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LETTER FROM THE EDITOR

Dear readers,

2021 was almost as difficult to weather as the year before: the COVID-19 pandemic rolled on, taking yet another 400,000 lives, and isolating us from much social contact for safety. So it becomes a challenge to us, in 2022 and beyond, to (as safely as possible) upend



the distancing and the loneliness to engage in a culture of encounter.

When we do so, we open our eyes to the intrinsic human dignity of the other: those we meet on the sidewalk, those we interact with on the internet, and even those who we butt heads with in our own families. To encounter is to make room for another human being, in all that they are, with all of their hopes, dreams, fears, anxieties, values, regrets, and loves. It is to see them, to hear them, to respect them, to value them. When we do all of these things, I believe that it becomes impossible for us to wish that human harm, to do violence to them.

In the stories in these pages here, we see several instances of systemic violence that exists and is promulgated by and large because of a devaluation of certain humans: people who are disabled, behind enemy lines, in the womb, etc. We can stand up against this dehumanization by authentically *encountering* the humans in our lives and respecting and protecting their inherent human dignity. We can reduce violence by guns, bombs, lethal injections, forceps, and pills by seeing the unique, unrepeatable, individual humans behind the vague, nebulous concept of "human rights." When we encounter, we stop seeing humans as "problems to be solved" with violence and death, and instead, we ask how we can humbly and holistically accompany them on their life's journey so that we all can better promote human dignity in all circumstances.

For peace and every human's life,

Aimee Murphy

This journal is dedicated to the aborted, the bombed, the executed, the euthanized, the abused, the raped, and all other victims of violence, whether that violence is legal or illegal.

We have been told by our society and our culture wars that those of us who oppose these acts of violence must be divided. We have been told to take a lukewarm, halfway attitude toward the victims of violence. We have been told to embrace some with love while endorsing the killing of others.

We reject that conventional attitude, whether it's called Left or Right, and instead embrace a consistent ethic of life toward all victims of violence. We are *Life Matters Journal*, and we are here because politics kills.

Disclaimer

The views presented in this journal do not necessarily represent the views of all members, contributors, or donors. We exist to present a forum for discussion within the Consistent Life Ethic, to promote discourse and present an opportunity for peer-review and dialogue.

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Towards a New Definition of Freedom for Women: The Pro-Life Arguments in Dobbs v. Jackson

By Rana Irby

The Supreme Court heard oral arguments on December 1

for *Dobbs v. Jackson*, the case dealing with Mississippi's ban on abortions after 15 weeks. The potential impact of the Court's decision has galvanized both sides of the abortion debate. This debate includes increasing discussion of what entails freedom for women. Arguments in favor of the abortion ban have expressed a notion of freedom in which regulations are not an infringement and having children is not incompatible with women's rights.

In 2018, the state of Mississippi passed a law banning abortions after 15 weeks, with limited exceptions.¹ Jackson Women's Health Organization, the only licensed abortion facility in the state, sued the state to challenge the law.² The decision by the Southern District Court prohibited Mississippi from enforcing the law. This court decision would be upheld by the 5th Circuit Court.³ The state took the case to the Supreme Court, which, as mentioned above, will be hearing the case in December. As the case has moved through the courts, arguments in favor of the ban have questioned whether abortion restrictions and childbearing impede women's freedom.

Over the years since *Roe v. Wade*, justification of abortion access has shifted from the paradigm of the right to privacy to arguing abortion access is part of women's freedom and that abortion restrictions should not place an undue burden on women.⁴ Mississippi, arguing for its abortion ban in the lower court, maintained that the ban did not impose an undue burden because it only limited the time one can get an abortion prior to viability.⁵ As the case has gained more public recognition, so has the discussion of whether abortion is essential to women's freedom.

