International Life Services, Inc



Living World Magazine Online





Making A Difference Together

About Us

International Life Services (ILS) is a 501(c)(3) non-profit organization founded in 1985 to promote Judeo-Christian values applied to family life, sexuality, and bioethical issues.

Our Purpose

We seek to carry out our basic philosophy in a compassionate, practical and effective manner through research, information, service, and education.

Our Principles

- God is the Author of Life and God alone may terminate life.
- Promotion of the sanctity of and respect for human life includes protecting the unborn, abused, aged, handicapped, suffering, dying and needy members of our society.
- Alternatives to abortion are of paramount importance.
- The family is held in high esteem as the cornerstone of society.
- Premarital chastity is seen as a necessity for moral, spiritual, emotional, and physical well-being.
- We support the proper use of Natural Family Planning and oppose contraception or any other form of reproductive technological interventions which separate the unitive and procreative aspects of marriage, or which violate the natural right to life.





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Welcome to the first Edition of Living World Online. I am so happy to be able to present to you again, a magazine that contains important learning material to assist you to become

even more excellent guides for our young men and women.



We, in the pro-life movement, have been given a very important job by God. We hold precious his command to love all life and to help him shape future generations in his image. He equips us for this job daily and my prayer is that He will use this magazine to further assist His goal.

We plan to have regular features on counseling, pro-life center news, information on various pressing bioethics issues, and changing state and federal laws and regulations.

I invite you our readers to submit for consideration important items and papers that will be good to share. Also spread information about the news magazine. Subscriptions are free. Just go on the ILS website and sign up.

God bless you all. We will be sharing again soon. Sr. Paula

In service to life.

Sister Paula Vandegaer, L.C.S.W. Founder and Program Director International Life Services



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Visit our website for more information and updates: www.internationallifeservices.org



A MESSAGE FROM THE PRESIDENT OF OUR BOARD

Most of you reading this first edition of **Living World Online** are on the front lines of the Pro-Life movement. God bless you!

We live in a time when life is framed as a zero sum, between a winner and a loser, a winner of a life and a loser of a choice.

You, however know better.

Yes, there are hard choices. Yes, there are sacrifices. Yes, it isn't easy. However, through your caring, your counseling and your material assistance, a frightened or hesitant mother brings forth a baby, a father becomes a true man, and a family is formed or strengthened.

All are winners.

And in those times where life does not succeed, it is your compassion that helps bring about emotional and spiritual healing.

We as Board members, staff and volunteers of International Life Services pray for you and your work for the babies, their mothers, their fathers and their families.

We are blessed that over thirty years ago our founder Sr. Paula saw the great need to train counselors and ever since has been providing the educational tools to do so. Read her wonderful article "Basic Attitudes of the Counselor". We are blessed that our Board Secretary Nancy Corbett writing in her article "Our Journey to a Clinic" never gives up and always acknowledges the source of our strength.

We acknowledge the work of all those who contribute to the content and publication of **Living World Online**, including Sr. Beth Momburg SSS, Kathy Hochderffer, Ruth Phillips, Eva Ledermuller, Sherry Johnson, Carly Cottingham and our publisher William Feaster at Sellion.

May this online publication be another source to assist you in your work for life.

In Gratitude,
Dennis De Pietro
President of the Board

PREGNANCY CENTER SPOTLIGHT

OUR JOURNEY TO A CLINIC

By Nancy Corbett, Executive Director, Pregnancy Counselling Center, Mission Hills, CA

Our journey to becoming a licensed medical clinic at the Pregnancy Counseling Center was one fraught with hardships, struggles and anxiety, but ultimately the most rewarding and worthwhile endeavor I have undertaken as a director. The conversion to a clinic gave our center credibility, legitimacy and most importantly enabled the PCC to offer critical services to our clients. The biggest and most powerful result was enabling us to provide ultrasounds. I cannot stress enough the difference this made to our mission. Watching a client see her baby for the first time is priceless. Our rate of positive turnovers from abortion-minded clients to those deciding to keep their babies rose by leaps and bounds. There is no comparison between showing a client an unimpressive two lines on a pregnancy test, to the emotionally compelling image of her baby's beating heart on the screen. Looking back, I am so grateful to all the people I met during this process that would not otherwise have been in my life. I learned from each of them. My faith grew, I gained confidence in myself and am better able to serve the women of our community. As challenging as it was. I would do it all over again because the outcome has been so significant and valuable.

