

The Peter MacCallum Cancer Centre

Behold, Victoria's beacon of hope for cancer sufferers in our state and probably for other cancer sufferers who stray over our state borders because of the state of the art treatment available here.

It is right opposite the Royal Melbourne hospital in Melbourne and was opened by the current U.S. Vice-President Joe Biden, who lost a son to brain cancer.

It cost \$1.1 billion and was funded by both the state and federal governments.

Contrast this with a recent statement by Victorian Premier Daniel Andrews in appearing to be seriously attracted to the idea of legalising euthanasia, saying, "the recent death from cancer of his father had challenged his previously held views against it." (The Age 15/9/16)!!

So much for Melbourne's new state of the art cancer centre!

Margaret Tighe



EUTHANASIA THREAT LOOMS IN VICTORIA



- PROMPT ACTION A MUST!

Recently leading members of the Labor Caucus of the Andrews government have been expressing their support of the legalisation of euthanasia or physician-assisted suicide,

This follows the recommendation of a Legislative Council parliamentary enquiry into "End of Life Choices." which gave the green light to the deliberate ending of 'life not worthy to be lived.'

Opposition Leader Matthew Guy MLA has announced his opposition to patient killing or euthanasia. Sadly some members of the Liberal opposition have also expressed their support for the concept of changing the law so as to give doctors the power to kill their patients. If we want to stop this euthanasia juggernaut we must work hard at letter writing and lobbying of members of State Parliament.

See enclosure and act today!

Margaret Tighe

Patient Killing Looms in S.A.

Yet again legislation allowing patient killing looms in the S.A. Parliament! Media personality Andrew Denton is leading the push, extolling the virtues of Holland and Belgium – patient killers extraordinaire and ignoring the British Parliament's overwhelming NO to patient killing.

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At canonization, Pope Francis praises Mother Teresa's strong defence of the unborn

– Claire Chretien

VATICAN CITY, September 6, 2016 (LifeSiteNews) – Pope Francis praised Mother Teresa's defence of human life in his homily at her Mass of Canonization on Sunday.

"Mother Teresa, in all aspects of her life, was a generous dispenser of divine mercy, making herself available for

everyone through her welcome and defence of human life, those unborn and those abandoned and discarded," Pope Francis said. "She was committed to defending life, ceaselessly proclaiming that 'the unborn are the weakest, the smallest, the most vulnerable.'"

Mother Teresa was a pro-life warrior who spoke truth to power about the injustice of abortion and used her global influence to spread the pro-life message.

In one of her most famous speeches, she told a room containing then-President Bill Clinton and Hillary Clinton that "the greatest destroyer of peace is abortion." The pontiff also said the new saint "made her voice heard before the powers of this world, so that they might recognize their guilt for the crime – the crimes! – of poverty they created."

"For Mother Teresa, mercy was the 'salt' which gave flavour to her work, it was the 'light' which shone in the darkness of the many who no longer had tears to shed for their poverty and suffering," he continued.

Blessed Mother Teresa of Calcutta

"Notable and Quotable", Wall Street Journal, 2/25/94, p. A14 ~

"We must not be surprised when we hear of murders, of killings, of wars, of hatred. If a mother can kill her own child, what is left but for us to kill each other."

"It is a poverty to decide that a child must die so that you may live as you wish."

"Abortion kills twice. It kills the body of the baby and it kills the conscience of the mother. Abortion is profoundly anti-women. Three quarters of its victims are women: Half the babies and all the mothers."

"America needs no words from me to see how your decision in Roe v. Wade has deformed a great nation. The so-called right to abortion has pitted mothers against their children and women

against men. It has shown violence and discord at the heart of the most intimate human relationships. It has aggravated the derogation of the father's role in an increasingly fatherless society. It has portrayed the greatest of gifts ~ a child ~ as a competitor, an intrusion, and an inconvenience. It has nominally accorded mothers unfettered dominion over the independent lives of their physically dependent sons and daughters. And in granting this unconscionable power, it has exposed many women to unjust and selfish demands from their husbands or other sexual partners. Human rights are not a privilege conferred by government. They are every human being's entitlement by virtue of his humanity. The right to life does not depend, and must not be declared to be contingent, on the pleasure of anyone else, not even a parent or a sovereign."

