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Abortion's Impact on Prematurity

Closing the Knowledge Gap

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Family North Carolina magazine



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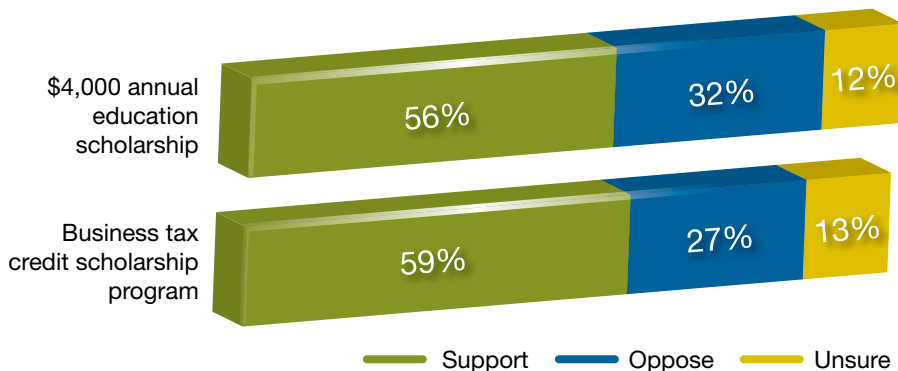
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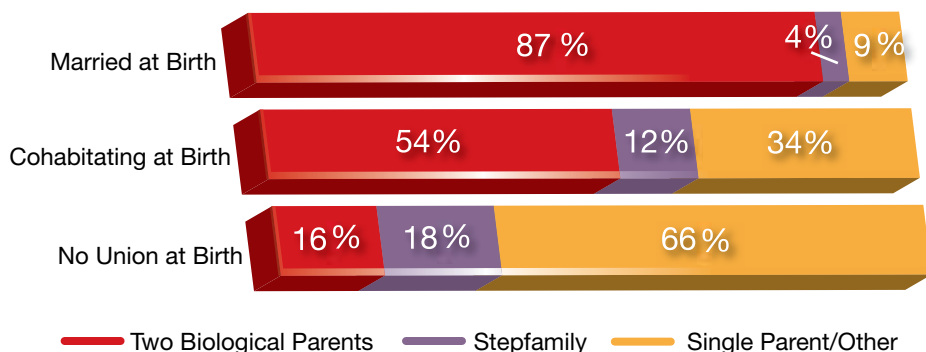
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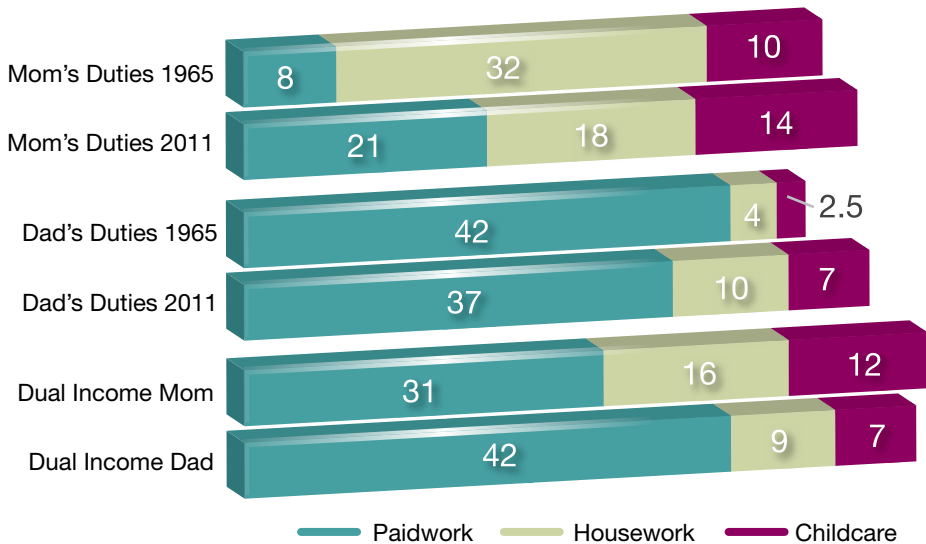
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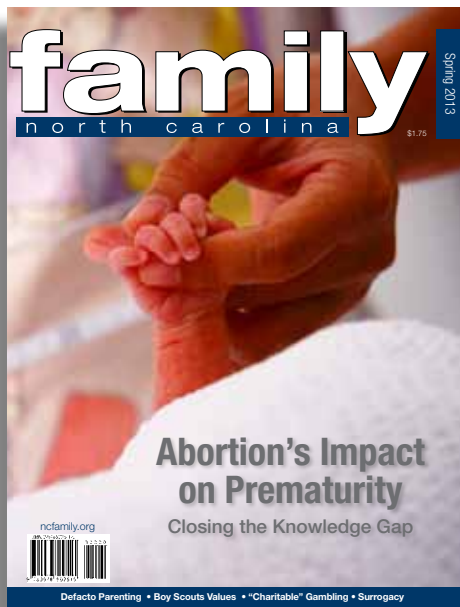
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Visit us on the internet at ncfamily.org, where you can read selected stories from this issue, including endnotes. Publication of website addresses of other organizations featured in our stories does not constitute endorsement by the North Carolina Family Policy Council of those groups or the contents of those sites.

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Unintended Consequences



As families and students across North Carolina begin to conclude another school year and prepare for summer vacations, we at the North Carolina Family Policy Council are also embracing a period of transition. After many long years of faithful and dedicated leadership, we are bidding goodbye to our president Bill Brooks. The sadness and anxiousness that come during such a time is tempered by the joy of welcoming back our dear friend John Rustin, who previously served as our vice president. This process has reminded us

all in very tangible ways that the important work we do is truly a labor of love, and held safely and lovingly in the hands of our heavenly Father.

We are especially pleased to open this issue of *Family North Carolina* with commentaries from our outgoing president Bill Brooks and our incoming president John Rustin. There is not a better duo dedicated to the promotion of good pro-family policy in North Carolina. We are truly blessed by their leadership.

You may notice a theme throughout many of this issue's articles—unintended consequences. Dr. Martin McCaffrey's powerful feature article sheds light on the importance of complete and accurate information in the battle against premature birth. His expertise in the field of perinatal care, and his heart for the sanctity of all human life show in the way he uncovers the often-ignored link between a woman's decision to have an abortion and the increased risk of delivering subsequent babies prematurely, which presents a host of issues for mother and child alike. He outlines the science behind this link, and offers suggestions for how to better inform women of this link as part of offering them the best health and neonatal care.

Attorney Mary Summa outlines how a recent movement in the courts to determine custody and parental rights disputes based on the court-determined "best interest of the child" has opened a Pandora's box of questionable legal theory that erodes marriage, the family unit, and freedom. This erosion has been precipitated most recently through the implementation of a de facto parenting doctrine that allows for homosexual or three or more "parent" custody of children. Mary offers policy pre-

scriptions on how to address some of the multitude of harms.

The Boy Scouts of America have a long and storied history of helping to mold boys into men of character. The values and practices that have made this mission a success are under attack. Alysse ElHage provides a straight-forward analysis of why and how scouting's mission and values would be severely compromised should they buckle to pressure from homosexual activists to change the organization's long-standing membership policy that prohibits open homosexuality.

Readers of *Family North Carolina* have become familiar with the excellent research and writing of attorney Christopher Derrick to help keep all of us apprised of the implications of various attempted changes to North Carolina's gambling laws over the last several years. In this issue of FNC, Chris highlights the multitude of unintended (or perhaps intended) consequences that would result should lawmakers choose to legalize casino gambling under the guise of helping nonprofits to raise funds, most notably the potential for Las Vegas style casinos in cities across the State.

Couples facing infertility carry a heavy burden, however, when these and others turn to surrogacy as a means of filling that empty baby-shaped hole in their lives, the ethical and legal implications are grave. As outlined by attorney Mary Summa, this often well-intentioned "solution" actually advances the commodification and exploitation of women, children, and the poor, and should therefore be prohibited.

Do not miss Bill Brooks' powerful interview with Ryan Bomberger about how his own stirring life experiences have led him to dedicate his life to use media to illuminate the intrinsic value of every human life and highlight the injustice of abortion.

Thank you for your continued partnership with us to advance the promotion of sound pro-family public policy in North Carolina. We are privileged to count each of you among our allies and friends. Remember to keep your copy of *Family North Carolina* nearby as you celebrate Mother's Day, graduations, and summer fun. You never know when a relative or friend will be in need of some good reading! ❖

Brittany Farrell is assistant director of policy for the North Carolina Family Policy Council and editor of Family North Carolina.

written by:
**Brittany
Farrell**

Coming and Going

written by:
**John
 Rustin
 and
 Bill
 Brooks**

One of the items at the top of my to-do list this past weekend was to finish a book I had been reading. As can happen when reading a skilled author, I was sucked in to the adventure and couldn't wait to find out what happened to the characters I had come to know. The suspense was riveting! That's how it is with our lives, especially during times of change. So often, we want to skip the drama and fast-forward to the end to see how it all turns out. If we had this ability, however, we would miss so much of what life, and God, has in store.

The North Carolina Family Policy Council is presently experiencing such a change. Bill Brooks, my dear friend and mentor, is entering a new chapter of his life after serving the families of North Carolina so faithfully as president of the Council for 20 years. Bill and his wife Ruth have been a great blessing to the Council and to our state, and we owe them an enormous debt of gratitude!

Meanwhile, I am humbled and excited to have the opportunity to return to the Council to serve as its next president. Having worked with the Council for 12 years, I am keenly aware of the critical role this organization plays in researching, promoting and shaping pro-family policies and influencing the culture of North Carolina for the better.

God, the author of our lives, has written an unique and exciting adventure for each one of us. As the Council moves through this time of change, we would value your prayers for Bill and Ruth, for the Council's Board of Directors and staff, and for our supporters. God always has far more planned than we can ever think to imagine, and I can't wait to see what He has in store for the NCFPC!

Blessings to you all! ❖

John Rustin is the incoming president of the North Carolina Family Policy Council.

After my second year with the Council I realized that in order for the organization to grow, I would need some help in the legislature. I had gotten to know a young man named John Rustin, who was not too many years out of college at the time. John was already an experienced lobbyist, and I knew he was a strong Christian.

So I began talking to John about coming to work with us. As I recall, we had about nine serious conversations, some might call them interviews, but John was not seeking a job; I was courting him. Finally, he agreed to join our staff. Over the next 12 years at the Council, John proved that he was not only one of the top 50 lobbyists in the state, but that he was capable of running our organization. In addition to his duties as director of government relations, John also served as vice-president, editor of *Family North Carolina*, editor and principal writer for our weekly fax, which later became our weekly email, as well as heading up our voter guide project three election cycles. When he left in 2009, it was a loss but we managed, and John did a great job bringing another nonprofit back to life, working with business and industry lobbyists to build a solid program and sound financial footing for the North Carolina Free Enterprise Foundation. Now, their loss is our gain, as John returns to the NCFPC.

After I decided to step down as head of the Council, I had lunch with John and encouraged him to apply for the job. He did, and I am pleased that our Board of Directors chose him.

John brings a wealth of experience, a successful track record, and is a committed Christian man. In addition, and this is important, he has an understanding of and passion for the issues on which we work every day. John knows that strong families are the backbone of our state and nation, and that if we don't get public policy right in this area, we will not be successful with the rest of it.

In addition to our Board of Directors, and all of our staff, John has the support of his lovely wife Laynette, and their two children as he takes over here at the Council. He inherits a solid program, but one that needs to stretch and grow a bit. Time does not stand still, and the challenges facing our families are greater than they have ever been. My prayer is that John will have your support and your prayers as he rejoins our staff as the Council's fourth president and executive director. ❖

Bill Brooks is the outgoing president of the North Carolina Family Policy Council.



quotes, quips, and other items of interest

“I am not a consensus politician. I am a conviction politician.”

—Former Prime Minister Margaret Thatcher upon her assumption of leadership over the Conservative Party in the English Parliament in 1975.

“We aren’t indifferent. We aren’t giving up.”

—The conclusion of the Marriage Generation Statement by “millenials who understand that marriage is a lasting promise between one man and one woman.” The group seeks to “revive a marriage culture, and to shape the way our generation thinks and talks about marriage.”

“Which parent do I not need, my mom, or my dad?”

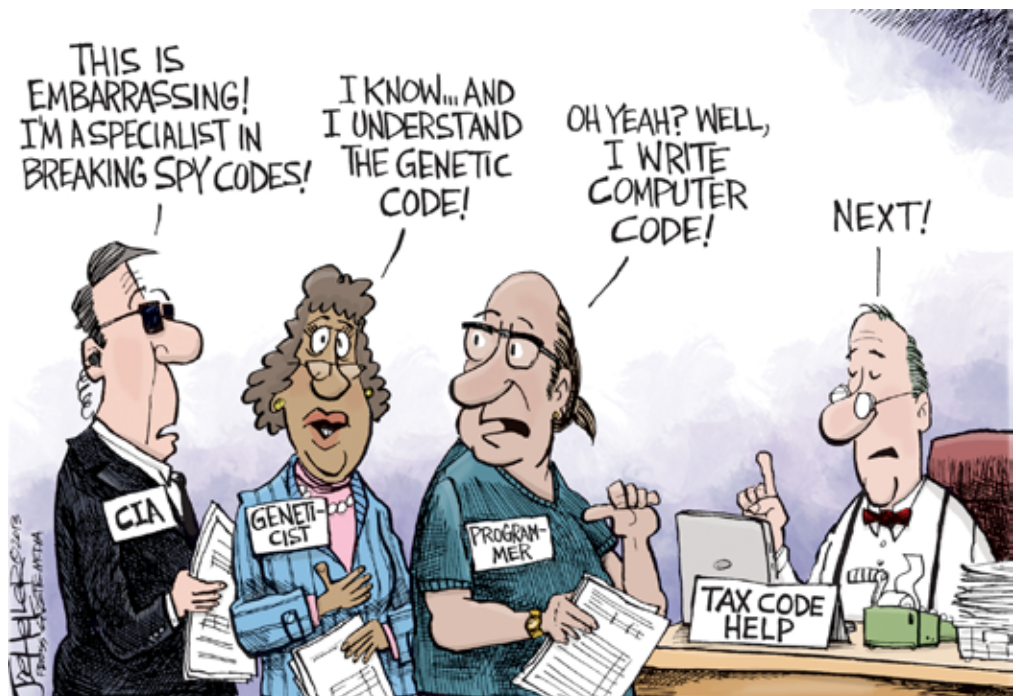
—Grace Evans, 11 years old, posed this question to a panel of Minnesota lawmakers on March 11, 2013. Two committees in the Minnesota legislature have approved a bill to legalize same-sex “marriage.” The bill has not yet been considered by the full Legislature.

“[I]f it’s good enough for [Congress], it’s good enough for us here in Union County.”

—Union County Commissioner Todd Johnson in a comment to WSOC-TV on March 4, 2013, in defense of Union County’s long-standing policy of opening public meetings with prayer. The Freedom From Religion Foundation sent a letter to Union County officials in late February, accusing the commissioners of violating the First Amendment with their prayers.

“I broke the rule and I have to live by it.”

—Michigan District Judge Raymond Voet on April 12, 2013, upon holding himself in contempt of court for breaking his own courtroom policy against electronic devices causing a disruption in court sessions. Judge Voet’s own cell phone began to emit noises during a prosecutor’s closing arguments in a jury trial.



By Joe Heller, www.politicalcartoons.com

Liberty
means
responsibility.
That is why
most
Men
dread it.

