



Footprints

THE NEWSLETTER OF Right To Life New Zealand

Defending life from conception to natural death

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ABORTION STATISTICS - 2010 OUR NATION'S LOSS



The abortion statistics for 2010 reflect the continuing saga of the exploitation and abandonment of women and the destruction of innocent human life.

There were 16,630 abortions in 2010, 920 fewer than the 17,550 abortions in 2009. Right to Life is pleased that there are probably nearly 1000 babies alive today who would have been killed if there had been no reduction in the number of abortions. The continued reduction in the abortion rate gives hope that New Zealand is rejecting a culture of death. In 2009 there were 62,543 live births and in 2010, 63,900, an increase of 1,357 births.

Abortion violates the right to life of the child. It not only destroys the life of an innocent and defenceless child, but it may cause grief, sorrow and serious psychological damage to the mother, the second victim of abortion. It is always wrong to kill the innocent. The loss of 16,630 children is a tragic loss for our nation, as one that kills its own children does not have a future.

Right to Life applauds those courageous and heroic women who chose life for their baby. These women deserve the loving support of the community. Right to Life has compassion for the estimated 10,000 women who were coerced into having an abortion against their will. Coercion by family, friends and frequently by the father of the child, is very common. Those who coerce refuse to accept any responsibility for the child or the mother.

The key 2010 Abortion Facts:

- **The general abortion rate was 18.1 abortions per 1,000 women aged 15-44 years down from 19.2 per 1,000 in 2009.**
- **Women aged 20-24 years had the highest abortion rate [33 abortions per 1,000 women aged 20-24 years]**
- **The median age of women having an abortion was 25 years.**
- **Most abortions [61 percent] were a woman's first abortion.**
- **56 percent of abortions were performed before the 10th week.**
- **6.8 percent ie.1,139 were medical abortions performed with Mifegyne RU486.**

Right to Life questions the lawfulness of the 98 per cent of abortions that are authorised on the grounds of mental health. In 2010, 16,295 abortions were authorised on the grounds of mental health. Dr Christine Forster, a previous chairperson of the Abortion Supervisory Committee stated publicly in November 2002, referring to the 98 per cent of abortions authorised on mental health grounds, that she 'did not believe that all these women were in serious danger and that doctors were using mental health to provide abortion on demand.' A total of 206 abortions in 2010 were authorised on the grounds of the child being handicapped.

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Editor: Ken Orr

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 Right to Life New Zealand Inc.
 P.O. Box 668,
 CHRISTCHURCH 8140
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 Email: admin@righttolife.org.nz
 Web Page: www.righttolife.org.nz

*“Woe to you if you do not defend life”
 John Paul II*

**Crimes Act Amendment –
 Crime to Fail to Report
 Child Abuse**



Nia Glassie

Parliament is to be congratulated for passing the Crimes Amendment Bill [No 2] on 15 September 2011, which now makes it a criminal offence to fail to report child abuse. The Bill creates a new offence of failing to take reasonable steps to protect a child from the risk of death, grievous bodily harm or sexual assault. An offender may be sentenced to up to 10 years in prison.

It is pleasing that the government bill had the full support of the government members and the Labour caucus. The legislation is timely as New Zealand has one of the highest rates of child abuse in the OECD. All New Zealanders will welcome this important legislation to protect our most vulnerable children. We remember those poor children who suffered appalling abuse before they were killed including; Lilly Bing, Nia Glassie, Mikara Riti and the three month old twins Chris and Cru Kahui. Every year twelve children die from appalling physical abuse. Their names are engraved on our minds. May we never forget these beautiful innocent children.

New Zealanders are deeply ashamed of our child abuse record. It is a terrible burden on the conscience of the nation. As a society we experience no difficulty in recognising child abuse and responding with horror, sorrow, grief and a determination to stop the abuse of the innocent and defenceless children.

Why is it then that as a nation that is implacably opposed to child abuse we allow each day in this country the equivalent of two classrooms of children to be violently dismembered and killed in abortions in our Hospitals, sanctioned and funded by the government. This violence is also directed against the mother.

This is the ultimate in child abuse, the unborn child terrified, its mouth open in a silent scream, heart beating furiously as it frantically endeavours to avoid the suction tube of the abortionist who is paid by the State and is determined to terminate the life of the child.