"The greatest destroyer of love and peace is abortion, which is war against the child. The mother doesn't learn to love, but kills to solve her own problems. Any country that accepts abortion is not teaching its people to love, but to use any violence to get what they want."

"By abortion the Mother does not learn to love, but kills her own child to solve her problems. And, by abortion, that father is told that he does not have to take any responsibility at all for the child he has brought into the world. The father is likely to put other women to the same trouble. So abortion leads to more abortion."

Mother Teresa also said that abortionists should be put in a special section of jail, away from the other prisoners, so that they could not corrupt the other prisoners. -Ed

SUFFER THE LITTLE CHILDREN THAT COME TO ME

Please forgive me my child...

My little baby that nestled so safe within my womb.

How were you to know that I would be so cruel.

Safe in the arms of Jesus

He will watch always over you.

Your Daddy when I told him

Said he would be there

Something changed his mind

And he left us in despair

I don't think he even cared.

I still cannot recall the emotion

Which motivated me to end your life

And I will never know you now

For the rest of my life..

The tender breasts will never feel the suckling.

The arms will never hold you close..

Forgive me my darling...

- Joanne

**No one could make a greater mistake than
he who did nothing because he could do only
a little. ~ Edmund Burke**

VIC AMA rejects push for doctor-assisted suicide

At its meeting on 20th September 2016, the President of the Victorian AMA put a motion that the AMA delete its opposition to doctor-assisted suicide in its policy. A significant number of defenders of life spoke articulately, and the motion was convincingly defeated. This rebuff mirrors the rebuff in the U.K. of the euthanasia push that was overwhelmingly defeated by the BMA

British Medical Association,

updated 30/6/16: BMA policy

Opposes all forms of assisted dying

Supports the current legal framework, which allows compassionate and ethical care for the dying and

Supports the establishment of a comprehensive, high quality palliative care service available to all, to enable patients to die with dignity

For the following key reasons

Permitting assisted dying for some could put vulnerable people at risk of harm.

Such a change would be contrary to the ethics of clinical practice, as the principle purpose of medicine is to improve patients' quality of life, not to foreshorten it.

Legalising assisted dying could weaken society's prohibition on killing and undermine the safeguards against non-voluntary euthanasia. Society could embark on a 'slippery slope' with undesirable consequences

For most patients, effective and high quality palliative care can effectively alleviate distressing symptoms associated with the dying process and allay patients' fears.

Only a minority of people want to end their lives. The rules for the majority should not be changed to accommodate a small group.

New Zealand Medical Association:

"Euthanasia - The risk is too great and the consequences are final."

Feb 2016: The New Zealand Medical Association submitted to the Health Select Committee this year its view that euthanasia and doctor-assisted suicide are contrary to the ethics of the profession:

"The NZMA is opposed to both the concept and practice of euthanasia and doctor-assisted suicide.

Euthanasia, that is the act of deliberately ending the life of a patient, even at the patient's request or at the request of close relatives, is unethical. Doctor-assisted suicide, like euthanasia, is unethical.

The NZMA, however, encourages the concept of death with dignity and comfort and strongly supports the right of patients to decline treatment, or to request pain relief, and supports the right of access to appropriate palliative care.

In supporting patients' right to request pain relief, the NZMA

accepts that the proper provision of such relief, even when it may hasten the death of the patient, is not unethical

This NZMA position is not dependent on euthanasia and doctor-assisted suicide remaining unlawful. Even if they were to become legal, or decriminalised, the NZMA would continue to regard them as unethical."

'Patients to flood euthanasia market'

– Greg Brown, The Australian, Sept 17-18, (abridged)

Interstate terminally ill patients could flood Victoria's health system if the state were to legalise euthanasia, the peak medical body is warning.

