

# International Life Services



LIVING WORLD ONLINE MAGAZINE

*SPECIAL FEATURES INCLUDE:*  
LEGISLATIVE UPDATE  
ATI FEATURE with PICTURES  
WORLD EVENTS

AUTUMN 2016



# INTERNATIONAL LIFE SERVICES

## 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 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.





# INTERNATIONAL LIFE SERVICES



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## *From Our Founder*

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

Hello and welcome to the second edition of Living World Online. If there is anything I want to share with you for this edition it's PRAY, PRAY, PRAY. Lots of bad things have been happening.

The CA legislature passed a bill that tries to force our centers to give clients information where they can get an abortion. California also passed an assisted suicide bill this year.

All of our centers have been experiencing what I call harassment inquiries from the CA State Department. Centers have been accused of not turning in reports that were turned in. They have had to spend hours duplicating and explaining things. One of the California Centers, not an ILS Center, was denied their application for Clinic Status In spite of being cleared by NIFLA and seemingly all appropriate steps were taken.

The Centers in Illinois are fighting an Illinois State bill that would force their Doctors to refer for abortion.

But you know, it has not slowed us down. Mothers and babies are still coming in and receiving help. The enemy of our human nature is not winning. Bring it on. We are protected by prayer and we can handle these problems.

I am writing this before the November election. So much is dependent on the outcome of this election. Will we have new pro-life Supreme Court Justices? How sympathetic will our new government be to pro-life?

This is a special time. We handle it by doing good, protecting our families and praying. God Bless you all Sr. Paula.



# President's Message

Recently at a fundraiser for International Life Services, Mr. Thomas Glessner was presented with the Margaret Nemecek Award, named in honor of the Pro-Life pioneer who opened the first Pregnancy Counselling Center in Southern California and the first pregnancy hotline in the United States.

The evening was a testament to you who devote your time and treasure to help those who are struggling with the immense obligations of parenthood or who need healing in the wake of an abortion. It was hosted and prepared by a dear supporter of Sr. Paula and was held in the garden of her daughter and son-in-law. There were student volunteers who ushered guests and helped serve the meal to long time and new supporters. ILS Director of Operations Sr. Beth Momberg SSS had a wonderful table highlighting the work of the three ILS divisions. It was a time to count our blessings and express our gratitude.



As most of you know, Tom Glessner is the founder and CEO of NIFLA, The National Institute of Family and Life Advocates, which for years has been a dynamic pro-life legal resource. After Tom received his award he spoke to us about his journey as a student hearing and questioning what would be the significance of Roe vs. Wade, then to his establishment of Pregnancy Counselling Centers, and his continuing fight for freedom of speech. He reflected on the early campaigns by the pro-abortion industry against Pro-Life Pregnancy Counselling Centers and how their current tactics are virtually the same, to bureaucratically and legally marginalize you in an attempt to prevent you from doing your compassionate work.

Tom, who has delivered several “friends of the Court” arguments to the U.S. Supreme Court, emphasized how important it is to ensure the objectivity of that Court and its duty to uphold freedom of speech.

...and finally he spoke of hope and quoted the passage from Zechariah 9, 12, “Return to a fortress [Zion], **O prisoners of hope**”.

When Tom was finished, Sr. Paula stood up and reiterated the challenges which many of you face running Centers or Clinics, especially in states like California and Illinois. However, she also reinforced that hopefulness. Her response, as always, is “Bring it on!” As people rooted in Judeo-Christian values we thankfully have no other alternative than to be “prisoners of hope”, for we know we are following the fundamental principles of what is true, right and beautiful.

In this issue you will read about being empowered, about the knowledge and skills presented at last month's ILS Advanced Training Institute, which are available on the ILS website. You will read how Centers are dealing with regulations meant to derail you from your precious work.

Last Saturday as we sat together on a warm Southern California evening, surrounded by loving people, we could not have been more “prisoners of hope”.

In Gratitude,

Dennis De Pietro,  
President of the Board

# Review of 2016 ATI

## Review of the 2016 Advanced Training Institute

Sponsored by Sr. Paula Vandegaer, SSS, Founder,  
International Life Services

The 2016 Advanced Training Institute was held July 7-9, 2016 at the Doubletree Hotel in Santa Ana, CA. As always, we had the very best speakers who inspired, informed, encouraged, and renewed us. Each morning began with Mass and conference attendees came early to share faith, worship the Lord and experience the love of Jesus with others. A period of refreshment followed so we could greet one another and welcome new guests.

This first morning focused on the importance and fruit of prayer and how to improve our PRC's by building strong relationships between Board and Staff members. Lori DeVillez, BA who is a Director of the Austin, TX PRC, is also a community leader. Lori spoke of the importance of language in these relationships and encouraged the Directors to analyze every part of their Center on a regular basis, as well as to develop community outreach. She gave us powerful language tools to utilize when speaking our message to the media and others. Steve Gunther, MSW, President and Director of Maryvale, followed up on PRC relationships and explored critical issues and challenges to ensure strong cooperation and avoid confusion.