— George Bernard Shaw



It Doesn't Take A Village

The Destructive Effects of the De Facto Parenting Doctrine

written by:
**Mary
 Summa,
 J.D.**

IMAGINE THIS SCENARIO: YOU AND YOUR HUSBAND ARE MARRIED AND HAVE A CHILD NAMED JANE. FIVE YEARS INTO THE MARRIAGE, YOUR HUSBAND LEAVES AND MOVES IN WITH NANCY, HIS NEW GIRLFRIEND. HE FILES FOR DIVORCE AND GAINS JOINT CUSTODY OF JANE. YOUR HUSBAND AND NANCY LIVE TOGETHER FOR THREE YEARS, BUT NEVER MARRY. NANCY ASSUMES A NUMBER OF PARENTAL RESPONSIBILITIES, INCLUDING PROVIDING CHILDCARE FOR JANE. YOUR NOW EX-HUSBAND AND NANCY SPLIT UP, BUT NANCY MISSES JANE. SHE GOES TO COURT AND GETS JOINT CUSTODY OVER THE OBJECTIONS OF BOTH YOU AND YOUR EX-HUSBAND.

This scenario highlights the illogical and inevitable consequences that are already arising from the introduction of a new legal attempt to water-down parental rights. Called the De Facto Parenting Doctrine, a growing number of states, through judicial or legislative action, are allowing third parties to obtain joint custody or visitation rights of children over the objection of fit natural parents.

Americans may brush this off as another issue that does not affect them—but it does. This move by government affects all parents. This power-grab by the State treats children as property to be parceled off to claimants. It defines parenthood not by biol-

ogy, marriage, or adoption, but by “relationships,” and pits natural parents’ rights against third parties. It gives the government the right to decide who is a parent and who is entitled to custody of children.

Simply stated, government control over custody of children will destroy the family, unravel the institution of marriage, hurt children, and lead to the destruction of freedom for all Americans.

The De Facto Parenting Doctrine

Initiated by a 1995 Wisconsin Supreme Court case, the de facto parenting doctrine is a legal creation that has been used to grant some or all parental rights to an adult biologically and legally unrelated to the child. According to this ruling, the right to custody or visitation is based on “relationships,” rather than marriage, biology, or adoption.

Most courts and legislatures in states that have adopted this doctrine have required that the relationship between the “de facto parent” must be with the consent and encouragement of one legal parent. Furthermore, they have required that the “de facto parent” must assume a “share of caretaking functions at least as great as the legal parent.” Since the late 1990s, according to one source, at least 10 states, including North Carolina, have adopted the de facto parenting doctrine by legislative or judicial action. A few states, including Michigan, New York, Vermont, and Utah, have rejected it. Some state laws do not limit the number of “parents” who can seek custody. Only one legal parent needs to consent to the de facto parent’s involvement with the child. William Duncan, a strong opponent of de facto parenting, has warned, “A father might be surprised to find himself splitting time with his child not only with an ex-wife but with one or more of her subsequent boyfriends.”

Among states that have adopted the doctrine, the rights bestowed on a “de facto parent” vary. Most state courts that have adopted the doctrine have not bestowed full parental rights to the non-parent. Some states allow the “de facto parent” to petition for visitation but not custody. Other states, including North Carolina, have awarded joint custody to the “de facto parent.” Interestingly, at least some de facto parenting states impose no obligation on the “de facto parent” to share the financial responsibility of parenthood.

In North Carolina, the courts instituted the doctrine in 2008. A lesbian couple, Irene Dwinnell and Joelle Mason, decided to have a child. Irene Dwinnell was inseminated with the sperm of an anonymous donor whose physical traits resembled her partner, Joelle Mason. When the child was born, with the encouragement of Dwinnell, Mason actively participated in rearing the child. After a few years, the couple broke up. Initially harmonious, the relationship between the two became bitter

and Dwinnell restricted Mason's access to the child. Mason sued for custody, which the court eventually granted based on Mason's relationship with child, saying "we still have the circumstances of Dwinnell's intentionally creating a family unit composed of herself, her child and, to use the Supreme Court's words, a 'de facto parent.'" In a 2010 case, the N.C. Supreme Court, agreeing with the Court of Appeals' rationale in the Mason case, granted joint custody to a non-parent ex-partner of a same-sex relationship.

The doctrine applies to both heterosexual and homosexual couples. It has been pushed, however, by the homosexual community to secure child custody rights for homosexual partners not biologically related to the child. In recent years, litigation has focused on lesbian couples where one is inseminated by a donor, the couple splits up, and the partner who is not biologically related to the child sues for custody.

Diminishing Marriage

The institution of marriage can be destroyed in two ways—by including other dissimilar relationships within its definition and thereby redefining it, or by bestowing marriage rights on other institutions making marriage legally insignificant.

The enduring characteristics of marriage include fidelity, monogamy, and procreation. Same-sex, bigamous, or polyamoric relationships fail to contain some or all of these characteristics. As such, if they are included within the definition of "marriage," the importance of these characteristics within the marital institution will be diminished.

Creating other marriage-like institutions, including domestic partnerships and civil unions, which bestow the same rights as marriage, undercuts the legal benefits of the marital relationship. The de facto parenting doctrine advances this line of attack. Just as domestic partnerships and civil unions create marriage-like rights to property and benefits, the de facto parenting doctrine creates "divorce" rights regarding custody. Disaggregating property and custody rights from the marital relationship leaves many in society wondering, "Why bother with marriage?"

Furthermore, by hinging the parent-child legal relationship on "relationship," rather than biology, marriage, or adoption, the de facto parenting doctrine undercuts the legal value of marriage. Law professor and same-sex "marriage" advocate Nancy Polikoff has been a strong, vocal advocate for the de facto parenting doctrine, where she has stated that such status is "necessary to adapt to the complexities of modern families."

Not "In the Best Interest" of Children

Parental rights are based on the belief that biological parents will act in the best interest of their children, taking on the obligation to feed, clothe, shelter, and nurture their children, and put their



children's interests before their own. Furthermore, the research is clear that the healthiest and safest environment for children is within the custody of two natural parents.

Additionally, research has shown that children desire to be raised by their biological parents and have a psychological need to know them. Adoptive children want to know their parents, and children conceived with artificial reproduction techniques yearn to know their biological parent.

De Facto parenting laws ignore these facts, take decision-making away from parents, ignore the needs of children, and dictate the rights of a "de facto parent" based simply on a type of "time-in/time-out" relationship with the child, or hand custody decisions to the court (the State) based on the undefined "best interest of the child."

A case in Massachusetts in 2005 illustrates how granting de facto parenting rights based simply on a "significant relationship" standard threatens the wellbeing of children. Haleigh Poutre, age 11, was rushed to the hospital suffering from a severe brain injury. Quoting doctors, a news article stated that Haleigh's brain stem had been "partly sheared." While in a coma from the injury, her adoptive mother died. The mother's live-in boyfriend had lived with the mother, Haleigh, and another child for five years. The boyfriend assumed many of the responsibilities of parenting Haleigh, including providing child care, paying for and driving her to after-school activities, and spending time with her at home. Unfortunately, this "significant relationship" also included beating Haleigh, sometimes with a tube, throwing her down the stairs, and burning her with cigarettes. An investigation following Haleigh's admittance to the hospital led to the boyfriend's prosecution, conviction, and imprisonment for child abuse. Had Haleigh not been admitted to the hospital when her mother had died, under Massachusetts law, the boyfriend would have assumed custody of Haleigh under the de facto parenting doctrine.

Other state legislatures have attempted to give judges some discretion in granting de facto parenting status if it is in "the best interest of the child." That phrase, however, is deceiving because many times when it is applied, the result is the furthest thing from it. Critics have argued that for some judges, the undefined "best interest of the child"

 **The de facto parenting doctrine undercuts the legal value of marriage.** 



standard used in custody decisions is an invitation to promote their own agendas or “hide fuzzy thinking, uninformed opinions, laziness, frustration and even out-and-out prejudice.” Furthermore, regardless of their agenda, judges are simply not equipped with the sensibilities or wisdom of natural parents to determine what is best for a child.

De Facto parenting diminishes the connection between parenthood and obligations. Courts and legislatures, according to one detractor, freely award custody, but are hesitant to impose on that “de facto parent” any child support obligations. Just as critics are concerned that marriage-like institutions redefine marriage, parent-like arrangements can weaken the obligations of parents, to the detriment of children.

Threatening Freedom

Perhaps, unnoticed by the general public, the growing popularity of the de facto parenting doctrine has caused alarm among individuals who cherish a free society.

Historically, a “parent” has been defined as a mother and a father related to the child by biology, marriage, or adoption. Under common law, a woman who gave birth to a child was considered his mother. If the couple was married at the time of the child’s birth, the husband was presumed to be the child’s father. In essence, gestation linked children to their mothers, and marriage joined children to their fathers. Government played no hand in deciding who was a parent, except for legal adoption, which did not exist until the mid-1800s.

Together a man and a woman joined in marriage form the basic unit of society, the family. In a free nation, the wall between the family and the government protects that family’s freedom. Marriage forms the bricks of that wall. Parental rights, considered fundamental by the founding fathers, provide the mortar.

Rooted in common law, parental rights include the right to educate and care for a child, the right to establish a child’s residence, and the right to direct a child’s moral and spiritual upbringing, education, and medical treatment. Traditionally, the courts have protected these rights. Government became involved only when parents breached their nurturing duties to their child or voluntarily terminated their parental rights.

The de facto parenting doctrine gives to the state the authority to decide who is a parent, and robs from fit parents the most important right of parenthood—the right to custody—leaving natural fit parents to beg the government (the court) for time with their own children. Furthermore, once the right of custody is taken away from parents, the wall protecting freedom will fall, and the state, not the parents who raised them, will decide what is in the “best interest” of children.

Family as Protector

At his first gubernatorial inaugural address in 1967, Ronald Reagan cautioned the citizens of California:

Freedom is a fragile thing and is never more than one generation away from extinction. It is not ours by inheritance; it must be fought for and defended constantly by each generation, for it comes only once to a people. Those who have known freedom, and then lost it, have never known it again.

A free nation cannot survive without a strong family unit. The family instills the values necessary for a moral citizenry and a compassionate nation. Marriage and parental rights form the wall protecting the family from the meddling hand of government. Parental rights include many things, but these rights mean absolutely nothing if a parent does not have the fundamental right to custody of his or her own child. Implementing the de facto parenting doctrine robs from parents the right to care for their own children and destroys the wall protecting freedom.

Legislators can stop this assault on parental rights by writing into the law a provision that only allows a non-parent to obtain joint custody of a child over the objection of the legal parent upon a finding by the court that the legal parent is unfit or has neglected the child in violation of state law. Shared custody with another adult should not constitute behavior that can deny a parent the fundamental right to custody. Furthermore, joint custody should be awarded to a maximum of two adults.

Those who cherish freedom need to stand up and demand from legislators, in North Carolina and elsewhere, that they legislatively repeal the court-created de facto parenting doctrine, and return to fit parents the fundamental right to custody of their own children. ❖

Mary Summa, J.D., is an attorney in Charlotte, North Carolina, who served as Chief Legislative Assistant to U.S. Senator Jesse Helms during the 1980s. For a footnoted version of this article, please visit ncfamily.org.



With Charity Toward None

Why Legalizing Charitable Gambling Casino Nights Is Uncharitable

written by:
**Christopher
W. Derrick,
J.D., MPA**

I'M HERE FOR FRIENDS, GAMBLING AND DRINKING . . . BUT IT'S ALSO FOR A GOOD CAUSE," SAYS JOHNNY ZEROS, WHO SHOWS UP JUST ABOUT EVERY NIGHT AT MAVERICK'S POKER PALACE AND SALOON IN PORT HURON, MICHIGAN. FROM MR. ZEROS' DESCRIPTION, MAVERICK'S SOUNDS LIKE A "KINDLER, GENTLER," VERSION OF HARRAH'S CHEROKEE CASINO IN WESTERN NORTH CAROLINA, OR PERHAPS A FRIENDLIER SATELLITE OF ONE OF THE THREE LARGE COMMERCIAL CASINOS FOUND AN HOUR AWAY FROM PORT HURON IN DETROIT. BUT IT IS NOT—MAVERICK'S IS ONE OF MICHIGAN'S "CHARITY" POKER ROOMS LICENSED TO CONDUCT "MILLIONAIRE PARTIES," THE OFFICIAL NAME FOR POKER EVENTS PUT ON AS FUNDRAISERS FOR CHARITY IN THAT STATE.

In Michigan, nonprofit organizations can host millionaire parties, which the Michigan Gaming Control Board defines as events "where wagers are placed on games of chance customarily associated with a gambling casino using imitation money or chips." These parties are commonly referred to as "Las Vegas nights" or "casino nights" in other states, and are held by and for the benefit of nonprofit

organizations. Although nonprofits can hold only up to four millionaire parties a year in Michigan, casino nights there generated more than \$184 million in gambling revenues in fiscal 2012, according to the Michigan Bureau of State Lottery's Charitable Gaming Division.

Some members of the North Carolina General Assembly want in on the charitable gambling action, and say that casino nights would help nonprofits raise more money for their causes. They argue that "gambling for a good cause" is a constructive form of gambling that would not adversely impact the state. Supporters of expanded charitable gambling in North Carolina are persistent—a bill legalizing casino nights for nonprofits has appeared in virtually every session of the General Assembly since 2001. Last year's version of such legislation would have allowed nonprofit "exempt organizations" to hold up to four casino nights per year, and to apply for and hold alcohol licenses for the events. "Exempt organizations" were defined in the bill to include 501(c)(3) charities, as well as certain 501(c)(4), 501(c)(8), and 501(c)(10) organizations, such as homeowners' associations, employee organizations, and fraternal and domestic beneficiary societies.

By definition, “charitable gambling” is simply organized, legalized gambling conducted by or on behalf of charitable and nonprofit organizations.

The reality of the impact of such “charitable” gambling in states across the nation today should give the General Assembly pause in considering such bills. Sadly, these charitable gambling activities hearken a modern-day reminder of the immortal closing words of President Abraham Lincoln’s second inaugural address:

With malice toward none, with charity for all, with firmness in the right as God gives us to see the right, let us strive on to finish the work we are in, to bind up the nation’s wounds, to care for him who shall have borne the battle and for his widow and his orphan, to do all which may achieve and cherish a just and lasting peace among ourselves and with all nations.

Big Business

By definition, “charitable gambling” is simply organized, legalized gambling conducted by or on behalf of charitable and nonprofit organizations. While many states generally forbid or heavily regulate gambling, most states also allow exceptions for certain types of gambling if conducted by charities and other nonprofit organizations for charitable purposes. All states (with the exception of Utah and Hawaii) recognize some form of charitable gambling, and most, including North Carolina, allow charitable gambling in the form of bingo games and raffles. A number of states have also upped the ante over the years, and now allow various forms of electronic charitable gambling and Las Vegas style casino gambling if operated for the benefit of registered charities and nonprofit organizations.

Charity poker rooms did not exist in Michigan until 2004, after nonprofit groups convinced the Michigan legislature to allow them to offer Texas Hold ‘Em poker as a cash game to raise money. In their first year of existence, millionaire nights generated only about \$2.3 million, but by 2011, there were over 190 charity poker rooms throughout the state. Though that number went down in 2012 due to licensing restrictions, the popularity of charitable

casino gambling has continued to grow in Michigan, with over 2,400 Kiwanis Clubs, Rotary Clubs, veterans associations, religious organizations, school foundations, booster groups, and other nonprofits actively hosting or planning to host millionaire parties. Charity poker rooms can be found “all over the place,” allowing Michiganders to casino gamble locally almost any night of the week.