The journey began ten years ago when after much discussion, prayers and reflection, our Board

finally approved the decision to become a medical clinic. That was the easy part! Then the hard work began: finding an architect and contractor, raising additional funds to cover the costs of construction, getting permits, applying for the license, securing a medical doctor and nurse manager and the list goes on and on. What was I thinking to add such stress, extra work and distractions to our center? I became so overwhelmed by the sheer amount of obstacles that needed overcoming, and by my own selfdoubt of my ability to reach the finish line. Problems and setbacks were continuous, and one morning, I wanted to pull the covers over my head and not get out of bed. That was a turning point. I surrendered to God and His will for our center and felt the burden being lifted off my shoulders. I remembered my favorite scripture quote from Phil 4:13 "For I can do all things through Christ who gives me strength." From that moment on, I never doubted this path again because I was not alone. He was right by my side.



Aside from God's grace, the goodness and charity

of so many people was awe-inspiring. Donations poured in, beautiful furniture for our counseling rooms and a gorgeous conference table were

PREGNANCY CENTER SPOTLIGHT

donated, our landlord offered his support and so many others donated their time and talent to make this happen. It restored my faith in humanity and inspired me. After many frustrating delays, construction finally began and with it more headaches: inspectors who forced us to redo work, lost plans, sick workers, no space for storage, trying to work out of boxes, countless decisions to be made – it seemed too much to handle!



But every time I felt overpowered, there was someone there to encourage me, to lend a hand and to offer support. And each time through Christ my vision would clear, my mind would focus and my will and resolve would be strengthened. Working with Focus on the Family for an ultrasound grant was a true blessing. A long time contributor to our clinic donated the remainder of the ultrasound machine costs – what guardian angels. To say this was a rollercoaster of emotional ups and downs is an understatement. A great mentor from another clinic offered these words of wisdom that I will never forget. She told me to look back to see how far we'd come because looking only ahead at all the work that remained would drive me

crazy. I resolved to take things one step at a time and not let the enormity of the task get in my way.

Aside from the construction and remodeling required for this conversion, the other critical aspect was working with the health department to obtain the allimportant medical license. There were applications to complete, policies and procedures to write. medical staff to hire, ultrasound training to be performed and much more. The policies and procedures alone was such a huge and daunting endeavor. But once again someone stepped up -- one of our nurses took charge of this task and executed it brilliantly. When we called for the final health department inspection, all of our nerves were on end. This was it, but were we ready? Doubts creeped in and we were all on pins and needles until we got the word: WE ARE A LICENSED MEDICAL CLINIC! PRAISE GOD! We were all screaming and whooping with joy, and tears of relief and happiness flowed freely.

And then came the rewards. Our supporters were so impressed with our clinic that donations soared. We gained new donors every day. Our team was closer and more bonded together than ever before. The ultrasound machine not only increased our ability to save lives, but also motivated and moved our staff and re-energized their resolve. More and more clients poured in our doors to get an ultrasound. We are now able to offer more services like STD testing which will bring in even more women

PREGNANCY CENTER SPOTLIGHT

before they are in a crisis pregnancy. The return on this investment was beyond measure. I encourage every center to undertake this conversion and become a medical clinic. Yes there will be sleepless nights, but God will see you through and the benefits will far outweigh the costs. In the end, this will be the most significant way to help the distressed women coming to you.