Following lunch and time of fellowship, Anne O'Connor, Esq., Vice-President of Legal Affairs at NIFLA, told us about the legal issues facing the PRC's today, the AB775 law, and the differences between the Licensed and Unlicensed Centers in relationship to AB775. The violation of our religious conscience, the legalities pending and other issues were addressed. She quoted Chief Justice John Roberts in a dissent who said: "Unfortunately, people of faith can take no comfort in the treatment they receive from the majority today." He stated further "Those who value religious freedom have cause for great concern."



However, due to the recent 9th Circuit decision involving World Vision, Ann encouraged the PRC's to reclassify themselves as a religious organization. In this decision, the 9th Circuit Court ruled that an organization is religious if it has a self-identified religious purpose, acts consistently with those purposes, and promotes itself publicly as religious.

We then had a presentation about the web by Jacob Barr, founder and owner of irapture.com and our ILS webmaster. Jacob spoke about online marketing tactics, provided insight on the costs associated with honest, dishonest and ambiguous approaches to line reviews, website content and our messaging in online marketing. Jacob also showed us the differences in high quality content and integrity in developing our web content and brought awareness to the pitfalls. The day ended with an interactive session with our speakers on the topic of engaging the media, the do's and don'ts, and being prepared for challenging media interviews. This was just the first of three days filled with important information and techniques to improve leadership in Pregnancy Resource Centers and Staff, and address the challenges we're facing from the onslaught of new laws and the media against our "sanctity of life" stance.

## Review of 2016 ATI, continued

Directors, staff members and volunteers attended Day Two. Being together at Mass and interceding brought a real sense of peace upon us. The first presentation began with our dear friend, Dr. Paddy Jim Baggot, MD, OB/GYN, DABMG. Dr. Baggot is Physician for Guadalupe Medical Center for Research on Downs Syndrome. He told personal stories of women who had reversed their tubal ligations, how and why they did it. This presentation was followed by Phil Sandoval, MA, L.M.F.T. Phil, a marriage and family therapist and founder of the Aurora Counseling Center in Sacramento, is also a radio talk show host on Immaculate Heart Catholic Radio Station. He spoke on the importance of forgiveness from both a spiritual and clinical perspective and that forgiveness is essential for healing for ourselves and for others.

During lunch, the ILS Board gathered for fellowship and held a Meeting. The rest of us had a lovely time meeting with each other and sharing. Susan Patterson, Activist and Author of How you can fight Human Trafficking, opened the afternoon. We learned that human trafficking is the fastest growing illegal industry in America next to drugs, and the statistics of teens and young people involved in the USA left us with a heavy heart. Susan spoke about what trafficking “looks like” in our communities where we live and work, and more, what we can do about it. She called it a “Porndemic” creating a demand and 60% of the victims are from the Foster care system and 70% USA citizens. The importance of the Church to get involved and the need for the PRC’s to recognize a trafficking victim was emphasized and reminded all of us to be aware. She encouraged us to activate to strengthen legal and criminal charges on the traffickers and it’s important to remember these children in our prayers.



After a break to catch our breath and try to detach from this difficult issue flourishing in society around us, we met with Dr. Gregory Lester, Ph.D. speaking on stress and burnout. Dr. Lester opened his talk by bringing us to awareness of the stress we were feeling regarding what we learned about trafficking. He gave us research results on factors that contribute to stress and showed us methods for reducing stress and burnout. He said that as counselors and staff, we are exposed to some of the most severe of all emotional stress. Stress is defined as anything that increases your need to expend energy, and our profession demands an increase on all levels: emotional, physical, and spiritual. We have to be able to tolerate an increased expenditure of energy. But then he went on to say: “It’s not the stress, it’s the recovery of the stress that matters. It’s recovering the energy.” He described getting adequate rest as essential for this recovery. Also take adequate vacation time. Recovery is significant for everything!



The day ended with Vicky Thorn, Founder of Project Rachel, speaking on What They Didn’t Teach You in Sex-Ed. Vicky travels all over the country teaching on college campuses and other venues. She defined the Biology of Attachment and guided us to understand the complexity of sexual intimacy and how all sexual encounters change both men and women. We’re so happy that Vicky will be speaking at the World Youth Day and then will go on to the Ukraine to establish a Project Rachel Program.

## Review of 2016 ATI, continued

That evening many of us re-created by going on a whale watching tour at Newport Beach. It was a beautiful evening, and we were on the ocean water watching a gorgeous sunset. The weather was a perfect 70 degrees. We had such a wonderful time laughing, watching dolphins play when they jumped freely through the water and some decided to accompany us swimming around the boat and under it also. One dolphin jumped straight out of the water almost to its tail and became totally vertical as though reaching for the sky. So beautiful to see! It was great recovery from an intense day.



After morning Mass, Dr. Lester opened our third morning speaking about the “gatekeeper of behavior”. This “gatekeeper” is a part of our brain called the Migdala. He spoke of the fear function of the Migdala and gave us counseling skills on how to recognize and bring calm to this client. Then Phil Sandoval spoke on destructive and addictive relationship and ways to learn to spot symptoms of behavior that are often present in dysfunctional relationships in our clients and how address these symptoms. These teachings equip us to understand more deeply the behavior and brain issues of our clients! We’re very blessed to have such teachings available to us that we can’t find elsewhere.

