

PROLIFE SOCIETY



Prince George ProLife Society

This newsletter is a publication of the ProLife Society of Prince George.

Office hours: 9 am to 9 pm

President: Laura Fowlie
Secretary: Patricia O'Neill
Treasurer: Tracy Pfannmuller

Board of Directors:

Kim Klitch
Lorraine Lawrence
Rolande Matte
Jacquie Ollenberger
Horst Thiele

Contact us:

PO Box 2333
Prince George BC V2N 2J8

Phone: 250-561-1148
Fax: 250-561-1148
E-mail: info@pgprolife.com

www.pgprolife.com

Coming Events:

September 2007

30 Life Chain
Along 15th Avenue
2:00 to 3:00 pm

October 2007

1 Annual General Meeting
First Baptist Church
483 Gillett Street
7:00 pm
Speaker: John Hoff
President of Campaign Life Coalition BC

PRESIDENT'S MESSAGE

Recently, Statistics Canada released the latest abortion statistics - for the year 2004. I find it extremely hard to believe that it takes them two and a half years to compile this data, especially since all abortions are fully or partially paid for by taxpayers and this information would certainly have been on record. I guess we should all be thankful that these statistics are reported at all. At least this gives us the opportunity to see a portion of the total picture (these results only represent about 90% of the total numbers as not all abortion stats are submitted).

Another fact that I find equally disturbing is that there was practically no media coverage concerning the release of this information. There is a very good chance that you have heard nothing about this report, so I will take a moment to share with you what I have learned.

The good news is that there were fewer numbers of abortions in 2004 as compared to the previous year and that there was a significant drop in the number of abortions in British Columbia. In Canada, the rate per 1,000 women went from 15.1 women to

14.6 women, a percentage decline of 2.9%. In British Columbia, the rate fell from 17.2 women in 1,000 to 15.7. The percentage decline for B.C. was an impressive 8.7%. Our province, nevertheless, still has the second highest rate of all the provinces, with a rate above the national average. We still have a long way to go but at least we are going in the right direction. Hopefully, what we are doing - educating by word of mouth or with pamphlets, helping those who are in crisis pregnancy situations, putting up billboards, and supporting media campaigns - is playing a part in making a difference and will continue to do so.

The bottom line, however, is that there were still 29.7 induced abortions for every 100 live births in our country in 2004. That means that there were more than 100, 039 abortions performed. Add these numbers to the ones reported during the last 10 years and you'll find that well over a million unborn children have lost their lives to abortion. It is hard for the mind to imagine the enormity of this tragedy.

I'm sure most of you have read the widely reported news

release, which said that, within ten years, seniors in Canada will outnumber children. The effects of this will be many and devastating as there will not be enough young people to fill the needs of the workforce and to support an aging population. In the Globe and Mail's article addressing this concern, it states, "A low fertility rate and increased life expectancy are the main reasons behind the rapid aging." Could it be that the death of more than a million aborted babies might also have played a role? Perhaps if people had been informed on both issues, they would have come to this conclusion on their own. Why is there this fear of speaking the complete truth? How can we change what we do not know? The truth empowers us to make the changes that are needed to be made.

Two very important events, which speak to this reality, are quickly coming upon us. On Sunday, September 30, from 2:00 to 3:00 p.m. we will once again gather on 15th Avenue, this year closer to Central Street, to reveal the truth that abortion kills babies and hurts mothers. Throughout the past few years, the

...cont Page 2

ANNUAL GENERAL MEETING

October 1 — 7:00 pm

At First Baptist Church

483 Gillett Street

Includes coffee and dessert, a brief AGM and fundraising appeal. Come and listen to the words of John Hof, a dynamic speaker and President of Campaign Life Coalition BC. His message promises to banish apathy and to re-energize pro-life efforts.

President's Message, cont.

numbers in attendance have been dwindling. I'm sure this brings great pleasure to those who are pro-choice. Wouldn't it be wonderful to see our Life Chain gathering grow this year? I urge you to attend and bring others with you. If each person brought at least one other person, our numbers would be impressive. Come and share the message!

