



CLEARLY CARING

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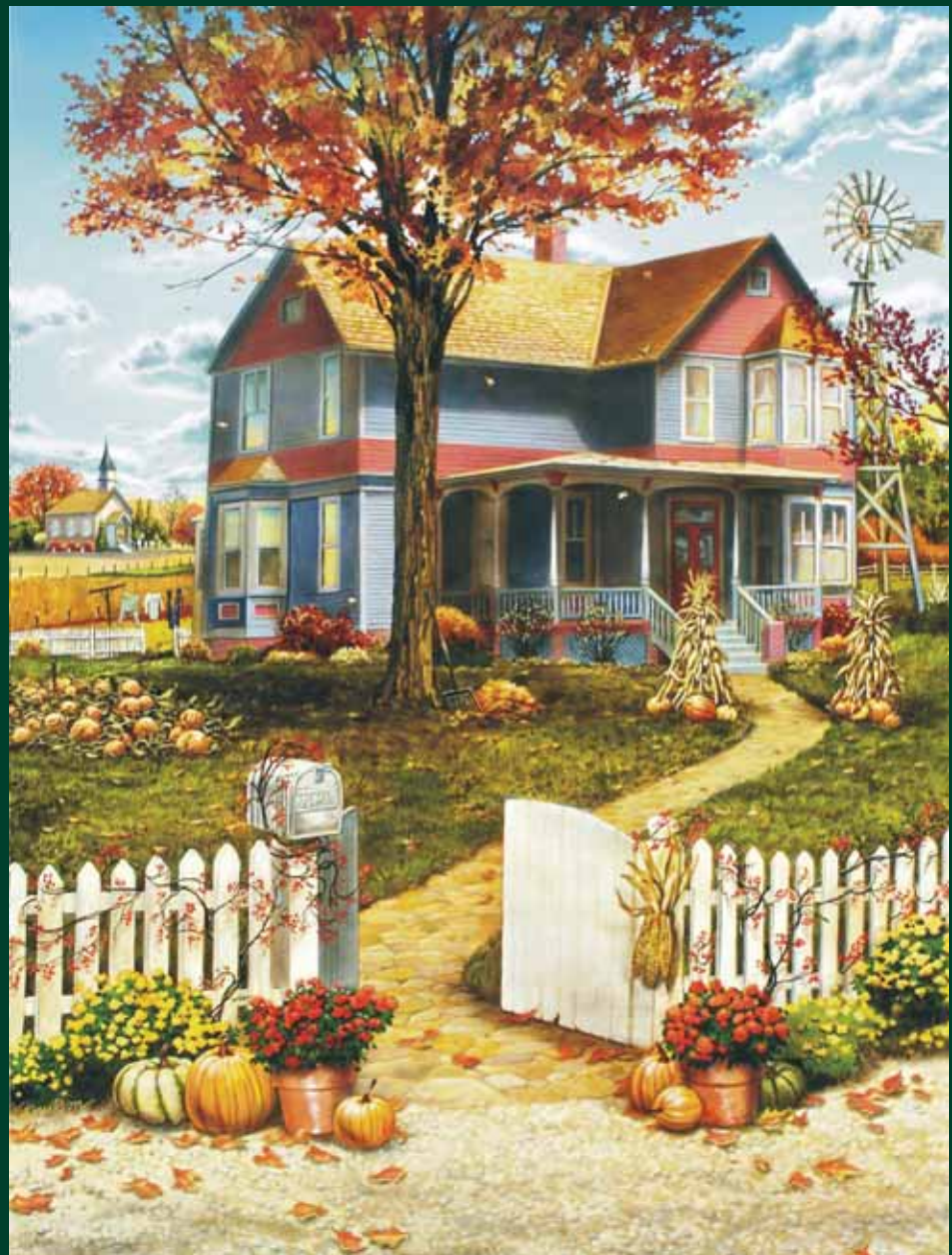
**Commentary:
You Don't
Want a
"Living Will"**

**Tentative or
Tenacious?**

**Colorful Kids
Collect Coins**

Boundaries

**National
Convention
Information
& Registration**



REGISTER NOW!



A life witness is a member of a congregation who assists the pastor and Christian Life Resources in communicating information about life

issues and seeks to engage fellow members in making a positive impact on life. The spring and fall have been busy times for many life witnesses who have taken a special liking to one facet of the Christian Life Resources ministry – *New Beginnings - A Home for Mothers*.