Our speaker’s topics on this final afternoon were about the post-abortion client, abstinence and chastity in the youth, and the history of contraception and Natural Family Planning (NFP). Vicky Thorn, the Executive Director of the National Office of Post-Abortion Reconciliation, explained how to understand your post-abortion woman’s brain development and her moral thinking. She said “We are there to love these women and find ways to teach them love.” She also said how they were anxiously looking forward to Sr. Paula’s new book on Post-Abortion Counseling coming out next year in 2017.

Our new young speaker, Luis Galdamez, with his wife and beautiful new baby, spoke of connecting with the youth to live abstinence and chastity. Luis is Executive Director of La Familia Hispania and Chairman of the Board of the National Abstinence Clearinghouse. We’ll be seeing much more of this young man.



Sr. Paula, founder of ILS and Scholl Institute of Bioethics, and author of the award winning book, Introduction to Pregnancy Counseling, discussed the history from the early years of her mission and call to pro-life. She described how Pope Paul VI’s 1968 document, *Humanae Vitae*, affirmed the Catholic position against artificial contraception and the obligation to remain open to bringing forth life. Though he was mocked and rejected, his concerns about “the pill” have proven to be prophetic. It wasn’t until the 70’s that we learned the chemical used in the contraceptive pill was, in fact, an abortifacient. Sister Paula said: “What’s happening today is even beyond what he foresaw would happen back in the sixties.”

Gary Schubert, a dear friend of ILS, closed the conference with a personal witness of his spiritual journey and conversion. He received a call to spread the message to promote Natural Family Planning by showing couples how NFP would enhance their marriages, whereas artificial contraception is detrimental to sexual intimacy and marriage. He said: “If we divorce God and our beautiful gift of sexuality, we move ever and ever away from his natural law into a broken despair that we see as a life sentence. Living natural law brings harmony, peace and joy.”



## *Review of 2016 ATI, continued*

These presentations of the 2016 Advanced Training Institute gave us so much material to learn, study, and appropriate. We were given tools and equipped to become a “Merciful Pro-Life Warrior” both in prayer and in mission in dealing with our clients. Let us continue to pray for one another, for our clients, and for our country to recognize the value and dignity within every human life made in the image of God that we once lived! And may we live forgiveness and mercy to all we assist. LIFE IS PRECIOUS! And so are you, each and every one!

God Bless you and thank you for your support of ILS and for loving and caring for each other and for the hurting women and men who come to us!

Sr. Paula Vandegaer, SSS, Founder International Life Services



*See more great photo's on Page 25.....*

# LEGISLATIVE UPDATES

## L.A. City Attorney Bullies Pregnancy Center to Comply with Objectionable Law

*Reprinted with Permission. Written by Jay Hobbs, Published in Pregnancy Help NEWS*

California's state-wide crusade against life-affirming alternatives to abortion took an alarming turn Aug. 18, when Los Angeles City Attorney Michael Feuer announced his office had succeeded in bullying a state-licensed pregnancy help medical clinic into compliance with a law the clinic says violates its deeply held religious convictions.

Pregnancy Counselling Center's leaders and board of directors had drawn a line in the sand: they were not going to comply with the state of California's 2015 edict that would force them to violate their deeply held religious convictions by participating in an abortion referral.

So, when the state's so-called "Reproductive FACT Act" went into effect Jan. 1, 2016—mandating signage that not only tells clients about state-funded abortions through Medi-Cal, but also gives a phone number on where to get started on getting an abortion—the pro-life pregnancy medical clinic stood its ground.

Likewise, when Feuer threatened to enforce the law in a letter to the clinic on May 16, Pregnancy Counselling Center (PCC) held firm.

Same goes for July 15, when Feuer sent the clinic—which serves over 1,100 women each year across from Family Planning Associates, one of the largest abortion provider in the San Fernando Valley—a follow-up letter reiterating his



intent to enforce the law, which the Democrat-controlled state legislature had established on a Big Abortion-friendly party-line vote in 2015.

Then, on Aug. 18, Feuer made his announcement: PCC would now comply with the law and begin distributing the state's compelled signage. The state's disclaimer is now printed in 14-point font, and in the county's 13 threshold languages, as the law demands.

"They're out to make an example of us," Nancy Corbett, the clinic's executive director, said. "They just want their foot in the door. They were testing the waters as to how much we're willing to fight. What's next? What's coming down the line is my big question."



On its surface, Corbett and PCC's sudden compliance with the law seems quite a bit like capitulation. Pregnancy help organizations like PCC are agreed on certain tenets, like those found in Our Commitment of Care and Competence, which pro-life pregnancy help affiliation groups like Heartbeat International, Care Net and National Institute of Family and Life Advocates (NIFLA) use as affiliation standards.