In New Hampshire, casino-style charitable gambling is also big business. Charitable gambling started out as charity-run bingo and Lucky 7 games at local churches and Knights of Columbus halls in that state, but after charitable casino gambling was legalized, it exploded into a \$156 million industry. Bingo and Lucky 7 are still popular, but casino-style charitable gambling alone accounted for more than \$79 million in sales in 2012. That is a staggering sum, given the fact that there are only 10 poker rooms in New Hampshire and that state law limits any single charitable gambling bet to \$4 (as compared to stakes in commercial casinos where thousands of dollars can be in play).

Many other states permit charitable casino-style gambling, including Illinois, Indiana, Kentucky, Louisiana, Maine, Massachusetts, New Jersey, Ohio, Oregon, Virginia, and Washington. While Minnesota does not allow charity casino nights, it does permit, and strongly promote, charitable gambling—so much so that charitable gambling is now a \$1 billion a year industry. That figure amazes even the executive director of Allied Charities of Minnesota, the trade group for charities running charitable gambling: “I don’t think anyone would have anticipated ... that charitable gambling would become a \$1 billion business so quickly. I don’t think anyone realized Minnesotans liked to gamble so much.” The most popular form of charitable gambling games in Minnesota are “pull-tabs,” usually played by selling paper or cardboard tickets from a container, which contain combinations of symbols (similar to a winning line on a slot machine). In 2012, Minnesota legalized electronic bingo and electronic pull-tabs, both played using machines resembling casino slot machines. State officials projected that the new electronic forms of charitable gambling will generate an additional \$1.3 billion in gambling sales each year, and are counting on the state’s take to finance its portion of the new Vikings stadium in Minneapolis.

How much goes to charity?

With enormous amounts of money being generated by charitable gambling, it stands to reason that the charities are raking in big money from the big business that is charitable gambling. However, in Minnesota, the state with the highest overall spending on charitable gambling, charities receive only about four percent of the overall money spent on charitable gambling. There are many instances in Minnesota where the percentage of gambling revenues going to charities is even less: in 2010,

the Hopkins Jaycees reported \$4.4 million in gross gambling receipts, but just \$14,460 went to charity; the Minneapolis Riverview Lion's Club received \$1.4 million in gambling revenue, but just \$4,384 went to charities; and the Edinburgh USA Pro Am Foundation took in \$3.5 million from gambling, but absolutely no money went to charity. "The joke is, if you lose money, at least it all goes to charity," says a Minnesota gambler. "I thought a lot more went to charity."

North Carolina charities can only offer bingo and raffles, but the percentage of money they retain from charitable gambling is close to that of their gambling-advanced brethren in Minnesota. According to Money Magazine, North Carolina charities took in only about five percent of the overall proceeds generated by charitable raffles and bingo in 1993. Do not expect the rates of return to be better for North Carolina charities if the state someday legalizes charitable casino nights. Back in New Hampshire, where casino-style charitable gambling accounts for the majority of overall charitable gambling sales, only about \$4.8 million (or about three percent) actually goes to the charities themselves. In Michigan, charities "hosting" millionaire parties retained only about \$15.6 million in 2012, or about eight percent of the overall gambling revenues generated through that form of charitable gambling.

Renaming Casino Gambling

The owner of Snooker's Poker Room in Michigan describes his charitable gambling room this way: "It's just like walking into a casino. People love it." And charity poker rooms are convenient. "Wherever you live, you can find one," says a 68 year-old retiree who splits his time playing two local Michigan poker rooms. Staying close to home to gamble is a big factor in why people choose to gamble in nearby charity poker rooms. "It beats driving to Detroit, and

here the money goes to a good cause instead of the casinos," says another Michigan charity poker player.

Though very little of the money being gambled is actually going to a good cause, charity poker rooms do provide a substitute for commercial casinos by giving gamblers a local gambling experience comparable to the one offered by bigger, less accessible casinos. By providing convenient access to casino-style gambling, charity poker rooms also serve the function of commercial casinos by creating more localized gambling addiction. In a statement to charities, the Michigan Association on Problem Gambling voiced concerns over the dangers created by the exploding popularity of millionaire parties, citing a study indicating that "a casino within 10 miles of home has a significant effect on problem gambling and is associated with a 90 percent increase in the odds of becoming a problem or pathological gambler." According to Baylor University professor Earl Grinols, anywhere from 30 percent to 50 percent of all gambling revenues are generated from problem and pathological gamblers.

The misplaced belief that charitable gambling is "gambling for a good cause" can provide the moral justification for some to start gambling, and can even serve as a gateway to problem gambling. In the "Casino Night" episode of the comedy series "The Office," the office CEO (Steve Carell) organizes a charitable casino fundraiser. At the casino night event, one of the characters wins a game of poker and proclaims, "I'm going to chase that feeling," a line originally intended to lead to a subplot in which he develops a gambling addiction. Though the gambling addiction storyline was apparently abandoned, the show's writers would have depicted reality if they had chosen to follow through on it. Take the real-life example of Julian, a regular poker player at the River [Charity] Poker Room in Milford, New Hampshire, located just a block from his house. After playing charity poker, Julian is now



yearning for something more: “There is something about a bigger tournament, a critical mass, more and more people” at a commercial casino where the odds are the same but the winnings pool is greater.

Charitable and other nonprofit organizations that offer charitable gambling should ask themselves whether ethical considerations permit them to engage in the promotion of gambling, even when it is supposedly for “a good cause.” A study of charitable gambling in Canada indicated that more than half of the nonprofits responding disagreed with the statement that “charitable gaming is an ethical method of charitable fundraising.” The study also found that the number of nonprofits who agreed that “charitable gambling increases the number of problem gamblers” far outweighs those who disagreed. Many nonprofits noted that there is an inherent hypocrisy in using a fundraising method that increases the number of people who turn to the charitable sector for help, and 57 percent of them agreed with the statement that “problem gamblers are likely to become clients of charitable organizations.”

Producing Casino Corruption

According to the American Gaming Association, charitable gambling is “the least regulated area” of legal gambling in the United States. States with significant charitable gambling are learning that charitable gambling creates many of the same societal problems as commercial gambling, including crime and corruption, and regulators are slowly beginning to scrutinize this area of legalized gambling. In Michigan, legislators are recognizing the need to slow the growth of millionaire party gambling in that state. “It’s really just kind of unregulated gam-

bling, mini-casinos,” says Tom McMillin, a Michigan lawmaker. State investigations in Michigan recently led to the closing of several large, popular poker rooms for exceeding the state’s limits on the number of chips sold and the number of charity games running at the same time; another popular charity poker room was shut down for violating applicable liquor laws. McMillin says that charity casinos invite crime given the amount of money in play, and that “something needs to be done; what’s going on now is not what was intended.”

In Massachusetts, charity poker rooms have taken advantage of a law that allows charities to hold “Las Vegas nights” three times a year to raise money. Charity poker rooms in that state are often run by local gambling consultants, and the poker rooms operate with little scrutiny “despite practices at some of them that often test limits of the sometimes murky statutes governing them,” says the *Boston Globe*. For example, while cash awards are supposed to be limited to under \$25, players interviewed said that poker hands routinely go over \$100, and sometimes reach more than \$1,000 in charity poker games, and that tournaments can pay out thousands of dollars to winners. The Massachusetts Attorney General’s office has gotten involved in several larger charity poker operations, and in 2011, actually closed the largest charity poker room in the state. The review of smaller charity poker room operations has been left to the local authorities, however, which are said to have little incentive to get involved. That is because most charity poker rooms are especially careful to follow at least one legal requirement to the letter: “They hire members of the local police forces as security detail.”

While the law in Illinois prohibits gambling consultants from running charitable casino games and providing dealers, consultants rather than charities are said to make the real money on charitable gambling in that state. Cory Aronovitz, a law professor and former Illinois Gaming Board attorney, says gambling consultants are “just using the charity to hold a card game.” Illinois regulators have raided charity casino nights in recent years, shutting down casino night events because charities were not overseeing the games as required by state law. In neighboring Indiana, charitable gambling operators were charged with skimming over \$1 million from charity games according to *The Chronicle of Philanthropy*.

“Once you legalize it, you can’t get rid of it”

Far from being benign, charitable casino gambling can sometimes even lead to the legalization of commercial casinos in a state. One example is New Hampshire, where this year lawmakers are expected to pass legislation authorizing full-fledged commercial casino gambling in that state. The Granite



State turned down commercial casinos in 2008 in favor of expanded charitable casino gambling, and charity game operators accordingly made substantial investments in expanding their operations. Now, however, New Hampshire's "big business" charitable gambling lobby is scrambling to fight the commercial casino legislation out of fear that it will "wipe out charitable gaming," and is supporting legislation that would eliminate the limits on wager amounts in certain charity games.

For Jim Rubens, the chair of the Granite State Coalition Against Expanded Gambling, the jump to commercial casinos is not unexpected given the success of charitable casino gambling: "That's the point. Once you legalize it, you can't get rid of it." The money bet in New Hampshire charitable gambling rooms in 2012 exceeded the amount gambled on simulcast horse racing, the state's biggest form of commercial legalized gambling outside of the state lottery, and the commercial casino industry no doubt sees opportunity. Many charity casino operators say that Millennium Gaming, a Las Vegas casino gambling conglomerate that has an option to buy New Hampshire's largest charity poker venue, will ultimately get the rights to operate the state's first commercial casino.

Impact on Established Commercial Casinos

In Michigan, where commercial casinos preceded millionaire party poker, the Detroit casinos are actually losing players to local charity poker rooms, and their business is "absolutely" being negatively impacted by the success of charitable casino gambling. Perhaps not surprisingly, Michigan's commercial casinos are suddenly now concerned that charity poker rooms are regulated too lightly, and that more laws are needed to ensure "that the rooms keep the games honest and the players safe." While the concerns of the commercial casino industry provide an interesting aside to Michigan's charitable casino gambling story, those concerns may also be noteworthy for North Carolina lawmakers interested in expanding the rights of nonprofits to include charitable casino nights.

Under the North Carolina Amended & Restated Tribal Gaming Compact (Compact) with the Eastern Band of Cherokee Indians, the state will forfeit its rights to any live table gambling revenues from the Cherokee casino if live table gambling "is permitted for any person other than the Tribe in the geographical zone encompassing the portion of the State of North Carolina located west of Interstate Highway I-26." "Live table gaming" is defined under the Compact (and the statute legalizing live table gambling for the Cherokees) to mean "games that utilize real non-electric cards, dice, chips or equipment in the play and operation of the game." A new law permitting charitable casino nights for

In reality, charities receive only a small share of the revenues generated from charitable gambling.

nonprofits would by definition include "live table gaming," and would therefore result in the violation of the Compact and the forfeiture of any revenues due to North Carolina under the Compact. Those interested in somehow negotiating an exception to the Compact to allow charitable casino nights should anticipate that the Cherokees will use the Michigan example to support the proposition that charitable casino nights hurt commercial casino business, and that the Compact therefore cannot be amended.

Anything But Charitable

Proponents argue that charitable gambling is merely "gambling for a good cause," and that legalizing casino nights in North Carolina would be of enormous benefit to local charities. While states that have expanded charitable gambling beyond ordinary bingo and raffles have created multi-million (and sometimes billion) dollar charitable gambling industries, in reality, charities receive only a small share of the revenues generated from charitable gambling. And though charities have not greatly benefited, states that have expanded charitable gambling to include casino style gambling have still "enjoyed" many of the "benefits" of legalized commercial casino gambling, including increased gambling addiction, crime, corruption, and other problems that invariably follow from widespread localized casino gambling. Charitable casino nights have even helped usher in major commercial casino gambling in some states. When considering whether to expand charitable gambling to include casino nights, North Carolinians should remember that legalizing charitable casino gambling is, at the end of the day, simply *legalizing statewide casino gambling*, the "benefits" of which will be anything but charitable. ❖

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Boy Scouts' Values At Stake

Will Homosexuality Become an Accepted Part of Scouting?

written by:
**Alysse
ElHage,
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SHOULD AN OPENLY HOMOSEXUAL TROOP LEADER BE ALLOWED TO TAKE ADOLESCENT BOYS ON AN OVERNIGHT CAMPING TRIP, ALONG WITH A HETEROSEXUAL TROOP LEADER?

SHOULD A 15 YEAR-OLD BOY, WHO IS THE ONLY OPENLY HOMOSEXUAL SCOUT IN HIS LOCAL TROOP, BE ALLOWED TO TENT WITH A HETEROSEXUAL BOY ON A CAMPING TRIP?

These scenarios were presented in a national survey Boy Scouts of America (BSA) distributed to 1.1 million adult volunteers and Scouts' parents in March 2013. The survey questioned respondents about their support for the BSA's long-standing policy that prohibits membership to "open or avowed homosexuals." A resolution on the policy is slated for consideration by the approximately 1,400 members of the BSA National Council this May. Under the resolution, the BSA would grant membership to youth who identify as homosexual, while maintaining the prohibition on membership for openly homosexual adults.

Over a decade after the U.S. Supreme Court upheld the constitutionality of the BSA's policy on homosexuality, the national youth organization

continues to face mounting pressure to allow open homosexuality in its ranks. In recent years, this effort has gained a number of outside allies, including big corporations, the media, some mainline liberal churches, and various political leaders. The BSA's proposal to change its membership policy regarding homosexual youth is a compromise it hopes will please both sides of the debate. However, both homosexual activists and pro-family organizations have criticized the resolution—with one side saying it does not go far enough, and the other viewing it as opening the door for the eventual promotion of homosexuality in the Scouts.

How the BSA National Council votes on the membership standards resolution will determine the future mission and values of the Scouts, and whether, in the near future, open homosexuality will be presented as acceptable to the millions of elementary and adolescent boys involved in Scouting.

A "Values Based" Program

Incorporated in 1910 and chartered by Congress in 1916, the BSA describes itself as a "values-based youth development program," with more than 2.7 million youth members between the ages of seven and 21, and more than one million volunteer leaders

Boy Scouts Values

(in 2012). The BSA's stated mission is "to prepare young people to make ethical and moral choices over their lifetime by instilling in them the values of the Scout Oath and Law."

"The Boy Scouts train boys to be leaders and men of character better than any organization I have had experience with," says Bob Stevens, assistant Scoutmaster and Chaplain for Boy Scout Troop 15 at Christ Baptist Church in Raleigh. A number of former presidents, 289 current members of Congress, including seven of North Carolina's representatives, and 181 NASA astronauts participated in Scouting as youth or leaders.

Current Membership Policy. As a private, nonprofit organization, the BSA may set specific standards for membership, and currently requires that applicants "possess the moral, educational, and emotional qualities that the Boy Scouts of America deems necessary to afford positive leadership to youth," and that applicants "be the correct age, subscribe to the precepts of the Declaration of Religious Principle, and abide by the Scout Oath or Promise, and the Scout Law."

Additionally, the current BSA membership policy, which applies to both youth and adults, states:

While the BSA does not proactively inquire about the sexual orientation of employees, volunteers, or members, we do not grant membership to individuals who are open or avowed homosexuals or who engage in behavior that would become a distraction to the mission of the BSA.

According to the BSA's March 2013 survey, the majority of BSA parents, unit leaders, council and district volunteers, and chartered organizations support the current membership policy. Specifically the survey found that the current policy is supported by:

- 61 percent of parents.
- 62 percent of unit leaders.
- 64 percent of council and district volunteers.
- 72 percent of chartering organizations.
- 51 percent of major donors.

