POPULATION RESEARCH INSTITUTE REVIEW May-June 2016

A review and analysis of worldwide population control activity

Lima in the Lead

March for Life in Peru's Capital Again Breaks Records

By PRI Staff

LIMA—How many people does it take to fill the streets of downtown Lima? About three-quarters of a million, says Carlos Polo, Director of PRI's Latin American office and one of the organizers of the march. For the fourth year in a row, recordbreaking crowds came out in support of the right to life.

The crowd was a cross-section of Peruvian society, with the young and the old, men and women, priests and laity, all well represented. With simultaneous marches taking place in other major cities, the total numbers of marchers nationwide was well over a million. Indeed, it is safe to say that this year's March was the largest public demonstration of any kind in Peruvian history. It will surely rank as

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Peruvians take to the streets to defend the right to Life.

one of the largest demonstrations of any kind in the world this year.

During the March, thousands could be seen holding signs saying "I Vote for Life, Will You?" Images of the March and comments flooded social media creating a tsunami of activity. March for Life comments were trending on Twitter not only in Peru but also in many countries around the globe. Millions caught glimpses of the March for Life via Facebook. Videos, testimonies, photos, messages, and songs were shared around the world, offering a message of hope to pro-lifers the world over.

"The theme for this year's March, 'Our First Law: *Life*,' emphasizes the right to life as the first and foremost of all our legal rights," said Carlos Polo, director of PRI's Latin American office. "To be able to laugh, sing, dance, enjoy a concert, protest, to dissent on ideas—the first step in all of those is to simply *to be alive*," Polo said.

The March for Life in Peru has continued to grow in strength and numbers since it was first held in 2003. Today it takes center-stage in Peruvian public life. It is the largest March for Life in Latin America. The Lima March for Life is a testament to the love for life. It is a phenomenon that extends beyond borders and has

The President's Page

A True Hate Crime: Sex-Selective Abortion

As a China expert, I have long been aware that Asians valued sons more than daughters, so much so that unwanted daughters were often killed at birth. But it is one thing to read about this in the history books, and quite another to see it happen before one's own eyes, as I did in China.

The unhappy truth is that Chinese Communist Party has condemned tens of millions of little girls to death. The Planned Birth policy limits how many children couples can have and, the couples themselves, preferring that their allotted children be sons, abort girls in horrific numbers.

Let me give you an example. I went to Topeka in March 2013 to testify in favor of a bill to ban sex selection abortion in the state of Kansas (more about this in a moment.) There I met a Chinese-American woman in her early 20s who told me she had been her mother's eighth pregnancy. The first seven pregnancies had all ended in abortion when her mother discovered that she was carrying girls.

"How did you survive?" I asked her. "The only reason that I survived is because the ultrasound technician got it wrong," she said with a grimace. "He told my parents that I was a little boy, and so my mother carried me to term. When I was born they were shocked and disappointed but eventually decided, after eight tries, to keep me."

This young woman is determined to make up for her mother's mistakes. She has become a Christian, is engaged to be married, and intends to have many girls. But the story of how her older sisters were, one by one, sacrificed in a sex selective abortion is not unique: It is a daily occurrence in Asian-American communities across the United States.

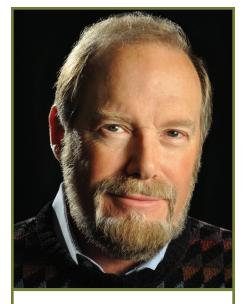
An analysis of U.S. Census data carried out by two Columbia University economists, Douglas Almond and Lena Edlund, suggest that Chinese, Korean and Asian-Indian parents are selectively aborting unborn baby girls. While the firstborn children of such parents come into the world in normal numbersroughly 106 boys for every 100 girls the second and third children do not. For second-born children the ratio of the sexes at birth is 120 boys per 100 girls. And the odds are heavily skewed in favor of a son if the couple goes on to have a third child: in such cases there were half again as many sons as daughters.

Almond and Edlund concluded, as any reasonable person would, that this deviation in favor of sons is evidence that sex selection abortions are occurring here in the United States. The logical first step in curbing any heinous practice is to ban it.

This is why we at PRI have been encouraging elected officials at both the state and the federal level to ban the practice of sex selection abortion.

