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This newsletter is meant to be shared with at least ten others – copy as needed!

CHAPTER ACTIVITIES ON JANUARY 22, 2017

Estancia Right to Life and members of the community met at Crossley Park in Moriarty on Sunday morning, January 22, 2017, the 44th anniversary of the *Roe v. Wade* Supreme Court ruling, to make abortion legal to observe one minute of silence for the victims of abortion. The children holding the numbers on the left is the total number of abortions for the U. S. those on the right are New Mexico's total numbers.



Albuquerque Right to Life hosted a memorial service on the anniversary of *Roe v. Wade* on Sunday, January 22, 2017. Beginning at 2:00 p.m., several hundred "flags" featuring names on each flag to remember the unborn children aborted in New Mexico since last year were placed in Mt. Calvary Cemetery. A memorial service was held on the premises with prayers offered by Pastor David Morgan with Valley Christian Church. Curt Kuper with Project Defending Life gave an update on their activities, and Chistine Garza with Sidewalk advocates spoke for the need to be visible to the women approaching the abortion facility. Dominique Davis who is director of Client Services at Women's Pregnancy Options shared the wonderful outreach avenues for women that they have. Other speakers included Dan & Laura Rosecrans who reminded us to stay committed



some time. The Executive order is in place to stop all government money from going to Planned Parenthood. A promise made, a promise kept.

There is much more to come. Thank you President Trump.

By Executive order he the restored the Mexico City Policy which President Obama denied by Executive Order. This policy says in order to be eligible for certain types of foreign aid, a private organization must sign a contract promising not to perform abortions (except to save a mother's life or in cases of rape or incest), and not to lobby to change the laws of host countries, or otherwise "actively promote abortion as a method of family planning." This will effectinternational Planned Parenthood Federation & the Marie Stopes International and others. Your tax dollars will no longer go to these entities

Carrying the thought that taxpayers must not pay for abortions, Congress has made permanent the Hyde Amendment that prevents American tax dollars be used for abortions except to save the life of a mother and cases of rape and incest. This legislation has had to be renewed each year, which made it vulnerable. But now it is a permanent law. Thousands of lives have been saved because of this legislation and now more will be saved not just each year, but for the future.

NEW MEXICO STATE LEGISLATURE UP-DATE

If you have provided an e-mail to RTLNCNM you would have received this information in a timely manner. To receive information more quickly in the future, please send your e-mail to Receptionist@rtlnm.org ,

There are two bills in the 2017 legislative session that involves The Right to Life Committee of New Mexico. We support one, HB37 The Born Alive Protection Ace sponsored by Rep. Rod Montoya, a bill that would protect new born babies that have survived an abortion to be saved and not killed or set aside to die as is being done around our nation AND at the University of New Mexico.

This bill has been assigned to three committees; Consumer and Public Affairs Committee, Health and Human Services Committee and the Judiciary Committee. It has not been scheduled to be heard in r, Health and Human affairs as of 1/23/2017. However, action will probably have taken place by the time you receive this newsletter in February in at least one committee. This bill is being supported by RTLNCNM.

All bills are in the House at this time, so you should contact your legislator by e-mailing them or calling them. You can find their e-mails by going to the New Mexico state legislature Legislative council. You can call 505-986-4300 and leave a message with the legislator's secretary. Ask for a response.

Bills can be introduced until Feb. 17, 2017 so we may have others coming that we will oppose. We are opposing an assisted suicide bill which has also been introduced in the House. This bill's number is HB 171 and it is horrible. Again, ask your legislator to oppose this bill. If you don't know the name of your legislator, look in the telephone book, and call the County Clerk. Once you give her your address, she will let you know who your legislator(s) are. It's time for each of us to take responsibility for a responsible government – your communication with your legislator can help so much. It may also protect your life when you are old, disabled or chronically ill.

Copies of the bill are available on the same web site I already gave you. We do want to inform you in a better way than a once a month newsletter, and that can be done by providing your e-mail. It is never provided to anyone else.

**SEE WHAT PEOPLE CAN DO – SEE WHAT YOU CAN DO
– SEE WHAT PEOPLE HAVE DONE!!!
PRO-LIFE VICTORY IN LAS CRUCES – THE ONLY
ABORTION CLINIC IN LAS CRUCES HAS CLOSED**

Over 200 volunteers committed to five 40 Days of Life campaigns with praying and fasting in shifts on the sidewalk in front of the clinic. During this time women were directed to Care Net Pregnancy Center. This included processions, rosary rallies, Native American prayer ceremonies, and countless other devotionals. Let's go forth and shut down more of these abortuaries.