Policy History

The prohibition against open homosexuality has been part of the BSA's membership policy in some form since 1978, when a position statement to the BSA Executive Committee stated: "We do not believe that homosexuality and leadership in Scouting are appropriate...." The BSA reiterated that position in a formal policy in 1991, which stated that:

Homosexual conduct is inconsistent with the requirement in the Scout Oath that a Scout be morally straight and in the Scout Law that a Scout be clean in word and deed, and that homosexuals do not provide a desirable role model for Scouts.

Scout Oath:

"On my honor I will do my best to do my duty to God and my country and to obey the Scout Law; to help other people at all times; to keep myself physically strong, morally straight, mentally awake, and morally straight."

Scout Law:

"A Scout is trustworthy, loyal, helpful, friendly, courteous, kind, obedient, cheerful, thrifty, brave, clean and reverent."

The BSA adopted the 1991 policy following a controversy over the revocation of the adult membership of Eagle Scout James Dale. A freshman at Rutgers University, Dale applied and was approved to serve as an assistant Scoutmaster in 1989. As a result of openly acknowledging his homosexuality, becoming co-president of the college Lesbian/Gay Alliance, and providing an interview to a newspaper about his "advocacy for homosexual teenagers need for gay role models," the Monmouth BSA Council revoked Dale's adult membership on the grounds that the BSA "specifically forbid(s) membership to homosexuals." Dale filed a lawsuit against the BSA in 1992, which ended up before the U.S. Supreme Court in 2000.

In defending the decision to revoke Dale's membership, the BSA argued that, "homosexual conduct is inconsistent with the values embodied in the Scout Oath and Law, particularly with the values represented by the terms 'morally straight' and 'clean.'" The BSA also said it did "not want to promote homosexual conduct as a legitimate form of behavior."

“How the BSA National Council votes on the membership standards resolution will determine ... whether ... open homosexuality will be presented as acceptable to the millions of ... boys involved in Scouting.”

In a landmark decision in June 2000, the Supreme Court upheld the BSA's constitutional right to pick and choose its own members, ruling that forcing the Scouts to accept homosexual members "would significantly burden the organization's right to oppose or disfavor homosexual conduct." In the majority opinion, then-Chief Justice Rehnquist wrote:

Dale's presence in the Boy Scouts would, at the very least, force the organization to send a message, both to the youth members and the world, that the Boy Scouts accepts homosexual conduct as a legitimate form of behavior.

Normalizing Homosexuality

As Justice Rehnquist pointed out, allowing self-identified homosexuals in the Boy Scouts would put a stamp of approval on homosexuality for millions of young boys. The normalization of homosexuality throughout society—from the classroom to the home—has been the chief aim of the homosexual rights movement since its inception. In fact, one of the "imperatives for gay liberation" that gay commune founder Carl Wittman outlined in his 1969 "Gay Manifesto" was to "free the homosexual in everyone." What better way to achieve Wittman's goal than by influencing the views and values of the next generation of male leaders through the Scouts?

Nondiscrimination policies that include the term "sexual orientation," such as the policy proposed in the BSA resolution, are one of the major tools employed by homosexual activists to advance their agenda. In recent years, the effort has expanded to include transgendered individuals by adding the terms "gender expression" and "gender identity." The goal is to get the terms associated with homosexual, bisexual, and transgender behaviors added to the

list of protected categories in housing, employment, public accommodations, healthcare, and education. The addition of these terms is dangerous, because it essentially equates sexual behavior with immutable characteristics, such as race or color, helping to normalize homosexuality in society. Ultimately, pro-homosexual nondiscrimination policies limit or restrict the ability of private or religious organizations to deny services, membership, or employment to individuals who do not adhere to their values.

John Stemberger is an Eagle Scout and president of the Florida Family Policy Council, who recently founded OnMyHonor.net, a national coalition of Boy Scout leaders, parents, and donors who support the current membership policy. Stemberger agrees that those pushing for a change to the BSA policy are seeking more than just access for homosexuals. In an interview with FOX News, he explained that the current policy "allows anyone to participate, regardless of sexual orientation," but prohibits open homosexuality. He said the BSA is being "bullied" by those seeking "full-blown gay activism in scouting, and that's what they can't have under the current policy."

Bullying the Scouts

The Supreme Court's decision in Dale certainly weakened the legal effort to force the normalization of homosexuality upon the Scouts via the courts. But the cultural campaign by homosexual activists to bully the BSA into changing its membership policy has only escalated.

Leading the effort against the BSA's membership policy are groups such as: Scouts for Equality, which was founded by Eagle Scout Zach Wahls, who was raised by two lesbian mothers; GLAAD; and the Human Rights Campaign (HRC). As a result of their effort to portray the policy as a form of discrimination, the BSA has lost: access to public facilities; the right to participate in state charitable fundraising programs in some states; and the funding of some major corporations, including UPS, Merck, Intel, and some United Way groups.

Timeline. Following is a timeline of recent events leading up to the BSA's decision to review its membership standards regarding homosexuals:

- April 2010: A resolution was submitted at the BSA's National Meeting, asking the BSA to change its membership policy regarding sexual orientation to allow local councils to determine standards.
- July 2012: After a two-year evaluation of the policy by volunteers and BSA leaders, the BSA reaffirmed its policy of prohibiting membership "to open or avowed homosexuals" as in the "best interest of Scouting."
- September 2012: Following a petition drive by Scouts for Equality, the BSA's largest corporate donor, Intel, suspended donations to the BSA in September 2012, and now requires



BSA Proposed Membership Standards Resolution

donation recipients to sign a nondiscrimination policy. By the end of 2012, UPS and Merck followed suit.

- January 2013: The BSA announced that its national leaders were “discussing potentially removing the national membership restriction regarding sexual orientation” in favor of allowing local chartering organizations to determine membership standards. Pro-family groups and religious leaders, including the Family Research Council (FRC) and the American Family Association, responded by launching petition, phone, ad, and email campaigns in support of the current policy. As a result, tens of thousands of citizens contacted the BSA asking it to maintain the policy.
- February 2013: The BSA’s National Executive Board announced that it was delaying a vote on the policy for a “more deliberate review.”
- April 19, 2013: The BSA released a resolution proposing that a nondiscrimination policy regarding homosexual youth be added to the membership standards (*see sidebar*). The BSA National Council will vote on that resolution at the BSA’s National Meeting in May.

On April 19, the BSA’s Executive Committee released a resolution proposing that: “that the Boy Scouts of America amend its membership standards policy so no youth can be denied membership in the Boy Scouts of America on the basis of sexual orientation or preference alone, while maintaining the current membership policy for all adult leaders of the Boy Scouts of America.”

The resolution also states that, “any sexual conduct, whether homosexual or heterosexual, by youth of Scouting age is contrary to the virtues of Scouting,” and that “the Boy Scouts of America does not have an agenda on the matter of sexual orientation, and resolving this complex issue is not the role of the organization, nor may any member use Scouting to promote or advance any social or political position or agenda.”¹

1. BSA Proposed Membership Standards Resolution, <http://www.scouting.org/sitecore/content/MembershipStandards/Resolution/Resolution.aspx>

The Church and the BSA

To fully grasp the impact of allowing openly homosexual youth in Scouting, it is important to understand the significant relationship between the BSA and the Church. The majority (70.3 percent) of chartering organizations for the BSA are faith-based, mainly churches, whose relationship with the Scouts dates back 100 years. Chartering organizations are responsible for providing meeting facilities and leadership within the local Scouting troop.

While there are differing opinions about homosexuality among religious chartering organizations, the majority of Boy Scout troops are chartered by more conservative churches, specifically the Church of Jesus Christ of Latter Day Saints (LDS), the Roman Catholic Church, and the Southern Baptists. As noted earlier, 72 percent of chartering organizations support the current membership policy.

Representatives for both the U.S. Conference of Catholic Bishops and the Southern Baptist Convention (SBC) have issued statements in support of the BSA’s current membership policy. The SBC went a step further in February, when its Executive Committee unanimously passed a resolution, urging the BSA National Council to retain “the current policy of moral rectitude that has marked the Boy Scouts of America for more than 100 years.” SBC president Frank Page also commented on the new BSA resolution, describing it as “more acceptable to those who hold a biblical form of morality than what was being considered before,” but emphasizing that the SBC would “still prefer no change in the policy.”

The End of Scouting?

Richard Land, president emeritus of the SBC’s Ethics and Religious Liberty Commission, has warned that a reversal of the BSA’s position on homosexuality could lead to a “mass exodus” of the Church from Scouting. In an executive summary of the resolution study process, the BSA acknowledged that, “Many religious chartered organizations ... estimate a membership policy change that includes both youth and adults could cause the BSA to incur membership losses in a range from 100,000 to 350,000.”

Scouts Canada is an example of what could happen to the BSA if the membership policy regarding homosexuality is altered. In 1998, Scouts Canada loosened its standards to allow membership to not only homosexuals, but also girls and atheists. Over the five years following that change, membership in Scouts Canada declined by about half, and membership continues to dwindle.

Bob Stevens—who is one of many BSA leaders at the local level who support the current membership policy—believes that any change to the policy regarding homosexuality will ultimately lead to “the end of scouting.” But he warns of a broader impact.

“The issue could lead to a domino effect,” Stevens says. “If the Boy Scouts can’t hold their ground, then how long will it be before churches and Christian schools will be pressured to compromise their standards?” He added, “With this new resolution, the National Board of the Boy Scouts has succumbed to opinion polls over eternal principles.”

Battle Not Over

Whether the BSA’s proposal to change its membership policy regarding homosexual youth will lead to a massive loss of members remains to be seen.

Impact of Allowing Open Homosexuality in the Scouts

According to OnMyHonor.net, the harms of changing the BSA membership policy to allow open homosexuality include¹:

- A mass exodus of parents, boys, troops, denominations and sponsoring organizations.
- A flood of litigation by homosexual activist groups.
- Overt pro-homosexual political activism expressed throughout the BSA.
- Open, public and inappropriate expressions of physical affection between homosexual boy scouts.
- URL website links from individual pack, troop, and council websites to other websites with inappropriate sexual and political content.
- Continued demands and legal attacks from homosexual rights activists.

1. As found at: <http://www.onmyhonor.net/impact-of-open-homosexuality-in-scouting/>

What is clear is that neither side of the debate is satisfied with the BSA resolution, and the battle for the Scouts is far from over.

In a statement, FRC President Tony Perkins called the BSA resolution “a completely unworkable solution that neither side can support.” He explained that:

While the Scouts are desperately trying to straddle the fence, the reality is that true morality isn’t dictated by age. If it’s wrong at 30, then it’s wrong at 13. What this resolution would suggest is that homosexuality is acceptable until a boy is 18—and then, suddenly, it’s not.

Perkins continued, “The resolution specifically references homosexual youth, but this is a distinction without a difference because advancing into leadership positions is integral to the Scouting experience.”

For their part, homosexual activists have criticized the resolution as not going far enough. HRC described it as discriminatory “toward gay and lesbian parents, leaders and in employment,” and asked, “What message does this resolution send to the gay Eagle Scout who, as an adult, wants to continue a lifetime of scouting by becoming a troop leader?” Both HRC and GLAAD have pledged to continue their campaign to pressure the BSA into ending its prohibition against open homosexuality for both youth and adults.

The policy change recommended by the BSA resolution also has legal implications. The Alliance Defending Freedom, a Christian civil liberties organization, has warned the BSA that “Altering the national membership policy will undermine [the Supreme Court’s decision in *Dale*] and expose councils, local troops, and the national organization to a flood of litigation.”

Alysse ElHage, M.A., is associate director of research for the North Carolina Family Policy Council. For a footnoted version of this article, please visit ncfamily.org.

Boy Scouts’ Mission at Stake

Any change to its long-standing national prohibition on membership to “open and avowed homosexuals” places the BSA’s mission and values at significant risk. If approved by the BSA National Council this May, the proposal to grant membership to youth who identify as homosexual would give tacit approval to homosexuality, and open the door for its promotion in BSA troops nationwide.

As the Supreme Court confirmed in its landmark 2000 decision, the BSA is a private, nonprofit youth organization with the First Amendment right to determine its membership standards according to its values and mission. Changing the current membership standards regarding sexual orientation will significantly modify the values and mission of the Scouts, and could expose the BSA to lawsuits.

“Scouts is not about sexuality; it’s about teaching boys to hike, to tie knots, and to successfully make that difficult journey from adolescence to manhood,” said FRC’s Perkins in an interview on the North Carolina Family Policy Council’s *Family Policy Matters* radio program. “The last thing that parents involved in Scouting want is for their kids to be sexualized through the Scouts by interjecting this element of homosexuality.”

As recently as July 2012, the BSA appeared to agree when it explained its decision to leave the long-standing membership policy intact:

Scouting is not the place to resolve divergent viewpoints in society and ... if same-sex attraction is going to be introduced or discussed, it should be with parents, caregivers, or spiritual advisers, at the appropriate time and in the right setting—but outside of the Scouting program.


This May, the BSA National Council should reaffirm that position by voting against the proposed resolution. The BSA should maintain the current national policy prohibiting membership to “open and avowed” homosexuals of *any age*, and leave the issue of sexual orientation to parents, where it belongs. ❖



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Abortion's Impact on Prematurity

Closing the Knowledge Gap

by: Martin McCaffrey, M.D.

KIA WAS 20 YEARS OLD, IN HER SECOND YEAR OF COLLEGE, AND 23 WEEKS PREGNANT WHEN HER PREVIOUSLY NORMAL PREGNANCY RADICALLY CHANGED. ONE MORNING SHE FELT A GUSH OF FLUID FOLLOWED BY PAINFUL CONTRACTIONS. SHE RUSHED TO A NEARBY EMERGENCY ROOM, WHERE SHE WAS TOLD SHE WAS IN PRETERM LABOR AND HER BABY MIGHT DELIVER EARLY. KIA WAS TRANSFERRED TO A LARGER NEARBY HOSPITAL, ADMITTED AND STARTED ON MAGNESIUM TO TRY AND STOP HER LABOR. DESPITE THE DOCTOR'S BEST EFFORTS OVER AN EXHAUSTING THREE DAYS, HER LABOR DID NOT STOP. KIA DELIVERED MILO, A 1 POUND 3 OUNCE BABY BOY WHO FIT IN THE PALM OF HIS FATHER'S HAND. OVER THE NEXT FOUR MONTHS AS MILO BATTLED SEVERE PREMATURE LUNG PROBLEMS, THREE WEEKS ON A VENTILATOR, SURGERY FOR PREMATURE EYE DISEASE, AND SEVERE BLEEDING IN THE BRAIN, KIA KEPT WATCH AT MILO'S BEDSIDE. SHE ASKED ME TWICE DURING MILO'S HOSPITALIZATION, "WHY DID THIS HAPPEN TO US? I DIDN'T SMOKE, ATE RIGHT AND TOOK MY VITAMINS." KIA AND I SPOKE ONE LAST TIME AS SHE PREPARED TO TAKE MILO HOME. SHE HAD FIVE FOLLOW-UP APPOINTMENTS CONFIRMED AND WAS AN EXPERT AT GIVING MILO HIS FOUR MEDICATIONS. THE TANKS MILO WOULD NEED TO PROVIDE HIM WITH OXYGEN AT HOME HAD BEEN DELIVERED. COLLEGE WAS ON THE BACKBURNER NOW, AND KIA WAS VERY AWARE THAT SHE AND MILO WERE STARTING ON A CHALLENGING JOURNEY. TEARFUL, KIA THANKED ME AND THE STAFF THAT HAD CARED FOR MILO, AND SAID, "I SURE HOPE YOU DOCTORS WILL FIGURE OUT ONE DAY HOW WE CAN KEEP BABIES FROM COMING EARLY."