Bans have long been in place in Arizona, Illinois, Kansas, North Carolina, North Dakota, Oklahoma, Pennsylvania and South Dakota. PRI has been involved in many of these efforts.

Just last month, Gov. Mike Pence of Indiana signed a bill into law that not only prohibits sex selective abortions, but abortions done for reasons of race or because the unborn baby has been diagnosed with a disability such as Down syndrome. I have known Gov. Pence personally for many years, dating back to when





Fr. Paul Marx, OSB, PhD (1920-2010)

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he served in the U.S. House of Representatives, and he has always been a strong defender of the unborn.

Leading the charge on the federal level is Congressman Trent Franks (R-AZ). Congressman Franks' Prenatal Nondiscrimination Act, or PRENDA, would ban sex and race-selective abortions. I am happy to report that this legislation, on "President's Page" Continued

whose behalf I have testified, has every prospect of passing the House of Representatives again this legislative session. It still awaits action in the Senate.

If thousands of already-born Americans were being killed each year simply because of their sex or race, there would be a nationwide outcry against such "hate crimes." But thousands of pre-born Americans are, in fact, being killed because they are, in the view of their parents or community, the "wrong" sex or race.

These tiny victims of hate crimes deserve our protection from the worst form of discrimination imaginable; a discrimination that kills.

The words, "It's a girl," should never be a death sentence.

Fighting for Life in the West Indies PRI Co-Sponsors the World Congress of Families

By Joel Bockrath

On April 17th, I landed in the Caribbean island nation of Barbados. excited, yet worried. On the upside, PRI was a co-sponsor of the World Congress of Families 3rd Regional Caribbean Conference, and I was there to speak on "The Myth of Overpopulation."

At the conference the following day, I warned the participants, who came from 14 Caribbean nations, how that myth fuels big-ticket birth control programs that weaken families and nations. I reminded them of Proverbs 14:28, which says "In a multitude of people is the glory of a king, but without people a prince is ruined." I warned of the dangers that Barbados' low birth rate—only 1.68 children per woman—posed for the country's future.

In a sense, I was too late. International Planned Parenthood Federation (IPPF) is already entrenched in the region, and especially so in Barbados. On that island, which is a mere 166 square miles in extent, IPPF boasts that it runs no fewer than 81 community "health centers," which in turn perform 47,000 "services."

Since Barbados has a population of only 285,000, this means that there is one Planned Parenthood clinic for every 3,500 people. By way of comparison, Planned Parenthood in the United States runs only one clinic for every 400,000 Americans. Unfortunately, the government of Barbados is

complicit in this depopulation effort, providing about half of IPPF's annual

Sadly, IPPF is not the only anti-life player to descend upon the West Indies. The United Nations Population Fund Agency (UNFPA) and United States Agency for International Development (USAID) together spend \$10 million promoting abortion, sterilization, and contraception on these tiny islands—an enormous sum of money by local standards.

But I was there not just to curse the darkness, as it were, but to light a candle. In the days following the conference I met with local pro-lifers, including PRI's long-time friend Father Leonard Alfonso, to discuss what we could do to turn back the tide of abortion on the island.

We discussed the possibility of setting up a crisis pregnancy center in the capital of Bridgetown, as well as on other Caribbean islands, in order to give women an alternative to the Planned Parenthood abortion mills. Please join us in making our plans come to fruition, and pray that many mothers and babies will be saved as a result.

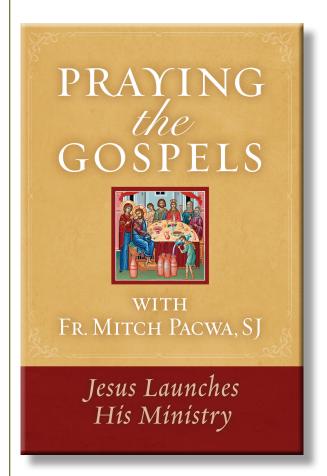


PRI's Executive Vice President Joel Bockrath speaking at the World Congress of Families 3rd Regional Caribbean Conference.

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May I Send You This Gift?

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raised support from people in many countries.

The Lima March for Life receives no financial support from big businesses or partisan political interests, nor is it simply a one day annual event, or an event that is thrown together several weeks in advance. Rather, the March is truly born of the people. It derives its strength from everyday people that come together in support the right to life.