We all have a duty to defend life, it is always wrong to kill the innocent. As a nation we are suffering from a crippling and destructive blindness, a refusal to acknowledge the truth that we have a duty to protect the lives of all children, born and unborn, they are all members of our human family and God’s precious children. When will Parliament act to protect our unborn?

The new law requires that citizens have a duty to report cases of child abuse, to whom do we report the violent abuse of children in the womb?

Right to Life has written to the sponsor of the White Ribbon Day, the Family Commission asking if they accept abortion as being violence against women.

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The total of repeat abortions was 6407, which was 39 per cent of the total. The number of women having a second abortion was 4427 women, while 1332 had their third, 446 their fourth, 136 their fifth, 47 their sixth, 10 their seventh and nine their eighth or more.

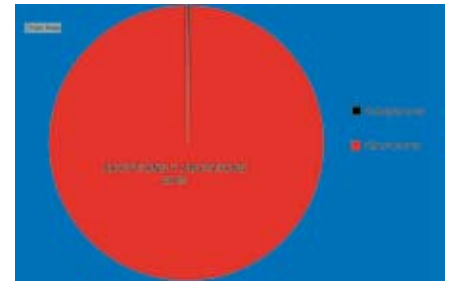
This was an increase of 64 on the 142 babies killed in 2009 for fetal abnormality. It is believed that the increase was due to the antenatal screening introduced in February 2010 by the Ministry of Health believed by Right to Life for the purpose of reducing the number of babies born with Down syndrome. Right to Life believes that this is a crime against humanity and is the subject of a complaint to the International Court in The Hague.

There were 65 abortions after 20 weeks gestation of the child and 20 of these abortions killed unborn children of 25 weeks or more gestation. It is disappointing that the Abortion Supervisory Committee refuse to compile statistics for the gestational ages of those babies who were more than 25 weeks gestation. It is known from previous year's statistics that babies were being killed up to 32 weeks gestation. It is presumed that these abortions were for foetal abnormality such as Down syndrome and Spina Bifida, authorised on the grounds of mental health. Right to Life believes that these abortions discriminate against those babies believed to have a disability. This is eugenics where only the healthy are allowed to be born. Since 2009 the Committee has not been recording the alleged foetal abnormality of these babies. Right to Life believes this statistic needs to be recorded.

Right to Life has written to the Minister of Health, the Hon Tony Ryall, requesting, that a study be instituted to establish the physical and psychological damage done to women resulting from repeat abortions in New Zealand.

The ratio of Adopted to Aborted Babies for New Zealand, is less than one quarter of 1%. Why?

It is a national tragedy that many of the 16,630 unborn babies destroyed in 2010 were not made available for adoption. In 1969 there were 2500 adoptions in New Zealand. In 2010 there were only 40 babies adopted. This means that the ratio of adopted to aborted is less than one quarter of one percent. There are thousands of families that would love to adopt a baby and provide a loving home. Why is the government actively promoting abortion over adoption? Why are abortion counsellors not promoting adoption?



Society Report

Right to Life Needs More Members

Our Society needs more members to replace those who are very aged or are deceased. The best recruiters are our members. Please ask your family and friends to join the movement to protect the Right to life of every person from conception to natural death. With the growing threat of euthanasia the need is urgent. The life you save may be your own.

Readers are encouraged to visit Right to Life's website www.righttolife.org.nz for further information on current life issues also, www.savingdowns.com which is the website for Conservationists for Down syndrome. Right to Life issued a number of media releases including on; the 2010 abortion statistics; the refusal of candidates for parliament refusing to answer questions on important issues concerning abortion; embryonic stem cell research; euthanasia; the duty of electors to vote only for candidates in the



general election who were opposed to the intrinsic evils of abortion and euthanasia; the decision of the New Zealand Medical Council to withdraw its appeal to the Court of Appeal on the judgement of the High Court, to uphold the conscience rights of doctors to refuse to refer a woman to another doctor to facilitate an abortion and on the elimination of violence against women. Right to Life has made a submission to the Commission for the family expressing concern about the violence of abortion against mothers and their unborn babies and the need for a campaign to promote adoption. The Society has also written again to the Abortion Supervisory Committee seeking its support for the study of Professor David Fergusson in 20026 which found that abortion resulted in serious mental health problems for women who had an abortion.

“The more abortion has become entrenched, the more difficult it has become for women to resist the pressure to avail themselves of it.”