When I was finally putting things back in my office, I felt such a sense of accomplishment. As I walked back and forth with boxes, I thought I

got it done! I got it done!" Then I fell flat on my face in a puddle of dirty water from the air conditioner by the back door. I heard God say "Who?" I had to laugh and say, "YOU LORD!" LOL

Nancy Corbett,
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Pictures from our journey.....

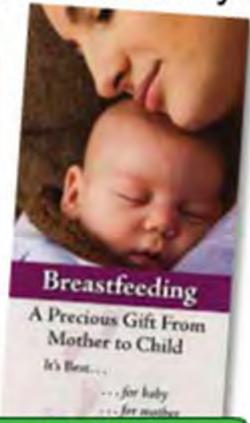




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Experts to UN: Stop Pushing Abortion When Women Need Medical Care

by Lianne Laurence (reprinted with permission)

Although Africa has the highest maternal mortality rate in the world, an international abortion lobby is diverting desperately needed medical care from African mothers by pushing instead for increased access to contraceptives and legalized abortion across the continent, according to panelists at an <u>event</u> held during the two-week UN Conference on the Status of Women, CSW60.

"Most of the African communities actually believe by tradition, by their cultural standards, that abortion is a direct attack on human life," Obianuju Ekeocha, founder of <u>Culture of Life Africa</u>, told about 400 attendees at the March 17 presentation on "<u>Best Practices for Maternal Health Care in Africa</u>."

"So we are torn between that," and the suggestion from developed nations "who are also donors to African countries," that legalizing abortion will reduce maternal deaths, noted Nigerian-born Ekeocha.

"So one cannot help but ask, is this not another form of colonization? Is Africa going back to a time when we are going to be told what to do in order to save women's lives?"

Ekeocha was one of three panelists for the event, sponsored by three pro-life NGOs to the UN — Campaign Life Coalition, the UK-based Society for the Protection of Unborn Children (SPUC) and REAL Women of Canada — and hosted by Archbishop Bernardito Auza, the Holy See Permanent Observer to the UN.

"The true fact of it is that there is no real correlation between legal abortion and maternal health," Ekeocha said. "There is rather a real correlation between the standards of our health care systems and how women are actually surviving or dying."

"We need access to real prenatal health care, we need skilled birth, we need care and support after birth," she said. "This is non-controversial."

Abortion is the Only "Solution" Offered

She pointed out that 91 percent of maternal deaths occur in "the last three months of pregnancy, during labor and delivery," or shortly afterwards.

"Abortion and birth control are irrelevant." Yet the "only solution being offered is, if a mother wants to stay alive, she's got to kill her baby," he said. "That's outrageous."

Walley recalled that in his practice in Canada, he had never had a mother die from a "direct obstetrical cause. But when he arrived in Nigeria in 1982, "I could not believe what I was seeing," he related. "We had four

maternal deaths the first weekend I was there."

"It creates...a sense of sadness, deep sadness when you watch a mother die," he said. And it also "created in professionals like myself the anger, and saying, 'This is nonsense, this is nonsense, what isn't happening here?'"

The major causes of maternal deaths, according to the World Health Organization statistics from 2012, are "hemorrhage, pregnancy-induced hypertension, and then a whole lot of other things, HIV, severe anemia, malaria," and obstructed labor, Walley said.

Nine percent of maternal deaths are the result of induced and spontaneous abortions, he said, and Ekeocha cited a more recent WHO figure of 3.9 percent of maternal deaths in Africa are due to induced abortions.

But as Maria Madise of the UK-based Society for the Protection of Unborn Children(SPUC) pointed out, the "abortion lobby has been very successful in creating a false association between 'safe' and 'legal' abortion."

The implication is that legalizing abortion would decrease maternal deaths, she stated. And at least one UN body made that claim explicit: the Committee on Economic, Social and Cultural Rights released a General Comment on sexual and reproductive rights just before the CSW60, that

claimed the "denial of abortion often lead[s] to maternal mortality and morbidity."

