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

## COMING EVENTS – MARK YOUR CALENDAR

**JUNE 17, 2017 – THE RIGHT TO LIFE COMMITTEE OF NEW MEXICO GOLF TOURNAMENT – LOS ALTOS PARK – ALBUQUERQUE (SEE ARTICLE IN THIS NEWSLETTER)**

**JUNE 29 – July 1, 2017 – NATIONAL RIGHT TO LIFE CONVENTION – MILWAUKEE, WISCONSIN SOME OF THE SUBJECTS BEING COVERED: ABORTION AND BREAST CANCER, USING ADULT STEM CELLS, PRO-LIFE CONCERNS ABOUT GIRL SCOUTS, THE ART OF PRO-LIFE PERSUASION, MYTH OF THE UNWANTED CHILD SPECIAL NEEDS ADOPTION. GO TO [NRLCONVENTION.COM](http://NRLCONVENTION.COM) FOR DETAILS.**

**SEPTEMBER 7-17, 2017 – STATE FAIR IN ALBUQUERQUE**

**OCTOBER 14, 2017 – RIGHT TO LIFE OF NEW MEXICO'S STATE CONVENTION – ELEGANTE HOTEL IN ALBUQUERQUE – Morning workshops followed by a luncheon. More information will be coming in future newsletters**

## RIGHT TO LIFE COMMITTEE OF NEW MEXICO GOLF TOURNAMENT

We need to get behind this major important fund raiser. I know, I don't play golf and many of you don't either. However, we do support the cause to end the culture of death. To do that we need funds, and we are in a "slow" giving time. None-the-less, we still have the bills to meet and the money to support the coming activities listed under coming events.

So we ask you to give as much as possible – from the \$500/4-person team or 4/person scramble or the \$100 for as many holes you want to sponsor – or any donation you can give at this time.

We are hoping many of you will come out and have a fun morning at Los Altos Park in Albuquerque on June 17, 2017. To register: call 505-720-6622. Checks can be made to: RTLNCNM Ed. Trust Fund, 2413 Wyoming Blvd. NE, Ste. A, Albuquerque, NM 87112. If you have questions, please call David Wintermute at 505-720-6622 or the state office: 505-881-4563. Registration form can be found on our web site: [www.rtlnm.org](http://www.rtlnm.org)

## COOK BOOK FOR LIFE

**NEEDED: RECIPIES FROM BOTH MEN AND WOMEN FOR OUR COOK BOOK FOR LIFE. YOU CAN E-MAIL THEM TO [INFO@RTLNM.ORG](mailto:INFO@RTLNM.ORG) OR MAIL TO: RTLNCNM, 2413 WYOMING BLVD NE, SUITE A, ALBUQUERQUE, NEW MEXICO 87112.**

This cook book will be a fund raiser, so please send in your recipes for appetizers, main dishes, salads, soups, breads, beverages, and desserts as soon as possible. Call 505-881-4563 if you have questions.

## A MESSAGE FROM YOUR EDITOR

We are now entering a time of celebration with Mother's Day, Father's Day and Fourth of July – and there is much to celebrate with each of these days.

We love our mothers whether they are with us or not. We rejoice with new

mothers and those who have adopted children. We respect those mothers who gave life to their babies and made the sacrifice to give them up for those couples to adopt.

We love fathers in the same manner and know they are essential to the lives of their children.

We celebrate our country, which is great even when challenged with problems. A country that offers hope, freedom and respect for life.

However, there is another holiday that comes in the midst of these other holidays, Memorial Day. Rightly so, it is dedicated to the brave men and women who gave their lives for that hope and freedom and we must never forget that.

In the war of the womb, we must on Memorial Day include the unborn babies who were tragic victims of this war that has been going on since 1973. Our war heroes fought to protect Americans, including the unborn citizens of our nation. Yet, this war continues today, and the victims are the most innocent of all human life.

We will never have a free country, or a Blessed Country, even with the help of our service men and women, unless we have justice and fairness for our citizens, mainly, the unborn.

Let us dedicate the day to gratitude, and pledge to stop the wars and to find peace both in our land and in the wombs of mothers and the hearts of those who are supporting the culture of death. We must offer our prayers and think about our involvement to make this happen.

## WE KNOW THEY ARE KILLING CHILDREN – ALL OF US KNOW –by John Piper

One Biblical principle of justice is that the more knowledge we have that our action is wrong, the more guilty we are, and the more deserving of punishment. The point of this article is that, when it comes to abortion, we know what we are doing –all Americans know. We are killing children. Pro-Choice and Pro-Life both know this.

