

Lifespan *news*

Volume 22 Number 9

Serving Southeastern Michigan Since 1970

December 1993

The Hard Cases

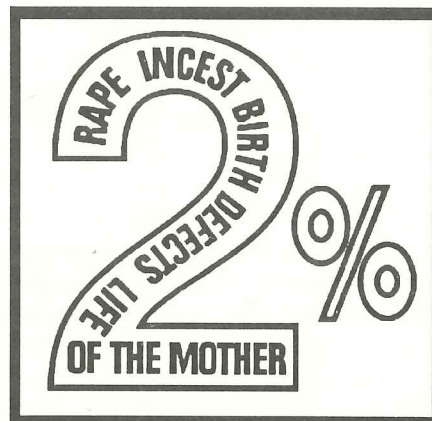
A few years ago, the Alan Guttmacher Institute (AGI—the research arm of Planned Parenthood) conducted a survey of 1,900 women from throughout the U.S. who had undergone abortions. The purpose of the survey was to determine why women abort. Based on responses to the survey, an overwhelming number of these abortions were done for “convenience” reasons. Only about 2% of these abortions represented what Americans think of as the “hard cases”—rape, incest, fetal deformity or risk to the mother’s life.¹

While 13% of the women in this survey did list fetal health problems as a reason, less than 10% of these women had actually been informed by a doctor of a diagnosed problem. Consequently, only about 1% of these women aborted because of an actual fetal condition.

About 7% of mothers cited personal health as a reason for the abortion, with most claiming their mental or emotional health was threatened by their pregnancy. Actual endangerment to the mothers’ lives was statistically negligible in this survey.

Less than 1% of these women were aborting because they were pregnant from either rape or incest. Studies indicate that pregnancy from rape occurs in only 0-2.2% of victims.² The following medical realities back up this low incidence rate for pregnancies:

- The occurrence of conception from any single act of unprotected intercourse is placed at two to four percent.
- The trauma of sexual assault is likely to inhibit ovulation.
- A high incidence of sexual dysfunction among sexual assailants is documented.³



According to Thomas W. Hilgers, M.D., director of the Pope Paul VI Institute for Reproductive Medicine, the incidence of pregnancy for incest victims is also very low. Dr. Hilgers has done extensive study on this subject and discusses these facts in an audio tape entitled, “Rape and Incest.” Because incest is a hidden and “hushed up” crime, explains Dr. Hilgers, the guilty party will go to great lengths to protect his secret. “Often the incestuous father will use protection (birth control).

Frequently, the offense is petting, rather than actual intercourse,” notes Dr. Hilgers. Sometimes, the sexual abuse will stop before the girl starts her menstrual cycle and becomes capable of conceiving. Rape/incest, fetal deformity and maternal health problems represent a very small percentage of abortions done each year in this country, but no one can deny that these hard cases do exist. Many people on both sides of the abortion conflict find common ground in these cases. Often, individuals who consider themselves “pro-life” see abortion as a viable solution for women in these hard case situations. But is abortion the only choice for these women? Is it the best choice?

Obviously, even in these tough situations, the life of a child is taken in an abortion. In the case of rape, an innocent child is punished because of the crime committed by the baby’s father. In a study on sexual assault, Dr. S. Mahkorn relates that rape victims feel intense guilt after they have been assaulted. Guilt over aborting a subsequent child greatly compounds this feeling, increases the victim’s trauma, and makes recovery more difficult.⁴ Dr. Hilgers remarks that people believe abortion will somehow “solve” the emotional problems caused by rape or incest. “Abortion as the cure for the crimes of rape and incest is nothing

continued on page 2

NEWS NOTES

Clinic 'term'

In Crown Point, Indiana, fourteen abortion protesters were sentenced to sit silently in an abortion clinic's waiting room for eight hours.

The 14 must sit without speaking or handing out anti-abortion literature, Lake County Superior Court Judge Bernard Carter ruled. They also must perform 400 to 500 hours of community service at a health-care facility.

"I didn't want to send them to jail, but I did want them to do something that would make them uncomfortable, make them think about what they're doing," Carter said.

Those who cannot morally abide the sentence will have to serve 18 months in jail, Carter said. Twelve other protesters were sentenced to lesser amounts of community service.

—*Chattanooga News-Free Press*
October 2, 1993

Planned Parenthood

The 1992-93 Annual Report from the International Planned Parenthood Federation (IPPF), is out, and all affiliates in the 133 countries where IPPF operates have been given their directives. Somewhat exuberant over the American election of pro-abortionist Bill Clinton, IPPF president Dr. Fred Sai states emphatically in the Report "...no longer will anti-choice campaigners worldwide be able to claim respectability from the attitudes of the United States President and Government. The tide has turned for reproductive choice, and we must all take advantage of that, and no longer be afraid of tackling the abortion issue."

—*Toronto RTL Assoc., News Canada*
Summer/Fall 1993

MTV

On MTV's *The Week in Rock* on August 28, Snapple co-founder Arnold Greenberg denied two rumors plaguing his company: "One [rumor] is that we support the KKK, [but] the most vicious rumor...is that we donate money to right to life causes."

—*National Review*, October 4, 1993

The Hard Cases

continued from page 1

more than a cover-up—a smoke screen for the real problems." He stresses the need to move towards less violent solutions, addressing the real problems and helping the victims.

When people see abortion as the only solution for a pregnant incest victim, it may be because of fear that she will give birth to a "genetic monster." Becky Smith, who is herself both the product of an incestuous relationship, and a victim of incest, is trying to dispel this misconception. "One of the biggest myths is that incest causes severe deformities," notes Mrs. Smith. "Research proves that just because there is a consanguineous conception (matings between blood relatives), it does not greatly enhance genetic defects unless a defective trait is being carried anyway. In other words, if a genetic disease does not already run in the family, the conception would not create one!"⁵ Mrs. Smith has used her personal story to help other incest victims speak out. She has been a guest on the *Maury Povich Show*, and numerous radio programs, and has written a booklet entitled, "Family Secrets."