Women Are Dying of Treatable Complications

The Millennium Development Goal of reducing maternal mortality by 75 percent has not been met, but "there has been a forceful diversion of resources to the promotion of abortion and birth control programs that claim to reduce maternal mortality," Madise noted.

And "women continue to die of mostly presentable or treatable complications in pregnancy and childbirth," she said.



She pointed out that General Comment has no binding force, and "no human rights treaty recognizes abortion as a human right."

Moreover, evidence is clear that countries with "restricted abortion" such as Poland, Ireland and Malta, have the lowest rates of maternal death," noted Madise.

"Eighty percent of the mothers who die are in villages," Walley stated. "Can you imagine dying of postpartum hemorrhage in terra, because when you see postpartum hemorrhage in our hospital it frightens the life out of the obstetrician until you can control it."

Or the mother could experience obstructed labor, with no access to ambulance or hospital. "Obstructed labor goes on and on and on and on, in agony," he said.

Moreover, the woman is often delivering her baby alone in her home, he said. "If she's lucky, there will be a relative; if she's really lucky, she would have a traditional birth attendant."

He encountered in Africa something he had not seen in Canada, women with "obstetric fistula" —damage to the rectum and bladder that occurs during obstructed labor.

What usually happens is that the uterus ruptures, the baby dies, and the mother, if she survives, is left "incontinent of urine and feces

through the vagina." Such women are shunned by the community "because they smell and they're wet, so it's an awful humiliation." The WHO estimates there are about one million women in Africa with untreated obstetric fistulae.

Providing Real Help to Women in Need

MaterCare International is an association of Catholic obstetricians, gynecologists, midwives and general practitioners working to decrease maternal mortality in developing countries, which began with Walley's involvement in Nigeria and later moved to Ghana, Sierra Leone, and more recently to Kenya.

They have set up a maternity clinic, and train traditional birth attendants, who are often illiterate, to use visual illustrations for prenatal charting and to know when to transport high risk mothers to hospital. The hospital is equipped to perform caesarean sections, and surgery to correct obstetric fistulae.

In Kenya, "we have little motorbike ambulances" and "parish maternity centers" but "we need at least three," Walley said. And they could use a helicopter.

"I have to say something," he noted in conclusion. "It's a plea. We've been turned down by the Canadian government for funding 10 times, not on the substance of what we are doing, but on the technicalities of a

proposal which is enormous, with umpteen sections on the environment and all the rest of it."

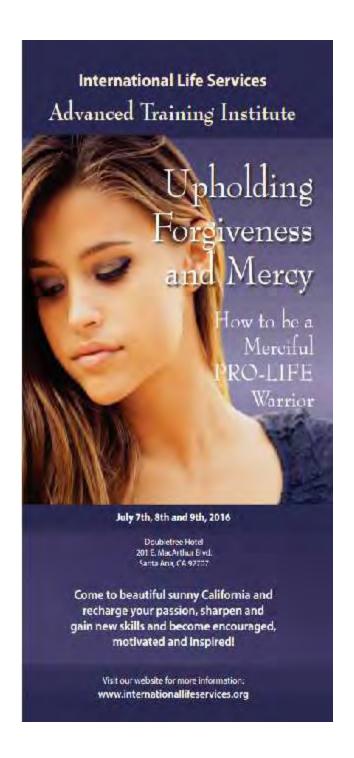
"You know that anger gets you, and you say, 'Look, I've got to do something, not change the world, just to make a bit of a difference some way, just to breathe some life back into obstetrics and maternal health care so it's not just all death and despair'," Walley said

"Enough of talking in the abstract, shedding crocodile tears. We have to get on with it."

Matthew Wojciechowski, head of CLC's NGO delegation to the UN, noted that having the Holy See host the event was hugely significant.

