamental worth we all share in virtue of our common humanity, one enters a murky world of arbitrary and discriminatory judgments about whose life is “worth living” and whose is not.

Red flag number three: Acceptance of hastened death for suffering patients who request it leads, logically, to acceptance of hastened death for suffering patients who cannot. Take Alice and Alex, both of whom are patients of Dr. Jack. Alice and Alex both have terminal cancer and both are suffering to the same degree. Alice is capable of asking for a hastened death and does so. Dr. Jack judges that death would benefit Alice, as it would put an end to her suffering, and administers a lethal injection. Dr. Jack judges that death would equally benefit Alex, by putting an end to his suffering. Why should Dr. Jack stay his hand? If hastened death would benefit Alex, why deny it to him merely because he cannot request it? Why discriminate against Alex because of his incapacity? One answer might be that Alex is not autonomous. But this answer fails. In the case of Alice, Dr. Jack can point to two reasons for killing her: respect for her autonomy, and relief of her suffering. But in the case of Alex, Dr. Jack can still

I point to one argument for killing him: relief of his suffering. This logical “slippery slope” argument, demonstrating the logical, adamant link between euthanasia with request and euthanasia without request, is unanswerable.

It is not surprising that surveys have shown, undisputedly, that Dutch and Belgian doctors have given lethal injections to thousands of patients without an explicit request, in flagrant breach of the law, and with virtual impunity. Nor is it surprising that the Dutch courts have proceeded to rule that it is lawful to give lethal injections to disabled infants in certain circumstances.

Sadly, the logical slippery slope argument is not well known to the general public. It is one of the several powerful arguments against PAS and VAE that merit extensive coverage on Rehm’s show.

Let us turn now to a second major argument for relaxation of the law: compassion. Don’t we have a duty to alleviate suffering? Advocates of legalization make much of cases where loved ones died in distressing conditions, or killed themselves out of fear of dying in distressing conditions. Well, advocates of change have no monopoly on witnessing loved ones dying in distressing conditions. Many of us have witnessed that. But it does not follow that the answer is PAS or VAE. The answer is to improve the quality and availability of end-of-life care so that people do not die, or fear they will die, in distressing conditions. It is noteworthy that experts in palliative care, who are at the forefront of caring for the dying, and who help people die naturally with dignity, are among the strongest opponents of PAS and VAE.

A third main argument for PAS and VAE is that public opinion favors legalization. However, we should treat opinion polls on this issue with considerable caution. As the article in the Post pointed out, much depends on how the question is phrased. Further, how informed is public opinion? How many people polled have carefully considered the arguments for and against, as opposed to forming an opinion on the basis of an emotional reaction (however understandable) to seeing a loved one (or someone on television) die without the benefit of palliative care? In any event, should public policy be decided by opinion poll? One wonders how many of the

“progressive” politicians who attach importance to opinion polls favoring PAS would attach importance to polls showing majorities in favor of capital punishment.

Enough has been said to suggest that major arguments used to justify PAS and VAE—autonomy, compassion, and public opinion—are far less persuasive than they may at first appear. This explains why the case for relaxation of the law has met with far more failures than successes around the world.

Unfortunately, coverage of the debate by the mass media is typically one-sided and emotive. Viewers, listeners, and readers are subjected to a succession of heart-rending human interest stories of sick or paralyzed people who want assisted suicide. As the saying goes, “If it bleeds, it leads.” Moreover, these stories seem designed not only to tug on public emotion, but to tug it in one direction: toward legalization. And, to the extent that opposing views are aired at all, they are often caricatured as “religious,” despite the fact that legalization has long been opposed by secular bodies like the World Medical Association.

Let us hope that shows like Diane Rehm’s will buck the media trend, and ensure that the powerful case against legalization is given a fair hearing.

*John Keown, D.Phil., Ph.D., holds the Rose F. Kennedy Chair of Christian Ethics in the Kennedy Institute of Ethics*

## Social Awareness Week for Xavier College students

At the end of March 2014 we were thrilled to have two year 11 students from Xavier College, Melbourne during their one week Social Awareness Placement.

This is a continuation of our programme which commenced last year.

The students visited Vic state MP Michael Gidley MLA, Member for Mount Waverley. Some of their activities during the week included designing a new brochure for Pregnancy Counselling Australia, tweeting and loading Facebook and website information.



Mary Collier and Fabio Sacchetta at Parliament House, Victoria.

## Remembering the missing generation

### Rally for Life – Tuesday 12 May

Starting at 7pm at Florence Hummerston Reserve, cnr St George’s Terrace and Mount St. Perth. Seventeen year olds will be leading the reflection of abortion becoming legal in W.A. seventeen years ago. We have been deprived of over 141 000 young men and women. Each of these were an irreplaceable gift to our community.



*After you die, help someone to live  
Remember our life-saving work  
in your Will  
The Right to Life Australia  
161A Donald St. Brunswick East 3057*



## Euthanasia and Organ Donation in the Netherlands.

Created: 27 November 20

By Alex Schadenberg,  
International Chair -  
Euthanasia Prevention  
Coalition



For the past few years doctors in Belgium have linked organ donation to euthanasia. Now the Dutch media has reported that Edith Schippers, the Dutch Minister of Public Health supports the practice of euthanasia/organ donation.

The media report stated: Minister Edith Schippers of Public Health is working on a protocol to guide people who want to donate organs after their euthanasia.

This means, for example, that they will not be able to die at home, but will have to die in the hospital. The doctor should also perform the euthanasia in the hospital. The guidelines established for this is a practical implementation of laws, said Schippers. The first version of the guidelines was written by the Rotterdam Erasmus MC and the University Hospital of Maastricht (MUMC).