Prematurity, defined as a birth prior to 37 weeks gestational age, is one of the most challenging public health issues in America. Nearly 12 percent of all babies born in the United States are born preterm. In North Carolina 10.4 percent of births, 12,750 babies, were born preterm in 2011. Preterm birth may be preceded by early rupture of membranes or preterm labor. This leads to hospitalizations of days or weeks for mothers as doctors attempt to try and prevent an early delivery. In the case of a very preterm birth (VPB), defined as an infant born at less than 32 weeks gestation, hospitalizations from 4-16 weeks can be expected. While keeping vigil at the bedside, many mothers will see their baby have a breathing tube placed, live on a ventilator for days to weeks, intravenous lines inserted in the belly button and veins, and feedings delivered through feeding tubes. A mother may watch helplessly as her baby develops life-threatening infections or conditions requiring surgery. After days or weeks of struggling, this heroic infant may be one of the 20 percent that does not survive. As staggering as the emotional and social toll of this epidemic is, equally

devastating is the financial impact. The estimated annual cost for care attributable to preterm birth in the United States is \$26 billion.

Over the last two decades, the percentage of preterm deliveries has risen 20 percent. Annually in the U.S., 80,000 births are classified as VPB. VPBs constitute two percent of all births, and in developed nations, VPB is the leading cause of death in newborns. While medical advances have allowed infants as young as 22 weeks gestation to survive, the chances for survival diminish with decreasing gestational age. The VPB infants that do survive are at risk for lifelong complications, including breathing problems, cerebral palsy, autism, blindness and mental retardation.

Understanding Chance, Association, and Probable Cause

Preterm birth does not have a single identifiable cause, but it has been associated with a number of factors. In 2006, the Institute of Medicine (IOM) published one of the most comprehensive reviews of preterm birth ever compiled. It identified prior preterm birth, incompetent cervix, multiple gestation pregnancy, infection, and smoking as some of the factors associated with preterm birth. An "association" is defined statistically by methods that exclude the possibility that the apparent relationship of a factor with an outcome of interest occurs by chance. If statistics exclude chance as an explanation for the association, then there is a real association, and investigators turn to analyzing whether the associated factor is possible cause for the outcome. The relationship between smoking during pregnancy and preterm birth illustrates the concept of "association." While an association has been reported to exist between smoking and preterm birth, preterm birth does occur in mothers who do not smoke. Similarly, all mothers who smoke do not experience preterm birth. Smoking during pregnancy, according to some studies, is associated with an increased likelihood of preterm birth; but not all studies have reached this conclusion. The IOM report concluded:

Many studies have examined the association between smoking and preterm birth, and they generally find modest associations. Recent studies continue to show such a pattern. However, some reports suggest a stronger association and others suggest no association at all.

Despite just a "modest association," and lack of proof of probable causality, public health experts have identified smoking as a modifiable risk factor that might reduce a mother's risk for delivering a preterm baby. As a result, the U.S. Surgeon General in 1985 determined it was his duty to warn mothers who smoked of the association with an increased risk for a preterm birth. The concern regarding this association remains significant enough that the

Surgeon General's warnings on cigarette packages issued in 1985 continue to this day: "Smoking By Pregnant Women May Result in Fetal Injury, Premature Birth, And Low Birth Weight."

Abortion Safety and Its Association With Preterm Birth

Safety. Another association with preterm birth which is scientifically established, but less publicized, is a prior abortion. In this article, "abortion" refers solely to induced abortion or termination of pregnancy, not spontaneous abortion. Introduced into clinical practice in 1958, vacuum or suction aspiration has become the most commonly performed abortion procedure. One might assume that the introduction of this technique followed animal safety studies and other clinical trials evaluating the potential impact of suction aspiration. Such has been the case since 1947 when, reeling from the horrors of Nazi medical experimentation, international agreements were signed at Nuremberg that required a new medical treatment be first tested on animals before human experimentation. Some might be surprised to find that this was not the case with suction abortion. In 1958, Chinese physicians published the use of a new technique requiring a new device, suction abortion, which they had performed on 300 Chinese women. It is incomprehensible for us today to imagine physicians introducing a new surgical technique and device, and presuming it was without potential harm, dismissing the need for safety testing in animal and clinical trials. That, however, is exactly what happened in the case of one of the most commonly performed surgical procedures in the world, suction aspiration abortion. Suction abortion has no published animal studies; there are no clinical studies designed to validate its short and long term safety.

While abortion providers have not provided safety data validating that it is free from adverse effects, the widespread use of abortion has demonstrated that abortion is associated with at least one severe reproductive health outcome: a risk of future preterm birth. To date, 137 studies have demonstrated this association. The association between prior abortion and future preterm birth is strongest for the most premature of births. Twenty four studies have shown a statistically significant increase in the risk for VPBs or very low birth weight (VLBW defined as birth weight less than 1500 grams). Nine studies have demonstrated the association of abortion with extremely preterm birth (births less than 28 weeks' gestation). Many of these studies demonstrate a risk for preterm birth that incrementally increases with a history of increasing numbers of prior abortions. This increased risk for preterm birth with increased exposure to abortion is referred to as the dose-response relationship between abortion and preterm birth.

Studies and the Data. Medical journals print thousands of studies annually. The challenge is to determine which studies reach clinically significant conclusions. One study, however, even if highly significant, cannot definitively establish an association as a real risk or probable cause. If a variable is a real risk, the relationship will be reproducible in other studies. The gold standard in establishing the strength of such a relationship is the systematic review with meta-analysis (SRMA). The systematic review (SR) provides an exhaustive summary of literature relevant to a research question; it uses an objective approach for the evaluation of studies on the topic with the aim of minimizing bias in those studies included in the final meta-analysis. The meta-analysis (MA) then combines results from different studies with the intent of identifying whether there is a consistent association of a factor with an outcome.

In 2009, two well-designed SRMAs were published that reviewed the world's literature on the association of abortion with preterm birth. These studies ultimately incorporated a total of 41 studies in their analyses, and demonstrated not only an association of prematurity with one induced abortion, but a dose-dependent further increase in risk for mothers with a history of two or more abortions. The first study, by Swingle et al., determined that a single prior abortion increased the risk of a future VPB by 64 percent. The second study, by Shah et al., reported that a single prior abortion increased the risk of preterm birth by 36 percent, while more than one abortion increased the risk for preterm birth by 93 percent. This latter finding indisputably established that when a woman has increasing numbers of abortions, her risk for preterm birth increases further. This is a dose-dependent response association. Over the last two years, large national studies from Finland and Scotland provided further



evidence of the abortion-prematurity association. More recently, researchers in Canada published the results of an analysis reporting that women with one abortion were 45 percent, 71 percent, and 217 percent more likely to have premature births at 32, 28, and 26 weeks. This risk was stronger for women with two or more previous abortions.

Arrayed against this overwhelming evidence of the abortion and preterm birth association are NO SRMAs to dispute the abortion and preterm birth association.

Clear Association and Possible Causation.

Statistical analysis has definitively shown that the relationship between abortion and prematurity is not due to chance. The association is established. The next step then is to ask the question, “Is a prior abortion a cause for some future preterm births?” The criteria for establishing probable cause require moving beyond statistical analysis. Hill’s “Criteria of Causation” describes the minimal conditions needed to establish a causal relationship between two items. These conditions include a temporal relationship, dose-dependent response, biologic plausibility, consistency and strength of association. A review of these criteria for the abortion-preterm birth link demonstrates the following:

- The exposure to abortion occurs prior to the increased risk for a preterm birth. There is a clear temporal relationship.
- There is a clear increase in the incidence of preterm birth with increased exposure to abortion. IA shows a dose-dependent response.
- There are several possible biologic explanations that explain how abortion might lead to future preterm birth. These possible mechanisms include abortion induced surgical injury that leads to cervical incompetency, or the abortion induced development of chronic uterine inflammation that predisposes a mother to a future preterm birth. There is biologic plausibility.
- The association of abortion with preterm birth has been demonstrated repeatedly in multiple studies in multiple populations. There is consistency of effect.
- Abortion is linked not only with preterm birth, but it is even more strongly linked with VPB. There is strength of association.

The association of abortion with preterm birth is consistently stronger than the association of preterm birth and maternal smoking. Objective review of the literature not only establishes the strength of the abortion and preterm birth association, it also reveals that prior abortion satisfies criteria as a probable cause, though not the only cause, for a future preterm birth.

The Experts Weigh In. Expert opinion has openly acknowledged that the evidence demonstrates the association of abortion with preterm birth. Dr. Jay Iams, maternal fetal medicine specialist, world

renowned authority on prematurity and IOM Preterm Birth Committee member, stated in 2010:

Contrary to common belief, population-based studies have found that elective pregnancy terminations in the first and second trimesters are associated with a very small but apparently real increase in the risk of subsequent spontaneous preterm birth.

Dr. Phil Steer, Editor of the British Journal of Obstetrics and Gynecology, commenting on the 2009 Shah study editorialized:

A key finding is that compared to women with no history of termination, even allowing for the expected higher incidence of socio-economic disadvantage, women with just one TOP (termination of pregnancy) had an increased odds of subsequent preterm birth. We have known for a long time that repeated terminations predispose to early delivery in a subsequent pregnancy. However the finding that even one termination can increase the risk of preterm birth means that we should continue to search for ways of making termination less traumatic.

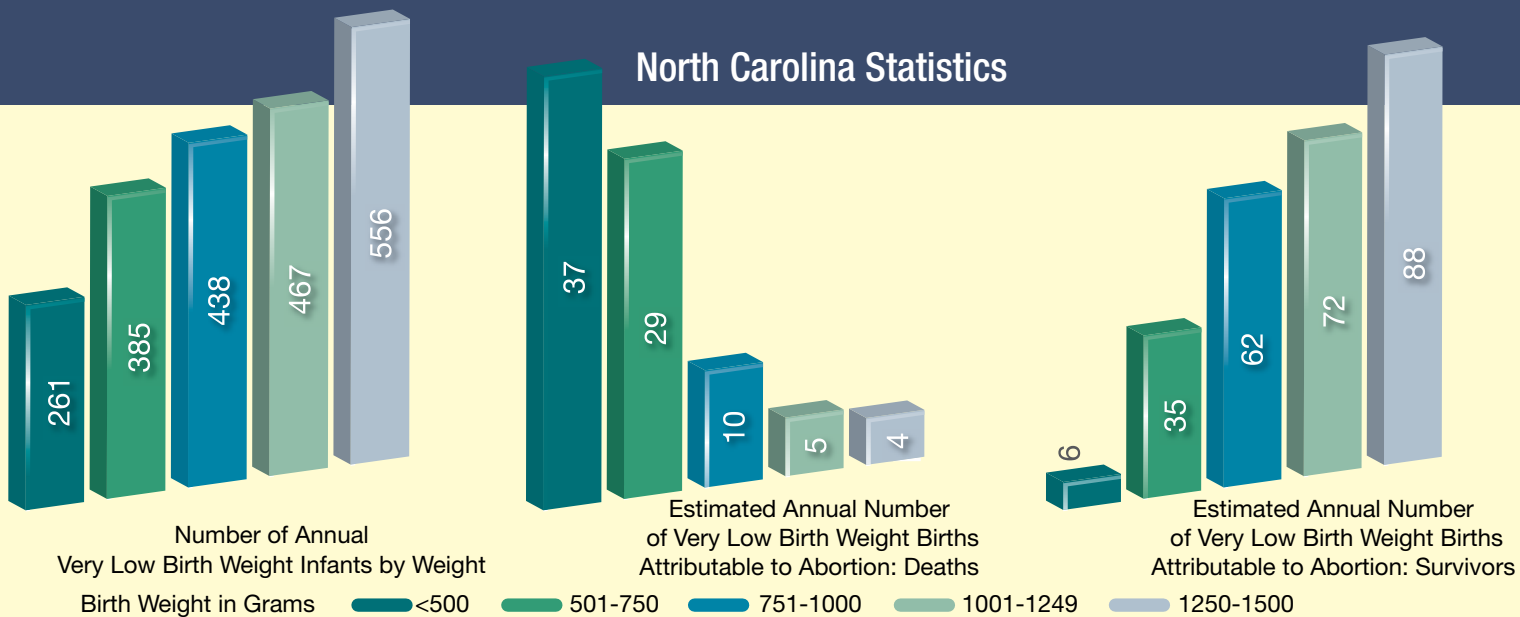
Reducing Preterm Birth Risk

The previously mentioned IOM Report on Prematurity in 2006 noted the association of abortion with prematurity. The IOM identified abortion as an “immutable” risk factor for preterm birth. This characterization defined a history of abortion as an unchangeable element in a women’s risk profile for future preterm birth and no recommendations were made regarding informing the public about this association. The fact is we do not know if this association is immutable. Once an abortion has occurred it might remain an immutable risk factor for future preterm birth. However, the association of abortion with prematurity could be similar to the risk of lung cancer developing as a result of smoking. If the behavior or exposure ends, over time the risk for an unwanted morbidity (lung cancer and perhaps preterm birth) wanes. One thing is for certain, while it is unclear whether or not abortion is a lifelong immutable risk factor for preterm birth, it is indisputable that measures which reduce rates of initial or subsequent abortions will reduce the likelihood of a woman having a future preterm birth.

Informing Women

Is information regarding the increasing risk for a future preterm birth with increasing numbers of abortions important for women of childbearing age in North Carolina who have had a prior abortion? Is this important information for women of childbearing age who have not yet had an abortion, but consider abortion a potential method for family

North Carolina Statistics



*The print version of this article incorrectly labeled the Estimated Annual Number of Very Low Birth Weight Births Attributable to Abortion: Survivors and Estimated Annual Number of Very Low Birth Weight Births Attributable to Abortion: Deaths. This version corrects the graphs to be properly labeled.

planning? In an era of informed consent in which many patients feel it is their right to know the potential risks for medical procedures, the answer is obvious.

This information is especially important, given that abortion is one of the most commonly performed surgical procedures, and it has significant potential impact on the future reproductive health of a young woman. In dealing with legislation regarding a politically charged topic like abortion, however, some might demand to know what the real impact of the association between abortion and prematurity is for the citizens of North Carolina.

Policy Impact

Fiscal. An analysis of the impact of the abortion-prematurity association in North Carolina was performed in 2008 by the General Assembly. This analysis is based on a cost analysis of abortion published by Calhoun et al. Updating this analysis for the data reported by Swingle et al. and North Carolina data, adjusted for 2013 costs, reveals the following estimates:

- Annually in North Carolina, abortion is associated with 262 very preterm births, 86 very preterm deaths and 18 cases of cerebral palsy.
- Annually there is \$21.6 million in initial neonatal hospital costs attributable to abortion as a result of VPB in North Carolina.
- Each year, abortion results in cerebral palsy cases in North Carolina that will require \$47M to support the lifetime cost of care.