Secondly, set aside Monday, October 1, (at 7:00 p.m. in the Fellowship Hall at the First Baptist Church, 483 Gillett Street), to come and listen to the words of a dynamic speaker, John Hof, president of the Campaign Life Coalition of British Columbia (the political wing of the pro-life movement in Canada). The theme of his presentation will be, "What is the Appropriate Response?" His insights will equip you to better answer all

pro-life questions, both to yourself and to others, and will leave you motivated and re-energized in your efforts for life.

Make these events a priority. I promise you won't be disappointed.

And please remember: if we don't all play a role in spreading the truth, we help to perpetuate the lie!

Laura Fowlie, President

THE INCONVENIENT TRUTH ABOUT ORGAN DONATION

September 19, 2007 (*LifeSiteNews.com*)
- There has been growing concern over the past several years about increasingly aggressive measures undertaken to harvest human organs from dying patients. Dr. John, Shea, a Toronto physician who has specialized in researching the issue, has just completed a report, *Organ donation: The inconvenient truth*, that sounds an alarm about the unethical or at least highly questionable practices of the organ transplant industry. The article is published in the September issue of Catholic Insight magazine.

The magazine editor states the article is offered to inform the public about "the moral principles and scientific facts pertaining to both the donation and harvesting of human organs for transplantation purposes. Many physicians have serious and well-considered concerns about the morality of human organ transplantation and about the fact that the general public has not been properly informed about what really happens when organs are retrieved."

Dr. Shea reports on the modern and still very unsettled definition of "brain death" used by many organ transplant physicians to justify declaring organ donors dead and therefore fair game for immediate organ harvesting.

Shea points out, "There is no consensus on diagnostic criteria for brain death. They are the subject of intense international debate. Various sets of neurological criteria for the diagnosis of brain death are used. A person could be diagnosed as brain dead if one set is used and not be diagnosed as brain dead if another is used." It depends on what hospital or which doctor is involved in a particular case.

In fact, says Shea, "A diagnosis of death by neurological criteria is theory, not scientific fact. Also, irreversibility of neu-

rological function is a prognosis, not a medically observable fact."

The coldly utilitarian goal of promoting the acceptance of brain death, says Shea, "is to move to a society where people see organ donation as a social responsibility and where donating organs would be accepted as a normal part of dying." In fact, he says, the specific wishes of a donor opposed to having his organs removed would be bypassed by putting skilled pressure on surviving family members to approve the organ removal.

The apnea test, or removal of a ventilator, that is often used to determine brain death, says Dr. Shea, is the thing that often ends up killing the patient. "The test", he reports, "significantly impairs the possibility of recovery and can lead to the death of the patient through a heart attack or irreversible brain damage."

Shea reveals there are some preventive measures taken by organ removal teams that bring in to serious question whether their donor body, kept functioning through artificial means to preserve the organs, is really, fully dead.

"Some form of anesthesia is needed to prevent the donor from moving during removal of the organs. The donor's blood pressure may rise during surgical removal. Similar changes take place during ordinary surgical procedures only if the depth of anesthesia is inadequate. Body movement and a rise in blood pressure are due to the skin incision and surgical procedure if the donor is not anesthetized. Is it not reasonable to consider that the donor may feel pain? In some cases, drugs to paralyze muscle contraction are given to prevent the donor from moving during removal of the organs. Yet, sometimes no anesthesia is administered to the donor. Movement by the

donor is distressing to doctors and nurses. Perhaps this is another reason why anesthesia and drugs to paralyze the muscles are usually given."

Since the definition of brain death was invented in the late 1960s "as a means for the moral validation of the retrieval of human organs for transplant", says Shea, the demand for organs has increasingly exceeded supply and so a new definitions of death had to be created to help meet the demand. The concept of "cardiac death" was developed but this also has serious ethical challenges and test measures that also kill a possibly still alive patient.

Another "ominous and disturbing development" is the recent recruitment of palliative caregivers by the organ harvesting industry. "Those care givers" says Shea, "In effect... are to be the agents of a soft-sell program to make the family feel comfortable and supported during this extremely difficult time."

Shea covers the changing Vatican debate on these end of life issues and the need for more definitive and better informed direction from the Church on the issues. An Italian researcher is quoted stating, "The concern of many is that the Vatican has not taken the appropriate position when doubts exist about the end of human life."