Such a mammoth event could not be organized overnight. In fact, the March for Life organizing committee works year-round with all of Peru's major pro-life organizations to make the March a success. Some 3,000 young volunteers hold training meetings and prayer gatherings for many months in advance of next year's March. The spirit of the March lives permanently in the lives of the citizens that attend, their whole lifestyle reflects their love for the unborn.

"The March celebrates the life of every human being, of those near and far, of those we do not yet know, for those that think like us and those that do not share our ideas, those we support and those we criticize," said Polo. "We all have something in common: our parents respected our right to live and we should continue to respect that right today."

The respect for life runs so deep among the Peruvian people that March 25th has been designated by federal law as "The Day of the Unborn Child." On this occasion the March for Life is celebrated annually throughout the country.

But this year's March was significant for another reason. Just like in the United States, 2016 is an important election year in Peru. With an openly pro-abortion and pro-LGBTI candidate running for president this election cycle, the stakes were high.

"Lima in the Lead" Continued



Carlos Polo and PRI staff with Lianna Rebolledo, a pro-life rape survivor who spoke at the event.

The million-plus people who participated in the March, however, sent a very clear message to both Presidential and Congressional candidates who hoped to become elected this year.

"Peruvians want to be represented by politicians who promote life and defend the family. We will no longer accept hypocrites who say one thing and then do another!" Polo said, "Politicians need to know that, during the upcoming elections, our votes will only be given to those candidates who best represent our feelings about the right to life."

That message was heard. Only days after the March, 80 congressional candidates signed a pledge committing themselves to the defense of life, family, marriage as defined as between one man and one woman, and the right of parents to choose the best education for their children.

On April 10th, the results of the first round of Presidential elections brought Peruvians good news. Although a new president was not elected (as no single candidate was able to secure a majority of the votes) the pro-abortion candidate placed a distant third-place and was eliminated from among the

presidential candidates eligible to run in the 2016 race. The two remaining candidates will contest the presidency in a second-round runoff on June 5th. Both are committed to pro-family and pro-life legislature. A dozen new congressional representatives who are committed to the pro-life cause were also elected to the Congress of the Republic.

Undoubtedly, the participants of the March for Life should be proud of these achievements. Though the fight for the right to life continues, the March for Life has achieved an incredible goal in making politicians understand that the fundamental idea of protecting life and traditional family values *must* be respected.

"Whatever the outcome," Polo said, "future leaders will never lose sight of the fact that their victory was due to the support of citizens who think that family and life are fundamental values."

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Mother Angelica's Legacy of Love and Life

By Dr. Christopher Manion



Mother Mary Angelica of the Annunciation, P.C.P.A., died on Easter Sunday, no doubt grateful that Christ had allowed her to live through His passion one more time.

"I never asked for suffering," she assured us, "but if God sends it, I won't refuse it." And God sent her plenty, which she lovingly embraced. For most of her life she wore fourteen pounds of iron legand back-braces, and for the last fifteen years of her life she

suffered through the painful effects of increasingly debilitating strokes. Not only did she embrace suffering, she actually prayed that she would live as long as possible so that she could unite all the more her suffering with Christ's suffering on the Cross.

But Mother wouldn't let suffering hinder her; instead, it propelled her to work ceaselessly to spread the Gospel through the Eternal Word Television Network, EWTN, that today spans the world with its message of love, service, and the promise of eternal life. Only in Heaven "shall we realize what great things were accomplished by interior suffering," she told us—and her life proves it.

Her courage shone through. Unlike the media's pampered plastic personalities, Mother Angelica was practical, down-to-earth, and—to put it bluntly—blunt. She defended the Faith with unwavering tenacity. Yes, that often made her unpopular, even with prelates who envied her success and resented her orthodoxy. But it is the same in any age, and Mother faced the evils of our own age with fortitude and clarity.

Be brave! "It's your obligation to speak the truth, and everyone can either take it or leave it. But the truth must be in us. We live in such poverty of the truth today," she lamented. And she told truths that many

"Only in Heaven 'shall we realize what great things were accomplished by interior suffering,' she told us—and her life proves it."

didn't want to hear. Abortion was "Satanic," she said, and destructive. Floods and tornadoes "are nothing compared to what the Lord is going to do if this country does not go down on its knees and repent. Repent! We're going to see more tragedies, because even the world is shaking at the evil upon it. Shaking!" After all, America "approves abortion, promotes abortion in other countries, allows murder in the worst ways—it's awesome, huh!"