Abortion because of a fetal deformity delves into how we value human life. Is a child less valuable because he or she is blind, or has Down's Syndrome, or a cleft palate? Does a birth defect somehow diminish a child's worth as a human being? Though some individuals claim that such children may have less "quality of life," who can judge this? What is to stop such thinking from carrying over to those people who become handicapped later in life? Is it also kinder to "euthanize" these individuals? History documents that Adolf Hitler favored extermination programs for these "imperfect" people.

"Life of the mother" has long been a strong argument in favor of abortion. If there is a situation where the doctor must choose between saving the mother's life, or that of her child, the obvious choice is the mother, right? Or is it?

How often does pregnancy actually threaten a woman's life, and does abortion "save" the mother's life?

According to a recent statement made by a group of five physicians in Ireland, such instances are virtually non-existent. Their statement reads, "As obstetricians and gynecologists, we affirm that there are no medical circumstances justifying direct abortion, that is, no circumstances in which the life of the mother may only be saved by directly terminating the life of her unborn child."⁶

Each of these "hard case" situations is very complex. It is normal and right to feel sympathy for the women experiencing these difficult pregnancies and agonizing choices. At the same time, it is vital that we remember there are innocent babies involved in each of these situations. Their lives are at stake.

References:

¹Alan Guttmacher Institute, *Family Planning Perspectives*, July-August 1988.

²Dr. S. Mahkorn & Dr. W. Dolan, "Sexual Assault and Pregnancy," *New Perspectives on Human Abortion*, Frederick, MD: Univ. Pub. of America, 1981, p. 187.

³B. Uddo, "The Hard Case: Rape, Incest and Public Policy," *The Zero People*, Ann Arbor: Servant Books, 1983, p. 113.

⁴Mahkorn, *op. cit.*, p. 189-190.

⁵Becky Smith, "Family Secrets," *ALL About Issues*, July-August 1992, p. 17.

⁶"Statement by Obstetricians," May 1, 1992, issued by: John Bonner, MA, MD; Eamon O'Dwyer, MAO; David Jenkins, MD; Kiernan O'Driscoll, MD, MAO; and Julia Vaughan, MB, MAO.

—*LifeSUPPORT*, Spring 1993
Human Development Resource Council,
Inc., 3941 Holcomb Bridge Rd.
Suite 300, Norcross, GA 30092
(404) 447-1598

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MAIN OFFICE

28200 Seven Mile Rd., #127

Livonia, MI 48152-3736

(313) 533-9090



A Different Kind of Mothering

By Brenda Baker

An event occurred last summer that has forever changed my perspective on the sanctity of life. On July 29, 1992, while receiving my ninth treatment for a back injury, I was raped by my physical therapist in his office. After he finished the assault, I listened in shocked silence as he whispered softly, "I'm sorry." I dressed quickly and fled, driving myself home and did not communicate with anyone for days. I was shaken to my core, afraid to speak to anyone, to see anyone, to allow anyone to come in—a prisoner in my own home. As I began to cope with the trauma of the physical violation ten days after the rape, I was horrified to discover that I was pregnant as a result of this assault. Although this was devastating news, God has used it for good and blessed me with the subsequent results.

I found myself a single, unemployed, 38-year-old woman with a 21-year-old daughter, a 17-year-old son and pregnant by a man who had violated me. I was torn between my maternal instinct and a desire to purge myself of any connection with this ugly, evil circumstance. For the last six years, I had learned to let God guide every part of my life. I turned to Him for answers, and I knew then that I was to give life to this child. I found the decision to be the easiest one I would make. The difficult choice was deciding my child's future.

In my second month of pregnancy, I met with a counselor at Bethany Christian Services and began gathering adoption information. After discussing this option with my two children, they both agreed it would be best for me and the baby. However, they assured me that they would support any decision I made. During the next few months there were many difficult issues that had to be addressed. I watched the prosecutor's unsuccessful attempt to convict my rapist. I also had an amniocentesis in December and found that I was carrying a healthy, baby girl, and I called her Sarah, which is Hebrew for "princess." I

wanted to do what was best for my child, but the thought of forever relinquishing my daughter was unbearable. Only God's strength could get me through this intolerable pain and grief. I knew I wanted the best for her, so with heavy heart, I continued to arrange for her adoption. After the extensive process of reviewing backgrounds and having in-depth interviews with my counselor at Bethany Christian Services, a profile was established for the family I desired to raise my daughter. The counselor and I narrowed down the choice to three families and then, after interviewing them personally, I made the final decision.

Towards the end of my pregnancy, I became very ill with toxemia. I was hospitalized by my obstetrician, and the decision was made to induce labor six weeks prematurely. I almost died giving her life, but I knew if that had happened, it would all have been worth it. Sarah arrived on March 16, 1993 at 11:30 p.m. weighing 5 lbs., 3 oz., and she was 18 inches long. She was a beautiful, precious child of God: serene, content, curious, alert, expressive, responsive and with a mind of her own. Although she was conceived by rape, the Lord created a beautiful little girl who was deeply loved by her mother.