Organ donation: The inconvenient truth contains many references to support its statements and is a timely paper on the human transplant trend that is fast becoming ethically out-of-control. Many political jurisdictions are considering radical legislative measures, such as presumed consent, without being fully aware of the major ethical dilemmas related to organ transplants. Most are not aware, for instance, that organs are often taken from persons who are likely, in many ways, still alive.

TOP SCHOLAR PREDICTS “SLOW MOTION HUMANITARIAN TRAGEDY” IN CHINA

By Samantha Singson

NEW YORK, September 21, 2007 (CFAM.org) - Likening the Chinese one-child policy to a “slow-motion humanitarian tragedy,” prominent demographer Nicholas Eberstadt urged the Chinese government to “immediately and without reservation” scrap the coercive population control program that has been “a tragic and historic mistake.” Eberstadt delivered the stinging rebuke during an address to the World Economic Forum held in Dalian, China earlier this month.

Eberstadt told officials that while the population control program has achieved its objective of lowering the number of births in China, it “directly undermines the country’s future development potential.”

According to Eberstadt’s research, by 2015 China’s working-age population of 15-64 year olds will be in a prolonged decline and in a generation, China’s labor force will likely be smaller than it is today. Between 2005 and 2030, China’s 15-24 year old population will decrease and face a projected 20 percent decline. Eberstadt em-

phasizes “the only part of working age population that stands to increase in size between now and 2030 is the over-50 group.” China’s aging population will experience a never-before-seen boom. By 2030, China’s 65-plus cohort could more than double and top 235 million.

Another startling outcome will be the undoing of 2500 years of Chinese cultural tradition, he projected. That is because the new face of Chinese culture would have a “4-2-1” composition: four grandparents, two parents and one child. The new equation will hamper economic development as it puts greater strains on the dwindling youth population. Unlike the situation in Japan, where a national pension system was already in place before the aging population began to rise, China has no such pension system. Elderly have depended on sons to provide for them in old age and with the rapid fertility decline, those sons will not exist. “How will the elderly in China get by in the world they will so soon be facing?” he asked.

Another consequence of China’s population policy has been the increasingly skewed

gender imbalance. Naturally, about 105 baby boys are born for every 100 baby girls. Eberstadt reports that shortly after the advent of the one-child policy, China began to report biologically impossible disparities. Currently, the sex ratio at birth in China is 123 baby boys for every 100 girls. In a generation or less, China will have to deal with the problem of tens of millions of unmarried young men.

Eberstadt urged the Chinese government to abandon their population control policy as a means of easing “China’s incipient aging crisis, its looming family structure problems, and its worrisome gender imbalances” and encouraged the government to embrace human resources as a blessing which could “be the key to whether China succeeds in abolishing poverty and attaining mass affluence in the decades and generations ahead.”

Eberstadt said he could not be sure, but felt this could have been the first time such a presentation had been made in China. Though many Chinese demographers might agree with Eberstadt analysis, they have been reluctant to openly criticize the policy.

ACADEMY AWARD WINNING ACTRESS ELLEN BURSTYN SAYS ABORTION WAS THE WORST THING IN HER LIFE

By John-Henry Westen

TORONTO, September 19, 2007 (LifeSiteNews.com) - Academy Award winning actress Ellen Burstyn known for her roles in 'Alice Doesn't Live Here Anymore' and 'The Exorcist' was interviewed by CFRB radio in Toronto while she was in town promoting her new book - *Lessons in Becoming Myself*

CFRB spoke at length about the long and eventful career of the highly acclaimed 74-year-old actress after which the interviewer asked Burstyn "what was the lowest moment" of her life.

After a pause during which the interviewer prompted with her single motherhood, struggles with her son and more, Burstyn said, "You know, I guess, I hate to talk about this on the air, but having

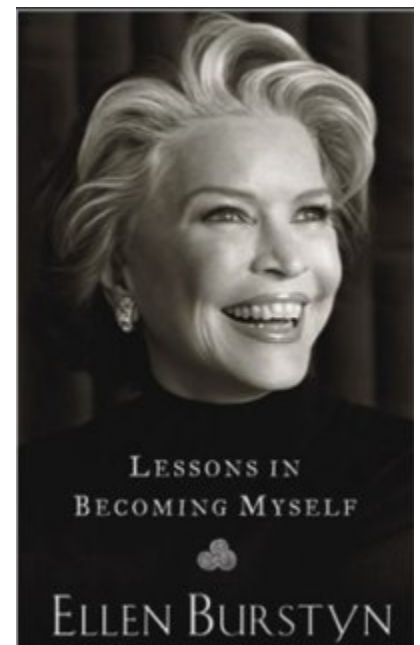
an abortion."