Of the multiple amicus briefs filed with the case, one brief by 500 female athletes was filed in support of abortion access.⁶ One of the athletes maintained that abortion was a means to free women to take control of their bodies and future.⁷ Countering this narrative was a brief submitted by 240 women scholars and professionals as well as pro-life feminist organizations.⁸ It asserted that childbear-

ing does not have to be a hindrance to women realizing their social and economic goals.⁹ Another brief, authored by one of the authors of the aforementioned amicus brief, argued that current abortion law is harmful, rather than helpful, to women and families.¹⁰

The question of what constitutes freedom for women has played a major role in the discussion of abortion since *Roe v. Wade* was decided in 1973. As *Dobbs v. Jackson* poses a potential challenge to the landmark case, the discussion has garnered significant public attention. This has led a significant number of pro-life supporters, namely women scholars and professionals, to challenge the notion of women's freedom and childbearing being in opposition. It also challenges the idea of abortion regulations equaling a lack of freedom. Mississippi's abortion ban, in its journey to the highest court in the land, has seen pro-lifers propose a new definition of freedom for women.

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Harmful Assisted Suicide Bill Progresses to Committee Stage After Fierce Debate in UK's House of Lords

By Sophie Trist

his recent Halloween season has been an unusually scary one. There's not much scarier for disabled and chronically ill people than physician-assisted suicide, which disguises killing as healthcare and, because of pervasive ableism in the medical system, promotes suicide assistance for people with disabilities while the able-bodied receive suicide prevention.

Unfortunately, an assisted dying bill proposed by Baroness Molly Meacher, chairwoman of Dignity in Dying (which used to be called the Voluntary Euthanasia Society), passed into the committee stage after seven hours of fierce debate during its second reading in the United Kingdom's House of Lords on October 22. This is a private bill, meaning that it was introduced directly by Baroness Meacher and not by the UK's government.¹ This means the bill will now proceed to a committee for review. Polls show very broad popular support for assisted suicide among the British public, but because the UK's government does not officially support the bill, its future is uncertain.²

This bill would allow medical professionals to prescribe lethal medications to people with a terminal diagnosis who could reasonably expect to die in the next six months. The bill requires that the patient be of sound mind and free from coercion. To help ensure this, the patient's case must be reviewed by a panel consisting of two physicians — one attending and one independent — and a High Court judge.³ However, as an opponent of the bill, Baroness Finlay of Llandaff, rightly pointed out,

Many vulnerable people are unaware of the dangers in going down this road, as this bill has hidden dangers, unsafe qualifying criteria, and potentially opens the door to even wider legislation... Instead, the focus should be on pressing the Government to do more to ensure good palliative and end-of-life care for everyone, everywhere in this country.⁴

Several peers who formerly opposed assisted suicide had a change of heart and voted in favor of Baroness Meacher's bill. Prominent among them were Lord Field, who revealed that he has a terminal diagnosis, and Baroness Davidson, who gave her maiden speech in support of the bill.⁵

Over 60 peers spoke in opposition to the bill, among them Baroness Jane Campbell, a well-known disability rights activist who lives with spinal muscular atrophy. Lady Campbell commented that "Disabled people with terminal conditions or progressive conditions like mine are alarmed by the misleading narrative of autonomy and choice...We must not abandon those who can benefit from high-quality health and social care to the desperate temptation of assisted suicide in the guise of a compassionate choice."⁶ Justin Welby, the Anglican archbishop of Canterbury, also fiercely opposed the bill saying, "No amount of regulation can make a relative kinder or a doctor infallible; No amount of reassurance can make a vulnerable or disabled person feel equally safe, equally valued if the law is changed in this way."⁷

In virtually every country that has passed any kind of assisted suicide legislation, the same pattern repeats. At first, the law only permits physician-assisted suicide for terminal patients with six or fewer months to live. Almost inevitably, criteria are loosened, until countries such as Canada begin allowing disability to be grounds for physician-assisted suicide.⁸ Canada has seen a 648% increase in medically assisted deaths between 2016-2020.⁹ Belgium, which also has an extremely permissive law allowing for the euthanasia of people with psychiatric illnesses and even terminally ill children, has seen a 925% increase between 2002-2019.¹⁰

Baroness Meacher's assisted suicide bill seems modest by these standards, but making killing a component of healthcare will pave the way for the wholesale exploitation and elimination of disabled people. The very idea of assisted suicide — who gets it and who is encouraged to continue living — tells us that our lives are a burden, that death is preferable to suffering with a disability.