There was absolute peace in my spirit in the certainty of the choice I had made, but my heart was completely broken. The pain was so sharp it took my breath away, and the grief was so deep I could not stand it. Over and over again, I cried out to God to please bring

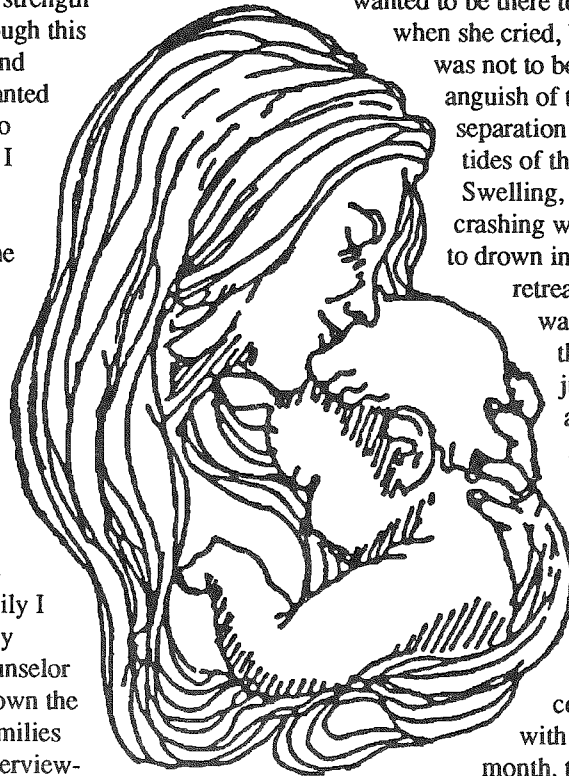
her back to me. I wanted to touch her hair again and feel her little hand wrapped tightly around my finger. I wanted to be there to comfort her when she cried, but I knew it was not to be. The anguish of the pain of separation was like the tides of the ocean. Swelling, surging, crashing waves, so easy to drown in, and then a retreat, ankle-deep water, wading through with just a ripple, and you can float for a while, catch your breath and then the cycle repeats. The tide continues to come and go with each passing month, the intensity lessens, but I know it will never completely disappear.

God lovingly and gently reminded me of His mercy and compassion for me and for my little girl, Sarah. The adoption was for our best. I know He has a wonderful future planned for both of us, but it will not be together. My life belongs to the Lord, so I will trust and obey and continue to follow wherever He leads me. I want it no other way. I thank God for his incredible grace and love, for the way He understands my pain and for the incredibly blessed gift of my children, each and every one.

—Brenda Baker has appeared on Kelly and Company, spoken at a women's prayer breakfast at Ward Presbyterian Church and Lifespan's Legislative Breakfast. She is currently pursuing a degree in nursing.

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Assisting Suicide

continued from page 12

killing themselves, suicidal individuals tend to think in a very rigid, dichotomous way, seeing everything in "all or nothing" terms; they are unable to see any range of genuine alternatives. Many seem to be locked into automatic thoughts and responses, rather than accurately to understand and respond to their environment. Suicide attempters also tend to maximize their problems, minimize their achievements, and generally to ignore the larger context of their situations. They sometimes have inordinately unrealistic expectations of themselves. During the period of their disorders, these individuals usually see life as much more traumatic than it actually is, and view temporary minor setbacks as major permanent ones. **Most of these attempting suicide are ambivalent; often, the attempt is a cry for help.**

Studies and descriptions of suicide attempters who were prevented from committing suicide by outside intervention (or, in some cases, because the means used for the attempt did not take complete effect) demonstrate that most suicidal individuals have neither an unequivocal nor an irreversible determination to die. For example, one study conducted by two psychiatrists in Seattle, Washington, found 75% of 96 suicide attempters were actually quite ambivalent about their intentions to die. It is not actually a desire to die, but rather the desire to accomplish something by the attempt that drives the attempter to consider such a drastic option. Suicide is the means, not the end.

Often, suicide attempters are apparently seeking to establish some means of communication with significant persons in their lives or to test those persons' care or affection. Psychologists have concluded that other motives for attempting suicide include retaliatory abandonment (responding to a perceived abandonment by others with a revengeful "abandonment" of them through death), aggression turned inward, a search for control, manipulative guilt, punishment, escapism, frustration, or an attempt to influence someone else. Communication of these feelings—rather than death—is the true aim of the suicide attempter. This explains why, paradoxically but truthfully, many say after an

obvious suicide attempt that they really didn't want to kill themselves.

Psychiatrists have long advanced the opinion that underlying a suicidal person's ostensible wish to die is actually a wish to be rescued; a suicide attempt may quite accurately be described, not as a wish to "leave it all behind," but as a "cry for help." To allow or assist in a suicide, therefore, is not truly fully respecting a person's "autonomy" or honoring an individual's real wishes.

The disorders leading many to attempt suicide are treatable.

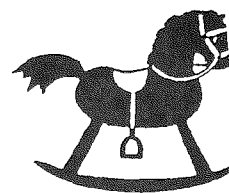
Depression can be treated. Alcoholism can be overcome. The difficult situations and circumstances of life which, at the moment, seem permanent and pervasive, often dissolve or resolve in time. The emotional and cognitive patterns of thought and emotion which cloud the suicide attempter's judgment and lead to feelings of utter despair and hopelessness, with proper psychiatric care, can be rechanneled in more rational, positive ways.

Crucial to such turnarounds is intervening to stop the suicide attempt and getting the attempter professional psychological assistance. Encouraging or validating the disturbed individual's feelings or misperceptions in fact makes it less likely the individual will get the help he or she needs and subconsciously probably wants.

Few of those rescued from suicide attempts try again.

Proof that most individuals attempting suicide are ambivalent, temporarily depressed, and suffering from treatable disorders is the fact that so few, once rescued and treated, ever actually commit suicide. In one American study, less than 4% of 886 suicide attempters actually went on to kill themselves in the five years following their initial attempt. A Swedish study published in 1977 of individuals who attempted suicide at some time between 1933 and 1942 found that only 10.9% of those eventually killed themselves in the subsequent 35 years. This suggests that intervening to keep an individual alive, rather than assisting the person to commit suicide, is actually the course most likely to honor the individual's true wishes, or to respect the person's "autonomy."