But before I show that, let's clarify what the Supreme Court did 44 years ago. In Roe v. Wade the Supreme Court in effect made abortion on demand untouchable by law. The way this was done was with two steps. One step was to say, laws may not prevent abortion, even during the full nine months, if the abortion is "to preserve the life or health of the mother." The other was to define "health" as "all factors – physical, emotional, psychological, familial and the woman's age – relevant to the well-being of the patient."

For 44 years this has meant that any perceived stress is a legal ground for eliminating the child. We have killed over fifty million babies. And what evidence our guilt as a nation is that we know what we are doing. Here's the evidence that we know we are killing children.

**1-ANECDOTALLY, ABORTIONISTS WILL ADMIT THEY ARE KILLING CHILDREN.**

Many simply say it is the lesser of two evils. I took an abortionist out to lunch once, prepared to give him ten reasons why the unborn are human beings. He stopped me, and said, "I know that. We are killing children." I was stunned. He said, "It's simply a matter of justice for women. It would be a greater evil to deny women the equal right of reproductive freedom."

Which means women should be no more encumbered by the consequences of an unplanned pregnancy than men. That equal freedom from the burden of bearing unwanted children is the basis for abortion that President Obama

*(continued on page 2)*

## We Know They Are Killing .... (cont. from page 1)

referred to again and again in public when he talked about equal rights for women. We know what that means. We are killing children.

### 2-STATES TREAT THE KILLING OF THE UNBORN AS A HOMICIDE

We know what we are doing because 38 states treat killing of an unborn child as a form of homicide. They have what are called "fetal homicide laws."

It is illegal to take the life of the unborn child if the mother wants the baby, but it is legal to take the life of the unborn if she doesn't. In the first case the law treats the fetus as a human with rights; in the second case the law treats the fetus as non-human with no rights.

Humanness is thus defined by the desire of the strong. Might makes right. We reject this right to define personhood in the case of Nazi anti-Semitism, Confederate race-based slavery, and Soviet Gulags. When we define the humanness of the unborn by the will of the powerful we know what we are doing.

### 3-FETAL SURGERY TREATS THE UNBORN AS CHILDREN AND PATIENTS

High risk pregnancy specialist, Dr. Steve Calvin, in a letter some years ago to the Arizona Daily Star, wrote, "There is inescapable schizophrenia in aborting a perfectly normal 22 week fetus while at the same hospital, performing intrauterine surgery on its cousin." When the unborn are wanted, they are treated as children and patients. When they are not wanted, they are not children. We know what we are doing.

### 4- BEING SMALL DOES NO DISQUALIFY PERSONHOOD

The five-foot-eight frame of a teenage son guarantees him no more right to life than the 23-inch form of his little sister in her mother's arm. Size is, we know, morally irrelevant. One inch, 23 inches, 68 inches --- does not matter. It is morally irrelevant in deciding who should be protected. We know what we are doing in killing the smallest.

### 5-NOT HAVING A DEVELOPED REASONING POWER DOES NOT DISQUALIFY PERSONHOOD.

A one-month old infant, nursing at his mother's breast, does not have reasoning powers. But only a few dare argue that infanticide is therefore acceptable. Most know better. Outside and inside the womb the infant cannot yet reason, but, in spite of that, is a human person. We know what we are doing.

### 6-BEING IN THE WOMB DOES NOT DISQUALIFY HUMAN PERSONHOOD

Location or environment does not determine a right to life. Scott Klusendorf asks, "How does a simple journey of seven inches down the birth canal suddenly transform the essential nature of the fetus from non-person to person? We know what we are doing.

### 7-BEING DEPENDENT ON MOMMY DOES NOT DISQUALIFY PERSONHOOD

We consider persons on respirators or dialysis to be human beings. The unborn cannot be disqualified from human personhood because they are dependent on their mother for food and oxygen. In fact, we operate on the exact opposite principle: The more dependent a little one is on us, the more responsibility we feel to protect him, not less. We know what we are doing.

(Those last four observations, points 4-through 7, were summed up by Scott Klusendorf under the acronym SLED : Size, Level of development, Environment, Degree of dependence --none is morally relevant for the definition of human life.)

### 8- THE GENETIC MAKEUP OF HUMANS IS UNIQUE

The genetic makeup of a human is different from all other creatures from the moment of conception. The human code is complete and unique from the start. Once that was not known. Now we know.

### 9- ALL THE ORGANS ARE PRESENT AT EIGHT WEEKS OF GESTATION

At eight weeks of gestation all the organs are present. The brain is functioning, the heart is pumping, the liver making blood cells, the kidney cleaning the fluids, the finger has a print. Yet almost all abortions happen later than this date. We know what we are doing.