Australian Medical Association president Michael Gannon said legalising assisted death was a quagmire and more difficult to implement than many realised.

The Andrews government has signalled it is likely to introduce laws making Victoria the first state to legalise euthanasia, with more than half the cabinet this week voicing support.

However, Dr Gannon said, "...It is very easy to stand up and say you believe in dignity in dying. It's a whole lot more complicated to write laws that manage the hundreds of bits of detail that need to be sorted out before anyone can avail themselves of this service."

Premier Daniel Andrews is yet to explicitly show his hand on euthanasia after his Health Minister Jill Hennessy supported a change on Tuesday.

Opposition leader Matthew Guy does not support state sanctioned euthanasia but would allow his MPs a conscience vote.

ADVANCE CARE PLANS

There are dangers in the State government's plan to allow people to sign Advance Care Plans because a well person cannot understand how they may feel in the case of a future illness. In many instances, people will be signing away their lives needlessly when in many instances they may have recovered. If the well-known entertainer Molly Meldrum had signed an Advance Care Plan, he would not be alive today, yet he suffered an extremely life threatening injury and was not expected to live. Why do we need such a plan? Is it aimed at saving health care dollars?

When you Die, Help Someone to Live

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, 10% of my estate, or the sum of \$xxxxx, for the general purposes of The Right to Life Australia, 161A Donald St. East Brunswick VIC 3057, ABN number 12 774 010 375."

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



Follow us on Twitter @RightToLifeAust
And Follow us on Facebook- Right to Life Australia



The Medicine

The right to die or the right to kill?

The argument against euthanasia

– By Karen Hitchcock, The Monthly, December 2015
Doctor and writer.



Celebrity is our religion. Celebrities are our gurus, teaching us what to wear, what to buy, how to look and, now, what to think. They front campaigns for human rights and animal rights; they advocate for babies in war-torn countries. Now we even have the celebrity endorsement of euthanasia. Apparently Andrew Denton

is an expert after eight months of research – less time than it takes to get a sommelier diploma from TAFE. Eight months, he repeats, as if this is extraordinary, as if this country is not full of people on both sides of the debate who have spent decades seriously considering the complex issues around euthanasia.

We're both appearing on a TV show, for what he tells me backstage will be a "friendly discussion". "I'm very nervous," he says to me, the one with the dry mouth and sweaty palms, graciously adding, "I think you write like a dream." On air, Denton declares that it's time doctors started listening to their patients, all the while interrupting, dismissing and undercutting questions from the audience in a tone so patronising it would get a junior doctor hauled over the coals. I'm thinking, "Are we not allowed to countenance any doubts about euthanasia? Has it become a faith?"

It is time for us to discuss death, Denton says. "It's time." He looks straight into the camera, like a prime minister reducing complex issues to slogans. Apparently, legalising euthanasia will enable this discussion. In fact, the conversation has begun, though mostly in forums with less fanfare.

Euthanasia makes terrific TV. We hear compelling stories of torturous suffering that make us ache for a way to help people out of their misery. But is death the only solution? And isn't there something strange about the argument that we should give all these apparently deaf – if not entirely blockheaded – doctors a licence to kill?

"Euthanasia" is a word for the act of killing, as is "physician-assisted suicide". Language is important in shaping thought, so we should call it what it is. If I write a prescription, I carry the responsibility when the drug is swallowed; that's the deal with medicine. Otherwise, all drugs may as well be available over the counter. California will likely start executing prisoners again, having found

single drugs that will ensure a "humane and dignified death" – even something as horrific as an execution can be reframed as an act bestowing dignity. Euthanasia advocates wield powerful yet slippery words: "assisted suicide" is promoted as a way to "control" one's death, and guarantee "dignity". This debate has fallen into euphemasia. The right to kill has been reframed as a right to die. A power bestowed on doctors by the state has been reframed as an expansion of a layperson's rights. I have been criticised for using the word "kill", but if the real act is so offensive we should stop advocating that doctors do it.