One of those tenets is an agreement that such organizations, "do not offer, recommend or refer for abortions or

abortifacients.” An affiliate of Heartbeat International and NIFLA, PCC was holding the line on that principle, and waiting—along with the rest of the state’s 70-plus life-affirming state-licensed medical clinics—on the ruling of the 9th U.S. Circuit Court of Appeals on a June 14 challenge to the law by Alliance Defending Freedom (ADF).

## **The Furor of Michael Feuer**

What changed along the way was Feuer’s strategy to enforce the law. Up for re-election in a Democrat-heavy jurisdiction, Feuer had promised as early as May that his office wasn’t waiting for the court to hand down its ruling. In July, he told Rebecca Plevin of KPCC, the local NPR affiliate, “I will pursue all the remedies that I have available to me.”

Feuer’s remedy, in the end, was to enforce a law that is currently being challenged by wielding an unfair competition business practice law. Unable to turn up any sort of health code violations, Feuer scoured California’s Business & Professions Code until he found an obscure and largely unenforced regulation that served to back PCC into a corner.

Not only did the tactic allow Feuer to enforce the Reproductive FACT Act, it introduced a fine of \$2,500 per violation plus attorney’s fees for violations—up from the Reproductive FACT Act’s \$500 first-time offender price tag.

Had PCC and Corbett appealed to courts locally, they would have been asking for relief from justices appointed by California Gov. Jerry Brown, who signed the Reproductive FACT Act into law last

October. That’s when PCC decided they had no choice but to comply.

“It is clear that Mr. Feuer has a pro-abortion agenda in his determination to try to shut down pro-life centers in his city,” Anne O’Connor, J.D., vice president of NIFLA, said. “No other city, county or even the state, has tried to enforce the FACT Act, especially in light of the constitutional litigation that is pending.

“Some might wonder why the L.A. City Attorney is not focusing his law enforcement resources on fighting real crime and abuses in Los Angeles instead of going after non-profit agencies who help his constituents in meaningful ways, and all for free.”

O’Connor, whose career in the pro-life field started as a lay counsellor and later as a board member with PCC, went on to say that she is, “tremendously proud of the PCC for taking a sacrificial stand against the abusive powers of the rabidly pro-abortion City Attorney in Los Angeles.”

## **The Not-So-Undercover Investigator**

Serving across the street from Family Planning Associates, PCC has been actively involved in the Mission Hills community since 1972—five years after abortion was legalized in California and a year before Roe v. Wade legalized abortion on-demand in all 50 states.

Having added free ultrasound services seven years ago, and with a hope of adding free STI testing services in the near future, PCC does not receive a dime of funding from the state of California.

# LEGISLATIVE UPDATES

Corbett herself has served with the clinic for 18 years, the last 10 of which as executive director. She was out of the office Monday, Aug. 15, in fact, while her husband, Tim, was having surgery following a mild heart attack.

Corbett and her staff's familiarity with their client-base came into play that Monday, when an undercover investigator with the Department of Consumer Affairs came in the clinic alongside another young woman. Posing as a client, the investigator said she was just there to get information about abortion.

"We knew right off the bat they were plants," Corbett said, noting that the fact the women were looking around at the waiting room rather than their phones was an obvious tell. "They left, and my nurse, client services director and I said, 'Boy, something's up. They came back in 15 minutes later.'"

Less than 24 hours after that visit, Corbett had received a letter from Feuer's office, notifying her of his intent to enforce the state's signage requirements

under the California Business and Professions code.

Taking her clinic's overarching goal to offer life-affirming alternatives to abortion, Corbett got to work typing up the disclaimer in all 13 threshold languages of Los Angeles County.

"Someone said to me, through all this, 'It's not a justice system, it's a legal system,'" Corbett said.

With so much of her roots tied to PCC, O'Connor was intent on shedding light on the heat Feuer's office was putting on the clinic to make sure other proliferators were aware of both sides of the equation.

"Perhaps another day is coming when we will have to take a bolder stand and suffer severer consequences," O'Connor said. "I know the PCC will be ready for that day if it becomes necessary because they are passionate servants of a mighty God. The City Attorney may have won for now, but nothing will stop the PCC from serving women and saving lives."

*With appreciation from our friends at:*



## Study Finds Increased of Mental Health Disorders After Abortion

*(Original article from Elliot Institute, September 2016; Reprinted with Permission)*

A recent study of women in the United States has found that women who had abortions were more likely to be at increased risk of mental health disorders.

The study, published by Dr. D Paul Sullins of Catholic University of America, used data from the National Longitudinal Study of Adolescent to Adult Health, and followed more than 8,000 women for a period of 13 years:

After adjusting for demographic differences and other factors, the study found that abortion during these years elevated a woman's risk of mental health disorder by 45 percent.



“One-eleventh of the prevalence of mental disorders examined over the period were attributable to abortion,” the study's abstract said.

The study sought to examine any links between pregnancy outcomes like birth, abortion or miscarriage and mental health outcomes for U.S. women during the transition to adulthood. It drew on a national study of 8,005 women that surveyed them three times at average ages of 15, 22 and 28.

Involuntary pregnancy loss was associated with a 24 percent elevated risk of mental disorder, while childbirth was “weakly associated” with reduced risk of mental disorder.