Burstyn continued, "You know that was really an extremely painful experience."

"Did you feel you didn't have a choice?," asked the interviewer. "At the time I was just young and dumb, I didn't really want to have a baby then," she replied.

"It was the wrong thing to do and I really didn't understand that till later," said the actress. That was very, very painful, that was probably the worst."

Concluding the matter she said, "I try not to allow regret to settle over me like a shroud, because I think its an unhealthy way to live."



ANTI-COERCED ABORTION BILL ABSOLUTELY NECESSARY' SAY 'SILENT NO MORE' LEADERS

STATEN ISLAND, NY, September 19, 2007 (LifeSiteNews.com) - Leaders of the Silent No More Awareness Campaign, the nation's largest network of women and men testifying to the harm they endured from abortion, today said that a Wisconsin bill to help prevent coerced abortion is needed not only in that state, but across the country.

"In recent months alone, we've seen numerous high profile news stories about women threatened and intimidated by their parents, boyfriends, and others into hav-

ing abortions," said Georgette Forney, Co-Founder of the SNMAC. "I know from talking to thousands of women that these are not isolated cases. I also know that the pain and torment caused by abortion can only be magnified when a woman submits involuntarily to the taking of her child. I don't see how anyone could oppose this measure."

Janet Morana, another SNMAC co-founder, added, "The Wisconsin bill only requires an abortionist to determine if the woman's consent is voluntary and to provide her with information on available

services should the doctor determine that she's at risk of domestic abuse. It's a small step toward protecting women from this kind of violence, but it's absolutely necessary." Wisconsin's bill to prevent coerced abortion has passed the Assembly Judiciary Committee and is awaiting a vote by the full legislative body. Seven other states have passed similar measures.

Since the launching of the Silent No More Awareness Campaign in 2003, 2,326 women and men have shared their testimonies publicly at 189 gatherings in 44 states



and six countries where more than 15,000 spectators have heard the truth about abortion's negative after-effects. More than 4,100 people are registered to be Silent No More. Raising awareness about the hurtful aftermath of abortion and the help that is available to cope with the pain are two of the Campaign's goals.

THE VINDICATION OF TERRI SCHIAVO BY THE VATICAN'S CLEAR ANSWER ON NUTRITION AND HYDRATION

Special to LifeSiteNews.com by HLI President Fr. Tom Euteneuer

Since the election of Pope Benedict, the Church has been renewed by an abundance of blessings flowing from the Vatican. In case you did not hear, the Pope's Congregation for the Doctrine of the Faith (CDF) has just released its answer to the question of providing nutrition and hydration (i.e., food and water) to persons in so-called vegetative states. Even though a child can figure out that it's not right to starve people to death, the Vatican set the issue to rest this week. In its technically-precise language, the CDF vindicated our beloved Terri Schiavo by saying that no one can dare to commit or justify such an atrocity as her killing by any interpretation of Catholic teachings. Period.

The CDF responded to a question from the US Catholic bishops who asked whether it was morally obligatory to give

food and water to a patient in such a state. The response was unambiguous: "Yes. The administration of food and water even by artificial means is, in principle, an ordinary and proportionate means of preserving life. It is therefore obligatory to the extent to which, and for as long as, it is shown to accomplish its proper finality, which is the hydration and nourishment of the patient. In this way suffering and death by starvation and dehydration are prevented."