**MARK YOUR CALENDAR
SATURDAY, OCTOBER 14, 2017
–RTLNCNM- STATE CONVENTION!**

**PRESIDENT DONALD TRUMP TAKES ACTION ON THE
FIRST DAYS OF HIS PRESIDENCY**

On January 23, 2017, by Executive Order, President Trump has defunded Planned Parenthood.

This will be dealt with by legislation, but this action speeds up the process. Legislation passes through the House, and then Through the Senate and it takes

WE SAY ADIEU TO TWO VERY STAUNCH PRO-LIFE ADVOCATES.

One is nationally known for many many years – Jean Garton. She was the founder of Lutherans for Life and spent years traveling the states, including New Mexico, giving very enjoyable talks on pro-life issues.

She added much to the education of the people in our country.

In New Mexico, we say farewell to Joan Herman, a volunteer for many years. She was the volunteer chairman, and a director on the State Board. There wasn't anything Joan wouldn't do, and what she did she did, with great competency.

I am sure both have received a very just and loving reward for their dedication.

A NEW AD HOC ORGANIZATION IS FORMED

Joining in a united organization to fight the unethical practices of medicine, a new group has been formed. The organization is called New Mexicans for Ethical Medical Treatment (NMEMT) and it has partnered with disability, advocacy, religious, health care, family service and human rights. In this session the group is fighting assisted suicide. They also support the Born Alive Protection Act.

Who we are:

New Mexico for Ethical Medical Treatment (NMEMT) is a partnership of organizations with the goal to address the disparities and inconsistencies in medical care and lack of ethical medical treatment that should be available to all New Mexico patients.

What we do:

Every year we see politicians propose legislation to protect and aid children and families, which should not discriminate against anyone, including newborn children, children with disabilities and the elderly – who are often left out of these discussions and deserve equal protection under the law.

Mission Statement:

New Mexicans for Ethical Medical Treatment seek to address the disparities and inconsistencies of ethical medical treatment for all patients in New Mexico. New Mexico for Ethical Medical Treatment will advocate for:

- . Ensuring access to ethical healthcare for all New Mexicans
- . Addressing discrimination in healthcare, including newborns, individuals with disabilities and the elderly.

We ask any organization who wants to join this organization to help us proclaim this declaration to contact Dauneen Dolce at dauneen@rtlnm.org. We are still compiling new organization names to the list of what we have at present.

CONGRESS TAKING PRO-LIFE ACTIONS –NOW! PLANNED PARENTHOOD WOULD LOSE FUNDING AS PART OF OBAMACARE REPEAL, RYAN SAYS- WASHINGTON POST – 1/6/2017

Republicans plan to strip Planned Parenthood of hundreds of millions of dollars in federal funding as part of their rapid push to repeal President Obama's health-care reforms, House Speaker Paul Ryan said on Thursday, January 5, 2017.

Speaker Paul Ryan said a defunding measure would appear in a special fast-track bill that is expected to pass Congress as soon as next month. "Planned Parenthood legislation would be in our reconciliation bill," he said at a news conference in response to a question about plans to defund the organization. Reconciliation is a special congressional procedure allowing legislation to bypass a Senate filibuster, meaning it would need only a simple majority of senators to pass rather than a 60-five supermajority.

Ryan made his comments two days after a special investigative panel formed by Republicans issued a report recommending that Planned Parenthood, the nation's largest abortion provider, lose its access to Medicaid reimbursements and federal family-planning funds. The GOP report also recommended that Congress allow states to exclude abortion providers from their Medicaid programs.

Planned Parenthood reported receiving \$553 million in government funding in 2014, about half of its total revenue. Congress has barred federal funding for abortions since 1976, but health providers that offer abortions are eligible to use

federal funds for other services.

Planned Parenthood estimated that roughly 40 percent of its funding would be at risk should defunding legislation become law. Democrats are gearing up to defend against GOP attempts to attack the group. House Minority Leader Nancy Pelosi (D-CA) and other lawmakers rallied Thursday afternoon on Capitol

Hill with executives from Planned Parenthood and other women's health organizations. "We are going to stand against this with every fiber of our beings," said Rep. Diana DeGette (D-CO.), co-chairwoman of the House Pro-Choice Caucus.

