



# Life Matters Journal

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# LETTER FROM THE EDITOR

Dear Reader,

This is our first "post-Roe" issue of *Life Matters Journal*! As I am writing this, sitting in a café in Atlanta, Georgia, we have just passed the one-month mark since the release of the *Dobbs v. Jackson* decision, and Georgia's pro-life "Heart-beat Bill" has just gone into effect. This morning I drove past the abortion facility that I frequent for sidewalk outreach and was happy to find that it was closed. Little lives are already being spared from violence! What a tremendous moment for human rights.



I hope that this victory invigorates the work being done to protect every human life, born and unborn. We who advocate for the Consistent Life Ethic know that we still have a long way to go before we reach a true culture of life. Violence is still normalized — in the womb, at the border, in warzones, and behind bars — and we must continue our efforts to ensure all vulnerable populations receive the care and protection they deserve.

In this issue of *LMJ*, our writers shine a light on a variety of ongoing instances of violence: John Whitehead takes a look at the wide-reaching effects of war; Samuel B. Parker brings attention to the plight of migrants seeking safety in the U.S.; Jack Champagne reflects on the innocent who are sentenced to death; and Kristina Artuković shares a tragic story of dehumanization and abortion.

Though it can be heartbreaking to contemplate these injustices, we should not let ourselves be discouraged. I was unsure if I would ever see the end of *Roe* in my lifetime, but now it's here — and it has renewed my hope that change is possible. Together, we can change our world for the better.

For peace and life,

**Maria Oswald**

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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# Life Matters Journal

AUGUST 2022

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# Our Reactions to the Overturning of *Roe v. Wade*

**Life wins!** Finally, the Supreme Court has recognized what legal scholars and pro-life Americans have argued for decades — the *Roe v. Wade* decision was “egregiously wrong from the start.” There is no constitutional right to take the life of another human being.

This is certainly a moment for celebration as we see this monumental expansion of human rights. However, it should also be a moment of mourning. This decision has come far too late. Since 1973, over 63 million individual human lives have been taken by abortion in this country alone. At this time, we must remember these children and recommit ourselves to the mission of ensuring that no child faces a similar fate.

This work is far from over.

Of course, we cannot stop until our unborn brothers and sisters are protected in every state and every country around the world.

Crucially, as pro-life people, we must also work to ensure that no pregnant person ever feels that abortion is their only option. In the richest country in the world, we can absolutely come together to provide for the material needs of pregnant and parenting people.

In this moment, we should redouble our efforts to serve the members of our community who most need our support. We must stand with those who have historically been disproportionately targeted and exploited by the abortion industrial complex — in particular, low-income women and families, immigrants, people of color, and the LGBTQ community.

We cannot ignore the real material conditions that many pregnant people in our communities face that lead them to consider abortion. No one should have to choose between a child and a career. No pregnant person should have to worry about finding a safe place to sleep at night or be concerned that they will not be able to access the healthcare they deserve.

We must do whatever possible to eliminate racism and correct the shameful maternal mortality rates in this country, particularly for black and indigenous mothers. We must work to decriminalize our response to poverty and mental illness and address the particular needs of incarcerated and detained pregnant people, working toward decarceration whenever possible. The needs of all marginalized and disenfranchised people in our communities must be addressed — our shared human dignity demands it.

I am excited to be a part of building this genuine Culture of Life. I hope that you will join us.

Herb Geraghty, Executive Director of Rehumanize International

June 24, 2022, marks a pivotal moment in the history of human rights: SCOTUS’s *Dobbs* decision effectively overturns *Roe v. Wade* and *Planned Parenthood v. Casey*. Now, states may protect prenatal humans within their borders. We should celebrate this verdict as a necessary step towards building a culture where each and every human being is respected, valued, and protected. As one pro-lifer noted, “Abortion killed my siblings while they were in the womb. This feels like a small bit of justice for them.”

We should face this moment in history with hope, also recognizing that many people have valid fears. Rehumanize International aims to go beyond partisan rhetoric to build a world beyond abortion; the answer to difficult pregnancies is not dehumanization and violence, but meeting the needs of pregnant people and families. This is not a time to gloat, think our work is done, or dehumanize those “on the other side.” Instead, we must stand in a posture of humility, to see the humanity of those lashing out in hurt and anxiety. We must remember that our effort to uphold human dignity doesn’t end at birth. We must listen, roll our sleeves up, and work in diverse political coalitions to make sure that mothers and their children don’t fall through the cracks.