That was not all. The bishops further asked whether food and water could be withdrawn from the patient if there was no chance of recovery. Again, the CDF was unambiguous: "No. A patient in a 'permanent vegetative state' is a person with fundamental human dignity and must, therefore, receive ordinary and proportionate care which includes, in principle, the administration of water and food even by artificial means." And just to

be sure that no stone was left unturned, the accompanying note said that this is always and everywhere true "in principle" even if there are truly exceptional circumstances where it is not morally obligatory to provide food and water. Such a case would be, for example, when the person's body is in such a state that it is physically unable to assimilate food and water. There would be no moral obligation to try and force nutrition into the person in that case, but clearly this is an exceptional circumstance which does not in any way undermine the principle of absolute respect for life in its most vulnerable moments.

How many of us, at the time of Terri Schiavo's death, actually heard even so-called "good Catholics" say that they should just let her die because "no one should have to live that way" and other nonsense like that? The real message of this declaration is that no one should have to

think that murderous way any more.

The Vatican has spoken with the clear voice of conscience and has also vindicated all of us who fought for Terri's life and dignity, not because we were pro-life activists, but because we are Catholics. Anyone who advocated her death in 2005, whether by sloppy reasoning or culpable agreement with the atrocity, needs to seriously repent and re-evaluate his conscience in light of the Church's teaching. After this declaration, there is no excuse for not getting it right.

Most culpable of all were the so-called "Catholic" theologians, false priests, such as Richard McBrien and John Paris, who shamelessly advocated Terri's death when she was being sold to her killers for thirty pieces of silver. Now that the CDF has made clear what any child knows, this would be the time for them to take a refresher course on actual Catholic teachings.

DEATHS ASSOCIATED WITH HPV VACCINE START ROLLING IN, OVER 3500 ADVERSE AFFECTS REPORTED

By John-Henry Westen
TORONTO, September 20,
2007 (LifeSiteNews.com)

As Canada, in large part due to aggressive behind the scenes lobbying, rolls out the not-comprehensively-tested Merck HPV vaccine for girls as young as nine, a look at developments on the vaccine south of the border should cause Canadians serious concern. In the United States a similar lobby campaign by the same company launched the mass HPV vaccination of girls beginning in June last year.

In just little over a year, the HPV vaccine have been associated with at least five deaths, not to mention thousands of reports of adverse effects, hundreds deemed serious, and many that required hospitalization.

Judicial Watch, a US government watchdog, became concerned while noting large donations to key politicians originating from Merck. A freedom of information request from the group in May of this year discovered that during the period from June 8, 2006 - when the vaccines received approval from the U.S. Food and Drug Administration (FDA) - to May 2007 there were 1,637 reports of adverse reactions to the HPV vaccine reported to the FDA.

Three deaths were related to the vaccine, including one of a 12-year-old. One physician's assistant reported that a female patient "died of a blood clot three hours after getting the Gardasil vaccine." Two other reports, on girls 12 and 19, reported deaths relating to heart problems and/or blood clotting.

As of May 11, 2007, the 1,637 adverse vaccination reactions reported to the FDA via the Vaccine Adverse Event Reporting System (VAERS) included 371 serious reactions. Of the 42 women who received the vaccine while pregnant, 18 experienced side effects ranging from spontaneous abortion to fetal abnormalities.

Side effects published by Merck & Co. warn the public about potential pain, fever, nausea, dizziness and itching after receiving the vaccine. Indeed, 77% of the adverse reactions reported are typical side effects to vaccinations. But other more serious side effects reported include paralysis, Bells Palsy, Guillain-Barre Syndrome, and seizures

Judicial Watch informed LifeSiteNews.com that a subsequent request for information on adverse reactions to the HPV vaccine, covering the period from May 2007 to

September 2007, found that an additional 1800 adverse reactions have been reported, including more deaths. Exactly how many more deaths occurred will be released in the coming days, Judicial Watch's Dee Grothe informed LifeSiteNews.com.

The LifeSiteNews.com report on the moneyed lobbying efforts of Merck in the US was reported in February.

However the Canadian lobby effort by Merck's Canadian affiliate Merck Frosst Canada has been underway using powerful lobbyists with close connections to the politicians who have signed off on massive government funded vaccination programs.

The Toronto Star recently reported that Merck Frosst Canada Ltd hired public relations giant Hill & Knowlton to push the immunization strategies using some well-connected lobbyists: Ken Boessenkool, a former senior policy adviser to Prime Minister Stephen Harper; Bob Lopinski, formerly with Premier Dalton McGuinty's office; and Jason Grier, former chief of staff to Health Minister George Smitherman.