Death is both everywhere and hidden in our culture. Children witness countless violent deaths on the screen before they hit high school, yet they've usually never seen an old person die up close. We have a disinfected expectation of what it is for a human body to die. A natural death may be instantaneous – a hand to the chest, a look of shock, followed by collapse – or it may be slow: the 95-year-old's gradual refusal of food and drink as her organs enter quietude. What is the point of forcing families to sit around a bed for a few days watching their unconscious loved one "starve and dehydrate to death"? There is no obvious point. But to kill an unconscious dying person relieves only the suffering of the family. The dying person feels neither hunger nor thirst. Despite the rattling chest they are asleep. They will neither remember nor reminisce about these two or three days, because they will no longer exist.

It is true that patients may suffer avoidable pain due to a lack of palliative care services and poor education of clinical staff. If patients are dying with uncontrolled pain because clinical staff are scared to give "too much" morphine in case they are "charged with murder", then there is a need to clarify the law around the principle of double effect: that sometimes the doses of drugs needed to control symptoms at the end of life will secondarily lead to a hastening of death. Spurned by Denton et al. as "slow euthanasia", the principle is based on a simple edict that is the bedrock of medicine: a doctor treats symptoms, not life. Life is never the disease. And death is never the cure.

Many of the horror stories are the result of grief-stricken family members unprepared for, poorly communicated to and given no bereavement counselling after the death of their loved one. They are the ones left with the memories of good or bad deaths, and their memories are determined by their interpretation of the events, their definition of indignity, the hospital's practices, and their relationship with the person who died. These are complex issues and will not be untangled by a clean kill.

Over the 12 years that I have worked as a doctor in large public hospitals, I have cared for hundreds of dying patients. No one has ever died screaming or begging for me to kill them. Patients have told me they want to die. My response to this is "Tell me why." It is rarely because of pain, but it is often because of despair, loneliness, grief, the feeling of worthlessness, meaninglessness or being a burden. I have never seen a dying patient whose physical suffering was untreatable. The combination of morphine and midazolam is extremely powerful; it can be administered and

titrated up very quickly. Barbiturates can render one unconscious in minutes. Palliative care practices have come a long way in the past decade.

Studies repeatedly show that the desire to hasten death for those with a terminal illness comes principally from a feeling of hopelessness. We must listen to and attempt to address this and other fears. Knowing one is dying can be excruciating: the terror of non-existence. For thousands of well-educated, affluent people in vocal advocacy groups, a euthanasia drug like Nembutal is the sole way to wrest control of the only part of their life they may not fully control.

The simplistic understanding of the human subject as a wholly autonomous individual is based on an ideology that dovetails with our other current dominant ideology: the free market. In the lived world, both mostly benefit the privileged.

When we're regarded as nothing more than free agents in a free market, needing care and assistance becomes an indignity. The act of caring for someone is viewed as a cost rather than a mutually enriching experience. We place people in nursing homes, which accelerate cognitive and physical decline – leave in their cataracts, leave out their teeth and hearing aids, trap them in front of a TV with a tea-towel for a bib, and avoid touching them unless absolutely necessary. And then we find them disgusting. Our horror at the thought of requiring assistance or care has a huge impact on those who do. You're all better off dead, we're saying, rather than collectively trying to improve their lot. It has always surprised me that progressive political parties in Western nations are the loudest advocates of euthanasia. I thought the basis of progressive politics was the conviction that many personal "rights" (to bear arms, to burn fossil fuels, to take home one's entire pay cheque) were rightly compromised for the benefit of society as a whole. With the issue of death it's as if we are suddenly just a collection of individuals who happen to be located on the same block of dirt.

If death becomes an option in the face of debility, then debility is turned into a lifestyle choice. Lifestyle choices are the responsibility of the individual. Our social responsibility is dissolved.