In listening to people — pro-life and pro-choice — over the years, we’ve heard many suggested ways our society could better care for pregnant people and their children: ample paid family leave; a child tax credit; restorative justice after abortion; universal childcare and healthcare including culturally competent antenatal, postpartum, and lactation care; guaranteed housing, food, water, and basic income; and compassionate medicine for ectopic pregnancies and miscarriages, to name a few. Opinions on solutions may vary, but one thing is clear: our labor is far from over. We want to collaborate with folks like you — across party lines — to do this necessary work to build a culture of peace and life.

Aimee Murphy, Founder of Rehumanize International

**Rehumanize International aims to go beyond partisan rhetoric to build a world beyond abortion; the answer to difficult pregnancies is not dehumanization and violence, but meeting the needs of pregnant people and families.**



# A Hungry World: How the Ukraine War Worsens a Global Food Crisis

By John Whitehead

One of the terrible consequences of Russia's invasion of Ukraine has been a disruption of the global food supply. The war has obstructed the export of crops and other materials from both Ukraine and Russia. This obstruction has worsened a world food situation already made precarious by climate change and the COVID-19 pandemic.

Millions of people are now facing possible famine or near-famine.<sup>1</sup> United Nations Secretary General Antonio Guterres recently warned that "There is a real risk that multiple famines will be declared in 2022... And 2023 could be even worse."<sup>2</sup>

Diplomacy may end the blockage of Ukrainian and Russian exports, but the current crisis underlines the need both to provide adequate humanitarian aid to food-insecure people and to address the world food system's overall fragility.

Both Ukraine and Russia are leading exporters of agricultural products. Ukraine has long been a breadbasket nation: prior to the present war, the country exported more grain than the entire European Union, at a rate of about five million tons monthly.<sup>3</sup> Russia has been the world's largest wheat exporter, accounting for almost one-fifth of wheat exports (Ukraine accounts for another 7 percent).<sup>4</sup> Russia is also significant supplier of major fertilizers.<sup>5</sup>

The Russian invasion upended the export of these products. The Black Sea was a major route for Ukrainian exports — in 2020, some 95 percent of Ukrainian wheat was transported across the sea — but the war closed that route.<sup>6</sup> Russia has imposed a naval blockade on the crucial ports of Odesa and Mykolayiv. Both countries have planted mines in the Black Sea; in Ukraine's case, to protect its coastal region from attack.<sup>7</sup>

More than 20 million tons of grain collected in Ukraine's record-breaking 2021 harvest are trapped inside the country. Some crops have been transported by land and river, but these methods are less efficient and face problems such as bottlenecks. By this June, grain exports had fallen to around 2 million tons.<sup>8</sup>

Russian agricultural exports have apparently also been obstruct-

ed by economic sanctions imposed in response to the invasion. Although crops and fertilizer are supposedly exempt from US sanctions, shipping and insurance companies may have been averse to dealing with Russia; US officials have spoken of possible "overcompliance" with sanctions and stressed the agricultural exemptions, which suggests a blockage of Russian exports.<sup>9</sup> Whatever the precise cause, fertilizer prices are rising to record levels.<sup>10</sup>

Reduced exports and higher food and fertilizer prices threatens both a reduced food supply to food-importing countries and reduced capacity for farmers to grow more food. High fertilizer prices could also prompt other food-producing countries to limit their exports, setting off a chain reaction of ever-diminishing global food supplies.<sup>11</sup> This wartime damage falls on a global economy already weakened by climate change and COVID-19. Food prices had been rising in many countries even before the current war.<sup>12</sup>

The World Food Programme estimates 345 million people in 82 countries are acutely food insecure or at high risk in 2022 — more than double the pre-pandemic number.<sup>13</sup> UNICEF estimates that the lives of 8 million children are at risk from the deadliest form of undernutrition.<sup>14</sup>

One hopeful sign amid this dire situation is the July 22 Ukrainian-Russian agreement to allow the flow of exports through the Black Sea again.<sup>15</sup> The agreement, the result of negotiations brokered by the United Nations and Turkey, could offer relief to nations dependent on Ukrainian crops while allowing Ukrainian farmers to prepare for the coming harvest.<sup>16</sup>

Even if the agreement holds, though, much needs to be done. The United States and other developed nations should fully fund efforts to provide aid to people suffering food insecurity: WFP's reported funding needs are over \$22 billion, for example, while UNICEF has requested \$1.2 billion.<sup>17</sup> Private donors should consider giving to the work of Catholic Relief Services and the Mennonite Central Committee in this area.