*—First appeared in the National Right to Life News, September 14, 1993
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Baby showers

On Sunday,
March 13, 1994,
2:00 to 3:30 p.m.,
Lifespan will

host approximately 20 baby showers simultaneously at different locations throughout the metro area for crisis pregnancy centers.

If you or your church are interested in hosting a baby shower, please call Mary Jo Raftery at 261-3383 or our Main Office at 533-9090.



Send your legislator a holiday greeting!

The holiday season is the perfect time to send a friendly greeting to your legislator, thanking him or her for their prolife support in the past year, or gently urging them to consider our issues in the coming year.

Your local Lifespan office has beautiful cards with a prolife sentiment for your purchase. See page 8 for addresses of legislators; if you are not sure of the name of your legislator(s), call your local City Hall.

Welcome, Baby Hope!

Baby Hope, who underwent experimental fetal surgery in September, was born November 9, weighing 4 lbs., 12 oz., at 32 weeks' gestation.

The high-risk surgery was successfully performed at 24 weeks' gestation at a California medical center to correct a severe birth defect, congenital diaphragmatic hernia. Hope had little chance of survival without this surgery.

Hope Elizabeth Dirian is doing well as are her proud parents, Susan Ferrans and John Dirian.

Contributions are being accepted by Lifespan to help with Hope's financial needs. Make your check payable to Susan Ferrans, and mail to Right to Life - Lifespan, 28200 Seven Mile Rd., Livonia 48152. Letters and cards of best wishes are also welcome and will be forwarded to Susan and John.

March for Life

"Yes, America, the Intent of Abortion is to Kill a Baby" is the theme of the 21st annual March for Life in Washington, D. C. The March will be on Friday, January 21, beginning at noon, with a Rally in the Ellipse.

On Saturday, January 22, a convention will be held at the Hyatt-Regency Capitol Hill Hotel followed by the Rose Dinner. Rates at the Hotel are \$87 for up to 4 persons per room. For more information about the March and/or Convention, please call 533-9090.

Say it with roses!

In conjunction with March for Life activities, live red roses will be delivered to each Member of Congress, the Supreme Court and the President and Vice President. If you too would like to "say it with roses," send your name, address, city, state, zip and phone, along with a tax-deductible contribution, to MARCH FOR LIFE, Box 90300, Washington, D. C. 20090.

Memorial candles

Prolife homes across the metro area will remember the millions of aborted

babies by burning candles on the eve of January 22. Right to Life - Lifespan Chapter offices have candles for your use; contact your local office for information and/or to obtain the luminaries for yourself or members of your church.

Calendar of events

Sanctity of Life Sunday - January 16
Kennedy Square Rally - January 16
March for Life/Convention,
Washington, D. C. - January 21
Baby Shower - March 13
Mother's Day Dinner - May 3

Rally for Life!

Memorial Rally
Sunday, January 16, 1994
2:00 - 3:00 p.m.
Kennedy Square, Detroit

*Speakers
Music
Fellowship*



Sponsored by Right to Life - Lifespan
For more information, call 874-0432 or 533-9090

Please complete this form and return it as soon as possible to Lifespan, 28200 Seven Mile Rd., #127, Livonia, 48152.

_____ Yes, we are interested in attending the Rally for Life!
Church Bus _____ Yes _____ No

_____ Yes, please list my church/organization as a co-sponsor of the Rally!

Your Name

Pastor's/Director's Signature (only if co-sponsoring)

Your Phone

Church/Organization Name



Chapter

Office hours

MWF 10-2; TTh Closed
Carol Smith, Chairman
Mary Cascos, Ofc. Mgr.

Holiday hours

Closed for Thanksgiving—
Nov. 25 and 26
Closed for Christmas—
Dec. 23 thru Jan. 2

Rally for Life

Each January, to memorialize the anniversary of *Roe v. Wade*, in cities all over this nation, large groups of pro-lifers gather to show their respect for human life.

For many years, the Detroit Chapter of Right to Life - Lifespan has been hosting a Rally in downtown Detroit. Each year we have great speakers and excellent media coverage.

We need you, your friends, your pro-life signs and banners and members of your congregation and organization to help us send a powerful life message to the people of metro Detroit.

We must let it be known that the Pro-life Movement is ALIVE and GROWING despite what the mass media says and despite the pro-abortion leadership in our government!

We cannot accomplish this through wishful thinking. Please pray for and come to our next Rally which will again be held at **Kennedy Square, on Sunday, January 16, 1994 from 2:00 to 3:00 p.m.**

Let's have as many people at the Rally as we had for the Life Chain. One hour of your busy life is all we're asking. Call us at 874-0432, and let us know how many are coming.

Regina Teens for Life

The Regina TFL started out this school year with elections of new officers, including Chris Cascos as president. Membership has increased this year to approximately 40 students.

Our new year started with several members attending the LIFE CHAIN. Two members attended the Michigan TFL Convention in Big Rapids on October 16. Activities there included a guest appearance of Gianna Jessen, the young 16-year-old who survived a saline abortion. She was quite an inspiration.

This year's activities include attending the Legislative Breakfast, a Lifesaver sale, a guest speaker for an

all-school assembly, Mother's Day flower sale, as well as, hopefully, sending several members to Washington, D.C. to March on January 21.

Thanks!

I wish to express my sincere thanks to the past and present members of the Right to Life - Lifespan Board members for their beautiful gifts and best wishes on my retirement. Everyone of you in some way made my job easier by your kind help and patience shown me in the years of my involvement with Lifespan. A special thanks to Madeline Satwicz for all the volunteer work she has done which was of tremendous help to me since her retirement from nursing.