But there's a catch. Perhaps abortion is such a fact of life that people aren't "awed" by it any more at all. Yet we must continue to speak the truth, whether people want to hear it or not. Yes, it's a Spiritual Work of Mercy to admonish the sinner, but these days, many of us are reluctant to offend anybody.

To address that temptation disguised as flattery, Mother spoke plainly and from the heart: "You want people to suffer forever in Hell but you don't want to hurt their feelings now? What kind of love is that?"

Mother's life reflects a heroic mix of virtues. First, "Do it Now! Too many people will not take the first step unless they have a five or 10 year plan," she said. "This is a mistaken desire to have too much control and certainty. We have to trust in the Lord and do good today while we have the

opportunity....We cannot put off a change of life for tomorrow or old age, for there may be no tomorrow."

"Be fervent about the work you do, and do it very well, because it is a part of your sanctity." And yet, with this inspiration, she repeatedly cautioned us not to become discouraged. "Patience is adjusting your time to God's

time," she said, and in the meantime we must suffer: "Sometimes my worst day—one filled with pain and suffering—in the eyes of God, is my best day if I live it cheerfully and I've borne it with love."

Patience, hard work, and constant love—and all of it with joy: "You must laugh your way to Heaven because tears won't get you there." And it lasts a lifetime. "Where most men work for degrees after their names, we work for one before our names: 'Saint!' It's a much more difficult degree to attain. It takes a lifetime, and you don't get your diploma until you're dead."

May she rest in peace.

FROM THE COUNTRIES

United States—A study published in the Journal of American Medical Association Pediatrics shows that high school girls who use intrauterine devices and hormonal implants are less likely to use condoms and therefore more likely to be exposed to STDs. The study was conducted among U.S. high school students in grades 9 to 12. The study found that long-acting reversible contraception (LARC) users are "60 percent less likely to use condoms compared to girls who use birth control pills...and more likely to have two or more sexual partners in the past three months." As a response to the recent rise in STD cases the CDC plans to implement new strategies for greater condom use. But the director of research and education for Human Life International—Dr. Brian Clowes—says that encouraging greater condom use among IUD users will only increase the number of STDs since condoms fail 7 percent of the time.

See the Source: http://www.christiantoday.com/article/u.s.high.school.girls.using.iuds.less.likely.to.use.condoms.exposing.them.to.stds.new.study.shows/82259.htm

Canada—In January a government committee convened in Ottawa to discuss medical assistance in dying (MAID). In February the report was released announcing the panel's official recommendation: that all publically funded institutions provide assisted suicide and euthanasia services. The law would force publically funded Christian hospitals and nursing homes to participate despite moral

objections. The committee also suggested that any healthcare worker who objects to performing assisted suicide or euthanasia provide patients with a referral for someone who will. Christian Elia, an outspoken opponent of the proposed law and the executive director of Catholics Civil Rights League, says that even providing a referral "compels that physician to act against their conscience {...and} is basically compulsion to participate directly."

See the Source: https://www.lifesitenews.com/news/breaking-canadian-gvmt-panel-recommends-forcing-catholic-hospitals-to-eutha

Brazil—Since February 1st Women on Web, a pro-abortion Canadian group based in the Netherlands and operating internationally, has been sending abortifacient drugs free of charge to expectant mothers in Brazil who have been exposed to the Zika virus while pregnant. But Brazilian authorities have confiscated the drugs (misoprostol and mifepristone) en route since these drugs and most abortions are illegal in Brazil. As a result, Women on Web has been forced to halt its operation. The group has "'sent dozens of packages' to pregnant women in Brazil but only two have arrived" the rest having been confiscated by agency press officers who check packages as they arrive at the post office. Leticia Zenevich, spokeswoman for the group says that the confiscation of illegal drugs is "not fair" and "tragic." The push by abortion advocates to relax Brazil's abortion laws in response to the Zika virus has been

met with fierce opposition by both politicians and Christians.