— MELINDA TANKARD REIST, *Giving Sorrow Words*



The Supreme Court have advised that our appeal of parts of the judgment of the Court of Appeal have been declined. The Supreme Court delivered its decision on 26 August 2011. The Court has set down the 13 March 2012, as the date for the hearing before the five Justices of the Supreme Court. Peter McKenzie QC and Dr Ian Bassett will present submissions for Right to Life and barristers of the Crown Law Office will represent the Abortion Supervisory Committee. These proceedings commenced in May 2005 in the High Court. The proceedings then went to the Court of Appeal. It is a matter of great disappointment that the Supreme Court has seen fit to dismiss our appeal on the issue of the legal status of the unborn child as a human being with a right to life. Stating,

"It is plain that the legislation was based on the premise of the "born alive rule", in the face of which the proposed arguments are untenable. Likewise the proposed argument concerning independence of counselling cannot succeed for the reasons given by the Court of Appeal."

The approved grounds on which our case may proceed to the Supreme Court are;

(a) Whether the respondent Committee's functions under ss 14(1)(a), (i) and (k) and 36 of the Contraception, Sterilisation and Abortion Act 1977 empower it to review or scrutinise the decisions of certifying consultants and form its own view about the lawfulness of their decisions to the extent necessary to perform its functions.

(b) If so, whether there is any evidential foundation for the High Court's finding that "the approval rates [for abortions] seems remarkably high, bearing in mind that under s 187(A) [of the Crimes Act 1961] the consultants must form a good faith opinion that continuance of the pregnancy would result in serious danger to the mother's health".

(c) Whether the High Court has jurisdiction to consider whether certifying consultants are obeying the "abortion law" (as defined) and, if so, whether there is any evidential foundation for the High Court's finding that "there is reason to doubt the lawfulness of many abortions".

Abortion Supervisory Committee Upholds Right of Conscience

Right to Life commends the Abortion Supervisory Committee for promoting protection for clinicians who refuse to perform or assist in abortions on the grounds of conscience. The Committee has recently written to all of the district health boards in New Zealand reminding them of their duty to allow doctors, nurses and others to refuse to perform abortions or assist in them when it is contrary to their conscience. Right to Life believes that there may be many nurses working in Public Hospitals that provide abortions, who are assisting in abortions against their conscience and who are unaware of the legal protection provided for them.

Parliament provided protection for the conscience of clinicians when passing the Contraception, Sterilisation and Abortion Act in 1977. Section 46 reads,

Conscientious Objection- [1] Notwithstanding anything in any other enactment, or any rule of law, or the terms of an oath or of any contract [whether of employment or otherwise], no registered medical practitioner, registered nurse, or other person shall be under any obligation-[a] To perform or assist in the performance of an abortion or any operation undertaken or to be undertaken for the purpose of rendering the patient sterile:

[b] To fit or assist in the fitting, or supply or administer or assist in the supply or administering, of any contraceptive, or to offer or give any advice relating to contraception,- The section goes on to state that no

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person shall be denied employment, accommodation, goods or any other privilege or benefit merely because the employee refuses on conscience to perform any act referred to in this section.

Recently a technician employed by the Canterbury District Health Board approached Right to Life seeking help. She had been summoned by her employer to a disciplinary meeting and threatened with dismissal if she did not perform the duty of assisting in preparing instruments to be used for abortions. The technician refused to perform the duty as she was totally opposed to the killing of unborn children. Right to Life advised the complainant that she had protection under section 46 of the Act. Her employer subsequently withdrew the threat of dismissal and respected her right to refuse the duty on conscience grounds. Right to Life brought this distressing incident to the attention of the Committee, requesting that the Committee take action by writing to all District Health Boards, which they subsequently did.

Recently a technician employed by the Canterbury District Health Board approached Right to Life seeking help. She had been summoned by her employer to a disciplinary meeting and threatened with dismissal if she did not perform the duty of assisting in preparing instruments to be used for abortions.

Right to Life contends that all District Health Boards have a duty, to inform all employees in writing at the commencement of their service, of their rights provided by section 46.

Legal protection for our right not to be involved in the killing of unborn children must be valued and protected. In the United States, Europe and at the United Nations there is a concerted attack on the right of clinicians to refuse on conscience grounds to perform or assist in abortions. Our conscience is the voice of God, we have a duty to avoid evil and to do good. It is always wrong to kill the innocent. If all Doctors acted on an informed conscience there would be no abortions in New Zealand.

