When the news broke about Planned Parenthood marketing baby body parts, I don’t think pro-lifers across the United States were surprised.

In all the hoopla over the news about Planned Parenthood, who could forget that they are in the business of killing babies for profit by ripping baby body parts off of these innocent little ones every day across the United States? We should be in an uproar everyday over the killing of these precious babies. Congress should immediately defund the killing of babies subsidized with our federal tax dollars, and investigations should be ongoing. They do not have the constitutional right to kill babies with our federal tax dollars!

While we all have a tendency to get back to work after we have exhausted ourselves with the news headlines, Missouri Right to Life is your watchdog and battles daily to save precious innocent human lives at every stage of development.

Missouri Right to Life has worked diligently to prevent your state tax dollars from being used for abortion services, human cloning and embryonic stem cell research. And the Missouri Right to Life Political Action Committees (MRL PACs) have been the only organizations holding legislators accountable for their votes regarding public funding of abortion services, human cloning and embryonic stem cell research. Many legislators have lost their endorsements based on their votes to fund unethical research under the guise of economic development.

But the tide is changing with education on these issues, and we have a huge group of legislators that stand in the gap to prevent this funding of abortion services, human cloning and embryonic stem cell research.

We have long said that marketing the bodies of aborted babies for research is a reality …. and now, once again, we see that proof.

Following the release of the controversial videos that raised questions about whether Planned Parenthood, the largest provider of abortions in the U.S., was selling baby body parts for profit, several Missouri lawmakers have called for investigations. We welcome these inquiries.

However, a single investigation of so-called Planned Parenthood is not enough. The mothers (and babies) that enter a Planned Parenthood deserve to know the truth about the deceptions of “planned parenthood.” They do not care for these women nor their babies.

For the last two legislative sessions, Missouri Right to Life has called for a required annual inspection of abortion facilities to be placed in statute. The inspection should not depend on the Governor or the Director of the Department of Health, whose diligence in oversight may be influenced by their position on abortion, but an annual inspection mandated by law.

This year we will call on our legislators to take up and pass this abortion clinic inspection bill with an expanded clause that requires information about how “whole babies” and “baby body parts” are discarded. The bill should also require disclosure of relationships between research facilities and abortion facilities. We also need to ensure that the licensing requirements for ambulatory surgical centers are in law and not a regulation that can be enforced according to political agendas.

So, while welcoming the investigations that have been proposed and will be ongoing for the next several months, Missouri Right to Life calls on the legislators to take action on these investigations! Do not just make inquiry … take action!

It is time to provide consistent oversight of Planned Parenthood in Missouri and end subsidizing their reprehensible actions with federal tax dollars.

~ Susan Klein
MO Right to Life Legislative Liaison

Vote tallies for the 2015 legislative session are now available on the MRL website at missourilife.org.
United Way Defends Funding Planned Parenthood Abortion Biz: It’s Just a Small Amount

Officials with United Way are defending the nonprofit agency’s funding of the Planned Parenthood abortion business in the wake of a scandal involving the abortion giant selling the body parts of aborted babies. A United Way spokesman says the funding really isn’t a big deal because such a small percentage of United Way affiliates send money to Planned Parenthood.

The consumer advocate organization 2nd Vote has informed LifeNews.com of the release of the Pro-Life Guide to United Way, a new guide that lists the over 1,200 United Way affiliates across the United States and specifies the organizations that contribute to the world’s largest abortion company.

“United Way has done many good things through fundraising efforts and partnerships that help communities across the country,” said 2nd Vote spokesman Robert Kuykendall. “However, the fact that United Way affiliates give almost $2 million annually to Planned Parenthood is concerning for pro-lifers that want to support these good causes but also want to make sure that their dollars do not help fund abortion services.”

As a news report indicates, local United Way agencies are fielding calls from concerned supporters who don’t want their donations to United Way going to the abortion company following a LifeNews report exposing how affiliates of the nonprofit support Planned Parenthood.

Although the United Way’s website contains language claiming a neutral stance by the organization on the abortion issue, Kuykendall tells LifeNews that some United Way affiliates donate to the Planned Parenthood abortion corporation anyway.

“According to United Way, only 5% of its affiliates contribute in any way to Planned Parenthood,” Kuykendall said.