Racial Disparity. A focus for healthcare providers and public health officials in North Carolina is the disparity in health outcomes that exist between the white, black and Hispanic communities. While all races share in the prematurity epidemic and the association of prematurity with abortion, the impact on the Hispanic community tracks closest to the

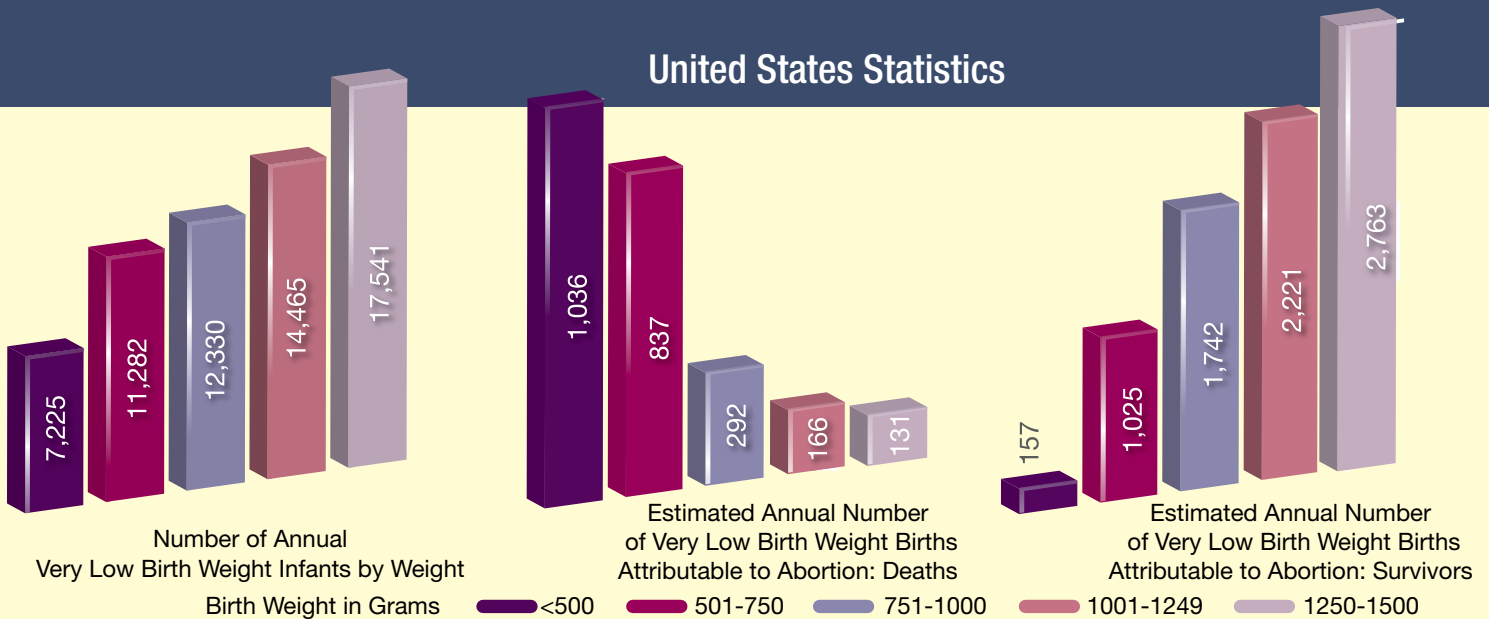
white community while the black community is most profoundly affected. Based on 2010 North Carolina State Center for Health Statistics data, the latest data available, VPB birth affects blacks at a rate 2.5 times higher than whites. The 2011 data from NC State Center for Health Statistics Pregnancy Data reports that North Carolina blacks used abortion services at a rate that is three times that of whites. This historically consistent pattern of increased use of abortion services in blacks creates a significant disparity in their risk for VPB. Based on this data, of the 262 VPBs estimated to occur annually in North Carolina in association with abortion, 110 of these births can be expected to occur among black mothers having 28,509 live births. Of the 262 very preterm births associated with abortion, the same number, 110, will be born to white mothers having 67,542 live births. In summary, VPBs with an abortion association represent 1.10 percent of black births in North Carolina and 0.46 percent of white births. The racial disparity is clear.

The Gap in Public Knowledge

The abortion-preterm birth association is news to many, despite the fact that the literature regarding this link is larger and stronger than that for other commonly accepted associations with prematurity. The most profound illustration of this gap in public knowledge is the fact that cigarettes are labeled with warnings from the Surgeon General regarding the potential impact of smoking on preterm birth. There is no SRMA of smoking and preterm birth reporting a 36 percent increased risk of preterm birth from smoking one-half pack of cigarettes a day, or a 93 percent increased risk from smoking one pack per day.

In concluding their landmark SRMA publication on the abortion-prematurity association, Shah et al. state:

United States Statistics



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More than a million abortions are performed in the US per year. Of these, more than 75 percent of women wish to or get pregnant again. These women should know the risks associated with I-TOP (induced abortion) not only for their health but also for their future reproductive potential. A properly obtained consent legally mandates explanation of these risks to women and ensuring their understanding. Potential areas for knowledge transfer include education of girls and women enrolled at schools or colleges, during routine visits to family doctors or specialists, and finally when counseling women seeking abortion.

Given the strength of the evidence demonstrating the abortion-preterm birth link, one might expect providers of abortion services to have learned from the tobacco industry and proactively inform patients of the impact their services might have on future health. This is not the case. Planned Parenthood, the leading provider of abortion services in the nation, has consistently dismissed and denied the incontrovertible evidence that abortion increases a woman's risk for preterm birth. Despite the abortion-preterm birth association being scientifically established, Planned Parenthood states on their national website, "Safe, uncomplicated abortion does not cause problems for future pregnancies such as birth defects, premature birth or low birth weight babies, ectopic pregnancy, miscarriage, or infant death."

Legislative Proposal

The decision by women of child bearing age to have an abortion can have profound a impact on future pregnancies and their future family. The gap in public knowledge that currently exists, and the prevalence of abortion in North Carolina, mandates

that those concerned with public health take steps to inform North Carolina women and their partners about the risks abortion poses for a future preterm birth. Senate Bill 132—Health Curriculum/Preterm Birth (S132) is a small step in that direction.²³ S132, sponsored by Senators Warren Daniel (R–Burke), Jerry Tillman (R–Moore), and Shirley Randleman (R–Stokes), along with three co-sponsors, is supported by the North Carolina Child Fatality Task Force (CFTF). S132 would add to the current School Health Education Program information on the preventable factors associated with preterm birth, including the risk abortion poses for preterm birth in subsequent pregnancies. S132 capitalizes on the opportunity to better inform young women and men who are making decisions related to their sexual behavior which may have lifelong implications. The education advocated by S132 may lead some young women and men to reconsider their sexual and other lifestyle choices before they make decisions which impose significant future risk for preterm birth. S132 will be an important part of ongoing state education efforts that will hopefully lead significant numbers of students to make more responsible choices.

Everyone should hope that abortion becomes an increasingly rare event. The education provided for in S132 can contribute significantly to making this hope a reality. Over time, as the use of abortion services decreases, North Carolina will see a reduction in preterm and VPB rates, a reduction in the disparity of black VPBs, and a decline in the enormous challenges preterm birth places on the healthcare system and North Carolina families. ❖

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Surrogacy

Sold Before Conception

written by:
*Mary
Summa,
J.D.*

“A SURROGATE MOTHER AND THE COUPLE THAT HIRED HER MAKE A PAINFUL DISCOVERY AFTER AN ULTRASOUND: THEIR UNBORN CHILD WILL HAVE SERIOUS HEALTH PROBLEMS AND WILL POSSIBLY NEVER HAVE A “NORMAL” LIFE... THE BIOLOGICAL PARENTS, WHO SAY THEY CANNOT BRING A CHILD INTO THE WORLD TO ENDURE SO MUCH SUFFERING, OFFER THE SURROGATE, WHO IS STRUGGLING TO MAKE ENDS MEET, \$10,000 TO ABORT THE BABY.”

“Marie-Pier is pregnant with twins she doesn’t want.... Eight weeks after she got pregnant, the adoptive couple said they wanted out. Now she is stuck with twins she said she can’t care for.”

The media constantly report stories about the rich and famous using surrogacy to fulfill their lifelong dream of having a child. One commentator described the phenomenon as “almost a form of modern day wet-nursing.” The stories are close and personal, full of hope and joy. Yet, these news accounts, the first from 2013 and the second from 2012, tell a different story—not of hope and joy, but of despair and sorrow. They expose the raw

truth about surrogacy, a reality many in legislatures, courts, and the media simply do not want to face.

Plainly stated, surrogacy is bad public policy. It commodifies women, whose wombs are rented, and treats children as objects who are bought and sold. It ignores the emotional costs to both the birth mother and the child. It exploits the poor for the sake of the rich. It allows birth mothers to traffick their own children before they are even conceived. It places the government in the role of deciding parenthood, rather than protecting it.

For the sake of poor women, children, and freedom, North Carolina should end this assault on women and children.

Surrogacy in General

Surrogacy Agreements are contractual agreements between a woman who will carry a child to term and the “intended” parent or “parents.” With the introduction of In Vitro Fertilization (IVF), two types of surrogacy exist: traditional surrogacy and gestational surrogacy. With traditional surrogacy, the woman is inseminated with sperm, possibly, but not necessarily, from one of the “intended” parents. Gestational surrogacy requires that an egg is fertil-

ized with sperm outside the womb and implanted in the woman. The egg and/or sperm can be those of the “intended parents,” but they may come from anonymous donors.

The Popularity of Surrogacy

First utilized in the 1970s, surrogacy has become increasingly popular in unrestricted countries, including the United States. In 1986, an estimated 500 children were born through surrogacy. By the mid-1990s, that total number rose to approximately 4,000. According to the Center for Bioethics and Culture Network, there were 1,059 surrogate births in 2006 alone, representing a 30 percent jump between 2004 and 2006. Overall, one surrogacy agency, Building Families, estimates that over 35,000 children have been born through surrogacy.

Commercial Surrogacy

While marketed as simply a gift of parenthood, surrogacy, in most cases, is a commercial enterprise, where the surrogate is paid a fee for her services. According to the surrogacy broker, ConceiveAbilities, women can be paid a baseline fee of \$25,000 or \$30,000 in Illinois. Experienced surrogates can receive even more. Additionally, the surrogate can receive a monthly maternity clothing allowance of \$750.00 and \$500-\$1,000 in compensation for doctors’ visits or procedures, including \$750.00 for “fetal reduction,” a polite term for killing embryos that are implanted but not wanted.

Surrogates, according to the ConceiveAbilities’ pricelist, are also compensated if things go awry: \$2,000 for a miscarriage; \$2,500 for the loss of a uterus; \$5,000 for a hysterectomy; \$1,000 for the loss of a fallopian tube; and \$1,000 for an ectopic pregnancy.

Although media attention has focused on the fee paid to the surrogate, surrogate brokers, who connect “intended parents” with birth mothers, profit as well. The “intended parents” can pay the agency a “finder’s fee” as high as \$20,000. ConceiveAbilities sets the total baseline cost of surrogacy at \$59,500.

The Legal History of Surrogacy

Two cases, *Baby M* and *Johnson v. Calvert*, serve as landmark cases on the issue of surrogacy. The *Baby M* case, which was the first court ruling on surrogacy, involved commercial traditional surrogacy. Decided in 1988, it involved a married couple who used a surrogate, Mary Jo Whitehead. Mary Jo and her husband were of limited means. In contrast, the Sterns, were both professionals with combined assets worth approximately \$89,500. For \$10,000, Mary Jo Whitehead agreed to be artificially inseminated with Mr. Stern’s sperm.

Everything went as planned until shortly after the child’s birth. Mary Jo delivered the baby, and she gave the baby to the Sterns as agreed. She then convinced them to allow her to keep the child,

and then refused to return Baby M to the Sterns. A court battle ensued. Ultimately finding surrogacy agreements in violation of public policy, the Court concluded that the best interest of the child justified awarding custody to the biological father and his wife. Mary Jo Whitehead was awarded visitation rights.

A second case, *Johnson v. Calvert*, involved commercial gestational surrogacy. The Calverts contracted with Anna Johnson to carry their baby, who was conceived through IVF, paying Anna \$10,000 for her services. Unlike the facts in the *Baby M* case, the relationship between the surrogate and the “intended parents” began to deteriorate before the child’s birth. Six months pregnant, Johnson demanded full payment or she would not give the child to the Calverts. The Calverts responded with a lawsuit. Upon her birth, the child was placed in the custody of the State, pending the Court’s decision on who was the parent. Decided five years after the *Baby M* case, and by a California court rather than a New Jersey court, the Court upheld the agreement, finding that parenthood can be defined by the “intent” of the parties prior to conception rather than gestation.

State Responses

States have had a mixed reaction to surrogacy. Through legislative and/or court action, some have restricted it by banning commercial surrogacy but recognizing altruistic surrogacy and/or restricting surrogacy agreements to “intended parents” who are married. A few states, including Arizona, Indiana, Michigan, New York, and the District of Columbia, have specific statutes that have declared all



surrogacy agreements—traditional and gestational, commercial and altruistic—unenforceable. A few states, including Arkansas and California, legally recognize surrogacy agreements by statute or case law. Other states, including North Carolina, have failed to address surrogacy in either legislative or judicial action.

Research has indicated, however, that laws that simply make surrogacy agreements unenforceable have had minimal effect on curbing the practice. According to the Council for Responsible Genetics, in New York (a state where surrogacy agreements are unenforceable) over five percent of gestational surrogacy IVF procedures are conducted within the State. According to one report by the Council for Responsible Genetics, in Michigan, which has one of the strongest anti-enforceability laws, IVF clinics are performing IVF procedures on patients who intend to use gestational surrogates.

International Surrogacy

Surrogacy laws vary by country. Germany, China, Italy, Norway, Sweden, and France, for example, forbid surrogacy agreements. Although surrogacy is illegal in these countries, “intended parents” from these countries can contract elsewhere for surrogacy services. A number of countries, including Finland, Spain, the Netherlands, Canada, and India allow surrogacy. In the U.K., it is allowed, but the surrogate must be pre-approved by a government agency.

Where the “intended parents” live in one country and the surrogate in the U.S., the “intended parents” come away with two prizes—a baby and citizenship. Dubbed “million dollar babies,” Chinese couples are using American women to bear their children, not only to maneuver around China’s ban on surro-

gacy, but to gain citizenship. To guarantee the dual prize, as part of its “no risk” money-back guarantee, complete with citizenship, a Chinese surrogacy brokerage agency called Yulane Fertility Services, with offices in China and the U.S., will implant an embryo into two women at the same time. It is unclear what happens if both embryos implant in the surrogates’ wombs.

Exploiting women through surrogacy in third world countries, such as India, has become big business. As part of a \$2 billion industry there, dozens of clinics house women who serve as surrogates for foreign couples. In one report, the surrogate was housed with over 100 women providing surrogacy services for foreign couples and paid \$6,000 for her services, almost six times the national per capita income but only about one fifth of the fee received by her American counterpart.

Surrogacy’s Link to Abortion

Most surrogacy agreements contain “boiler plate” language that contractually gives to the “intended parents” the sole authority to decide whether the surrogate should abort due to “fetal abnormality.” A surrogacy agreement provided by Surrogacy911.com reads as follows:

In case if the fetus/fetuses has/have been determined by either an independent physician or by the physician of the surrogate mother and/or the physician of the genetic father and the intended mother to be either physically or psychologically abnormal, the decision about whether the surrogate mother should do abortion or not becomes the sole decision of the genetic father and the intended mother.

In some cases, such as the one mentioned at the outset of this article, the surrogate will be paid an additional fee to abort the child. If she does not, the surrogate has breached the surrogacy agreement and must return everything she obtained from the “intended parents”—except the child. The baby stays with the surrogate.

