

the HUMAN LIFE REVIEW



FALL 2003

Featured in this issue:

Mary Meehan on Democrats for Life (Part II)

Stephen Vincent on Pro-life Capital

Chuck Donovan on Planned Parenthood

Wesley J. Smith on Dehydration Nation

HLF's Great Defender of Life Dinner

Faith McFadden • Edward Capano • Fr. George Rutler

Maria McFadden • Mary O'Connor Ward • Rita L. Marker

Michael M. Uhlmann • Congressman Henry J. Hyde

Also in this issue:

David Gelernter • Marianne M. Jennings • M. Therese Lysaught • Andrew Lustig
Brent Bozell • Chuck Colson • Pia de Solenni • Steve Brown • Rich Lowry
and Nat Hentoff on the Terry Schiavo case

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ABOUT THIS ISSUE . . .

. . . when our late editor, J.P. McFadden, died in 1998, many *Review* readers wrote to his wife, Faith, and Maria, his daughter and successor, that even though they'd never met Jim, they nonetheless felt as if they'd "known" him. This no doubt was a result of years of exposure to Jim's personality-suffused writing—his crackling Introduction to each new issue of the *Review*, and his chatty fundraising letters which managed to entertain even as they asked—no, *argued*—for donations.

We're happy to report that our first-ever fundraising "event," the Great Defender of Life Dinner honoring Congressman Henry J. Hyde and hosted by Faith and Maria on Oct. 17th—the fifth anniversary of Jim's death—was very much suffused with Jim's spirit. "Just about all the people he admired most," Maria observed in her welcoming remarks, "are gathered in this room tonight." Speaker after speaker made it clear how much Jim himself was admired, and how much Faith and Maria are appreciated for carrying on his life-saving work. We hope all of you who could not be with us will get a sense of that special evening from the transcript and photographs we publish in this issue (page 40).

In many ways the evening was a backward glance: at the early days of the anti-abortion movement, and the fledgling *Human Life Review* which was to become its journal of record. Jim launched the *Review* in 1975, Michael Uhlmann (a founding editor) told the audience, because he believed "There has to be a record. . . . No one should be able to say, whatever happens, that they *didn't know*."

Nearly three decades later, there is a hefty record, and one that's expanded to embrace new life issues as they present themselves for debate in the public square. One of these is euthanasia. No, euthanasia is not new in the same way cloning, for example, is new. The Summer 1975 *Review*, in fact, had much on the subject: "It was our intention in this issue," Jim wrote in the Introduction, "to concentrate on euthanasia . . . but we have found it difficult indeed to separate abortion and euthanasia."

What *is* new is the degree to which the idea of euthanasia is again being given serious consideration. In his remarks at the dinner, William F. Buckley Jr. asked "whether the present company, in particular the gifted editors and contributors to the *Human Life Review*, oughtn't to ventilate another concern, this one having to do not with the beginning of life, but with its ending." Mr. Buckley's concern is with "insensate" persons, whose continued existence "expos[es] surviving loved ones to the sundering emotional drama of living with someone as though alive, though for all sensate purposes dead." The reason you will not find Mr. Buckley's remarks here is that we have invited several distinguished commentators to address them in a symposium which we will bring you in the next issue. Our thanks to Mr. Buckley for providing such a provocative challenge as we fare forward into our thirtieth year.

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INTRODUCTION

AS THE DEMOCRATIC CHALLENGERS to President Bush gear up for the election of 2004, they fall over themselves proclaiming their allegiance (in the case of Dennis Kucinich, rather freshly adopted) to “a woman’s right to choose.” The “party of abortion,” true to form. But wait—didn’t the Democratic party traditionally speak up for the “little guy”? Aren’t Democrats concerned about the poor, and those whose rights are being trampled? Wouldn’t those include the unborn?

There *are* Democrats who think so, and they are trying to make their voices heard over the din of the presidential candidates’ “pro-choice America” campaigns. In our previous issue, Mary Meehan presented the party’s historical record *re* abortion, and introduced us to Democrats for Life, an organization founded in 1999 to challenge the party platform’s unequivocal support for abortion “rights.” We kick off this issue with the second part of that article. In “The Road Ahead,” Meehan focuses on the present realities for pro-life Democrats, and conveys advice from many political sources on how Democrats for Life can gain influence. Their success would be a truly American tale—starting from the grass-roots up, the pro-life Davids breaking the silence imposed on them by the Goliath-sized abortion rights establishment in their party. A tall order, and, as Meehan writes, “the group certainly has a long way to go.” However, as Meehan’s fine reporting shows, these pro-life Democrats are determined to “stay and fight.”

Meanwhile, there *has* been change for the better in Washington. In our next article, contributor Stephen Vincent gives us an encouraging look at a host of thriving pro-life organizations in our nation’s capital. He writes:

Washington, D.C.—frequently seen by pro-life and pro-family advocates as a stronghold of their opponents—has become increasingly friendly to the culture of life. Pro-life is spoken here with more confidence and clarity, and the issues dear to the movement’s heart have been getting a better hearing within the corridors of power.

With a Republican majority in both houses of Congress and a president who defends the traditional family and recently signed the Partial-Birth Abortion Ban into law, the cause of life looks brighter than it has in many years.

Welcome news. Still, we have to remain realistic about the strength of our opponents, as Chuck Donovan reminds us in an important exposé, “The Empire of Emptiness: Planned Parenthood’s Political Machine.” Planned Parenthood Federation of America (PPFA)—which started with one clinic in a brownstone in New York City—together with its affiliate, the International Planned Parenthood Federation of America, is now “scarcely 18 miles away from any womb on the planet.” PPFA works constantly through its political arm, the

Action Fund, “converting clinic clientele into legislative and political activists for the organization,” and, despite recent ideological shifts in Washington, its financial and corporate growth continues unfettered. Donovan asks the pro-life movement to—yes—learn from its enemies. Compared to PPFA’s “New York Stock Exchange-caliber organization chart,” writes Donovan, “the right- to-life movement looks like a Rube Goldberg improvisation, featuring ordered chaos that produces occasional success.” While “right-to-life groups often state that they are working to put themselves out of business,” PPFA is ever working to ensure abortion rights for *tomorrow*. As much as we wish otherwise, we ought to expect to be “in business” for a long time, and improve our strategy. Donovan sees hope if we can build on current victories: “Fortunately, one component of President George W. Bush’s compassionate conservatism is a vision of government that actively supports, rather than undermines, family and faith. It is a vision that will be anything but easy to realize, but it contains some of the seeds of a pro-life renaissance.”

Wouldn’t my late father, J.P. McFadden, have appreciated those words? When he founded this journal in 1975, his primary goal was to keep the abortion issue “out there,” in the public eye—the worst thing, he reasoned, would be to let it become a non-issue. He hoped that, one day, the momentum would turn back to life. J.P.’s life and legacy were honored on October 17, the fifth anniversary of his death, at the Human Life Foundation’s first-ever fundraiser, our Great Defender of Life Dinner. In a special section, beginning on page 40, we publish remarks and photographs from what was truly a spectacular evening: a celebration of J.P.’s work, a fond look back at the early days of his *Human Life Review*, and a rousing affirmation of the *Review* as it continues today. The highlight was the presence of Congressman Henry J. Hyde of Illinois, who received the Foundation’s first Great Defender of Life Award—but I’ll let you read all about it, starting with my mother Faith McFadden’s scene-setting introduction.

By the date of our dinner, the case of Terry Schiavo, the brain-injured woman whose feeding tube was removed on October 15, had gained national attention. Her slow death was at least temporarily averted when Governor Jeb Bush signed legislation on October 21 which permitted the feeding tube to be reinserted. Schiavo’s story is one of the “food and fluids” cases that Wesley Smith explores in “Dehydration Nation,” our final article. Smith first states what *should* be obvious: withdrawing of food and fluids, unless the body is already shutting down naturally (such as in the case of a dying cancer patient) has nothing to do with “rights” or mercy, but is a brutal death that ought not be inflicted on an animal, much less a human being. As he rightly points out, “If a condemned murderer were executed by being shut in a room without food or water until he died, the American Civil Liberties Union would never stop suing, and rightly so.” But “dehydrate a person with significant brain injury” and it’s considered ethical. Smith gives us the details of Schiavo’s and

INTRODUCTION

two other recent “food and fluids” cases, which share disturbing common themes, such as repeated instances of judges refusing to acknowledge obvious conflicts of interest on the part of the disabled person’s guardians. Yet he too sees hope: “The remarkable public outpouring in support of Terry Schiavo’s life proves that at least among the general public, the sanctity-of-life ethic retains much of its vitality.”

* * * * *

Our appendix section begins with a trenchant quartet of columns from Nat Hentoff about the battle for Terry Schiavo’s life. Hentoff begins by declaring that this case involves the *worst* instance of “journalistic malpractice” he has ever seen (given his career, that says a lot). He is followed by two especially moving reflections on the case, by Yale professor David Gelernter, writing in the *Wall Street Journal*, and then Marianne Jennings, whose 16-year-old daughter Claire depends on a feeding tube for survival.

The bioethics field abounds with confounding moral situations, as our next two appendices attest. M. Therese Lysaught writes (in *Appendix D*) with grace and insight about the difficult (even for pro-lifers) subject of embryo adoption; next (*Appendix E*), Andrew Lustig reflects on the recent case of the 29-year-old Iranian conjoined twins, who died as a result of their controversial surgery. *Appendix F* is another sad story, that of Holly Patterson, a young teenager who died as a result of her visit (*sans* her parents’ knowledge) to a Planned Parenthood clinic, where she received the drug cocktail known as RU-486.

We wrap up the issue, however, with tales of hope, starting with Chuck Colson, who writes movingly of the passage of the Partial-Birth Abortion Ban Act of 2003—he was there when the President signed it into law—while he remembers the aching defeats that came before it. His words ought to be heeded by the brave band Meehan writes about: “The lesson? Don’t quit—truth wins in the end.” We then go to “Miracles of Life” (*Appendix H*), the story of little Samuel Armas, whose tiny hand reaching from *inside the womb* to grasp his doctor’s finger captivated a nation. Next, in *Appendix I*, we have the inspiring story of Texas pro-lifers who worked together to block the construction of an abortion clinic. Finally, we have another “miracle” story—that of “Shorty,” the name, Richard Lowry tells us in *Appendix J*, of a stunning documentary celebrating the life of Walter “Shorty” Sims, a man with Down’s syndrome. If Lowry ran the Academy Awards, he writes, this film would be honored as the “Best Celebration of Human Dignity and the Wonder of Life.”

This issue completes our 29th year; may the 30th bring more miracles!

MARIA MCFADDEN
EDITOR

Democrats for Life

Mary Meehan

Part I of this series outlined key problems faced by Democrats for Life of America: a Democratic Party platform that strongly supports abortion; a flock of Democratic presidential candidates who do the same; and powerful groups, such as Emily's List, committed to the protection of legal abortion.

Part II concludes the series by describing how pro-life Democrats challenge their party's support of abortion. It considers practical advice, from members of Congress and others, about what else should be done.

Part II. The Road Ahead

When former Boston Mayor Raymond L. Flynn spoke to a Democrats for Life gathering in January, 2003, he summed up his political philosophy this way: "I'm pro-life; I'm pro-family; and I'm pro-poor. . . . That was the Democratic Party that I grew up in." Painfully aware that this doesn't describe the Democratic Party of today, he posed two choices: "One is to quit and run away and do nothing about it. The other one is to stay and fight . . ." Flynn clearly wants to stay and fight. He suggested that Democrats for Life, although small now, "will turn into an enormous, important, mainstream organization."¹ He may be right, but the group certainly has a long way to go.

Where They Are Now

Formally organized in January, 1999, Democrats for Life of America opposes abortion, the death penalty and euthanasia, with the greatest emphasis on abortion. In a platform adopted in March, 2003, the board supported legislation against abortion, cloning and embryonic research—plus a bill "aimed at reducing the risk that innocent persons may be executed." The group hopes to elect pro-life Democrats to public office, influence the party platform, and help achieve pro-life legislation.

Lois Kerschen, a Texan who was the organization's first president, recalled that Texas, Kentucky and Indiana all had state groups of pro-life Democrats before the national organization was launched. Contacting people in other states, they "all got together and started talking and formed the national group." At first Kerschen was not only president, but also chief cook and bottle washer. In 2002, however, Democrats for Life opened a modest

Mary Meehan, a Maryland writer and longtime *Review* contributor, is a political independent.

Washington, D.C., office and hired a part-time executive director, Kristen Day. She had worked for then-Representative James Barcia, a Michigan Democrat, when he co-chaired the pro-life caucus in the House of Representatives. Barcia's office, Day remarked, "is really where my pro-life activity started." She helped her boss keep the other "pro-life Dems" informed about coming votes, forming a solid bloc in the House.² This gave her excellent contacts and the legislative background to keep the Democrats for Life Web site current on congressional developments.

That site—www.democratsforlife.org—is one the Democratic National Committee (DNC) doesn't want its loyal troops to see. Despite requests from Senator Benjamin Nelson of Nebraska and 17 House Democrats, the DNC has refused to link its own Web site—which has links to over 200 groups—to the Democrats for Life site. One might think that the DNC, in the spirit of free speech and in courtesy to Senator Nelson and senior House Democrats, could spare a little space on its Web site for Democrats for Life. But abortion seems to be the most sacred cow of all in their barn. DNC Chairman Terry McAuliffe opposed using the party's Web site to promote an organization "whose purpose is to reverse the current platform and/or to enact legislation that contradicts that platform . . ."³

Lois Kerschen thought that response was absurd: ". . . they're saying that we would want to change the platform. Well, so does everybody else. . . . And to act as if the platform is eternally etched in stone is just ridiculous."⁴ Columnist Mark Shields, a longtime critic of the Democrats' abortion policy, wrote: "Consider the case of the Democratic Party and its current party platform, brimming with self-congratulatory language about the party's admirable broadmindedness." He quoted current platform language about welcoming into party ranks "all Americans who may hold differing positions" on abortion and other issues. The DNC's refusal to link to the Democrats for Life Web site, he suggested, meant that language was: "Baloney, B.S. and worse."

In the best tradition of insurgent politics, Democrats for Life tries to get maximum publicity for the DNC's closed-mindedness. But they'd rather have the link than the publicity over it. When the Texas state party linked its Web site to the Democrats for Life Texas chapter, Kerschen reported, it quickly led to contacts with two Democratic county leaders and produced "a rise in our e-mail contacts . . . it has really made a difference."⁵

Organizing in the States

Texas Democrats for Life has several local chapters and holds an annual convention. Three Democratic U.S. House members—and a number of Democrats in the Texas state legislature—consistently vote against abortion.

Yet even in Texas, Kerschen complained, the party has put heavy pressure on candidates to support abortion. She recalled people “who have practically talked to me in a closet because they were so afraid for anybody to find out they were pro-life . . . it’s sad, it’s pathetic. In my opinion, it’s a little spineless. But you know, political realities are such that these people are absolutely pounded on by the party.”

Now, however, after losing elections to the point where they have no state-wide officeholders at all, party leaders are trying “to see what the problem is,” Kerschen remarked. “And we can tell them what the problem is. Because our e-mail, our membership—people tell us all the time, ‘I want to be a Democrat, but I think I can’t because of the abortion issue.’ Or ‘I used to be an active Democrat, but I’ve left’ or ‘I’m dormant’ or whatever.” She added that “we hear that from all over the country. But particularly in a formerly solidly-Democratic state like Texas, that’s a serious problem.” Perhaps this is one reason why the state party chairwoman recently said of Democrats for Life: “While they may disagree with a majority of Democrats on choice, they want to improve the quality of life in Texas. They are a welcome part of the Democratic Party in Texas . . .”⁶

Michigan is another state where the pro-life movement is strong and counts many Democrats among its members, including two members of the U.S. House of Representatives—Bart Stupak and Dale Kildee. Both have excellent anti-abortion voting records, and Stupak is a pro-life leader in the House. Of about 70 pro-lifers in the Michigan legislature, according to legislator William O’Neil, 17 are Democrats.

In 2002, O’Neil and another Democratic legislator were key founders of the Choose Life Caucus within the Democratic state party. According to O’Neil, state party chair Mark Brewer “embraced the entire idea” and provided the caucus with rooms at party conventions. O’Neil said party leaders have “given us full access to anything that we’ve needed. And they’ve come to our meetings.” They have also placed a link on the state party’s Web site to the Choose Life Caucus. Party leaders and a number of state legislators attended a February, 2003, caucus meeting; Mr. Stupak stopped by; and columnist Nat Hentoff spoke to the gathering by telephone conference call.⁷

Carol Crossed, current national president of Democrats for Life, recently helped establish a chapter in her home state of New York. While there were only about 15 people at the organizing meeting, she was happy to report that they included two state legislators. The chapter hopes to have a booth at the state party convention in 2004. Not knowing yet whether party officials will allow that, Crossed remarked: “They’d be very smart to do that . . . I’m sure they wouldn’t want us outside picketing.”

Long before the state chapter was formed, Crossed was invited to talk about Democrats for Life to three Democratic precinct committees in the Rochester area. One committee, she said, “listened politely and said thank you, and I left.” But the other two “were very, very positive.” At one, an objector was “strongly put in her place by, I would say, three or four other people who said, ‘Listen, this is really what we’ve got to be talking about. This is what we need to hear.’”⁸ (One doubts, though, that precinct leaders in Westchester County or Manhattan would be so nice.)

In California, said attorney and Democrats for Life activist Karen Wheeler, there are no pro-life Democrats in the state legislature, statewide office, or Congress. “Nada,” she declared. “It is a very harsh, hostile environment for pro-life members.” Wheeler has hope, however. “Recently we had a volunteer come forward who’s a political strategist,” she said, “and he’s going to work out a good strategy for us.”⁹

In Colorado, “The only pro-life Dem that we have, probably, as far as the biggest offices would go, is the Denver district attorney,” said Timothy Dore, another Democrats for Life activist. Before running candidates for office, he suggested, pro-life Democrats “need to create a presence in Colorado that doesn’t exist right now publicly.”¹⁰

The Democrats for Life contact in Rhode Island is David Carlin, a writer and college teacher who is former majority leader of the state senate. But the group doesn’t have a formal chapter in the state, and Carlin doubts there is a need for it. “There are plenty of pro-life Democrats in the state, anyway,” he emphasized, and candidates who share their views. “Rhode Island is a great exception in the Northeast . . . We’re greatly different from Massachusetts, which is right next door.” He added that he thinks “it’s because there’s a certain social-class base for the pro-choice philosophy.” People who hold it are “well-educated, affluent, upper-middle-class or upper-class types. . . . And we don’t have an awful lot of those people” in Rhode Island.¹¹

Reverend Smitley’s Sunday Brunch?

Minnesota, which used to be the scene of fierce battles over abortion among Democrats, may see a return to such combat. But Leo LaLonde, president of Minnesota Citizens Concerned for Life (the state affiliate of the National Right to Life Committee) is not optimistic about the outcome. A Democrat, and a pro-life activist since 1972, LaLonde is a veteran of many pitched battles. He recalls a time when the pro-life caucus within the state party was big enough to be represented on the party’s state central committee. At one point, he said, “45 percent of the state convention” delegates were pro-life.¹²

In 1984, Representative James Oberstar, a pro-life Democrat, ran a strong

campaign for the party endorsement for a U.S. Senate seat. Anticipating that balloting at the state convention might go through the night, Oberstar forces told their delegates, "Bring your lunch, bring your dinner, and bring your sleeping bag." But on the nineteenth ballot, Oberstar lost to a candidate who supported abortion. That was the same year Minnesota's Walter Mondale, the former U.S. senator and vice president, won the Democratic nomination for president. Yet nearly 20 percent of the Minnesota delegates to the national convention voted instead for a pro-life Democrat from Missouri, Senator Thomas Eagleton, in order "to express their opposition to abortion."¹³ They did not endear themselves to party leaders with such spirited independence.

The early 1980s were the high point for abortion foes within the state party. LaLonde, complaining of discrimination against pro-lifers, said it subsequently "increased to a level where many, many of our people actually left the party. I think a majority of those who left became Republicans, but others just simply became inactive." In recent years, he has claimed around 15 percent of Democratic state convention delegates, but he had only 15 *people* at the last state convention—about one percent of the total. When you go to a convention, he said, "and you have people hissing you and booing you and pushing you and shoving you and in some cases hitting you with signs . . . that's a lot to ask people to put up with."

Democrats in other parts of the country might regard this as normal Democratic behavior, which requires a certain zest for combat. "You have to go in and start a fight," said Marylander Joseph Barrett, a pro-life political consultant. "You have to make people understand that there's a brawl going on . . . In the Democratic Party, you don't win anything by going to Reverend Smitley's Sunday brunch. It's a beer brawl."¹⁴

Attorney Janet Robert didn't promise a ruckus when she launched the Democrats for Life Minnesota chapter last August. But Robert, a former congressional candidate who heads the new chapter, got it off to a promising start with a display of political heft. The mayor of St. Paul appeared at her opening press conference; Minnesota's two pro-life Democrats in Congress sent messages of support; and Robert announced an advisory board which included those officeholders plus six state legislators and a former U.S. cabinet member.

A series of electoral defeats have chastened Minnesota's Democratic leaders to the point where state party chairman Mike Erlandson admitted that he wanted his party to "be better at asking people to join us than to leave us." When the Democrats for Life chapter can help elect Democrats "where a candidate who is anything other than pro-life would not be elected," he said, "we welcome their efforts." But Erlandson does not welcome efforts to

challenge the state party's pro-abortion stance. He predicted there "will be little if any patience in the party to have a fight on the issue of life versus choice at our next state convention."

Janet Robert said her chapter's "first priority is to pass pro-life legislation," and its "second priority is legislation that supports women who decide to have a child," for instance, in areas such as "health care, fair wages and education." Robert would like to see some change in the pro-life movement, too. She is still upset that Minnesota Citizens Concerned for Life endorsed only her Republican opponent in the 2002 congressional race. (Representative Mark Kennedy, the Republican incumbent, defeated Robert.)¹⁵ According to MCCL president LaLonde, his group and National Right to Life have a policy of supporting the incumbent when both candidates are pro-life. "We have to stick with our incumbents," he said, rather than "changing horses midstream."

But, Robert pointed out, MCCL failed to include on its 2002 sample ballots several incumbent pro-life Democrats, including veteran congressman James Oberstar. At one point, LaLonde acknowledged that there "was no specific thing that endorsed" Oberstar; but later he insisted that listing the congressman's record and his answers to a questionnaire in the MCCL newsletter had constituted an endorsement. LaLonde stressed that Oberstar faced a weak Republican candidate, that "there's just no way a Republican's going to win" in his district, and that Oberstar didn't need special help such as billboards or a literature drop. Cost was a major factor, too, LaLonde said, adding that "we don't spend money on a race that's already won."¹⁶ Yet it could not have cost much to at least issue a press release with a ringing endorsement, thus thanking an incumbent who has been loyal to the pro-life cause for many years.

Right-to-Lifers' Alliance with Republicans

Rhode Island's David Carlin hears complaints from colleagues in Democrats for Life that the National Right to Life Committee (NRLC, the most powerful pro-life group and one with a strong political and lobbying presence in Washington, D.C.) is "like an arm of the Republican Party." His response: "Well, yeah, but what do you expect? Of course, it's an arm of the Republican Party. It's only the Republican Party that cares about that issue. So, naturally, they want the Republicans to win."¹⁷

National Right to Life regularly endorses Republican presidential candidates. Its political action committee (PAC) overwhelmingly supports Republican congressional candidates. NRLC executive director David O'Steen suggested this is simply because most Republican candidates oppose abortion

while most Democratic candidates support it. “There was only one close, clear pro-life/pro-abortion contest in the last election, in the general election, that involved a pro-life Democrat and a pro-abortion Republican,” he declared. “That was in Maine. We supported the Democrat; we won. There were two such races in 1994. In both cases, we supported the Democrat, and we won. I don’t believe there was one in ’96 or ’98.”

In the past, O’Steen requested and received large financial contributions from Republican committees. Stressing their party’s official pro-life position, he told them that National Right to Life was “extremely effective—and the largest pro-life organization in the world.” He maintained that “the most efficient, effective way they could further the pro-life cause was to contribute to us rather than reinventing the wheel and forming some sort of pro-life group within the party.”¹⁸ In 1996 the Republican National Committee gave \$650,000 to National Right to Life (to the main group, not its PAC). O’Steen said there were “*absolutely* no strings” attached to that donation and that he used it for NRLC’s legal department, its state legislative department, and expenses of its officers and board members.¹⁹

The group has also received donations from other Republican committees. But, said O’Steen, under the McCain-Feingold campaign finance law (passed by Congress in 2002 and upheld by the Supreme Court in December, 2003), a party committee can no longer give money to a not-for-profit corporation such as the main NRLC group. The new provision, he declared, “was aimed straight at us.”

Quite apart from past financial aid, National Right to Life has benefitted in many ways from its alliance with Republicans. The latter have passed legislation to restrict federal funding of abortion, the promotion of abortion abroad, and partial-birth abortion. Republican members of Congress such as Henry Hyde of Illinois and Christopher Smith of New Jersey have given a substantial part of their lives to the tough, grueling and never-ending battles over abortion. The last three Republican presidents have used their appointment authority and executive orders to restrict abortion. The first President Bush, facing a hostile Congress, made courageous use of his veto power on behalf of the unborn; and his son has been a firm supporter of the pro-life cause. While many key people in the party—including some large donors—support legal abortion, O’Steen undoubtedly is right when he says that “increasingly, the environment at the Republican committees is pro-life . . . a lot of the staffers there have been around the pro-life movement or have worked for pro-life congressmen or have had some associations with pro-life groups.”²⁰

But in the crucial area of the Supreme Court, Republican presidents have

made several disastrous appointments (John Paul Stevens, Sandra Day O'Connor, David Souter, and Anthony Kennedy) since the 1973 *Roe v. Wade* decision. With better appointments, Presidents Ford, Reagan and the senior Bush could have ensured reversal of *Roe*. The younger President Bush appears determined to appoint strict constructionists who may vote to overturn *Roe*; but it is very late in the game now, and there is no guarantee that he will succeed.

There are about 35 pro-life Democrats in Congress, and some are upset by the NRLC alliance with Republicans. Michigan Representative Bart Stupak said he has received endorsements from National Right to Life, but little in the way of financial support for his election campaigns. "I mean, I'll tell you how bad it is," he commented. "They don't even return your call. . . . Without the Democratic pro-life members, they cannot pass one piece of legislation in the U.S. Congress. But yet they won't help us . . . they won't even say a kind word . . . you don't even get a thank-you or anything. They'll have a press conference; they'll have all Republicans there and dismiss all of us Democrats."²¹

David O'Steen explained that while "members of Congress would like, naturally, as many contributions to their campaigns as possible," NRLC's PAC focuses mainly on close races where "our efforts can make a difference." Incumbents like Stupak often are so secure in their seats that they do not need nearly as much money as challengers do. But O'Steen believes that "pro-life Democrats are certainly thanked, invited, appreciated."²²

Fights Over Campaign Finance Bills

Many pro-life Democrats in Congress were upset in the late 1990s when National Right to Life insisted they oppose campaign finance bills which, the group said, would violate its free-speech rights. The bills included a ban on broadcast advertising by the main NRLC group (and other incorporated, not-for-profit, lobby groups) that mentioned candidates in the period just before an election—even if the ads did not urge people to vote for or against the candidates. In other words, the bills were designed to protect incumbent members of Congress from ads that criticized their voting records or urged them to vote a certain way. The legislation allowed PACs to run such ads, but PAC money is hard to raise and subject to strict limits.