Despite our country's vast collective wealth, we hear the constant cry that our health and welfare systems are unsustainable: resources are heavily rationed, there is a dearth of funding for palliative care and clinician education about it. Care for the elderly and disabled is handed out stingily and begrudgingly because people are economic units who can only be individually productive or not.

We may revere autonomy and the sanctity of free will, but people's decisions are influenced by circumstance, their peer group and societal expectations. Formal consent is no guarantee of a decision freely taken. And importantly, patients' decisions fluctuate over time; once you are dead, though, you cannot change your mind.

What is "unbearable suffering"? How should we as a society respond to it? What does it mean for our core practice of

medicine if we no longer seek to help people for whom life has become so painful they want to exit, but instead assist them to die? In Belgium, death is now a valid treatment for "incurable" depression. Some call this brave. You need a second opinion! As if that is some sort of safeguard in the face of state-sanctioned killing. Not so long ago, lobotomy was the treatment of choice. You needed a second opinion for that too. Doctors can be as crazy, unwise, mistaken and misguided as anyone. How should we triage people into suicide assistance and suicide prevention queues? Only 6% of psychiatrists in Oregon say they can confidently conclude that a psychiatric illness is not affecting a patient's request to be killed. Should the likes of those 6% be the ones to decide? It wouldn't take long for health insurance companies to assemble them into a list.

Life expectancy is difficult to predict, and the term "suffering" encompasses a galaxy of sensations and emotions. The degree of suffering is always subjective. The human animal has an extraordinary capacity to find meaning in and even enjoy a life marked by limited function and debility – particularly if care is freely offered. Chronic pain clinics are full of patients who don't have terminal illnesses. They are experiencing pain they find insufferable, often despite no organic pathology, often in the context of psychosocial chaos. Should these people be offered death? Or should we instead continue to provide psychological and social support, and to research neuroplastic ways to help these people find peace? Why bother, if we decide death is the treatment?

There are calls to include "existential suffering" – part of the price we pay for life – as an indication for death. Existential suffering is felt by most people at some point, certainly most people with a serious disease, and can be a source of wisdom.

To refuse treatment is a right. To demand care is a right. It is not illegal to commit suicide – though we try to prevent its enactment. To kill or to ask to be killed is not a moral or legal right. Euthanasia is a cheap solution to the difficult and complex problem of caring for those dependent, suffering and dying. We search for a clear line beyond which we should agree: Yes, your life is not worth living. The line is always arbitrary. And it is a cliff, not a line.

Any attempt to make death easy will inevitably expose those in the community who are vulnerable to untimely deaths, to feeling worthless and burdensome. No panel of doctors or booklet of rules, no ream of checks and balances, can prevent this invisible coercion based on new social norms. It is clinicians on the front line who see this invisible coercion in action: patients apologising for taking up beds, for being a burden, for finding themselves disgusting and so wishing they could die.

I can understand why killing might be framed as a humane response to your diminished function, physical suffering and mental anguish. But our responsibility is to help make your life bearable. I hope for a society with the values and the resources to allow us to say, Don't be scared. We will attend to you, ease your pain, witness your anguish. No, we will not kill you.

The Preston Report

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

Dear friends,

- Firstly, I am glad to be able to say that things are moving ahead with the appeal of the Tasmanian case. A directions hearing has been set down for 10 October in the Tasmanian Supreme Court. Apparently this will be brief and I will not need to be there.

You may have heard that a courageous mother, Kathy Clubb, whom I know, was arrested in Melbourne early this month. Kathy was simply offering leaflets to women entering one of the abortion clinics and has been charged with carrying out prohibited behaviour within an exclusion zone. I understand that Kathy is also being represented by Christopher Brohier and it is hoped that her case and mine may be brought together since they relate to the same fundamental issue. Please remember her too.