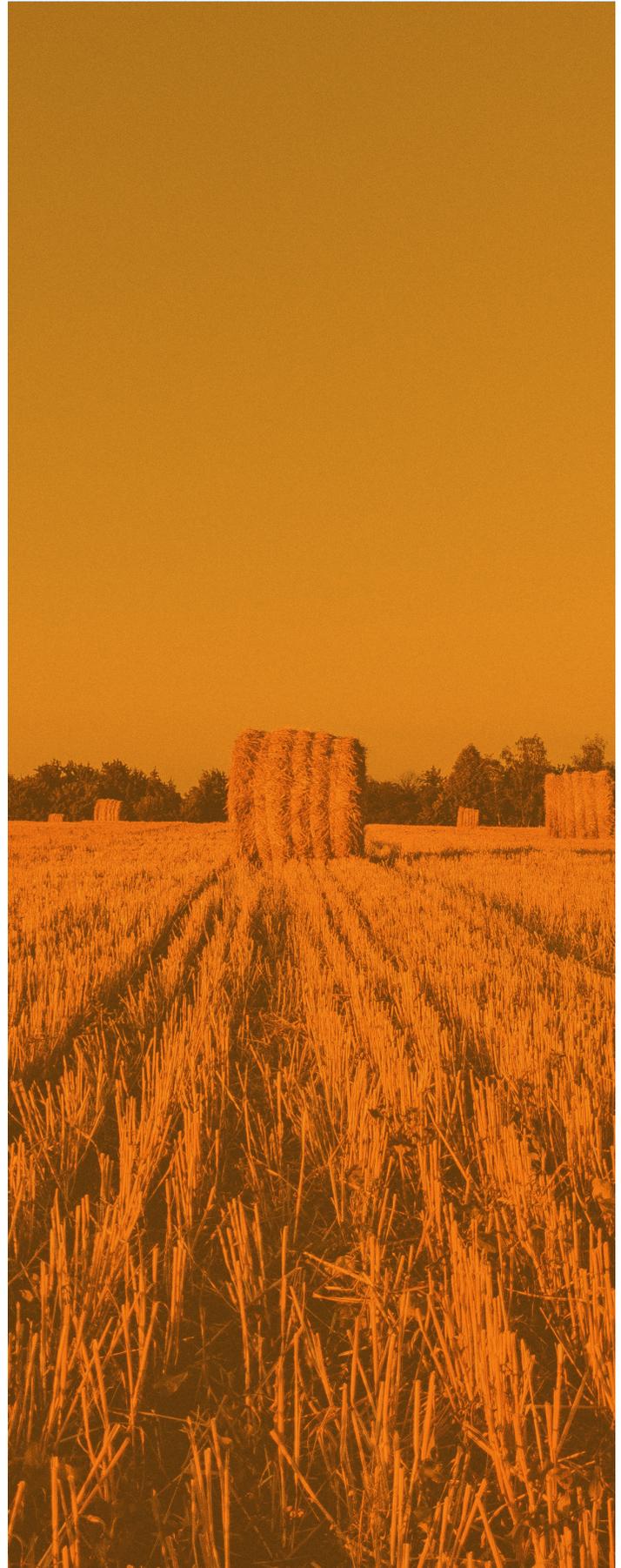
In the longer term, nations and international organizations need

to invest in rebuilding Ukrainian agriculture so the country can continue to supply grain to the world. Policymakers should also consider promoting farming of wheat and corn alternatives, such as indigenous crops in African nations. Greater agricultural variety and self-sufficiency could make countries less vulnerable to supply disruptions such as the Ukraine war.<sup>18</sup>

No innovations are likely ever to make countries wholly independent of each other, though. Both the pandemic and the food crisis have reminded us that we are all affected by decisions and events half a world or more away. What is most needed in the long term is wise statesmanship to make peace and build a more stable, prosperous world. As Secretary-General Guterres put it, “In our time — a time of conflicts, climate crisis and COVID-19 — there is simply no sustainable alternative to dialogue, international cooperation, and global solutions.”<sup>19</sup>

### Notes

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14. Conley, “UN Chief Warns...”
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# Texas Migrant Deaths Prove that Dysfunctional U.S. Immigration Policy has Lethal Consequences

By Samuel B. Parker

**O**n June 28th, law enforcement agents and emergency responders in Texas announced that they had recovered the bodies of dozens of people who had migrated across the southern border of the United States<sup>1</sup> in the trailer of a semi-truck. The truck driver had reportedly abandoned the vehicle<sup>2</sup> on the side of a secluded highway after it broke down, leaving the migrants locked in the back of the truck for hours with no air conditioning in the sweltering heat of the South Texas summer. Forty-six people perished in the trailer, slowly suffocating or dehydrating to death. An additional seven people died in the hospital, bringing the death toll to 53: the single deadliest human trafficking incident in U.S. history.