NRLC saw the bills (including the McCain-Feingold bill) as direct attacks on its ability to communicate with the public and to lobby members of Congress. It ran ads criticizing congressional pro-lifers of both parties who supported the legislation, including senior Texas Democrat Charles Stenholm. Despite Congressman Stenholm's solid pro-life voting record, NRLC's PAC

even supported a pro-life Republican who ran against him in 1998. Stenholm survived the challenge, but received just 53.8 percent of the vote—a close call for a 20-year incumbent.

Several months later, NRLC pressed pro-life House Democrats so strongly on the campaign finance issue that one of them, Rep. Marion Berry of Arkansas, declared: “I don’t care if you blacklist me; I’m never talking to National Right to Life again.” He charged that the group’s officials had been “dictatorial and rude.” Recalling the incident recently, Berry said the NRLC representatives “let us know, in no uncertain terms, immediately, that we would either do it their way or we would be considered their opponents politically . . . that’s where the meeting ended, and that’s the last contact I’ve had with them.”²³

While not endorsing such tactics, I believe that National Right to Life is absolutely right in fighting campaign finance legislation. Supporters of a 1998 bill, for example, made it clear that what they wanted to protect themselves from was free speech. One House member, after describing an issue ad that urged voters to “Call Representative A and tell him to stop raising your taxes,” announced that “this is the sort of behavior we are trying to stop.” Another complained about “sham ads,” insisting “they need to be managed as free speech does throughout our society.”²⁴ When free speech is “managed,” of course, it is no longer free. What these members wanted to do, and what the McCain-Feingold law *does*, is precisely what the Founders tried to prevent when they declared in the Bill of Rights that “Congress shall make no law” limiting freedom of speech.

Campaign finance laws violate freedom of speech in other ways as well. By limiting campaign contributions, they restrict how much candidates can say and how far their message can be carried. They force candidates to spend huge amounts of time on fundraising. They regulate “independent spending” in such a way that candidates cannot communicate directly with citizens who engage in such spending on their behalf. And the laws discriminate heavily against challengers, who are given no break to compensate for the huge financial advantages of incumbents (government-supplied offices and staffs and the franking privilege).²⁵ They discriminate against insurgent candidates—the kind Democrats for Life must find and elect.

National Right to Life is fighting the good fight against campaign finance laws. Democrats and Republicans alike should join that battle, both on principle and in self-defense. As former senator and presidential candidate Eugene J. McCarthy once said, “I’m holding out for the freest kind of politics . . . Once you give that up, you get pretty much into the second stage of the French Revolution, where everybody was equal, especially after they had their heads cut off.”²⁶

This does not mean, however, that NRLC has always approached the issue in the best way. Alienating congressional Democrats such as Charles Stenholm and Marion Berry was a major mistake, one that reinforced suspicions of a deep NRLC bias against Democrats. NRLC leaders should remember that one of their Republican heroes, President George W. Bush, signed the McCain-Feingold bill into law despite his reservations about its constitutionality.²⁷ In view of their relative political power, Bush bears far more responsibility for McCain-Feingold than Stenholm and Berry do.

Needed: Another Political Action Committee (PAC)

Relations between National Right to Life and pro-life Democrats are likely to undergo more strain from time to time, but both sides realize that there are opportunities for cooperation as well. The National Right to Life PAC director attended the June 2003, Democrats for Life fundraiser—where, ironically, Mr. Stenholm received a Leadership Award.²⁸

Yet Democrats for Life leaders know they must set up their own PAC, raise their own political money, and recruit like-minded Democrats to run for office. Their opposition within the Democratic Party is incredibly well-organized and wealthy. As noted in the first part of this series, Emily's List alone raised nearly \$10 million in 2001-2002 for Democratic women candidates who supported abortion. "Many Democrats are terrified of Emily's List," Minnesota's Janet Robert remarked, adding that "until there's money available to help Democrats who are pro-life, they're going to have trouble." Former U.S. Representative John LaFalce of New York said that "we need Democrats, Republicans, conservatives, liberals for life" to contribute to candidates who face "uphill odds" in Democratic primary campaigns.²⁹

Democrats for Life would like to have a PAC in place for the 2004 elections; but, executive director Day explained, "We don't have any deadlines set yet. We just are working on building our membership, building our office, building our state chapters . . . when we have a good base, then we'll start a PAC." They have, in fact, very little money even for their basic organizational work. Their goal for 2003 was to have a budget of \$100,000. That sum is "infinitesimal in Washington, isn't it?" asked board member Thea Rossi Barron of Virginia.³⁰

In addition to establishing a basic operating budget, and raising money for a PAC, Democrats for Life needs to recruit more candidates at all levels. "We are going to encourage the election of credible, across-the-board, full-service candidates," said Karen Wheeler, the California activist, "ones who are pro-life and who also take the stands on other social-justice and domestic

issues that have been the traditional mainstay of the Democratic Party.” Might she consider running for office herself? Not yet, she said. She’s taking time out from her legal career to be at home with her two small children. Wheeler also believes she needs more political experience before running for office: “I have years of working in the trenches ahead of me before that ever happens.” Lois Kerschen would probably be an excellent candidate; she is articulate, attractive, and a good “people person.” But, she insisted, “I am strictly a behind-the-scenes—and the further behind the scenes, the better—kind of person . . . Unfortunately, I do not have the talents to be a candidate.”³¹ Whether from outside their ranks or within them, Democrats for Life should be able to find good candidates.

Where such candidates run in culturally-conservative areas, they may receive party support as well. The Democratic Congressional Campaign Committee, for example, sometimes gives substantial financial aid to pro-life U.S. House candidates when party leaders realize this is their only chance to win certain districts. But this doesn’t represent any change of heart on abortion. Party operatives undoubtedly realize that if the anti-abortion candidates win and help the Democrats take back the House, they can be kept off committees—such as Judiciary—which determine the fate of abortion legislation. When Democrats have controlled one or both houses of Congress, they have used this and other power plays to stop anti-abortion bills. Now Democratic leaders in the Senate are blocking consideration of key Bush appointments to federal appeals courts in order to prevent a reversal of *Roe v. Wade*. This is a major reason why National Right to Life is wary about supporting anti-abortion Democrats in congressional races.

Raymond Flynn and Mark Stricherz have declared pro-life Democrats in Congress “a dying breed,” with “no firebrands among their ranks.” They “include popular, honorable politicians,” but they are “not overly courageous ones.”³² While I believe this is too grim an appraisal—and Flynn himself sounds more optimistic on other occasions—it is true that pro-life Democrats in Congress need to be bolder. They especially need to demand seats on the Judiciary and other key committees. And activists who are looking for new candidates need to find people who, as Joseph Barrett said, “understand that there’s a brawl going on.”³³ They need candidates who are willing to take on pro-abortion incumbents in primaries. Defeating a few of them would challenge the aura of invincibility that abortion forces have acquired within the party.

This is not to say that pro-life Democrats should have a chip on their collective shoulder. As shown in Texas, Michigan and New York, some party leaders believe in free speech and fair play and do not want to lose party

members. But there are also areas where pro-life Democrats will encounter great hostility from party leaders. They will need firm support systems and real courage to deal with the hostility.

They might look to athletics for good role models. Ray Flynn, who was a sports star in his college days, once said that his experience as an athlete was a great preparation for politics: "You practice, sweat, there's pain. You go out on the court and lose. And you pick yourself up. You look for the next game. You don't dwell on the losses. You move forward. . . . you get hit in the nose with an elbow, you take the towel, wipe away the blood, and get back out in the field."³⁴

Or, as tennis great Serena Williams once told her sister Venus when the latter was hurt during a match, "You are a champion; now fight." Venus made a gallant comeback, leading another Williams sister to say that "after seeing what she did, I feel like I can do anything. I am never going to quit at anything again."³⁵

A Presidential Candidate?

In early 2003 Michael Schwartz—a Democrat, longtime anti-abortion activist and Washington, D.C., lobbyist—said he would like to see a pro-life Democrat run in the 2004 presidential primaries. There is "nothing like a presidential campaign," he said, "to bring people out, to get volunteers identified, to get them some experience, and to build those networks." He thought there would be money to support such a campaign. But, he added, he was not speaking of a "George Bush, guilt-edged campaign. After all, the objective is less to win the nomination of your party, or to win the general election, than it is to organize a constituency. . . . And a people-intensive campaign can achieve wonderful things at a very low cost."³⁶

Former Representative LaFalce, noting the "principle of divide and conquer," ventured that if there were ten candidates, and only one committed to the pro-life cause, and if that one were "*consistently* pro-life . . . he would not be against gun control, for example, and therefore frighten off the Democratic base—then I think that candidate could do quite well."

Joseph Barrett suggested that a conservative or moderate Democrat could make a serious fight for the nomination *if* he had a few million dollars in funding guaranteed at the start. Barrett realizes, though, that it's hard to raise money for candidates at any level.³⁷

Democratic officeholders generally were reserved about the idea of a challenge in the presidential primaries. But Representative Ken Lucas of Kentucky, who believes "pro-life Democrats have to be more outspoken in the party," thinks a presidential campaign "would help raise awareness of the

commitment of pro-life party members and help advance a grassroots movement.” Nebraska’s Senator Ben Nelson said “a credible candidate, I think, would be helpful,” but warned that “a non-credible candidate would do our cause harm.”³⁸

“I’d do it myself,” declared Ray Flynn. “The problem is, I just don’t have the money . . .” If he had been in the presidential race at the time, he claimed, he would have shown up at the NARAL Pro-Choice America fundraiser in Washington, D.C., in early 2003. Instead of “pandering” to NARAL, as he believes Democratic presidential candidates did then, Flynn would have told them “what I’m saying to you. I’m saying I’m pro-life, and I’m proud of it, but I’m a Democrat as well . . . and we have to give people a broader choice in the Democratic Party. We can’t continue to drive working-class, blue-collar, pro-life people out of the party.”³⁹

In the absence of a political professional to do the job, Philadelphia prolifer William Devlin was planning, in the fall of 2003, to run in the Democratic presidential primaries. Devlin, who works for the Urban Family Council in Philadelphia, is focused mainly on pro-life and pro-family issues. He has served as a Democratic precinct committeeman, but has never held public office. Although he had no money for a campaign when interviewed in the early fall, he hoped to raise enough to make a formal announcement in January, thus giving Democrats one candidate who “honors life.” But Devlin acknowledged that his lack of experience in elected office is a problem.⁴⁰ And the Democrats have front-loaded their primary schedule so heavily that the nomination battle may be over by early March of 2004.

Democrats for Life needs a stronger network before the group can convince a mayor, governor or member of Congress that there’s a real base for a pro-life campaign in the Democratic presidential primaries. That base must include fundraising for a serious PAC. Often in fundraising, the key steps are: 1) stop lamenting the lack of money and 2) start raising it, almost any which way. No one should rule out even the humble bake sale or yard sale. Getting started is key. Raising just a little money shows people there is money out there; more brilliant ideas can come later.

Influencing the Party Platform

Whatever happens at the presidential level, pro-life Democrats can try to influence the party platform by running for the office of convention delegate and going on the platform committee. As Senator Nelson remarked, “if we’re not on the inside trying to change it, you’re not going to be able to do it from the outside.”

In some areas, because party organization is weak and voter participation

very low, electing delegates may be easier than people realize. Flynn, who has been involved in many presidential campaigns, said that sometimes just “a handful of people show up” at a caucus and elect delegates. Someone who arrived with 30-50 people, he suggested, “could probably get elected delegate to the national convention.”⁴¹ Energetic activists could produce surprises by rounding up family members, friends, neighbors, and members of their local pro-life group; registering them as Democrats; and getting them out to caucuses and primary elections.

While it seems unlikely at present, imagine for the sake of argument that pro-life Democrats could send a respectable contingent to the national convention next July. How should they try to change the current abortion plank? The heart of that long-winded plank supports “the right of every woman to choose, consistent with *Roe v. Wade*, and regardless of ability to pay” and suggests that legal abortion is “a fundamental constitutional liberty.” A provision that was first adopted in 1996, and retained in 2000, declares: “We respect the individual conscience of each American on this difficult issue, and we welcome all our members to participate at every level of our party.”⁴²

Bart Stupak believes there should be an effort to gain “more of an acknowledgment” of pro-life Democrats in the platform, believing that the current acknowledgment has helped them somewhat. But John LaFalce doesn’t think it has made any practical difference in the way abortion opponents are treated within the party. He said it was just “a device to prevent pro-life Democrats from joining the Republican Party.” LaFalce believes that a long-range goal should be to strike the abortion plank so the party would be neutral on the issue. Senator Nelson would like to have neutrality, too. “I think that the issue is extremely important,” he said. But he holds that it’s a matter for each candidate and should not “be driven by a party platform.” Ray Flynn believes the current goal should be neutrality, and the ultimate one “a pro-life position.”⁴³

No one, however, has any illusion that it would be easy to knock out the abortion plank. Abortion forces, regarding the effort as a declaration of war, would roll out their heavy artillery in response. Without a pro-life presidential candidate—and a strong one—it would be nearly impossible to force a vote on the convention floor. But proposing neutrality at platform committee hearings, and having delegates who are prepared to fight for it, would begin an educational process that is long overdue. The process should be continued, year after year, at both state and national levels. If done with intelligence and a certain pizzazz, and if combined with key election victories, it would have a chance of ultimate success.

Other Ideas

Representative Mike McIntyre, a pro-life Democrat from North Carolina, made several suggestions about efforts to influence the party. Pro-life Democrats, he advised, should be equipped with solid factual information and “should not be shy to use” information from any substantial research or policy group, whether on the right or left. They should be active at every level of the party. Polling has shown that grass-roots Democrats in North Carolina tend to be pro-life, McIntyre said, but activists on the other side win simply because “they show up.” Democratic leaders at the precinct and county level, he added, usually “are hungry for *anybody* to participate.” But, he cautioned, “to be effective, you also have to be multi-faceted”—that is, involved “in a variety of issues that affect the party and affect the people.” He also suggested a need “to pray for wisdom,” not assuming that one knows it all.⁴⁴

Mary Ann Bouey, former president of United for Life of Northern California, stressed the importance of understanding politicians who may not always sound right, yet manage to vote right. She recalled a state senator who always insisted, “I personally support a woman’s right to choose,” yet still managed to vote pro-life. “It was a beautiful piece of politics,” she said, and she was happy to have his vote. Bouey also noted the value of “small victories” that can be expanded. And she advised thanking and praising politicians whenever they do something right. The bottom line: “*Make friends.*”⁴⁵

Talking Points

Opinion polls cannot decide the right or wrong of an issue. On the other hand, the noblest human-rights causes go nowhere without public support. And political activists know that *intensity* of support makes a great difference in elections.

Exit and post-election polls show that for voters concerned about abortion, those who oppose it are far more likely to be single-issue voters than those who support it—what the National Right to Life Committee has called a “pro-life advantage” of two percent or higher.⁴⁶ This translates into enough votes to swing many close elections to the pro-life side. While abortion doesn’t trump all other issues (for example, economic issues in hard times), it often puts Democrats at a serious disadvantage. An NRLC handout on this subject cites leading polls such as CBS/New York Times, Wirthlin Worldwide, Zogby International, Los Angeles Times, and pollster Mark Penn. When asked about it, press aides at NARAL Pro-Choice America and the Democratic National Committee didn’t challenge the information in the handout by citing

contradictory polls. They said they had nothing on the subject.⁴⁷

David Carlin, the Rhode Island writer and activist, suggested that Democrats lost control of the Senate in 2002 because pro-life voters “provided the margin of victory” for Republicans in close Senate races such as those in Minnesota and Missouri. He added: “But that doesn’t seem to bother anybody in the leadership levels of the Democratic Party. . . . They lost an election, and they don’t care.” Referring to earlier elections as well, Carlin said: “They’ve lost the Senate; they’ve lost the House; and they’ve lost the presidency. And I would argue that the pro-life voters provided the margin of victory, probably, in all three cases.”

He believes that pro-abortion forces within the party are “ideologues . . . and it’s no good showing them that this principle they believe in is causing defeats.” He described their mindset as, “Well, you know, *one* of these days we’ll win. And as long as we maintain our strength within the party, then we come to power at that point.”⁴⁸ That is just what happened during the Clinton-Gore administration.

The rest of the party, however, pays a high price: years of wandering in the wilderness with the abortion albatross around their necks. Party leaders—and labor leaders, especially—should review polls showing that even many Democrats do not agree with the party’s all-out support of abortion. In a national poll by the Los Angeles *Times* in late 2002, 28 percent of Democrats opposed the *Roe v. Wade* decision. That percentage rises dramatically on some specifics. Early in 2003, for example, the *Times* found that 53 percent of Democrats supported a ban on partial-birth abortion. A CBS News/New York *Times* poll, also in early 2003, found that 21 percent of Democrats thought that abortion “should not be permitted” and another 35 percent believed it “should be available, but under stricter limits than it is now.” So 56 percent of Democrats do not agree with their party’s support of abortion on demand.⁴⁹

Finally, abortion kills vast numbers of unborn children who, if allowed to live, would grow up to be Democrats. Poor and minority women—facing high costs of housing, food and clothing for children—have far higher rates of abortion than do white, middle-class women. In the year 2000, according to the Alan Guttmacher Institute, 59 percent of U.S. women obtaining abortions belonged to minority groups and 57 percent were low-income. (Not all were destitute, but all were below 200 percent of the official poverty level.) In states with broad, “medically necessary” Medicaid coverage of abortion, “women with Medicaid coverage had an abortion rate more than four times as high as women without such coverage . . .”⁵⁰

By supporting abortion, and especially public funding, the Democratic

Party is helping to kill off a huge part of its natural constituency—millions of potential voters. From 1972 through 2000, abortion took the lives of over 13 million non-white children in the United States.⁵¹ Perhaps Democratic Party leaders should not be surprised by their difficulty in winning elections today. They are paying the penalty for having transformed their institution from the party of hope to the party of abortion.

Philosophical Debate Is Important, Too

At its best, the Democratic Party has welcomed fierce debates. Onlookers often had the spirit of the Irishman who happened upon a group of men who were fighting and asked—as he stripped off his coat and rolled up his sleeves—“Is this a *private* fight, or kin anyone jine in?”

That was before political correctness descended on Democrats like a giant wet blanket. Pro-life Democrats can do the party a great service by showing that the robust debate it used to honor is still possible. But they must frame the argument in secular terms for the many Democrats who are secularist in outlook.⁵²

Democrats for Life leaders, like other pro-lifers, generally have strong religious motivation for their work. This does not call for defense or apology; after all, most of the great movements for social change in our history have been religiously inspired in whole or part. But it does call for caution, given the human tendency to stay with the people we know and agree with instead of reaching out to others.

The latest convention of Democrats for Life of Texas, for example, was held at Our Lady’s Maronite Catholic Church in Austin. There are Democratic atheists, agnostics, Jews, Hindus, Muslims and Buddhists who might be willing to listen to the pro-life case, but would rather hear it in a public-library meeting room or a college lecture hall. Lois Kerschen understands the problem. “Every time, I try to encourage people not to have the convention at a church,” she said, “but usually that is the most convenient, the easiest to get, the least expensive, and so forth.”⁵³ Good organizing, though, requires giving up convenience in favor of effectiveness.

Pro-life Democrats can challenge the tendency, which is quite strong in the Democratic Party, to view abortion as strictly a women’s issue. This lets men off the hook too easily. Many of them would rather pay for an abortion than help support and bring up a child. It is easy for them to proclaim themselves “pro-woman and pro-choice” as a cover for their self-interest. Yet, having brought a child into existence in a state of dependency, *both* parents have an obligation to protect the child from harm. Insisting on this point encourages those men who want to be responsible parents, but have the

mistaken notion that they have no right to debate a “women’s issue.”

Pro-life Democratic women can talk about the cruelty of placing women in an adversary relationship with their own children—of presenting death for a child as a benefit to the child’s mother. If abortion is good for women, they can ask, why do many women suffer guilt and remorse for years afterwards? Why are many now involved in the pro-life movement, urging other women not to make the same mistake they made? Why are the lead plaintiffs in the two cases that led to legalized abortion throughout the country—Norma McCorvey, the “Jane Roe” of *Roe v. Wade*, and Sandra Cano, the “Mary Doe” of *Doe v. Bolton*—now urging the courts to overturn those decisions?⁵⁴

In supporting abortion, the Democratic Party discriminates against the entire class of unborn children. This comes from the party that is supposed to stand up for the weak and defenseless—the little guys of our society—and to champion the interests of children. It is hard to see how such a contradiction can survive open debate. Moreover, what the Libertarians for Life call a two-tiered system of justice undermines justice for everyone. Based on the idea that one can be a human being and yet not be a human *person*, this system defines superior humans who have rights and inferior humans who do not. As Republican Representative Ron Paul of Texas once said, “Abortion on demand is the ultimate State tyranny; the State simply declares that certain classes of human beings are not persons, and therefore not entitled to the protection of the law.”⁵⁵

In practice, legalized abortion also discriminates against poor people and minorities, as we’ve just observed. Democrats who support it can argue that this is not what they intend. More to the point, though, is the intention of the white elitists and eugenicists who started population control with the goal of suppressing the birth rates of groups they viewed as inferior. They knew that the pressures of poverty—combined with targeting allegedly inferior groups for sterilization and other birth control—would reduce the birth rates of those groups. Their successors pressed for legalized abortion and public funding of abortion for the poor.⁵⁶ The Democrats, champions of civil rights, are long overdue for a debate on this lethal form of discrimination.

The Consistency Ethic

As noted earlier, Democrats for Life of America opposes the death penalty as well as abortion and euthanasia. While it has no stated position on war, it is a member of the Consistent Life network, which does oppose war. There are differences of opinion among Democrats for Life—and among members of Congress they admire—over both the death penalty and war.

But Democrats for Life president Carol Crossed is a longtime opponent of both, as well as abortion.⁵⁷ So are many other Democrats who are attracted to her group.

Conservative pro-lifers generally oppose the consistency ethic, partly because some liberals have hijacked it to use as a cover for pro-abortion politics. Yet the bedrock pro-life convictions of advocates such as Crossed, proven time and again over decades, cannot be questioned. And the conservatives overlook a key point: By refusing to support pro-abortion candidates, pro-lifers on the left help elect candidates they agree with on abortion but disagree with on war, the death penalty, the social “safety net” and other issues. At times they feel that *they* have been hijacked and used for agendas they oppose—and oppose on ethical grounds. They believe that napalm, anti-personnel bombs and nuclear weapons involve ethical issues just as serious as those raised by abortion suction machines. They know that war kills many innocent people: children, born and unborn, as well as elderly, disabled and sick people who have no means of self-defense. They believe that the possibility of killing the innocent is one of the strongest arguments against the death penalty.⁵⁸

Consistent-ethic liberals do not expect the pro-life movement as a whole to take up the other issues. But they cannot forget them or, in conscience, do nothing about them. The Democrats for Life organization offers them a rare opportunity to work for all of their deepest convictions. It also offers them a chance to keep asking their fellow Democrats: “Why don’t you support non-violent alternatives to abortion?”

Although an advocate of the consistent-ethic philosophy, I have long thought it a mistake to toss welfare issues into the mix as though they are on the same level as abortion, the death penalty, euthanasia, and war. Whether one supports rent subsidies or the food stamp program is just not on a par with whether one supports direct killing. And some Democrats, including pro-life ones, are so eager to support government social programs that they forget their Jeffersonian, small-government roots. An immense and powerful government invariably threatens civil liberties and tends to view citizens as its wards instead of its masters.

On the other hand: While Congressman Oberstar overstated the case when he remarked that “Republicans will get you born, but you’re on your own from then on,” some Republicans and conservatives are oblivious to problems at the bottom of the economic heap. Juxtaposing their resistance to a minimum-wage increase with today’s high cost of housing, it’s fair to ask: “Where do they think poor people can *live*? How do they think hard-luck folks can take care of their children on the pathetic wages they now have?”

One need not accept the entire Democratic agenda in order to agree with Bart Stupak's comment: "We're not afraid to say, 'Hey, increase the minimum wage. Let's make sure that, if you're going to have welfare reform, that it's really going to work . . . We want to make sure there's a public safety net to take care of everybody.'"

Because pro-life Democrats are, as Carol Crossed emphasized, "not recycled Republicans" but real Democrats, they are in a strong position to challenge others in their party. Their leaders have the skills and dedication to do so. What they mainly need at present is more money and more activists at all levels. Some of their activists—and nearly all of their incumbent candidates—need more chutzpah. As Marylander Joseph Barrett declared: "The Democrats for Life have to stand up and say, 'This is who we are. From life to natural death, we'll fight.'"⁵⁹

NOTES

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12. Leo LaLonde, first interview by author, 16 July 2003, transcript; and Bill Salisbury, "DFL Refuses to Seat Abortion Foe," *St. Paul Pioneer Press*, 18 Sept. 1984, 10-A. The state party's formal name is Democratic-Farmer-Labor (DFL) Party.
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Pro-Life Capital

Stephen Vincent

Washington, D.C.—frequently seen by pro-life and pro-family advocates as a stronghold of their opponents—has become increasingly friendly to the culture of life. Pro-life is spoken there with more confidence and clarity, and the issues dear to the movement's heart have been getting a better hearing within the corridors of power. Groups promoting life and the family have been forming unprecedented alliances to advance their shared mission, galvanized by the partial-birth abortion debate, and the need to appoint pro-life judges. The decision by the Massachusetts Supreme Judicial Court to allow homosexual marriage has signaled the next great battle, which will be fought through the 2004 elections and beyond.

With a Republican majority in both houses of Congress and a president who defends the traditional family and recently signed the Partial-Birth Abortion Ban into law, the cause of life looks brighter than it has in many years. It may be too soon to call Washington the pro-life capital, but it is certainly a center for thought and activities that are providing guidance and encouragement to pro-lifers throughout the nation. During Bill Clinton's long eight years, pro-lifers looked at Washington as a dangerous battlefield with a safe outpost or two. Now they can look to it as a base of operation, where the cause may be advanced and maybe one day won.

Even a partial list of pro-life and family groups based in D.C. is impressive: the National Right to Life Committee, the Family Research Council, Concerned Women for America, the Alliance for Marriage, Feminists for Life, the Susan B. Anthony List, the U.S. Conference of Catholic Bishops and its Pro-Life Secretariat, the Catholic Family and Human Rights Institute, and Women and Children First Foundation.

Though you won't often hear these organizations mentioned favorably in the liberal print media or TV network news, their leaders appear on national talk shows, are quoted regularly in newspapers, get their op-ed pieces published, lobby on Capitol Hill, and reach out to millions through their mailings and Web sites. Their increasingly influential network strikes a supportive chord through the mainstream of America.

Bringing all of these groups together for one day each year is one of the oldest and most widely supported pro-life events, the March for Life. Held each January to mark the 1973 passage of *Roe v. Wade*, the march begins

Stephen Vincent writes from Wallingford, Conn.

with a rally on the Ellipse and proceeds along Constitution Avenue and past the Capitol to the steps of the Supreme Court. More than 100,000 pro-lifers turn out annually, and, in recent years, young marchers have increasingly dominated the parade, bringing unbounded hope and energy, and giving a fresh face to the movement that the liberal media try to hide. Have you ever seen a teen-age girl from the march, her face painted with pro-life roses, pictured in the *New York Times* or *Washington Post*? Spurning the media tags of Gen-X or Y, these young pro-lifers describe themselves as the post-*Roe* generation—people lucky enough to have survived the legal regime of abortion, who mourn the loss of millions of their peers. They are joyful, grateful, and determined to win.

Nellie Gray, president of the March, who has trumpeted the theme of no abortion and no exceptions for more than 30 years, is a Washington veteran who is not overawed by the passage of the partial-birth abortion ban (blocked immediately by federal judges). The theme for last January's march was "Building Unity on the Life Principles," Gray's way of saying that building consensus against infanticide within the halls of Congress is nice but far from enough.