### 10-WE HAVE SEEN THE PHOTOGRAPHS.

The marvel of ultrasound has given a stunning window into the womb that shows the unborn, for example, at 8 weeks sucking his thumb, recoiling from pricking, responding to sound. We know they are children.

### 11- WHEN TWO RIGHTS CONFLICT, THE HIGHER VALUE SHOULD BE

## PROTECTED

We know the principle of justice that when two legitimate rights conflict; the right that protects the higher value should prevail. We deny the right to drive at 100 miles per hour because the value of life is greater than the value of being on time or getting thrills. The right of the unborn not to be killed and the right of the woman not to be pregnant may be at odds. But they are not equal rights. Staying alive is more precious and more basic than not being pregnant. We know what we are doing when we kill a child

For Christians who believe in the Bible, we could add ten more reasons why we know what is happening in abortion, and why it is wrong.

John Piper is the Founder and Teacher, [desiringGod.org](http://desiringGod.org)

## ASSISTERS CAN HAVE THEIR OWN AGENDAS; PATIENTS CHOICE NOT ASSURED --By Margaret Dore, Esq.

People who assist a suicide or euthanasia can have their own agendas. In Oregon, there is the Thomas Middleton case, in which legal physician-assisted suicide was part of an elder abuse fraud.

Consider also People v. Stuart where an adult child killed her parent under circumstances that "dovetail[ed]" with the child's financial interests. The Court stated:

{F}inancial considerations {are} an all too common motivation for killing someone.

Doctors, too, can have an agenda, for example, to hide malpractice: Get rid of the patient, get rid

of the problem. There is also the occasional doctor who just likes to kill people. A prominent

example is Dr. Michael Swango. With his status as a physician, his supervisors were unwilling to

believe his accusers. It was many years and many victims later before he was held accountable.

One commentary states:

How was it possible for Swango to go on for so long? {Author James B.} Stewart credits Swango's

considerable gift for lying and manipulation. But the real fault rests, he argues, with medical

authorities...who, with some honorable exceptions, closed ranks in misplaced profession solidarity.

They feared publicity. They feared lawsuits, not only by patients and their families but also by

Swango. A snobbery of the professional class system asserted itself: Medical authorities tended to

believe a doctor's word over nurses' eyewitness accounts. Footnotes

See "Sawyer Arraigned on State Fraud Charges," KTVZ.co, 07/14/2011 (Middleton deeded his home to the trust and directed [Sawyer] to make it a rental until the real

estate market improved. Instead Sawyer signed documents that month to list the property for sale,

two days after Middleton died by physician-assisted suicide. The property sold in October of the year

for more than \$200,000, the documents show, and it was deposited into accounts for Sawyer's

benefit. See also: AP, "Former Bend real estate agent, husband pleads guilty," 01/15/2013: Barney Lerten,

"State dropping Tami Sawyer fraud case." DOJ says prosecution would likely not add time behind

bars,"KTVZ.com 9/1/2016.

James B. Stewart, "Blind Eye: How the Medical Establishment Let a Doctor Get Away With Murder,"

New York: Simon & Schuster.

## ALLOW SEX-SELECTIVE ABORTIONS –“ETHICS EXPERT”

Women should be allowed to have abortions simply because their unborn child is the “wrong” sex, a leading ethics expert at the British Medical Association has said. In a highly provocative interview with The Mail on Sunday, Professor Wendy Savage, an influential member of the BMA’s 18-strong medical ethics committee, called for the law banning such abortions to be scrapped. Pro-life campaigners described her demands as “utterly abhorrent”.

Her comments come amid growing concerns that British parents are seeking abortions based on the sex of babies – which has led to some NHS hospitals refusing to tell parents that information. Prof. Savage said not telling parents the sex of their babies was “outrageous”.

Conservative MP Mark Field condemned Prof. Savage’s remarks. “Suggesting that women should be able to abort babies solely because they happen to be either male or, much more usually, female, is utterly abhorrent,” he said. “To have someone like Wendy Savage with her extreme views at the heart of the BMA is a very worrying sign. The majority of people in this country, even those who support abortion, think sex-selective abortion is a step too far.”

Fears that British women are undergoing abortions based on the gender of their babies have grown since a 2014 study found that Britain had up to 4,700 fewer girls than would be statistically expected. And undercover journalists have secretly filmed doctors appearing to agree to carry out abortions for reasons of gender alone. This led the Department of Health to issue new guidance clarifying the law, which states: “Abortion on the grounds of gender is illegal.”

Globally, sex-selection abortion is thought to have led to millions of girls being aborted and both the United Nations and the World Health Organization have campaigns to stamp it out. A UN report recently stated that around 117 million women are “missing” from the expected population in Asia and Eastern Europe.