My retirement is only from the job as office manager of the Detroit Chapter office, I will continue to be on the board for the Detroit Chapter. It is a great feeling when friends say they will miss you as I know I will miss all of you. Thank you, and God bless all of you for your dedication and love for the unborn.

—Betty Queen, an official retiree!

P.S. Thank you, Mary Cascos, for coming on the scene to make this a reality. They will love you.

Detroit Chapter
5930 Woodward Ave.
Detroit, MI 48202-3516
(313) 874-0432

Office hours

M, T, Th, F 12-3; W 10-4
Diane Fagelman, Chairman
Clare Schneider, Secretary

Holiday hours

Closed for Thanksgiving—
Nov. 25 and 26
Closed for Christmas—
Dec. 23 thru Jan. 2

Thanks

The Oakland Chapter office wishes to thank the following people for the time, talent and efforts they have undertaken in the past few months for new and ongoing projects for Lifespan: Doug Anter, Joe Cilluffo, Ginny Czarnecki, Terry Elya, Donna Gary, Colleen Giles, Mike Jagner, Dean Juriga, Kathy Labataille, Phyllis Lelli, Theresa Koehler, Kathy McKimmey, Monica Mylod, Carla

Page, Dennis Pozniak, Paul Rossetti and Ken Sands.

Lifespan for singles

Anyone 20 years of age and over interested in joining our new singles group, please call Dean Juriga, at 258-9760.

Oakland County Chapter
800 S. Adams, #102
Birmingham, MI 48009-7005
(313) 258-9760

detroit

oakland

News

Office hours

M-F 10-4

Patricia Holscher, Chairman

Holiday hours

Closed for Thanksgiving—
Nov. 24, 25 and 26

Closed for Christmas—
Dec. 22 thru Jan. 2

Renewals/ pledges

If you have recently received a renewal or reminder letter for membership which guarantees uninterrupted continuance of your *Lifespan News*, please respond promptly as we have outstanding bills to be paid. Our most immediate need is the down payment and freight charges for our 1993 Christmas cards.

It is virtually impossible to plan a budget in a non-profit organization as dues and donations vary each week. We urge you to consider a monthly pledge. This would allow us to rely on a specific amount of income on a month-to-month basis to cover routine monthly bills, i.e., rent, lights, telephone, insurances, printing costs for *Lifespan News*, postage, office supplies and periodicals.

And, for continuing expenses, i.e., booth rentals at the State and County Fairs, craft and educational exhibits, literature and videos for students' and personal use, membership envelopes and brochures.

Please join other monthly pledgers, and help relieve the burden and stress experienced by your county chairman and treasurer in trying

to "make ends meet" every month.

If you cannot make a monthly pledge, please consider signing up at least one new member in *Lifespan*. It is imperative that the general public receive prolife publications. Where else will they learn the truth and recognize the lies in the biased media and daily newspapers as well as the "double talk" heard from both elected and appointed representatives in Lansing and Washington?

You'd be doing your relatives, friends and church community a big favor by introducing them to *Lifespan News*. (Our newsletter has had rave reviews from different parts of the U.S. and England.) If you need brochures, membership envelopes or extra newsletters, call 422-6230.

Christmas cards

Card distributors are still needed for different churches. If you'd like to get your church involved or sell among your families, neighbors and friends, call for cards on consignment. These beautiful, prolife cards sell themselves at very reasonable prices.

Christmas crib

Don't forget your donation for the Christmas Crib. See article and envelope in Oct./Nov. *Lifespan News*.

Wayne County, West and Downriver Chapter
27578 Schoolcraft
Livonia, MI 48150-2203
(313) 422-6230

From the President's Desk

Dear Friends,

Although *Lifespan* is primarily an educational organization, one of our functions is to refer pregnant women to crisis pregnancy centers (CPC) for counseling and assistance. However, just about three years ago, our offices were seeing an increasing number of women who did not fit the criteria of the CPCs, yet were desperate for help.

Some callers had no formula or food, some needed diapers, some had no clothes to bring their babies home from the hospital—some had nothing at all. If you have ever had to contact the government or agencies for anything, you can understand the frustration we felt, and they were living. After hundreds of phone calls and a lot of money out of our own pockets, *Lifespan* decided to fill the crack through which these women and babies were falling.

Wee Care was born.

The Wee Care program was designed to offer emergency assistance to pregnant women and to those with babies. It is everything we wanted it to be and more. Hundreds and hundreds are finding their way to our door, and the burden has primarily fallen on our Wayne West Chapter office in Livonia. Pat, Linda and volunteers have untiringly nurtured this program with their love and time. We have also been blessed with donations of items, money and storage space.

However, we have recently had to make a major decision about the future of Wee Care based on two important factors. We may soon lose our free storage room; also, the project has become too unwieldy and time-consuming for one chapter office.

We are currently looking at inexpensive space in the building where the *Lifespan* Main Office is located. We are also in need of one director to dedicate 20 hours per week solely to this program. For Wee Care to survive and continue to serve the hundreds who so desperately depend on us, we must look to you and the community for greater assistance. Please consider making a financial donation or pledge to Wee Care. You might also give diapers or formula, clothing or even a crib. We also need your time and talents.

The well known Christian author, John Powell, S. J., asks in his book, *Abortion: The Silent Holocaust*, three lonely questions. "Is anyone there? Does anyone see what I see? Does anyone care?" Let's unequivocally answer, "Yes, Wee Care."



P.S. Call me, 533-9090.