U.S. officials lost no time in placing the blame squarely on anybody but themselves. “These deaths are on Biden,” Texas Governor Greg Abbot declared<sup>3</sup> almost immediately, faulting the president for “refus[ing] to enforce the law” by “secur[ing] the border” and thus, supposedly, extending an implicit invitation to potential migrants and tacitly encouraging them to take extreme risks to cross the U.S. border. Meanwhile, President Biden criticized<sup>4</sup> the “smugglers [and] human traffickers who have no regard for the lives they endanger and exploit to make a profit.” Department of Homeland Security Secretary Alejandro Mayorkas chose to emphasize<sup>5</sup> the incredibly “dangerous” nature of the journey from Mexico to the United States, hinting that the migrants themselves, who “put their lives... in the hands of exploitative,... criminal organizations,” were responsible for their own deaths.

Nobody, however, seemed interested in examining and discussing the underlying causes of this tragedy. Why must the border be secured against those who might attempt to illegally cross it? Why is there a shockingly lucrative industry dedicated to meeting the demand for such a service? And why is this journey so dangerous?

This event and the responses to it once again highlight the disastrous impact of decades of draconian immigration policies: policies that have been perpetuated by a bipartisan coalition of Democrats and Republicans alike.

The U.S. immigration process is in dire need of reform.

**Why must the border be secured against those who might attempt to illegally cross it? Why is there a shockingly lucrative industry dedicated to meeting the demand for such a service? And why is this journey so dangerous?**

There is no mechanism in the U.S. immigration system<sup>6</sup> that allows for immigrants to independently apply for permanent residency. Rather, immigrants must be sponsored by an employer or a family member already within the United States. Many immigrants can obtain no such support.

As of 2018,<sup>7</sup> it took the U.S. government over a year and a half, on average, to process each application for permanent residency after it was submitted. A full third of the people who petitioned for permanent residency were subjected to additional delays as they waited on the availability of green cards; this was due to antiquated

quotas that restrict the number of green cards that can be granted to immigrants of any one nationality. Mexican citizens are most affected by such quotas; as of 2018, the standard wait time for preference immigrants from Mexico with family members living in the U.S. was more than eight years. Some are stranded for decades. For those who are desperate to escape perilous and unstable circumstances or who are eager to be reunited with their loved ones, this is far too long a wait.

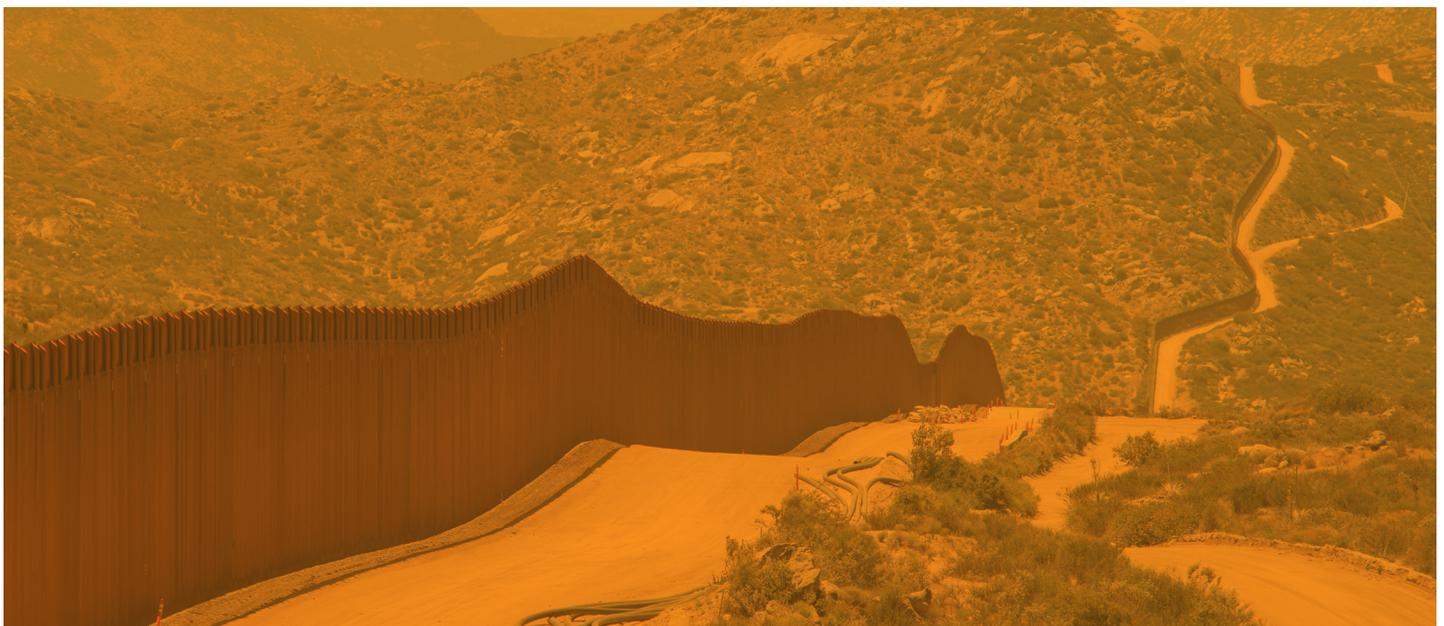
The result of these and other policies is that the U.S. immigration rate ranks in the lower third of the 50 countries with the largest gross domestic product per capita, and it is currently at historic lows. President Biden pledged to amend this, but a spate of deportations,<sup>8</sup> a record number of apprehensions<sup>9</sup> at the border, the expansion of the “Remain in Mexico” policy,<sup>10</sup> and generally ambivalent executive inaction serve to discredit and contradict his lofty promises. The U.S. Congress, meanwhile, has the power to revise or even entirely restructure the U.S. immigration system. Democratic and Republican legislative majorities have both persistently neglected to do so.