See the Source: http://www.latimes.com/world/mexico-americas/la-fg-global-abortion-drugs-20160327-story.html

United States—After

being passed by the Florida Senate, Governor Rick Scott has signed a bill to defund Planned Parenthood of taxpayer funding. The Florida based Planned Parenthood business receives around \$200,000 in taxpayer funds every year. The funds will be redirected to other "non-abortion community health services which offer comprehensive healthcare to women and outnumber Planned Parenthood facilities by 20 to one." The bill comes after the Center for Medical Progress released videos showing Planned Parenthood staff trafficking in the body parts of aborted babies. Cecile Richards, the president of Planned Parenthood Federation of America, finds the bill "cruel... designed to rip healthcare away from those most at risk." In addition to defunding Planned Parenthood, the bill requires that abortionists have hospital admitting privileges or patient transfer agreements to meet the same standards as other outpatient surgical facilities.

See the Source: http://www.lifenews.com/2016/03/28/florida-gov-rick-scott-signs-bill-to-defund-planned-parenthood-abortion-business/

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Abortion Is Never the Answer for Pregnant Women with Zika

By Jonathan Abbamonte

Abortion advocates have attempted to lobby and shame pro-life Latin American countries into legalizing abortion for women who may contract the Zika virus. Although it has not been proven that

Zika causes microcephaly and other congenital disabilities, pro-abortion groups have nonetheless assumed that it does. Apparently abortion activists think they know more about ZIKV than the medical community.

Pro-abortion groups like the International Planned Parenthood Federation (IPPF) and abortion device manufacturer Ipas have used the recent outbreak for promoting an anti-life agenda and have called on governments hard-hit by the Zika outbreak to "ensure that women have access to...abortion."

Yet a new study¹ has found that pregnant mothers who contract a Zika virus infection have a less than 1% chance of their babies developing microcephaly.

The findings were recently published in a

study in *The Lancet*, a medical journal. The study used a statistical model that drew upon data from multiple samples from the Zika outbreak in French Polynesia between 2013 and 2014. The French Polynesia outbreak infected an estimated 66% of the total population.

The results? Fewer than one-half of one percent (0.42%) of all Zika

infections in French Polynesia in the first, second and third trimesters resulted in infants with microcephaly.

Before an estimate for risk had been quantified, abortion advocates would have had us believe the risk of microcephaly was much higher than



Photo Cradity iCtaals

what the data shows.

Recently, the United Nations High Commissioner for Human Rights, Zeid Ra'ad Al Hussein, publically stated that countries dealing with the Zika outbreak should make comprehensive sexual and reproductive health services, including abortion on demand, universally available. According to the UN High Commissioner, abortion is an "essential" "human [right]" that every nation should provide "without discrimination."

As many as 99% of infants aborted could have been perfectly healthy if Latin American governments had

heeded the calls from the UN High Commissioner to make abortion available for all mothers who contract a Zika infection during pregnancy.

According to the statistical model used by Cauchemez et al. (2016), risk of microcephaly appeared to be evident primarily during the first trimester. Women who contract Zika during the second and third trimesters thus appear to have little to no risk for their babies developing microcephaly. But more research is needed to ascertain which gestational periods have the most risk for fetal development with a Zika infection.

Despite the very small risk posed by Zika, pregnant mothers may wish to follow the advice of the Centers for Disease

Control and Prevention (CDC) in preventing mosquito bites, practicing abstinence,² and taking precautions when living in or visiting areas where the Zika virus is spread by mosquitoes. The CDC provides a number of resources and tips on common sense ways to prevent mosquito bites, such as wearing long sleeves and using mosquito nets.

Microcephaly is a congenital condition where infants are born with abnormally small heads and brains. Tracking microcephaly in the ongoing outbreak in Brazil has been difficult as diagnostic measures for microcephaly are imprecise. Microcephaly has generally been defined as a cranial circumference under 32 centimeters (≥ 2 SD below normal development) but many infants under the threshold are perfectly normal and do not exhibit any signs of cognitive impairment later in life. In order for a diagnosis for microcephaly to be accurate, small brain size (not just small head circumference) must be verified and below average brain growth or even

shrinkage over time must be observed. The new findings from *The Lancet* study seem to indicate that previous estimates for the prevalence of Zika related microcephaly may have been too high.

According to the Brazilian Ministry of Health, nearly 6,500 cases of microcephaly have been reported. But over-reporting seems to be the rule rather than the exception. Of the 2,212 cases that have been investigated so far, for example, 1,349 cases have turned out to be infants with normal cranial development, not microcephaly. The number of confirmed cases in Brazil so far appear to be similar to what would be expected from the incidence rates found in French Polynesia.