“Fetal reduction” can be an issue with gestational surrogacy. With IVF, more than one embryo is implanted into the surrogate’s womb in order to insure implantation of at least one unborn child. If more than one survives, the surrogate may have a problem. Such was the case for Helen Beasley, age 26, a British surrogate who announced to her California “intended parents” that they would be the proud parents of twins. Rather than joyfully accepting the news, the couple insisted that the surrogate have an abortion—they only ordered one child. When Beasley refused, the couple reneged on the contract. The innocent twins, conceived by a woman who never wanted them and a couple who rejected them, were born and put up for adoption.



Surrogacy Legitimizes Human Trafficking

In a free society, when the ethics of surrogacy and other reproductive aids are questioned, the proponents of these reproductive aids quickly arm themselves with the sword of “freedom” and the shield of “rights.” A surrogate should have the “right” to do with her body what she wants, they say. The purchasing couple has a “right” to a child.

This argument redefines “rights,” and misconstrues “freedom.” Because of man’s special relationship with God, he is given special freedoms not enjoyed by others within creation—the right to life, the right to liberty, the right to property, etc. In essence, a “right” is a “gift from God that extends from humanity.” In a free society, the government bears the primary responsibility of protecting those rights, not creating them and, certainly not extinguishing them.

Freedom, according to the founders, was not synonymous with unrestrained liberty. Rather, true freedom, in their minds was “certain old and valuable securities against having things done to them by the state or by powerful men.” It is “not liberation from moral obligations.”

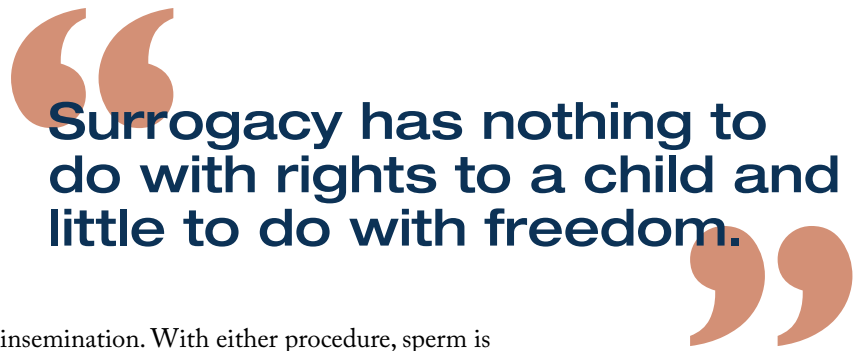
The claim of freedom cannot justify every contractual arrangement, even if voluntary. If a person wants to become a slave and sells himself into slavery, the law would nullify the arrangement as contrary to public policy. Certain contractual arrangements that commodify life affront human dignity and should not fall within the protection of “freedom.”

Surrogacy has nothing to do with rights to a child and little to do with freedom. A “right” to be an adoptive parent has never been recognized in natural law or common law. Even assuming there was a “right,” that right would never survive its conflict with a right against the sale of a human being, which is what commercial surrogacy entails. Freedom would not absolve this trafficking of human life.

Surrogacy Hurts Surrogates

“Help Create a Miracle for a Waiting Family!” The words splash across the front page of a surrogacy broker’s website. Among the benefits of surrogacy listed in the ad: “Gain an incredible sense of self-fulfillment from giving the greatest gift humanly possible to another family. Build a life-long relationship with forever-grateful intended parents. Receive up to \$45,000.” Not a single word is mentioned about the risks the surrogate assumes for “one of the most rewarding experiences of her life” and the \$45,000 she will receive for her “altruistic” act.

Physical Harm. The risks are real, physical, and emotional. In traditional surrogacy, the surrogate is inseminated with the sperm of the “intended father” or an anonymous donor. One of two procedures is used—intracervical insemination or intrauter-



Surrogacy has nothing to do with rights to a child and little to do with freedom.

ine insemination. With either procedure, sperm is inserted into the cervix or uterus with a catheter. Risks include “infection, multiple pregnancies, STI infection from the sperm and any risks associated with fertility drugs prescribed.” For artificial insemination, the most commonly prescribed drug is Clomid, which carries the risk of ovarian hyperstimulation, which in rare cases can be life-threatening. Other serious side effects of Clomid include shortness of breath, seizures, stroke, chest pain, vision changes, GI symptoms of pain, and swelling.

Gestational surrogacy, surrogacy where the embryo is created outside the womb and implanted in the surrogate, imposes on the surrogate even greater risk. Medications to control the surrogate’s menstrual cycle, including Lupron and Synarel, expose women to risks of fatigue, headaches, nausea, hot flashes, infection, bleeding, and allergic reactions, just to name a few.

Medications given to thicken the inner wall of the uterus carry additional risks, including from long term use: hyperplasia, a risk factor for uterine cancer, and increased risk for heart attack, stroke, blood clots, and breast cancer. Drugs used to prevent the surrogate’s rejection of the embryo may include Doxycycline and Methylprednisone. The latter, a type of steroid, carries with it “the risk of high blood pressure, glaucoma, cataracts, peptic ulceration and ‘major psychotic disturbances.’”

Although very few long-term studies have been conducted on the health effects on surrogates carrying babies “conceived” using IVF, the research that has been conducted is noteworthy. On October 21, 2011, BioNews.com reported that American researchers have found that women receiving IVF treatments face a 40 percent greater chance of preeclampsia than women who do not undergo IVF treatments. This finding mirrors a 2011 Dutch study.

Additionally, IVF carries a greater risk of multiple pregnancies. With IVF, a doctor will implant in the surrogate multiple embryos to improve the chances of implantation. Multiple pregnancies pose an increased risk of anemia, urinary tract infections, high blood pressure, and organ damage.

Psychological Harm. Very little research has been publicized about the psychological impact of surrogacy on surrogates. In 2007, the Southern Cross Bioethics Institute published an article entitled, “Oh Baby, Baby: The Problem with Surrogacy.” In that article, author Matthew Tieu,

“Parental rights are transformed into property rights that can be sold to the highest bidder.”

discussed the natural maternal instinct women have to their natural children. Surrogacy, according to Tieu, requires a suppression or deflection of those feelings. In some cases, in order not to become attached to the child growing inside them, some women deflected their emotions on the “intended parents” and became upset if the intended parents moved on with their lives, taking the child and leaving the surrogate behind. Other surrogates, to break the natural bond with the child, emotionally detached from the child from the moment of conception claiming to be “simply a hotel.” Terming it “cognitive dissonance reduction strategies,” this type of brain-washing, according to Tieu, plays a critical role in successful surrogacy. Citing a study where women did not receive this ongoing therapy due to the bankruptcy of the surrogate broker, altruistic feelings are replaced with “loss, pain and despair when parting with their child.”

Surrogacy Hurts Children

“It looks to me like I was bought and sold,” writes a blogger on the website theothersideofsurrogacy.com. “You can dress it up.... You can pretend these are not your children.... The fact is that someone has contracted you to make a child, give up your parental rights and hand over your flesh and blood child.”

Very few, if any, studies have been conducted on the psychological impact of surrogacy on the child “produced” by the technique. If this blog entry, however, even remotely reflects its negative impact on the children, it could prove to bear consequences far more dangerous than ever imagined.

Physical Harm. Evidence showing the physical harm of gestational surrogacy brings cause for alarm as well. Children produced by IVF are 20-30 percent more likely to suffer birth defects, according to a 2012 report published in *Fertility and Sterility*. Furthermore, these physical disabilities may not be realized at birth. IVF can produce abnormalities in the blood vessels, leading to an increased risk of heart attacks and strokes. A 2010 report found that IVF may increase the risk of diabetes, certain cancers, and the onset of high blood pressure in an IVF child before the age of 50.

Surrogacy Weakens Parental Rights

Parental rights are an essential part of parenthood. In a free society, they provide the legal shield to allow parents to rear children as they deem appropriate. Under John Locke’s view, the right, recognized in English common law, emanates from the obligations parents assume with parenthood.

Throughout American history, parental rights were considered a fundamental liberty and were protected by government. Because of the natural bond with their children, parents were assumed better equipped than government to act in the child’s best interest.

Surrogacy agreements fundamentally change the character of parental rights and the role of government to protect them. As a result of denying parenthood as a relationship based on altruism, parental rights are transformed into property rights that can be sold to the highest bidder. Government’s involvement changes from the protector of parental rights of natural/adoptive parents to the referee between the aggrieved buyer-“parent” and the seller-“parent.”

Conclusion

Throughout history, man has succumbed to the temptation to commodify human life. The Prophet Amos in the Old Testament, quoting Yahweh, chastised the Israelites, “I ... will not relent: Because they have sold the upright for silver and the poor for a pair of sandals.” (Amos 2:6) For centuries, man has bought and sold human beings for political and financial gain. Now history is repeating itself with surrogacy, where women are treated, solely, as wombs to be “rented” for the production of children, sold before conception, that they do not want.

A diagnosis of infertility can be the most devastating news a woman can ever hear. Many times, this news comes after years of fertility treatments. A couple turns to surrogacy as a last resort.

Yet, the ends never justify the means. In a free society, the government’s primary obligation is to protect inherent rights and to serve the people. Consequently, the government should never allow the rich to exploit the poor or allow the strong to dominate the weak. Furthermore, that same government should never allow the commodification of women or the sale of innocent children, despite the desperate circumstances used to justify it.

The issue of surrogacy challenges everyone to see what the media disguises and the politicians ignore. North Carolinians should demand that surrogacy be banned in this State for the sake of the poor and innocent. ❖

Mary Summa, J.D., is an attorney in Charlotte, North Carolina, who served as Chief Legislative Assistant to U.S. Senator Jesse Helms during the 1980s. For a footnoted version of this article, please visit ncfamily.org.

Courts

Legal Actions Across Our State and Nation

compiled by:
**Brittany
Farrell**

Government Prayer Challenged

The Rowan County Board of Commissioners will defend a lawsuit aimed at forcing the County to halt its long-standing practice of opening meetings with prayers that are almost all sectarian, specifically Christian. The Board voted unanimously on March 18 to fight the lawsuit that was filed by the American Civil Liberties Union of North Carolina (ACLU-NC) on behalf of three Rowan County citizens. The lawsuit, *Lund, et.al, v. Rowan County*, seeks an injunction enjoining the Rowan County Board of Commissioners “from knowingly and/or intentionally delivering or allowing to be delivered sectarian prayers at meetings of the Rowan County Board of Commissioners.”

In a meeting on March 25, the Board voted to retain the legal counsel of David Gibbs, III, a Christian attorney who heads the National Center for Life and Liberty, in its defense against the ACLU-NC lawsuit. According to the *Salisbury Post*, Mr. Gibbs is donating his time to the County. Other legal groups, including the Alliance Defending Freedom (ADF), will assist Mr. Gibbs in his defense of Rowan County.

According to the *Salisbury Post*, the ACLU-NC sent a letter to the Board in mid-February, stating that they had “received more complaints about sectarian legislative prayer by the Rowan County Board of Commissioners than any other local government in North Carolina in the past several years”

—“four to five,” according to a follow-up question by WBTV to the ACLU-NC Legal Director Katy Parker. The Rowan County commissioners, who generally alternate amongst themselves to lead the opening prayer, opened their February 21 meeting with a prayer invoking the name of Jesus.

The ACLU-NC has sent letters to more than a dozen local governing bodies across North Carolina, urging them to halt the practice of opening meetings with sectarian prayers. The ACLU's efforts were energized by the U.S. Supreme Court's 2012 decision not to consider an appeal of a case involving the Forsyth County Board of Commissioners' public invocation policy that allows prayers to specific deities. In July 2011, the U.S. Court of Appeals for the Fourth Circuit upheld a district court ruling that the application of Forsyth County's prayer policy is unconstitutional. However, the decision conflicts with previous rulings by the Eighth and Eleventh Circuit Courts. The Supreme Court's decision to not hear the appeal leaves room for disagreement among legal scholars over the constitutionality of various government prayer policies.

Marriage at the Supreme Court

On March 28, the U.S. Supreme Court began hearing oral arguments in the first of two landmark cases concerning the definition of marriage, *Hollingsworth v. Perry*, a case involving the constitutionality of California's Marriage Protection Amendment, Proposition 8, which provides: “Only marriage between a man and a woman is valid or recognized in California.” On March 29, the justices heard oral arguments in the second marriage case before the high court, *United States v. Windsor*, which involves a challenge to the constitutionality of Section 3 of the federal Defense of Marriage Act (DOMA), which defines marriage for federal purposes as “only a legal union between one man and one woman as husband and wife.”

During oral arguments in the *Hollingsworth* case, justices questioned attorneys on whether the parties should even have standing for the case to be considered by the Supreme Court. If the Court were to find a lack of standing, it could dismiss the case without ruling on the merits of the question of marriage. Attorney Charles Cooper, who is defending Proposition 8, argued that the fact that California's government officials declined to defend the Amendment necessitated that a non-government group take up the case. He argued in particular that “it is essential to the integrity, ... of the initiative



process in that State, which is a precious right of every citizen, ... designed to control those very public officials, to take issues out of their hands” when those officials refuse to defend a state statute or constitutional amendment. He emphasized that, “if public officials could effectively veto an initiative by refusing to appeal it, then the initiative process would be invalidated.”

According to a transcript of the hearing, Cooper proposed that:

The question before this Court is whether the Constitution puts a stop to that ongoing public debate [over whether the age-old definition of marriage should be changed to include same-sex couples] and answers this question for all 50 states.

The answer could only be “yes,” according to Cooper, if “no rational, thoughtful person of goodwill could possibly disagree” with the redefinition of marriage. He summarized the defense of Proposition 8 and traditional marriage, saying:

The concern is that redefining marriage as a genderless institution will sever its abiding connection to its historic traditional procreative purposes, and it will refocus, refocus the purpose of marriage and the definition of marriage away from the raising of children and to the emotional needs and desires of adults.

In response to questioning on whether sexual orientation deserved a heightened level of scrutiny and protection, Cooper pointed out that the “class” of sexual orientation “is quite amorphous. It defies consistent definition.”

Chief Justice John Roberts made an interesting observation on the question of exclusion, saying:

I’m not sure that it’s right to view this as excluding a particular group. When the institution of marriage developed histori-

cally, people didn’t get around and say let’s have this institution, but let’s keep out homosexuals. The institution developed to serve purposes that, by their nature, didn’t include homosexual couples.

Justice Sonia Sotomayor questioned Ted Olson, the attorney representing the challenge to Proposition 8, on the reasonableness of limiting marriage in any way, asking, “If you say that marriage is a fundamental right, what State restrictions could ever exist? Meaning, what State restrictions with respect to the number of people, with respect to ... the incest laws ... ?”

Justice Samuel Alito highlighted one of Cooper’s primary arguments against overturning Proposition 8, when he asked, “On a question ... of such fundamental importance, why should it not be left for the people, either acting through initiatives and referendums or through their elected public officials?”

The Supreme Court is expected to issue final decisions in both *Hollingsworth v. Perry* on Proposition 8 and *United States v. Windsor* on DOMA in June.

Domestic Partner Benefits

Buncombe County is now the fourth county in North Carolina to offer domestic partner benefits to the unmarried opposite sex and same-sex partners of county employees. In a 4 to 3 vote on March 19, the Buncombe County Board of Commissioners approved a policy that “extends benefits and leave policy coverage to same and opposite sex domestic partners” to employees of Buncombe County. The benefits include health insurance, life insurance, and family leave benefits allowed by the federal Family and Medical Leave Act.