"We haven't gotten the word out that a human being is a human being from fertilization," she said last fall, shortly before President Bush signed the Partial Birth Abortion Ban. "Some have gotten to thinking that it's worse to kill a big baby than to kill a little one, and it's worse to stick scissors in the baby's head than it is to suction him out at an earlier stage. We've got to stop thinking like that and start saying the same thing."

With pro-lifers increasingly going online, the Internet has become a mega-March for Life—a daily gathering place for life advocates to post news, share ideas, offer wisdom, encouragement, and personal stories, and provide a witness to the world. A leading site is LifeNews.com, which compiles the top pro-life stories each day from around the world and provides an array of original reporting as well. Steve Ertelt began the site as the Pro-Life Infonet, sending out daily e-mail bulletins from his Midwest home. After moving to the nation's capital a few years ago, he upgraded the site, adding reporters, opinion writers, and photographs. Many pro-life activists visit the site several times a day for the latest updates on developing stories.

The site has also had an effect on the news. Ertelt's blanket coverage of partial-birth abortion kept the issue alive in the minds and hearts of supporters. His daily, sometimes hourly, coverage of the Terri Schiavo case in Florida produced thousands of e-mails and calls to Gov. Jeb Bush, which no doubt was part of what pushed the president's brother to usher an emergency bill through the state legislature to restore Terri's feeding tube.

One conservative columnist called LifeNews *the* source that must be checked before filing a story on life issues.

Staying Alive

“The amazing thing about the pro-life movement in America is that it is still very much a viable movement,” said Austin Ruse, president of the Catholic Family and Human Rights Institute (C-Fam). “Abortion is still a hot issue that draws debate and heated emotions. You look at Europe and you don’t see the same thing. Over there, abortion has been settled by the legislatures, and abortion policy is not a topic of debate. Over here, where judicial decrees have interrupted the legislative process, it is not settled. In fact, we are gaining momentum.”

Ruse is an example of that momentum, personally and professionally. Started on a wing and a prayer in 1995 as the only pro-life Catholic organization monitoring the United Nations, C-Fam has doubled its full-time staff (to six), built an international e-mail network of 60,000, and opened a Washington office to complement its New York one. The move to the nation’s capital coincided with Ruse’s alliance with the Culture of Life Foundation in D.C., an organization that was well funded but ineffective when he took the helm last year. The move also meshed nicely with his marriage last September to Cathleen Cleaver, spokeswoman for the Pro-Life Secretariat of the U.S. Catholic bishops. They are Washington’s most effective pro-life couple.

Ruse has become a spoiler in UN circles, where he has exposed a population-control and abortion agenda through his weekly Friday Fax e-mails, and lifted the lid on an alarming radical feminist trend at UNICEF. He has sat in on sessions once comfortably closed to opposing opinions, launched a successful worldwide defense of the Vatican’s UN status, and even caused a ruckus overseas when he reported that a German UN representative was taking a stand contrary to his country’s policy on cloning.

In his short time in D.C., Ruse has made other alliances. The Culture of Life Foundation had some unused office space, so he opened its doors to other pro-life groups. Now sharing the same floor in a building on K Street are C-Fam; the Faith and Reason Institute run by *Crisis* columnist Robert Royal; Women Affirming Life; syndicated columnist Maggie Gallagher’s Institute for Marriage and Public Policy; and the Ave Maria List, which seeks to elect pro-life legislators.

“There’s a lot of sharing and cross-pollinization among groups.” Ruse said.

Pro-life networking also extends to the halls of Congress. One bright light is the Values Action Team. Run by staff members of Rep. Joe Pitts of

Pennsylvania and Sen. Sam Brownback of Kansas, the VAT gathers pro-life and family leaders on a regular basis to plan ways to bring their ideas into the public forum. Having a president who has pledged to sign any pro-life legislation they can get through Congress gives the group a sense of urgency, one participant said.

Another network that has the ear of the president's men is known as the Catholic Call, a regular teleconference among prominent Catholic thinkers and Bush staffers. The organizer is Deal Hudson, publisher of *Crisis*, who has hosted a Catholic intellectual Renaissance of sorts in his magazine's pages. He came to political prominence before the 2000 election through his polls demonstrating the power of practicing Catholics to swing votes to pro-life candidates. He keeps readers on the cutting edge of the culture wars through regular e-mail alerts.

To most people, however—and especially to legislators seeking pro-life approval—the National Right to Life Committee (NRLC) is the official voice of the movement. It is also widely recognized as the most effective voice and ranked among the top lobbying groups in Washington. NRLC regularly makes *Fortune* magazine's annual "Most Influential" list. In a survey published last fall in *The Hill*, a publication for legislators, it was ranked eighth among 171 interest groups on health-related issues. It was the only pro-life group listed in the top 25, and it beat out Planned Parenthood Federation of America (12th) and NARAL (14th).

NRLC's success stems from both the savvy of its DC staff and strong grassroots support from 3,000 local affiliates throughout the nation. NRLC has a holistic approach, spending equal effort on lobbying and education, seeking to form public opinion through ads, publications, and other media messages and all the while presenting the case for life on Capitol Hill.

Outlining NRLC's operations, spokeswoman Darla St. Martin said, "There are a variety of methods: meetings with people and legislators, both in groups and one on one, written materials, phone calls. Every year NRLC has a national convention which brings together leaders from all across the nation. This keeps everyone 'on message' and is an opportunity for interaction among pro-lifers. ... We have a department devoted to constant interaction with the grassroots, and our board is made up of representatives from states throughout the country." All means of communication are used: e-mail, fax, phone, U.S. mail, Web site, seminars, regional meetings, print and broadcast ads.

National Right to Life's work on partial-birth abortion is an example of its full-court press on important issues. For eight years, the group did not let the issue drop, even with two Clinton vetoes and a Supreme Court decision against a ban in Nebraska. After Bush was elected in 2000, NRLC saw a

chance to re-launch the federal ban, though even some long-time pro-lifers thought the effort was useless in view of the Supreme Court's stance. NRLC kept illustrations of the procedure before the eyes of the public and pressed legislators on Capitol Hill.

It also fought every step of the way the lies and misinformation of the abortion lobby. Douglas Johnson, NRLC's legislative director, provided a point-by-point refutation of common distortions regarding the number of partial-birth abortions and the stage at which they are performed. This fresh breeze of research and reason seemed to slow if not eliminate the liberal media's uncritical use of pro-abortion sources.

The height of Johnson's work came in a memo, "Partial-Birth Abortion: You Can Look It Up in the Medical Dictionary," in which he reports that partial-birth abortion is not a phony term—as in the popular media phrase "so-called partial-birth abortion." The term is, in fact, found in the Web site of the National Institutes of Science and a site associated with Harvard Medical School, which link to the Merriam Webster Medical Dictionary. Johnson directed his readers to the entry in which partial-birth abortion is defined as "an abortion in the second or third trimester of pregnancy in which the death of the fetus is induced after it has passed partway through the birth canal." Incidentally, Johnson points out, the dictionary does not list any of the "pseudo-medical jargon" used by the abortion lobby to sanitize the procedure, such as "intact dilation and extraction."

A Woman's Place

"Women Deserve Better" is the theme of a powerful new campaign by Feminists for Life (FFL), whose name sounded like an oxymoron at its founding 30 years ago. Serrin Foster has guided the group over the years, invoking the vision of early feminists Susan B. Anthony and Elizabeth Cady Stanton, who saw abortion as an exploitation of women. Patricia Heaton, co-star of *Everybody Loves Raymond*, is the poster woman for the new campaign, which states "Refuse to choose . . . Abortion is a reflection that society has failed women." Speaking about the health and happiness of women, rather than focusing exclusively on the unborn baby, disarms critics who say that the pro-life movement is dominated by men who care about women only when they're in the womb. This approach has opened new doors for the group on Capitol Hill and beyond.

The Women Deserve Better campaign is joined by the U.S. Catholic Bishops Conference, which for 30 years has promoted a comprehensive pastoral plan to inform Catholics about abortion and other life issues. "It's an exciting new way to educate the general public about abortion and its effects,"

said Cathleen Cleaver Ruse.

Concerned Women for America (CWA) bills itself as “the nation’s largest public policy organization,” with 500,000 members in 25 state affiliates. It hosts a nationally syndicated radio show that has more than 1 million weekly listeners and focuses on six core areas which CWA has “determined need biblical principles most and where we can have the greatest impact.” The areas are definition of family, sanctity of life, integrity in education, the fight against pornography, religious liberty, and national sovereignty. “At its root, each of these issues is a battle over world views,” says CWA president Sandy Rios.

“We foster close connections among organizations that share our mission,” said Michael Schwartz, CWA’s vice president for government relations. “There’s a feeling of solidarity and common cause.”

Among the group’s many projects are getting federal Health and Human Services funds for pro-life pregnancy centers to purchase sonogram machines and removing RU-486 from the market. “Two women are dead due to conditions attributable to this poison,” Schwartz said. “The question is when, not if, the next woman will be killed by RU-486.”

Marriage Matters

The Family Research Council (FRC), originally founded by Dr. James Dobson of Focus on the Family, has declared the defense of marriage its top priority for the 2004 elections and beyond. Marriage, the group contends, touches the deepest foundation of biblical faith, as well as the strength and survival of civilization. FRC has continued to push with vigor for life and family under its new president, Tony Perkins, who succeeded Ken Connors, who had taken the post when Gary Bauer stepped down to run for president in 2000. It also works through Family Protection Councils in 38 states.

In January 2003, FRC established the Center for Human Life and Bioethics, which conducts research and publishes papers designed to promote respect for the dignity of the human person. Soon afterward, it opened the Center for Marriage and Family Studies to bring an integrated approach to issues that previously were handled by the FRC’s family studies, culture studies, and legal studies departments.

During the two-day marathon Senate debate staged by Republicans last November to break the Democratic filibuster on four Bush judicial nominees, the Family Research Council stayed the course, holding a 3 a.m. press conference with other groups to demonstrate that conservatives will not sleep when life and family issues are on the line.

Perkins called the homosexual marriage ruling by the Massachusetts court

a “wake-up call for America,” and voiced support for amendments to the state’s constitution and the U.S. Constitution, to write into law the traditional understanding of marriage.

“Marriage is about more than tax credits and other financial benefits,” Perkins said. “It is about preserving the best environment for raising children and the safest, healthiest living situation for adults. Without strong marriages as our bedrock, our nation will suffer a devastating blow.”

Providing academic grounding on the theological, legal, social and personal aspects of marriage is the John Paul II Institute for Studies on Marriage and Family. Based at the Catholic University of America and affiliated with an institute by the same name in Rome, it teaches the Pope’s deep and challenging views on love and marriage. Students who earn advanced degrees from the institute go on to influential posts in the Church, academia, the media, and politics.

If marriage is to be a focus of conservatives in the 2004 elections, a key figure will be Matt Daniels, head of the Alliance for Marriage. As a young lawyer, Daniels years ago began promoting a constitutional amendment defining marriage as between a man and a woman—this at a time when few prominent national figures thought such a drastic measure was needed. But with the Massachusetts decision, the need for something as radical as a constitutional amendment becomes clearer. Daniels has built a diverse coalition with leaders from a range of racial and religious backgrounds, headed by Dr. Walter Fauntroy, who helped organize Dr. Martin Luther King’s March on Washington for civil rights.

Senators Brownback, Rick Santorum of Pennsylvania, and Jeff Sessions of Alabama joined the Alliance for Marriage at a press conference last September. Around the same time, President Bush gave a boost to the movement when he called marriage “a sacred institution” that should be protected the best way possible in law.

The proposed amendment is short and to the point. It states a self-evident truth that nonetheless must be defended: “Marriage in the United States shall consist only of the union of a man and a woman. Neither this Constitution or the Constitution of any state, nor state or federal law, shall be construed to require that marital status or the legal incidents thereof be conferred upon unmarried couples or groups.”

Fresh from victory in the partial-birth-abortion battle, pro-life and family groups based in the nation’s capital are primed, pumped, and pulling together in a fight for the meaning of marriage. It is a struggle that reaches the foundation of our society, and they dare not stand down.

The Empire of Emptiness:

Planned Parenthood's Political Machine

Chuck Donovan

When Frank and Lillie Gilbreth were asked by a visiting matron to head a new local chapter of Planned Parenthood in Montclair, New Jersey, Frank responded with a whistle. When a flock of the Gilbreths' twelve children appeared in the parlor within nine seconds, setting a family record, the lady from Planned Parenthood, one Mrs. Mebane, nearly fainted. "Shame on you!" she shouted. "And within 18 miles of national headquarters."

That memorable scene from *Cheaper by the Dozen* radiates the charm of another era. Today in 2003, the Planned Parenthood Federation of America (PPFA) and its global partner, the International Planned Parenthood Federation (IPPF), are scarcely 18 miles from any womb on the planet. The besieged and politically radical movement that planted its first clinic in a New York City brownstone in 1916 is now one of the largest nonprofit organizations in the world, with more than 60,000 distribution sites, an annual combined budget of more than \$750 million, and an aura of establishment respectability that sometimes belies the group's brute political power and relentless public-relations machinery.

The most recent report by the *Chronicle of Philanthropy* ranks PPFA the 54th largest charity in the United States, which puts it in the company of Princeton University and Notre Dame in private annual receipts. Confirming her agency's status as a most unusual guardian of public health, PPFA president Gloria Feldt was quoted on April 13 in the *Washington Post* to the effect that her group would now enter U.S. presidential politics and "be a presence in Iowa and New Hampshire. It's time for us to be involved at that level," she said. Such is the media touch of PPFA that this statement was accepted uncritically by the *Post*, for PPFA was heavily involved in the 2000 presidential race. Its political wing, the Planned Parenthood Action Fund, financed 500,000 recorded-message phone calls from Barbra Streisand to targeted female voters urging votes for Al Gore. Another 500,000 e-mail messages from Whoopi Goldberg and other Hollywood stars were sent to prospective voters.

PPFA has long been an adept player at national politics. The Action Fund,

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through its Responsible Choices Action Network project, pursues the goal of converting clinic clientele into legislative and political activists for the organization, its government-funding streams, and its policy goals, particularly the maintenance and support of legal abortion. The Action Fund, like some of its pro-life counterparts, including the National Right to Life Committee, is recognized by the Internal Revenue Service as a 501(c)(4) organization. This tax designation means that the organization is a nonprofit and generates little or no taxable revenue but that contributions to it are not tax deductible, as they are for 501(c)(3) charities. These 501(c)(4) groups are free to develop separate Section 527 funds for political purposes, such as voter identification and get-out-the-vote drives, and membership political action committees (PACs) that give money directly to candidates or engage in independent spending on behalf of particular politicians.

The McCain-Feingold campaign finance reform law that took effect the day after Election 2002 essentially banned large “soft-money” contributions to political parties. While it imposed time limitations on “issue advocacy” advertising by 501(c)(4) groups, limits that now face constitutional challenge, it left intact their ability to solicit unlimited contributions from individuals to support such advertising and other voter-motivating activity. The result: mammoth “soft-money” contributions to Section 527 groups like Pro-Choice Vote, the beneficiary of a onetime gift of \$11.7 million from actress Jane Fonda. In fact, three of the top four and six of the top 25 Section 527 groups in the United States, measured in terms of gross receipts from January 2000 to March 2002, were singularly focused on the abortion issue. In contrast, not a *single* pro-life group was among the top 100 Section 527 groups. Planned Parenthood Votes came in at the third largest, according to *Public Citizen*.

Planned Parenthood’s Corporate Enterprise

PPFA’s growing role in political campaigns reflects its overall financial growth—a phenomenon that transcends changes in the political climate in Washington, D.C. In 2002 I undertook a detailed study of its financial and business prowess for the Gerard Health Foundation of Natick, Massachusetts. As the 30th anniversary of *Roe v. Wade* loomed, it seemed more important than ever to understand the social and business proficiency of PPFA, which has found a way to prosper no matter which party controls the White House or Congress. It also seemed clear that any health entity willing to spend so freely in the political arena must be able to generate the kind of excess revenues that elude pro-life groups.

Our study identified the elaborate structures that mark Margaret Sanger’s

brainchild as a corporate enterprise with a New York Stock Exchange-style profile. Over the past few decades, even as its core business of marketing contraceptives stagnated, PPFA developed new functional arms; reorganized and eliminated underperforming outlets; internalized such routine business needs as property management, software development, and insurance; and turned a “profit” nearly every year. Nonprofits do not pay dividends to stockholders or pay taxes, but they can generate income in excess of expenses. For PPFA, net income from 1997 to 2001 was more than \$300 million; nearly \$126 million of that was in 1999 alone, the second to last year of the Clinton era.

Margins like these are all the more remarkable given the fact that there has been little change in the group’s client base, except in a few key areas. In 1990, for example, PPFA saw 1.8 million women for contraceptives. By 2000 that number had climbed only to 1.87 million, an almost negligible increase. (Men continue to populate sports bars at a much higher rate than they visit PPFA clinics—PPFA saw an average of one male patient per week in its 875 clinics nationwide in 2000.) During the same period, however, total PPFA income more than *doubled*, from \$331.5 million in 1990 to \$672.6 million in 2000. Even allowing for inflation, it’s hard to believe that the organization’s per-patient costs could have increased so dramatically in the 1990s.

Where does PPFA have significant client growth? Interestingly enough, only among abortion patients and women seeking the “morning after” pill. From 1990 to 2000, PPFA’s abortion turnstile clicked at an increasingly rapid rate, from 129,155 times in 1990 to 197,070 in 2000. The growth is all the more impressive given that the total number of U.S. abortions reported to PPFA’s research arm, the Alan Guttmacher Institute, declined by 300,000 over this period. Emergency contraception prescriptions, a megadose of oral contraceptive pills that women use “the morning after” intercourse in a process that’s occasionally abortifacient, jumped threefold—to 310,000—in a single year. Even the number of male and female sterilizations performed at PPFA is down significantly. The challenge to the organization’s reproductive hegemony is a daily concern: Each year PPFA must replace more than four in ten of its clients who either “graduate” from its programs or fail to return for continued services.

The Government Pays the Way

One genius of the PPFA enterprise is that despite its greening balance sheet and ever-deeper involvement in abortion over the past ten years, it has steadily enlarged its federal subsidies. While weaknesses and inconsistencies in the way government financing is reported on IRS tax returns make exact calculations of PPFA’s publicly funded share precarious, my analysis

of the most detailed IRS 990s for PPFA affiliates suggested a government contribution of just over 39 percent. If that number holds up across the entire organization, then PPFA had income of some \$262 million from government sources in 2000. PPFA's 1999 annual report, however, asserted that 30 percent of its total revenue comes from government grants and contracts. Accepting PPFA's own percentage brings the number to at least \$202 million. Either way, Margaret Sanger's campaign for free love continues to cost the taxpayer a heady sum.

Election of more pro-life members of Congress has resulted in some significant legislation but not—at least not yet—any reduction in the largesse PPFA enjoys from the U.S. Treasury. With Republicans in control of the White House and both chambers of Congress this year, the United Nations Population Fund has been denied a \$35 million appropriation, unborn children have been deemed eligible for coverage under the Child Health Insurance Program, abstinence-education funding has been increased, and a new ban on partial-birth abortion is likely to become law. On the other hand, Congress has infused more money into Title X of the Public Health Service Act, the major conduit for family-planning grants that allow PPFA and other groups to expand the scope of their services or open new facilities. For decades, PPFA has used such grants to launch new initiatives and new affiliates, some of which receive more than 70 percent of their income from the government.

However, although tax subsidies to PPFA have increased, it can't spend all the money. The excess income is being channeled into six-figure salaries, stock market and other securities investments (one PPFA affiliate in Iowa invested, appropriately enough, in Victoria's Secret stock), and real estate that PPFA affiliates purchase and then rent from one tax-exempt entity to another—a common but very smart tactic for nonprofits. The money recirculates within the organization and bolsters its overall balance sheet.

Title X funds actually dwindled in the 1980s as the Reagan administration and George H. W. Bush blocked reauthorization of the program and sought passage of a new abstinence-education law, the Adolescent Family Life Act. But with the election of Bill Clinton, the floodgates opened and Title X spending ballooned from \$150 million in 1992 to \$239 million during his last year in office. The new momentum for Title X continued into 2003, as members of Congress spread butter on both sides of the bread, dramatically increasing abstinence funding while boosting Title X appropriations to an annual level of \$275 million. PPFA centers receive roughly a quarter of this sum.

While public funding is critical to PPFA's success and central to its claim

to represent the American mainstream, the group's official strategy dictates financial diversification. PPFA claims 700,000 donors. A loose definition might be at work in defining so many donors as active, but there's no doubt that PPFA garners huge sums from direct-mail donations, major gifts, the "usual suspect" foundations, as well as, for IPPF, most Western governments and Japan. In fact, IPPF in 2000 drew more than 86 percent of its income from government sources, raising less than \$2 million from individuals. IPPF's agility in managing its government sponsors is so refined that within a year, it was able to appeal to foreign governments and recover 60 percent of the money it lost under President Reagan's pro-life Mexico City policy.

The Pro-Life Movement Must Adapt

How can pro-life organizations cope with an opponent with so much public investment and such a well-developed strategic vision? For 30 years right-to-life activists have pursued a contrasting strategy. We have aimed to win legislative victories, not government contracts. We have held oratorical contests to sharpen our arguments, not national training seminars for executive directors, as PPFA does through the National Executive Directors Council, a separate ad hoc entity. We have viewed government as a force to be restrained, with prohibitions on funding practices to which we object, not as an ally to be harnessed for service to the goals of maternal and child health and sexual restraint. We have stinted on funding high-quality research, while PPFA has taxed its local centers to pay for research projects that anticipate and refute our arguments.

Schools of public health now train the next generation of PPFA leaders, and a new 25-year strategic plan for PPFA envisions the perpetuation of abortion-on-demand and the institutionalization of the group as one of the ten best places to volunteer and work in America. Right-to-life groups often state that they are working to put themselves out of business. PPFA has no such desire, and as a result advocates of life should be under no such illusion. The tangle over the sanctity of human life, and the ultimate meaning of human liberty, is the human condition. It will last as long as humanity itself, and it's likely—as the debates over cloning and stem-cell research teach us—to intensify before it ebbs.

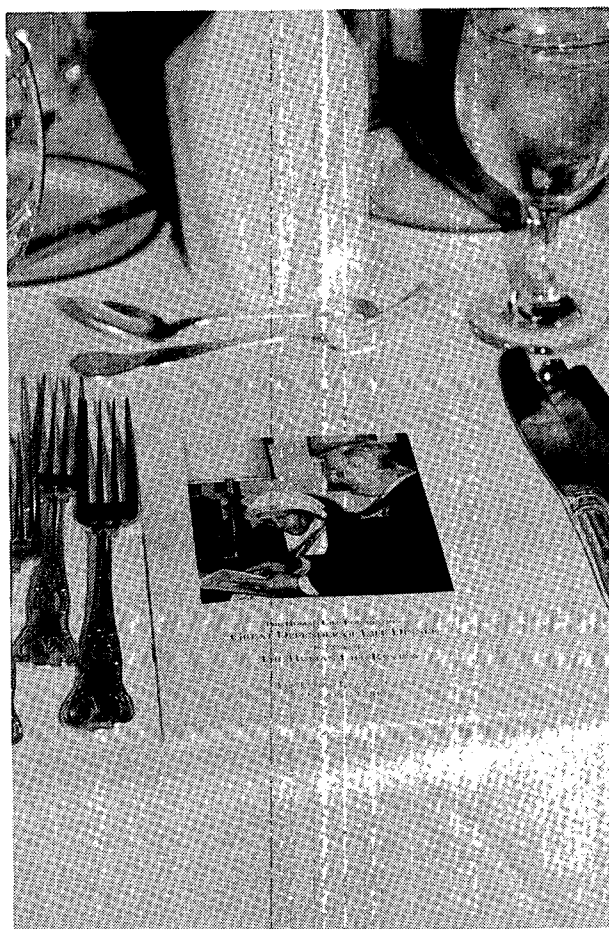
Fortunately, one component of President George W. Bush's compassionate conservatism is a vision of government that actively supports, rather than undermines, family and faith. It is a vision that will be anything but easy to realize, but it contains some of the seeds of a pro-life renaissance. Just as it's impossible to imagine serious progress being made against abortion in an environment where PPFA's government funding is soaring, it's

impossible to believe that a culture of life can be built when the nation's health-promoting institutions—especially the Department of Health and Human Services and the U.S. Agency for International Development—underwrite and encourage a culture of death.

Unlike PPFA's New York Stock Exchange-caliber organization chart, the right-to-life movement looks like a Rube Goldberg improvisation, featuring ordered chaos that produces occasional success. Its 40 largest organizations have a combined income under \$100 million per year, live a paycheck-to-paycheck existence, and seldom draft or follow strategic plans. That the pro-life movement has accomplished as much as it has while being organizationally overmatched is a tribute both to the workings of Providence and to the strong residue of pro-life sentiment in the American populace. The most recent national election brought pro-life gains in both houses of Congress. President Bush has engineered a tremendous victory against tyranny overseas. But we have been here before. In 1980 and in 1991, to be precise. The time has come for pro-life leaders, especially the generation that fought so many long and noble hours from 1973 to the present, to recheck and renew their game.

The pregnancy-care and abstinence movements are among the most impressive spontaneous social phenomena in American history. With the encouragement of national networking groups like Heartbeat International, CareNet, the National Institute of Family and Life Advocates, and the National Abstinence Clearinghouse, local groups have made real progress in medicalizing and marketing their services. They have drawn upon new resources in high-quality advertising, in ultrasound technology, and in survey research to help in such areas as promoting adoption and delivering abstinence education. They are perceived positively across the political spectrum, even as the depth and the details of their programs are not yet fully understood by the general public.

With any grace, and with the benefit of a second term for President Bush, the next phase of the work of these groups can begin. And if it does, it will start with something like PPFA's sense of shared purpose, a desire to fuse volunteer spirit with professional excellence, and a conviction that government in the 21st century *can* affirm such values as life, marriage, family, and fidelity. If it continues, it will continue with new bonds of prayer and action among Catholics and evangelicals who recognize the transcendent meaning of their missions to mother and child. And if it succeeds, it will succeed with a renewed sense of the riot of life and the joy of generosity.



**The Human Life Foundation's
Great Defender of Life Dinner
October 17, 2003**

Our Great Defender of Life Dinner

When a member of our Foundation's Board "challenged" us with a suggestion that we host an Event—a fundraiser that would also introduce new people to the *Human Life Review*, perhaps an *Award Dinner*—honoring someone who'd helped the pro-life cause—our first reaction was, well, *trepidation*. A good idea, we thought, but how can we "do" a Dinner? So few of us, so many deadlines. We don't have the time or the know-how, etc. But then we thought of Congressman Henry Hyde, whom our founder (and my husband) J.P. McFadden had dubbed "the Generalissimo"—surely Jim would want him honored for his eloquent defense of life? And wouldn't Jim also want to thank all those who had continued his legacy . . . and wouldn't we want to honor Jim, too? So—in due course—we rose to the challenge, and decided upon a date: October 17th, 2003, exactly the fifth anniversary of Jim's death. Planning began in June, and invitations went out right after Labor Day.

. . . And so it came to pass that our *Great Defender of Life Award Dinner* was actualized on the evening of October 17th in Manhattan's historic Union League Club, with old and new friends gathered for cocktails, conversation, and dinner. It was a marvelous evening—"magical," as one guest said. The crowning moment, of course, was the presentation by William F. Buckley of the Award to Congressman Henry Hyde, whose *presence* was something of a miracle, because he'd been debating in Congress till the wee hours that Friday morning, then detained for a vote till 2:20 that afternoon—and at 3 o'clock he was on the train to New York! Mr. Hyde should have been exhausted, but he emanated warmth and energy and his presence was powerful when he rose to accept his award; his words were so beautiful that many of us were moved to tears.

We had also often been moved to *laughter*, during the "Remarks" that evening: in the following transcript, you'll have to "fill in" *laughter* and *applause*.