Further Staff Refuse to Assist in the Killing of Unborn Children



Two further technicians have advised the management at the Christchurch Public Hospital that they are no longer prepared to assist in the killing of unborn children. It was their duty to prepare instruments used for terminating the lives of unborn children. This courageous action follows the recent refusal of a technician at the Christchurch Public Hospital to assist in preparing instruments for the performance of abortions.

These three technicians are opposed to the killing of the innocent and refuse to assist in the killing of the unborn, on the grounds that it is contrary to their conscience. They have only recently learnt of their right to refuse to assist in abortions by the example of their colleague.

Right to Life commends these courageous women for refusing to assist in abortions and calls upon doctors, nurses and other staff in the public health service to follow their informed conscience and refuse to perform or assist in the killing of the unborn. They should then seek the protection provided for their conscience by Parliament in section 46 of the Contraception Sterilisation and Abortion Act.

Public Hospitals should be places that promote a culture of life, providing healing and protection for human life from conception to natural death. The performance of abortions is not a health service, it is a cancer in the health service that if not removed, will ultimately destroy our public health service. Our women and their unborn deserve better than death for their child provided as a "service".

The courageous action taken by these three technicians raises serious questions about the protection of the statutory conscience rights of employees of the public health service. It is believed that there are many persons employed by District Health Boards throughout New Zealand who are opposed to assisting in, or the performing of abortions and have not been advised of their statutory right to refuse to perform or assist in abortions.

Right to Life requests that all District Health Boards ensure that all employees are advised in writing at the commencement of their employment of their statutory right to refuse to perform or assist in abortions.

Protecting the unborn with Down Syndrome from Genetic Screening

By Mike Sullivan

'People with Down syndrome may soon disappear from the face of the earth.' This was the introduction by Mike McRoberts to the 60 Minutes documentary 'Down but not out' that aired in June this year. 60 Minutes revealed the Ministry of Health's new antenatal screening programme would reduce the population of people with Down syndrome through disability selective abortion. The screening programme was introduced earlier this year without public consultation and the Ministry 'did not bother' asking the opinion of anyone who has Down syndrome, about the programme.

Savingdowns spokesman, Mike Sullivan, featured in the 60 Minutes documentary. He said people with Down syndrome and other disabilities are human beings who live full and rewarding lives. 'They must be treated on an equal basis with other members of our society, without any form of discrimination.' Savingdowns is a group of 36 parents and siblings of people with Down syndrome. It was established this year in response to the new screening programme. Savingdowns and Right to Life lodged a complaint with the International Criminal Court (ICC) against the Government's screening programme in June 2011. The basis of the complaint is that the programme specifically targets and persecutes unborn children with Down syndrome and other rare genetic conditions, through the prevention of their births. This is in effect, an act of genocide and a crime against humanity, under Articles 6 and 7 of the Rome Statute. The Rome Statute forms the basis of operation of the ICC. The Court has confirmed that the complaint is being considered. New Zealand is party to the Treaty of Rome and is bound to comply with any ruling from the ICC.

The emphasis of the ICC complaint is on *consequences* and *intent*, with genetic screening and selective abortion being the *means*. The *intent* is to identify unborn children with Down syndrome, Spina Bifida and other conditions, so that births to the group can be prevented.

Item 14 of the Memorandum to Cabinet, dated 23 October 2007, details the purposes of the screening programme as (emphasis added):

The purpose of screening is to provide women with information about their pregnancy to enable them to make informed choices. This information may help women to....(Second bullet) decide whether to continue with or terminate the pregnancy.

The *consequence* is that a substantial part of the group is being systematically destroyed.

Item 28 of the Memorandum to Cabinet states (emphasis added):

"There is the potential for activities associated with improving the quality of antenatal screening for Down syndrome to have a negative impact on people with disabilities, including:".... (Fourth bullet) "decrease in the number of babies born with Down syndrome. International experience suggests that as a result of screening and diagnostic tests, up to 90 percent of women who receive an antenatal diagnosis of Down syndrome will choose to terminate their pregnancies."

In effect, the screening programme facilitates genocidal acts against the group, with abortion being the means of perpetrating those acts. The intent and consequences are the same as those that occurred during the Nazi genocide where the disabled were the first group targeted for sterilisation and "euthanasia" (read killing) under the **Racial Hygiene** programme. Members of the Third Reich were found guilty of charges of Crimes against Humanity at Nuremberg for these very actions against children with Down syndrome and Spina Bifida. Now, in New Zealand, the government is promoting, facilitating, financing and tolerating measures intended to prevent births of the same group of people. Therefore, our government is implicated in the making of a biological genocide towards that group of people. As was the case in Germany, the New Zealand screening programme is carried out under the guise of **being legal** under domestic law.