The policy defines a “domestic partner” as:

A committed relationship between two individuals of the same or opposite sex who are legally competent and at least eighteen (18) years of age, who live together in a long term relationship of indefinite duration, who are not legally married to each other or to anyone else, or in the case of same sex couples, are legally prohibited from marrying each other in the State of North Carolina or have an out of state marriage not recognized by the State of North Carolina, and are jointly responsible for each other’s common welfare and financial obligations.

It also specifies that the relationship must have been in existence for at least one year, and that the unmarried partners must have lived together for at least one year and must intend to do so indefinitely. Applicants are also required to execute a “Domestic Partner Agreement” and file it with the county human resources department to qualify.

The Campaign for Southern Equality (CSE), a homosexual advocacy group based in Asheville that



has been pushing counties and cities across North Carolina to adopt similar policies, celebrated the Buncombe County vote in a press release, describing it as a “big victory for LGBT rights.” According to the CSE, four counties in North Carolina now offer domestic partner benefits to the homosexual partners of county employees: Durham, Mecklenburg, Orange, and Buncombe counties. Several cities also offer domestic partner benefits, including Asheville, Carrboro, Chapel Hill, Charlotte, Durham, and Greensboro.

During the debate over the North Carolina Marriage Protection Amendment, which was approved by a majority of North Carolina voters in May 2012, homosexual advocacy groups and their allies argued that the amendment would prohibit local governments and counties from offering domestic partnership benefits to their employees. Opponents of the amendment argued that the term “domestic legal union” would have negative legal effects on homosexual and heterosexual cohabiting partners.

However, marriage amendment proponents argued in a response that state and local governments “could still extend employment benefits that impact or benefit non-married domestic households.”

Jere Royall, counsel for the North Carolina Family Policy Council, commented on the Buncombe County policy, by emphasizing that:

The question for any North Carolina governmental body offering domestic partner benefits is whether they are basing them on a definition of a relationship that creates a status similar to marriage. The applicable Marriage Protection Amendment language states: ‘Marriage between one man and one woman is the only domestic legal union that shall be valid or recognized in this State.’

NCFPC Supports Challenge

The North Carolina Family Policy Council joined several national and state-level groups in filing a friend-of-the-court brief challenging the Obama Administration’s controversial requirement that nearly all employers include abortifacient drugs, contraceptives, and sterilizations as part of their health plans without co-pays. The 32-page brief was filed with the U.S. Court of Appeals for the 4th Circuit on March 7 to support Liberty University in its challenge to the contraceptive mandate in the case *Liberty University v. Geithner*. The Alliance Defending Freedom (ADF) and Americans United for Life were joined in the brief by family policy groups in states that are affected by rulings issued by the 4th Circuit. Those groups include the Virginia Family Foundation, the West Virginia Family Policy Council, the Maryland Family Alliance, the North Carolina Family Policy Council, and the Palmetto Family Council.

“Four counties in North Carolina now offer domestic partner benefits to the homosexual partners of county employees.”

The brief argues that the mandate to include coverage for abortion-causing pills “draws all of its compulsive power from the employer mandate ... and is but a symptom of the illness that is the employer mandate’s broad grant of power to HHS.” It explains that the employer mandate:

Imposes punitive fines on employers, including religious employers, who fail to meet its demands. Its coupling with the broad grant of authority to HHS to order coverage of services that contravene the religious conscience of thousands of religious employers has resulted in an unprecedented attack on religious liberty.

The brief goes on to point out that Liberty University’s fears have been realized in the Administration’s use of the employer mandate as a “bludgeon with which the government is empowered to violate religious employers’ conscience.” It concludes:

So long as HHS remains empowered to attack religious exercise and unencumbered by any conviction that religious employers, particularly for-profit employers, have any free exercise rights at all, these violations of religious freedom will continue.

The brief additionally argues that, “The government has completely failed to demonstrate that it has a compelling interest for this burden on religious employers.” It points out that, “The government has merely asserted the generic and abstract claims that the HHS Mandate will achieve women’s health and equality.” However, the brief argues that:

If a government interest is truly compelling, one would expect that the government would make its coverage universal rather than exempting many millions from its reach. Yet the government has voluntarily omitted from its supposedly paramount health and equality interests millions of employees, demonstrating that its interests are not compelling.

ADF is currently assisting 10 lawsuits specifically challenging the contraceptive mandate in the new healthcare law. ❖

Brittany Farrell is assistant director of policy for the North Carolina Family Policy Council and editor of Family North Carolina. For a footnoted version of this article, please visit ncfamily.org.

On Air With Ryan Scott Bomberger



Ryan Scott Bomberger is co-founder and chief creative officer at The Radiance Foundation, an educational organization that uses creative ad campaigns, multi-media presentations, and compassionate community outreach to illuminate the intrinsic value of every person. An Emmy® Award-winning creative professional, Ryan is known for the bold “TooManyAborted.com” billboard/web campaign, which he created with his wife and is the first

pro-adoption themed ad campaign to address the disproportionate impact of abortion in the black community. The effort received massive media coverage by *The New York Times*, *USA Today*, CNN, MSNBC, the *Washington Times*, and Fox News. Working in conjunction with noted national civil rights leaders like Dr. Alveda King (niece of Dr. Martin Luther King, Jr.), Ryan is involved in national efforts to expose the pro-abortion industry by illuminating the human rights injustice that is abortion. He is a featured blogger on *LifeNews.com*, and a graduate of Regent University, where was named the 2012 Alumnus of the Year.

The following is an edited transcript of an interview with Ryan Bomberger, which was conducted by Bill Brooks, president of the North Carolina Family Policy Council. An edited version of this interview aired in March 2013 on the Council’s weekly radio program, “Family Policy Matters.” Ryan, who was adopted as an infant, shared his personal testimony, and talked about the power of adoption and the creative ways his organization is promoting the sanctity of human life. This interview can be heard at <http://www.ncfamily.org/radioshowarchives2013.html> or on iTunes® Podcast—Family Policy Matters.

Bill Brooks: Ryan, I want to start by asking you to share your testimony, which really highlights the heart of the sanctity of human life. Tell us about your birth mother, and about the family that adopted you as a baby.

Ryan Bomberger: Well, sometimes when you hear people who are very passionate about the life issue, you wonder what is the back-story. Being pro-life is basically part of my DNA—it courses through my veins. I was adopted as a baby into a little American family, the size of 15 [including my parents]! I had six brothers and six sisters, and it was a multi-racial Christian family, and just a beautiful situation to grow up in. I had two parents who just loved the mess out of us, and 10 in our family were adopted. My birth mother faced a very difficult choice at one point, and you could say that I was born as a result of an extreme act of violence, and yet she had the courage to go through nine months of a traumatic pregnancy, and gave me life. And she probably never realized the incredible wave of events that her singular choice kind of set off, making the plan for adoption, allowing me to

be loved like crazy by my family, and of course now today I’m also an adoptive father with four children. And so that’s pretty much how my life began ... immersed in love, immersed in the understanding of a God that makes the impossible happen every single day.

BB: Well your story is really powerful, especially since an argument we often hear in the debate over abortion is, “well, what about pregnancies that result from rape?” And there is sort of this idea that abortion has to remain legal for women who find themselves in this situation and become pregnant. How does this argument make you feel as a young man who came from this kind of, as you described it, violent situation? What is your response to this argument?

RB: Well, there has to be a whole lot of compassion that is extended toward all those involved in this. I think what happens sometimes when we talk about how every life is precious, we want to protect the life of the unborn child, [but] I think, at times, the woman that has gone through that horrendous ordeal is sometimes forgotten. And we have to remember her in all this, and reach out with compassion, and provide a means for her to experience deep healing, because that’s what she needs after an act of such inexplicable violence, she needs that kind of healing. And the shame of it is our society wants to throw abortion as a solution to everything that is unplanned and particularly in these horrific cases. And yet, abortion never brings healing to women, abortion never un-rapes a woman, and abortion never punishes the rapist. Abortion never punishes the attacker. And I wish in the public square we would talk more about punishing the actual guilty individual in this, and doing more to protect the lives of women and children. So, I am just grateful that my biological mother had the courage to go through pregnancy and make an adoption plan, to hold on enough to get past the immediate moment of, you know, unfathomable pain and confusion. And that’s what happens in these cases, so many are fixated on the immediate moment, and they don’t see the possibility of what can happen in the future. And quite honestly children, and I meet a number of them across the country who are a result of this kind of violence, are the only thing that can redeem such an act of violence. And that is what I hear from women who have experienced this across the country, women who have chosen to carry their children, or chosen to parent the children who are a result of this violence. So, I just wish there were a broader conversation in the public square about

this, instead of immediately throwing abortion as some sort of solution.

BB: Tell us about The Radiance Foundation, which you co-founded with your wife, Bethany. What is the purpose and vision of your organization?

BR: Well, we love doing things a little unconventionally. We started back in 2009. My wife is a teacher by profession, and I'm a creative professional, and having been inspired by a lot of great historical American figures, one in particular, Frederick Douglas, who told us to agitate, agitate, agitate, when dealing with issues of injustice, particularly slavery. I consider myself a creative agitator. And the reason why we started The Radiance Foundation was to illuminate the truth about a myriad of social issues, all in the context of God-given purpose. And so our vision for our organization is, basically, we want ... people to understand that ... they have irreplaceable, intrinsic value. And so we do that through creative ad campaigns, we do that through multi-media presentations across the country and actually outside of the country. And we also engage in compassionate community outreach, and those are the ways that we illuminate the beautiful intrinsic value that we are all given—this God-given intrinsic value that we all possess.

BB: Ryan, one of your most powerful campaigns has to do with abortion in the black community. Tell us about the “Too Many Aborted” campaign?

RB: Well, toomanyaborted.com began back in 2010. Our first campaign was about 80 billboards launched in metro-Atlanta area. Nothing like combining the volatile issue of abortion and race in the South! And that campaign exploded, and it was thanks to Georgia Right to Life, who actually funded the billboards. With this campaign that I created, we wanted to expose the eugenic racism that Planned Parenthood was birthed from, and talk about the continued racial targeting, the hugely disproportionate impact of abortion in the black community, where today black babies are aborted up to six times more than those of the majority population. And we called out black leaders in particular, like the NAACP, Congressional Black Caucus, and those leaders that either completely ignore this epidemic, or are actually aiding and abetting this epidemic.... Of course, I have to emphasize that we take the approach at The Radiance Foundation that abortion is a tragedy no matter the race, but we wanted to highlight the community and the demographic that is hardest hit. In New York City, more black babies are aborted than are born alive, and this is a tragedy that does not get to see the light of day. And until we launched toomanyaborted.com, it was barely mentioned, other than by some of our friends in the civil rights movement, like Dr. Alveda King [and others] who

“There’s no way to look at the issue of abortion and not look at the fatherlessness epidemic in our country.”

had been sounding this alarm for years, but never had any kind of public initiative or ad campaign. And so we’ve placed 500 plus billboards in major cities across the country.

BB: The Radiance Foundation recently launched a campaign encouraging responsible fatherhood. Share with us some of the ways you are encouraging strong fatherhood, and why this is important to reducing abortion in our society, and particularly in the black community.

RB: One of our campaigns is called “Fatherhood Begins In The Womb,” and we work together with Walter Hoy at Issues for Life Foundation based in California, and this initial campaign was launched in California. and We’ve launched in several other places, including Virginia. There’s no way to look at the issue of abortion and not look at the fatherlessness epidemic in our country, and that’s what we’re facing right now. Abortion and poverty have taken the place of fatherhood. When you look at the abortion stats, 1.21 million abortions a year in our country, out of those 1.21 million abortions, 85 percent of those are unmarried women, and that percentage continues to increase, decade after decade after decade. We have a fatherlessness epidemic in our country, where 41 percent of our children—our precious children—are born into homes without fathers. And as a father of four, I cannot help but look at this issue, and want to sound the alarm, and ask, “What is going on?” Back in the 60s, Daniel Patrick Moynihan sounded the alarm because the out-of-wedlock birthrate was 25 percent in the black community; today it’s 72.3 percent. It is devastating our communities. In fact, to see two-parent, married families in the black community is such a rarity—less than 30 percent of households in the black community are led by two married parents, a mother and a father—and that has disastrous consequences.

And so we talk about the issue of abortion, we talk about the vulnerability of certain communities, and the best way for the abortion industry to continue to target certain communities is to keep them vulnerable, and when you have [very few]

two-parent married families ... in the black community that provides an incredible level of vulnerability. When you take fathers out of the picture, you leave children to grow up in homes in poverty. In fact, children who grow up in single female-led homes, are five times more likely to live in poverty, so these are some of the issues that we have to address, because they are all inextricably tied to abortion. Women, as resilient and resourceful, as incredible as they are, were never meant to play the role of both mother and father.

BB: Adoption is another important issue for you, and I know The Radiance Foundation recently launched the “Adopted and Loved” campaign. One of the myths in our society that is related to both abortion and adoption is what you have described as the “myth of the unwanted.” Is there such a thing as an “unwanted child,” and how do we change how society views unplanned pregnancies

to where adoption is the first thought that comes to mind, and not the last?

RB: We emphasize adoption in much of what we do. Of course, anytime we ever address the issue of abortion, you cannot talk about abortion and not talk about one of the two life-affirming alternatives to that, and of course that’s adoption. The abortion industry, of course, has no interest in presenting that as a viable option, as we see in Planned Parenthood’s own statistics—they abort 145 children for every one adoption referral. And so we champion this cause of adoption—it’s a beautiful option; it’s an act of love; an act of justice; it’s an act of mercy. And yet we find there’s so many misconceptions about adoption. I’m an adoptee, and I’m an adoptive father, and it blows my mind that in 2013, [there are] those who are part of the church, especially those who claim to be Christians, who cannot grasp the very simple concept of adoption. There’s no salvation without adoption.... And so part of what we do when we travel around conferences, churches, college campuses, and schools is we talk about this “myth of the unwanted.” The problem with all that is it’s so much easier to discard human life, when you can label that life “unwanted,” which is what the abortion industry does. They say an unplanned pregnancy means that child is going to be unwanted, and that child’s going to be unloved, and an unloved child is a dangerous child. And that is the entire false premise that the abortion industry is based on. And we propose the opposite to that, which is purpose and possibility, and we look at examples of powerful adoption stories. I mean, our family is just one of many. In my family, my wife and I [have four children], two of which are adopted. But out of my four children, three were unplanned! The majority of children are actually unplanned, but that certainly doesn’t mean that they’re unworthy of being loved by a family. And so we’re trying to introduce the conversation in some places, and to talk about the beautiful stories that typify the adoption experience. ❖

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	WOGF 1450 AM	Saturday, 3:45 PM
Charlotte/ Harrisburg	WOGF 88.3 FM	Saturday, 3:45 PM
Fayetteville	WCLN 107.3 FM	Saturday, 7:00 AM
Forest City	WWOL 780 AM	Wednesday, 8:45 AM
Gastonia	WGAS 1420 AM	Saturday, 3:45 PM
Greensboro	WKEW 1400 AM	Sunday, 9:30 AM
Greensboro/ Winston-Salem	WTRU 830 AM	Saturday, 6:00 AM
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New Bern	WSTK 104.5 FM	Saturday 3:15 PM
Newland	WECR 1130 AM	Saturday, 9:06 AM
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Shallotte	WVCB 1410 AM	Wednesday, 10:05 AM Sunday, 12:45 PM
Troy	WJRM 1390 AM	
Wilmington	WMYT 106.7 FM	Sunday, 1:00 PM
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