Allowing terminally ill people to end their suffering on their own terms may seem like the only compassionate, just course of action. But while systemic ableism remains rooted in every facet of our healthcare system, such legislation makes value judgments on people's lives and opens our most vulnerable brothers and sisters up to pressure from relatives, caregivers, and physicians. The resources being pumped into assisted suicide campaigns should instead go toward expanding palliative and end-of-life care options for those who need them most. Assisted suicide is not the answer for those who wish to create a nonviolent, life-affirming culture that upholds the worth and dignity of every human being.

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Colombia Clinic Cancels Woman's Legal Euthanasia

By Judith Evans

n 2018, a Colombian woman named Martha Liria Sepulveda received a frightening diagnosis: amyotrophic lateral sclerosis (ALS), a progressive and ultimately fatal neuromuscular illness.¹ People living with ALS gradually lose the ability to walk, speak, swallow, and breathe. Life expectancy is usually two to five years, although some people live for decades with the disease.² People with ALS are not considered terminally ill until their life expectancy is six months or less.

Martha Sepulveda believed that her only recourse was to apply for euthanasia, which is legally available in Colombia. She would have been the first person in Colombia to die from the procedure without a terminal diagnosis.³ Sepulveda's story reveals the confusion and ultimate lack of compassion behind legal euthanasia.

Colombia Legalizes Euthanasia

Colombia's history of legalized euthanasia is a tragic illustration of failed leadership at the cost of too many lives. In 1997, Colombia became the first Latin American country to legalize euthanasia when its Constitutional Court decriminalized the procedure. In order to be eligible for euthanasia, a person must have received a terminal diagnosis with a life expectancy of six months or less.⁴

The Court, however, did not issue guidelines for the procedure until 2014. Meanwhile, hundreds of people were killed as doctors carried out the procedure without oversight. For example, more than 400 people died at the hands of Dr. Gustavo Quintana while political leaders ignored the issue.⁵

Colombia's first legal euthanasia took place in 2015. The patient,

79-year-old Ovidio Gonzales Correa, had a facial tumor and was living with painful trigeminal neuralgia. His scheduled euthanasia was cancelled 20 minutes before it was to take place, but an appeals court eventually approved his euthanasia request.⁶ Since 2015, 157 people have died in Colombia from the procedure.⁷

Legalized for Non-Terminal Diagnoses

After the Court legalized euthanasia, many people with non-terminal diagnoses unsuccessfully applied for access to euthanasia.⁸ The Colombian Constitutional Court changed that scenario on July 22, 2021 when it ruled that non-terminal patients were eligible for the procedure, provided that the patient is in intense physical or psychological suffering, resulting from bodily injury or serious and incurable illness.⁹

The Court pointed to the concept of human dignity, stating that:

"A person cannot be forced to continue living, when he suffers from a serious and incurable disease that causes intense suffering, and has made the autonomous decision to end his existence in the face of conditions that he considers incompatible with his conception of a dignified life."¹⁰

The Court, however, failed to recognize the inherent dignity of every human being, regardless of ability or dependence. The life of a person who is facing an incurable illness has as much intrinsic worth as the life of an Olympic athlete. A law that tells an individual that their life lacks dignity or worth is not a compassionate law.