Whilst awaiting the outcomes of the ICC application, Savingdowns is being active in other important areas of advocacy around this issue. This includes raising awareness around the rapidly emerging biological genocide of routine genetic pregnancy screening and disability selective abortion. Feedback from disability advocacy groups worldwide is that the issue is rapidly gaining traction and support. There is certainly much interest in the outcomes of the ICC case.

Savingdowns recently meet with officials from the Ministry of Health who are involved with the screening programme. They were Dr Pat Tuohy, a specialist paediatrician who is the Chief Advisor Child Health and Jane McEntee, manager Antenatal and Newborn Screening of the National Screening Unit. Although



Chief Human Rights
Commissioner David
Rutherford

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they were not prepared to have the ICC issue on the table, they were willing to reconsider other important issues that relate to the information they have produced about prenatal screening. There was acknowledgement that the current consumer resources were not acceptable. These are now being revised to provide balanced, accurate, positive and non-discriminatory information around the conditions being screened for.

The Ministry has agreed to work on an initiative to up-skill the training of medical students to reflect positive lived experiences around the conditions being screened for. There has been an acknowledgement of the need to involve people with Down syndrome, Spina Bifida and other conditions in decisions around screening that affect them.

At the Ministry meeting there was general agreement to change the system for positive diagnosis, from referral to an Obstetrician, to referral to a Paediatrician with direct experience in the condition concerned and also to a family with a member with the condition concerned.

It was also agreed with the Ministry that Savingdowns would approach the Human Rights Commission (HRC) to convene a meeting with the government ministries concerned to discuss areas of the screening programme that breach international humanitarian law and the UN Convention on the Rights of People with Disabilities (CRPD).

Savingdowns have subsequently met with the newly appointed Chief Human Rights Commissioner

David Rutherford. He is a sports and commercial lawyer who has had extensive experience in disability work and was on the International Board responsible for organizing the Special Olympics. He was previously the CEO of the New Zealand Rugby Union. We will be lodging a formal submission that reviews the compatibility of the screening



*Dr Pat Tuohy, Chief Advisor
Child & Youth Health, MOH*

programme with the CRPD and human rights law more generally. Savingdowns is requesting that the policy for antenatal screening for disabilities be reviewed against New Zealand's obligations under the CRPD. From this an action plan will be developed and implemented to address all aspects of the screening programme that are in conflict with the CRPD. Savingdowns is requesting that the HRC to **take** a role in this process. A significant number of New Zealand and International Disability Advocacy organisations, will be formal parties to the HRC submission. The New Zealand situation will also be presented to the UN committee on the CRPD when the New Zealand country report is presented.

Further information on saving Down syndrome is available on their web site and facebook page

Down Syndrome Awareness Helps Stop Abortions on Special Kids

New research on Down syndrome presents an overwhelmingly positive picture of how Down syndrome can affect individuals and families. These findings need to be shared as they will affect decisions made to accept prenatal testing and following a prenatal diagnosis.

October was National Down Syndrome Awareness Month. Fittingly, the American Journal of Medical Genetics recently published groundbreaking research that challenges conventional wisdom about raising a child with Down syndrome (DS). Responding to these studies, noted bioethicist Art Caplan predicted that, nevertheless, they will not "make a bit of difference to parents deciding to end pregnancies once [DS] is discovered in the fetus." Actual experience contradicts Caplan's pessimism.

The new research reports the findings of three surveys in which thousands of parents and hundreds of siblings and individuals with DS themselves, were questioned about what it is like to be affected in one way or another by DS. Ninety-nine percent of parents said they loved their child with DS and 97 percent were proud of them; only 4 percent regretted having their child. While four percent of siblings would "trade their sibling" with DS, 96 percent indicated that they had affection toward their sibling with DS, with 94 percent of older siblings expressing feelings of pride. Finally, although 4 percent of individuals with DS expressed sadness about their lives, 99 percent said they were happy with their lives and 97 percent liked who they are.