It meant the presentation was held in the main UN headquarters, rather than relegated to a side building as an NGO-sponsored event, and was open to delegates, who are this week negotiating the final document to come out of CSW60, the theme of which is "Women's empowerment and its link to sustainable development." This article originally appeared at LifeSiteNews, and is reprinted with permission.

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THE ULTASOUND INITIATIVE

A new ultrasound machine donated by Massachusetts Knights to Worcester's Problem Pregnancy Inc. was blessed by state chaplain Bishop Daniel Reilly in January. Shown are (left to right) sonographer Kathy Lake, Bishop Reilly, Deacon Joseph Baniukewicz, State Deputy William Donovan and State Advocate Thomas McGinn On January 22, 2009, the 36th anniversary of the Supreme Court's Roe v. Wade decision legalizing abortion on demand, the Knights of Columbus launched a new initiative aimed at providing women considering abortion a new way of viewing the life within them.

On that day, the K of C Supreme Council matched funds raised by Knights in Florida and Iowa to provide two pregnancy care centers complete funding for the acquisition of ultrasound machines that will help the centers to provide for the health of both mother and child.

As of March 2015, numerous local and state councils have qualified for matching funds from the Supreme Council office towards the purchase of over 540 ultrasound machines at a cost of over \$16.1 million, with additional state and local council fund raising campaigns for ultrasound machine purchases either in progress or to be launched in the near future. Ultrasound exams, which are medically indicated throughout

COUNCILS PROVIDE FUNDS TO PREGNANCY CENTERS FOR NEW MEDICAL TECHNOLOGY

pregnancy for a variety of diagnostic reasons, use ultrasound waves to scan a women's abdomen, creating a picture or "sonogram" of the baby in her uterus. Without K of C support, most pregnancy care centers would be unable to purchase the ultrasound machines, each usually costing tens of thousands of dollars.

Before any fund-raising begins, review Qualifying a Pregnancy Care Center in Collaboration with the Local Diocese (#9885). Then, present the Diocesan Evaluation (#4884) to the diocesan culture of life director. After being completed and signed by the diocesan culture of life director, the Diocesan Evaluation form should be submitted to the Supreme Council's Culture of Life, Marriage and Family Values Office. After that office advises that the pregnancy care center may be considered for inclusion in the Ultrasound Initiative program, fundraising may then begin, provided that the council and the pregnancy care center will also meet all of the other Ultrasound Initiative Guidelines.

State and local councils desiring to participate in the Ultrasound Initiative should refer to the Ultrasound Initiative Guidelines (#4885) for program requirements. Councils must raise half of the funds for purchase of an ultrasound machine before (continued on next page)

Knights of Columbus Ultrasound, continued....

submitting an Ultrasound Initiative Application (#4886) to the Supreme Council Office for matching funds. The answers to some Frequently Asked Questions (#4873) provide additional information about the program.

The sophistication of today's medical technology provides a "window on the womb" said Supreme Knight Carl A. Anderson. "Even from the early stages of pregnancy, a mother can see her

Developing child, hear the baby's heartbeat, and they recognize the miracle of the new life within her."

The Knights of Columbus Ultrasound Initiative seeks to provide medically certified pro-life pregnancy care centers with the modern technology to monitor the health of babies in utero, and to allow mothers to visually experience their development. Contact:

William O'Brien 203-752-4403
Knights of Columbus
Culture of Life, Marriage and Family Values Office
1 Columbus Place
New Haven, CT 06510



William.obrien@kofc.org

Basic Attitudes of the Counselor

By Sister Paula Vandegaer, L.C.S.W.

Jane Doe has just had a home pregnancy test and has found out that she is pregnant. She is not married. She and John did not plan on marriage right now. She feels panicky. She thinks maybe abortion would solve her problem. She looks online and finds your pro-life agency's telephone number. She calls. What does she expect of us at the other end of the line?