Through both deliberate political action and legislative impotence, the U.S. government has crafted an immigration system fraught with nearly insurmountable obstacles for members of underprivileged ethnic and socioeconomic demographics. These inequitable barriers, in turn, have spawned a black market of human trafficking that targets and victimizes vulnerable populations by preying on the urgency of their plight. For many, there is simply no safe way to migrate, legally or otherwise. The consequences have proven deadly.

The United States is one of the wealthiest and most prosperous nations on the face of the earth, with boundless potential to serve and be served by immigrants of all backgrounds. And yet, in spite of the demonstrable social and economic benefits of immigration,<sup>11</sup> it remains relatively inaccessible to millions of people all over the world. In Texas, we have learned once again that this is a matter of life and death.

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# Reflections on *Shinn v. Ramirez*

By Jack Champagne

When I first walked in to do my clinic hours for the Innocence Project, I was initiated with a heart-wrenching sexual assault case for a man whom I will call Ralph. Ralph had been arrested and charged about 14 years prior, having spent roughly 10 years in prison and 4 years on parole and on the sex offender registry. The threat of returning to prison at the word of a polygraph examiner, psychiatrist, or any of his parole officers loomed large over his life as he tried to make the most of it in the wake of his prison experience, which is why he sought out the Innocence Project in the first place. Ralph had never gotten a fair trial. He had been profiled by law enforcement and browbeaten into a guilty plea. Though he immediately attempted to recant his guilty plea, his attempt was rejected. This was a clear and obvious violation of the law; in the state in which Ralph was convicted, a criminal defendant can recant a guilty plea for any reason and it must be accepted as a matter of law.

I naturally wondered why such an obvious legal error had not been overturned on appeal. In fact, the appellate judge acknowledged the precedent that would have ensured Ralph a trial, but consciously chose not to apply it to this case. His reasoning in this case sticks in my mind so vividly that I can recall it from memory. The judge insisted that allowing a recantation of the guilty plea would “effectively neuter the guilty plea system” which, true or not, had no relevance to the judge’s obligation to adhere to precedent. I was buried in a mountain of withdrawal letters from post-conviction attorneys, all insisting there was nothing they could do about this case that got to me through a combination of bad police work, bad lawyering, and a bad judge. After almost 15 years, I was the first person to ever take Ralph’s case seriously. It was a visceral lesson in how much more our judicial system values the rights of states to make their own life-altering mistakes than its own ability to safeguard the constitutional right to fairness and justice in criminal procedure.

Ralph was one of the lucky ones; at the very least the court’s abuse of discretion didn’t cost him his life. At the time of writing, the number of exonerations of individuals sentenced to be put to death by the state stands at 187 since 1973. A survival analysis published by the National Academy of Sciences conservatively estimated that about 4% of death row inmates would be exonerated,<sup>1</sup> a number of particular significance being nearly 150 times greater than what was estimated by the late Antonin Scalia’s infamous concurrence in *Kansas v. Marsh*.<sup>2</sup> Asserting a claim of actual innocence after conviction is extremely difficult. The successes (and indeed, the failures) are typically stories of phenomenal perseverance against a number of procedural hurdles designed to protect the courts’ time, ensure state sovereignty, preserve the integrity of jury verdicts, and discourage undeveloped claims. Evidence of innocence is not even sufficient on its own to secure judicial relief. One must instead challenge the legality of an individual’s confinement through a writ

of habeas corpus,<sup>3</sup> and to even have a prayer of relief in the federal courts for this purpose one must exhaust their direct appeals and any state-level post-conviction remedies,<sup>4</sup> a requirement that is often only a formality in cases such as Ralph’s where the state shows a consistent disinterest in correcting its own mistakes.