Caplan believes that most mothers will still abort, even after this research has been released, simply because it is a fact that, currently, most mothers do abort following a prenatal diagnosis. This fact, however, does not support Caplan's callous conclusion that "Down syndrome is almost universally seen as something to be avoided." <http://www.lifenews.com/2011/10/13/down-syndrome-awareness-helps-stop-abortions-on-special-kids/>



The Prime Minister has Forfeited his Right to Govern

The Prime Minister, although returned to government on 26th November, has regretfully forfeited his right to govern New Zealand. A very strong statement, for us to make. However, because of his support for legislation that would permit doctors to kill their patients or assist in their suicide. The Prime Minister has publicly given his support for a private member's Bill allowing euthanasia legislation to be introduced into Parliament. He has promised to support the Bill in its first reading and for it to be sent to a select committee.

As Prime Minister, he has a duty to protect the common good and he should therefore prohibit any member of the government, bringing a private member's Bill on euthanasia to Parliament. The first duty of good government is to protect the right to life of every person from conception to natural death and not to oversee their death and destruction. His advocacy of euthanasia is a threat to our whole community, especially the vulnerable, the sick and the elderly.

The Prime Minister has a duty to uphold the Crimes Act which prohibits as a serious crime under section 158, the taking of the life of another person. This is a crime which is punishable with a sentence of up to life imprisonment. The Crimes Act also prohibits under section 179, any person inciting, counselling, or assisting in the suicide of another person. This is a crime which may be punished with imprisonment for up to 14 years.

It would be unwise and dangerous public policy for Parliament to consider legislation, that would provide for doctors to kill their patients or to assist in their suicide. What dignity is there in being killed by your doctor? Euthanasia is totally opposed by the NZ Medical Association because it violates their medical ethics. The association supports excellent palliative care and considers that with proper palliative care

there is no need for a person in a terminal condition to suffer.

In Holland in 2009, 2636 patients were put to death by their doctor. In addition there were 400 deaths where the doctor assisted in the death of the patient and 550 deaths where the doctor killed the patient without explicit consent or request. It is also estimated that 10 per cent of patients die as a result of 'terminal sedation', that is from the withholding of food and hydration. The Dutch are now even considering approving euthanasia for the lonely and depressed. **Euthanasia is a voracious monster; a right to die will quickly become a duty to die.**

Those who seek election to Parliament forfeit their right for electoral support if they do not uphold the inalienable right to life of every person. This is a non negotiable principle for a civil society. Right to Life requests that Prime Minister Key, upholds the common good and urgently and publicly withdraws his support for euthanasia. Prime Minister John Key believes parliament should debate euthanasia laws – but it won't be the agenda of a second term National government. His comments came in the wake of the conviction of scientist Sean Davison over the death of his mother....Key said his personal view is that 'there is an argument for us to look at this issue.' But Key has stated that should National be re-elected at the end of the month it won't be on the government's agenda, 'You will appreciate that's a conscience issue and so it is up to every single MP,' he explained. 'The last vote that we had was on a members bill some years ago. I voted in favour of it going to the select committee. I can't tell you how the rest of the National caucus would vote.' He was referring to New Zealand First MP Peter Brown's Death with Dignity Bill in 2003, which was defeated 60 to 57 votes.



Prime Minister
Right Hon John Key

"...abortion is a lethal assault against the very idea of human rights and destroys, along with a defenseless baby, the moral foundation of our democracy. Our moment in history is marked by a mortal conflict between a culture of death and a culture of life, and today, here and now, we must choose sides."

The late US Congressman Henry Hyde

A Victory for Conscience and a Culture of Life

Right to Life welcomes the decision of the New Zealand Medical Council not to proceed with its appeal to the Court of Appeal of the judgment of Justice McKenzie given in the High Court in Wellington in December 2010. The judgment stated that a medical practitioner who was opposed in conscience to abortions was not obliged to refer a woman seeking an abortion to another doctor who would facilitate the abortion.

The Medical Council in withdrawing its appeal is acting in the best interest of the medical profession, the community and indeed women and unborn children. The decision will hopefully result in deterring some women from seeking an abortion and thus save the life of their unborn child.