Sincerely,

Graham

Protect Life

Anti-abortion protester Graham Preston to be first to appeal conviction under Tasmanian law

ABC NEWS, By Edith Bevin, 19 Sep 2016



Photo: Graham Preston argues the Tasmanian laws are unconstitutional. (ABC)

The first person prosecuted under Tasmania's laws banning pro-life protests outside abortion clinics is appealing against his conviction.

Graham Preston is arguing Tasmania's Reproductive Health laws are unconstitutional and impinge both his right to freedom of religion and political speech.

It is a battle that may well end up in the High Court, with constitutional law experts saying Preston may have a point.

Tasmanian laws introduced in 2013 banned protests within 150 metres of a termination clinic.



Photo: Kathleen Clubb in center

Aussie mom of 13 charged for pro-life outreach outside abortion facility

Steve Weatherbe

Melbourne, Australia, 31/8/16 (LifeSiteNews) – A Catholic theology student and mother of 13 is the first person charged under the State of Victoria's new bubble zone law for distributing pro-life material to clients at a downtown abortion clinic.

Kathleen Clubb, 50, wrote on the website devoted to raising funds for her legal defense that she planned to challenge the law, which was passed last year and took effect in May. "I intend to pursue this case to the High Court to prove that the 'Safe Access Zone' amendment is unconstitutional because it burdens the constitutional freedom of political communication."

The law prohibits pro-life communication of any kind within 150 meters of an abortion clinic as well as recording or publishing images of abortuary clients. Violators are subject to up to a year in prison.

During the debates over the measure last year, pro-abortion parliamentarians made false accusations against a local pro-life group that had been active outside Melbourne's Fertility Control Clinic for more than 20 years without police interference.

Despite claims that the Helpers of God's Precious Infants were harassing and intimidating women, supporters note that the Helpers focused on praying for mothers and babies and offering assistance.

Clubb said: "I was arrested today for offering help to aborting mothers outside the Fertility Control Clinic in East Melbourne and for seeking to draw the attention of the public and politicians to the issue of abortion and to the totalitarian restrictions being placed on a targeted group of Australians – members of the pro-life movement, especially the Helpers of God's Precious Infants."

Clubb said on social media soon after her arrest that she was offering "help to aborting mothers" and wanted to bring attention to "totalitarian restrictions placed on the pro-life movement."



Falun Gong practitioners killed for their organs in China

Dr Katrina Haller addressed the Rally outside Parliament House on Friday September 2nd, of the Falun Gong practitioners. She said,

"Everyone has the Right to Life. This is article 3 of the Universal Declaration of Human Rights. Without the Right to Life – all other rights – such as the right to freedom of assembly and the right to freedom of speech – are meaningless."

Dr Haller condemned the Chinese Government practice of killing Falun Gong practitioners to obtain their organs for transplantation. She called on the Prime Minister, Malcolm Turnbull, to make organ tourism from Australia illegal, and to make illegal the payment by our Medical Insurance companies for anti-rejection drugs of those who return with organs procured from Falun Gong prisoners in China. The Chinese Government take Falun Gong practitioners to labor camps and test their blood. When a Chinese person or tourist wants a transplant and there is a match, they are then killed for their organs. It is very profitable - \$130,000 - \$160,000 for a heart, \$150,000 - \$170,000 for a lung, \$98,000 - \$130,000 for a liver, \$62,000 for a kidney, \$30,000 for a cornea.

Falun Gong, consists of meditation, gentle exercises and the values of truthfulness, compassion and tolerance.

In 1999 certain communist leaders perceived its popularity as a threat to the Party's total control. A violent multi-billion dollar campaign to eradicate it was launched.

Transplant tourism – patients fly to China for quick transplants. The organ is obtained by murdering the "donor" and can make Australians unknowingly complicit in this crime.