Harper's Conservative Government approved Merck's HPV vaccine Gardasil in July and later announced a \$300 mil-

lion program to give the vaccine to girls from ages 9-13. That of course is only the beginning of what Merck likely hopes will be a much larger vaccination of all potentially sexually active women in Canada who are not already HPV infected. In August, McGuinty's Ontario Liberals, on the advice of his Health Minister George Smitherman, announced that all Grade 8 girls will have free access to Gardasil.

One of the major complaints by physicians is that the HPV vaccination program has been implemented before adequate testing has been completed. Long-term effects of the vaccine remain unknown. Many are asking why the seemingly reckless rush?

At least one answer to that question comes from the fact that Merck currently is the sole provider of an HPV vaccine with its Gardasil product. A competing HPV vaccine, Glaxo Smith Kline's Cervarix, is set to hit the market in January 2008. As more children are vaccinated with Gardasil, fewer will be able to later receive the necessary repeat boosters of a competing, incompatible vaccine. Merck is in a race to capture as much of the market as it can, consuming many millions of taxpayer dollars.

AUSTRALIAN DOCTOR DIES AFTER REFUSING CANCER TREATMENT IN ORDER TO SAVE HER UNBORN CHILD

By Hilary White

MELBOURNE, September
14, 2007

(LifeSiteNews.com) - Another woman has saved her unborn child's life at the expense of her own. In a case similar in many ways to that of Gianna Beretta Molla, the Italian doctor

recently canonized by the Vatican for a similar act of self-sacrifice, an Australian GP, Dr. Ellice Hammond, 37, refused high-level chemotherapy that might have saved her from Hodgkin's lymphoma.

The treatment would have endangered the life of her unborn daughter, Mia Ellice.

After two initial rounds of mild chemotherapy failed, Mia Ellice, then 31 weeks old, was born after an inducement. She is developing well at the Monash Medical Centre neonatal intensive care unit, the Herald Sun reported today.

Dr. Hammond's husband, Peter Wojcik told the Herald Sun he was proud of his wife's devotion to their child.

"It feels like I got robbed of a wife and a mother. I guess she didn't expect it to go this way, and if she did she wasn't telling us. But she would just want what is best for Mia and for everyone to love her and carry on with life.

"Her whole life was looking forward to being a mum. She loved it."

HOLLYWOOD CAUGHT IN THE ACT OF RELIGIOUS BIGOTRY

When comedian Kathy Griffin mocked Christ at the Emmy's this month, Hollywood applauded. For all their talk of tolerance and religious pluralism, celebrities still consider it acceptable to ridicule Jesus. But a company called "The Miracle Theater" wants to make it clear that not every entertainer will stand for it. As part of a growing movement to distance themselves from Hollywood, the theater published an ad in *USA Today* with the headline, "Enough is

enough!" Their goal is to collect a million signatures on a "Million Voices for Christ" petition to speak out against the industry's "religious slander, insensitivity, bias, and bigotry." While the theater may be free to voice its views now, Congress is working quickly on legislation that could ultimately silence them and other Christians through "hate crimes" legislation. As soon as next week, the Senate could debate the measure. If the Church doesn't

speak out on "hate crimes" now, it's in danger of losing its right to speak out at all. Call or email your senators and tell them to vote "no" on "hate crimes." The Miracle Theater is right. Enough is enough!



IRISH DIOCESE ADVISES CATHOLIC SCHOOL TO SUSPEND AMNESTY CHAPTER

By Meg Jalsevac

BELFAST, Ireland, September 18, 2007

(LifeSiteNews.com) - According to the Irish newspaper, *The Guardian*, Ireland's bishops have begun to advise Catholic schools to terminate their Amnesty International support groups due to the organization's new pro-abortion policy.

Amnesty International (AI), known as the world's most extensive human rights organization, has recently faced a worldwide backlash resulting from a recent policy decision to promote the decriminalization of the killing of unborn children. Much of the criticism has been in the form of very public denunciations and funding withdrawals initiated by Catholic leaders and organizations around the world.