A 2015 reconciliation bill that repealed major parts of Obamacare also included language defunding Planned Parenthood. That bill passed both houses of Congress and was vetoed by Obama. Republicans expect President-elect Donald Trump to sign the coming reconciliation bill. While Trump has spoken positively about Planned Parenthood in the past, he said last year that "as long as they do abortions, I am not funding Planned Parenthood."

Republicans have a 53-28 Senate Majority, and it appears it will be a tough task for Democrats to persuade enough GOP senators to oppose a defunding bill. Only two Senate Republicans opposed the bill when it passed in 2015: Susan Collins (ME) and Mark Kirk (IL). Kirk is no longer in the Senate, and Collins alone could not block the bill.

At an afternoon news conference called in response to Ryan's remarks, Sen. Patty Murray (D-WA) said it would be a mistake to assume that every senator who supported the 2015 bill—which was certain to be vetoed—would support defunding Planned Parenthood now. "This is now real," she said. "I would give a strong message to every member of Congress that you're going to hold the bag on this if you try to hide behind a vote. The consequences are real."

Murray suggested GOP women in the Senate could play a key role in fending off the defunding measure: "I know that Republican women here don't want their party to be known as the party that takes away a woman's ability to make her own health choices."

But conservative groups are already pressing Republican lawmakers to follow through on long-tendered promises to anti-abortion voters. Marjorie Dannenfelser, president of the conservative Susan B. Anthony List, hailed Ryan's commitment as a "victory for women's health care." "We commend Speaker Paul Ryan on his continued resolve to fund women's health care, not abortion," she said.

Planned Parenthood chief executive Cecile Richards, speaking to reporters Thursday afternoon, said she took Ryan's threat "very seriously" and she said her organization had already launched a major national campaign to mobilize supporters.

Richards pointed to a "real divide" between ideologically driven conservatives and more-pragmatic Republicans who are more wary of a decisive fight – including, she suggested, the president-elect. "Donald Trump was not elected to defund Planned Parenthood," she said.

Note: This is not about a woman's decision to make choices for her health care, but that of her ability to make choices for her unborn child's health – a separate human being.

Cecile Richards, and all the other pro-choice legislators should read the polling on where the American people are. It is not a Conservative, Liberal, Democrat or Republican issue – it is one that involves and has a majority of Americans wanting not only defunding of Planned Parenthood, but ending the ability to have an abortion in most cases.

SENATE PANEL ON INFANT LIVES FINAL REPORT: INFANTS LEFT TO DIE AT UNM HOSPITAL AND SOUTHWESTERN WOMEN'S OPTIONS

Lack of Medical Training and knowledge of Law by UNM's Top Abortionist and OB-GYN Department chair, Dr. Eve Espey

ALBUQUERQUE, N.M: The Congressional Select Panel on Infant Lives has issued a 500 page final report from their investigation of fetal tissue research issued Wednesday, Jan. 4, 2017. It asserts that the University of New Mexico and Southwestern Women's Options (SWO), a later term abortuary had no protocols for dealing with fetuses that are born alive after leaving the womb.

The panel in its report says that "public funding for fetal tissue research and abortion providers needs reforming."

Senate Panel on Infant Lives... (cont. from page 2)

What has come to light with the admission of UNM abortionist and OB-GYN Department Chair Dr. Eve Espey that there have been cases of infants born alive during induced abortions, and no measures were taken to resuscitate or to provide care. She said neither she nor students are trained to on what to do when this occurs. These are medical people saying they know how to save a new-born baby. I doubt this, or if true they are completely incompetent to practice medicine.

Meanwhile, they are breaking both state and federal law, Born-Alive Infants Protection Act (a fourth degree felony), and Espey said she has never discussed the law with counsel and did not "understand the relevance to this to my practice." The law addresses what she is doing, committing infanticide, killing a new born child after birth.

So what do they do with a living breathing baby after an abortion takes place? Do they just set it aside to let it cry, stay cold and go hungry until it expires from lack of care? These are late term babies that can survive with care. They, by law, are now persons and are to be protected under the law.

Furthermore, the panel questioned violation of informed consent laws. Do the women seeking an abortion consent to their child being left to die in such a manner. Do they give any consent at all for experimentation to be done on their baby? If students aren't trained to save a baby, are they trained in consent laws?

It seems the money provided for these experimentations and the evil intent of Dr. Espey's handling of the OB-GYN department and the students under her needs a complete investigation by the law, UNM, and tax payers who pay for this.

New Mexico must address this first with a New Mexico law being introduced in the 2017 legislature dealing with children born alive after an abortion. This law will have even stronger penalties. After all, letting a baby die that could be saved is MURDER!