Sepulveda's Euthanasia Granted, then Cancelled

Within a month after the Court's ruling, Martha Sepulveda was granted access to euthanasia.¹¹ The procedure was to take place at Colombia's Institute of Pain (Incodol) on Sunday, October 10, 2021.¹²

On October 8, however, Incodol reversed its decision and canceled Sepulveda's euthanasia. A committee of medical professionals, which reviews euthanasia applications, had been monitoring Sepulveda's condition since August 2021. Her treatment specialist conducted an in-person assessment on October 6, and reported the findings to the Incodol committee.¹³ By that time, news media had shown videos of Sepulveda smiling and celebrating the granting of her euthanasia request.¹⁴

Incodol's spokesperson, Andrea Villa, explained that the committee decided to cancel Sepulveda's euthanasia because:

"the patient has a diagnosis of non-terminal disease and a greater functionality than that reported by the patient and her relatives in the multiple medical consultations that were reviewed in the first Committee."¹⁵

The committee therefore ruled that:

"the patient has a high probability of life expectancy greater than six months, therefore she does not meet the terminability criteria."¹⁶

Sepulveda's attorney, Camila Jaramillo of the Economic, Social, and Cultural Rights Laboratory (DescLab), announced a lawsuit to appeal the cancellation.¹⁷

Ongoing Debate

Legalized euthanasia is the subject of debate in other Latin American countries. Uruguay, Chile, and Argentina are considering laws similar to Colombia's euthanasia law.¹⁸

Worldwide, just six other countries have legalized euthanasia: Belgium, Canada, Luxembourg, the Netherlands, New Zealand, and Spain.¹⁹ Colombia, Belgium, and the Netherlands are the only countries that allow the procedure in non-terminal cases.²⁰

Ease Suffering and Value Life

Legal euthanasia sends an unmistakable message that ability and dependence determine the value of a life. The confusion and inconsistency surrounding Martha Sepulveda's case proves that it is impossible to decide that some lives are worth more than others. The goal of healthcare providers, courts, and government officials should be to ease suffering and value the lives of all human beings – seriously ill or not.

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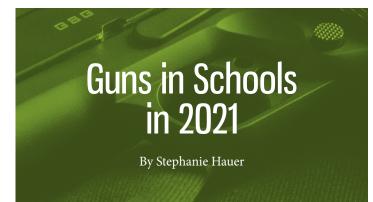
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here was a fight at Timberview High School on Wednesday, October 6.¹ That morning, a conflict broke out among some students, and it escalated sharply when one of those students pulled out a gun and opened fire in his classroom. Timothy George Simpkins shot three people — two students and one teacher. All three were initially hospitalized. One of the students suffered minor abrasions where the bullet grazed her. She was released from the hospital within a day. The teacher was in good condition by Thursday, while the other student remained in critical condition. One additional student was injured during the incident but did not require hospitalization.

The rest of the students at the school entered lockdown when the shots were heard. Some of them texted their families in fear. They used the furniture within their classrooms, such as desks and bookcases, to make improvised barricades against potential armed intruders.² Parents gathered at a pick-up location around five miles away from the school building. Once the all-clear was issued, the students were loaded onto buses and reunited with their parents.

Simpkins, meanwhile, fled the scene quickly after the incident. He communicated with his attorney, and then turned himself in within a few hours. He was arrested and charged with three counts of aggravated assault with a deadly weapon. Since then, he has been released from custody after posting his \$75,000 bond.

Carol Harrison Lafayette spoke on behalf of Simpkins' family the night of the shooting. "The decision he made, taking the gun, we're not justifying that. That was not right. But he was trying to protect himself," she told reporters. Simpkins' family indicated that he was bullied at the school and had even been robbed twice. As Lafayette herself said, that's not a justification for these acts of violence; it doesn't excuse what Simpkins did. But hearing about his troubles and experiences is an invitation to sonder. Learning about his personal experience reminds us that even the perpetrators of violence are human beings, with all the inherent dignity that comes with that humanity. Guilt does not negate personhood.