According to *The Guardian*, a spokesperson for the Greater Belfast diocese confirmed that, after seeking guidance from the diocese, a local school was advised to shut down its Amnesty support group.

"An inquiry did come from a school principal, on behalf of the teacher who is in charge of the school Amnesty group, asking for guidance on the fu-

ture of the Amnesty group in the school. The advice to the school is that it would be inappropriate for the school branch to continue in existence in the context of Amnesty International's new position regarding abortion."

The Irish spokesman also confirmed that the Irish bishops are scheduled to meet next month to address the issue of AI remaining in any Catholic school. When asked if the bishops were likely to similarly ban AI from all schools, the spokesman replied, "The sacredness and protection of all human life will be discussed at the next general meeting of the Irish Bishops' Conference."

AI leaders in Northern Ireland have expressed hope that support groups would not be banned by the country's bishops. Patrick Corrigan, Amnesty's Northern Ireland program director said, "Amnesty International and the Catholic Church have more in common than that which divides us, namely the issue of sexual and reproductive rights."

Amnesty International has been publicly denounced by many bishops and leaders from various countries around the world including Canada, US, England and Australia and more. As previ-

ously reported by LifeSiteNews.com, Cardinal Martino, president of the Pontifical Council for Justice and Peace, warned earlier in June, "I believe that, if in fact Amnesty International persists in this course of action, individuals and Catholic organizations must withdraw their support, because, in deciding to promote abortion rights, AI has betrayed its mission."

The uncompromising answer given by the Irish diocese is in stark contrast to Canadian Bishop Plouffe of Sault Ste. Maria, Ontario who insisted earlier this month that such issues are "prudential" decisions to be left up to individual school boards. Bishop Plouffe's unwillingness to publicly denounce AI's policy comes despite a letter of warning issued by the CCCB in July of this year regarding the new policy.

The letter read, in part, "Such a change in policy would be considered by the Catholic Bishops of Canada to be a step backwards for an organization that has done such outstanding work in defending human life and the rights of the most vulnerable... This change in policy would make it difficult for Catholics to continue supporting the work of Amnesty International."

US GOVERNMENT DELEGATION AT UNITED NATIONS SCOLDS UN AGENCY FOR PROMOTING ABORTION

by Samantha Singson

NEW YORK, September 13, 2007 (C-FAM.org) - The US delegation to the UN sharply scolded a top UN official this week for perpetuating the falsehood that there is a new UN mandated global goal related to "sexual and reproductive health." The exchange came during the Executive Board meeting of the UN Population Fund (UNFPA). The US also criticized UNFPA's promotion of abortion.

UNFPA Executive Director Thoraya Obaid was presenting UNFPA's strategic plan and its proposed global and regional programs. In her report Obaid claimed "The target on universal access to reproductive health under Millennium Development Goal (MDG) 5 paves the way for further progress to improve the health of women, reduce maternal and newborn deaths, expand contraceptive choice, and protect reproductive rights." The US representative interjected that there is no new global target on reproductive health and that the only thing that could generate one was a resolution of the General Assembly.

The Millennium Development Goals were first negotiated in 2000 by more than 150 heads of state, the largest such gathering in history, and included eight broad goals none of which included the controversial issue of "reproductive health," a term that is frequently used by UN agencies to promote abortion. Pro-abortion radicals, including UNFPA, tried to get a new goal on "reproductive health" negotiated by heads of state in 2005 but they were defeated. Since then, they have tried to get a ninth goal or at least a target as part of an existing goal but continue to be defeated. Their defeat has not stopped UNFPA and others from continuing to claim that such a new target exists. Governments around the world are being told such a target exists and are being asked to change their laws accordingly, most recently in the Philippines.

The US also complained to Obaid about UNFPA's promotion of abortion and asked Obaid for a clarification. Obaid claimed UNFPA was neutral on abortion and only tries to prevent "unsafe abortion." "UNFPA does not

speak for or against the legalization of abortion," said Obaid. UNFPA, however, has a history of promoting the legalization of abortion most recently when the agency intervened when Nicaragua's National Assembly banned all abortion. UNFPA, UN Children's Fund (UNICEF) and other UN agencies directly intervened to stop the law which eventually was passed unanimously by the Nicaraguan Assembly.