But Prof. Savage, a retired obstetrician and gynecologist who personally performed 10,000 abortions, claims it is a ‘myth’ that sex selective abortions happen in Britain or that women would choose to undergo a sex-selection abortion even if permitted to do so.

Many NHS hospitals have stopped telling parents the sex of their unborn child at their 12-week scan, instead waiting to 20 weeks, an “some hospitals have a policy of not telling patients the sex of their baby altogether,” according to the NHS Choices website. The 2014 study of census information suggested sex-selective abortions may be a particular issue in Britain’s South Asian communities, where there is a cultural preference for boys.

“Because of this sort of anxiety some places won’t tell the woman the sex of the fetus, which is outrageous,” Savage commented. “it’s her body and her fetus, so she should have that information...if a woman does not want to have a fetus who is one sex or the other, forcing her [to go through with the pregnancy] is not going to be good for the eventual child, and it’s not going to be good for [the mother’s mental health].”

She previously signed a letter claiming sex-selective abortion is “not gender discrimination” as that term “applies only to living people”. Prof. Savage is behind a bid to convince BMA members to back a policy calling for abortion to be removed from criminal statute, submitting a successful motion at last year’s conference seeking a policy on discrimination. The BMA says it has no policy on the decriminalization of abortion.

From the Daily Mail – March 18, 2017

## MORE GOOD NEWS FROM THE TRUMP ADMINISTRATION

### TRUMP ADMINISTRATION REDIRECTS U. S. FUNDING FROM UNITED NATIONS POPULATION FUND (UNFPA)

The Trump Administration reinstated a policy on April 3, 2017 directing United States foreign assistance dollars away from the United Nations Population Fund (UNFPA) on the basis that its activities in China are complicit with the nation’s coercive population control program, the implementation of which includes forced abortion and involuntary sterilization. United States funding will be directed instead to other family planning and health programs not involved in China’s population control program.

“We congratulate President Trump and his administration for making it

abundantly clear the United States will not support a United Nations agency that cooperates in China’s brutally repressive population control policies,” said National Right to Life President Carol Tobias. “I heartily applaud what we at National Right to Life are seeing from this pro-life administration.”

The State Department memorandum issues on April 3 determined that the UNFPA was in violation of the Kemp-Kasten anti-coercion law. The amendment prohibits giving U. S. “population assistance” funds to “any organization or program which, as determined by the President of the United States, supports or participates in the management of a program of coercive abortion or involuntary sterilization.” As the memo states:

The Chinese Government’s Population and Family Planning Law, even as amended in 2015, and

related regulations and practices at the central and provincial levels, clearly constitute a “program of

coercive abortion or involuntary sterilization” and are an integral part of the comprehensive

population-control program the Chinese Government advances. While there is no evidence that

UNFPA engages in coercive abortions or involuntary sterilizations in China, the agency continues to

partner with the [National Health and Family Planning Commission] on family planning, and thus can

be found to support, or participate in the management of China’s coercive policies for purposes of

the Kemp-Kasten Amendment.

The Kemp-Kasten Amendment was originally enacted in 1985 in response to the UNFPA’s extensive involvement in China’s coercive program. In 1985, the Reagan Administration determined that UNFPA was in violation of the law. That determination was challenged in a federal lawsuit by the Population Institute, a U. S. advocacy group receiving substantial funding from the UNFPA. In 1986, the U. S. Court of Appeals from the District of Columbia upheld the cutoff of funding. In a ruling written for a unanimous three-judge panel, Judge Abner Mikva upheld the Reagan Administration determination that “the UNFPA’s activities in China aid the aspects of China’s program that Congress condemned.”

Under the administrations of President Clinton and President Obama, the Kemp-Kasten anti-coercion law was essentially not enforced. Nevertheless, the law has been renewed each year by Congress.

During fiscal year 2016, the Obama Administration gave \$67.88 million to UNFPA.

“In China, government officials continue to subject women and their families to crushing fines and employment sanctions, and even destroy their homes, for becoming pregnant without government permission,” said National Right to Life Legislative Director Jennifer Popik, J. D. “U. S. law prohibits funding any agency that in any way participates in such a coercive program.”

For decades, top UNFPA officials have vigorously defended China’s program against its critics, and have held China’s program up as a model for other developing nations. For example, then-UNFPA Executive Director Nafis Sadik told a congressional briefing on May 24, 1989, “The UNFPA firmly believes, and so does the government of the Peoples Republic of China, that their program is a totally voluntary program.”

The move to redirect funds away from UNFPA should be seen in light of the president’s actions in January to reinstate the Mexico City Policy. That Policy, which had been in place in Republican administrations since 1984, when it was announced by authority of President Reagan at an international population-control conference in Mexico City. Under that policy, 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), not to lobby to change the abortion laws of host countries, or otherwise “actively promote abortion as a method of family planning.”