Legislative Update



Hazardous to Your Health

Addresses

President

President Bill Clinton
The White House
Washington, DC 20500
Opinion Line (202) 456-1111, before 5 PM
(202) 456-1414, after 5 PM
Fax Number: (202) 456-2461

Dear Mr. President:

U.S. Senators

The Honorable (Carl Levin, Donald Riegle)
United States Senate
Washington, DC 20510
(202) 224-3121

Dear Senator (last name):

U.S. Representatives

The Honorable (first and last name)
House of Representatives
Washington, DC 20515
(202) 224-3121

Dear Congressman or Congresswoman
(last name):

Governor

The Honorable John Engler
Office of the Governor
P.O. Box 30013
Lansing, MI 48909
(517) 373-3400

Dear Governor Engler:

Michigan State Senator or Representative

The Honorable (full name)
State Capitol
Lansing, MI 48913
(517) 373-1837

Dear Senator (last name):

or

Dear Representative (last name):

President Clinton is urging Congress to approve his national health bill, which would make abortion a government-guaranteed "basic health benefit" and make medical treatment decisions based on a person's "quality of life."

Because federal law would declare abortion to be a "guaranteed benefit," no health insurance policy could be sold if it did not include abortion on demand. To receive government approval, local health care plans would have to establish facilities to provide abortion on demand—even in the many communities where no abortionists currently practice. If Congress agrees, the number of abortions will increase vastly—and you'll pay the bill.

Under the Clinton Healthcare Rationing Plan, people "will know that they are not being denied treatment for any reason other than it is not appropriate—will not enhance or save the quality of life," Hillary Rodham Clinton told the Senate Finance Committee September 30.

The First Lady thus openly acknowledged what many health care policy specialists outside the administration have been saying: that the Clinton plan will result in denial of treatment to those deemed to have a poor "quality of life." As an example, she suggested that heart surgery would be denied certain older people.

TIME's October 4 issue said the Clintons want to "change the culture of dying" and quoted an unnamed administration official as saying, "That's why Hillary's talking up living wills and advance directives. She hopes to spur others to get comfortable pulling the plug."

Among those to whom the Rationing Plan would deny treatment are children born with disabilities. In an October 1 article in the *St. Paul* (Minnesota) *Pioneer Press*, the Newhouse News Service re-

ported that Clinton Administration officials acknowledge the plan would deny therapy to children with "cerebral palsy, cystic fibrosis and other congenital and chronic disabilities" because such treatment is considered too costly.

Physical, occupational and speech therapy would be cut off after 60 days, although many such children require it for years. At the same time, the Clinton proposal would provide full coverage for abortion of children whose disability is detected in the womb.

What Can You Do?

The Clinton bill will not be voted on until 1994—but Members of Congress are already taking positions on the issues raised by the bill. NOW is the time to communicate strong opposition to the President's proposal to your U.S. House member and your two U.S. senators by letter and phone calls or in person.

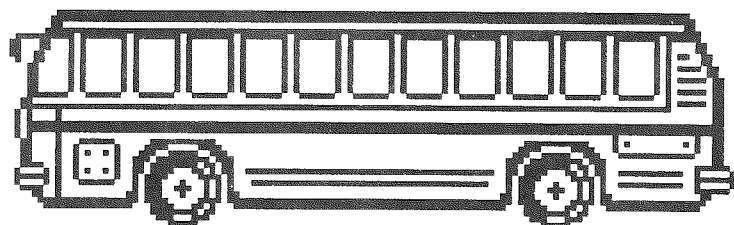
Send a copy of any letter from a member of Congress on the Health Plan to: Right to Life - Lifespan, 28200 Seven Mile Rd., #127, Livonia, MI 48152.

—Excerpts from this article first appeared in the *National Right to Life News*, October 19, 1993
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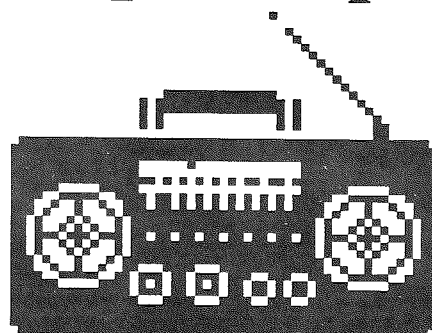
FACE

The Freedom of Access to Clinic Entrances Act (FACE) continues to be a threat to free speech among those Americans who work to protect the rights of preborn children through peaceful, non-violent means. We must continue to pressure members of the House and Senate.

Adopt a Bus...



Adopt a Spot



If it's fall, it must be time to get the 1994 billboard project moving. And this time, we mean it literally. We plan to have 90 king-size posters along the exterior sides on the D-DOT and SMART transit system. These buses travel throughout Detroit and the metro area and will spread the truth to hundreds of thousands of people each day. D-DOT provides excellent coverage of Wayne County and, particularly, the downtown business district. SMART will carry our message along major surface streets leading to suburban malls, business areas, supermarkets and residential areas. The total cost of the bus project is approximately \$16,400.

In addition to the moving billboards, we have decided to expand our educational project to include radio ads. For every 30-60 second spot, it could cost as high as \$500 or as low as \$45 depending on the station, time of day and day of the week. We hope to raise \$15,000 for these ads.

Your generosity in the past has helped keep prolife issues in the public eye. Advertising is big business and is very expensive, but it is also effective.

Will you help us again to tell the truth by sending us a donation toward this educational campaign. If you, your church or organization would like to "Adopt a Bus," the cost is \$182.22. If you would prefer to "Adopt a Spot" on the radio, please send us \$272.50, the average cost of an ad.

These goals will only be possible with your help. Please mark your check for the "Ad Campaign" and send it with the clip-off below. Donations of any amount will be greatly appreciated. Thank you.

Please make your Ad Campaign contribution payable to:

Right to Life - Lifespan of Metro Detroit, 28200 Seven Mile Rd., #127, Livonia, MI 48152



I (We) believe the TRUTH is worth this gift of LIFE.