Parliament in passing the Contraception Sterilisation and Abortion Act in 1977 provided protection for the conscience of doctors and others under section 46, *To perform or assist in the performance of an abortion or any operation undertaken or to be undertaken for the purpose of rendering the patient sterile:..if he objects to doing so on the grounds of conscience.* The High Court in December 2010 had found that medical practitioners were only required to conform to the Health Practitioners Competency Assurance Act 2003 section 174 [2] which states that: *'the health practitioner must inform the person who requests the service that he or she can obtain the service from another health practitioner or from a family planning clinic.'*

Freedom of conscience is important for the practice of medicine. It was the imposition of the state in Nazi Germany that gave us the crimes against humanity perpetrated by doctors whose conscience was subject to the dictates of the Nazi regime. We

must remain ever vigilant to protect the informed conscience of the medical profession. It is our conscience that guides us to do good and to avoid evil. In 1948 the General Assembly of the World Medical Association in Geneva passed a Declaration on the responsibilities of medical practitioners.

It included, 'The health and life of my patient will be my first consideration.' It also stated, 'I will maintain the utmost respect for human life from the time of its conception, even under threat, I will not use my medical knowledge contrary to the laws of humanity.' The Geneva Declaration was made in response to the crimes against humanity that were perpetrated by Nazi Germany.

The **pro-abortion** movement supported the assault on the conscience of medical practitioners on the pretext that abortion was an **essential** health service. Abortion is not a health service, it is the killing of a defenceless and innocent unborn child a violation of human rights and a crime against humanity.

The community should be aware that there is an organised international assault on the conscience of medical practitioners in many countries to compel doctors to assist and perform abortions. Sustained pressure is also being imposed on hospitals to provide abortions. This is a culture of death that is being strenuously resisted.

Right to Life requests that the Medical Council promotes a culture of life and opposes a culture of death by amending the draft document to uphold the primacy of conscience and protect women's health and the lives of their unborn children.



Newly conceived life should be revered as a gift from God and from nature. The dignity of the unborn child is neither conferred nor taken away by any man or woman or by any government or society.

That dignity is rooted in an objective individuality that inherently tends toward the openness and transcendence men commonly call personhood.

Second Vatican Council.

New FDA Report – Mifepristone RU 486 Kills 14 Women, Injures 2,200

From Lifesiteneews.com



The United States, Federal Drug Administration issued a report released 30 April 2011, that reveals that not only does Mifepristone RU 486 destroy innocent unborn human beings, but that it's use has also resulted in the death of 14 women in the United States and caused injury to 2,207 women.

Of the women experiencing medical and physical problems resulting from the abortion drug, 612 women required hospitalizations, 339 experienced blood loss significant enough to require a transfusion, 256 experienced infections and 48 women experienced what the FDA labeled as "severe infections." Given that the RU 486 abortion drug caused sepsis, a potentially lethal infection that resulted in the deaths of women from around the world, the "serious infections" were very likely life-threatening situations.

"Severe infections generally involve death or hospitalization for at least 2-3 days, intravenous antibiotics for at least 24 hours, total antibiotic usage for at least 3 days, and any other physical or clinical findings, laboratory data or surgery that suggest a severe infection," the FDA report states.

Women developing infections from usage of the RU 486 abortion drug, experienced endometritis, (involving the lining of the womb), pelvic inflammatory disease (involving the nearby reproductive organs such as the fallopian tubes or ovaries), and pelvic infections with sepsis (a serious systemic infection that has spread beyond the reproductive organs).

Despite the FDA indicating, administration of mifepristone and misoprostol is contraindicated in patients with confirmed or suspected ectopic pregnancy (a pregnancy outside the uterus), the abortion drug was given to women in 58 cases where they had an ectopic pregnancy. The dangerous complications associated with this drug continue include hemorrhaging and infection. In the U.S., at least 612 women have been hospitalized after taking RU-486, and at least 339 women required blood transfusions as a result of serious blood loss after taking the abortion drug.

Marketing the abortion drug as simple and painless as taking an aspirin, is dangerously misleading to women. RU-486 is in a class of drugs categorized as selective progesterone receptor modulator, which, in addition to blocking progesterone necessary for the developing baby, also suppresses a woman's immune system. Additionally, it is sometimes the case that the remains of the pregnancy are not entirely expelled

from a woman's uterus, causing infection and other problems.



It is not only women in the U.S. who are suffering as a result of chemical abortion, it is a worldwide trend. A recent Australian audit conducted by their Ministry of Health of nearly 10,000 abortions performed in 2009 and 2010, compared the safety of RU-486 with surgical abortion. The outcome being in the words of one major media outlet "The Abortion Pill 'Less Safe than Surgery'". The Australian report showed that 1 in 18 patients who used RU-486 had to be re-admitted to hospitals (a total of 5.7% of women vs. only 4% of surgical abortions.) The same study revealed that as many as 33% of women who had second trimester RU-486 abortions required some form of surgical intervention.