Unfortunately, Simpkins is not the only person to shoot a gun at a school this year. In 2021, there have been 106 documented incidents of school shootings.³ 22 people have died in these instances, and 57 were physically injured. Countless more were affected in less visible ways, such as the development of anxiety or post-traumatic stress disorder. Of those incidents, at least 30 of them happened in the first month and a half of this academic year (August 1st to September 15th).⁴ Everytown for Gun Safety has been tracking school shootings since 2013, and this is the most violent "back to school season" they've ever documented.⁵ Similarly, from March 2021 to June 2021, there were 14 school shootings. That's the highest number during that date range in any year since 1999.⁶

Kathy Martinez-Prather of the Texas School Safety Center said that "the challenge is how to manage [various threats against campuses made on social media] right now, amid all the other anxieties that staff and students are dealing with right now because of COVID."7 The pandemic has caused extensive disruption, and that's affected everyone's mental health, including students. The isolation of quarantine, the stress of managing one's own health, the worry about the health of others, the grief of loss, and the uncertainty of the whole situation — it is all incredibly taxing. Many students have now returned to in-person classes, but there are still lots of questions and uncertainties surrounding things like mask and vaccination requirements. Students may also switch to remote learning suddenly if someone in their class tests positive for COVID. All of these variables can cause feelings of stress and anxiety in students, a population that already experiences high levels of chronic stress. Without proper support, students may struggle to cope with all of these additional stressors, and "those are the things that could cause an uptick [of gun violence in schools],"8 said Martinez-Prather.

Our schools are meant to educate our children, but kids can't learn as well when they don't feel safe. "Children exposed to violence, crime, and abuse are more likely to abuse drugs and alcohol; suffer from depression, anxiety, and posttraumatic stress disorder; fail or have difficulties in school; and engage in criminal activity;"⁹ Everytown highlights on their website. School shootings are considered rare, and they only make up a small portion of the gun violence that afflicts children every year in this country, but that doesn't negate the very real impact of gun violence in educational settings. Each act of violence has a ripple effect. It physically hurts the people at the scene, and it emotionally hurts so many more people who surround this epicenter of trauma. Our children and our communities deserve effective solutions, implemented in a timely manner, to reduce the risk of such devastation happening again.

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After Latest Pentagon Admission, Are We Not Also Terrorists?

By Samuel B. Parker

On August 29th, as the U.S. military was completing an overdue yet abrupt withdrawal from the nation of Afghanistan, it executed one last decisive maneuver. From an unmanned aerial vehicle, pilots launched a Hellfire missile into a white Toyota sedan that, at the time, was suspected to contain explosive materials for use in a suicide bombing at the Hamid Karzai International Airport in Kabul.¹ The blast killed 10 people and satisfactorily eliminated the alleged threat.

As it turns out, however, U.S. intelligence was wrong about virtually every detail related to the target.²

The Toyota that was ostensibly loaded with deadly explosives? It was actually full of water bottles. The supposed ISIS-K militant who was assassinated in the strike? He was actually an employee for a U.S.-based nonprofit working in Afghanistan. The collateral damage? Ten civilians, seven of whom were children. In sum, the U.S. military operated with insufficient information and exercised unfathomable negligence, and these critical errors resulted in the cold-blooded murder of ten innocent people.

On September 17, a Pentagon spokesperson admitted that the U.S. military had made a grave mistake and issued an apology that accepted no explicit responsibility. While offering his "profound condolences" to the victims and their families, Gen. Kenneth F. McKenzie Jr. maintained that the strike was perpetrated with confidence and conviction that the target represented a legitimate danger to the remaining U.S. personnel and allies in Kabul, but he conceded that it is "unlikely" that the casualties were associated with the terrorist group ISIS-K. Not many two-year-olds are, after all.3 General McKenzie later remarked that the U.S. military does not always "have the luxury" of conducting pattern of life analyses, wherein the actions and interactions of potential targets are thoroughly surveilled over an extended period of time in order to assess the validity of the risks that they pose. Gen. Mark A. Milley succinctly summarized the position of the U.S. military on this issue: the brutal slaughter of ten innocent people due to faulty information and poor judgment is merely a "tragedy of war."4

In review, operants of U.S. airstrikes cannot afford to ensure that their victims are actually combatants, but they can afford to butcher random civilians. When U.S. agencies and officials are mistaken (a fairly frequent occurrence), it is innocent people who must accept and bear the burden. Don't blame the U.S. military. It's just war.