WELCOME PRESIDENT TRUMP – OUR GOOD WISHES ARE WITH YOU

There is much turmoil in Washington D. C. as our 45th president takes the realm of a ship in distress.

He also has a country that is waiting and hoping for those necessary changes to get our country on the right track. They are being bombarded with innuendos, lies, and propaganda so that they will not trust this new president. In time, they will see they need not have worried.

For the pro-life movement – we are in a period of hope. Pro-life legislation will be passed in D. C. and most states and the chance of the passed legislation being upheld in both the Supreme Court and the federal courts is very great.

President Donald Trump will be able to fill 100 seats on these federal courts, far more than Barack Obama had available (54). Currently 51% of the judges on the district courts and appellate courts are Democrats. There are 84 vacancies in the district courts, so the balance will go over to the Republicans.

State Supreme Courts will have to be dealt with, but they are not the final word – the U. S. Supreme Court has that honor. Soon the balance on the U. S. Supreme Court will move to a court that upholds pro-life legislation. This may increase in the coming years with additional appointees.

This does mark the opportunity to return the United States to the culture of life – let us all work together to make this happen.

GOOD NEWS IN NATIONAL POLLING

National polling done on Election Day by the Polling Company, Inc. has found that two-thirds of Americans support the Pain-Capable Unborn Child Protection Act – well more than double those who opposed. This is 64% for the legislation and 28% opposed to it.

This legislation already passed the House of Representatives on May 13, 2015 by a vote of 242-184.

The bill, which protects unborn children who are at least 20 weeks beyond fertilization (which is equivalent to 22 weeks of pregnancy **-about the start of the sixth month**). There is abundant evidence that by this point (and probably earlier), the unborn child has the capacity to experience excruciating pain during typical abortion procedures.

The support for the bill in the new poll extended across all demographic and geographic boundaries. For example:

. Millennial voters – 78% Support

. Women Voters – 67% Support

. African Americans – 70%

. Hispanics -57% Support

This bill will be addressed by the new Congress in 2017. If passed, New Mexico will have to follow that law.

A ROSE BY ANY OTHER NAME IS STILL A ROSE - TRUE FOR ASSISTED SUICIDE

As usual those who support the culture of death use "words" to soften what they are actually trying to do- kill innocent human beings. Even in New Mexico they used the words "Aid in Dying" but the name of the bill is End of Life Options Act. The following articles show how far they will go to "divert" our attention to what they are doing – to pass an assisted suicide bill. Deception is the name of the game.

LATEST RASMUSSEN REPORT FIND HIGHEST PERCENTAGE SINCE 2014 WHO SAY ABORTION IS MORALLY WRONG – By Dave Andrusko

Rasmussen Reports rarely, if ever, finds the same level of pro-life support as, say, Gallup. So it is not surprising that the results of a new Rasmussen survey, released in early December, "finds that 52% of likely U. S. Voters consider themselves pro-choice on the issue of abortion, while 42% say they are pro-life," a gap of 10 points.

Gallup's latest (2015) found self-identified pro-choicers ahead by 50% to 44%—a six point difference. However, a nationwide poll taken November 8 by the Polling Company found 47% self-identified as pro-life and 47% self-identified as pro-choice. Three points to keep in mind.

First, support for abortion. As we have explained many, many times, when you combine those who say abortion should be "legal only in a few circumstances" (37%) with illegal in all circumstances (19%), you have 56% who say abortion should not be legal at all or (to quote Gallup) "should generally be rare, occurring in only a few circumstances."

Second, the morality question. According to Rasmussen, 50% believe abortion is morally wrong most of the time, up four points from April 2015. This is the highest finding since mid-2014. Thirty-four percent consider abortion morally acceptable in most instances, unchanged from the previous survey—seventeen percent are undecided.

Third, as a voting issue. In 2016, the advantage remained with the pro-life candidate. Note that in exit polls, 56% of those who voted for Trump said it was the most important factor, compared to 41% for Hillary Clinton—a huge difference and indicative of how significant the next appointments to the Supreme Court are to the pro-life community.

Here's the different way to approach the significance of the abortion issue. In May of 2016, Gallup asked, "Thinking about how the abortion issue might affect your vote for major offices, would you..."

23% of pro-lifers would vote only for a pro-lifer compared to 17% of pro-choicers who would only vote for a pro-choice candidate. Note also that only 22% of pro-lifers do not see abortion "as major issue" compared to 32% of pro-choicers.