A recent report summary from the Latin American Collaborative Study of Congenital Malformations (ECLAMC), and translated into English for *Nature Science Journal*, claims that due to heightened media attention, more instances of microcephaly in Brazil will continue to be reported than would be the case otherwise. ECLAMC's Jorge Lopez-

Camelo and Ieda Maria Orioli believe that microcephaly cases have been significantly over-reported. They point out that no other risk factor for congenital abnormalities has come close to producing numbers as high as those which have been reported in the current Zika outbreak.

It is possible that the apparent link between Zika and microcephaly was not made earlier during the Polynesia outbreak due to significantly smaller populations in the South Pacific and thus, fewer number of microcephaly cases to alert health professionals.

But virologists in Brazil hasve indicated that the health community may not have recognized the possible Zika-microcephaly link for another reason. The legal code in French Polynesia does not protect human life in cases of congenital disabilities. The majority of microcephaly cases in French Polynesia that are now suspected to have been caused by Zika were terminated through abortion. It is possible that eliminating cases of microcephaly through abortion could have hindered health professionals from recognizing the Zikamicrocephaly link earlier. An earlier recognition could have allowed researchers to develop an effective vaccine by now.

How many perfectly normal babies have been aborted as a result of the panic over the Zika outbreak are encouraged—indeed orchestrated—by the pro-abortion movement? And still the advocates of abortion persist in driving the body count ever higher.

[1]Simon Cauchemez, Marianne Besnard, Priscillia Bompard, Timothée Dub, Prisca Guillemette-Artur, Dominique Eyrolle-Guignot, Henrik Salje, Maria D. Van Kerhove, Véronique Abadie, Catherine Garel, Arnaud Fontanet, Henri-Pierre Mallet, "Association between Zika virus and microcephaly in French Polynesia, 2013-15: a retrospective study," The Lancet,

published online 15 March 2016. doi: http://dx.doi.org/10.1016/S0140-6736(16)00651-6.

[2] The Population Research Institute only endorses abstinence-based prevention methods for sexually transmitted diseases.

Global Monitor

Respected Australian physician, Dr. Dierdre Little, presented her findings about the dangers of Gardasil at the recent, five-daylong Autoimmunity Congress held in Leipzig, Germany. The 200 or so doctors and researchers in attendance heard Dr. Little describe a number of cases of post-HPV vaccine primary ovarian failure (POI) and the inadequate testing of the HPV vaccine. Dr. Little's findings have been published in the British Medical Journal as well as the Journal of Investigative Medicine. To date she has seen four women who are sterile for life following the vaccine. Dr. Little has reported seven cases of POI to Australia's Therapeutic Goods Administration (TGA), which monitors vaccine safety.

Dr. Little has written to the TGA to correct statements by Merck (the HPV manufacturer) that claim that the vaccine was tested against a saline placebo. In fact, the vaccine was tested against two placebos, both containing polysorbate 80 which has been demonstrated to be toxic to ovaries at all doses in rats. Merck does not disclose this misrepresentation to the public.

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PRI IN THE NEWS

Epoch Times—Speaking at the Naval Sea Systems Command (NAVSEA) Headquarters in Washington this February, Steven Mosher of the Population Research Institute recommended that the United States form a naval coalition to counteract Chinese aggression and weaponization of islands in the South China Sea: "The U.S. Navy needs to form a coalition. And instead of just sending one U.S. Navy ship here and there to challenge China's territorial claims, it needs to gather its allies to create a multi-nation flotilla."

Mosher has been warning about China's ambitions to achieve world hegemony since 2000, when his book entitled *Hegemon: China's Plan to Dominate Asian and the World* was published. Many defense experts now agree with him. They too have warned that "China is trying to establish an 'anti-access, area denial strategy' that would allow it to form a defensive ring around China, and keep other nations—particularly the United States—at a safe distance militarily." The South China Sea is key in achieving that goal.

See the Source: http://www.theepochtimes.com/n3/1985992-the-us-needs-to-form-an-asian-alliance-to-stop-chinese-hegemony-says-top-expert/

Life Site News—Meeting at the Parliamentary Committee on Foreign Affairs and International Development, Canadian MP and prolife Garnett Genuis cross questioned the executive director of the United National Population Fund (UNFPA) about the UNFPA's involvement in China's population control program.