What, I ask, is the difference between this posture and one of organized terrorism?

Terrorists kill with political motives. They make no distinction between soldier and civilian, and employ violence against each group in order to pursue and achieve both practical and general ideological goals. They act without regard for human rights or international law. And there is compelling overlap between this behavior and that of the U.S. military.

A common objection to this argument is that terrorist attacks are meticulous and deliberate, whereas civilian casualties inflicted by U.S. airstrikes are largely accidental. Without addressing incidents of intentional civilian murder on the part of the U.S. military and leaving aside the terrifying implication that U.S. forces function with haphazard and reckless abandon, this line of reasoning raises a vital question: how many accidents can we excuse before we acknowledge the absolute culpability of the offenders and respond accordingly?⁵

Since 2001, between 22,200 and 48,000 civilians have died in thousands of manned and unmanned U.S. airstrikes.⁶ American drones and gunships have bombed weddings,⁷ funerals,⁸ hospitals,⁹ and mosques.¹⁰ They have claimed the lives of doctors, farmers,¹¹ and journalists.¹² American citizens¹³ and noncitizens alike have perished in the onslaught. No man, woman, or child is safe from these immediate and extrajudicial death sentences.

At the hand of any other person or party, we would accurately and appropriately label these actions war crimes. When performed by the U.S. military, however, these violations of human rights are simply considered incidental. Nobody is accountable. No one is punished. No reparations are extended. The people who make the most significant decisions in modern times operate with a brazen impunity that might stagger even the most infamous of historical tyrants. Despots of ages past had to contend with the substantial barriers of time, space, and primitive technology; those of the present era have only to snap their fingers.

It is time to end the U.S. drone program and the practice of airstrikes more broadly. The deprivation of due process is antithetical to purported American ideals. The autonomous role of powerful individuals in independently determining who deserves to die, when, where, why, and how is incompatible with basic humanitarian principles. And the margin for error is too high.

Unilateral airstrikes and the consistent life ethic are mutually exclusive. Tens of thousands of casualties later, we must urgently insist on the retirement of foreign policy that does not account for the inherent dignity of each and every human being.

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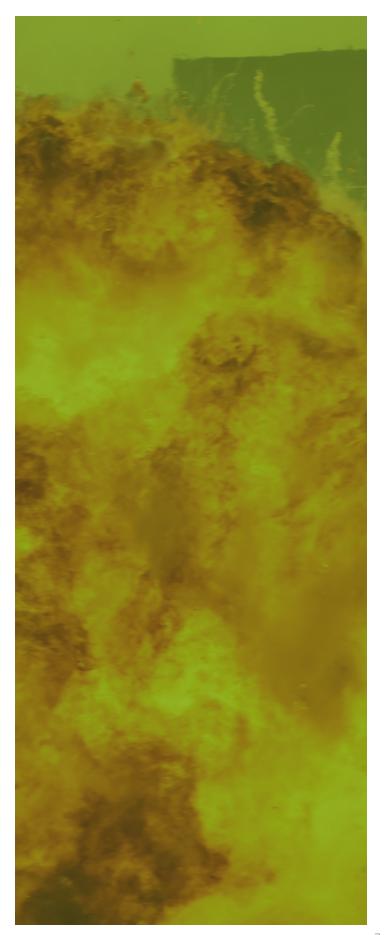
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The Forgotten War: The Libyan War and Its Legacy

By John Whitehead

Of the 21st century wars waged by the United States,

the Libya War is perhaps the most forgotten one. The 2011 war waged by the United States, France, Britain, and other nations to overthrow the regime of Libyan dictator Muammar Qaddafi lasted only about seven months, in contrast to the years of U.S. involvement in Iraq and Afghanistan.¹ No Americans died in the war, as the United States and its partners relied on bombing and arming anti-Qaddafi rebels rather than sending their own troops into Libya. Compared to other recent American wars, Libya seems almost a footnote.