Watch HumanHarvestMovie.com and HardToBelieveMovie.com

Sign a petition to the United Nations:

www.dafoh.org/petition-to-the-united-nations/

ADVERTISEMENT
Northern Territory Election 2016

How to Vote Against Abortion

A legislator who is not prepared to uphold the right to life of all, is not fit to sit in Parliament

DO NOT VOTE FOR THE FOLLOWING:

- Kezia Purick (IND-Goyder) -wants dangerous abortion drug RU486 for all Territory women - even in remote areas
- All Greens candidates - are committed to completely legalise abortion at all stages
- All ALP EMILY's List* candidates listed **BELOW** are committed to completely legalise abortion at all stages

Dale Wakefield	ALP candidate for BRAITLING
Lauren Moss	ALP candidate for CASUARINA
Sandra Nelson	ALP candidate for KATHERINE
Kirsty Hunt	ALP candidate for NELSON
Lynne Walker	ALP candidate for NHULUNBUY
Natasha Fyles	ALP candidate for NIGHTCLIFF
Kate Worden	ALP candidate for SANDERSON



EVERY ABORTION KILLS A BABY

Authorised by Margaret Tighe, The Right to Life Australia, 181s Donald Street, Brunswick East, Vic 3067, ABN 127494271

The Northern Territory Election was held on 27 August 2016. After placing an advertisement in the Northern Territory News (see advertisement) we were pleased to see two EMILY's List candidates were unsuccessful in being elected. Kirsty Hunt, candidate for NELSON was unsuccessful as Gerry Wood (IND) was safely returned to his seat. After a recount Lynne Walker, Deputy Leader of the Labor Party in the seat of NHULUNBUY was unsuccessful - losing by 8 votes!

Unfortunately the remaining four EMILY's List MPs are now representing Northern Territory in the Parliament. As well, candidate for Goyder, Kezia Purick (IND) was returned to her seat. She introduced a bill in 2015 to legalise the dangerous RU 486 abortion drug in the Territory. Margaret Tighe visited Darwin shortly after the election and during that time met the Catholic Archbishop who said he was pleased to see the advertisement in the paper! – **Mary Collier**

SUPPORT OUR SPONSOR

One of our members, Kim Ausling has arranged for those buying Melaleuca products through her, will have 5% donated to the Right to Life Australia. Every month we receive a cheque from Melaleuca. Just switch supermarkets and buy products from another source. This company has products that contain no chlorine bleach, no ammonia, no formaldehyde and no phosphates and yet are very effective and can save you time and money. They are safer and healthier for your family. If you would like to help, phone Kim on 0425 855 092.



News from around the World

Ireland – House of Lords member warns Kenny against abortion on disability grounds

Lifezine, 4/8/16

A member of the British House of Lords, who has a severe disability, has written to an Taoiseach Enda Kenny to warn against legalising abortion on disability grounds. The Times has reported.

Kevin Shinkwin wrote to Mr Kenny when Mick Wallace's abortion bill was before the Dáil, and told an Taoiseach that he was writing to him as "a fellow parliamentarian" and that he wished to warn against a "slippery slope attempt" to undermine equality for disabled people in Ireland.

He said that he was speaking as someone with a severe disability – brittle bone disease – and family connections to Ireland, according to the report.

He pointed out that Ireland, a 'wonderful country, from which my family comes' was a 'beacon of hope for those severely disabled people, including myself, who believe in disability equality'.

Earlier this year, Lord Shinkwin introduced a bill, now at its second stage in the House of Lords, to outlaw abortion on disability grounds.

Mick Wallace's bill sought to legalise abortion where the baby had a severe disability, using the misleading term 'fatal foetal abnormality' despite evidence from medical and legal experts that it was not a medical term. The Times noted that "Youth Defence had erected a billboard to coincide with the vote on the private member's bill featuring a child with Down's syndrome and the claim that 'abortion discriminates'."

Netherlands – New Study Shows Netherlands Euthanizing People With Depression, Eating Disorders and Autism

LifeSite News - Wesley Smith Aug 31, 2016 Amsterdam, Netherlands



The Netherlands considers itself oh, so rational. Its laws around controversial social issues involve the concept of harm reduction.

Harm reduction? Once the country accepted killing

as an answer to suffering, it was sure to include the mentally ill.