Our Master of Ceremonies, Edward Capano—publisher of *National Review*, founding publisher of the *Human Life Review*, led off and kept the program moving along briskly with style and wit.

FAITH MCFADDEN
SENIOR EDITOR

GREAT DEFENDER OF LIFE DINNER

Welcome: Edward Capano

Before we get started with the program, I'd like to ask Father George Rutler to give the Invocation.

Father George Rutler:

I'm impressed with how prompt we are tonight and well organized. Evelyn Waugh, whose hundredth birthday will be celebrated next week, said that punctuality is the virtue of the bored. No one could possibly be bored on this day, especially October 17th because many wonderful things have happened on October 17th.

In 1483 the great Pope, Sixtus the Fourth launched the Spanish Inquisition, and he appointed his Eminence, Tomas Cardinal Torquemada as Grand Inquisitor. But on a less happy note, on this day in 1931 Mr. Al Capone was convicted of income tax evasion, and in 1979 on October 17, the Nobel Peace Prize was given to Mother Teresa of Calcutta.



Fr. George Rutler gestures towards a portrait of Elihu Root.

There's one Nobel Peace Prize recipient in *this* room; that portrait over there, Elihu Root's, 1912. Otherwise, Mother Teresa joins the ranks of such as Jimmy Carter, Yasser Arafat, Desmond Tutu and Rigoberto Manchu, and a woman whose book, *Lay Down Your Arms*, got her the Nobel Peace Prize and made her name a household word, the Baroness Bertha Sophie Felicita von Suttner. There was one who was *not* given the Nobel Peace Prize: Pope John Paul the Second, and it is said that that was because of his views on abortion. Some said that anyway. Well, the Pope can manage without any

prize. The Pope's not supposed to receive a prize. Jesus Christ was never made a Monsignor, as a matter of fact.

When John Henry Newman was finally—nearly aged eighty—made a Cardinal, *Punch* magazine had a ditty: *A Cardinal's hat for Newman; fancy that. For a Crown o'er the gray temple spread, 'tis the great and good head that will honor the hat, not the hat that will honor the head.*

Mother Teresa said many things about peace. And she said that the surest way to make war is to attack the most innocent life. Mother was a very practical woman. Actually I'm bilocating right now, because I think I'm at this moment on CBS talking about her. I taped the program. And one thing I quoted about her I hope they do show.

There was a conversation I had with her on one occasion when she had been misquoted in the newspapers. She was most insistent that I write an article explaining what she had actually said. And I, under the burden of piety, said, "Well, Mother, I will pray about it and then I will write it." "No," she said, "we need it right away. *I pray and you write.*"

I think she's praying for all of you at the *Human Life Review*. I know she's doing that.

Some years ago at a prayer breakfast in Washington, Mother Teresa spoke on human life. The former president and his wife and his vice president and the vice president's wife all took gulps of water at what she said.

And we have a president now who doesn't have to do that. President George Bush issued a message on the 25th Anniversary of the Pontificate of His Holiness Pope John Paul the Second; a brief message. And half of it was about life. He said: "For the past twenty-five years, His Holiness has undertaken worldwide efforts to develop a new culture of life that values and protects the lives of the innocent waiting to be born. He has also brought the love of the Almighty to people of all ages, particularly those who suffer or live in poverty, or who are weak and vulnerable. Pope John Paul the Second has shown the world not only the splendor of truth, but also the *power* of truth to overcome evil and to redirect the course of history."

Well, that power of truth is on the side of the *Human Life Review*; and we give thanks to God for that. So I bid you pray. In the name of the Father and of the Son and of the Holy Spirit: Almighty God, our Heavenly Father, Thou has created us in Thine image, and desirest that not even the least of us should perish, and did say that little children are the sign to us of the Kingdom of Heaven. We ask You to bless and protect the innocent, and to stay the hand of the guilty, and forasmuch as without Thee we can do nothing that pleases You, mercifully grant that the *Human Life Review* and all who share in its endeavors may prosper, all its benefactors may flourish and become

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ever more worthy of Thy confidence. Bless all who are gathered here. Bless this food to our use and make us ever mindful of the needs of others, through Christ our Lord, Amen.

Edward Capano:

Tonight we gather to remember Jim McFadden, to honor Henry Hyde, and to recognize the work of the *Human Life Foundation*. And to that effect, I would like to thank Maria and Faith for asking me here tonight. I consider it a great honor and privilege to do this. I also congratulate them for the superb job they have done, along with Anne Conlon and Ray Lopez and Rose DeMaio, for keeping Jim's work, and his dreams, alive.



Emcee Edward Capano calls the dinner "to order."

There is another person I'd like to thank who was also there at the beginning, who was not only helpful to the *Human Life Foundation* but to *National Review* as well; Tom Bolan. Tom is the heart and soul of conservatism in New York, and has been the attorney for the *Human Life Foundation* since 1974, the year he incorporated it. The only greater love that Tom has, outside conservative politics, and right to life, is the New York Yankees.

The main reason that Faith and Maria asked me to be a host tonight is because I'm the only one aside from Tom who's been around since the beginning, and I remember everything, almost.

Jim and I first met in 1960 when, as a sophomore in college, I got a part-time job at *National Review* working in their circulation department. The first day on the job I was asked to put into geographical, alphabetical order a thousand addressograph plates. Now this is pre-computer times, and if you don't know what an addressograph plate is, you're lucky. Anyway, I looked at this formidable task, and I sat down in a little office they put me in and I closed the door and stared at it. About fifteen minutes later, the door burst open and this man with horn-rimmed glasses and a pipe clenched firmly in his cheek looked at me and said, "What the heck are *you* doing in here?" And I looked up and I said, "Who the heck are *you*?" It was the beginning of a wonderful friendship.

Jim and I had many things in common. Faith, his lovely wife, became a Catholic, was baptized on my birthday; Faith and Jim met three years later on my birthday; Margie, my wife, and I were married on Faith and Jim's fifth anniversary and Jim was the Godfather of my youngest son.

And one of the nicest compliments I've ever received was from Jim, after his testimonial dinner, which was held in this room. There were photographs being taken that night, and he had one photograph in particular that he signed to me. And he signed it "To Ed. The *sine qua non* of so much of me." I treasure that picture.

When *Roe v. Wade* was handed down on that fateful day in 1973, I remember vividly the outrage that Jim expressed, and the need to do something. So we repaired to our favorite little thinking spot—now remember I said *thinking*, not *drinking*—Pino's Restaurant. And over a glass of Chianti and a couple of bowls of linguine with red clam sauce, we finally decided to do what we did best, which was publish.

The result of that meeting was *Lifeletter*, a four-page newsletter written by Jim, with the object of avoiding the fate of the school prayer amendment—by keeping the pro-life issue alive in the media. He considered the newsletter a form of pamphleteering.

Two years later the first issue of the *Human Life Review* was published. The *Review* had a different mission; to publish the most cogent arguments available in defense of life, knowing full well that the pro-abortion side couldn't do the same, because their position was intellectually indefensible. The *Review* became the pro-life debater's bible.

When *Roe v. Wade* was handed down as the law of the land, all the talk centered around proposing a constitutional amendment outlawing abortion;

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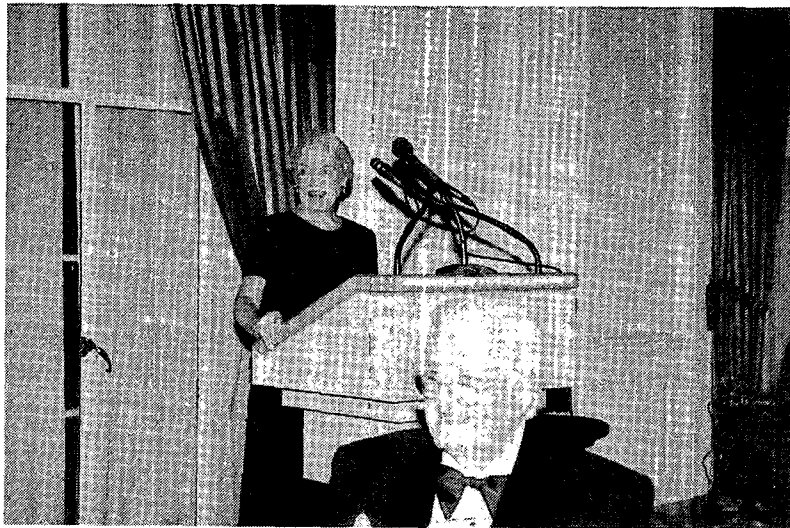
a formidable task under any circumstances. There were ongoing debates as to what form the amendment should take and how restricted it should be. Amendments were written and submitted, but eventually that movement stalled . . .

But the fight wasn't over. There arrived on the scene the posse in the form of the great champion of the pro-life movement: Congressman Henry Hyde, who Jim lovingly referred to as the *generalissimo*. It was Congressman Hyde who as a Freshman in 1976 devised a unique strategy; the eponymous Hyde Amendment, a rider to annual appropriation bills that prohibited federal funding of abortions, which alone resulted in the saving of millions of lives of unborn babies, and even now continues to do so. Personally, I think all of those children should have been called "*Henry*." Aside from that, the next best thing of course was to bestow on him the Great Defender of Life Award, which will be done tonight.

You all remember that old joke that behind every successful man there is a woman, pushing. Well, Jim never needed any prodding, but like all of us he did need support and got it abundantly from his lovely wife, Faith. Faith?

Faith McFadden:

Welcome, all of you, from near and from as far as California, Spokane and Chicago. Welcome to this celebration, for that's what this *is*; a celebration not least for our small staff who wondered if we could actually "do" a fund-raising dinner, and for you who have helped to keep my husband's legacy alive.



Senior Editor Faith McFadden welcomes guests from near and far. Congressman Henry J. Hyde is in foreground.

On Friday afternoon, October 16, 1998 Jim left the office at the usual time, expecting to resume pounding away on his faithful Royal typewriter early next morning. Death was sudden but not unexpected. He was ready. He had done everything possible to keep the *Human Life Foundation* and the *Review* afloat. Jim never used the words, “my legacy,” but we knew it was. And we’re here tonight to keep it going, not just for Jim but for all who care about human life from beginning to end.

There are many here I would like to thank personally for your friendship and support; in fact, when I began agonizing over this address, I heard myself saying “. . . and I would like to thank . . .” but then thought *oh, no*. That’s too Oscar Awardish. Besides, I wouldn’t know where to stop. But *you* know who you are, so—heartfelt thanks.

I will, however, mention a very special person who’s on our Board of Directors, and whose birthday it is today: Priscilla Buckley. Most everyone calls her “Pitts,” and she called Jim “Mac,” from the beginning of their friendship and collaboration in the early days of her brother Bill’s *National Review*. Happy Birthday, Pitts.

Before I turn the mike over to my daughter Maria McFadden Maffucci, of whom her dad must be very proud (as is her mom), I’d like to read a letter from a long-time fan of our *Review*, a man with whom Jim had been corresponding for years, sending him every issue, adding personal stuff and always getting back not just thank-you letters, but perceptive comments on specific articles in the *Review*.

Then I began writing to him, kept him updated about Jim’s illness, and he always wrote back with assurances of continual prayers from him *and his boss*: John Paul II. The Pope’s personal Secretary and dear friend of the Pope since 1966 when Karol Wojtyla was an Archbishop, Monsignor Stanislaw Dziwisz wrote his letters to us on *his* faithful typewriter. Then, as he advanced to Bishop and Archbishop, his letters evolved into electronic neatness (like he’d got a secretary, too), and he’d become so important and busy I hardly dared write to him, and certainly not with the expectation that he’d have time to respond, especially then with all the preparations for the Pope’s twenty-fifth anniversary and Mother Teresa’s Beatification. But I *had* written to him, months ago, about this, our first fund-raising dinner; and I’d sent him an invitation, just for his prayers that we would “bring this thing off.” And I’d mentioned our trepidation in hosting a Big Event, but said we’d kept in mind the Holy Father’s dictum: *Be Not Afraid*.

So imagine our surprise and delight when this letter from the Vatican came to me at the office a few weeks ago. [Holding it up] You can’t all see it; it has a lovely Vatican stamp. And when I read this letter, notice Archbishop

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Stanislaw's pronoun "we"—as though it could be a *Papal* we? Anyway, in his words, he wrote: "We thank you for the Spring, 2003 of the *Human Life Review*, yet again another excellent issue. We shall pray for the success of your fund-raising dinner in New York City on October 17th, 2003. From William F. Buckley Junior and Henry J. Hyde, the awardee, to all of those who will toast the *Review*, it is obvious of the wonderful planning that has gone into preparing for the fifth anniversary of the death of J.P. McFadden. Doing all of this as well as preparing for the future publications and with the other challenges along the way that you mentioned, have been a handful, but we know that all of this is being blessed by the hand of our loving God, and so be not afraid. You are ever in our prayers. Sincerely yours in Christ, Stanislaw Dziwisz."

And so, looking at all of you here with us tonight we are reassured and not afraid.

I will now let you hear from Maria McFadden Maffucci, mother of three, President of the Human Life Foundation and Editor of the *Human Life Review*. Maria's article about the how and why of the *Review* is in our current issue which you have in your silver bags. It is factual and personal, and we hope you will all read it. Now here's Maria.

Maria McFadden Maffucci:

Thank you, Mom. I would also like to welcome you tonight, and thank all of you for coming. I believe this evening has already surpassed our expectations and we are absolutely thrilled to have Congressman Hyde here. As my mom said, there are too many illustrious guests here to start singling people out. However, I would like to introduce you to our staff; a small but dynamic group. Rose Flynn DeMaio is our business manager; Anne Conlon is our Managing Editor, and she also writes much of *Catholic eye*, and Ray Lopez is our Production Manager. They were at their desks, Friday, October 16th, 1998 when they said what they would learn would be their final goodbye to J.P. They were back in the office the following Monday, holding things together as Mom and I made arrangements. And they have been with us ever since, staying true through uncertain times.

On the day that my mother and I returned to the office after J.P.'s funeral, we walked in feeling overwhelmed and almost despairing about carrying on what he used to call his empire, which is the Foundation as well as the Ad Hoc Committee in Defense of Life, and the National Committee of Catholic Laymen. Yet somehow, when we left that day, Rose, Anne and Ray had convinced us that we *could* do it. And we have, in no small part, thanks to their hard work and loyalty.

I'd also like to acknowledge an unofficial member of our crew: my husband, Bob Maffucci, whose strength—I know it's not Oscar night, but still—whose strength, goodness and business wisdom are often called on, not just by me but by Faith as well.

Those of you who have been with us for a while know that my brother Robert, who also worked full time for our dad in Washington, was taken from us at the tender age of thirty-three. I wish he were here in body, but I know he is with us in spirit, and I would like to salute him. He was a great admirer of Henry Hyde and he loved a good party. So I am *sure* he is with us.



Editor Maria McFadden thanks subscribers and supporters for "your steadfast support."

As for J.P., I hope he is pleased. He *ought* to be pleased; just about all the people he admired most are gathered in this room tonight. Most importantly, I want to thank all those here who are subscribers and supporters of the Foundation. We absolutely would not be here without you. Tonight is a wonderful chance to meet you and thank you for your steadfast support, and your trust.

Finally, I was pleased to be able to have the book about Mother Teresa in your gift bags. The photo on the cover of Mother holding a beautiful baby, a baby whose face exudes wisdom in that way babies often have of appearing so wise, well—that sums up for me why my father devoted himself to this fight to restore the sanctity of life, and why we will, with your help, and God's grace, continue. Thank you, and enjoy the evening.

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Edward Capano introduces Mary O'Connor Ward:

Mary O'Connor Ward is on the Advisory Council of the American Friends of Assaf Harofeh Medical Center's The John Cardinal O'Connor Project.

Mary O'Connor Ward:

McFadden family, Congressman Hyde, distinguished guests and friends: I never had the honor or the pleasure of meeting James McFadden, but I came to know him. As you may have guessed, that was through my brother John Cardinal O'Connor. At the mention of the name Jim McFadden, you were treated by the Cardinal to an almost never-ending list of qualities that made you think this Jim was a superhero.

Jim and Cardinal O'Connor had a great deal in common. Above all, they were men who shared the courage of leadership, never wavering from speaking the truth.

Mark Twain once said, there is nothing more annoying than good example. Who set a better example than James McFadden by his steadfast defense of life?

As some of you may be aware, Nat Hentoff was expected to be here tonight, but circumstances changed. Although he is unable to be here personally to pay tribute to his good and dear friend, I have been asked to present his remarks to you. I feel so proud and privileged to do so, and hope that I can do his words justice. He has entitled this "The Legacy of James P. McFadden."

Mary O'Connor Ward reads Nat Hentoff's tribute:

Remembering the quick, penetrating wit of J.P. McFadden, I was thinking of him when I saw, in *Lifespan News*, a Michigan pro-life newspaper, a report of a Planned Parenthood poster contest on the theme, "Every Choice Is a Story." It is indeed—if it's life or death. But that was not part of the contest. As noted on Planned Parenthood's website, "Children under age eighteen must have parent or legal guardian's permission to submit their designs [for the poster contest] for us to publish them under their name." Helpfully, the website provided a parental consent form to be signed by the parents.

The various so-called pro-choice organizations, including Planned Parenthood, have often objected to parental consent laws for underage daughters planning to have an abortion. But Planned Parenthood insists that children not old enough to vote must get their parents' consent to enter a poster contest—but not to end a human life.

J.P. McFadden, I'm quite sure, would be interested to learn that, according to a recent study at the Harvard/MIT data center, parental involvement

and informed consent laws have been steadily reducing abortion rates.

However, another life force has been developed to further significantly reduce abortion—3D/4D “Four dimensional ultrasound scanning” that, as the Focus on the Family’s magazine, *Citizen*, reports in the June, 2003 issue, “offers parents the opportunities to see before birth their babies moving with incredible surface detail that delineates facial and body features.”

Doctor Robert Wolfson, a Colorado Springs perinatologist, says that this “creates a commitment to the pregnancy, and the individual on board, from both parents . . . It’s all about the fact that you can fall in love with your child before birth.”



Mary O'Connor Ward reads a moving tribute from Nat Hentoff, who was unable to attend.

This 3D/4D ultrasound scanning is increasingly becoming available, with the result that the choices for life are multiplying—no matter what the Supreme Court, or the Democrats on the Senate Judiciary Committee, to whom commitment to abortion rights is a necessary qualification for the federal judiciary, try to do about the moving clarity of the human lives waiting and eager to join us.

A key part of J.P. McFadden’s legacy is the *Human Life Review*, which is indispensable to those of us who are trying to carry on J.P.’s work.

I was honored to become a friend of John Cardinal O’Connor, and I

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remember him saying that of all the huge number of letters he used to receive, the one he prized most came from, he wrote, “a young woman who had simply heard me say something on television about the right to life of the unborn baby. She wrote to tell me that she had literally been on the way to an abortion. And simply because of hearing what I said on television, she had decided to let her baby live.”

I expect that because of the legacy of James P. McFadden, there are a good many other lives that have been saved.

And having said that, I can imagine J.P. looking at me quizzically and saying to me, “Tell me again why you’re an atheist.” I would tell him what Cardinal O’Connor once told me after the once-wholesale abortionist, Dr. Bernard Nathanson, had converted to Catholicism. “I hope we won’t lose *you*. We don’t have many pro-life, Jewish, atheist civil libertarians.”

You won’t lose me, because if I were ever to falter, I would feel the spirit of J.P. McFadden and straighten right up.

Edward Capano introduces Rita L. Marker:

Rita Marker, an attorney, is the author of the critically-acclaimed book, *Deadly Compassion*, and the Executive Director of the International Task Force on Euthanasia and Assisted Suicide. She is a long-time contributor to the *Human Life Review* and she promised me that if her remarks are not brief, we can throw our dinner rolls at her. Rita Marker.

Rita Marker:

Thank you. I am truly honored to be here, and truly intimidated by the threat of dinner rolls, so I *will* keep my remarks short. I would like to start by telling you about my mother, because whenever I deal with any issues I tend to talk about my family. Now if I had a longer time I would also tell you not only about my mother, I would tell you about my husband, about our seven children, our seventeen grandchildren and our one great-grandchild, at last count. But since I don’t have time for that, I *do* have pictures and if you all want to . . .

When my mother was very, very small, she didn’t live here in the United States. My grandfather had left Yugoslavia to come to the United States and had left my grandmother and my mother and my uncle until it was time to send for them. And finally, it *was* time. And they were going to come from Yugoslavia to beautiful downtown Roundup, Montana.

The way that they were going to get here was on a boat, and it was a brand-new boat. You’ve all probably heard of it: it was the *Titanic*. And my grandmother had the tickets in steerage, but she started to get worried

because as the time approached to be leaving, she was getting cold feet. She wanted to join her husband, my grandfather, in the United States, but she didn't want to leave her family. And so she decided that rather than waiting to get the *Titanic*, which was going to be taking off later but arriving here sooner, that she would do what a lot of people do when they're afraid they'll get cold feet—it's kind of like running up onto the diving board and jumping, you know, without really thinking about it—she traded the tickets in for tickets on another boat on the White Star line—a sailboat.

And so my mother survived. When they settled in, in Montana, my mom still didn't speak much English—a little, but not a lot. And she was so excited when she started school—she thought it was the greatest thing in the world. And one day the teacher asked her to go to the chalk board, and she told her to draw *light* lines (as opposed to thick ones).

And my mother was very proud, and she went to the chalk board and she drew *a barrel*. And the teacher got very, very angry because she drew a barrel. And my mom got very upset because she thought that she had drawn light. Because, in her language, light meant *barrel*. She had heard the word and thought she knew what it meant. And it meant something entirely different.



Rita Marker recalls her first meeting with J.P. McFadden, a "visionary" who was also "really fun."

And eighty years later, she remembered that because it was so emotionally hurtful to her that she thought the word that she understood meant one thing, and it meant something else. But eighty years later, something else happened. She was living in Spokane, Washington at the time, and Washington State became one of those states where there was a ballot initiative to

legalize assisted suicide and euthanasia.

Only it was not called “assisted suicide and euthanasia”; it was called “aid in dying.” And my mom, who by now spoke English so well, thought *aid in dying* meant plumping the pillow and wiping the brow and that “aid in dying” was something *good*. And a lot of people did. Because they thought the words meant what they would ordinarily mean. But they don’t any more.

We have, for example, Caring Friends, which is the spinoff, or a program of, the Hemlock Society which cares for people by helping them put a plastic bag over their head and then connecting a helium canister. But we all know that all *social* engineering is preceded by *verbal* engineering, and that, in fact, when you change the meanings of words, it changes a lot.

And so with my mom and her not understanding the words early on, and fortunately understanding before the vote what those words meant, that’s what the importance, also, is of the *Human Life Review*; of helping people to understand the words, and understand what’s *behind* all of this. To really get in depth, and to truly get a grasp of it.

Back in ’84, I had attended a conference in France that was put on by assisted-suicide activists and advocates. And I was amazed at how very, very well organized, and actually how pleasant they were and how things were moving so fast. And when I came back I decided that I would speak to people who were policy-makers and people who would be able to influence others. So I went to visit four people, and three of the four said, oh, we don’t really have to worry about assisted suicide and euthanasia. You know, it’s not going to face us yet. We really don’t have to focus on that . . .

And then I went to visit with Jim McFadden. Not only did he *get* it, he already had *grasped* it long before *I* had. He *knew*, because he was a visionary, that all life is precious and that we had to be really concerned about life at all ends of the spectrum. He had, after all, written about Peter Singer in 1983, well before he was at Princeton University, promoting infanticide. However, Jim knew. Just as he knew that you had to have *humor* in things. I recall once when Maria called to say they had watched my debate with Jack Kevorkian and his soft-spoken attorney on *Crossfire*. Jim was still laughing the next morning and said, “You’ve got to write about that”—not because it was a scholarly sort of thing; it was just really *fun*. And he *was* really fun.

And that’s something else that’s so necessary when we’re dealing with issues like life—having a sense of humor. And he had that sense of humor. So he was a visionary. He was prophetic. He had a sense of humor. He was absolutely wonderful. And the *Human Life Review* is so absolutely necessary. And the *Human Life Review* has gone on, and Jim’s legacy still lives *because* of what Maria has done, and her wonderful staff, and because of

Faith. They have kept that legacy alive, and it's *saving* lives every day.

And so in memory of Jim, we're here. But also as a salute and a thanks to Maria and Faith and their staff.

Edward Capano reads tributes:

I promise you, you'll be allowed to eat. But I have a few tributes I'd like to read and then we'll get to dinner. The first one is from—well I won't say who it's from. "In memory of Jim McFadden, a doughty advocate, a brave man and a teller of so many good, and what was even more precious, so many *truly awful jokes*"—Rick Brookhiser, Senior Editor, *National Review*.

"Dear Maria: Thanks so much for your invitation to attend the Great Defender of Life Dinner in New York City on October 17th. I'd give my gold inlays to attend, but another commitment makes it impossible to attend on that date. But I love your *Human Life Review* and carry a couple of back issues with me on my trips. I love all of you at the Foundation too"—Joseph Scheidler.

"Please convey to Mr. Hyde my deepest admiration for his tireless defense of unborn Americans. Would that we had just one Canadian legislator who could match his commitment to the pro-life cause. Incidentally, I recall having the privilege of meeting Mr. Hyde, I think, in 1982 when Congressional hearings were taking place on the Human Life Bill. Jim used to call him the Generalissimo, and rightly so"—John Muggeridge.



Peter Travers, Monsignor Kevin O'Brien, Ed McFadden, Maria McFadden Maffucci, Sandi Merle and Mary O'Connor Ward enjoying tributes.

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“Dear Faith: Shelley and I are honored to send you, your family, and all who have gathered with you our best wishes on this wonderful occasion. We can think of no better way to celebrate the miracle of human life than to commemorate the miracle of Jim McFadden’s life.

We are also delighted to join you in paying tribute to Congressman Henry Hyde, the Winston Churchill of the pro-life movement. Eloquence in the service of the sanctity of human life will be Jim and Henry’s legacy. Through the pages of *Human Life Review*, J.P. McFadden both chronicled and made a compelling case against the scourges of abortion, euthanasia and assisted suicide. Future generations will study this life-affirming publication and treasure which Jim’s keen eye and high standards captured and preserved for reflection and action.

What Jim did for the nation from New York, Henry Hyde has done from Washington. He has lent his great voice to the service of the smallest and most vulnerable among us. Like Jim McFadden he has earned a place alongside the Holy Father and Mother Teresa of Calcutta as the champion of life, whose contributions will stand like basalt through that glorious day when the culture of death collapses in ruins. May God bless these two heroes and their families, and may He confirm us all in this vital cause”—Patrick J. Buchanan. [*We were especially delighted with Pat’s letter, which beautifully expressed, we thought, Jim’s and Henry Hyde’s legacy, the raison d’etre of this celebration.* —Faith McFadden.]

Edward Capano introduces Michael M. Uhlmann:

... Mike was the principal drafter of the Human Life Amendment and a founding editor of *The Human Life Review*. He is currently a Visiting Professor of Government at Claremont Graduate University.

Michael Uhlmann:

Well, having heard Father Rutler earlier, I now know what the New York *Times* headline will be in the morning: “Father Rutler comes out, admits to being bilocal.” Well, it’s great fun to be here among friends. Any gathering that celebrates the name of McFadden has to be a family reunion. And indeed it is. I’ve seen people tonight I haven’t seen in ten years, not including bill collectors.

But it’s a *trifecta*; it’s the only trifecta I’ve enjoyed the winnings of. We celebrate the *Human Life Review* which in two years, I think, will enter upon its third decade of publication—no one would have believed it at the beginning—to celebrate the life of Jim McFadden, and we present an award to Henry Hyde. That’s a genuine trifecta. Lovely evening.