Listening

First of all, Jane expects us to *listen* to her. This may be harder than it sounds. Pro-life counseling is based on the belief that people do not come to us to be lectured to, but to sort out their own feelings and to be given the truth. When people understand the truth they can then make an *informed decision*.

Informed decisions occur when all the *facts* are out on the table and a person can look at them objectively. It's easy for a beginning interviewer to believe that the most important *facts* that a person needs to know are the *facts* about abortion. This can cause the interviewer to not give sufficient attention to the person's feelings. Listening can solve the problem.

When a person is in a crisis situation there are a lot of feelings inside. Some of these feelings may be negative feelings of hurt, anger, fright, or betrayal. Strong and powerful feelings can have several effects on us.

First, when we have a lot of feelings at one time, it can make it difficult for us to sort out those feelings: Which are most important? Which should I keep? What should I let go of? Which are having a

negative effect on me and causing me to do something I will later regret? Which am I ashamed of? Which am I justified in having?

We don't easily answer those questions unless someone has listened to us in a totally accepting way and allowed us to express all of our feelings, even the ones we are most ashamed of.



Second, overwhelmingly strong negative feelings can make us feel inadequate, overwhelmed and insecure, unable to respond to the situation. I must be a weak person. I must be a bad person. I can't handle this. I'm not capable. Talking to a listening person allows us to put words on our feelings and thus get in better control of them. It allows us to figure out how we feel rather than have everything jumbled together. When we can put a word on a feeling it begins to give us control over that feeling.

When a listening, accepting person asks us questions to help us sort out our feelings it reduces their control over us. "Jane, how did you feel when your mother told you to abort the baby?" Has she ever disappointed you like that before? How did you handle it then? Did you feel good

about yourself? How can you handle it now? Would that make you feel good?"

Listening does not mean passively sitting and doing nothing while someone is talking to us. If that were the case a person could sit in front of a stone wall and talk to the wall and that could make them feel better. No, listening is active. We ask questions. Our questions should help the girl to listen to herself and to really sort out what she is feeling. "Jane, let me see if I heard you correctly. Is that what you said?" or "I'm not clear on this. Can you explain that a little further?" or "Jane, that is confusing. Could I ask you a few questions and clarify that for both of us?"



Acceptance

Closely allied to listening is acceptance. Jane has probably already talked to someone and may have already gotten some judgmental feedback. "You mean you got yourself *pregnant!* How could you have done such a stupid thing?"

The strongest thing that you have going for you is your attitude of acceptance. You are not going to get upset with her for what she did. Remember, this is a young woman who has a lot of feelings that are already making her feel very uncomfortable about herself as a person. It is very important that you help her understand that you know how she feels and why she feels that way and you don't blame her. "I understand how you feel,

Jane. This is pretty rough thing you are going through."

Sometimes your client will say something that is very unacceptable. "I want to kill that boy that got me pregnant." You must tune into her feelings and the intensity of the problem. "Jane, you're *really* angry with John aren't you."

Don't be overwhelmed. This is at the *core* of acceptance. You can recognize and face with the young woman how intensely she feels. If she can face her feelings together with you, it will help her to be in control of them and calm down.

When we are under pressure, many of us think that we are the only person who has ever felt that way and that there is something wrong with us for having these feelings. Acceptance on the part of another person has tremendous power to help us to get things in perspective and to get ourselves in perspective.

Nonjudgmental

When Jane Doe told her mother about the pregnancy, she may have reacted in horror and shock. When she tells you about her problem, you accept the fact that she has a problem and go from there. To judge guilt or innocence is not your job.

Most of the time we do not know all of the experiences or pressures that lead to people to whatever situation they are in. If we did, we might have a clearer understanding of why people make the choices, both good and bad, that they do. Since we do not know these things, we must accept people at the point that they are at and not judge them.

Being nonjudgmental does not mean approving of every person's actions. When a client tells us that she is going to

have an abortion, we don't consider that a morally neutral action. We judge actions and behaviors but not persons. We do not say, "Jane, it's all right for you to have an abortion-or commit suicide- or kill your boyfriend." No, we recognized the depth of feeling and support the client's attempt to face up to her situation and move to more acceptable solutions.