“Over his eight years in office, President Obama advanced a pro-abortion agenda with executive orders and regulation that were dangerous to the lives of many unborn children,” said Popik. “This latest action by the Trump Administration helps keep the U. S. out of the business of international

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**abortion advocacy.”**

National Right to Life takes no position on federal funding on contraceptive services. Nor does National Right to Life take any position on what the funding level for international population assistance

programs should be – so long as President Trump’s “Mexico City Policy” and the Kemp-Kasten Amendment remain in effect.

**Article from National Right to Life News**

## **PRESIDENT DONALD TRUMP PLACES A CONSTITUTIONALIST PRO-LIFE JUDGE ON THE U. S. SUPREME COURT**

We now have a pro-life Supreme Court Justice being appointed by President Trump and his name is Justice Neil Gorsuch. There are more good judicial appointments coming. On the federal appeals courts, which are one step below the U. S. Supreme Court, there are 20 vacancies. There is one nomination in for Amul R. Thapar, a friend of Senate Majority Leader Mitch McConnell, which leaves the nomination of 19 more candidates.

These nominations should be coming soon. There are roughly 100 vacancies in the district courts, of which 49 are considered judicial emergencies based on how many court filings are in the district and how long the seat has been open. The impact the Trump Administration will have on our court system now and in the future is great. The opportunity is great. President Obama only had about half the number of vacancies to fill.

These courts affect state pro-life laws, which are many, since the majority of the states and legislatures, are being held by pro-life Republicans. This makes the picture look very good for the pro-life cause.

**Information came from the Associate Press**

## **THE DANGEROUSLY CONTAGIOUS EFFECTS OF ASSISTED-SUICIDE LAWS – By Aaron Kheriaty**

The debate over doctor-assisted suicide is often framed as an issue of personal autonomy and privacy. Proponents argue that assisted suicide should be legalized because it affects only those individuals who – assuming they are of sound mind – are making a rational and deliberate choice to end their lives. But presenting the issue in this way ignores the wider social consequences.

What if it turns out that the individuals who make this choice in fact are influencing the actions of those who follow? Ironically, on the same day that Gov. Jerry Brown (D) signed the bill to legalize physician-assisted suicide in California, an important study was published by British scholars David Jones and David Paton demonstrating that legalizing assisted suicide in other states has led to a rise in overall suicide rates – assisted and unassisted -- in those states. The study’s key findings show that, after controlling for demographic and socioeconomic factors and other state-specific issues, physician-assisted suicide is associated with 6.3 percent increase in total suicide rates. These effects are greater for individuals older than 65 (for whom the associated increase was 14.5 percent). The results should not surprise anyone familiar with the literature on the social contagion effects of suicidal behavior. You don’t discourage suicide by assisting suicide.

Consider what social scientists call the Werther effect – the fact that publicized cases of suicide can produce clusters of copycat cases, often disproportionately affecting young people, who frequently use the same method as the original case. The name comes from Goethe’s 18<sup>th</sup>-century novel “The Sorrows of Young Werther” in which the protagonist, thwarted in his romantic pursuits, takes his own life with a pistol. After the publication of this immensely popular book, authorities in Germany noted a rash of suicides among young men using the same means. The finding has been replicated many times since in rigorous epidemiological studies, including research demonstrating this effect following cases of doctor-assisted suicide.

Because this phenomenon is well validated, the U. S. Centers for Disease Control and Prevention, the World Health Organization and the U. S. surgeon general have published strict journalistic guidelines for reporting on suicides to minimize this effect. It is demoralizing to note that these guidelines were widely ignored in reporting of recent instances of assisted suicide with the subject’s

decision to end his or her life frequently presented in the media as inspiring and even heroic.

A related phenomenon influences suicide trends in the opposite direction, however: the so-called Papageno effect suggests that coverage of people with suicidal ideation who do not attempt suicide but instead find strategies that help them to cope with adversity is associated with decreased suicide rates. The name comes from a lovesick character in Mozart’s opera “The Magic Flute,” whose planned suicide is averted by three child spirits who remind him of alternatives to death.

The case of Valentina Maureira, a 14-year old Chilean girl who made YouTube video begging her government for assisted suicide, illustrates the Werther and Papageno effects. Maureira admitted that the idea to end her life began after she heard about the case of Brittany Maynard, a 29-year old woman with terminal brain cancer who campaigned prominently for the right to assisted suicide before ending her life. But Maureira changed her mind after meeting another young person also suffering from the same disease, cystic fibrosis, who conveyed a message of hope and encouraged her to persevere in the face of adversity. With our laws, we can encourage vulnerable individuals in one of these two directions: the path of Werther or the path of Papageno.