Euthanasia/organ donation can become a form of coercion to die by euthanasia. It is one thing to kill someone as a false means to a "good death," it is another thing to kill someone to improve public health. Euthanasia/Organ Donation can coerce people with disabilities who are not terminally ill to die by euthanasia. Studies in Belgium indicate that people who have neurological conditions, mental or psychological issues or dementia make excellent organ donors, especially when linked to euthanasia because the organs are healthier than those from people who were terminally ill or nearing death.

Combining euthanasia with Organ Donation will cause fear that physicians will become willing to kill a person for their healthy organs.

Professor Theo Boer, who was a member of a Regional Euthanasia Review Committee for nine years, recently changed his mind and now opposes euthanasia. In his article, Assisted Suicide - Don't Go There, Boer stated: I used to be a supporter of euthanasia. But now, with twelve years of experience, I take a different view.

Euthanasia in the Netherlands was originally legalized based for the "hard cases." Boer argues that the number of euthanasia deaths, and the reasons for euthanasia have greatly expanded since the introduction of the Netherlands euthanasia law in 2002.

## USA - Washington

**78% OF WOMEN CONSIDERING AN ABORTION CHOOSE LIFE WHEN THEY SEE AN ULTRASOUND**

Arina Grossu Mar 5, 2015 Washington, Dc

A survey conducted by the National Institute of Family and Life Advocates (NIFLA), a national legal network of



prolife pregnancy centers, showed how powerful ultrasounds are in changing the minds of abortion-minded and abortion-vulnerable patients.

NIFLA stated in a press release: Four-hundred and ten (410) of NIFLA's medical membership (less than one-half) reported providing 75,318 ultrasound confirmations of pregnancy in 2013 on patients identified as either abortion-minded or abortion-vulnerable. Of these abortion at risk patients, 58,634 chose to carry to term, indicating that 78% of those mothers who saw an ultrasound image of their unborn child before deciding about abortion chose life.

When asked whether ultrasound confirmation of pregnancy has a positive impact upon a mother considering abortion to choose life 83.5% said "Absolutely," 15.76% said "More than likely," and 0.74% said, "Only a small impact."

**U.K. - Three-parent babies could risk the future of the human race, warn 55 Italian MPs by "modifying genetic heritage in an irreversible way",**

By LEVI WINCHESTER 21/2/15

The group of Italian politicians have called on the House of Lords to reject a law to allow so-called three-parent babies - stating the notion "cannot possibly be contained within the confines of the United Kingdom".

The stern warning comes after MPs in Britain voted overwhelmingly in favour of the controversial technique of mitochondrial donation - which would allow children to be conceived with genetic material from a trio of individuals.

In a strongly worded letter to The Times, the Italian Mps wrote that the legalisation of such a technique "could have uncontrollable and unforeseeable consequences, affecting future generations and modifying genetic heritage in an irreversible way, inevitably affecting the human species as a whole".

The letter also argues that "the greater part of the scientific community maintain that the scientific data currently available is insufficient to even consider intervention on human subjects, and there cannot therefore be any guarantee for the safety of any eventual off-spring".

Fifty MEPs have also written to David Cameron

**The greater part of the scientific community maintain that the scientific data currently available is insufficient to even consider intervention on human subjects**

Earlier this month, MPs voted 382 to 128 in favour of an amendment to the 2008 Human Fertilisation and Embryology Act, which will allow the creation of IVF babies with DNA from three different people.

Mitochondrial donation techniques aimed at preventing serious inherited diseases will now be legalised, subject to any amendments made in the House of Lords.

As well as receiving normal 'nuclear' DNA from its mother and father, a child would also have a minuscule amount of healthy mitochondrial DNA (mtDNA) from a woman donor to be used to repair faults.

The first babies concerning this technique could be born next year.

Meanwhile, 50 MEPs have declared that by allowing three-parent babies, Britain is therefore breaching EU law and has "violated human dignity".

## USA - A historic day in the history of our movement

National Right to Life News - April 7, 2015,

- Carol Tobias

Today at 8:00 a.m., Gov. Sam Brownback of Kansas signed into law a bill banning dismemberment abortions!

This new law is based on model legislation drafted by National Right to Life.

It is the first of what we hope will be many state laws banning dismemberment abortions.

This law could have the power to transform the landscape of abortion policy in the United States.

I want to warn you that this next paragraph is graphic in its description of what a dismemberment abortion is.

In a dismemberment abortion, a forceps or similar instrument is used to twist and tear pieces of a living unborn baby from her body until the baby bleeds to death. Many of these babies are developed enough to feel pain.

"Dismemberment abortion kills a baby by tearing her apart limb from limb," said our director of State Legislation, Mary Spaulding Balch, J.D. "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."

Even Justice Anthony Kennedy of the U.S. Supreme Court has written forcefully about the brutality of such abortions. The Unborn Child Protection from Dismemberment Abortion Act would ban them - and National Right to Life is leading the fight to pass the law wherever we can.

Oklahoma is expected to pass the ban soon, and it's being considered elsewhere as well.

We learned in the debate over partial-birth abortion that when the American people are told about brutal methods of abortion like this, they recoil and want to see those abortions banned.

Those who have been with us since the fight over partial-birth abortion know that it helped transform the debate, moving many people - especially many young people who grew up at the height of the debate - to the pro-life side. The debate over protecting unborn babies from the barbarity of dismemberment abortions can have just as powerful an effect!

## USA - Hillary Clinton running for President.

Hillary Clinton has a long history of pushing for abortion, even on a global scale. In 2005 she said that the "government should have no role" in limiting the right to abortion. She received an award from the radical pro-abortion group Emily's List and gave the keynote address at a fundraiser for the organisation. She applauded the work of the abortion activists.