When we first start in pro-life counseling it may be difficult to be nonjudgmental when the girl is talking about an abortion. We must remember she would not be requesting an abortion if she felt it were morally wrong. She is requesting an abortion because of problems in her life that make her feel that bringing a pregnancy to term is too much for her now because of pressure from home, friends, counselor or because of internal problems and anxieties that are overwhelming.

Our listening, acceptance and nonjudgmental attitude will help her gain inner strength and gain control of her feelings. This will help her to feel able to take care of the child growing within her and thus be more willing to have her baby.

Individualization

Jane Does calls you and tells you her problem. It is a similar story to the last three young women you helped. But each one is a unique person and each one has unique feelings and responses. Even if something that you did or said was extremely helpful to one young woman, it may be very unhelpful to the next person.

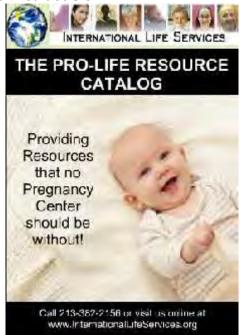
This is why it is hard to answer questions like, "What do you say when the woman says_." There is never a stock answer. There is only the answer that you feel is appropriate for this woman at this

time. What is right for one person may be wrong for the next.

When a pro-life volunteer gets a call on the phone and refers a young woman to the emergency pregnancy services for a simple pregnancy test, even that simple referral must be done only after there has been sufficient listening and individualization of this woman's problem. Otherwise the woman will respond to the referral for a pregnancy test as being a cold, uninterested and uncaring way of "getting rid" of her on the phone.

Conclusion

If the young woman feels listened to, accepted, and not judged she will be more willing to listen to other *facts* relating to her decision about her baby – facts such as, fetal development, what an abortion is, and what it does to her and her baby. Giving her these "facts" along with listening, acceptance and a nonjudgmental attitude will truly help her to sort out the issues and make an informed decision.





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There is no need to stand alone!

With corporate offices in the United States and Hungary, International Life Services supports an expansive network of pregnancy service centers who unite together around our principles and counseling standards.

Our Federation Program exists to assist life-affirming pregnancy care centers in the development of the most



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- 2. Call 213-382-2156 and talk with a member of our staff; tell them you want to join.
- 3. Complete the application form you will receive after talking to our staff.
- 4. Return the application form along with your payment.

Contact Us: International Life Services Membership Director 213-382-2156

TAKE A BOLD STAND FOR LIFE

BY Lori DeVillez, Executive Director of the Austin Pregnancy Resource Center

What do you do when National Abortion and Reproductive Rights Action League (NARAL) shows up at your door? We have had this happen to us at the Austin Pregnancy Resource Center (APRC). The City of Austin Council decided to partner with NARAL and wrote a City Ordinance that we were to post a sign outside our door of services we do not offer. This ordinance is a nationwide strategy that is designed to come against pregnancy resource centers. I ask the question, what business anywhere in the U.S. is forced to post a sign outside their business of services they do not offer?

When this happened the news media began calling and showing up. Not only the news media but also representatives for NARAL.

I remember one time a couple of young ladies came into our center and said we were "false advertising". Our volunteers did not know what to do so they brought me in to meet with them.

I decided to give them a tour of our facility and show them our services to those in need in our community. As we began walking through each room one of the young ladies began understanding us better and really began to take a liking to us. It made the other young lady agitated at her friend.

I remember by the time we finished our tour one of the young ladies had totally changed her attitude about us. She could see the good we are offering and the help we are giving. When the news media ran an article in the Austin paper they had a picture of our facility but never said one negative word about us.

When news media would call and ask for interviews I remember praying and asking God for help. I decided to answer their questions with a

> question back. It really offered good conversation and good articles on our center.