Editor’s note: 2nd Vote’s Pro-Life Guide to United Way reports that in Missouri one United Way contributes to Planned Parenthood. According to 2nd Vote, United Way of Greater Kansas City’s 2013 IRS 990 shows $50,705 given to Planned Parenthood of Kansas and Mid-Missouri.

Condensed from LifeNews.com 7/27/15

“Choose life. You’re never going to regret it.” Teen mother explains her difficult choice

In a moving video, a young mother shares the story of finding herself pregnant at just sixteen years old. Darby explains taking the at-home pregnancy test and being in a state of disbelief, almost as if the positive test were a joke. She shares:

“I didn’t really believe it was real still. You’re kind of, ‘haha, this is funny, good joke.’ But then I went into the doctor’s office to get the official ‘yes, you are for sure pregnant.’ That was when the tears kind of came flooding in and the emotions were suddenly heightened.”

Darby knew she had three options: parenting, adoption, and abortion. Her doctor told her that she had seen many women who ended up regretting their abortions, but not once had she ever met a single mother who had ever regretted having her baby. Darby didn’t know what to do. After a few weeks she was leaning towards abortion, and she was inclined to believe the lies of the abortion industry, which said her baby was just a mass of cells and not a human.

But Darby ultimately decided against abortion and chose life for her son.

“It’s pretty amazing that you can love someone so little, so much. I just can’t imagine not having him here with me today, and what I would be doing if he wasn’t in my life right now. I think I’d be very lost and wondering this November, ‘where was my baby?’ Life is a wonderful gift. We can never take it for granted or put ourselves in a position where we can be the controllers of life.”

Choose life. You’re never going to regret it.

NRLC News Today 7/27/15

Loretto Wagner
MRL Founding Member
Pro-Life Activist
R.I.P.

Missouri Right to Life bids farewell to one of our founding members, Loretto Wagner, who died on June 17th.

For countless years, Loretto was active in all areas of the pro-life movement. Not only was she a founding member and past president of Missouri Right to Life – in which she was heavily involved in legislation and, through the MRL PAC, in election activities – she was also a founder and long-time supporter and volunteer for Our Lady’s Inn. Additionally, Loretto began the Missouri Life Caravan to the Washington DC March for Life. Through her work in the Eastern Region-MRL she was involved in many educational and organizational efforts.

Pro-life Missouri -- and truly the nation -- owe a great debt of gratitude to Loretto. We would not be the pro-life state that we are today without her leadership.

Rest in peace, dear friend!
Your dedication helps . . . every day!

From the President ~

With God All Things Are Possible

What in the world is going on?

Have we sunk so low as a nation that we would not only kill a child in the womb without blinking an eye, and then literally dissect that precious child to remove her heart, lungs, liver and head to sell on the open market -- and then buy the excuse from Planned Parenthood that this is a good thing? Did I miss something?

Fifty years ago, the paragraph above would have been absolutely unthinkable. The horror of it would have repulsed every American to the core. And yet, here we are.

In his book, The Death of Outrage, Bill Bennett chronicles how Americans have become numb to the stream of scandals that have plagued our nation … including the legalization of abortion. We have become numb to the startling number of abortions since 1973 … 58 million.

Yawn, it’s just a number!

But the tide may be turning. The recently released undercover videos of Planned Parenthood leaders have captured the attention of a sleeping nation. As much as they hate it, the press has had to report on this scandal. And America is stirring. America is uncomfortable.

It appears that the strategy is to release these videos every week or so for the next few months. The third video is even more damning than the first two. America is getting even more uncomfortable. Planned Parenthood has to be squirming right now. They are being exposed. The curtain is being pulled back.

Now what?

Missouri Right to Life will be working with the Senate Interim Committee on the Sanctity of Life (great name!) investigating Planned Parenthood. MRL will urge our legislators to reintroduce the Clinic Inspection Bill with additions to address many of the issues being exposed by these videos. We will be looking at ways to close the satellite Planned Parenthood clinics that are blights on their neighborhoods. We will work with legislators toward a Dismemberment Bill similar to the one that has become law in two other states.

But we need YOU to do any and all of these things. Your job is to:

• Call your federal legislators and demand that Planned Parenthood be defunded.