The lessons I learned from Ralph’s case were keenly on my mind when the Supreme Court’s ruling in the recently-decided case *Shinn v. Martinez Ramirez* came down. *Martinez Ramirez* is an abnegation of the Supreme Court’s constitutional responsibilities, a blanket refusal to review evidence that no one disagrees would have saved the defendants’ lives, and was never properly considered due to a poorly-prepared defense at trial and a failure to exhaustively litigate post-conviction. A writ of habeas corpus was the defendants’ last hope, and a straightforward reading of the court’s own precedents would suggest that the failure of a lawyer to render adequate postconviction aid should not be a bar to such relief. The court’s majority determined that states’ ability to kill criminal defendants is a higher priority than the federal judiciary’s ability to ensure those defendants are fairly and justly convicted. It was a story I was all too familiar with.

The majority’s opinion, which spent more time luridly recounting the details of the crime than the legal justification for the ruling, is galling from a personal perspective, abominable from a humane perspective, incomprehensible from a legal perspective, and unjustifiable from a moral perspective. It is a hideous distortion of justice that attempts to weaponize the language of moral outrage to cast a righteous veil over what is ultimately a Pilatesque washing of the hands. I cannot countenance the naked hypocrisy in asserting that federalism is a legitimate concern in a legal procedure that is already inherently so heavily weighted toward giving the outcomes of state-level proceedings authoritative weight, nor can I take seriously the Supreme Court’s callous disregard for the grave responsibility that taking a human life for any reason imposes upon any system of criminal justice that arrogates such a responsibility to itself.

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2. *Kansas v. Marsh*. 2006, 548 U.S. 163, 185. United States Supreme Court. Indeed, one of the arguments made by abolitionists is that the process of finally completing all the appeals and reexaminations of capital sentences is so lengthy, and thus so expensive for the State, that the game is not worth the candle. The proof of the pudding, of course, is that as far as anyone can determine (and many are looking), none of the cases included in the .027% error rate for American verdicts involved a capital defendant erroneously executed.
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# Re-Imagining Roe

By Christy Yao Pelliccioni

The overturning of *Roe v. Wade* has made me reflect a lot on my own pregnancy. I've written about this before for Rehumanize,<sup>1</sup> but this is the first time I am writing since the Supreme Court's decision. I always thought I'd be happy when *Roe v. Wade* was finally overturned, but I have learned becoming a mom changes how you respond to certain things. I am grateful for the lives that will be saved in states that now have more abortion restrictions, but remain concerned for mothers in crisis. I see the overturning of *Roe* as a call to action, and I want part of my action to be sharing resources that have helped me in the hopes that they will help someone else.

My state of Maryland has an inconsistent political dichotomy, with some of the most permissive abortion laws in the nation (that are only going to be strengthened post-*Roe*) but also strong supports for low- and moderate-income pregnant people and young families. Because the Medicare income threshold is higher for pregnant people, I was able to have free healthcare throughout most of my pregnancy. When I was four months pregnant, I switched to a new job that paid less, but this made me eligible for Medicare. Because of Medicare, I roughly estimate that I've saved almost \$10,000, and perhaps more. That's money that can be used for never-ending diapers, bottles, or pacifiers, or perhaps used to start a college fund.

Because Medicare has no copays or deductibles, I didn't hesitate to go to the hospital when I started spotting in my second trimester, and never missed a doctor's appointment or ultrasound. Usually this would have ended two months after my baby was born, but due to the ongoing COVID-19 crisis, I have been able to keep this insurance with no copays or deductibles. This was very helpful when I had mastitis when Nathaniel was 2½ months old. I was able to attend a telehealth appointment with my baby by my side, get antibiotics for less than \$5, and receive tips on how to prevent another infection without worrying about a large bill arriving later.

Because I was on Medicare when I was pregnant with him, Nathaniel is automatically eligible for one year of Medicare. It gives me so much peace of mind to know that no matter what, I can take him to the pediatrician and not worry about the cost. Hopefully I won't have to ever take him to the hospital, but if I did, I wouldn't have to wonder how to fit it into our family's budget. We can take him to all his doctor's appointments and get all his vaccinations without worrying about the cost.

One day I was making dinner when I got a call from a very helpful, enthusiastic employee of the Baltimore Health Department. She let me know that because of Medicare I qualified for Maryland's WIC (Women, Infants, and Children) program, as well as other programs. One of the programs I was eligible for was free check-ins from a Baltimore County nurse. I had a video chat every month with an encouraging nurse who had three children of her own. I got advice on breastfeeding and how to recognize various medical issues such as pre-eclampsia. The nurse also made sure I had everything I needed

for the baby's safety, such as a car seat and a crib. I had all these things provided by family members or friends, but if not I would have been directed to a program where I could get these things.