The media collectively huffed and puffed that the election of pro-life Trump would be awful. The irony is this only helped solidify pro-life support behind Trump.

THE TERM IS ASSISTED SUICIDE, NOT "MEDICAL AID IN DYING" – BY Alex Schadenberg (9/2016)

The Colorado Secretary of State recently confirmed that enough signatures were collected for an assisted suicide question to be on the election ballot in November. The assisted suicide lobby is urging the media to replace the term assisted suicide with "medical aid in dying."

The term is assisted suicide. Assisted Suicide is understood by the public and it is used by institutions such as the American Medical Association which states in its policy on Physician –Assisted Suicide is fundamentally incompatible with the physician's role as a healer, would be difficult or impossible to control, and would pose serious risks.

(continued on page 4)

The Term is Assisted Suicide ... (cont. from page 3)

Brandon Rittiman from 9News published a clear explanatory report entitled "Why 9News uses the words assisted 'suicide'" Rittiman states: *Supporters of that law asked 9News not to refer to it assisted 'suicide.' They'd rather we call it "medical aid in dying."*

What follows is our explanation of why we are not going to grant their request. First off, 9NEWS has no position on this ballot question. Nor do we take the issue lightly. We have a duty to tell you about it in simple, direct language. That's why we're not going to stop using the word "suicide."

Supporters of the measure argue the word "suicide" is too friendly to the opposition because it may make you think of someone who ends their life for no good reason. In contrast, the proposed law does require a reason: You'd need to be diagnosed with a terminal illness to get a life-ending prescription.

But in plain English, that's still suicide.

Merriam-Webster defines suicide as, "The act or instance of taking ones' own life voluntarily and intentionally especially by a person of years of discretion and of sound mind."

The Oxford Dictionary puts it more simply, "The action of killing oneself intentionally." Dictionary.com goes with, "The intentional taking of one's own life." All three definitions have something in common: they don't depend in any way on the reason a person chooses to end their life, just that they do so on purpose. Supporters of this proposal want to change the dictionary definition of suicide. They might succeed one day.

It's our job to use plain language that's current and accurate – and that's what we'll keep doing.

New Mexico Supreme Court has decided that "aid in dying" is assisted suicide.

Please note: in changing dictionary meanings, they did that with the word "conception" which use to be the same as fertilization. It now means "implantation" which happens around a week after fertilization. That is why RTLNM uses fertilization and not the word conception.

MINNESOTA APPEALS COURT UPHELD CONVICTION FOR ASSISTED SUICIDE –Alex Schadenberg

On December 19, the Minnesota Court of Appeals upheld the conviction of the Final Exit Network in the assisted suicide of Doreen Dunn who died May 30, 2007. The jury found the Final Exit Network guilty of assisted suicide on May 14, 2015. The Network appealed the conviction.

The *La Crosse Tribune* reported, during the trial, that: Dakota County prosecutor Elizabeth Swank told jurors that the evidence showed that two members of Final Exit Network went to Dunn's home in Apple Valley to assist her suicide. They then removed the equipment that she used for suicide so that it appeared she had died of natural causes.

Dunn's husband of 29 years arrived home on May 30, 2007, to find her dead on the couch. Swank said Dunn had a blanket pulled up to her neck with her hands folded on her chest.

Swank said that despite Dunn's pain and depression, she had no life-threatening illness and her family was puzzled by her death. There were good things happening in her life: Her daughter who had been in Africa for about a year was coming home the next day and her son's fiancée was scheduled to give birth that week. However, her husband was also planning to move out, the prosecutor said.

Robert Rivas, the lawyer for the assisted suicide group, did not dispute that Jerry Dincin and Larry Egbert were present at Dunn's death, but argued that they didn't assist her suicide. The Final Exit Network has been prosecuted in several suicide cases. In Georgia, John Celmer, who was depressed after recovering from cancer, died by assisted suicide with the Final Exit Network. Celmer's widow, Susan Celmer, testified against the Final Network. Larry Egbert, the former medical director for Final Exit Network, lost his medical license in Maryland.

P.S. You wonder how many people in depression are being "used" by the assisted suicide organizations? The numbers are increasing everywhere. In Washington State there has been a 31.7% increase in 2015. Since June of 2016, 744 Canadians have die by assisted suicide. In Quebec, they are not complying with the law with more deaths than forms filed. Thus there is a question if all assisted suicides are being reported.

Hopefully, New Mexico will join Ohio and make assisted suicide a felony. In the meantime, we go from bad to worse in Holland.