My (Our) gift is: ☐ Adopt a Bus (\$182.22) ☐ Adopt a Spot (\$272.50)
☐ \$100 ☐ \$50 ☐ \$25 ☐ _____

Name _____ Phone _____

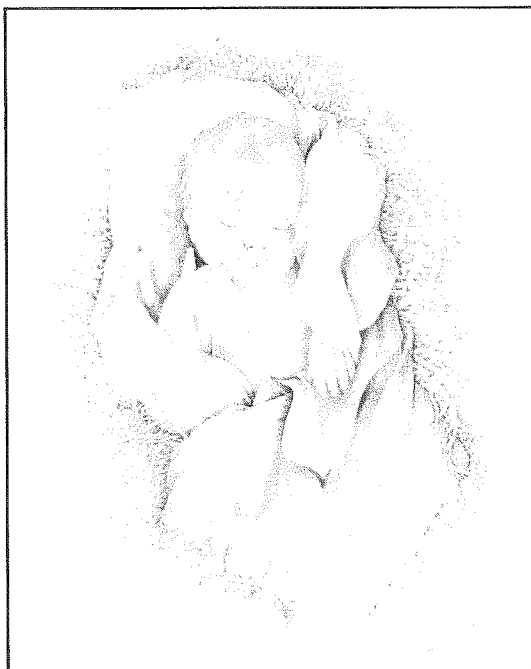
Group _____

Address _____ City _____ Zip _____

We are sorry, but your donation is not tax-deductible.

1993 Christmas Cards

Your purchase represents support for prolife activities during the coming year. To place an order, arrange for pickup at a location near you and/or for more information, call: Detroit Chapter at 874-0432, Oakland County Chapter at 258-9760 or Wayne West, Downriver Chapter at 422-6230.



Babe in Swaddling Cloth (embossed)

Inside Verse:

*God so loved the world
that He gave us His only Son
May He who is the Way, the Truth
and the Life
Bless you this Christmas
and always*

(Actual size: 5" x 6 1/4")

\$12.00 per box of 18

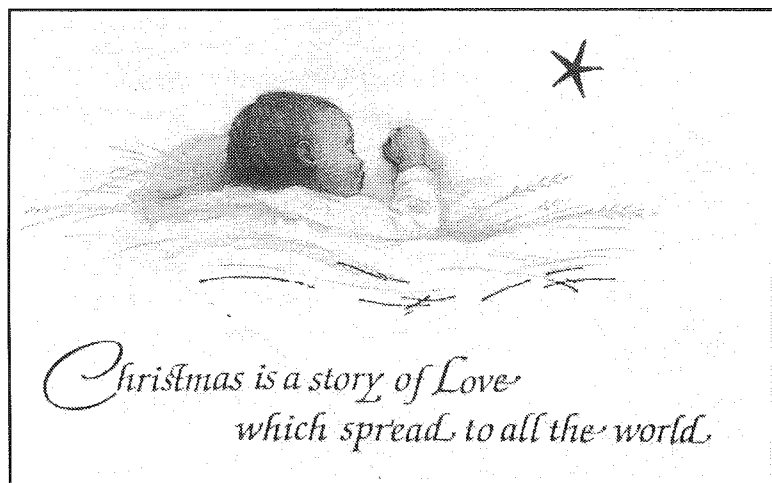
Shepherds in Adoration (in earth tones, red lettering)

Inside Verse:

*May the wonder
and innocence of children
enkindle in our hearts
a reverence for Life
at Christmas and always*

(Actual size: 4 1/2" x 6 1/4")

\$5.00 per package of 12



Sleeping Infant (in pastels, gold lettering)

Inside Verse:

*As we rejoice at the birth of Baby Jesus
May our hearts be filled with joy and awe
at the wonder of God's gift of Life
Blessings to you at Christmas
and all through the year*

(Actual size: 5" x 6 1/4")

\$10.00 per box of 18

Remembrances

You can live on after death by helping those whose lives are threatened by abortion, euthanasia or infanticide.

A bequest in your will to Right to Life - Lifespan of Metro Detroit will be used to save the lives of many through our efforts.

Donations may be made in memory of loved ones who have died. A memorial card will be sent by Lifespan in your name to the family of the deceased.

Donations may also be made to honor someone special, and near and dear to you, for a particular occasion, or just because...

- In memory of **Ralph V. Barton**. The Oakland County Chapter has received a very generous gift from his estate. His memory will live in the work of Lifespan as a testimonial to the most precious of God's gifts - LIFE!

- In memory of **Arthur "Jerry" Martell**, requested by Florence and Edson MacDonald.

- In memory of **Stella Stani**, requested by John and Maxine Lundin, Ron and Dorothy Mundle.

- In memory of **Therese M. Sullivan**, requested by her husband, Joseph Sullivan.

- In memory of **Marita Brys Dalool**, requested by Marjorie A. Evans, Dot and Jerry Church, Pat and Bob Holscher.

- In memory of **John Brown**, requested by Marjorie A. Evans.

- In memory of **Mary Kolonski**, requested by Jerry and Becky Trumpka.

- In celebration of the birthday of **Kathy Labataille**, requested by Clare Schneider.

Eat for Life!

We're still saving Bill Knapp Community Support coupons! The Detroit and Wayne West/Downriver Chapters are so pleased with their educational display boards obtained through this program; the Oakland County Chapter wants one too!

Many thanks to the following coupon donors of the past two months: Barna, Grougan, Garrison, Dell'Eva, Albert, St. Perpetual Parish, Yanik, Mowery, Deja, Van Esley, Bergmooser, Lesiak, McLaughlin, O'Connell, Rizzo, Little Sisters of the Poor (Oregon, Ohio), Fisher, Kleinbrook, Loftis, St. Linus Senior Citizens Group, Dattilo, Kral, Freda, Phillips, Fleck, Tschirhart, Sanak, St. Agatha's Women's Club, Moreno, Pawlowski, Jenuwine, Poeppe, Bosley, Purcell, Wilhelm, Proppe, Radzialowski, Clos, Gardner, Viray, Martinuzzi, Miller, McCarthy, Bosco, Bowker, Kopera, Nye, Mizyborski.