The report also indicated approximately 1.52 million women have used the dangerous abortion drug through the end of April 2001.

Despite the seriousness and intensity of adverse effects related to RU-486, use of this form of abortion is being promoted in New Zealand by the Abortion Supervisory Committee [ASC]. The FDA report raises several important questions that were included in a letter we wrote to the ASC on 18 July 2011.

- Is your Committee aware of the FDA report and the Australian Health Department report on the use of Mifepristone?
- Is your Committee concerned at the disturbing maternal mortality rate following the use of Mifepristone?
- What action has your Committee taken to ensure that women considering a medical abortion with Mifepristone are informed of the potential risk to their life and health?

A similar letter has been sent to all abortion providers in New Zealand who provide chemical abortions with the abortion pill, RU 486.

News in Brief



Telecom Corporation has advised Right to Life that they have ceased funding Family Planning. The Corporation had in recent years provided \$150,000 in grants to Family Planning. The Corporation is now implementing catalytic philanthropy which is aimed at providing a better future for children. The Corporation has an annual fund of \$200,000 for funding suitable organizations. Right to Life is pleased that following lobbying of Telecom that funding of Family Planning has ceased.

The Adoption Option Trust

The Christchurch based Trust was established in 2005 in response to the dramatic decline in adoptions in New Zealand. In 1967 there were 2600 adoptions this had fallen to just 43 by 2009. This is at a time when New Zealand has the second highest rate of teenage pregnancy in the OECD. The mission of the Trust is to promote adoption as a positive choice for people facing a crisis pregnancy and to educate the public and professionals working with youth in New Zealand about current domestic adoption practice. The Trusts vision is to help pregnant women understand that adoption can be a positive option, if a woman is not in a position to parent her child, with open adoption being the accepted process allowing the mother to choose the parents for her child and continuing her contact and involvement in the life of her child. The Trust has a website www.adoptionoption.org.nz and has developed a DVD pack for distribution to people working with women in crisis pregnancy situations in Christchurch and Nelson. Donations to this very worthy cause may be made via their website.



Domestic Adoption Numbers for New Zealand 1998-2009

1998	125	2004	108
1999	122	2005	113
2000	87	2006	87
2001	78	2007	60
2002	104	2008	77
2003	81	2009	43

“There is unity among the bishops about abortion always being wrong, and that you can’t be a Catholic and be in favor of abortion - the bishops all agree to that - but there’s just an inability among the bishops together to speak clearly on this matter and even to say that if you’re Catholic and you’re pro-choice, you can’t receive holy Communion,”

Archbishop Chaput, Bishop of Denver, Colorado, USA

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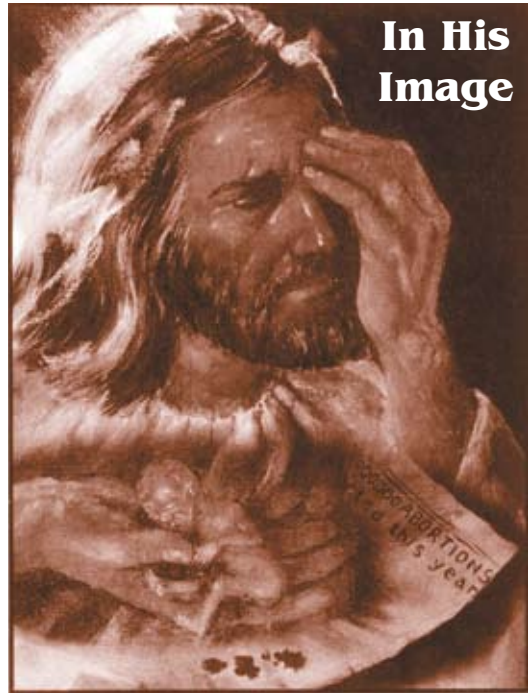
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In His Image

'Father forgive them for they do not know what they are doing.' (Luke 23:24)



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For more information or to send donations please write to:

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P.A.T.H.S. Co-ordinator
PO Box 1557, ChCh

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Archbishop of Canterbury Attacks Abortion

Unborn babies should be regarded as equal "members of the human family" the Archbishop of Canterbury said on 16th December in his 2010 Christmas address. "This is why we cannot regard unborn children as less than members of the human family, why those with disabilities or deprivations have less claim upon us than anyone else," he told 70 million Anglicans around the world.



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