Aside from publicized cases, there is evidence that suicidal behavior tends to spread person to person through social networks, up to three “degrees of separation” away. So my decision to take my own life would affect not just my friends’ risk of doing the same, but even my friends’ friends’ friends. No person is an island.

Finally, it is widely acknowledged that the law is a teacher: Laws shape the ethos of a culture by affecting cultural attitudes toward certain behaviors and influencing moral norms. Laws permitting physician-assisted suicide send a message that, under especially difficult circumstances, some lives are not worth living – and that suicide is a reasonable or appropriate way out. This is a message that will be heard not just by those with a terminal illness but also by anyone tempted to think he or she cannot go on any longer.

Debates about physician-assisted suicide raise broad questions about our societal attitudes toward suicide. Recent research findings on suicide rates press the question: **What sort of society do we want to become?** Suicide is already a public health crisis. Do we want to legalize a practice that will worsen this crisis?

***This article comes from Patients Rights Action Fund (PRAF) – and is written by Aaron Kheriaty who is an associate professor and director of the medical ethics program at the University of California at Irvine School of Medicine.***

### **MORE INFORMATION PROVIDED BY PATIENTS RIGHTS ACTION FUND PRO-PATIENT ASSISTED SUICIDE DOCS ADMIT BOTCHED ASSISTED SUICIDES**

With the increased price of Seconal, the standard barbiturate drug used in assisted suicides, proponents of assisted suicide have been recklessly experimenting on actual patients with alternatives to achieve death. Their goal: make suicide even cheaper than it already is. Kaiser Health News reports that the first drug cocktail they tried, “turned out to be too harsh, burning patients’ mouths and throats, causing some to scream in pain ... The second drug mis- used 67 times, has led to deaths that stretched out hours in some patients – and up to 31 hours in one case.” One of the pro-suicide doctors involved in this trial-and-error methodology, Dr. Carol Parrot, said “Patients and families are told to expect sleep within 10 minutes and death within four hours. When it takes longer, family members get worried, even distressed.” And they should be! A study published in the New England Journal of Medicine reports that 1 in 5 Dutch patients attempting to use the standard barbiturates to kill themselves experienced complications including vomiting, inability to finish the medication, longer than expected time to die, failure to induce coma, and awakening from coma, i.e., they didn’t die. These new, haphazard attempts to replace barbiturates with something less expensive have apparently proven no less clinically problematic.

This revealing report credibly and totally undermines the main talking point of proponents that assisted suicide gives the patient a “peaceful” death.

### **SIX SUICIDE BILLS ALREADY DEAD IN 2017:**

Bills to legalize assisted suicide in New Mexico, Indiana, Mississippi, Wyoming, Utah and Tennessee have already been defeated early in 2017. Most bills were withdrawn, or died in committees. The New Mexico bill was defeated

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## The Dangerously Contagious.... (cont. from page 4)

by a 22-20 Senate floor vote in a particularly hard-fought battle.

A few states which have legalized assisted suicide are starting to push back. Washington State is considering legislation to strengthen informed consent requirements for requests for lethal drugs. Oklahoma is pursuing a bill which would prohibit medical professionals from falsifying death certificates by claiming that the underlying illness, rather than assisted suicide drugs, was the cause of a patient's death. In other actions, a newly-enacted Ohio law prohibits assisted suicide. A New York bill would prohibit insurance coverage for assisted suicide drugs.

**The Right to Life Committee of New Mexico is putting forth an educational program to reach the people of New Mexico, to prepare for the reintroduction of assisted suicide in the 2020 legislature.**

### THE DEMOCRATIC PARTY HAS GONE OVER THE CLIFF- IT'S COMMITTING SUICIDE

On Friday, April 21, 2017, Democratic National Committee Chairman Tom Perez said that the DNC would only support candidates who back an abortion agenda calling for unrestricted abortion for any reason – including late term abortions after 20 weeks – and taxpayer funding of abortion. He called the support for abortion by Democratic candidates “not negotiable,” and said it “should not change city by city or state by state.”

### PLANNED PARENTHOOD DOC WHO WANTED LAMBORGHINI FOR SELLING ABORTED

#### BABIES CAUGHT SELLING BABY PARTS AGAIN

Mary Gatter, the Planned Parenthood senior executive who infamously was caught on tape saying “I want a Lamborghini” while discussing and arranging the sale of body parts of aborted babies has been caught again.

As LifeNews reported in 2015, Mary Gatter, the Medical director at Planned Parenthood Pasadena and San Gabriel Valley in California, was caught selling aborted baby body parts to undercover investigators posing as officials with a biotech company that acts as a middleman to sell aborted baby body parts to universities and other places that conduct such research.