Ed noted that I had been, at some point in my checkered career, a founding editor of the *Human Life Review*. This requires some literary license. Truth be told, I was *volunteered* for the job. I use the military passive on purpose. I forget the year; it was late '73, perhaps early '74, and the phone rang. And I knew it was McFadden because I could smell the smoke through the phone, and the conversation went something like this: "Mike, old man," he says, "remember the magazine we talked about? I think I've got the money for it—we're going to call it the *Human Life Review*—the first issue will be in January—I think you should be in it and here's what I think you should write about."

Those of you who knew Jim would know that was not an atypical kind of conversation. You'd have *three* of those before lunch; you'd have two lighter versions of it in the afternoon; a couple of corrections before dinner and just before you went home, you'd have the final call with a couple of lousy puns.

He directed from New York in the early days of the pro-life movement. It's hard to describe for those of you who weren't around at the time—there's enough of you from the old days I know who *were*—what it was like in those days. The ranks were thin, demoralized, discouraged and generally confused. And when *Roe v. Wade* landed like a thunderbolt, there was much concern. I was then working as counsel for Jim Buckley, or as we will eternally refer to him, "the sainted junior Senator from New York." Unlike his notorious *younger* brother, Jim never demanded a recount, which is how he became *Senator* from New York. . . .

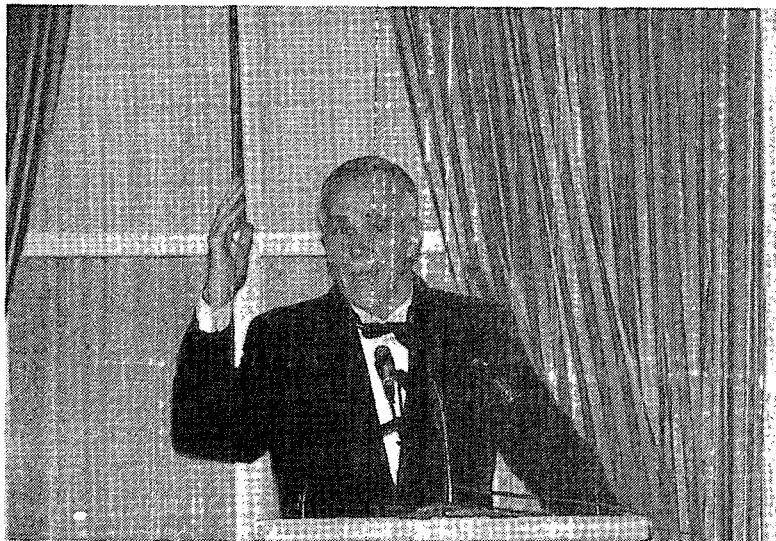
But in those days, Jim was the lifeline of the pro-life movement in the Senate. And while that activity was going on in Washington, the real center of the activity was here in New York, courtesy of Jim McFadden who woke up in the morning with five good ideas, and managed to implement all—or certainly four of them, by the end of the day. The fifth one he'd do on the next day, and chastise you if you didn't do it.

Jim perceived the salience immediately of *Roe v. Wade*, and set out to energize a pro-life movement when none, in fact, existed. And he did so by a very simple device: and that was to tell the truth as *often* as possible, as *well* as possible. And it took two forms. One was overtly political, and that was institutionalized in the wonderful instrument, now moribund and no longer necessary, called *LifeLetter*, this wonderful monthly jeremiad that would emanate from Jim's office. It was a combination of gossip, rumor, and intelligence—of a sort. This is pre-Internet days, you see: no one had information of this sort.

And a typical entry would arise under the following circumstances: A very nice lady from Dubuque would call and introduce herself to Mr.

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McFadden and alert him to the fact that state Senator Blowhard, a purported pro-lifer, was opposing pro-life legislation now rumbling through the Iowa legislature, and didn't he, Jim, think something should be done about it. Jim would, indeed, think about it. And about two weeks later a special issue of *LifeLetter* would go out, calling attention to the fact that pro-lifers in Iowa "are gravely concerned that Senator Blowhard has left the reservation, and deeply concerned there may be some deep mental or moral troubling there; maybe owing to his second divorce." And just to bring the point home, Jim would ensure that a couple of thousand extra copies of *LifeLetter* were distributed in the Dubuque precincts.



Michael Uhlmann salutes J.P. McFadden and Congressman Henry J. Hyde.

That's how the pro-life movement was put together in the early days. That was *one* side of Jim. The *other* side was the fellow you could sit up with until three in the morning talking about Cardinal Newman's discussion of the development of doctrine, and do so with great seriousness and gravity—and a good cigar, might I add.

That side of Jim's nature was expressed in the *Human Life Review*. He said to me, at the same thinking-post that Ed Capano referred to earlier, he said: "There has to be a record." We *won't* be, he says, like Nazi Germany. No one should be able to say, whatever happens, that they *didn't know*. That's the first thing we have to do—is to make sure that everybody *knows* what's actually going on here.

The *second* thing is, he says, we can have some fun. And the third thing he

says is that we can produce a helluva good journal. And that led to the conversation a year or so later, in which he said: "I've come up with the money. We're going to do the journal, and here it is." And there, by the grace of God, it was. And now rising thirty years later, it still is. And that's why all of you are here tonight.

But you have no idea—perhaps you *do*—I certainly do, what a wing and a prayer put this thing together at the outset. It was, in the early stages, issue to issue: thanks to your generosity, it isn't. But what justifies the *Human Life Review*—well let me put it this way: other than those days when John Paul the Second is *not* teaching us about the defense of human life, the one place you would soonest go to learn about it would be the *Human Life Review*. For three decades, nearly, it has been the consistently most intelligent, sophisticated journal in defense of the dignity of the human person that I know, not only in the English-speaking world but in the world at large. And for that we should be grateful then, to Jim McFadden, and to Faith and Maria we owe our eternal gratitude. It is a good thing that it is here, and long may it wave.

The practical side of Jim focused, of course, on Washington. So long as the sainted Junior Senator from New York was present, which he was through 1976, but the voters of New York having had something funny put in their water supply, decided otherwise—but by the grace of God and the consent of the voters of the Sixth Congressional District of Illinois, just about the time when Jim Buckley was leaving Washington there was presented to us the great man of the House of Representatives, Henry Hyde, whom we honor tonight.

I've known Henry, and worked with him, on all sorts of things, over many years. But it was Jim McFadden who *introduced* us. What year it was I don't know. Henry came in in '74, I think it was. A year or so later Jim called me and says, have you seen this fellow Hyde? And I said no, but I've heard of him. He says, "You should." So I walked over one day to the House gallery, and there was a debate going on. What it was, I don't know. But I saw this remarkable fellow from Illinois actually *arguing*; he had an argument that had a beginning, and a middle and an end, and—even stranger to say—his colleagues were *listening* to him. That's a strange thing in the House of Representatives, for the most part.

But it's true to this day. Henry Hyde is one of the few men in the House who can rise, and simply by *rising*, silence his colleagues who listen to him because they know he has something to say. He is a *teacher* in the House of Representatives. Henry's humility will deny all this, but he is, in the end, a *teacher*. He is also a very good politician. He would lie down in front of a train, and has done so frequently, in defense of the unborn. But he has also

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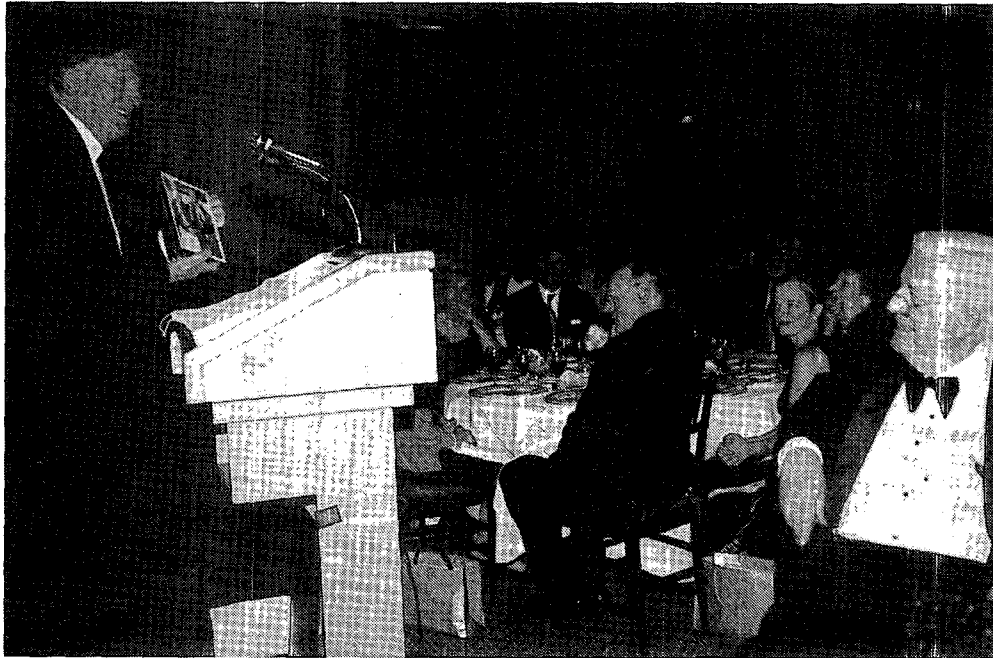
been Chairman of the House Judiciary Committee, and now Chairman of the House Committee on International Relations. In addition to his other plaudits, I would credit Henry with having stopped the nuclear freeze legislation in the House of Representatives in the 1980's in virtue of simply making *very good speeches* that turned the souls of his colleagues.

There aren't three men in the House today, or in recent memory, who could do that. This man is a man who has done that, can still do it and does it with great eloquence and great humility.

Jim McFadden had it right years ago. He referred to Henry simply as the Generalissimo, and that he is—and Henry: I salute you, sir.

Presentation of Great Defender of Life Award

Edward Capano: And now to present the Great Defender of Life Award, Mr. William F. Buckley, Junior.



William F. Buckley Jr. presents Congressman Henry J. Hyde's award.

William Buckley:

I think all I have to do is to tell Congressman Hyde that he's on duty here to receive this signal award. It's a wonderful picture featuring him with a side appearance by Mother Teresa.

Congressman Henry J. Hyde:

Thank you very much, Bill and Michael, and if I start acknowledging all of the good friends in this room, why that will consume most of the time till morning; so I don't want to do that. But I want to express my profound gratitude for the overly generous things that have been said, and for the opportunity to acknowledge and to share in the memorializing of a great, great human being, Jim McFadden.

You know, in my work I get to meet an awful lot of interesting people. A couple of weeks ago we had the Dalai Lama before our little group, and the story was told about him appearing on Ted Koppel's show. And Koppel—trying to be a little smart alecky—said, "Your Holiness, I understand you're the sixteenth incarnation of the Dalai Lama. What do you remember from some of your earlier lives?"

The Dalai Lama said, "Mr. Koppel, at my age I forget what I had for lunch."

Father Neuhaus is here and he reminds me of George Weigel, a wonderful friend who tells the great story about Lou Holtz when he coached Notre Dame, and they were playing Miami—I guess the University of Florida—and there was some ill will between the teams; the football teams didn't quite get along too well. So the school officials at Florida decided to throw a banquet and have both teams there the night before the game. And they were there, and they had a wonderful Invocation by a Protestant minister on behalf of Florida. And he said, "We're here to build bridges of friendship across troubled waters, and remember: God does not care who wins this game." So when he got through, Lou Holtz got up to respond and Lou said, "I agree with Pastor Smith. God does *not* care who wins this game, but *His Mother does*."

We have a wonderful group of Congressmen and Congresswomen. One of them is a woman named Judy Biggert, who is from Illinois, and she has a delightful way of opening any speech. She quotes Elizabeth Taylor, who said to her eighth husband, "I won't keep you very long."

You know when Napoleon died somebody said that God just got bored with him. And that might well be true, and it makes one pause to think that God might be very bored with us because of what we do. The million and a half abortions, give or take, every year; the fact that we're getting *used* to the abortion culture; these things are a horrible prospect and ought to give us pause.

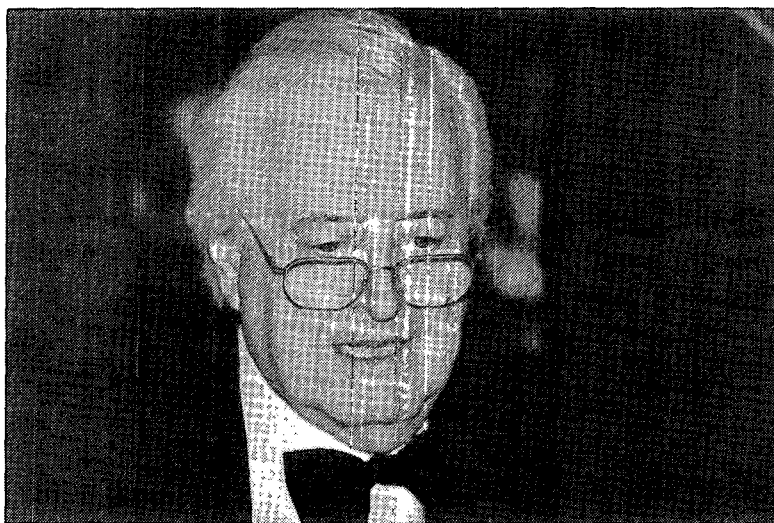
There is a great line from *Camelot* that reminds me of Jim McFadden. And that line is: "We're all of us tiny drops in a vast ocean, but some of them sparkle." Jim was much more than a tiny drop; he was a *tsunami*. And he more than sparkled; he was incandescent. A great human being who reminds

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me again of what Horace Mann said: "A man should be ashamed to die until he's won some victory for mankind." And Mr. McFadden won many victories for mankind.

We all know about the great fire that leveled London in 1666. And out of the ashes a genius named Christopher Wren arose, and he almost single handedly rebuilt London. I think he was responsible for some eighty new buildings; his crowning achievement, the Cathedral of St. Paul. And if you go in the back of the Cathedral, on the floor you'll find some dusty words. And you kick the dust away and you see where Christopher Wren is buried. And around the crypt it says: *Si monumentum requiris circumspice*. "If you would seek his monument, look around."

I think that applies to Jim McFadden. If you seek his monument, look at little babies and little children and understand the contribution he made to their lives.



The Great Defender of Life, Generalissimo Henry J. Hyde.

I have a lot of things to say; I won't say them tonight. It's been a very long evening, but a subject that I think deserves some attention, and one of these days I will take the time to do it, has to do with time. Have you ever thought that when an abortion occurs, you *foreclose the future*. Generations yet unborn are foreclosed; they're stopped. So not only *this* life is taken, but all the *succeeding* lives which might well have been generated from that person.

But look the other way: the forswearing of history. Go back to the first parents. All of us had grandparents, great-grandparents on back through

millennia to the beginning of civilization. And there's something really tragic about making it through all of the avalanches and all of the fires and all of the explosions and all of the earthquakes and all of the diseases and all of the wars—making it up to just about you're almost born. And then your life is extinguished. It seems to me that is a very sad and tragic thing.

Jimmy Webb wrote a song, *Didn't We Almost Make It This Time?* (It's kind of poignant for me because of the Cubs; *we almost made it.*) But I think what I will do is read to you something I ran across a few years ago at the funeral of another great warrior for the unborn: Joe Stanton up in Boston. And at his funeral there was a little booklet printed. And it had in it a poem by somebody named CVS. I don't know who that is. But boy does this apply to Jim McFadden. So please permit me to share it with you.

*Traveling from afar he neared the gate
And seeing no one, paused
Dusty, footsore, spent
Bone tired, if the truth were known,
And rested on his cane.
The gates swung idly there
Inviting any pilgrim inside,
Where all was cool and still.
He felt a peace enfold him
And he knew that he was home
Then, like a great wind they came,
Filling the air with a sound,
A most unlikely regiment of children
As far as the eye could see.
Noisy, babbling, weeping,
A Lilliputian army
Not one, by measure, reached his knee
Calling his name with joy and welcoming
Clutching his coat as if to make him theirs.
Aye, he was theirs
Had been always.
Fought for them all
With blood and bone and nerve
Those dead, dear children.
All our sons and daughters
The smothered secrets of our public shame
And he would weep
Weep and remember
There is no peace while the red river flows
And mourn those lives, written not in water
But in the martyrs' love that stains the rose.*

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That is a poetic expression of the love we all bear Jim McFadden; and we look at the record he established, the example that he made. And I think of a statement I read on a dedication of a hospital once. And it made—it struck a chord with me—so let me just wind up by leaving this with you: “Those tragedies which break our hearts again and again are not more numerous than the healing influences that mend them. More impressive than the brokenness of our heart is the fact we have a heart, and it’s tender enough to suffer. Even the scar tells us of more than the wound we have sustained; it tells us we have prevailed. And all the agony in the world can’t erase the fact that a man is born, and life and thought, emotion and choice, love and reason go on inside him.”

I want to salute every one of you here for your membership in the greatest organization in the world, the pro-life movement. You know why it’s great? *No self-interest*. Most groups look for shorter workweeks, wider sidewalks, no hammerhead sharks in the district—all sorts of things. But the pro-life movement has no self-interest. It hurls itself on the battlements because it wants to defend the most helpless and vulnerable of God’s creatures.

Henry Adams, when he visited the Cathedral at Chartres said, “it embodies the noblest aspirations of mankind; the reaching up to Infinity.” That’s what the pro-life movement does. That’s what you do; and I hope that some day we will all be there and hear the same words that Jim McFadden heard five years ago today when our time comes: “Come beloved of my Father and enter the Kingdom which has been prepared for you since the beginning of time.” Thank you so much.



*Joining in a standing ovation for Congressman Hyde:
Pat and Rita Gorman, and Patricia O'Brien.*

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Christina McFadden.

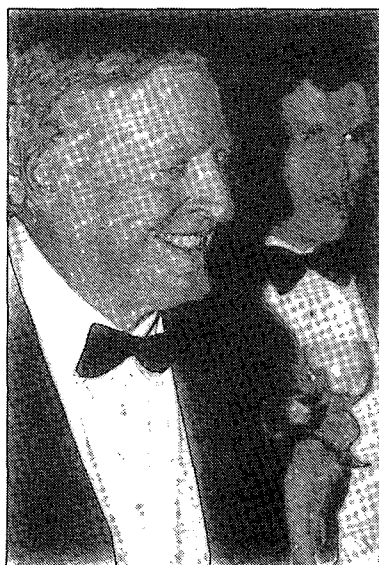
Registration
&
Cocktail Hour



Mary Meehan, Nona Aguilar and Ray Lopez.



Mrs. Frances Scott, Faith McFadden, Ambassador Gerald Scott and Maria McFadden Maffucci.

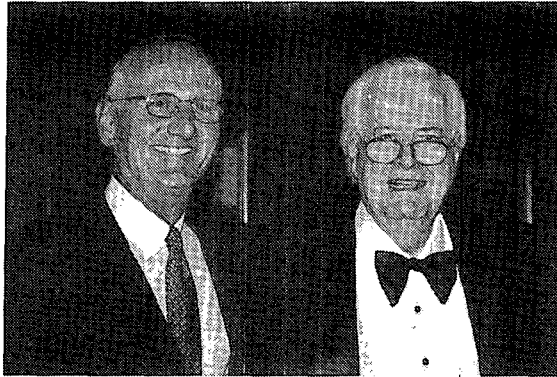


William F. Buckley Jr. and Leon Grimm.

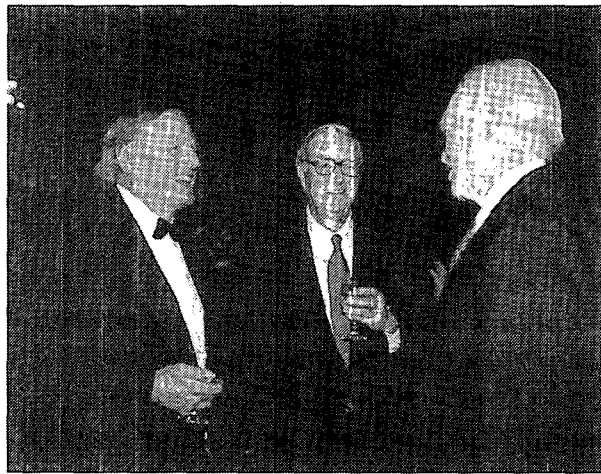


Mrs. Harry Sucher, Fr. Kazimierz Kowalski and Ms. Alex Simonds.

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Edward Capano and Congressman Henry J. Hyde.

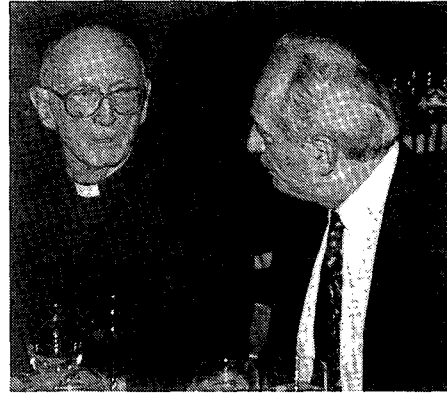


William Buckley, John Leo and Wellington Mara.

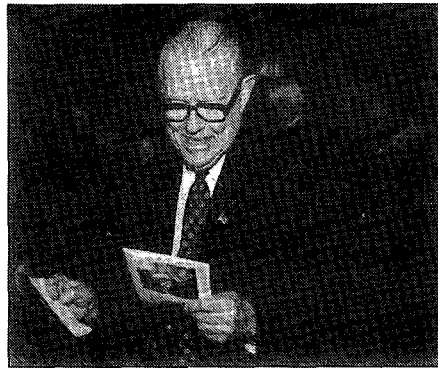


Dr. Richard Bellucci, Rose Flynn de Maio and Anne Conlon.

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Fr. Francis Canavan and Dr. Paul Vitz.



Thomas Bolan reading the evening's program.



Michael Uhlmann remembering the early days of the pro-life movement.

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*Top: Fr. George Rutler, Michael Uhlmann,
Miss Priscilla Buckley and William Buckley.*

*Center: Mr. & Mrs. James McLaughlin
with Maria McFadden Maffucci (standing).*

*Bottom: Faith McFadden, Maria McFadden
Maffucci and Congressman Henry J. Hyde.*



Dehydration Nation

Wesley J. Smith

For more than ten years, conscious and unconscious cognitively disabled people who use feeding tubes have been legally dehydrated to death in the United States. This intentional life-ending act—clamping feeding tubes and denying all sustenance—has become so ubiquitous that, generally, little attention is paid.

This public indifference was shattered by the Terri Schiavo litigation, an epic legal, political, and media struggle that pitted Terri's parents, Bob and Mary Schindler, against her quasi-estranged husband, Michael Schiavo. At stake was whether Terri would live, as fervently desired by her parents, or die by dehydration as demanded by her husband. (I shall explain below why I consider Michael to be estranged from Terri.)

The Schiavo case is not the first “food and fluids” case, but it is certainly the most notorious. Widespread revulsion over Terri's court-ordered dehydration sparked a grass-roots political campaign that culminated in the Florida legislature's rushed passage of “Terri's Law,” which empowered the governor to intervene and prevent some categories of cognitively disabled people from being dehydrated. As soon as the bill became law, Governor Jeb Bush dramatically halted Terri's dehydration in its sixth day, setting off an international uproar. (As this is written the constitutionality of Terri's law—and hence the fate of Terri Schiavo—is being litigated.)

At this point we must distinguish between two different circumstances in which nourishment is withheld from incapacitated patients:

- First, not forcing food and water upon dying patients who reject nourishment. This often occurs in the end stages of cancer. Indeed, it is recognized as *medically inappropriate* to force-feed patients whose bodies are shutting down during the natural dying process. In these cases, the patients die from their disease, not dehydration. *This is not the situation that this article addresses.*

- Second, withholding tube-supplied food and water from cognitively disabled persons like Terri *who are not otherwise dying*. In such cases, nourishment is withheld not for medical reasons but because someone believes that the patient's life is not worth living in such an impaired state, or that he or

Wesley J. Smith is a senior fellow at the Discovery Institute and an attorney and consultant for the International Task Force on Euthanasia and Assisted Suicide. His current book is the revised and updated *Forced Exit: The Slippery Slope from Assisted Suicide to Legalized Murder*. His website is www.wesleyjsmith.com.

she would rather be dead than live with a profound cognitive disability. Death in these situations is caused by dehydration.

If the owner of a horse or cow caused the animal to die by withholding food and water, he or she would probably go to jail, and rightly so. If a condemned murderer were executed by being shut in a room without food and water until he died, the American Civil Liberties Union would never stop suing, and rightly so. (Ironically, the ACLU has jumped into the Schiavo case—on *Michael's* side, to have Terri's Law declared unconstitutional.) But dehydrate a person with significant brain injury who requires a feeding tube, and it is considered medically ethical, the right to refuse unwanted medical treatment and an adjunct of the legally non-existent "right to die."

A Potentially Painful Death

Advocates for dehydrating the neurologically disabled assert that it is a painless end. But there are substantial reasons for doubt. St. Louis neurologist Dr. William Burke told me:

A conscious person would feel it [dehydration] just as you or I would. They will go into seizures. Their skin cracks, their tongue cracks, their lips crack. They may have nosebleeds because of the drying of the mucus membranes, and heaving and vomiting might ensue because of the drying out of the stomach lining. They feel the pangs of hunger and thirst. Imagine going one day without a glass of water! Death by dehydration takes ten to fourteen days. It is an extremely agonizing death.

Minnesota neurologist Dr. Ronald Cranford, an avid supporter of dehydration, who has often appeared as an "expert witness" in litigation over withholding food and water, testified in the Robert Wendland case about the effect of dehydration on cognitively disabled patients:

After seven to nine days [from commencing dehydration] they begin to lose all fluids in the body, a lot of fluids in the body. And their blood pressure starts to go down. When their blood pressure goes down, their heart rate goes up . . . Their respiration may increase and then . . . the blood is shunted to the central part of the body from the periphery of the body. So, that usually two to three days prior to death, sometimes four days, the hands and the feet become extremely cold. They become mottled. That is you look at the hands and they have a bluish appearance. And the mouth dries a great deal, and the eyes dry a great deal and other parts of the body become mottled. And that is because the blood is now so low in the system it's shunted to the heart and other visceral organs and away from the periphery of the body. . . .

Since the people to whom this is done generally can't communicate, we mostly don't know what they actually experience. But in at least one case we do: that of a young woman who had her tube feeding stopped for eight days and lived to tell the tale.

At age 33, Kate Adamson collapsed from a devastating stroke. She was diagnosed as likely to develop a persistent vegetative state (PVS) but was actually “locked in”—that is, she was completely awake and aware but unable to communicate. Even after the doctors realized that Adamson was entirely conscious, they urged her husband to “let her go.” He refused, and indeed, when she developed a bowel obstruction, he authorized surgery. However, to clean the bowel enough to permit surgery, her nourishment was stopped. When, eventually, she recovered her ability to communicate, she wrote *Kate’s Journey: Triumph over Adversity*. Appearing on *The O’Reilly Factor*, Adamson described the experience of being denied nourishment.

When the feeding tube was turned off for eight days, I thought I was going insane. I was screaming out in my mind, “Don’t you know I need to eat?” And even up until that point, I had been having a bagful of Ensure as my nourishment that was going through the feeding tube. At that point, it sounded pretty good. I just wanted something. The fact that I had nothing, the hunger pains overrode every thought I had.

In preparation for an article in the *Daily Standard*, I asked Adamson to provide more details about what she experienced while being deprived of tube-supplied nourishment. As an illustration, she told me that she was administered inadequate anesthesia during her bowel-obstruction surgery. Yet, as painful as that was, it *was not as bad* as the suffering caused by being denied nourishment:

The agony of going without food was a constant pain that lasted not several hours like my operation did, but several days. You have to endure the physical pain and on top of that you have to endure the emotional pain. Your whole body cries out, “Feed me. I am alive and a person, don’t let me die, for God’s sake! Somebody feed me.”