The nurse checked up on me twice after the baby was born, and the first time was especially invaluable. I was having "baby blues," when the mother's hormones cause her to feel very emotional and fragile. At the same time this was happening, my family was exposed to COVID-19, so they could not come over to help. My son was underweight and had to be fed every two hours. I didn't have the headspace to ask my also-overwhelmed husband for help, and was feeling depressed and hopeless. The nurse suggested not only that I talk to my doctor about the possibility of postpartum depression, but also go to the WIC clinic and talk to a lactation counselor.

The next day I made a doctor's appointment for myself and was able to go into the WIC clinic later that very same day. The clinic was able to weigh Nathaniel, and it helped my baby blues immensely to know that he had gained a few ounces! The lactation counselor showed me the best way to hold him and make sure he had a good latch while breastfeeding, as well as helped us make a new schedule that would allow me to get more than 15 minutes of sleep at a time. Without the help of the lactation counselor, I would have needed to keep supplementing with baby formula. This normally wouldn't have been a bad option, but little did we know there would be a nationwide formula recall and shortage in the following months.

I am still benefiting from Maryland's WIC program with vouchers for nutritional food such as milk, whole grains, and produce. This started when I was pregnant and will continue with my son until he is 5. WIC also provides formula, or extra food to mothers who exclusively breastfeed like me (believe me, you will be extra hungry while breastfeeding!). Outside of the normal benefits, WIC also gives out checks that can be used at farmers' markets through the Farmers Market Nutrition Program (FMNP). Some markets also have dollar-for-dollar matching programs, where every dollar you spend from the FMNP program gets you a voucher that you can use for other food items at the market. This means we can spend our FMNP checks on fresh produce, and then the matching program vouchers on items like local coffee, bread, or even ice cream!

I am incredibly grateful for the various programs that have helped my family before and after the birth of my son. I can only hope that *Roe's* overturning serves as a catalyst for all states to support children — born and unborn — so that every family can thrive.

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# Killing Grga: A Late-Term Abortion Case that Shook Croatia

By Kristina Artuković

This past April, Mirela, a 39-year-old yoga instructor from Croatia, was told her unborn child Grga had a brain tumor at six months gestation. Mirela decided to abort Grga, whom she named so during the pregnancy. She requested a late-term abortion at four major Croatian hospitals; after failing to get the response she hoped for, she hired a lawyer and went public with her story. Then all hell broke loose.<sup>1</sup>

Croatia allows abortion for any reason up to 10 weeks after conception, and up-to-term only in cases involving rape, fetal disability or a threat to the life of the mother.<sup>2</sup> Later abortions have to be approved by hospital committees, a first-tier and a second-tier committee. If late-term abortion is denied by the first-tier committee, the person can appeal to the second-tier committee, whose decision is final. Many countries in the region, like Slovenia and Serbia, share very similar legislation, stemming from the abortion law of the old Socialist Federal Republic of Yugoslavia. This is important, since Grga's story spans across the region.

Contrary to the main narrative, Mirela was not denied the termination of her pregnancy. When it comes to pregnancies past viability, the legal expression "termination of pregnancy" allows for two options in practice: induced pre-term labor or feticide. As it turned out, no Croatian doctor was willing to perform feticide after 22 weeks gestation. In fact, there is a *nationwide medical protocol* for preserving the baby's life when the baby is capable of surviving outside of the womb. Mirela was offered a more ethical form of pregnancy termination, after which Grga would receive relevant care. But Mirela wanted Grga dead, and according to the law, she had that right, too.

The media made sure to muddy the waters by inaccurately connecting Mirela's case with medical conscientious objection. The idea that people should not be hired as OB-GYNs if they plan to invoke conscientious objection to abortion became an overnight sensation.

Although bound to an almost identical abortion law, OB-GYNs from neighboring Slovenia do not have different medical protocols in regards to termination before and after fetal viability. In an interview,<sup>3</sup> Mirela praised Slovenian doctors for "not forcing parents to care for a mentally impaired child for the rest of their lives." Grga was seven gestational months old when Mirela requested abortion in Slovenia.