• Tell your state legislators to support life-affirming bills like the Clinic Inspection Bill and the Dismemberment Bill when they are introduced.

• Contact your local Missouri Right to Life chapter and volunteer to join the battle.

• Make a donation of any amount to Missouri Right to Life. With increased funds, we can increase our effectiveness. That is a simple reality.

And most of all. PRAY! Pray that God will guide all of us in our defense of his smallest children and that He and we will win back the hearts of the American people.

Thanks for all you do and God bless!

Steve Rupp

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Thanks for all you do and God bless!

Steve Rupp
The first time I saw Jessa, she lay crumpled in the ICU bed, paralyzed, expressionless and unable to speak. A military veteran, she had fought in Desert Storm, but she now was facing a deadlier and more inexorable foe: amyotrophic lateral sclerosis (ALS), aka Lou Gehrig’s disease.

This disease causes progressive loss of muscle control, and Jessa was unable to speak, eat or breathe on her own. Her only means of communicating was through small facial movements -- opening and closing her eyes or mouth, raising her eyebrows.

A dozen people made up her ICU team: three interns, three residents, a pharmacist, a nurse, a respiratory therapist, a social worker, a hospital chaplain, and myself -- the lead physician, or intensivist.

My intensivist mind, trained to seek solutions, skitters down a patient’s problem list in search of answers. And Jessa’s list was extensive: she needed a feeding tube, IV fluids, diapers and a special bed to prevent bed sores, antibiotics for a newly contracted pneumonia, intermittent sedation to ease anxiety, and narcotics for chronic back pain.

But now, listening to the respirator pumping air into Jessa’s lungs and feeling her intense cobalt gaze on me, I saw one thing clearly: any concerns about antibiotics or nutrition took second place to a larger question.

“What do we know of Jessa’s wishes about staying on a ventilator, now and in the coming weeks and months?” I asked the team when we stepped outside the room to confer.

“Her chart says that she wanted to be placed on a ventilator when she couldn't breathe on her own,” said one resident.

“Look how long Stephen Hawking has lived that way,” the nurse chimed in.

“I don’t think we should look at someone else’s life,” another resident burst out, clearly frustrated. “She’s suffering. I’d never want to live like this. She probably didn’t know it would be this way when she requested life support.”

I listened, having no strong opinion of my own as yet.

At that moment, Jessa’s husband Zach walked into the ICU. We shared our concerns about Jessa’s situation and asked him about her wishes.

Calmly, he replied, “Doctors, while it wouldn’t necessarily be my choice, Jessa does want life support so that she can have as much time as possible with me and the people around her. She was raised to believe that all life, however frail, is sacred. It might seem paradoxical, but that was a key reason she joined the military -- to defend life and freedom.”

Later that morning, he shared his own wish: “Just make sure Jessa knows that she's not a burden, and that serving her is our privilege.”

This conversation led to others over the next two weeks, and they sparked what I now see as a transformative period in my growth as a physician and in my understanding of patients like Jessa.

The next day, Zach told us more. “Jessa was born in Germany; she’s bilingual. We’ve been married for twenty-seven years. We have no living children -- we had several miscarriages. I’m all the family she has.”

It had been Jessa’s dream to serve as an American soldier. After they married, she enlisted and was deployed to Iraq as a diesel mechanic -- one woman among over 1,000 men. “She got caught under a tank once and smashed her head getting out,” Zach recounted. “They flew her to an army hospital in Germany, and she recovered and went back. She’s tough as nails.”

More than twenty years later, he said, she was diagnosed with ALS. “I’ve learned a ton from her about serving without concern for self,” he added. “And now I’m learning even more. The amazing way she adjusts to whatever life throws at her... She's constantly recalibrating my vision of how to make the most of every moment. Like today, she’s on that breathing machine, and she just smiled at me with her eyes.”

In those few minutes, Zach revealed our silent, nearly motionless patient as a heroic person -- someone I admired not only for her technological skills but for her pioneering attitude and resolve. I got an inkling of why she was fiercely holding onto the time she had left.

Still, some team members continued to see her quality of life (or QOL) as unacceptable. More than once, they called it “hellish.”