Moreover, although Adamson was not deliberately dehydrated—she was constantly on an IV saline solution—she *still* had horrible thirst:

I craved anything to drink. Anything. I obsessively visualized drinking from a huge bottle of orange Gatorade. And I hate orange Gatorade. I did receive lemon flavored mouth swabs to alleviate dryness but they did nothing to slake my desperate thirst.

Doctors who withhold nourishment and hydration with the purpose of causing death may prescribe morphine or other narcotics to alleviate the pain. But who knows whether this is sufficient? For example, when Cranford was asked during his Wendland testimony what level of morphine would have to be given to prevent the patient from suffering, he testified that the dose would be “arbitrary” because “you don’t know how much he’s suffering, you don’t know how much aware he is. . . . You’re guessing at the dose.” He added that he would probably put Robert Wendland back into a coma to ensure that he did not feel pain!

The Human “Non-Person”

Why do we tolerate such an apparently cruel method of life termination? First, it is an unfortunate by-product of the legal right to refuse unwanted medical treatment. Tube feeding is deemed medical treatment—rather than humane care that cannot be withdrawn—because a modest surgical procedure is required to insert the tube. Thus, even though there can only be one result—death—tube-supplied nourishment can be withdrawn like any other medical procedure. (Many people believe erroneously that there is a legal difference between “extraordinary care,” such as a respirator, which can be withheld, and “ordinary care,” such as tube feeding, which must be provided. The law recognizes no such distinction.)

Second, when a patient is incapacitated, decisions to accept or refuse medical treatment must be made by surrogates. This means that someone other than the patient will decide whether a cognitively disabled patient lives, or dies by dehydration.

The great Christian bioethics pioneer Paul Ramsey, author of the seminal book *The Patient as a Person*, worried presciently that surrogate decision making could endanger the lives of people who were seen as devalued. Thus, while Ramsey believed that people should be allowed to refuse treatment for themselves on a subjective quality-of-life basis, he urged that decisions made on behalf of others be strictly based on medical needs. Otherwise, he wrote, we could be shifting “the focus from whether *treatments* are beneficial to patients to whether patients’ *lives* are beneficial to them.”

If bioethics had adhered to the sanctity/equality of life ethic advocated by Ramsey, we would today have far fewer worries about the way cognitively disabled and frail elderly people are cared for in our nation’s hospitals and nursing homes. Unfortunately, the academic philosophers who now dominate bioethics shifted the predominant ideology of the field sharply away from the Ramsey approach and toward the “quality of life” ethic. This measures the moral value of human lives subjectively based on levels of cognitive capacity. Thus, most bioethicists today distinguish between “persons” and so-called human “non-persons,” people denigrated on the basis of their low level of cognitive functioning.

These invidious distinctions matter very much in the medical setting. Being categorized as a non-person is dangerous to life and limb, since most bioethicists assert that only persons are entitled to human rights. In the full expression of personhood theory, non-persons are killable, subject to the harvesting of their body parts, and candidates for non-therapeutic medical experiments.

A Tale of Three Patients

Space does not permit a full exposition of personhood theory and how it interacted with the growing importance of personal autonomy in medical decision-making to produce legislation and court decisions permitting the withdrawal of tube-supplied food and water from cognitively disabled people. Suffice it to say that while many observers continue to oppose, on moral grounds, removing tube-supplied food and water, the hard truth is that patients with serious cognitive incapacities—the conscious as well as the unconscious—are now routinely dehydrated to death in all fifty states.

Still, all is not yet lost. If close family members object to dehydrating a cognitively disabled person and are committed enough in their desire to save their loved one's life to take the matter to court, dehydrations can be significantly delayed and sometimes even prevented. If the patient is unquestionably conscious, they may even win.

Three such litigations have made national headlines in recent years: the cases of Michael Martin (Michigan), Robert Wendland (California), and Terri Schiavo (Florida). All three involved bitter disputes between a spouse who wanted the disabled patient to die by dehydration versus parents/siblings who fought to maintain tube-supplied food and water. (Martin and Wendland were both uncontrovertibly conscious; while a judge ruled that Schiavo was PVS, the medical testimony was hotly disputed.)

Michael Martin: Martin suffered a severe brain injury in an auto accident. However, he recovered consciousness and improved to the point that he could apparently enjoy music and cartoons in the nursing home in which he was placed. Michael's wife, Mary, wanted him to die by dehydration. But this plan was opposed by his mother, Pat Major, and sister, Leeta Martin, resulting in a protracted legal fight.

Mary claimed that Michael had repeatedly told her that he would not want to live if he were "a vegetable." This testimony held great sway with the trial judge. Despite assertions from two doctors that Michael expressed a desire to live by answering yes and no questions on a therapeutic device, Michael's feeding tube was ordered removed. This decision was affirmed by the Court of Appeals but overturned by the Michigan Supreme Court on the basis that Mary had not presented "clear and convincing evidence"—the highest level of proof that can be required in a civil case—that Michael would not want to live in his current condition.

Robert Wendland: After Wendland's rollover auto accident, he was unconscious for 16 months with no expectation of recovery. But then, unexpectedly, he awakened. Soon, with therapy, he had learned to maneuver a

wheelchair down a hospital corridor and could often perform simple tasks on request such as removing and replacing pegs in a board. At one point, he apparently learned to answer yes and no questions using a therapeutic device, in which the following discourse occurred:

Therapist: Is your name Michael?

Wendland: No.

Therapist: Is your name Robert?

Wendland: Yes.

Therapist: Do you want to die?

Wendland: No answer.

When Robert's feeding tube became dislodged in July 1995, his wife, Rose, decided it should not be replaced, a decision unanimously affirmed by the Lodi Memorial Hospital Ethics Committee and the San Joaquin County Ombudsman. But an anonymous nurse was so appalled by the plan that she blew the whistle to one of Robert's sisters, leading Robert's mother, Florence Wendland, and a sister to sue to prevent the dehydration.

The bitter litigation lasted for nearly six years. The trial judge, clearly sympathetic to Rose's cause (he claimed from the bench to be making the "wrong decision for the right reason"), ruled against the dehydration because she had not presented clear and convincing evidence that Robert would not want to live with a profound cognitive disability. This was reversed by the Court of Appeals, which ruled shockingly, among other matters, that there is not a "presumption for continued existence in California law." The California Supreme Court eventually came down in favor of preserving Robert's life, deciding that when a patient is *conscious*—excluding people diagnosed with PVS—and the surrogate is a court-appointed conservator, constitutional issues require clear and convincing evidence to be presented that the patient would not want to live or that dehydration would be in the patient's "best interests." The ruling applied only to tube feeding and not other forms of life-sustaining medical treatment. (Unfortunately, Robert did not benefit from the ruling. He died of pneumonia shortly before the case was decided.)

Terri Schiavo: In 1990, when she was twenty-six, Terri Schiavo collapsed from unknown causes. Terri's resulting cognitive disability left her less reactive than either Michael Martin or Robert Wendland, but its extent and potential for amelioration remains a matter of dispute. Several doctors testified that she is nonresponsive—in other words, PVS—a diagnosis strongly contested by other doctors, medical therapists, and her parents. Videos of Terri seem to indicate that she does sometimes interact with her environment, although those who claim she is not responsive contend that smiling

at her mother and opening her eyes upon request were mere reflex actions.

In the first year or so after Terri became disabled, her husband, Michael, sought medical help for her, for example, bringing her to California for an experimental surgical procedure, which, however, provided no apparent benefit. Then in 1991 the health insurance money ran out and all rehabilitative therapy stopped. Then, thanks to a medical-malpractice verdict, Terri received \$750,000, which was placed in a trust fund. During the trial, Michael promised the jury that he would use the money to care for Terri the rest of his life and provide her with appropriate medical testing and rehabilitation. He also informed the jury that Terri was expected to have a normal lifespan.

Once the money was in the bank, however, Michael did not provide Terri with any rehabilitation or therapy. He did not allow medical testing. He had a do-not-resuscitate order placed on her chart, so that doctors would not intervene if she had a cardiac arrest. And he denied Terri antibiotics when she suffered a bladder infection, leading to the Schindlers' first lawsuit against him.

In 1998, Michael petitioned the court to allow him to have Terri's feeding tube removed. Terri's parents fought the request. When the smoke cleared, Judge George Greer of the Sixth Judicial Circuit, Clearwater, Florida, had found that Terri is PVS and that Michael had presented clear and convincing evidence that she would want to die. Judge Greer also refused to permit Terri to receive rehabilitation before her tube was removed, despite credible medical testimony that she might be able to relearn to take nourishment and water by mouth. The Florida Court of Appeals affirmed Judge Greer's ruling. Terri's dehydration began on October 15, 2003.

That would normally have been that. But Terri's case has been anything but normal. Disability-rights activists, Christian conservatives, public-policy advocates (myself included), talk-radio hosts, and Internet bloggers launched an intense grass-roots political campaign to pressure Governor Bush to intervene. In an unprecedented outpouring, people from all over the country responded, sending Bush and other Florida politicians tens of thousands of e-mails, letters, and phone messages, culminating in Terri's Law.

Common Themes

Having closely observed many food-and-fluids cases over the last ten years, I have noticed several patterns and themes that, I believe, tell us quite a lot about the state of our culture and, if you will, our national soul.

Personhood theory has successfully dehumanized the cognitively impaired: None of us should have to earn our personhood. Indeed, the foundational philosophy of our country, so eloquently expressed in Thomas Jefferson's

“self-evident” truths, holds that we all are equally possessed of inalienable rights, the first of which is the right to life. And while it is certainly true that the United States has too often failed to live up to the soaring ideals of our founding, at least we have struggled mightily and at great cost to overcome the vestiges of our unequal past and make the blessings of liberty available to all.

But with the coming of personhood theory, new categories of people are now the victims of discrimination and exploitation. This is epitomized by the popular use of the profoundly dehumanizing pejorative “vegetable” to describe cognitively disabled people. Once their moral worth has been reduced to that of a cucumber, it becomes easier to justify their killing.

These attitudes are especially dangerous in the medical setting. The medical profession has even picked up the common slur and given it a clinical sound—persistent vegetative state (PVS). Patients diagnosed as being permanently unconscious—PVS—can almost never be saved from dehydration once the primary caregiver decides to stop tube-supplied sustenance, *even* if close family members object. Moreover, there is serious advocacy at the highest levels of the medical intelligentsia for allowing doctors to refuse *wanted* treatment for such people on the basis of quality-of-life determinations. Some even urge that doctors be allowed to kill them for their organs.

The law, which should be especially vigilant in defending those who can’t defend themselves, instead generally reflects the dominant view in bioethics that relative value can be placed on human lives. In this milieu, the greater a patient’s capacities the more legal protection he or she receives. Thus, Robert Wendland and Michael Martin were spared dehydration despite “expert” bioethics testimony that they should “be allowed” to die precisely because they exhibited just enough cognition to make the high courts uncomfortable with terminating their lives. Had they been less responsive, it is unlikely that they would have been spared.

Proof of this concern can be found in the California Supreme Court’s Wendland decision, which established a two-tiered system of constitutional rights—one for the conscious and another for the unconscious—by explicitly excluding patients diagnosed with PVS from its protective terms. This led to the surreal ruling that Californians lose some of their constitutional rights if diagnosed with PVS, but then regain them if they unexpectedly awaken. Thus, despite its good news for conscious disabled people, *Wendland* is actually a very dangerous decision because it implicitly applies personhood theory to—and thus discriminates against—a specific class of born human beings.

Casual statements can become a dehydration warrant: Those who wish

to dehydrate the cognitively disabled invariably claim that they are doing it *for* the patient—that they are doing what the patient said he or she would want done in the event of serious illness or incapacitation. Yet, because the benefit of the doubt in law and culture now tacks overwhelmingly in favor of death in these cases, it is shocking how often the most casual statements have been treated as if they had been carefully deliberated upon advanced medical information.

It has even gotten to the point that courts may hold disabled people to past statements that they would want to die over present indications that they want to live—as the trial judge in Michael Martin’s case did.

The worst of these cases of which I am aware is the tragic dehydration of Marjorie Nighbert. Marjorie was a successful businesswoman until a stroke left her disabled. She was unable to swallow safely, but not terminally ill. She was moved from Alabama to a nursing home in Florida where she would receive rehabilitation to help her relearn how to chew and swallow without danger of aspiration. A feeding tube was inserted to ensure that she was properly nourished during her recovery.

Marjorie had once told her brother Maynard that she didn’t want a feeding tube if she were terminally ill. Despite the fact that she was *not* dying, Maynard believed that she had meant that she would rather die by dehydration than live the rest of her life using a feeding tube. Accordingly, he ordered all of Marjorie’s nourishment stopped.

As she was slowly dehydrating to death, Marjorie began to beg the staff for food and water. Distraught nurses and staff members, not knowing what else to do, surreptitiously snuck her small amounts. One staffer—who was later fired for the deed—blew the whistle, leading to a hurried court investigation and a temporary restraining order requiring that Marjorie receive nourishment.

Circuit Court Judge Jere Tolton appointed attorney William F. Stone to represent Marjorie and gave him twenty-four hours to determine whether she was competent to rescind the general power of attorney she had given to Maynard before her stroke. After the rushed investigation, Stone was forced to report that Marjorie was not competent *at that time*. (She had, after all, been intentionally malnourished for several weeks.) Stone particularly noted that he had been unable to determine whether she had been competent at the time the dehydration commenced.

With Stone’s report in hand, Judge Tolton ruled that the dehydration should be completed! Before an appalled Stone could appeal, Marjorie died on April 6, 1995.

Conflicts of interest don’t matter in dehydration cases: Court-appointed

guardians and conservators owe their wards the highest loyalty. As fiduciaries, they are duty-bound to serve their ward's interest—even above their own. Needless to say, among other matters, this means that a guardian cannot personally benefit from financial decisions made while managing a ward's money.

Life is more important than money. Surely, then, the legal prohibition preventing guardians from making monetary decisions when they have conflicts of interest should apply doubly when the guardians would personally benefit from their wards' deaths. Unfortunately, in the food-and-fluids cases, judges have been generally indifferent to these considerations. Even in the face of clear conflicts of interest, judges have seldom been willing to transfer guardianships from those who seek court authority to dehydrate patients to parents or siblings who want their disabled loved ones to live.

In the Michael Martin litigation, Mary admitted that she had had romantic involvements after her husband's injury. According to the terms of Michael's pension benefits, she would receive substantial benefits if he died but not if they divorced. Yet the trial judge cared not a whit about this blatant conflict of interest when he acquiesced to Mary's request and ordered Michael dehydrated. Even though the Michigan Supreme Court later saved Michael's life, it did not address the conflict-of-interest aspect of the case.

Michael Schiavo's financial and personal conflicts of interest make Mary Martin's look penny-ante. In April of 1998, when he first asked to dehydrate Terri, she had more than \$700,000 in her trust account, all of which Michael would have inherited had she died at that time. Indeed, this financial conflict of interest was one of the reasons that Terri's guardian *ad litem* recommended that she not be dehydrated. (Michael claims there is now only about \$50,000 left in Terri's trust fund.)

Michael's personal conflicts of interest are even more pronounced than his financial ones. Not only did he date regularly after Terri became disabled, but he fell in love and entered a committed relationship with a woman with whom he has lived since about 1996, siring two children by her. By starting a new family, Michael effectively estranged himself from Terri. Yet, none of this mattered to Judge Greer, who treated Michael as a loyal and committed husband rather than as a man who had moved on with his life and could benefit personally and financially from his wife's death.

Re-humanizing Cognitively Disabled People

Utilitarian bioethicist Peter Singer has written that the food-and-fluids cases are a wrecking ball shattering the sanctity/equality-of-human-life ethic as the first principle of our culture. As much as I hate to admit it, he has a

point. Still, to paraphrase Mark Twain, reports about the demise of our traditional human values are greatly exaggerated. The remarkable public outpouring in support of Terri Schiavo's life proves that at least among the general public, the sanctity-of-life ethic retains much of its vitality.

This may show us a way out of our societal miasma. In my more optimistic moments, I see Terri's sweet smile rallying us to reject the views of those who would force us each to earn our personhood by possessing sufficient cognitive capacities and to move instead toward a revitalized society in which every one of us is loved unconditionally as the fully equal and unequivocally human brother or sister that each of us really is. We can do this in the medical setting if we abide by the wisdom of Paul Ramsey and treat every patient "as a person." The first step toward achieving this end is for us all to acknowledge: There is no such thing as a human vegetable.

APPENDIX A

[Nat Hentoff's latest book is *The War on the Bill of Rights and the Gathering Resistance*, published last September by Seven Stories Press. The following four columns appeared in the *Village Voice* and are reprinted here with Mr. Hentoff's permission.]

A Woman's Life Versus an Inept Press

The ACLU Supports a "Constitutional" Death by Starvation

Nat Hentoff

November 6, 2003

We don't have full understanding of brain damage and consciousness . . . every patient is different . . . every patient's pattern of brain damage is different. —Dr. Ross Bullock, Reynolds professor of neurosurgery at Virginia Commonwealth University, Richmond, Virginia, *Newsday*, October 26

I have covered highly visible, dramatic "right to die" cases—including those of Karen Ann Quinlan and Nancy Cruzan—for more than 25 years. Each time, most of the media, mirroring one another, have been shoddy and inaccurate.

The reporting on the fierce battle for the life of 39-year-old Terri Schiavo has been the worst case of this kind of journalistic malpractice I've seen.

On October 15, Terri's husband and legal guardian, Michael Schiavo, ordered the removal of her feeding tube. As she was dying, the Florida legislature and Governor Jeb Bush overruled her husband on October 21, and the gastric feeding tube has been reinserted pending further recourse to the court.

So intent is Michael Schiavo on having his wife die of starvation that one of his lawyers, after the governor's order to reconnect the feeding tube, faxed doctors in the county where the life-saving procedure was about to take place, threatening to sue any physician who reinserted a feeding tube. The husband had immediately gone to court to get a judge to revoke what the legislature and the governor had done.

The husband claims that he is honoring his marriage vows by carrying out the wishes of his wife that she not be kept alive by "artificial means." As I shall show, this hearsay "evidence" by the husband has been contradicted. The purportedly devoted husband, moreover, has been living with another woman since 1995. They have a child, with another on the way. Was that part of his marital vows?

For 13 years, Terri Schiavo has not been able to speak for herself. But she is not brain-dead, not in a comatose state, not terminal, and not connected to a respirator. If the feeding tube is removed, she will starve to death. Whatever she may or may not have said, did she consider food and water "artificial means?"

The media continually report that Terri is in a persistent vegetative state, and a number of neurologists and bioethicists have more than implied to the press that "persistent" is actually synonymous with "permanent." This is not true, as I shall

factually demonstrate in upcoming columns. I will also provide statements from neurologists who say that if Terri were given the proper therapy—denied to her by her husband and guardian after he decided therapy was becoming too expensive despite \$750,000 from a malpractice suit—she could learn to eat by herself and become more responsive.

Terri is responsive, beyond mere reflexes. Having this degree of sentience, if she is starved to death, she will *not* “die in peace” as *The New York Times* predicts in an uninformed October 23 editorial supporting the husband. What happens to someone who can feel pain during the process of starvation is ghastly.

Increasingly, *New York Times* editorials are not as indicative of conscious liberal “bias” as they are of ignorance or denial of the facts, as I have demonstrated in my series on Judge Charles Pickering.

In all the stories on Terri Schiavo and her parents’ determined efforts to save her life, the media continually report that the Florida legislature intervened because of many thousands of calls, letters, and e-mails from the Christian right and pro-lifers. Those groups and individuals are indeed a major factor in rousing support to prevent Terri from being starved to death. But among the many others who sent urgent messages are disabled Americans and their organizations.

Except for the op-ed page article by Stephen Drake of the Not Dead Yet organization in the October 29 *Los Angeles Times* (“Disabled Are Fearful: Who Will Be Next?”) and a letter in the October 24 *New York Times*, I have seen hardly any mention in the press of the deeply concerned voices of the disabled, many of whom, in their own lives, have survived being terminated by bioethicists and other physicians who strongly believe that certain lives are not worth living. The numbers of these “new priesthoods of death,” as I call them, are increasing.

The letter to *The New York Times* signed by Max Lapertosa, staff counsel, Access Living in Chicago—told of “14 national disability organizations that filed a friend-of-the-court brief to support keeping Terri Schiavo alive.” Lapertosa objected to a *Times* editorial calling for Terri to go gently into that good night because, said the moral philosophers of the *Times*, “true respect for life includes recognizing . . . when it ceases to be meaningful.”

Max Lapertosa reminded Gail Collins’s board of oracles at the *Time*’s editorial page that “many would lump into this category [of meaningless lives] people with severe autism, multiple sclerosis or cerebral palsy who, like Mrs. Schiavo, are nonverbal and are often described as being ‘in their own world.’”

“The judicial sanctioning of such attitudes,” Lapertosa continued, “moves America back to the days when the sterilization and elimination of people with disabilities did not merely reflect private prejudices but were embraced as the law of the land.”

In the *Los Angeles Times*’ October 29 op-ed piece by Stephen Drake, he writes: “I was born brain-damaged as a result of a forceps delivery. The doctor told my parents I would be a ‘vegetable’ for the rest of my life—the same word now being used for Schiavo—and that the best thing would be for nature to take its course.

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They refused. Although I had a lot of health problems, surgeries and pain as a child, I went on to lead a happy life.” And clearly, his is a very articulate life. I have interviewed other such “vegetables.”

Ignoring the facts of the case, the American Civil Liberties Union—to my disgust, but not my surprise in view of the long-term distrust of the ACLU by disability rights activists—has marched to support the husband despite his grave conflicts of interests in this life-or-death case. The ACLU claims the governor and the legislature of Florida unconstitutionally overruled the courts, which continued to declare the husband the lawful guardian. On the other hand, the ACLU cheered when Governor George Ryan of Illinois substituted his judgment for that of the courts by removing many prisoners from death row. In a later column, I’ll go deeper into the constitutional debate over saving Terri’s life.

In the October 28 *weeklystandard.com*, Wesley Smith, author of *Forced Exit*—who has accurately researched more of these cases than anyone I know—reports that of the \$750,000 to be held in trust for Terri’s rehabilitation, two of Michael Schiavo’s lawyers pressing for removal of her feeding tube have been paid more than \$440,000. Whom did that rehabilitate? Any comment from the ACLU? If the husband and the lawyers succeed, maybe the ACLU will send flowers to Terri’s funeral.

Was Terri Schiavo Beaten in 1990?

Will There Be an Investigation in Time?

Nat Hentoff

November 14, 2003

There is a new dimension in the fierce battle over whether Terri Schiavo’s life is worth saving. A federally funded investigation has begun into certain medical judgments made by her husband and guardian, Michael Schiavo, including decisions in recent months. But more important is whether the inquiry will discover what actually caused Terri Schiavo’s alleged cardiac arrest in 1990, which is said to be the reason her brain was deprived of oxygen, resulting in her condition for the past 13 years.

The degree to which this investigation is widely reported by the media may help determine whether Terri Schiavo lives or dies. Her husband is in court again to demand that her feeding tube be removed once more.

If the courts continue to support the husband, she may die before the investigation is completed. But even in that case, the results may lead to a change of state laws that could save other lives.

Conducting the investigation is the Advocacy Center for Persons With Disabilities (ACPD). Its website says it is “Florida’s protection and advocacy program for persons with disabilities.” As reported by Jeff Johnson on *cnsnews.com* (October

29), the agency has, according to its website, “the authority to investigate incidents of abuse and neglect when reported if there is probable cause to believe the incidents occurred.”

As Jeff Johnson writes, “How quickly ACPD makes a determination will depend on how difficult it is for the agency to gain access to Mrs. Schiavo’s medical records and to the people it needs to interview on both sides of the legal battle.”

I have learned that ACPD has sent Michael Schiavo’s lawyer a request that he authorize the release of Terri Schiavo’s medical records. There was initial resistance, but the records have been turned over.

What gives this investigation the potential for a dramatic reassessment of previous court decisions on the legitimacy of Michael Schiavo’s guardianship is in the lead of Jeff Johnson’s story: “The Schindler family [Terri Schiavo’s parents, who are fighting for her life] has found a new ally in the battle—one it did not seek out—in the person of a famed New York forensic pathologist, Dr. Michael Baden.” Former chief medical examiner for the city of New York and co-director of the Medicolegal Investigation Unit of the New York State Police, Dr. Baden is often quoted in news reports and interviewed on television.

In one such interview on Fox News Channel’s *On the Record With Greta Van Susteren*, I heard Baden agree with a panel of lawyers that Terri Schiavo is in a persistent vegetative state, and will not recover. But on a subsequent October 24 appearance on that program, Dr. Baden had a different perspective on the origins of the Terri Schiavo case.

Baden had now seen a 1991 bone-scan report that cast considerable doubt on a claim in Michael Schiavo’s successful medical malpractice suit, that Terri’s brain injury was caused by a potassium imbalance that led to a heart attack depriving her brain of oxygen.

Dr. Baden, who has written three books on forensic pathology, told Van Susteren: “It’s extremely rare for a 20-year-old to have a cardiac arrest from low potassium who has no other diseases . . . which she doesn’t have. . . . The reason that she’s in the state she’s in is because there was a period of time, maybe five or eight minutes, when not enough oxygen was going to her brain. That can happen because the heart stops for five or eight minutes, *but she had a healthy heart from what we can see.*” (Emphasis added).

Dr. Baden then addressed the 1991 bone-scan report on Terri Schiavo, which was completed on March 5 of that year by Dr. W. Campbell Walker in order to “evaluate for trauma” that may have been caused by a suspected “closed head injury.” In the report, Walker wrote:

“This patient has a history of trauma. The presumption is that the other *multiple areas of trauma also relate to previous trauma.*” (Emphasis added).

Here we get to what focused Dr. Baden’s attention. On cnsnews.com, Jeff Johnson reported, “Walker listed apparent injuries to the ribs, thoracic vertebrae, both sacroiliac joints, both ankles and both knees.”

In his interview with Greta Van Susteren, Dr. Baden noted “that the bone scan

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describes her having a head injury . . . and head injury can lead to the 'vegetative state' that Mrs. Schiavo is in now."

But, Baden continued, the bone scan "does show evidence that there are other injuries, other bone fractures that are in a healing stage [in 1991]."

Those injuries could have happened, Baden continued, from "some kind of trauma. The trauma could be from an auto accident, the trauma could be from a fall, or the trauma could be from some kind of beating that she obtained from somebody somewhere. *It's something that should have been investigated in 1991 . . . and maybe [it was] by police at that time.*" (Emphasis added).

Why not see if there was a police report on those traumas to Terri in 1990? The Advocacy Center for Persons With Disabilities should look into this during its investigation of possible incidents of abuse and neglect of Terri. Moreover, Pamela Hennessy, spokesperson for Terri's parents and her brother, told cnsnews.com, "This is what the family and their doctors have been saying for a number of years."

I asked Hennessy to clarify that statement. "From the beginning," she told me, "they had serious doubts as to the reason for Terri's collapse. Then, when they first heard about the bone-scan report in November of last year, they tried to file a report with the police on a possible battery on Terri. But the police wouldn't help them."

The family believes that after Terri and her husband had a violent argument earlier on the evening she collapsed, Terri might have been strangled later that night. Says Pat Anderson, the lawyer for Terri's parents:

"Governor Jeb Bush should order the state-wide prosecutor of Florida to convene a jury to investigate all of this." And the Advocacy Center for Persons With Disability has that 1991 bone-scan report. Will the courts wait for the investigations—or hurry to send her into eternity? Should Michael Schiavo have the guardianship power to terminate her?

It's Not Only About Terri Schiavo

Barriers to Killing Come Down

Nat Hentoff

November 21, 2003

People already have the right to refuse unwanted treatment, and suicide is not illegal. What we oppose is a public policy that singles out individuals for legalized killing based on their health status. This violates the Americans With Disabilities Act, and denies us equal protection of the laws.