Then the federal lawsuit was filed. It was a very stretching time for us.
Everything we do was

closely examined by a team of attorneys. They examined our training, our forms, our financials, our advertising, etc.

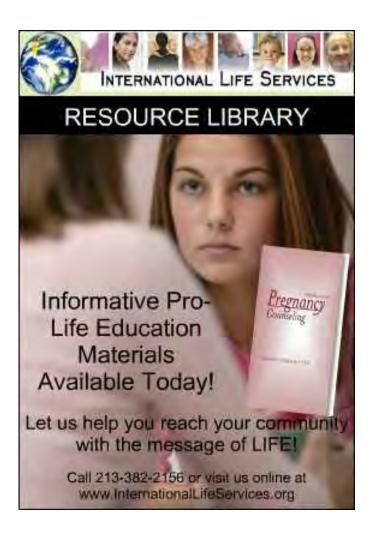
Then the day came for the deposition. It was a four hour, very grueling, deposition. It was one of the most difficult four hours I have ever walked through. The abortion attorney took three breaks to work every angle to get me to break. I had determined I know who I am and what we do and why.

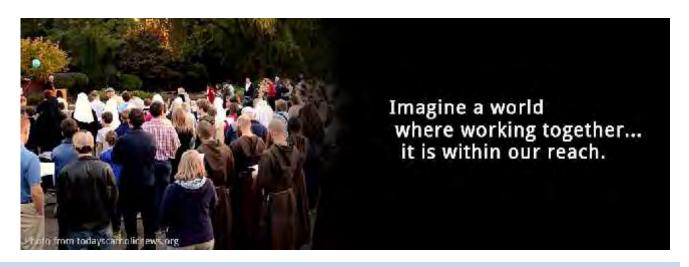
When we went to trial it was more questions. Then we waited for 4 years! The Judge gave his ruling in our favor and ordered the City of Austin to pay all attorney fees. We had seven attorneys working our case. The city agreed to pay our attorneys \$480,000!

I have learned that as we walk out each day with integrity, character, our love for Jesus that He really is our Protector, Defender and Provider. I encourage you to stand your ground no matter what the circumstances may look like today because at the end of the day God has the last word. Thank you for your stand for LIFE!

Gratefully,

Lori A. DeVillez
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SPECIAL FEATURE

INTRODUCING the SCHOLL INSTITUTE OF BIOETHICS

History

A group of professionals in medicine, law, psychology and religion came together in 1986 out of concern for individuals faced with difficult bio-ethical decisions. Responding to the complexities of these issues, they formed the Institute dedicated to research, service and education.

About the Name

The name was chosen in memory of Hans and Sophie Scholl, who were a brother and sister. They were members of the White Rose, a group of university students who resisted the policies of the Third Reich including the "mercy" killings of disabled and mentally ill persons in Nazi Germany. Hans and Sophie were executed as traitors by the Nazis on February 22, 1943.





Hans & Sophie Scholl

How Scholl Helps Everyone

Many of you will have to make decisions about life issues affecting you and those dear to you. Each of us needs to make the best decision when a human life is involved. The Institute delineates principles to assist in making choices about life and death, with particular concern for the protection of weak and defenseless persons who cannot speak for themselves.

Scholl's Services

As a research center, the Institute provides in-depth analysis of current bioethical questions. It prepares articles for both scholarly and popular publications. In addition, it offers a speaker's bureau, provides educational materials, gives workshops and seminars.

Everyone Can Help

The Scholl Institute welcomes your participation in our many projects.

Contact Us

Scholl Institute of Bioethics 18030 Brookhurst PMB 372 Fountain Valley, CA 92708 e-mail: info@schollbioethics.org

Tel: 714-964-1284 or 818-880-4331 or 310-671-4412



Imagine . . .

A world where there was no abortion... no infanticide... ... no euthanasia.



SPEAKERS BUREAU



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