When I told Zach this, he said, “Jessa once said she believes hell to be the absence of hope, just as cold is the absence of heat and darkness the absence of light. Now that you’re getting to know her, can you see that she doesn’t consider her illness hellish?” he whispered. “She’s surrounded by love.”

These discussions, as difficult as they were, marked a major shift in my understanding. I began to see how often I impose my own QOL standards onto patients -- a fundamental clinical error.

Researching the empirical data, I learned that ALS and other “locked-in” patients often rate their QOL as acceptable despite their physical debility. Their focus shifts to less tangible qualities -- transcendence, spirituality and security. Pondering this, I realized more and more clearly how, in this particular situation, it was Jessa’s values and perceptions that mattered, not mine.

Our role, I saw, was to dive into the chaos of Jessa’s life and offer her care and comfort despite our inability to cure her.

Over the next week, we worked with our palliative-care team to ease Jessa’s pain, anxiety and delirium (which receded along with her pneumonia).

Every day, I made a point of remembering bioethicist Edmund Pellegrino’s words: “Healing can occur when the patient is dying even

(continued next page)
when cure is impossible.” With this in mind, I asked Zach if Jessa would enjoy being read to, as our team had done with other patients.

“Doc, she loves poems and the Psalms,” he said immediately. We began to take turns reading to her every day.

On Jessa’s last day with us before she was to leave for a long-term care facility, I chose Edna St. Vincent Millay’s Sonnet XXX.

“Love can not fill the thickened lung with breath, nor clean the blood, nor set the fractured bone; yet many a man is making friends with death, even as I speak, for lack of love alone....”

As I read, Jessa’s mouth opened wide, in a smile brighter than any we’d yet seen from her.

The medical student across the bed from me began to cry. “From joy and amazement,” the student later said.

Seeing Jessa’s smile and the student’s tears, I felt my mind stop in its tracks. Time stood still.

Jessa had lifted us above the physical realities of our existence and into something mystical. I can’t explain it, and I almost don’t want to try. Let’s just say that she gave us a private treasure, one that I will always savor as a gift I never expected or deserved.

I squeezed Jessa’s hands, holding her eyes with mine. Finally she looked away and up to the ceiling, and I stood in thought beside her.

Although my team and I loomed over Jessa as she lay in her bed, I knew that in spirit she soared high above us.

E. Wesley Ely is a professor of medicine at Vanderbilt University School of Medicine and associate director of aging research for the Tennessee Valley VA Geriatric Research Education and Clinical Centers. He has authored more than 275 peer-reviewed articles. He and his wife, Kim Ely, a surgical pathologist at Vanderbilt, have three daughters. His reflective writing has appeared in the Wall Street Journal, JAMA, Annals of Internal Medicine and elsewhere.

This column appears on the website Pulse and may be accessed at http://pulsecorrespondent.org/index.php/archive/stories/S08-last-stand

The term “futile care” would seem to be synonymous with useless medical interventions — treatment and care that would provide no benefit to a patient. However, a bioethical concept called “Futile Care Theory” is sweeping through our healthcare system. This theory proposes that physicians and hospitals should have the right to withhold or withdraw life-sustaining treatment when a patient or family wants treatment. Based on judgments about the value or quality of patients’ lives rather than on the efficacy of specific treatments or therapies, “medical futility” decisions ride roughshod over the rights of patients to make their own healthcare decisions.

The essence of “Futile Care Theory” is involuntary euthanasia by omission.

Many hospitals have adopted policies granting themselves the right to decide when it is time to stop all treatment and “allow” a patient to die, even against the wishes of the patient or family. Worse yet, some states have added “medical futility” provisions to their Advance Directives for Health Care laws. These policies and laws have been crafted to shield physicians and hospitals from legal liability for hastening patients’ deaths. They do nothing to protect patients’ rights.

Consider the outrageous Texas “medical futility” law. When a patient’s life is deemed valueless, but the patient, family, or agent1 wishes to continue treatment regardless of the illness or prognosis, the dispute is referred to the hospital-appointed ethics committee for resolution. The hospital is only required to give the patient, surrogate, or family 48-hours’ notice before this quasi court meets to decide the patient’s fate. If the committee agrees with the doctor (the usual outcome), the family must search for another facility willing to care for the patient. If another facility cannot be found or the transfer cannot be completed within 10 days, the law says “the physician and health care facility are not obligated to provide life-sustaining treatment.” That’s a death sentence issued by an unelected panel.