Previous studies have also found an increase in mental health risks following abortion. A 2011 meta-analysis of 22 studies, published by Britain's Royal College of Psychiatrists, found that women who had abortions were 81 percent more likely to experience subsequent mental health problems, according to a new study published by Britain's Royal College of Psychiatrists. The greatest increases were seen in relation to suicidal behaviors and substance abuse.

The meta-analysis examined and combined results of 22 studies published between 1995 and 2009 and included data on 877,181 women from six countries. All 22 studies revealed higher rates of mental health problems associated with abortion for at least one symptom, and many for more than one symptom.

Using a standardized statistical technique for combining the results of multiple studies, the meta-analysis revealed that women with a history of abortion faced higher rates of:

- Anxiety: 34% higher
- Depression: 37% higher
- Alcohol use: 110% higher
- Marijuana use: 230% higher
- Suicide behavior: 155% higher

## *WORLD EVENTS, continued*

The study also found that women who delivered an unplanned pregnancy were significantly less likely to have mental health problems than similar women who aborted unplanned pregnancies. Women with a history of abortion were 55 percent more likely to have mental health problems than women who did not abort an unplanned pregnancy

Further, a meta-analysis combining the results of eight studies of women who experienced unwanted pregnancies, published in 2013, concluded that “there is no available evidence to suggest that abortion has therapeutic effects in reducing the mental health risks of unwanted or unintended pregnancy.”

The lead author of that review, Professor David Fergusson, who has described himself in interviews as a pro-choice atheist, also led the research team in a 2008 study that concluded that women who continued an unwanted or mistimed pregnancy did not experience a significant increase in mental health problems. Further, having an abortion did not reduce their mental health risks.

“In general, there is no evidence in the literature on abortion and mental health that suggests that abortion reduces the mental health risks of unwanted or mistimed pregnancy,” the authors wrote. “Although some studies have concluded that abortion has neutral effects on mental health, no study has reported that exposure to abortion reduces mental health risks.”

The Elliot Institute has called for congressional hearings to investigate the risks of mental health problems after abortion.



## Abstinence Counseling with the Woman on a Contraceptive

By Sister Paula Vandegaer, LCSW

She's not yet pregnant but she's sexually active. She believes she is a modern up-to-date woman. She has already been involved in outercourse, that is, heavy petting and oral sex. Now she's tried intercourse. After all, in her mind, it is a rite of passage, something you do "when you are ready." Her boyfriend used the condom, but now she has missed her period, and she is sitting in front of you asking for a pregnancy test. You're going to talk to this young woman about abstinence. Good luck!

### Description of the Problem

There is a cultural norm in American society that it is important and "good" to have sex before you marry. Pop culture probably frowns on promiscuous sex, but if you really like someone, sexual intimacy is expected. Sex does not have to lead to marriage in Pop culture.

Some of the new contraceptives deliver the chemical compounds more easily than the "pill" which required a woman to remember to take it daily. A number of young women have gone on contraceptives by taking a shot that lasts for three months before one has to have another one. Some use a patch that lasts a while before they change the patch. This makes taking contraceptives seem easier for the young woman, but there are numerous complications. An extended menstrual period or no menstrual period is one of the many side effects. This problem causes many young women to come into our pro-life centers concerned that they may be pregnant because of irregularities in their period. Many centers report an increase in the number of negative pregnancy tests. This means

there is an even greater challenge to help the sexually active young person to make better decisions.

Since many with a negative pregnancy test are already on a contraceptive, how can we approach her with an abstinence message? Women are much more amenable to an abstinence message if they are just beginning their sexual experimentation or if they are not yet on a contraceptive. How do we handle this more sexually experienced woman and convince her of something she has long ago dismissed? First of all, we have to give ourselves the message that we can make a difference. Many believe that young people are so sexually involved today they cannot or will not make a decision to abstain.

### Clarifying Goals

We need to get our goals clear. If you are working with a woman who is on a contraceptive, you can assume that she has developed a rationale for her behavior, and sex before marriage is okay, and maybe even desirable. Your goal then is to help her to question whether or not her views about premarital sex are really valid. Don't set yourself up with the goal of completely convincing a young person to stop, if that doesn't happen you feel as though you've failed.

Don't expect her to change in one visit with you. Don't tell yourself that there is no use in talking to this young person because she is not going to change. Expect her to start to question whether or not her ideas are valid about relationships.

Remember, studies show that if you are trying to completely change a person's attitude, beliefs, or perspective, if you give her too much information that is different from what she believes, she will simply turn you off. If you give her something that she doesn't believe, she simply will not listen or will find ways to make what you say not credible.

Think about it. If you pick up an article that says that putting your child in sports is a bad thing, you may say to yourself, "I've always thought it was good for children to be in sports to develop their mind, body, and sense of team, but I'll hear them out." Probably when you read the article the author will give their reasons, some of which you will dismiss and others may seem logical to you. Probably when you finish the article you won't be completely convinced to take your child off the baseball team, particularly if your husband is the coach, but maybe you'll have some doubts about it, or maybe you'll be less enthusiastic.