When you present your check to the cashier at any Bill Knapp's Restaurant, ask for a Community Support Coupon. Please send the coupons to Right to Life - Lifespan, 28200 Seven Mile Rd., #127, Livonia 48152. Thanks!

Last call — Spartans

The Spartan Stores Cash for Labels Program ends December 31. They will pay us \$.02 for every Spartan brand UPC symbol (except canned pop and refrigerated biscuits). Spartan products are carried by many grocers in the metro area. Please send Spartan products UPC symbols only, not the whole label, to Right to Life - Lifespan, 28200 Seven Mile Rd., #127, Livonia 48152.

Many thanks to those who have been sending in Spartan UPC symbols since this project started.

entertainment '94

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★ ALL NEW West/Southwest Edition

Save 50% on almost everything; including dining, theatre, sports events, hotels, travel, car washes and more! A perfect gift idea for birthdays, Christmas, anniversaries; it fits everyone and lasts all year long! **Only \$40.**

For every book sold, Lifespan earns \$8. Help us in this fundraiser, and sell *entertainment '94* to your friends, neighbors, relatives, co-workers.

Books are available at Lifespan offices through Jan. 24. Call 533-9090 or your local chapter office to order and pick up your *entertainment '94* books.

Molly Kelly Video

Molly Kelly Speaks to Adults: Teens and Chastity, the video taken at Lifespan's Mother's Day Dinner, is available for \$29.95.

Molly shares her experiences with teens as a mother as well as an educator. Call the Educational Center for Life for information and/or to order this video, (313) 338-1910.

Right to Life - Lifespan of Metro Detroit Membership Form

Right to Life - Lifespan believes that human life has value in all stages of development from conception until natural death, and is committed to speaking on behalf of those who cannot speak for themselves — the unborn, the aged, the incapacitated. Won't you please help in our struggle to preserve respect for human life? A contribution brings you the monthly newsletter as well as educational materials and special mailings.

_____ Annual Membership \$ 15.00
_____ Student/Senior Member \$ 7.00

_____ Monthly pledge \$ _____
_____ Century Club (\$100 & above) \$ _____
_____ Other \$ _____

Name _____ Phone _____
Address _____ City _____ Zip _____

Please detach at the dotted line and return to: Right to Life - Lifespan, 28200 Seven Mile Rd., #127, Livonia, MI 48152-3736.
Donations are not tax-deductible.

Why We Shouldn't Legalize Assisting Suicide, Part I:

By Burke J. Balch and
Randall K. O'Bannon

Editor's note: This is the first in a multi-part series providing arguments against legalizing physician assistance of suicide. Parts II through V will cover these topics: II What About Pain?; III What About Terminal Illness?; IV What About People with Disabilities?; and V Is Suicide Contagious?

Under the banners of "compassion" and "autonomy," some are calling for legal recognition of a "right to suicide" and societal acceptance of "physician-assisted suicide." Suicide proponents evoke the image of someone facing unendurable suffering who calmly and rationally decides death is better than life in such a state. They argue that society should respect and defer to the "freedom of choice" such people exercise in asking to be killed.

But what would be the consequences of accepting this perspective? Let us examine the facts.

Accepting a "right to suicide" would create a legal presumption of sanity, preventing appropriate mental health treatment.

If suicide and physician-assisted suicide become legal rights, the presumption that people attempting suicide are de-

ranged and in need of psychological help, borne out by many studies and years of experience, would be reversed. Those seeking suicide would be legally entitled to be left alone to do something irremediable, based on a distorted assessment of their circumstances, without genuine help.

An attempt at suicide, some psychologists say, is often a challenge to see if anyone out there really cares. Indeed, seeking physician assistance in a suicide, rather than just acting to kill oneself, may well be a manifestation, however subconscious, of precisely that challenge. If society creates a "right to suicide" and legalizes "physician-assisted suicide," the message perceived by a suicide attempter is not likely to be, "We respect your wishes," but rather, "We don't care if you live or die."

Almost all who commit suicide have mental health problems.

Few people, if any, simply sit down and make a cool, rational decision to commit suicide. In fact, studies have indicated that 93-94% of those committing suicide suffer from some identifiable mental disorder. In one such study, conducted by Dr. Eli Robbins of suicides occurring in St. Louis, Missouri, 47% of those committing suicide were diagnosed as suffering from either schizophrenic panic disorders or from affective disorders such as depressive disorders, dysthymic disorders, or bipolar disorder. An additional 25%

suffered from alcoholism while another 15% had some recognizable but undiagnosed psychiatric disorder. Four percent were found to have organic brain syndrome, 2% were schizophrenic, and 1% were drug addicts. The total of those with diagnosable mental disorders was 93%. An independent British study came up with a remarkably similar total figure, finding that 94% of those who commit suicide suffer from a diagnosable mental disorder.

Persons with mental disorders make distorted judgments.

Suicide is often a desperate step taken by individuals who consider their problems so intractable as to make their situations hopeless. But experts in psychology recognize the evaluations these individuals make of their personal situations are flawed.

The suicidal person suffering from depression typically undergoes severe emotional and physical strain. This physical and emotional exhaustion impairs basic cognition, creates unwarranted self-blame, and generally lowers overall self-esteem, all of which easily lead to distorted judgments. These effects also contribute to the sense of hopelessness that is the primary trigger of most suicidal behavior.

Studies have shown that during the period of their obsession with the idea of

continued on page 4

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Wayne County, West/Downriver Chapter

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