Six snippets of the events that followed:

*One.* Several Croatian NGOs crowdfunded<sup>4</sup> the 3,000 euros (around 3,050 USD) required for killing Grga in Slovenia. The sum collected within the first 48 hours was ten times the target amount.<sup>5</sup>

*Two.* Slovenian abortionist OB-GYNs trolled their Croatian colleagues for "not knowing how to perform feticide."<sup>6</sup> Serbian colleagues boasted how "effective" their hospital ethical committees are when it comes to abortion, especially in cases of severe fetal impairments.<sup>7</sup>

*Three.* The expression "to live like a vegetable" became a buzz phrase used for Grga: by Mirela herself, by pro-choice doctors, legal experts, abortion activists and resident theorists. Mainstream media mused on the point of offering medical care to a "life deprived of any human dignity."<sup>8</sup>

*Four.* Mirela published a letter to Grga, in which she wrote about how Grga whispered to her in a dream that "We're doing the right thing."<sup>9</sup>

*Five.* Pro-abortion protests arose in ten Croatian cities,<sup>10</sup> supporting Mirela's right to choose whom to give live birth to and demanding freedom from religion and freedom from conscience. Marches for life were also held in eleven cities,<sup>11</sup> with parents of medically complex children speaking publicly about their kids' inherent value and worth.

*Six.* Succumbing to the legality of Mirela's choice, the Croatian Ministry of Health announced that the state health fund would

cover all costs of Mirela's abortion in Slovenia. The NGOs that raised the Grga-killing fund said the money would be "directed to women who do not have access to legally guaranteed reproductive care."<sup>12</sup>

This affair does not imply straightforward dehumanization. This is humanization warped; Grga has been simultaneously portrayed as entirely human and entirely unworthy of life. The line between a child (whispering his consent to death) and a plant (existing pointlessly) has been thoroughly blurred as the new normal of "reproductive rights."

This is not an ordinary story about an individual fighting against an ableist system, either. It's the other way around. Croatia is the only country in the region that has a substantial number of pro-life OB-GYNs. It was this medical community that fought the idea of denying care to infants with poor prognoses. In the wake of public pressure, the lead medical associations of Croatia organized a forum where they upheld the policies of preserving life and conscience. The Vice President for Ethics of the National Physicians' Association said: "We have to be aware of the politics that strives to eliminate people whose lives the state deems as costly, and the very fact we recognize this means we are aware that the level of civilization is measured in the way we treat those who are weak, disabled and vulnerable."<sup>13</sup>

In the meantime, the Croatian Minister of Health has been preparing a registry of all physicians who invoke conscientious objection to abortion. Pro-choice groups have been calling for a referendum to put the right to abortion back into the Constitution; all in perfect accord with "abortion as a human right" proscribed by the EU's infamous "Matić Report" — named after the Croatian MEP who wrote it.<sup>14</sup>

Grga is now almost certainly dead, killed by an injection of potassium chloride directly into the heart. The medical protocol does not allow for anything other than tossing his little body into a biological waste bin. The true nature of his condition will never be known.

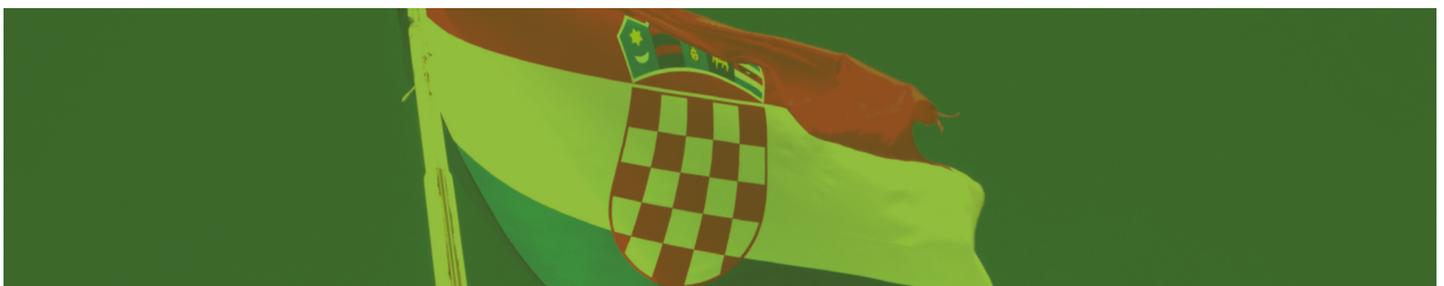
The hospital that initially turned Mirela down for abortion will probably be fined. A government health inspection found out that the hospital's first-tier committee failed to inform Mirela she had the right to appeal to the second-tier committee.

The eugenic spectacle of un-mothering has won it all: the hearts, the minds and the system. Croatian pro-life physicians will be held on a shorter leash from now on. The public has first been trained to process disease and disability as a negation of human value, and then to process late-term abortion exclusively through the lens of parental suffering and the woman's right to a dead child.

Rest in peace, little Grga. As for the pro-lifers of the region, the battle rages on.

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