In contrast to the US position, the Swedish delegate urged Obaid to "make sure that sexual and reproductive health and rights remain squarely on the agenda." A final decision by the country delegations on the UNFPA strategic plan and programming will be made when executive board meetings wrap up this week.

On Friday, the United States announced that it would suspend its contribution to UNFPA for the sixth year in a row. The US first suspended funding in 2002 upon receiving evidence that UNFPA was complicit in China's draconian one child policy.

CHINESE COUPLE SUES COMMUNIST GOVERNMENT FOR FORCED ABORTION

By Hilary White

September 13, 2007 (LifeSiteNews.com)
A Chinese couple is suing the communist government of China for a forced ninth-month abortion. Under the provisions of the one-child policy, Chinese citizens are required to obtain a license to have a first child. Conceiving a child before marriage is an offense. A young couple, Yang Zhongchen and his wife Jin Yani, had to wait until Jin was the minimum age of 20 before being married. This meant that their first child, a girl, was illegal.

Attempts to bribe local "family planning" officials failed and while Yang was out of town, Jin was abducted on September 7 by local officials a few weeks before her due date.

Jin described the incident in which she was taken to a local clinic and her clothes stripped from her. Doctors

"pushed a large syringe into my stomach. It was very painful. It was all very rough." Doctors then pulled the dead baby from her body with forceps.

While forced abortion is technically illegal in China, it is known that officials, faced with quotas, frequently succumb to what is usually described as "over-zealousness" in enforcing the official one-child policy. Yang and Jin are suing for \$38,000 in medical expenses and \$130,000 for psychological distress.

"They can't really compensate for all that we have suffered," Jin told local media. "Our baby will never come back ... we just hope this kind of thing will never happen again." The couple's previous attempt at redress in the courts failed. The judges ruled they had broken the law by conceiving out of wedlock. Local family

planning officials claimed Jin had consented to the abortion. The couple is appealing the decision.

Even while China continues to be courted by governments and international business interests for its thriving economy, the government is determined to keep domestic opposition to its population control policies under wraps.

Chen Guangcheng, a blind, self-taught lawyer, has been imprisoned on fabricated charges to keep his campaign against the policy out of the international media eye. His activism placed him at the forefront of a growing civil rights movement against the one-child policy and forced abortion.

Guangcheng caught the attention of international media and was placed under house arrest from September 2005 to March 2006 after talking to Time magazine. Authorities arrested him in June 2006 for destruction of property and assembling a crowd to disrupt traffic.

Prince George
ProLife Society

Box 2333
Prince George BC V2N 2J8

Phone: 250-561-1148
Fax: 250-561-1148
E-mail: info@pgprolife.com

We're on the Web !
www.pgprolife.com

Annual General Meeting

Monday, October 1, 2007

First Baptist Church
Fellowship Hall
483 Gillett Street

Agenda

President's Report
Treasurer's Report
Elections

Guest Speaker

John Hoff, President
Campaign Life Coalition BC

Coffee and Dessert
Everyone Welcome

Prince George ProLife Society Annual General Meeting

Monday, October 1st - 7:00 pm
First Baptist Church - Fellowship Hall
483 Gillett Street

"What is the Appropriate Response?"

You are invited to come and listen to the words of John Hof, a dynamic speaker and President of Campaign Life Coalition B.C. (the political wing of the pro-life movement in Canada). His message will be, "What is the Appropriate Response?" and it will provide you with the tools to deal with any pro-life questions that you might have or that others may have posed to you. This message promises to banish apathy and to re-energize pro-life efforts.

This event will also include coffee and dessert, a brief AGM and a fundraising appeal. We will be requesting your generous support for the upcoming year's programs which include informative newsletters, guest speakers, the pro-life booth at the Prince George Exhibition, our website, and various educational opportunities and materials. None of this would be possible without your help.

LIFE CHAIN 2007

A peaceful, prayerful
witness to the truth
about abortion



Along 15th Avenue east of Central

Sunday, September 30th
from 2:00 pm to 3:00 pm

This powerful event provides you with the opportunity to be
a visible witness to the value, dignity and sanctity of
the lives of the unborn.

Come and join us, and encourage your friends and family
members to come along, too.