DUTCH MP FLAGS NEW EXTENSION TO EUTHANASIA LAWS – BY PAUL RUSSELL

Dutch News is reporting that the media hype over the idea of euthanasia for a "completed Life" that has been going on for more than a year, now has a legislative backer in MP Pia Dijkstra. The idea was the subject of a government inquiry that followed years of lobbying by the NVVE –the Dutch euthanasia lobby – going back to 2010, and even earlier.

"A completed life" euthanasia is essentially where an elderly person (over 70-75 years of age) who has no definable terminal illness can ask to be "made dead."

The inquiry recommended that the government **not** proceed with the idea. But that hasn't stopped agitation. Dutch Health Minister Edith Schippers told the Dutch Parliament in October that she was making plans to legalize "assisted suicide for elderly people who were "suffering from life" (gotta love the euphemisms!). No such plans have emerged.

Nor has it actually held back on euthanasia deaths for such reasons. The Dutch Euthanasia Clinic which began operating in 2012 has been implicated in a number of controversial cases including a number in their first year of operation. Twenty-one of the 162 euthanasia deaths at the clinic were done based on "Tired of Life" – another name for "Completed Life".

Dijkstra's proposal looks to making euthanasia available for anyone with an 'intrinsic and consistent' wish to die and would be carried out by a 'registered end-of-life practitioner' – a doctor, nurse or psychologist, according to the Dutch News. "Anyone" –if the newspaper quote is accurate – is far broader than the health minister's suggestion, but it does fit with one of the two euthanasia lobbies' suggestions. In other words, any pretense that safeguards about confirming "untreatable and unbearable suffering" relating to a terminal illness or injury would simply evaporate. The Dutch will have achieved the ultimate end-game and logical conclusion of euthanasia and assisted suicide; anyone, anytime, any reason.

Dijkstra told *Nieuwsuur*:

There are plenty of examples of people who say, "I've had enough of life, I have children and grandchildren, they're all doing well, but I'm detached, I don't play a role in their lives any more. The only thing waiting for me is decline and I don't want to go through that."

Indeed. Aging does bring on moments of melancholy, but hardly reason for the law and the medical fraternity to propose and endorse a death wish. But that's precisely the kind of talk that both feeds off and amplifies sentiments such as those expressed by The Guardian's columnist Michele Hanson in her recent article entitled "I'd rather die than be a burden on my daughter – like many people."

Hanson opens her column with a succinct description of her thinking: **"I'm getting increasingly frightened of growing older. It would be fine if I could remain fairly healthy, ambulant and in possession of all my marbles, but not if I'm bedridden, incontinent and demented. I've been sounding out my chums to see if any of them might be willing to smother me, if I end up in such a state. Because a) I don't want to live like that, b) I don't want my daughter having to look after me, and c) I don't want to end up in a "care" home, frittering away any money I have left."**

Hanson's comments are an indictment on the UK care system for the aged and also the silence in our community that is very much the elephant in the room when it comes to general attitudes about aging and support for the elderly. But they also reflect the reasons people give for requesting assisted suicide in places such as Oregon. It's not about pain; it's about fear of loss of autonomy, of being a burden, of losing control.

Hanson talks about caring for her own mother in her declining years. Paradoxically, full of praise for the care and support they both received, Hanson repeats her mother's increasing cries of "I'm a bloody nuisance! I want to die." One would expect that both Hanson and her mother would probably qualify under the new Dutch proposals. This brings us back, inexorably, to the phenomenon of Elder Abuse and the possible relationship between subtle and even not-so-subtle abuse of an elder that encourages or pressures such people towards being made dead by euthanasia and assisted suicide.

(continued on page 5)

Dutch MP Flags.... (cont. from page 4)

People like journalist Andrew Denton have tried to dismiss this idea that elderly people could be pressured into requesting euthanasia by falling back on the “two doctors’ assessment process and the fact that “granny”, as he puts it, would still need a terminal disease under most legislative proposals raised in Australia.

But this is to deny the reality. Reality such as that experienced by Melbourne doctor Karen Hitchcock and so eloquently laid out in her Quarterly Essay contribution 2015. She recalled: **Almost every day an elderly patient will tell me –with shame – that they are a burden or a nuisance, that they’re taking up a hospital bed someone else needs. They apologize for being a pain, a drain, for wasting my valuable time, for being sick and needing help.”**

This is how it is. Life is not hermetically sealed. Denton’s version of Utopia simply does not exist. Elder Abuse points clearly not only to sinister motive and intention but also to subtle-and perhaps even unintended-pressuresuch as described above by Hitchcock.