Disability opposition to this ultimate form of discrimination has been ignored by most media and courts, but countless people with disabilities have already died before their time. —Not Dead Yet: The Resistance, a disability rights organization, Forest Park, Illinois, October 28, 2003

In 1920, a prominent German lawyer, Karl Binding, and a distinguished German forensic psychiatrist, Alfred Hoche, wrote a brief but deadly book, *The Permission To Destroy Life Unworthy of Life*. In his new book, *The Coming of the Third Reich* (Penguin), Richard Evans notes that Binding and Hoche emphasized that “the incurably ill and the mentally retarded were costing millions of marks and taking up thousands of much-needed hospital beds. So doctors should be allowed to put them to death.”

Then came Adolf Hitler, who thought this was a splendid, indeed capital, idea. The October 1, 2003, New York *Daily News* ran this Associated Press report from Berlin:

“A new study reveals Nazi Germany killed at least 200,000 people because of their disabilities—people deemed physically inferior, said a report compiled by Germany’s Federal Archive. Researchers found evidence that doctors and hospital staff used gas, drugs and *starvation* to kill disabled men, women and children at medical facilities in Germany, Austria, Poland and the Czech Republic. . . .

“The Nazis launched the drive to root out what they called ‘worthless lives’ [and ‘useless eaters’] in the summer of 1939, *pre-dating their full-scale organization of the Holocaust, in which they killed 6 million Jews.*” (Emphasis added).

The more than 200,000 “worthless lives” terminated by the Nazis before the Holocaust included few Jews. Most of those killed were other Germans considered unfit to be included in “the master race.”

Among the defendants at the Nuremberg trials of Nazi leaders and their primary accomplices in the mass murder were German doctors who had gone along with the official policy of euthanasia. An American doctor, Leo Alexander, who spoke German, had interviewed the German physician-defendants before the trials, and then served as an expert on the American staff at Nuremberg.

In an article in the July 14, 1949, *New England Journal of Medicine*, Dr. Alexander warned that the Nazis’ crimes against humanity had “started from small beginnings . . . merely a subtle shift in emphasis in the basic attitude of the physicians. It started with the acceptance, basic in the euthanasia movement, that there is such a thing as life not worthy to be lived.” That shift in emphasis among physicians, said Dr. Alexander, could happen here, in America.

Actually, the devaluing of apparent “imperfect life” had begun years before, in the United States. Various academics, in and out of the medical profession, had successfully advocated and instituted a eugenics movement—the perfecting of future generations of Americans by deciding who, depending on their hereditary genes, would be allowed to have children. The unfit would no longer be permitted to reproduce.

These American eugenicists provided German proponents of a “master race” with inspiration. As Robert Jay Lifton wrote in his invaluable book *The Nazi Doctors* (Basic Books), “A rising interest in eugenics [in America had] led, by 1920, to the enactment of laws in twenty-five states providing for compulsory sterilization

of the criminally insane and *other people considered genetically inferior.*" (Emphasis added).

Paying attention in Germany, Heinrich Himmler, one of Hitler's executioners, said the Nazis were "like the plant-breeding specialist who, when he wants to breed a pure new strain . . . goes over the field to cull the unwanted plants." Under the Nazis, there were eugenics courts to decide who could have children. In the United States Supreme Court (*Buck v. Bell*, 1927), Justice Oliver Wendell Holmes, ruling that 18-year-old Carrie Buck should be involuntarily sterilized, famously wrote:

"If instead of waiting to execute degenerate offspring for crime, or to let them starve for their imbecility, society can prevent those who are manifestly unfit from continuing of their kind. . . . Three generations of imbeciles are enough." Only Justice Pierce Butler dissented.

In this country, the eugenics movement lost its cachet for a time because the Nazis had gone from sterilization of the disabled to herding the religiously, racially, and politically unfit into gas chambers.

But there has been an American revival of eugenics in certain elite circles. A few years ago, an archconservative who had talked with some of the present-day, would-be purifiers of the American stock told me they were delighted at the deaths from AIDS of homosexuals.

But to protect the disabled from "mercy" killings, as well as eugenicists, another movement was forming here. Not long before he died, Dr. Alexander read an article in the April 12, 1984, *New England Journal of Medicine* by 10 physicians—part of the growing "death with dignity" brigade. They were from such prestigious medical schools as Harvard, Johns Hopkins, and the University of Virginia. These distinguished healers wrote that when a patient was in a "persistent vegetative state," it was "morally justifiable" to "withhold antibiotics and artificial nutrition (feeding tubes) and hydration, as well as other forms of life-sustaining treatment, allowing the patient to die." They ignored the finding that not all persistent vegetative states are permanent.

After reading the article, Dr. Alexander said to a friend: "It is much like Germany in the '20s and '30s. The barriers against killing are coming down."

Next week: The growing conviction among American doctors, bioethicists, and hospital ethics committees that it is "futile" to try to treat certain patients, and therefore, medical professionals should have the power to decide—even against the wishes of the family—when to allow these valueless lives to end.

If the courts finally permit the husband of brain-damaged Terri Schiavo to continue to press for her death by starvation—by again removing her feeding tube—more of the barriers to killing may come down in other states. So this isn't only about Terri Schiavo. It could be about you.

The Culture of Death

Who Will Decide When You Should Die?

Nat Hentoff

December 1, 2003

Ironically, the "right to die" movement was founded on the premise that patients and/or families are the best judges of when it is time to die. Now, however, we are being told that doctors and/or ethicists are really the best judges of when we should die. —Nancy Valko, journalist, medical ethicist, and intensive care unit nurse, "Bioethics Watch," Voices, 2003

Bob Schindler [father of Terri Schiavo] poignantly observes, "We pay great lip service in this country to disability rights, but as the degree of a person's disability increases, the level of legal protection that person receives decreases." —Nancy Valko, lifeissues.net, August 2003

In a November 4, 2002, story in *The Philadelphia Inquirer*, "Penn Hospital to Limit Its Care in Futile Cases," Stacey Burling reported that the ethics committee of the University of Pennsylvania Hospital had approved new guidelines which stated, "intensive care would not routinely be given to patients in a persistent vegetative or minimally conscious state. Only patients who had explicitly requested such care would get it." This *exclusion from rehabilitative or other forms of life-enhancing treatment* will apply to "patients with severe brain damage."

These patients, for whom the hospital and its ethics committee have abandoned hope, would not even be admitted to an ICU (intensive care unit).

In David Caruso's Associated Press report (December 12, 2002) on this last mile for patients at the University of Pennsylvania Hospital, he quoted Stephen Gold, a lawyer in Philadelphia who specializes in representing people with disabilities.

Noting this discounting of the lives of patients who cannot speak for themselves and have not written advance directives, Gold said that the University of Pennsylvania Hospital, and other institutions that now have similar policies, might also consider cutting off intensive care for people without health insurance or who have other handicaps beyond present guidelines.

"It is a slippery slope they are going down," Gold continued. "If we have a way to provide a medical treatment for people that will keep them alive, we should always provide it, unless they have a living will saying we shouldn't."

Gold also told the Associated Press, "Not everyone agrees on what constitutes a life worth living. I had a client with cerebral palsy once who was asked to sign a do not resuscitate order [do not revive the patient]." But that patient had gone into the

hospital “to be treated for appendicitis.”

Wesley J. Smith, an expert on the growing culture of death that is being proposed and implemented by hospitals and bioethicists, makes the chilling point: “Now, a new medical hegemony is arising, one that proclaims the right to declare which of us have lives worth living and are therefore worth treating medically, and which of us do not.

“Unless people object strongly . . . to this duty to die . . . and legislatures take active steps to intervene, this new and deadly game of ‘Doctor Knows Best’ will be coming soon to a hospital near you.”

Wes is one of the writers and researchers I consult on this nationwide movement to get the public to endorse legal euthanasia for those who would be “better off dead,” as certain bioethicists say of patients for whom more treatment is “futile.” I strongly recommend Smith’s revised and updated *Forced Exit* (Spence Publishing Company, 111 Cole Street, Dallas, TX 75207; also available on amazon.com).

Another specialist in these life-or-death matters whom I have relied on for many years is Nancy Valko. She not only writes extensively and gives workshops on medical ethics, but actually also works full-time in the intensive care unit at a county hospital in St. Louis.

Among Valko’s nursing specialties are oncology, kidney machines, trauma, cardiac and cancer care, and patients who may or may not be in a persistent vegetative state. Therefore, she is continually on the front line of the kinds of issues involved in Terri Schiavo’s case, and the many more to come.

In an article (“Futility Policies and the Duty to Die,” *Voices*, “Bioethics Watch,” wf-f.org), she writes:

“This theory [that some lives are no longer worth living] has now evolved into ‘futile care’ policies at hospitals in Houston, Des Moines, California and many other areas. Even Catholic hospitals are now becoming involved. . . . Thus, the ‘right to die’ becomes the ‘duty to die,’ with futile care policies offering death as the only ‘choice.’ . . . A poor prognosis, which can be erroneous and is seldom precise, will become a death sentence.”

I have debated bioethicists who are true believers in the “duty to die” when care is “futile.” These exchanges have been on college campuses, radio, and television. When I bring up the history of “futile care” in pre-Hitler Germany (as I did in last week’s column), the “duty to die” advocates become deeply offended. Nonetheless, they are sincerely continuing a lethal legacy.

Nancy Valko continues: “Just a generation ago, doctors and nurses were ethically prohibited from hastening or causing death. Family disputes and ethically gray situations occurred, but certain actions such as withdrawing medically assisted food and water from a severely brain-damaged but non-dying person were considered illegitimate no matter who was making the decision.

“But,” Nancy Valko emphasizes, “with the rise of the modern bioethics movement, life is no longer assumed to have the intrinsic value it once did, and ‘quality of life’ has become the overriding consideration. Over time, the ethical question,

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‘what is right?’ became ‘who decides?—which now has devolved into ‘what is legally allowed?’”

In the aforementioned November 4 *Philadelphia Inquirer* story, Stacey Burling reported what physicians and bioethicists consider a worrisome obstacle to expanding “what is legally allowed.”

“Hospital leaders [around the country] fear they would lose a lawsuit if they denied care demanded by a family.” These officials and bioethicists want more case law to enable them to end lives they consider “futile.”

Until the media spend more space and care on who decides whether—and how—certain disabled Americans should die, I recommend your remembering that, as disability rights activists say, many of us are only temporarily able.

APPENDIX B

[David Gelernter is a professor of computer science at Yale and author, most recently, of The Muse in the Machine (Free Press, 2002). The following is reprinted from The Wall Street Journal ©2003 Dow Jones & Company, Inc. All rights reserved.]

Terri Schiavo's Life

David Gelernter

The death-by-starvation facing Terri Schiavo was averted last week when the Florida Legislature passed a bill letting Gov. Jeb Bush intervene to save her life. Mrs. Schiavo has been severely mentally disabled since her heart stopped for a time in 1990. Although doctors have called her condition "vegetative," she breathes on her own, her eyes are open, and in video clips she appears to respond with smiles to the sound of her mother's voice. That is one ground on which her parents have pleaded with authorities to let their daughter live. But a court, acting on her husband's petition, ordered her feeding tube removed, and until the Legislature acted, Gov. Bush had no authority to override Michael Schiavo's decision.

Mrs. Schiavo's parents believe that she knows them and is comforted by them. They believe they are communing with their daughter. Given my own experience with the gravely ill and the dying, I will take the parents' word over the doctors' any day.

And who dares say you have no right to commune with your gravely ill child? To comfort your child? To pray for your child? Who dares say you have no right to hope that she will recover no matter *what* the doctors say? Who dares say you have no right to comfort, commune with and pray for her even if you have given up hope? Yes, the woman is mortally ill. Who dares say that her life is therefore worthless, to be cut off at her husband's whim?

Perhaps you believe that those who are suffering, or choose death, or are wholly unconscious, have a "right" to die—but those arguments don't apply to Mrs. Schiavo. They are irrelevant here. Except—not quite irrelevant. After all, those are the arguments that have brought us, as a society, to a state where we contemplate killing Mrs. Schiavo before her parents' eyes, maybe (for all we know) as she smiles right at them.

The rabbis speak often of the crucial religious obligation of visiting and comforting the sick. They derive the requirement directly from what they call the "greatest principle of Torah," a certain verse in Leviticus: "You shall love your neighbor as yourself." God himself is said to have visited ailing Abraham. When you visit sick people, your most important duty is to pray for their recovery. Such an act matters profoundly not only to the sick but (as a positive religious obligation) to the visitor, and the society he represents. "He who visits a sick man," Maimonides writes, "is as though he would take away part of his sickness and lighten his pain." Who dares deprive parents of that right?

When we have condemned a criminal to death, it is remarkable how patient we are in extending his life. So long as there are legal paths to follow, we follow them,

and the courts are apt to postpone the execution. Both aspects of the process speak well for us: that we are willing (however painful it may be for us—and it gets more painful every year) to execute murderers; and that we are in no hurry to, and will search on and on for a convincing reason not to.

With the likes of Mrs. Schiavo, we are a lot less patient. The governor can grant a stay of execution when a condemned murderer's life is on the line. Mrs. Schiavo's stay required that the whole Florida Legislature mobilize for action. The frightening question is: What happens to the next Mrs. Schiavo? And the next plus a hundred or a thousand? How much attention will the public and the Legislature be able to muster for this sort of thing over the years? The war against Judeo-Christian morality is a war of attrition. Time is on the instigators' side. They have all the patience in the world, and all the patients. If this one lives, there is always the next. After all, it's the principle of the thing.

For years, thoughtful people have argued that "reasons for taking a human life" should not be treated as a growing list. There are valid reasons to do it, and they have been agreed for millennia. If the list has to change, better to shorten than lengthen it.

Thoughtful people have argued: Once you start footnoting innocent human life, you are in trouble. Innocent life must not be taken . . . unless (here come the footnotes) the subject is too small, sick or depressed to complain. One footnote, people have argued, and the jig is up; in the long run the accumulating footnotes will strangle humane society like algae choking a pond.

Who would have believed when the Supreme Court legalized abortion that one generation later, only one, America would have come to this? Mrs. Schiavo's parents wanting her to live, pleading for her to live, the state saying no, and a meeting of the Legislature required to pry the executioner's fingers from the victim's throat?

I would never have made such an argument when the abortion decision came down, and I would never have believed it. I still can't believe it. Is this America? Do I wake or sleep?

APPENDIX C

[Marianne M. Jennings is a professor of legal and ethical studies at Arizona State University and a contributor to Jewish World Review (jewishworldreview.com), where the following column appeared on Oct. 30, 2003. Reprinted with Ms. Jennings' permission.]

What I know as the mother of a “non-cognitive, vegetative state” 16-year-old

Marianne M. Jennings

The quest for utopian socialism has its twists and turns. A woman has the right to choose when it comes to the life of her unborn child. But, in the exception-ridden liberal conscience, choice regarding her own life belongs to her husband. Husbands have no say in wives' abortions, but, according to those wacky Florida courts, they have the final say on their wives' lives. In the case of 39-year-old Terri Schiavo, her husband, complete with mistress and their children, wants her starved to death. A Florida court, finally halted in its unrighteous dominion by another Bush, ordered it so. Liberals oppose the death penalty for criminals, but not for innocents.

I have a conflict of interest on the Schiavo case. Our daughter Claire, who survives via a feeding tube, has the same fleeting smiles and darting eyes in pursuit of balloons as videos show Mrs. Schiavo has. My conflict is that my blood boils when doctors use terms such as “vegetative state” and “no cognitive functions” to describe Mrs. Schiavo and Claire.

Unless they are primary caregivers, doctors know little of the capabilities or desires of souls who remain captive in bodies that cannot function at full mental and/or physical speed. They view the smiles of glee and scrunched noses of distaste as “involuntary subcortical responses.” What do they know of the power of a mother's voice? It induces eye flutters that spell out in Morse code, “I'm here. Talk to me again!”

The docs are cold-hearted because medicine is finite. Medicine cannot change these vegetative states. The same can be said of a hard-core addict or a victim of depression. Science has its limitations. But love and dedication combine with inner strength and miracles abound. Miracles need not be Lazarus-like risings from the bed to do the Macarena, but can emerge in the subtle sounds and movements of the indefatigable soul within screaming, “Hey, I'm alive!”

No two vegetative states are alike. Karen Ann Quinlan's father petitioned successfully to the New Jersey Supreme Court to have her respirator removed. Surprise, Dad! Karen breathed on her own, for ten years. Terry Wallis awoke from 18 years in a coma and asked for Mom, Pepsi and milk, in that order!

Even if they cannot defy odds, these patients leave us naturally. Fragile constitutions, susceptible lungs and immobility limit their time. As in the Quinlan case, they are taken by the mortal enemy of the neurologically impaired, pneumonia.

Given these factors, that physicians know very little about that line between cognition and so-called vegetation, that miracles happen, and that fragile health

succumbs, why the court petitions? Why the feeding tube removals? Why the rush? Death row inmates get more time, appeals and reprieves than these innocents.

Michael Schiavo, Terri's husband, now armed with the ACLU, assures us that his wife wants to die. Friends of Nancy Cruzan, another "persistent vegetative" patient, had judges remove her feeding tube. These ex post facto choices are foisted upon those who cannot speak.

Courts have labored mightily in the vineyards of greedy relatives, diabolical murderers and petty fiends for over 500 years to develop will and probate laws that avoid such he said/she said contentions when there are no written documents from decedents who can no longer speak.

Written proof, not assertions by those who have financial conflicts of interest, determines intent. This willy-nilly legal framework for taking the life of one who has not reduced such a desire to writing mocks the law's demands for caution and morality's edicts on the sanctity of human life.

The removal of feeding tubes, even from the "persistent vegetative state" patients is more than a slippery slope. Removal degrades and devalues human life. The reaction to the passing of Leo the dog on a California freeway carried more outrage than this court-ordered starvation death of a woman who clearly responds to her mother.

When loved ones slip into vegetative states, life becomes so messy. The costs, the work, the clipped wings from the demands of care. But, Mrs. Schiavo's parents want to give that care and physicians have volunteered for pro bono services. Mr. Schiavo has no worries.

That Mrs. Schiavo is still alive is the answer to this so-called ethical dilemma. Our souls are too shallow and our minds too finite to comprehend why Mrs. Schiavo is still here with us. She and our other "vegetables" are a treasure trove of insight. Humility abounds in their minds, so unaffected by the shallow demands of a world that measures worth by trivial materialistic pursuits. They offer the lessons of unconditional love and the blessings of service.

As the parent of a "non-cognitive, vegetative state" 16-year-old, who was, by all medical experts, not destined to live more than six months, I offer advice. Seize the opportunity to honor life, in all its forms. A body not constrained by the pettiness of appearance or consumed by the drive of ambition is a glimpse of the purity of heaven. Spend fleeting moments in the company of these angels. They will leave us all too soon, even with their feeding tubes intact. The veil between the eternities and this world turns transparent when you look into what medical science calls "non-responsive eyes." When you catch a glimpse of that beyond you will wonder, "Who wouldn't want to live in their utopia?"

And I do mean live.

APPENDIX D

[M. Therese Lysaught teaches theology at the University of Dayton. The following essay appeared in the Sept. 26, 2003 issue of Commonweal. ©2003 Commonweal Foundation, reprinted with permission. For subscriptions: www.commonwealmagazine.org.]

Embryo Adoption?

M. Therese Lysaught

Last March, Newsweek discovered embryo adoption. A brief story recounted how a couple, “after five years of fruitless fertility treatments,” had heard about a Christian agency that arranged implantation of unused frozen embryos produced in the course of in vitro fertilization. In what the article called “the latest twist in the ever-complicated world of reproductive medicine,” the couple obtained embryos (and consequently had a son) from “a devout Christian” who did not want to see her excess embryos destroyed.

Actually embryo adoption is nothing new, although, as the story made clear, it is currently stirring heated debates. At most infertility clinics, it has long been a standard option. Instead of going through expensive, burdensome, and sometimes risky infertility treatments to produce embryos of their own, couples can implant embryos “left over” from the treatment of other couples. In August 2002, the Department of Health and Human Services (HHS) launched a Public Awareness Campaign on Embryo Adoption. During this fiscal year, HHS planned to distribute approximately \$900,000 to nonprofit agencies and organizations to alert those seeking infertility treatments about the option of embryo donation and adoption.

The campaign has run into criticism from many quarters. Many bioethicists initially scoffed at the idea of promoting the “adoption” of microscopic embryos. Supporters of embryonic stem-cell research were quick to label the project “weird” or “absurd.” Some critics argued that any move to recognize the value of embryonic or fetal life threatened to undermine the protections of *Roe v. Wade*. The term “adoption” implies that embryos are like children, or, in the words of NARAL Pro-Choice America (formerly the National Abortion and Reproductive Rights Action League), “human beings with rights.” A similar critique was voiced recently when HHS proposed to define fetuses as children for the purpose of providing women with access to federally funded prenatal care. Coupled with this initiative, the embryo-adoption program is suspect as part of a back-door effort by HHS to promote a not-so-hidden prolife agenda. Others object that the program wastes scarce health-care dollars. With 41 million people uninsured in this country, they say, HHS’s \$900,000 could be better spent on some other health-care initiative. Then there are people who believe the program will undermine traditional adoption. Despite these objections and other potential problems, embryo adoption ought to be taken seriously.

The HHS program is a response to the increasing number of frozen embryos in storage. Even though many unimplanted embryos fertilized for fertility treatments are discarded each year, from one hundred thousand to two hundred thousand

probably remain frozen (though some estimates place the upper range at well over a million). Roughly nineteen thousand are added each year. Why so many? In vitro fertilization (IVF) is an inefficient business. The overall success rates for IVF still hover at around 20 percent. The more embryos one has to work with, the better the odds that one of them will produce a baby.

During the initial phase of infertility treatment, women take high doses of drugs to “hyperstimulate” their ovaries, producing on average a dozen ova (eggs) per cycle. Ova, however, do not freeze well. Embryos do. Consequently, infertility specialists fertilize as many ova as possible. Of course, implanting a dozen embryos at once would present extraordinary risks to both mother and babies, so standard practice is to implant two to four embryos at a time. The rest are frozen. If implantation does not take place, the couple returns to their supply of frozen embryos to try again. When the procedure does work, their remaining embryos remain frozen, awaiting possible future implantation.

Eventually some couples who go through fertility treatment face the dilemma of what to do with their unused embryos. Financially, emotionally, and even physically, the investment in infertility treatment is high. Ova retrieval exacts a significant toll on a woman’s body. The cycles of hope and disappointment, desperation and elation, in the long journey to and through infertility treatment are emotionally draining. These couples want babies, and each living, viable embryo presents the material possibility that the couple’s long suffering will be rewarded and their dreams realized.

Yet what is to be done with the embryos that couples no longer need? The couples could simply discard them. But to those who have invested so much in these little beings, who know themselves to be tied to them in an ambiguous yet material way, this option is often deeply distressing. Consequently, many couples opt to leave their embryos frozen indefinitely. Still, the logistical problems of indefinite storage are beginning to be felt. Many infertility centers now refuse to store embryos longer than three to five years. What is a couple to do? If they don’t wish to implant or discard them, all that remains is to donate them for research, or to donate them to another couple.

Who might want someone else’s embryos? Some couples seek the services of infertility clinics because their own gametes present a risk of transmitting a serious genetic disorder. Utilizing donated embryos minimizes the risk. Other couples turn to donated embryos as a last resort, should their own embryos not implant. The HHS program is aimed at both groups.

When pushed, most critics do not object to individual instances of embryo adoption. It is the “adoption” language that raises opposition. Abortion-rights groups prefer that the process be described as one of “embryo donation,” or in more neutral, reductive terms, such as “the transfer of genetic material” from one party to another.

Of a different nature are concerns about the quality of frozen embryos. Studies have found that babies created through IVF are twice as likely to be born under-

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weight and with a major birth defect. As a consequence, some infertility centers have decided, on “ethical” grounds, not to offer embryo donation at all. Still, the underlying cause of the increased incidence of birth defects is not clear. Does it result from fertility drugs and other interventions used to produce the embryos, from the freezing and thawing of the embryos, or from the underlying cause of the woman’s infertility itself? These questions remain to be answered.

Another important question is how the HHS program might affect the donating couple. Many couples undertake infertility treatment without a clear sense of the moral implications of the procedures. Infertility treatment enmeshes them in a process that views embryos as part of a system of manufacture. Efficiency, quality, and raw materials are all valued to the extent they contribute to the final product. Most couples are not prepared for this objectifying process or for the toll it can take on marital relationships. So ardent is their longing for a child that the ethical dilemma of having to decide the fate of “excess” embryos rarely occurs to them. By the same token, may pressure come from another side of the moral equation? As a result of advocacy such as the HHS program, may some couples feel coerced into donating their embryos when they would rather not? “The program might suggest that donating embryos [for adoption] is preferable to donating them for research or discarding them altogether,” warns the American Society for Reproductive Health. There’s the rub: can we not say that donating embryos to other infertile couples is preferable to giving them for research or simply discarding them?

Clearly, the architects of the HHS program would answer “yes.” In fact, the program’s agenda is not hidden. Arlen Specter (R-Pa.), the congressional sponsor, has been quite candid. While he supports the use of “leftover” IVF embryos for stem-cell research, he does so only if they are designated for destruction. A first priority, he argues, is to ensure that all embryos that can be brought to term will be.

A cynic, of course, might see in Senator Specter’s reasoning not a back-door prolife agenda but rather a bone thrown to mollify opponents of embryo research. That may be the case. Still, if public funds are going to be spent for embryo research (which Specter supports), why shouldn’t public funds also be spent on initiatives responsive to the concerns of embryo-research opponents?

Moreover, there are good feminist reasons to support embryo adoption. Embryo donation/adoption promises to reduce the burdens of reproductive technologies on women in three ways. First, it can lessen the significant hardship associated with ova harvesting. That process is neither easy nor pleasant, and the long-term effects are not yet known.

Second, embryo donation/adoption provides a way to reduce the cost of infertility treatments. At \$10,000 per cycle, and with IVF success rates hovering at 20 percent or less, the price can end up in the \$20,000–\$50,000 range. Embryo donation/adoption is much less expensive (about \$4,000), offering access to women who would otherwise not be able to afford fertility treatment.

Third, many couples resist traditional adoption. The practical hurdles and time

frame associated with the process are not the least of their concerns. A child's prenatal environment is a worry. The wish to experience pregnancy, the bonding that goes with it, and the occasion to breastfeed (which is possible in some adoptive situations, but is sometimes quite difficult) are also incentives for embryo adoption. Thus, while describing embryos as "adoptable" may raise questions about how we have viewed the relationship between women and embryos, the practice itself promises to reduce real burdens on real women, and increases their reproductive options.

Moreover, increasing the awareness of embryo donation/adoption may provide a much-needed service to donating couples. Donating what they see as their offspring to another couple may not be what they initially envisioned, but it may be more consistent with the purposes for which they produced the embryos in the first place, and therefore be less objectionable than disposal or use for research.

One significant question remains: would a systematic practice of embryo adoption undermine the system of traditional adoption? Could it negatively affect the prospects of children in foster care who are in need of parents? Does every prenatal adoption translate into a loss for some other needy child? Possibly. Yet many couples have already excluded traditional adoption, have exhausted their technological options, and for them, pregnancy by means of a donated embryo seems to be the last resort.

Infertile couples who wish to be faithful to Catholic teaching may well wonder how to think about embryo adoption. The Vatican's position since 1987 has been that fertility counseling is acceptable but techniques which create embryos outside a woman's body, techniques like IVF, are not. Would accepting a donated embryo created in a lab be morally akin to engaging in that action oneself, or ought it rather be seen as similar to adoption, an act embodying the belief that embryos are not simply a "form" of human life, but truly children, to be protected and nurtured?