In the prior video, Gatter discusses the pricing of aborted baby body parts baby's liver, head or heart are negotiable. She also tells the officials that she could talk with Planned Parenthood abortion practitioners to potentially alter the abortion procedure to kill the baby in a way that would best preserve those body parts after the unborn child is killed in the abortion.

In this new video, Gatter is again caught haggling over per-specimen pricing for livers, lungs, and brains, even while insisting the purchaser must do all the work to harvest.

The video is the second of a never-before – seen batch of undercover footage being released by The Center of Medical Progress.

At a Planned Parenthood conference evening reception, CMP investigators posing as buyers from a biotech company are introduced to Dr. Gatter for the first time by Dr. Deborah Nucatola, Planned Parenthood Federation of America's Senior Director of Medical Services. “I want you to meet Mary Gatter,” say Dr. Nucatola, Before Dr. Gatter steps forward.

Gatter was for many years the Medical Director of Planned Parenthood Los Angeles, before moving to the same position at the Pasadena affiliate, and then being elected President of Planned Parenthood Federation of America's Medical Director's Council. As Medical Director at PPLA, Gatter oversaw the affiliate's partnership with Novogenix Laboratories, LLC, a local for-profit fetal organ and tissue harvesting company.

“I did it in LA, I'm committed to it, I think it's a great idea,” say Gatter to the purported body parts buyers. Discussing the number of abortions at her Pasadena clinic, Gatter asks, “What kind of volume do you need and what gestational ages?” During the conversation, Gatter advises, “You know, you have to pay a little money to use the space.” After asking for a ballpark figure, the buyer observes, “Most people now seem to be doing per specimen.” “Per Specimen?” Like \$75 a specimen?” Gatter replies. After the buyer asks for clarification, Gatter repeats, “\$75 a specimen, or \$50 a specimen?” The buyer reply's, “What we've been quoting is \$50 per specimen. I think some people are

doing more, some slightly less.”

Gatter then comments, “Yeah, \$50's on the low end, \$50 {per specimen} was like 12 years ago”. The buyer then explains, “What we like about per-specimen is that way we're not paying for [fetal] material that we can't use, you know?” Gatter nods, saying, “Yeah, yeah, yeah.”

Federal Law permits reimbursement for specified costs in a fetal organ or tissue donation, but prohibits the purchase and sale of organs and tissues themselves (42 U. S. C. 289g-2).

The buyer continues, “If we can get a liver, a lung, and you know, a brain- “before Gatter interjects, “But you would show up to do this? You would send somebody,” to which the buyer answers affirmatively. Gatter concludes the conversation saying, “Yeah I'd be willing, give me a call.”

According to contracts and invoices, the real-life fetal organ and tissue wholesaler companies Novogenix, StemExpress, and Advanced Bioscience Resources all made monthly payments to Planned Parenthood based on the numbered resaleable fetal specimens the wholesalers' workers could harvest inside the abortion clinics. Planned Parenthood told Congressional investigators it kept no contemporaneous records of actual costs for reimbursement under the law.

The Novogenix contract promises Planned Parenthood Los Angeles \$45 “per donated specimen.” Planned Parenthood Los Angeles does over 15,000 abortions every year, but has never publicly admitted how much money they received total under their contract with Novogenix. In December 2016, the Senate Judiciary Committee and the House Select Investigative Panel both referred Planned Parenthood Los Angeles and Novogenix to the FBI and U.S. Department of Justice for further investigation and criminal prosecution.

CMP project lead David Daleiden notes, “The fact that Novogenix, StemExpress, and ABR stationed their own workers inside Planned Parenthood abortion clinics to perform the harvesting, packaging, and transport of aborted baby body parts demonstrates that Planned Parenthood had no reimbursable costs under the law. The Volume-based sums that Planned Parenthood charged these businesses for baby parts are criminal trafficking and profiteering in fetal body parts. The U. S. Department of Justice should take heed of the Congressional investigations' criminal referrals and prosecute Planned Parenthood to the full extent of the law, and taxpayers must stop being forced to subsidize Planned Parenthood's criminal abortion empire.”

**Article from LifeNews – Steven Ertelt – April 26, 2017**

### THE UGLY AND THE BEAUTIFUL

#### THE UGLY: PRO-ABORTION ATTORNEY TELLS CONGRESS A DISMEMBERMENT ABORTION IS A “HUMANE PROCEDURE” From National RTL

During a Congressional hearing today, a prominent pro-abortion attorney told Congress she thinks dismemberment abortions are “humane” procedures.