One Texas family who fought a “futile care” decision stated, “The battle for life is a difficult one in the best of situations, but when a family is put through what we had to go through at such a time, it is especially agonizing... We wish so much that we could have spent more time at our sister’s side when she was living and fighting for her life, rather than having to visit our attorney’s office, give interviews to radio and television stations to let the public know of the atrocity about to befall Andrea, and literally stand outside the hospital and protest ...”2

Families must also prepare for the ethics committee meeting and search for another facility, efforts that take much time, thus depriving them of precious moments with their loved one who may be near death, and stealing their peace.

People need to understand this clear and present danger.

Most people will not become aware of their state’s “medical futility” law or the “futile care” policy of their hospital until they receive unwelcome information about the ethics committee hearing or until the patient is too ill to be transferred. All citizens must understand these things before illness or injury befalls them and they are consequently hospitalized.

Advice: Before you or a loved one are admitted to any hospital, ask for a copy of the hospital’s “medical futility policy.” Even if you have no alternative but to be admitted to a hospital with such a policy, at least you will not be caught unaware and unprepared.

From “Informed” a 2014 publication of Pro-life Healthcare Alliance, A Program of Human Life Alliance. For information or assistance, reach them at 651.484.1040.
It’s not even summer’s end, and there are already so many candidates announced for 2016—local, state, and federal—we may get dizzy keeping track of them all! And it’s unlikely to slow down anytime soon.

How do we approach such an historical year of electoral expectation? How do we get ready for the task ahead? How do we measure the energy required to elect the most effective advocates for Life? And what will it take in terms of planning, resources, and navigation of these winding political roads?

Pro-life Missourians—all of us—must begin now to prepare for 2016. That means more than just liking your favorite candidate’s Facebook page. It’s more than responding to an editorial casting a pro-life legislator in a negative light. And it’s much more than a bumper sticker.

We are a diverse crowd, yet in our goals we are united. Starting now, we gather volunteers. We build relationships with like-minded friends. Starting now, we ask candidates where they stand. And we keep Life a priority in our choice of candidates!

The Missouri Right to Life Political Action Committees (MRL PACs), both state and federal, are your voice in the process of finding and electing pro-life candidates in Missouri and for federal offices. Our board is represented by active pro-life citizens from all over Missouri. We are authors, housewives, lawyers, and employers. We are social workers, secretaries, and farmers. We are real people with real families, real jobs, and real lives. We are you!

It’s you that we serve … the pro-life people of the great state of Missouri.

When it comes to supporting federal candidates, we work with our partners, National Right to Life PAC (NRL PAC), in decision-making. As for state offices, we conduct interviews, compile voting records, monitor public campaign communications, and send questionnaires to candidates. We believe there is no organization in Missouri that works harder to fairly, consistently, and objectively evaluate the positions of candidates on life issues than the MRL PACs.

Please pray for us as we prepare for 2016 and for how you can support the MRL PACs!

Not a good term for life, families at the Supreme Court

The next great battleground will be religious freedom.

This was not a good term at the United States Supreme Court. The Court’s startling decision on marriage has no foundation in the text of the Constitution. And its decision in the latest Obamacare case, King v. Burwell, was no better. These cases mean there is much work ahead for advocates of life and constitutional liberty.

The next great battleground will be religious freedom. Now more than ever, we need attorneys and elected officials ready to defend religious liberty and our founding principles in the courts of the United States.

The details of the marriage case are familiar enough: the Court departed from the text of the Constitution to impose a new definition of marriage on the people of the states, without their say-so and without constitutional warrant. The King case was about whether states like Missouri that opted not to set up Obamacare exchanges could still be forced to dole out Obamacare subsidies. The Supreme Court again ignored the text of the law and forced the states to knuckle under.

These decisions together make religious liberty the next great battleground. The left will attempt to force business people of faith—like bakers, florists and photographers—to participate in wedding ceremonies that violate their religious convictions. The left will attack Christian colleges and universities. They’ve already been coming after Christian groups on college campuses. Meanwhile, in the wake of the King case, the Obama Administration is trying to force religious charities, like the Little Sisters of the Poor, to violate their beliefs by paying for abortion drugs.