Now a new study reveals the law's cruelty. From the Reuters story: Overall, about a third of the people helped to end their lives were age 70 years or older, 44 percent were between ages 50 and 70 and about a quarter were 30 to 50 years old. Seventy percent were women. While fully 55 percent of patients were diagnosed with depression, the others had a number of different conditions, including psychosis, posttraumatic stress disorder or anxiety, neurocognitive issues, pain without any physical cause, eating disorders, prolonged grief and autism.

And now, Netherlands is following Belgium by conjoining euthanasia with organ harvesting, raising the prospect that the mentally ill will come to see their deaths as having greater value than their lives.

Don't expect this to slow down anything. The only thing that really matters to the Dutch around this issue is transparency.

But what good is transparency when things go from bad, to worse, to evil, and it matters not?

Most people in the Netherlands long ago swallowed the hemlock premise of euthanasia. So I guess we could say about this study and others like it: At this point, what difference does it make?

LifeNews.com Note: Wesley J. Smith, J.D., is a special consultant to the Center for Bioethics and Culture and a bioethics attorney who blogs at Human Exceptionalism.

QLD: – THE FIGHT CONTINUES

From Cherish Life

The Queensland Parliament Health Committee is conducting another public inquiry into Mr Pyne's second Bill, the Health (Abortion Law Reform) Amendment Bill 2016, which he moved on 17 August. This bill pretends to put in place a restriction on abortions after 24 weeks of pregnancy, but in fact it would still allow abortion to full term. It also attacks freedom of speech by banning peaceful protest within 50 metres of an abortion facility.

Thirty years ago, Justice Fred McGuire in R. vs Bayliss and Cullen interpreted the Queensland Criminal Code to allow abortion to be performed in cases where there is a serious danger to the physical or mental health of a woman.

However, he added that his ruling "cannot be made the excuse for every inconvenient conception. It would be wrong indeed to conclude that [this] equates to carte blanche. It does not. On the contrary, it is only in exceptional cases that the doctrine can lawfully apply..."

"The law in this State has not abdicated its

responsibility as guardian of the silent innocence of the unborn. It should rightly use its authority to see that abortion on whim or caprice does not insidiously filter into our society. There is no legal justification for abortion on demand."

"The law of the land has always held that human life is sacred and the protection the law gives to human life extends also to the unborn child in the womb."

Submissions to the inquiry are due by Thursday, 6 October. After the report from this second inquiry is tabled in Parliament no later than 17 February, it is almost inevitable that there will be a debate in Parliament on more permissive abortion legislation.

The pro-abortion lobby is justifying its push to remove abortion from the Criminal Code because they say that women who have abortion should not go to jail.

We need to let our state Members of Parliament know that there is no need to relax the existing Queensland law, as no woman has ever been jailed for or even convicted of an illegal abortion in the 117 years the law has been in place.

USA: – OHIO – Amazing Pictures Show Abortion Clinic Demolished, Will be Replaced by Memorial to the Unborn

LifeSite News Steven Ertelt Aug 31, 2016 Toledo Ohio



In this abortion battle, where pro-life people are often beleaguered from all the negative news, here's a story of hope from Ed Sitter, the Executive Director

of the Foundation for Life in Toledo, Ohio. Sitter reports on the demolishing of a local abortion clinic, closed years ago, which will be replaced by a memorial to the unborn.

In case you haven't heard, the Center For Choice is being demolished!!!

There is still time to see some of the demolition take place. The old CFC was located at 22nd St. and Madison Ave. I want to encourage anyone who ever prayed at CFC to go down to the site. It is amazing!

A lot has changed in the neighborhood. This is truly the beginning of a new day. Now we can begin the journey of finding forgiveness, healing, and new purpose for those whose lives were forever impacted by their abortion decision.

Please check out the website www.hopepark.org. ... this will be a memorial to the fifty thousand plus innocent lives lost at the hand of the abortionist.