In a multi-committee investigation of Planned Parenthood abortion business after a series of nine videos exposed how it is potentially illegally selling aborted babies and profiting from the sales. The committee heard from Priscilla Smith, an ardent abortion advocate who is the director of Yale Law Schools's Program for the Study of Reproductive Justice. But Smith is better-known as the attorney who defended partial-birth abortions at the Supreme Court, which eventually upheld a ban on the gruesome abortion procedure.

During questions from members of the panel, Committee Chairman Bob Goodlatte read to Smith a portion of the Supreme Court decision describing a dismemberment abortion procedure during which the limbs of the unborn baby are torn off and the baby is dismembered and pulled apart. An image of the steps of the abortion procedure appears below:

After reading the description of the abortion procedure, Congressman Goodlatte asked Smith, “Do you believe this is a humane way to die?” In the video, Smith hems and haws about whether the unborn baby is viable, but Goodlatte interjects that the Supreme Court discussed this abortion procedure happened to a baby who was eventually born alive but missing an arm because of an unsuccessful abortion. Eventually, Smith finally answered: “Yes, a D & E procedure is a very humane procedure.”

**THE BEAUTIFUL: TERMINALLY ILL MOTHER WAS NEVER SUPPOSED TO**

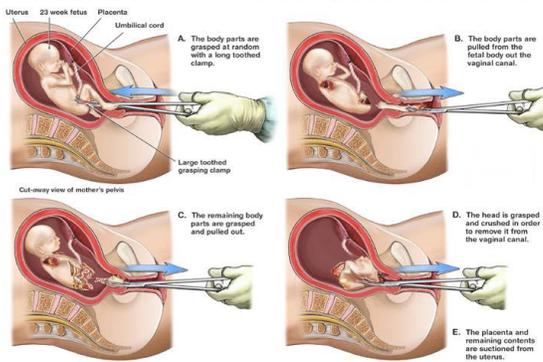
(continued on page 6)

RETURN SERVICE REQUESTED



**The Ugly and The Beautiful....** (cont. from page 5)

Dilation and Evacuation Abortion (D&E) of a 23 Week Old Fetus



**SEE HER SON'S 1<sup>ST</sup> BIRTHDAY, MUST A MIRACLE HAPPENED – BY Sarah Zagorski**

21-year old Yesenia Ruiz-Rojo was four months pregnant when she arrived at Brook Army Medical Center in Texas in September. She had also just discovered she was facing aggressive live cancer; and doctors gave Ruiz-Rojo the grim news that she had only four to six months to live. In January she gave birth to Luke in January and a year later miraculously later she celebrated her son's first birthday. Ruiz-Rojo said that she didn't focus too much on her cancer during her pregnancy because she wanted her baby to survive. She said, "The only thing I could think

about was my baby. Just have the baby, I told myself, and the rest will figure itself out."

Lt. Col. (Dr.) Raul Palacios said that the odds were stacked against Ruiz-Rojo because case reports show that women with the type of aggressive cancer don't live long. There was nothing in conventional medicine. But the doctors did not give up and experts from more than a dozen specialties met to explore treatment. It was decided to use a therapy called selective internal radiation which places tiny radioactive particles in the patients artery that feeds the liver tumor. This would offer the least risk to mother and baby. The treatment took six weeks. Her being alive at this time, Dr. Palacios said, "To me it is nothing short of a miracle."

Unfortunately, Yesenia's health deteriorated to the point where she was unable to care for her son. Amazingly, Ruiz-Rojo is doing better and is caring for Luke but does not change his diapers. "It makes me sad that there are moms who take this gift for granted."

Unfortunately, Yesenia died in May after her son's first birthday. It was near Mother's Day.

**This is a beautiful Mothers Day Story -**

*Twenty-Five Alive Pledge 2017*

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I pledge: my tax-deductible donation (\$5 - \$25 or more) \$ \_\_\_\_\_ Monthly

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\$ \_\_\_\_\_ Every 3 Months. A One Time Pledge or Donation: \$ \_\_\_\_\_

**Please return to:** RTLCSNM, 2413 Wyoming Blvd Ste A, Albuquerque, NM 87112 by Dec. 10, 2016

**MEMBERSHIP APPLICATION**

I understand that the Right To Life Committee of New Mexico (RTLCSNM) is a non-sectarian, non-profit organization dedicated to the right to life of all innocent human beings from fertilization to natural death; that this organization takes a stand only on those issues that are directly related to abortion, infanticide and euthanasia.

I support the goals of RTLCSNM, including a Human Life Amendment to the U.S. Constitution, and hereby make application for membership (renewal) as follows:

- Individual — \$25.00
- Corporate — \$45.00 - for business organizations
- Family — \$35.00
- Life Membership — \$500.00

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