Hanson’s observations and thoughts are not isolated either. “Every day,” in Hitchcock’s words, should surely warn us that Hanson’s meme has taken hold in our society – that providing an ‘easy-out,’ as the Dutch seem intent to do, is not the answer. It can only ever feed the monster, not subdue it.

Dijkstra’s proposal is yet to be presented to the Dutch Parliament but is online for comment. There’s a general election coming up in March 2017 and the cynic in me thinks that Dijkstra is playing politics with this issue. If so, it’s politics of posturing on a matter that would seem to have broad agreement anyway.

Which brings me to reflect on the history of the Dutch experience with killing its citizens – it fits well with saying that governments rarely run ahead of or contrary to the zeitgeist.

There was a time not so long ago when it was quite common to hear euthanasia enthusiasts defend the Dutch experience. They dismissed the cases that were pushing at the boundaries by affirming that the law works well and that these extraneous cases were few, were outside the law, and should be dealt with by the law. One rarely hears such assertions these days. It’s simply not sustainable, given the passage of the years, the mounting evidence, and the inexorable extension that logically follows the perception that there is a “right to die” or, rather, a “right –to- be-made-dead”.

The NVVE have made the case over a long period of time. They have created the ‘pressure to liberalize further’ by their campaigning. If the Dutch Parliament acts on this latest proposal it will have little if any public or political backlash. Professor Teo Boer observed: **“Once a law has been established it will create its own demand, it will create its own dynamics; which means that, in the Netherlands, at this moment, there is still an enormous pressure to liberalize further.”**

PAUL RUSSELL, FOUNDER, HOPE AUSTRALIA

Note by the editor: Maybe you will understand after reading this article why we MUST fight euthanasia and assisted suicide in this country. It is such a cruel answer to people who feel lost and not wanted.

It also addresses our attitudes about our elderly. How do we treat our parents, grandparents, etc? Do we make them feel unwanted, unneeded, a burden, a great expense? Do we communicate with them and involve them in our lives, a message that they are needed and loved? Have we in this country, set up this situation by our cold unloving actions? Each of us has to answer that question. Hopefully, we will see that all humans are wanted, needed, and should be loved. We ALL will get to this place – and we will want to be treated as the elderly in your family want to be treated. Don’t let the godless decide this moral issue. Dauneen Dolce

BABY’S FIRST HEARTBEAT IS AT 16 DAYS NOT 21 DAYS, BRITISH RESEARCH FINDS By Dave Andrusko

All through the years, through all of the fetal development presentations I’ve witnessed, read, watched, or delivered, the accepted beginning point for a baby’s first heartbeat was around day 21.

Now a new study published in eLife, a peer-reviewed open access scientific journal concludes a baby’s first heartbeat is at 16 days.

Our friends at the Society for the Protection of Unborn Children [SPUC] have

a very brief, very succinct description of what was found:

A study has demonstrated the earlier beating of the heart in mouse embryos than has previously been thought. When extrapolated to humans, the study suggests that the heart starts beating at 16 days rather than 21.

A team funded by the British Heart Foundation (BHF) at the University of Oxford published their results in the journal eLife. They found that in mice, the heart muscle started to contract as soon as it formed the cardiac crescent-at an early stage in heart development- rather than the later stage when the heart appears as a linear tube.

In mice, this crescent appears at 7.5 days after conception, which is equivalent to day 16 in an unborn baby. Scientists hope that this discovery will help in understanding and treating of congenital heart disease.

Here are some additional details about a discovery that remind us how very, very early in fetal development milestones occur.

To begin with researchers hope the work will assist both unborn babies and the rest of us.

BHF professor Paul Riley, who led the research at the University of Oxford, told Mark Prigg of *The Daily Mail*, **“By finding out how the heart first starts to beat and how problems can arise in heart development, we are one step closer to being able to prevent heart conditions from arising during pregnancy.**

“We also hope that this new research will help us to learn how the beating of new heart muscle cells might be triggered in replaced muscle after a heart attack.”

Professor Sir Nilesh Samani, Medical Director at the British Heart Foundation, which funded the research added , **“This study describes some of the very first stages in the development of a beating heart, identifies some of the key molecules involved and shows that the initiation of the beat itself has a bearing on the further development of the heart.**

“Such fundamental research is vital in understanding and ultimately preventing diseases that affect the heart.”