Catholic moral theologians differ on this question. Some believe the act is properly described as one of "rescuing" a child orphaned before birth. Others feel that the technological nature of the process undermines the integrity of marital reproduction and helps to legitimate a procedure which is morally rejected by the church. At issue, then, is what the adopting couple believes they are doing.

For those concerned about assisted reproduction, embryo adoption may tend to subvert the presuppositions of reproductive technologies in two important respects. It de-emphasizes the genetic imperative that drives so many people to infertility clinics: Embryo adoption is not about having one's "own" biological child. Moreover, it requires accepting the child truly as a "gift"—donated in the true sense by the donating couple—and welcoming into their lives and home one who is completely a stranger.

In the end, the HHS program challenges supporters of embryonic stem-cell research to be more candid. The National Bioethics Advisory Commission's 1999 report, "Ethical Issues in Human Stem-Cell Research," stated that while embryos are not to be considered "persons" in the sense of having rights, they are a form of

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human life that deserved “respect.” The overwhelmingly negative response to the HHS proposal confirms the suspicions of many that “respect” is an empty concept. If this is not the case, those who support federal financing of embryonic stem-cell research but oppose federal support of embryo adoption need to articulate more clearly just what treating embryos with “respect” might mean.

Reproductive rights is not a zero-sum game. Concrete attempts to “respect” embryos do not automatically undermine the rights of “living, breathing women.” In this case, living, breathing women stand to benefit.

Those who wish to embody the church’s commitment to caring for the vulnerable must take care not to fall into our culture’s habit of pitting life against life. If pursued with discernment, embryo adoption may present a positive and concrete way to witness to the value of all human persons—women and embryos alike. It is an obvious fact to many people that bringing embryos to term is preferable in every way to discarding them or destroying them through research. Embryo adoption provides a tangible way for Christians and others to bear witness to this.

APPENDIX E

[Andrew Lustig is director of the Rice-Baylor College of Medicine Program on Biotechnology, Religion, and Ethics, and a research professor in Rice's department of religious studies. This essay appeared in the Sept. 26 issue of Commonweal. ©2003 Commonweal Foundation, reprinted with permission. For subscriptions: www.commonwealmagazine.org.]

Separated After Birth

Andrew Lustig

The field of bioethics cut its teeth on a number of high-profile cases (beginning with Karen Ann Quinlan in 1976) that established the right of patients and their designated surrogates to withhold or withdraw life-sustaining treatment. These cases, in turn, led to the introduction of living wills and to the passage of so-called natural-death acts. In broader brush, bioethics developed against a backdrop of increased concern for human and civil rights, including the rights of patients to decide about their own treatment. With this newfound emphasis on patient involvement, an older version of doctor-knows-best paternalism could no longer survive unquestioned.

Times have changed, and largely for the better. Yet despite the new emphasis on patient autonomy, a second, sometimes countervailing, value must be maintained in the clinical partnership between patients and physicians. Clearly, patients and, when necessary, their surrogates, have the right to make decisions about treatment. Still, that right is largely negative in character: to refuse treatment they find unduly burdensome. Autonomy does not imply that patients have the right to demand treatments physicians judge to be unwarranted, harmful, or medically futile. Indeed, in recent years, standards for avoiding medical futility have provided an important corrective to the idea that patients (or their surrogates) can demand any treatment they want, independent of medical assessment of its potential harms and benefits. Doctors, after all, are not mere technicians of patients' desires, but professionals with specialized knowledge in their own right.

The recent case of Laleh and Ladan Bijani, the twenty-nine-year-old Iranian conjoined twins who died in a Singapore hospital on July 8, after more than fifty hours of surgery aimed at separating them, highlights the tensions between respect for patient autonomy and professional medical judgment. In the wake of the twins' deaths, many questions have been raised about the risks associated with their surgery. Prior to the operation, proponents emphasized that the twins, as competent adults, were able to weigh the dangers of the surgery against their strong desire—after twenty-nine years of being joined at the brain—to live independent lives. While the risks of the surgery were admittedly high and the physical risks of continuing their lives conjoined fairly low, the twins apparently judged the benefits of separation to be worth the gamble.

If the value of autonomy always trumps in such decisions, the twins' deaths, while unfortunate, would require no further moral justification. Yet a number of commentators before and after the surgery have questioned its appropriateness—

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not on the basis of what the twins wanted for themselves, but in light of what constitutes “reasonable” medical judgment regarding the risks they faced. With the advantage of hindsight, two aspects of the case seem especially telling. First, while the twins had tried for years to enlist doctors at other centers for the surgery, after reviewing the case physicians in at least six centers in Germany, England, and the United States refused to perform the surgery. They found the risk of death excessive. Second, more than thirty hours into the actual operation, significant complications arose, prompting one prominent member of the Singapore team to stop the procedure and to attempt to convince the twins’ designated surrogate to return them to the intensive care unit, stabilize them, and reschedule the separation for a later time. The surrogate refused. Afterward, the specialist described the tension between his judgment and that of the twins’ spokesperson: while everyone on the team agreed that “it might have been better to proceed in stages...the twins’ desire to go for broke took precedence.”

Should it have? Before the surgery, some members of the Singapore team set the odds of one or both of the twins surviving at “no better than fifty-fifty.” In hindsight, even that calculation seems unreasonably optimistic. Other surgeons, including some who refused the twins’ earlier requests, set the odds much lower, at between 2 and 10 percent. If the Singapore estimates are evidence of irrational exuberance rather than sober medical judgment, they call into question the “informed” nature of the twins’ consent. For unlike extremely risky surgeries offered as a last resort to patients who are otherwise terminal, the Bijani twins, though desiring independence, faced no immediate danger. (There are documented cases of conjoined twins surviving into their sixth decade.) Furthermore, while the Bijani sisters faced significant medical problems, including high intracranial pressure, surgical alternatives that are less radical would have been available to address those aspects of their condition.

Those who judged the twins’ surgery to be ethical—whatever the odds of survival—argued that the twins’ lives were so abnormal, so restricted, that the twins were willing to risk all for the chance, however remote, of independence. (What the sisters’ attitudes might have been had the odds been more realistically presented to them will remain forever unknown.) Still, a larger issue remains: what are the role and the importance of objective medical standards in such cases? Respect for autonomy means that patients are free to assess the burdens and benefits of their treatment—and a proper reading of the Catholic notion of ordinary and extraordinary means of treatment supports this patient-centered focus. Nonetheless, doctors, by virtue of their specialized knowledge and experience, rightly contribute a separate calculus for ascertaining the likely *medical* benefits and burdens of such procedures. Wishful thinking, or the expectation of a miracle, is hardly the basis for such professional assessment.

The case of the Bijani twins remains a troubling one. I cannot imagine what their lives must have been like, or what led them to find their gamble, though misstated, so appealing. Nor do I care to imagine the chaos that must have devel-

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oped in the operating theater as the Singapore team worked against much stiffer odds than it had anticipated (or admitted) before the procedure. Still, for all my interest in and respect for patient autonomy, I wish to underscore the values that define medicine as a scientifically based profession. In this tragic case, the balance between important but competing values was not appropriately maintained. I question whether the information at the twins' disposal was accurate. I wonder whether what occurred was less an expression of therapeutic intention than an instance of unacknowledged human experimentation.

APPENDIX F

[Brent Bozell is president of the Media Research Center. The following column, published Oct. 1, 2003, is reprinted by permission of L. Brent Bozell and Creators Syndicate, Inc.]

Behind the Holly Patterson story

Brent Bozell

Holly Patterson died two weeks after her 18th birthday. Blonde and beautiful, graduating high school after three years, this young native of the San Francisco area had her whole life in front of her. But then she entered a Planned Parenthood clinic without her parents' knowledge and took the abortion-drug cocktail known as RU-486. Within a week, she was dead of septic shock, infected by pieces of the baby she was trying to expel.

The heartbreaking human interest of Holly's story did break through the national media's usual political defenses at least for a story or two. Morning shows on ABC and CBS, as well as evening shows on CNN and MSNBC reported it (although it couldn't be located on abortion-phobic Fox).

But the real story took place three years ago.

In September 2000, the Clinton administration rushed the approval of RU-486 through the Food and Drug Administration in case Al Gore's campaign wouldn't prevail to provide aid and comfort to the abortion industry.

None of the liberal media's anti-corporate impulses were excited by the plans of the abortion lobby and Danco Laboratories, the American manufacturers of RU-486, to surpass all the usual FDA safety procedures in a rush to profit from newly approved chemical abortions. Instead, it was all an occasion for joy. On NBC's "Today," news anchor Sara James proclaimed: "Abortion rights supporters call it a victory over medical McCarthyism."

Before RU-486 was approved, pro-life criticism was dismissed as political noise. Since then, all their criticism has been systematically dismissed by the press.

Last August, a group of pro-life researchers — the American Association of Pro-Life Obstetricians and Gynecologists, Concerned Women for America and the Christian Medical Association — filed a 90-page "citizen's petition" with the FDA outlining how Clinton's FDA ignored its own laws and procedures to rubber-stamp Mifeprex, one half of the two-drug RU-486 regimen. Mifeprex kills the baby by destroying the nutrient lining of the uterus. A few days later, Misopristol is used to expel the corpse from the womb. Here's what went wrong:

1. Lobbyists railroaded FDA approval through the accelerated review process known as "Subpart H," designed only for drugs intended to treat life-threatening illnesses where there is no safer remedy. Only in Washington is a healthy but unwanted baby considered a life-threatening illness. In fact, Holly's story suggests the opposite: Terminating the baby caused a life-ending illness.

2. The FDA regulations overlooked the usual scientific safeguards used in clinical trials. For example, while the trials used sonograms to determine the age of the fetus, FDA regulations have not required an ultrasound before usage — even though

the drug is not recommended for pregnancies beyond 49 days' gestation and it does not terminate ectopic (fallopian-tube) pregnancies. Whether or not Holly Patterson had an ectopic pregnancy is a crucial factor in investigating her death. In a previous case, an American woman bled to death because of a ruptured tubal pregnancy that wasn't distinguished from the normal heavy bleeding typical of an RU-486 abortion.

3. The FDA failed to test the drug on adolescents like Holly Patterson — even though they represent a target market, since clinics advertise it as an abortion method that increases privacy. No doubt Holly thought RU-486 was preferable because it evaded a surgical procedure.

4. The FDA normally requires that the selection of patients in a drug trial be random, that some patients receive a placebo to create a control group, and that participating physicians are not told who is and is not receiving the actual medication. In the FDA's supposedly scientific trials for Mifeprex, the selection of subjects was not random, and no one received a placebo.

This petition was ignored by the networks. But they also ignored Danco's admission to the FDA in April 2002 that no less than 400 women suffered complications after using RU-486. Two women had died after using Mifeprex, one from that ruptured tubal pregnancy and one from a fatal bacterial infection. Canadian drug trials were halted when a participating woman died.

Holly's father, Monty Patterson, learned about the problem too late. He told the San Francisco Chronicle, "The medical community treats this as a simple pill you take, as if you're getting rid of a headache. The procedure, the follow-ups, it's all too lackadaisical. The girl gets a pill. Then she's sent home to do the rest on her own. There are just too many things that can go wrong."

Will anything happen to prevent more teenage girls from dying? Here are two reasons for pessimism: The FDA has no enforcement mechanism that requires Danco to share all the reports it receives on negative effects. And there is no greater supporter of unrestricted abortion in American society than that "watchdog" entity entrusted to shed light on this horror.

APPENDIX G

[Chuck Colson is founder and chairman of BreakPoint Online (www.breakpoint.org), where the following appeared on Nov. 6, 2003. Reprinted with permission of Prison Fellowship, P.O. Box 17500, Washington, D.C. 20041-7500.]

Never Give Up: Banning (Finally) Partial-Birth Abortion

Chuck Colson

Yesterday, Jim Dobson, Don Hodel, Mike Farris, Tony Perkins, and I met with President Bush in the Oval Office just before he signed the Partial-Birth Abortion Ban Act of 2003. We had a wonderful conversation, celebrating one of the most significant days of his presidency and a great day for all who believe in the sanctity of life.

The president talked freely about his faith and how committed he is to the cause of defending human life.

I remarked to the president that the partial-birth abortion ban is simply part of a pattern that we've seen under his leadership. First, there was the legislation to stop sex trafficking; then the Prison Rape Elimination Act; then his efforts to stop slavery and genocide of Christians in the Sudan, an issue that may very soon have a successful outcome; and then, of course, the campaign to help AIDS victims in Africa and to promote abstinence; and the defunding of international agencies that promote abortion. We talked about how all of these things spring from a truth central to a Christian worldview: the dignity and value of every human being.

I told the president that this was the pattern followed by William Wilberforce, a conservative member of Parliament and a Christian. In the eighteenth century, he fought for twenty years to abolish slavery, the great abomination of his day, and as a result of that, a great spiritual awakening swept England. It is interesting that all through history conservatives with Christian consciences have done the great works that liberals only talk about.

This president has a deep concern for those in the margins of society—the helpless, “the least of these,” whom Jesus cares so much about. After the meeting, we took the motorcade over to the Ronald Reagan Building where the president signed the bill before 400 people, including, it seemed, half the Congress. There was a great sustained applause as the president talked about his administration's commitment to life. Though this law will draw lawsuits, he said, “the executive branch will vigorously defend this law against any who would try to overturn it in the courts.”

When earlier, we had been sitting in the Oval Office, with the light streaming in from the Rose Garden, my mind wandered back to two previous occasions when, rather than seeing a partial-birth abortion ban signed, Jim Dobson and I, accompanied by Cardinal Bevilacqua and once Cardinal O'Connor, went all over Capitol Hill, trying to win enough votes to override President Clinton's two vetoes of similar bans.

On one occasion, after the vote was cast, Jim and I were in the marble room just

off the Senate floor, when we saw Kate Michelman and her pro-abortion lobbying team high-fiving one another. I thought to myself, what depths a society sinks to when people celebrate the killing of unborn children. Those were discouraging days, but like Wilberforce, we didn't quit fighting.

Often Christians say the culture war is too much for us: We're losing all the battles; we can't win; maybe we should just give up and take care of our churches. No. No. No. Never despair. Never give up. It would have been tempting that dreary September afternoon in the marble room when we saw yet another defeat to just give up. But the movement kept pressing on. Now, finally Congress has passed a ban for the third time, and—thank God—a president has the courage to sign it into law. The lesson? Don't quit—truth wins in the end. Don't retreat into our sanctuaries. Let's do our duty and resolve to keep fighting until this dreadful villainy—taking innocent human lives—is eradicated.

APPENDIX H

[Pia de Solenni is director of Life and Women's Issues at the Family Research Council in Washington, D.C. This column originally appeared on National Review Online (nationalreview.com), Sept. 30, 2003, and is reprinted with permission.]

Miracles of Life

Pia de Solenni

Samuel Armas made more of an impact on this world before he was born than most of us make in a lifetime. — Michael Clancy

Clancy would know. He recorded Samuel's heroic grasp in the 1999 photograph now known as "The Hand of Hope."

Samuel's parents learned before their son was born that he had spina bifida, a hole in his spine which would leave him physically and mentally disabled. Termination of the pregnancy was not an option; Samuel's parents wanted him regardless of his disabilities. This same courage drove them to find an answer to his problem.

When Samuel was 24-weeks-old in utero, his mother underwent surgery to correct his condition. After the surgery was completed, Clancy noticed that the womb was moving and no one was touching it. In a split second, a hand reached through the incision in the womb. A doctor touched it and the tiny hand, in a motion that recalls Michelangelo's *Creation of Adam*, tightly squeezed the doctor's finger.

Clancy took the picture. An attending nurse asked what happened. When he explained, she responded, "Oh, they do that all the time."

Senator Sam Brownback (R., Kan.) sponsored a Senate hearing last Thursday to highlight advances in fetal surgery. Witnesses included Samuel's parents, photographer Michael Clancy, Dr. James Thorpe, a maternal fetal-medicine specialist, and Samuel himself. For Washingtonians whose work focuses on family, life, and bioethics issues, Brownback's hearing provided a rare opportunity.

We're used to fighting hard and we understand the voices of Americans outside the Beltway who neither understand nor accept the culture of death. Although it's been 30 years since *Roe v. Wade* was passed, legalizing abortion on demand throughout the United States, we haven't lost. The fight's still going.

Kate Michelman, president of NARAL-Pro-Choice America, alluded to our strength when she recently announced her upcoming resignation. She fears that we will win and bring back a culture of life, in which each person is protected from conception until natural death.

Senator Brownback clearly stated that the hearing on Thursday was not about abortion. As he pointed out, it's a given that the unborn child is alive. The question for another hearing would be, Is this life worth protecting?

Advances in fetal surgery provide the opportunity to witness the unique character of a child even before birth. When Samuel reached his hand through the opening in the womb, he became a hero. He reminded us why we do the work we do,

why we love our families and work to protect them, and why we strive to protect innocent human life at every stage of development.

While the legislature and the courts may lag behind, medicine has already granted unborn children special rights as patients. Dr. Thorpe specializes in unborn patients. They're people who aren't recognized by law, but he treats them. In Samuel's case, the insurance company also recognized him and covered the bill. In the eyes of the law, Samuel didn't exist at that point. Naming him was pure sentimentality since personhood would only be granted to him once he was born. His surgery, however, was reality, not a figment of someone's imagination.

Samuel may only be three-years-old, but he was able to identify himself when the senator pointed to the "Hand of Hope" and asked him if he knew who it was.

Easy. "Baby Samuel."

The senator proceeded to ask Samuel if he knew what had been done to him.

"They fixed my boo-boo."

Technology and medicine have enabled us to come to know the personality of the unborn child earlier and earlier in its development. Just this month, doctors in the U.K. recorded the smiles of unborn children, 24-weeks-old, through ultrasound. This technology, most notably provided by General Electric, enables parents to see their unborn child so clearly that they can note whether he's got mom's mouth, dad's chin, or grandma's nose.

The same technology allows doctors to see complications so that specialists like Dr. Thorpe can operate on in utero infants as young as 19-weeks-old, correcting such defects as cleft palate and spina bifida. Doctors may soon be able to provide in utero the type of cord-blood-cell transfusions (adult stem cells) that cured 16-year-old Keone Penn of sickle-cell anemia. In other words, they can start a child's cure before her birth.

Dr. Thorpe's patients are just like any small child. They shrink from the pain of the needle when they get a shot. They draw back and literally need to be chased around the womb. They require sedation for surgery like other patients because they react to pain. Only science limits the treatment of the unborn child, and as it advances the limit becomes younger and younger.

Last week was yet another instance when we were able to witness the miracle of life authentically assisted by science. The conversation as Senator Brownback interviewed his three-year-old witness reminded us all of the unique personality and gifts that each person has. Samuel was the star of that room and everyone wanted to know his story. Without the love and courage of Samuel's parents and his doctors, we likely would not know Samuel. He would not have had the chance to awe us with his first handshake.

Samuel has been a charmer since before he was born. Perhaps the next time Samuel's visiting in D.C., the Supreme Court justices and many of our congressmen could spend some time with him to better understand the continuum of human dignity. After all, if a three-year-old can get it . . .

APPENDIX I

[The following story was published by Cybercast News Service on November 10, 2003. © 2003 CNS-News.com. Used with permission.]

Texas Builder Boycott Blocks Abortion Clinic Construction

Steve Brown

(CNSNews.com) —The willingness of some Texas pro-lifers to mix their personal views with their everyday professional lives has blocked the construction of a \$6.2 million abortion clinic in Austin.

San Antonio-based Browning construction, one of the largest such firms in the state, pulled out of the contract recently after a key contractor balked at the project because it was going to house a Planned Parenthood clinic where abortions were going to be performed.

“We have requested that the construction contract be terminated because we are unable to secure and retain adequate subcontractors and suppliers to complete the project in a timely manner due to events beyond our control,” read a statement by Browning Construction.

Chris Danze, president of the Austin-based concrete contractor Maldonado and Danze, Inc., launched a boycott in August when he learned for whom the building was going to be constructed.

“When I saw that, I said to myself, okay they’re going to build a new building, which means they’re going to need subcontractors, suppliers, many of which I know because I’m in the building business,” Danze told CNSNews.com.

Danze, who along with his wife Sherry, is a pro-life advocate who has often provided counseling and shelter to troubled pregnant teens, then sent a letter to several of his construction associates from whom he buys supplies or to whom he sells concrete.

“I respectfully told them that if they participated in and cooperated with Planned Parenthood in building that abortion clinic, that I would no longer do business with them,” Danze explained. “The response was very positive. They said, ‘we’re with you. Not only that, but we’re going to help you and call around to some of our other construction folks, concrete plants particularly, and ask them not to participate.’”

Events soon snowballed and gave birth to the Austin Area Pro-Life Concrete Contractors and Suppliers Association, an informal affiliation of every concrete supplier within a 60-mile radius of the Austin area.

“About a week after that, we wrote 750 letters to all the businesses in San Antonio that could be identified as construction-related that might provide services and we asked them not to participate in the construction,” Danze said.

Ground broke on the facility Sept. 23, and media reports of the boycott surfaced. Planned Parenthood initially dismissed the effort. “It will not delay the start of this project,” Glenda Parks, a spokesperson for Planned Parenthood, told *News 8 Austin* in September.

However, Danze said, boycott participants then began contacting builders who had signed to do work on the clinic construction project.

"We'd call the boss and say, 'did you know this is an abortion clinic? Do you know what they're going to be doing in there?' Some of them said, 'Yes, I don't care.' Others said, 'no, I didn't, thanks for calling. We're out of here,'" Danze said. "That's where it's gone for the last four or five weeks. We've had support from national and state pro-life groups, local businesses."

But the lynchpin, Danze said, was the "huge grassroots uprising in Austin" once the churches got involved. He said church planning and building committees wanted names of both builders who were involved in the construction of the Planned Parenthood clinic and those who had refused to get involved when they found out the nature of the project.

"Those planning committees got involved and said, 'who's working over there? I know that guy. He wants to help me build my church. Well, he's not going to build my church if he's building that abortion clinic,'" Danze recalled. "They started making calls and suppliers started bailing out. The plumber bailed. You know he started the plumbing job, had all his pipes installed in the foundation, but he told Browning, the general contractor, he quit. He can't afford it. He can't afford to lose church work."

According to press reports, some contractors received 1,200 phone calls. But Browning's bailout Nov. 4 sparked an outcry from the pro-abortion crowd, as well as several local politicians.

"This is not a simple demonstration of free speech rights," Danielle Tierney, spokeswoman for Planned Parenthood of the Texas Capital Region, told the *Associated Press*. "This is denying people affordable health care and reproductive rights."

Yet Elizabeth Graham, spokesperson for Texas Right to Life who called Danze a "true American hero," said the Planned Parenthood statement simply was not true.

"Planned Parenthood will tell you that in Austin only 5 percent of their business is abortion and the rest of their business will be for providing women's health care, contraception, and the like. Planned Parenthood is America's number one abortion provider. Most of their business is on the sale of abortion, their tax forms indicate that," Graham told CNSNews.com. "There are enough clean (non-abortion) women's health care providers in the Austin area that Planned Parenthood does not need to build a new \$6.2 million facility."

Still others questioned the legality of the boycott.

"These people have gone way beyond the boundary and violated the very tenets that make our community strong," Gus Garcia, former Austin mayor said at a press conference Tuesday, joining others in charging the boycotters with "illegal activities."

"There's nothing illegal about it at all," Danze replied. "They can't cite one thing we did that was illegal. We made phone calls and we were polite. If they have evidence, then they need to call the district attorney."

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Mark Proeger, the college pastor at Austin's Hope Chapel, said the media and "pro-abortion crowd" want to make the boycotters look like "small extremists." But he said he thinks this is only the beginning of a bigger movement, an idea on which Danze agreed.

"I didn't raise a dime to do this, it was mostly through email, which is a very powerful tool," Danze said, adding that he would like to see the movement go national. "Austin Texas is the most pro-abortion city in the South, bar none. This is a city that spends hundreds of thousands of dollars a year on city-funded abortions. This is the San Francisco of the South.

"For the grassroots effort here to shut this thing down, even if it's only temporarily, is incredible and it's not just because of one person. It's thousands of people," Danze continued. "This is Abortion City U.S.A . . . this is in their backyard. This is punching them right in the nose. The point is—if it can work here, it'll work anywhere."

The boycotters, including Danze, Proeger and Graham, vowed to continue the fight until Planned Parenthood abandoned the project altogether, something the pro-abortion outfit told reporters would not happen.

APPENDIX J

[Rich Lowry is the editor of National Review magazine and a syndicated columnist whose work appears in newspapers nationwide. The following was published on October 6, 2003; reprinted with special permission of King Features Syndicate.]

The Miracle of “Shorty”

Rich Lowry

The Academy Awards don’t have a category for “Best Celebration of Human Dignity and the Wonder of Life.” If it did, the new documentary “Shorty” would win running away.

“Shorty” brings us the life of Walter “Shorty” Simms, a 56-year-old with Down syndrome who is a fixture at Hampden-Sydney College in Virginia. Simms has been the all-around Mr. Fix It—gathering towels, painting, whatever—for the football team for 28 years, and is the team’s most passionate fan. His full life is a testament to his spirit, his family and his Hampden-Sydney community.

Simms is a great enthusiast. He is given to pumping his fist, “wonderful” is one of his favorite words, and he could out-hug Bill Clinton any day. You will laugh, cry and marvel watching him go about his daily business. But if you are aware of the fate of most babies with Down syndrome, you can’t watch this movie—to be released Oct. 18—without a sense of sadness.

We say we are a “compassionate” society, and we make a quasi-religion of celebrating difference. Yet these different children, who make a special call on our resources of love, are systematically eliminated in the womb. Estimates are that 80 percent to 90 percent of parents who learn from prenatal tests that the child might have Down syndrome end the pregnancy. One pediatrician calls it “a cultural norm” to end such pregnancies. Shame on us.

It is hard to blame the parents. Abortion in such cases is a decision born of fear, heartbreak and a misbegotten sense of compassion. But “Shorty” will help potential parents understand what a tragic choice termination is—what it denies the child, the world and themselves.

There is no denying the difficulties to be faced by children with Down syndrome and by their parents. The children will suffer mild to moderate mental retardation and have trouble speaking. More than half of babies with Down syndrome have a congenital heart condition. They are at higher risk for hypothyroidism and Alzheimer’s disease.

But the future of such children can be looked at in a different way: Children with Down syndrome have an increased “risk” to have an uncommonly sweet disposition and an irrepressible sense of humor. They are an imminent “danger” to prompt those around them to understand the meaning of love and life more deeply.

In recent decades, “the quality of life”—to use that slightly chilling phrase—of people with Down syndrome has improved dramatically. Thanks to the activism of parents (and the attentiveness of liberal politicians), services are better than ever. Most Down children will go to public schools and end up working for salary. Life

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expectancy is now roughly 55 years.

The beauty of “Shorty” is that it conveys how Walter Simms is an utterly complete person. He understands honor, accomplishment, the dignity of work, family, faith, loss, love, joy and—oh, yeah—the thrill of athletic victory.

How to fight the termination of children with Down syndrome? The first step is for doctors to stop trying to scare parents out of having such children. Mary Salter, a Florida mother who has a Down syndrome son and has written about it, says, “I can’t tell you how many times doctors who have seen my son have said to me, ‘Didn’t you know ahead of time?’”

The rest depends on us as a society choosing to value all of our members equally. A huge advance for children with Down syndrome came when we simply decided to stop institutionalizing them. You can do your small part in a wider campaign of acceptance by having a special greeting ready the next time you run into someone with Down syndrome, and by supporting the National Down Syndrome Society (www.ndss.org).

One of the most remarkable things about Walter Simms is his unshakable determination to be included. He says at one point in “Shorty”: “I feel great. This world, I’m a part of it!”

Hallelujah, hallelujah.

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