Yet the consequences of the Libya War have been long-lasting and devastating. Ten years after the anti-Qaddafi war came to an end in October 2011, we can look back and see what the military intervention's results were. Qaddafi's overthrow, far from bringing about a stable, more democratic Libya, led to internal strife in Libya that eventually broke out into a civil war that remains unresolved today. The 2011 Libya War has yielded dire results for the country, region, and world—and teaches sobering lessons about wars of regime change.

The war began with an uprising in February 2011 against Qaddafi's 42-year rule. Qaddafi responded to the uprising with repression, and the United Nations Security Council imposed various sanctions and penalties on his regime.² When regime forces threatened the rebel-held city of Benghazi, France, Britain, and various Arab nations called for creating a "no-fly zone" over Libya to prevent repression by government air forces.³ After some internal debate, President Barack Obama's administration also supported intervention to stop Qaddafi.⁴ (Although a later investigation suggested fears that Qaddafi would massacre civilians may have been exaggerated.)⁵

The pro-intervention forces successfully lobbied the United Nations Security Council to pass a resolution authorizing not only a no-fly zone over Libya but also "all necessary measures...to protect civilians and civilian populated areas under threat of attack."⁶ This resolution passed on March 17, 2011, and two days later a coalition of nations, including the United States, started bombing Libya.⁷ Later that year, the United States began supplying weapons to anti-Qaddafi rebels in Libya.⁸

The tide turned in the rebels' favor, and they seized Libya's capital, Tripoli, in August. By then, the United States had already recognized the rebellion's Transitional National Council as Libya's new government.⁹ The war reached a grisly conclusion in October, when rebels captured, tortured, and killed Qaddafi. The United Nations officially declared the intervention over by the month's end.¹⁰ The war to stop a dictator's repression seemed to be successful.

Creating a new Libyan government proved far more complicated.¹¹ Libya's rebel leaders successfully held elections in 2012 for a new parliament. However, they failed to disarm the many armed rebel groups created in the uprising and provide the rebel fighters new, civilian jobs. This failure left large armed militias playing major roles in Libyan politics. Armed groups influenced the 2012 elections and also carried out attacks on westerners, such as the 2012 attack on U.S. diplomatic facilities in Benghazi that killed four Americans.¹²

The breaking point came in early 2014. Armed groups that followed an extremist interpretation of Islam came to wield more influence in Libyan politics. General Khalifa Haftar, a former Qaddafi commander turned rebel, responded to the extremist groups' growing power by declaring the current government dissolved and launching a military campaign to seize control of Libya.¹³ Haftar described himself as trying to "eliminate extremist terrorist groups."¹⁴ His actions plunged Libya into civil war.

Libya has been divided ever since.¹⁵ Haftar's forces continue to struggle against the UN-recognized Government of National Accord (GNA) for control of the country. Various outside countries have given support to the opposing sides: Egypt, Russia, and the United Arab Emirates are among those backing Haftar; the GNA's supporters include Qatar and Turkey. National elections planned for the end of 2021 offer a faint prospect for improvement in Libya.¹⁶

The 2011 Libya War and its aftermath have had several dire consequences:

Wartime Suffering. How many Libyans have died in the past decade's conflicts is unclear. The conflict has been brutal, though. A recent United Nations report describes widespread human rights violations in Libya since 2016: mass executions, attacks on hospitals and schools, civilians killed in airstrikes, use of child soldiers, and violence against women and LGBTQI people.¹⁷ All parties to the conflict, including external actors, have likely been involved in such atrocities.¹⁸

The oil-rich country, which once boasted a welfare state and relatively high living standard, has been impoverished. Oil production has been disrupted, the public health system has been devastated, and electricity supplies are uncertain.¹⁹ In 2020, United Nations estimates indicated almost a quarter million people were internally displaced and more than 1 million needed humanitarian assistance.²⁰