The same is true for someone who is very convinced that premarital sex is



totally harmless and is really a good thing. Probably you won't have a complete change of heart but you may be able to help the person bring up personal doubts about what is happening to him/her. People may be reminded that they are not acting in accord with their own religious or personal beliefs. Remember, the Holy Spirit counsels our clients long after they have left us. Perhaps another person, or an article, or someone will say something else to further confirm their doubts and make them think further. Plant the seed, and see who waters it.

I'd like to make some suggestions about issues that need to be raised with all sexually active young people. Your client may not walk out the door choosing to be abstinent until marriage, but if she walks out the door uncomfortable and asking herself hard questions, that is the first step toward changing her lifestyle.

### Some Important Questions

Start off with general questions to get an understanding of her life and her thinking now. "How long have you known your boyfriend? Is he the only one you're dating? Is he dating anyone else? How did you meet him? What do you like about him? Or what attracts you to him? Do you love him? Why or why not? These types of questions will give you a wealth of information and will put the young woman at ease if she feels you are interested. You and she will also find out a lot about her boyfriend.



You can proceed. “How long have you been intimate with him? Whose idea is it?” This can be followed with three very important questions that she needs to think about. First, “Who wants the sex?” You’ve already learned who initiated it, but who keeps it going? A woman may say, “Well, he wants it more than I.” or she may say, “We both like it” Or she may say. “He wants it and I don’t particularly. Its really his idea.” Your response will be different depending on what she says. The second question is, “Who needs the sex?” She has to be careful about this answer, and generally it makes a person think. If he needs it, she should ask herself if she is being used to meet his need. Is there really a relationship? If he doesn’t need it and she doesn’t need it, why are they so intent on having sex? This may help you to get into a discussion with her about what happens to a relationship if sex is involved.

The third question is, “What would happen to the relationship if you didn’t have sex?” If she genuinely believes there wouldn’t be a relationship, it may bring to the surface a feeling of being sed. She may also feel that guys have to have sex, and the only way to keep a guy with you is to have sex with him. Either of these responses needs discussion and education.

Every man and woman desires a true, faithful love. Often sex is a way to try to accomplish this. Innately, most people sense that it’s not accomplishing what its advertised to do. Only friendship and fidelity lead to the deep commitment we all desire.

Encourage your client to explore other areas of the boy/girl relationship. Ask him or her about who is their ideal mate. Do they have religious beliefs? What does their religion teach? What do they feel God wants them to do? Ask your clients if they pray. If they don’t, ask them if they ever prayed? If they stopped, why did

they? Many young people stop praying when they get themselves involved in drugs, sex, and alcohol. Be careful about sounding preachy. Usually if I want to teach something I say something that begins with “I believe.” “Mary Jane, I believe that God would love to hear from you even if you’re taking drugs now. My belief is that He loves you and wants you to turn to Him the best way you know how.” This way the girl can say, “Well that’s nice but I don’t believe that.” And then we can go on with the conversation to see what is helpful for her. If you try to give a teaching of your church at this time and present it as authoritatively true, you run the risk of her dismissing that, and everything else you say.

If you ask clients if they pray, and they say they do, ask them if they have prayed about this issue and their current relationship. “What do you think God wants you to do at this time?” Any of these questions will lead you into a discussion of their life and aspirations

### **Summary**

Our Centers are seeing many sexual active young people who are using the new long-lasting contraceptives. Use this opportunity to discuss their premarital sexual activity. Ask enough questions to see what is happening to them personally and share enough information that they can begin to question their decision.

*Adapted from an article printed earlier in Living World Magazine by Sr. Paula*

## iRapture.com's Pregnancy Center Website Marketing Guide

*Contributed by Jacob Barr of iRapture*

Pregnancy centers nationwide have been trying to find the best method of reaching their target audiences. However, this audience can range from prolife individuals who are seeking help to abortion-minded women caught betwixt and between. Reaching these opposing audiences takes a lot of careful thought and planning, but it is possible to make your message heard. This guide provides some essential tips for creating an online website presence that will open communication between you and your target audience(s).

### **The Last Trend**

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25-35 years ago, many centers began with names like The Crisis Pregnancy Center. However, names like this proved unmarketable to a large portion of the target audience. While some women perceived themselves to be in a crisis situation, many others did not. While the brand worked with many life-minded women, it did not seem to speak to abortion-minded women. This lack of connection forced many clinics to rethink the way they represented themselves, which resulted in many of these centers trying to adopt a new name and new brand.

### **The Next Trend**

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Changing your name changes your public identity. I would like to encourage every center to stop this damaging marketing tactic. Most centers have had their current name for long enough to establish a brand. Instead of abandoning the name that has worked so well for the life-minded community, the new trend should be for centers to consider adopting an additional, separate brand/name for abortion-minded service/marketing.

### **1 Brand per Target Audience**

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Having one brand per audience allows you to target your audience with a message designed specifically for them. Matthew 6:24 states that “no man can serve two masters: for either he will hate the one, and love the other; or else he will hold to the one, and despise the other.”