Genuis produced evidence that "UNFPA gave China \$50 million in 1979 to fund an 'information gathering system' integral to the population control program." But the director, Barbatunde Osotimehin, adamantly denied all charges. He went on to stress that the money was for gathering information and not for a "policy that actually coerced people."

Steven Mosher of the Population Research Institute argues to the contrary. "The fact is, the UNFPA has never met a population control program, however horrific, that it did not embrace. That is why it has offices not just in Beijing, but in the capitals of other countries with forced population control programs, such as Pyongyang and Hanoi. That is why it willingly served as the 'technical secretary' of Peru's barbaric forced sterilization campaign of a few years ago [...] I and other PRI investigators have visited areas in China where the UNFPA is directly responsible for running the local family planning program, and have repeatedly documented that forced abortions and forced sterilizations are in fact occurring there. The UNFPA is deceiving itself—and its foreign donors, including the governments of Canada and the United States—if it claims otherwise."

See the Source: https://www. lifesitenews.com/news/canadian-prolife-mp-grills-unfpa-head-on-supportfor-chinas-coercive-famil

HUSH Film—A new documentary entitled HUSH was released last month. The documentary seeks to take an honest look at the effects of abortion on women's health.

The HUSH website promotes the documentary as a "pro-information approach (not 'pro-life' and not 'pro-choice') to investigate claims of increased health risks to women who have an abortion, including Breast Cancer, Premature Birth, and Psychological Issues." The film seeks to uncover the truth behind a topic that has long been politically charged.

In covering the topic of breast cancer as it relates to abortion, the film features an interview with PRI's President—Steven Mosher. Mosher states that "This breast cancer epidemic is a looming disaster for Chinese women who've already suffered, in my view, more than enough under the terms of the one child policy."

Another interviewee—Dr. Joel Brind—a New York University professor of Biochemistry, Physiology, and Immunology has been studying the breast cancer-abortion link for more than two decades. In the film he discusses 36 studies from China that show that the risk of developing breast cancer increases by 44 percent with one more more abortions, 76 percent with two or more abortions, and up to about 90% with three or more abortions. This is but one of the long-lasting effects of abortion on women's health.

See the Source: http://www.hushfilm.com/

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Development Desk

Plan your estate and help Put People First for generations to come!

IT IS IMPORTANT TO REVIEW AND UPDATE YOUR WILL ON A REGULAR BASIS.

It is commonly said that: "Life is what happens when we are busy making other plans." For this reason, it's a good idea to review important documents, such as your will or estate plan, as well as your 401(k) and life insurance policy regularly, so you are always prepared.

Our lives are always changing — your will or documents need to be updated periodically to reflect such life changes as:

- Marriage
- The birth of a child or grandchild
- The death of a beneficiary
- Divorce or remarriage
- An inheritance
- The purchase of a new asset such as life insurance, or a new home.
- A bequest to an organization to commemorate someone you love or to provide support and recognize the work of your favorite charity.
- If you have included the Population Research Institute as a beneficiary of your estate plans please let us know.

TIPS FOR UPDATING YOUR WILL:

Consider all of your assets. Remember to include any new investments, real estate, business assets, retirement plans, insurance

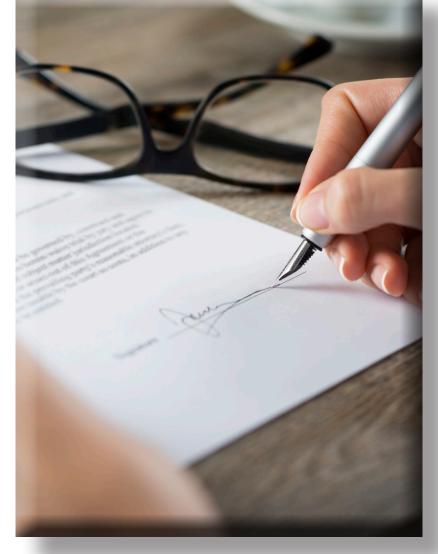


Photo Credit: iStock

and personal property. Then, decide if you have changes to what you want to do with these assets and to whom you wish to leave them.

Meet with your attorney. Your attorney will advise you on which assets are best left to family, friends or charity from a tax and legal perspective. If you chose to leave part or all of your estate or assets to the charity of your choice, make sure you have the correct language in your will.