Human Trafficking. Libya's internal chaos has made the country a haven for those who exploit African migrants seeking to reach Europe. Migrants have suffered slavery, inhuman living conditions, and violence, including sexual violence, from traffickers operating in Libya.²¹ The European Union has encouraged Libyan authorities to stop the flow of migrants to Europe.²² This has led to migrants being confined in Libya in conditions scarcely better than with the traffickers.²³

Diplomatic Fallout. The Libya War had a less tangible but still important consequence. Prior to 2011, relations between Qaddafi's regime and the United States had improved. In 2003, Qaddafi abandoned his pursuit of nuclear weapons, which led to the restoration of U.S.-Libyan diplomatic relations.²⁴

That these events were followed by the United States and other nations overthrowing Qaddafi could send a powerful message to other rulers: Never give up nuclear weapons. And if you don't have such weapons, acquire them, so you have insurance against attack. If other heads of state draw such a lesson from the Libya War, efforts to prevent the spread of nuclear weapons and to promote disarmament will suffer. That will be one more toxic legacy of the war.

The lesson peace advocates should draw from the Libya War and its terrible consequences is that violent regime change all too often leads not to justice or freedom but to chaos and more violence. This is a sad lesson too many policy makers still need to learn.

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The United States of No Maternity Leave

By Christy Yao Pelliccioni

A few years ago, I realized that I've long held two conflicting typically conservative beliefs:

America is the greatest country in the world, and America allows the legalized killing of unborn children. At the same time, my progressive Maryland roots told me that America was still somehow a very sexist country. I knew before I got my first paycheck that I would have to work harder than my male counterparts to succeed in my career.

If you're already overwhelmed by this display of semi-patriotic righteous indignation, so am I. It's confusing being a progressive pro-life American woman. But when you look at the sad state of the U.S.' maternity leave, most of my beliefs really aren't so shocking. I don't quite know how to tally up what constitutes the "greatest country in the world", and I'm not really sure it would do much good anyways. But I do know if the U.S. wants to live up to that slogan, we have some serious work to do regarding women, children, and families. When you look at our appalling maternity leave regulations, it makes sense that we are one of the seven countries in the world that allow abortion after 20 weeks.¹ We're putting the needs of companies and short-term profit first, and families second. To live up to our patriotic claims, we must change these fundamental flaws.

Just How Bad Is It?

I'll give you a hint: it's pretty bad. The U.S. is the only industrialized nation in the world that does not guarantee paid parental leave through a federal law. Most countries that guarantee paid maternity leave provide nearly 100% of the pay the mother would get if she were working. In Bulgaria, for example, mothers get 59 weeks of maternity leave at 90% of their pay. An additional year can be split between both parents. In Chile, mothers get 18 weeks at 100% pay, with an additional 12 weeks that can also be split between parents. Even in Iraq, new mothers get 100% pay for 14 weeks.²

But We Have FMLA, Right?

A partial solution to this issue is the Family and Medical Leave Act (FMLA), which requires companies with more than

50 employees within 75 miles to give 12 weeks of unpaid leave to their employees to care for themselves or their family members following an event such as the birth of a child. However, the NIH reports that 3.5 million people who need leave do not take it, with 78% not taking leave because of finances. Household incomes at or below the poverty line, as well as people of Hispanic ethnicity, were less likely to take leave. According to the NIH, women in the U.S. are less likely to take maternity leave because they are afraid it will weaken their advancement and status with their employer. Women are also afraid of the negative effects on their wages if they are seen as a temporary employee.³

The NIH reports that wage replacement is crucial for effective maternity leave, especially for families living paycheck to paycheck. Therefore, the NIH report concludes that the FMLA is unable to meet the needs of all American families. The NIH suggests that the FMLA expand its benefits to all workers and allow a gradual return to work. The FMLA also needs to provide wage replacement to workers.⁴

Does It Really Matter?

If developing countries and those criticized for egregious human rights abuses can provide paid parental leave, surely the U.S. can as well. In my next post, I will address exactly why paid parental leave is so important. I will discuss what is best for mothers, babies, and families, and why it is crucial that the United States follows the guidelines set forth by the World Health Organization. Stay tuned!

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