Applied to marketing, this means that no brand can serve two target audiences. One website can effectively communicate the desired message to one group, but that same content is often irrelevant to another; a message that speaks to a life-minded individual will not have the same impact as a message designed for an abortion-minded individual. It is very difficult for one website to connect with both audiences, especially when their needs are contradictory.

## **The Brand-Aid Fix**

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When an organization needs to use a single brand name for both client marketing and donor marketing, there is an easy solution to separate the two marketing efforts in the google search results. You can use the 'initials' of your organization for donor marketing and use the full spelling of your organization's name for client marketing. This will keep both sites from showing up side by side in a google search result when someone searches for your center's name based on one spelling or the other.

If a client searches for the name as it is marketed to her (The Full Spelling) then only the appropriate site is in the running to show up in the search results. If a donor searches for the name as it is marketed to the life minded community then only your donor site will be in the running to show up in the search results.

The need to separate the names is created when the branding begins to work and a client searches for the organization by your brand name and we want only the appropriate site with the appropriate messaging to show up in the search results.

Hopefully an abortion minded client will only be a client for a single season and we will experience success in seeing clients join the life minded community in the future, as your clients come to know you better over time and continue to appreciate the love and kindness you showed them. Having a client adopt your initials with your donor marketing could be a natural progression. With many of your supporters being with you for many years, using your organization's initials makes sense - since they will know you for a long time and training them to use your initials is reasonable.

## **Hiding a Website is Not the Solution**

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You want your life-minded community to be able to find you online. You want to be able to share important information with this audience, things like: opportunities to volunteer, success stories, changes in operation, or new available services. Hiding sites meant for life-minded audiences reduces your ability to connect and share. Worse yet, it raises questions of credibility and honesty in marketing among abortion-minded women. Both audiences have the potential of feeling deceived if you hide aspects of your clinic just to get their attention.

## **No More Hidden Pro-Life Meanings in a Name that Serves Abortion-Minded Women.**

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When designing a second brand for an abortion-minded market, it is wise to make sure the name does not have a hidden or secondary meaning. Again, it comes to honesty in marketing. This particular marketing landmine can be explosively repelling to an abortion-minded woman, who is already feeling vulnerable. Remember that you are trying to establish a relationship with someone who is considering abortion, therefore, your brand should reflect that audience.

## 1 Brand for Abortion Minded Clients

A woman seeking abortion has needs. There is a reason she is searching the internet. She may be seeking answers to questions, advice, or empathy. Your clinic has a lot of these things, but you need to express that in a way that bridges the gap between your client's needs and the clinic's services. The call-to-action is typically for a client to visit during office hours, make a phone call, or complete an interest form. The goal is to encourage your clients to create an appointment with a counselor. A prolife, or life-minded, message may not be effective in establishing these goals. Instead, developing a brand and message that specifically targets the hopes and needs of abortion-minded clients encourages them to reach out.

## 1 Brand for Life-Minded Clients and Community

In addition to providing aid for life-minded clients, a life-minded website can also communicate ways for the community to be involved. One of the best objectives of a life-minded website is to promote events. When someone attends an event, other objectives are often also met, such as the attendee may also pray, give financially, volunteer, and/or contribute toward the ministry in another way.

A life-minded website can share information about available services that can benefit life-minded women in need of help. This information can also serve to empower your life-minded community to provide word of mouth about the services available.

All of these goals can be achieved simply by making a brand specifically for a life-minded audience.



## Planning for the Next 5+ Years

My dad told me that before I add onto my house, I should plan for what I want my completed house to look like. When I add a room, it has to work toward the master plan. This will help me avoid a veritable hodgepodge. Just like a house, your clinic should be thinking about the next 5, 10, 20, 30 years.

Creating a second brand may take some time to develop, however, the investment is worth exploring. Your second brand can increase your marketability and help reach your target audience.

Jacob Barr, iRapture

# Perspectives – Holiday Marketing

## Marketing Ideas to Make the Most of this Holiday Season!

*Contributed by Corie Austin and Wm. Feaster*

Looking for a unique idea to make the Holidays even more special? Maybe this year consider a special event to honor all the families that have chosen wisely this past year and committed themselves to Life. Consider sponsoring a unique

CELEBRATING LIFE  
AT CHRISTMASTIME  
event of your own.

Our first event took place way back in December 2011. This event was the brainchild of Corie Austin and her staff at the Whittier Life Center. They were more than happy to have a chance to honor & celebrate the families that had been through their program in the past year – and the lives they helped to save.



The process of organizing and coordinating an event of this nature is fairly straightforward, although not always so simple. We found it best to have one person designated as the 'chairperson' to help coordinate all activities. This will help to manage all the moving parts. The keys to a successful event of this nature will include:

- ) Location sponsor – a Church Hall is a great place and many have a kitchen.
- ) Gift sponsor – we solicited a few local businesses, many who were more than happy to donate \$50-\$100 for the event.
- ) Food or Snacks – depending on the size of your event and your budget.
- ) Santa – what would Christmas be without a Santa? We found many willing Santa-wanna-be's in our community that were happy to help. Some even come with their own red suit too! (but no reindeer)
- ) Volunteers – always helps to have a few good elves around for wrapping gifts, soliciting donations, serving food or snacks, or even as Santa's helpers. Oh yes, always good to have plenty of these volunteers when it's time to clean-up too!
- ) Invitations – a simple flyer is great and a piece like the one above makes the event even more special. Phone calls and direct contact make a great personal touch/

It's true, the effort that's required for an event like this will require a commitment from you and your staff. But the results are astounding! The smiling faces and shouts of joy & laughter ....the little things that we might sometimes take for granted, are all savored and appreciated deeply by the families, those that Choose Life and made their decision to keep their babies.