Now is the time for defenders of our Constitution to stand for religious liberty. We must fight for new protections for people of faith in our state laws: for pastors, colleges, campus ministries, and business people. And we must be willing to take the fight to the courts. This is the hour for passionate, skillful advocacy in court—all the way to the Supreme Court, if necessary—in defense of religious freedom. For defenders of life, for believers in the Constitution, this must be our most pressing priority.

~ Josh Hawley

Josh Hawley is a constitutional lawyer and was co-counsel to Hobby Lobby in its victory at the U.S. Supreme Court.
Aug. 13 - 23  Missouri State Fair - Sedalia
   If visiting the state fair, stop by our Missouri Right to Life booth. It is #22 in the Varied Industries Building on the main street of the fair. It is staffed by MRL-Sedalia Chapter members. They’d love to see you!

Sept. 11  Eastern Region “Fore Life” Golf Tournament
   Benefits Missouri Right to Life Education Fund. The Links at Dardenne, 7000 Brassel Dr., O’Fallon MO. Four person scramble. Registration & lunch begins at 11:30 am, shotgun start 1pm. $90/person, includes lunch & dinner. To register, mail name(s), contact information & check to: Missouri Right to Life Ed Fund, 1000 Executive Pkwy, Ste 229, St. Louis 63141. For information, call 314.434.4900 or email mrl.eastern@yahoo.com

Oct. 29  Western Region Stand Up For Life Banquet
   Featuring Speaker Dr. Alveda King. Reception 6:00 p.m., Banquet 7:00 p.m. Adam’s Mark Hotel, 9103 E. 39th Street, Kansas City, MO. Information and/or reservations at 816.353.4113.

Sept. 23 - Nov. 1  40 Days for Life Fall Campaign

The 2015 National Right to Life Convention, held in New Orleans and hosted by Louisiana Right to Life, included Missouri pro-lifers Ann Saladin, left, and Maggie Bick. Ann presented a workshop at the convention on the Girl Scout/Planned Parenthood connection. Maggie is Missouri Right to Life’s member on the National Right to Life Board of Directors.

If she could, she'd say, “Thank you.”

Giving never feels so good as when you know it’s saving lives.

When you send a donation to Missouri Right to Life, that’s what you’re doing! You make a difference!

Please:
- renew your yearly membership,
- set up a monthly giving plan,
- make a bequest in your will.

Just contact Missouri Right to Life at 573.635.5110. We’ll help you set up monthly giving or talk with you about a bequest. Or you may return your gift in the enclosed envelope.

And we do say, “Thank you!”

Nancy Valko, longtime Missouri Right to Life member, has been recognized with the 2015 People of Life Award for lifetime commitment to the pro-life movement.

Cardinal Sean O’Malley, Chair of the Committee on Pro-Life Activities of the U.S. Conference of Catholic Bishops, presented the award to Nancy for her professional and volunteer advocacy, especially on disability and end-of-life issues.

A registered nurse since 1969, she worked for 45 years in critical care, oncology, hospice, home health, and other specialties. Nancy formerly served as president of Missouri Nurses for Life, board member of the Saint Louis Down Syndrome Association, and co-chair of the St. Louis Archdiocesan Respect Life Committee. She is currently a spokesperson for the National Association of Pro-Life Nurses. Having cared for many with chronic conditions, disabilities, and terminal illness, her compassionate insight informs her many presentations, media appearances, and articles on medical ethics in numerous publications. Nancy has become a significant voice in the fight against assisted suicide.
On July 28th thousands gathered in over 65 cities under the banner of #WomenBetrayed to protest Planned Parenthood. In the wake of the latest horrible revelations, national pro-life group Students for Life of America (SFLA) has launched the #WomenBetrayed initiative which urges citizens across the country to rally to demand their states investigate, prosecute, and defund Planned Parenthood.

Missouri Right to Life participated at three Planned Parenthood sites. MRL President Steve Rupp spoke in St. Louis, MRL Legislative Liaison Susan Klein in Columbia, and State Board Member Beth Sykora in Overland Park, KS.