In its 1973 *Roe v. Wade* decision, the U. S. Supreme Court ruled that the Constitution requires states to permit abortion for any reason. The American people, the Court decided, are not allowed to legally protect human beings in utero from acts of violence that kill them (as long as the mother gives her permission).

Of course, the Constitution doesn’t say anything about abortion policy. So the Court attempted to extrapolate a constitutional right to abortion from the Due Process Clause of the Fourteenth Amendment, which was adopted in 1868 to protect the rights of former slaves. The Clause says that no state shall “deprive any person of life, liberty, or property, without due process of law.”

The Court’s claim that those words require abortion-on-demand is not very plausible. “As a constitutional argument” notes University of Pennsylvania law Professor Kermit Roosevelt (who personally supports legalized abortion), “Roe is barely coherent. The Court pulled its fundamental right to choose more or less from the constitutional ether.”

On fact of history, however, makes the Court’s decision especially egregious: *The American people adopted the Fourteenth Amendment during an era in which those same American people enacted a wave of state laws to protect the unborn children from abortion.*

Justice Harry Blackmun, who wrote the majority opinion in *Roe*, seemed to realize that this fact posed an obstacle to the conclusion the Court wanted to reach. So Blackmun, citing two since-debunked articles written by Cyril Means (a lawyer for the National Association for the Repeal of Abortion Laws), put forward Means’s novel theory that the 19th century abortion laws weren’t really about protecting the unborn. They were, instead about protecting women from a dangerous procedure –a concern that is no longer relevant, Blackmun reasoned, given the relative safety of modern abortion techniques.

Even if Blackmun and Means were right about the purpose of the abortion laws, though, it wouldn’t follow that measures to protect the unborn are impermissible or that they do not advance a compelling state interest. But Blackmun and Means demonstrably were not right.

Definitive and overwhelming historical evidence shows that 19th century state legislatures were motivated (in a large part) to prevent killing that they regarded as unjust. They had learned from scientific advancements that abortion at any stage, even before quickening, took the life of a developing member of

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Baby's First Heart Beat...*(cont. from page 5)*

the species Homosapiens, and newer abortion methods were turning the practice into a larger problem in American society. So the American Medical Association and others campaigned to replace insufficient common-law protections (or earlier statutory protections) with laws that protected all unborn children from abortion.

"Physicians have now arrived at the unanimous opinion that the fetus in utero is alive from the very moment of conception," wrote Dr. Horatio Storer, who spearheaded the AMA's effort, 1866. "{T}he willful killing of a human being at any stage of its existence is murder."

States responded by enacting laws prohibiting all elective abortions. Consider, in particular, legislation to strengthen Ohio's abortion ban that was enacted in April, 1867. That's just a few months after the same lawmakers, during the same legislative session, voted to ratify the Fourteenth Amendment. A report prepared by the Ohio Senate Committee on Criminal Abortion called abortion "child-murder" and grounded its position in the scientific fact that unborn children are human beings and the moral that intentionally killing people is wrong.

Why does all this matter? Because the Americans are the same Americans who, during the same time period, decided to adopt the Fourteenth Amendment. Then a century later, the Court ruled that the **Fourteenth Amendment somehow precludes doing what the ratifiers of the Fourteenth Amendment actually did.**

Justice William Rehnquist made this point in his dissenting opinion in *Roe*. "To reach its result," he wrote, "The Court necessarily has had to find within the scope of the Fourteenth Amendment a right that was apparently completely unknown to the drafters of the Amendment. Rehnquist continued: "There apparently was no question concerning the validity of [laws against abortion] when the Fourteenth Amendment was adopted. The only conclusion possible from this history is that the drafters did not intend to have the Fourteenth Amendment withdraw from the States the power to legislate with respect to this matter."

Indeed, in order to hold that the Fourteenth Amendment prevents Americans from protecting unborn children, as the Court ruled in *Roe*, *one has to hold that {magically?} The Fourteenth Amendment means something other than what the American people actually agreed to when they ratified the Amendment.*

That is ridiculous. The Court's claim that there is a constitutional right to abortion isn't just wrong. It is *obviously* wrong. It is nonsense. Regardless of one's position on the ethics of abortion – and regardless of one's position on whether abortion should be legal – *Roe v. Wade* is not a decision that can be defended seriously.

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VIVA LIFE! is published by the
Right To Life Committee of New Mexico,
2413 Wyoming Blvd., NE, Suite A,
Albuquerque, NM 87112-1164 • 881-4563.
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VIVA LIFE! is printed by ABQGRafix.