If you would like to remember the Population Research Institute in your will, please call 1-888-774-1531 and ask for Karen Shannon.

Make sure someone knows where your original will or trust is located, and has access to that location. Also give this person a copy of your will or trust. Destroy invalid wills or trusts as directed by your attorney.

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Global Monitor

Daily Mail—A study recently published in the journal Nature Communications suggests that human embryos have the ability to rid themselves of abnormal cells that could lead to birth defects. The research was led by Professor Magdalena Zernicka-Goetz, a Cambridge University professor who gave birth to a healthy boy at age 44, despite having a chorionic villius sampling (CVS) test which had revealed that 25 percent of the cells in her embryo were abnormal. Professor Zernicka-Goetz and her team conducted their research by mixing embryonic cells of mice so that 50% of the embryonic cells were abnormal and 50% were normal. They found that the abnormal cells were "killed off by 'apoptosis,' or programmed cell death, even when placental cells retained abnormalities." The embryo was then taken over by normal cells, completely repairing itself. When the researchers mixed cells at a ratio of three abnormal cells to one normal cell they found that some of the abnormal cells survived, but the number of normal cells increased.

Professor Zernicka-Goetz will begin research to determine the exact number of healthy cells needed for the embryo to fully repair itself. Since the average age at which women have their children is rising, Professor Zernicka-Goetz's research is well timed. She has also pointed out that her research is ethically imperative, as it calls into question the necessity of terminating an embryo "based on tests whose results we don't fully understand."

See the Source: http://www.dailymail.co.uk/health/article-3512880/Embryos-abnormalities-early-stages-pregnancy-develop-healthy-babies.html

Correspondence

Dear Steven,

I am a Catholic in the Archdiocese of Seattle, Washington, my parish is Holy Family of Kirkland. This morning I left a message on Joel's office phone and now want to follow up with this written inquiry.

As result of the March-April Review 2015, front page article entitled, 'Kenyan Catholics Protest CRS Sex Ed Programs Promoting Condoms', I wrote to CRS informing them that my husband and I would discontinue donating to CRS and asked them to respond to the issues laid out in the March report from HLI, Lepanto, and PRI. Their letter in response did not address any of the facts in the article or the report. Instead, I got a rather convoluted explanation of its involvement with SAIDIA, SHUGA and MMAK. My letter was addressed to Dr. Carolyn Y. Woo, President & CEO and the response was not signed but marked 'Donor Services.'

We continue to withhold our donations from CRS and have asked them to take us off their donor lists, a request they still have not honored.

Now our archdiocese is embracing the CRS project, 'CCGP' (Catholics Confront Global Poverty) and training and using parishioners in our parishes as 'ambassadors' to encourage fellow parishioners to participate in CRS' Rice Bowl and respond to two other global solidarity initiatives. My gut feeling when I hear and see this going on is one of distrust and real concern for the mothers and babies of the world.

What is the current status of the Report you made public and has CRS responded to these charges? Are you uncovering any other areas where CRS is ignoring Church teachings? Has the CRS changed to include in their behavior the three proposals asked of them by the Kenyan Bishops: (1) That they not work with partners who

oppose Church teachings, (2) That they hire employees of the Catholic faith, and (3) that they coordinate their activities with the Bishops' Conference and local ordinary?

I look forward to hearing from you. Blessings, Pattie

Dear Pattie,

Unfortunately, CRS is still trying to finesse the problem with, as you so aptly put it, "convoluted explanations," instead of taking decisive action.

If CRS would simply stop collaborating with organizations which oppose Church teaching, hire employees of the Catholic faith, and coordinate their activities with Bishops' Conferences and thelocal ordinary, the problems that we have repeatedly documented would be resolved.

Of course, CRS would probably lose some of the U.S. government grants that require them to form such unholy alliances. It is ultimately this money that, I believe, is behind their reluctance to cut their ties with partners who oppose Church teaching. But they, and those they aid overseas, would be better off if they did so.

God bless, Steve Mosher

Dear Steve.

This is to confirm that we have received the Ultrasound machine in Saint Lucia. Thanks ever so much!

We will be further in touch with you regarding a suitable date for training.

Regards,

Sarah

This is very good news, Sarah. Now let us save as many unborn babies as we can from the clutches of Planned Parenthood.

Steve

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