We found this event to be a rewarding experience for all. Won't you please consider Celebrating Life at Christmastime in your community too!

Corie Austin and Wm. Feaster

# Scholl Institute of Bioethics - Update

## Changes in Hospice in the Last Thirty Years

By Rabbi Louis J. Feldman, Ph.D.

Ask a very elderly physician who has reached the venerable age of 95 or older and he/she will tell you the heart-rending stories of entire wards of patients who died for lack of a simple antibiotic. The progress made in curing illness has been spectacular. However, there comes a time when even modern medicine cannot cure a particular malady and we must admit that we have lost the battle. At this point, we must switch gears from curing to caring. Modern medicine is very good in the art of curing but needs much improvement in the art of caring.

This need was recognized by the remarkable Dame Cicely Mary Saunders (1918-2005) and led to founding of the St. Christopher Hospice in England in 1967.

These are three basic goals of this hospice: 1) to provide supportive care for the dying patient 2) to ease the pain and suffering of the dying patient and 3) to help the patient and family deal with the trials they face.

The ideals of the hospice movement were eloquently expressed by Richard Hurzeler: "Some of the public has a mistaken idea about hospice. They say it is about death. Hospice is really about life. It is valuing each moment, each particle of life. It is making the best of the time we have to live."

By 1979, 26 demonstration programs were initiated in hospices across the United

States. Many of these in-patient hospices were magnificent, to say the least. However, the inpatient hospices were unable to survive the vicissitudes of the medical world and the economic world. Within a few years, hospice efforts were directed towards the patient's home and terminally ill residents in nursing homes.

The mid-1980's saw a rise of the "do not" culture in the medical world: do not resuscitate, do not feed or hydrate, do not hospitalize, etc. The "do not" culture was bound to have its effect upon hospice care. In the year 2000, The National Hospice Organization changed its name to National Hospice & Palliative Care Organization (NHPCO). By 2004, many of the pro-euthanasia forces were absorbed into the NHPCO.

In the words of Ron Panzer, President of Hospice Patients Alliance and forthright advocate for terminal patients, "There is no further need for Euthanasia Society of America, (or its successors) as the NHPCO is carrying on its work.

" People who labored in the hospice movement thirty years ago are horrified by what is now happening in contemporary hospices. In addition to the invasion of the "do not" culture, hospice bureaucracy has multiplied exponentially, burying even hospice chaplains under tons of paper-work.



## Two key issues confronting contemporary hospice care:

1) With very few exceptions, it is never justified to withhold feeding and hydration from a dying patient.

2) In the words of Dr. Avraham Steinberg, Head and Director Hadassah's Center for Medical Ethics in Jerusalem and author of the most comprehensive encyclopedia of Jewish Medical Ethics, we are obligated to perform "therapies that help treatable complications unrelated directly to the terminal illness, such as antibiotics for pneumonia or blood transfusion after a hemorrhage."

Contemporary Medicare appears to be siding more and more with the "do not" culture. For example, if an unrelated medical emergency requires a trip to the hospital, Medicare will not cover the cost of the ambulance; the rationale being "You are supposed to be dying and you are not doing your job."

If a family is considering hospice care for a loved one, it is important to ascertain where a particular hospice stands on these aforementioned issues. If no, you may be setting your loved one up for a hastened and horrific death. Unfortunately, too many hospices are walking on the edges of euthanasia.

Author: This article was contributed posthumously by Rabbi Louis J. Feldman, Ph.D., member of the Scholl Institute of Bioethics executive board and a retired chaplain after 23 years at the Los Angeles Jewish Home For the Aging. Our thoughts and prayers are with the Feldman family.



# Supplies & Literature

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The complete set of tapes and individual CD's & DVD tapes are available at the ILS Office. (213-382-2156).

The complete set of tapes: CD's \$110; DVD's \$160.; Individual CD's \$10.; Individual DVD's \$15.



# Trending on the Internet - in Pictures



# ATI – More Pictures



Pictured Above, clockwise from left to right.....Board of Directors Mecki Grothues and husband Karl, Sister Paula and Mike Antonivich, LA County Board of Supervisors, Sister Beth, ILS Director of Operations, Sister Paula and friends (left is Nancy Corbett, the Secretary of ILS Board and right is Corie Austin, VP of ILS Board), Bob & Bev Cielnicky from Scholl Institute, Bill Anderson Family, ILS consulting attorney, Mecki Grothues, ILS Board of Directors , Sister Paula and Kathy Hochderffer, ILS Executive Director and co-founder.

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