In 1993 we opened the doors to this home in Denver, Colorado. Here a single mother gives her newborn child a “new beginning” on life as we care for mother and child by helping them learn valuable parenting skills while giving spiritual training and help on their new lives.

It costs around \$150,000 a year to sustain this residential ministry. Many life witnesses have assisted the national office of Christian Life Resources in a unique campaign of distributing baby bottles to members of the congregation. Over the course of a few weeks members are asked to drop their change and special gifts into the bottle and then, on a designated day, bring it back to church. The life witness works with the treasurer of the congregation in gathering the returned bottles, cashing in the receipts and sending it to Christian Life Resources for application to the *New Beginnings* ministry.

We have had 95 churches, schools, and organizations participate in this program so far. These baby bottle contributions have brought in more than \$71,000 for the support of *New Beginnings* in a period of 18 months. By publicizing the program and coordinating this effort in the congregation, life witnesses have helped many people make a difference in the lives of mothers and their children at *New Beginnings*.

For more information on *New Beginnings - A Home for Mothers* visit their website at: www.HomeforMothers.com.

For more information on the Baby Bottle program visit www.ChristianLifeResources.com/?Changeforlifebabybottleproject.

For more information on becoming a Life Witness visit www.LifeWitness.com or call the national office of Christian Life Resources at 1-800-729-9535.

WANTED: PHOTOS

Christian Life Resources would like to use your favorite photos to promote its ministries. We are looking for photos that are warm and fuzzy, playful and fun, etc. Here are the qualifications:



- Photos need to be 5" x 7" in size
- Photos can be in color or black and white
- Family, sisters, cousins, children, individuals, babies, grandmas and grandpas, etc. All photos are accepted (however please keep them appropriate).

You must provide authorization from those in the photo or, if minors, permission from the parents, allowing us to use the photo. Photos can be scanned (no larger than 5mb and 300 dpi) and emailed to clr@christianliferesources.com. If you do not have email, photos can be accepted by mail at: Christian Life Resources
Attn: Marketing Director
2949 N. Mayfair Road, Suite 309
Milwaukee, WI 53222

If you have any questions, call the CLR office at 1-800-729-9535 and ask for Angela. For more information please visit our website at www.ChristianLifeResources.com.

Thank you for your submission and your interest in the future of CLR.

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activity spotlight

Colorful Kids Collect Coins

by Karen Rossin

St. Matthew's Lutheran School, Winona, MN

This past school year the three Pre-K classes at St. Matthew's Lutheran School in Winona, Minnesota, collected over \$281.00 for Christian Life Resources! Each family was offered an adorable baby bottle to use for collection, and the “Change for Life” mission and ministry project grew throughout the year. Many students filled their baby bottles multiple times! What a celebration we had when a bottle was brought in to be emptied into the class collection! Loose change is not worth very much in today's world. Together, though, it can make a BIG difference! Way to go, students!!

Pre-K classes at St. Matthew's Lutheran School collect spare change in baby bottles for their ministry project last year.



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The mission of Christian Life Resources (CLR) is to use life and family issues as bridges to convey the love of God and to share the message of salvation through Christ. CLR oversees the work of three distinct divisions: *WELS Lutherans for Life* develops educational materials and resources supporting our life and family ministry, and assists 82 affiliates in conducting their regional ministries and operation of 23 counseling and resource centers; *COMPASS Productions* produces media projects both within and outside the realm of life issues; and *Life Resources International* provides pro-life counseling, resources and humanitarian aid to people in other countries.

New Beginnings - A Home for Mothers, a separate legal entity affiliated with CLR, supports single mothers in a residential setting who have decided to carry their babies to term while teaching them how to include Jesus in their lives.

The Christians Concerned for Life Foundation is a separate legal entity affiliated with CLR, established to sponsor special life and family affirming projects not covered by regular operating budgets. Gifts to the foundation and subsequent earnings are granted to special projects which reflect Biblical principles in protecting human life and ministering to souls.

All Scripture quotations are taken from the Holy Bible, New International Version @ 1973, 1978, 1984 by International Bible Society.

Christian Life Resources (CLR) reserves and maintains the following websites:
www.ChristianLifeResources.com,
www.ClearlyCaring.com,
www.LifeWitness.com,
www.HomeforMothers.com,
www.SectionQ.com,
www.CLRStore.com,
and www.CLREvents.com.

Christian Life Resources is not responsible for the content of any other websites using similar names.

Artwork on the cover is by artist, Doug Knutson. Other Knutson artwork can be purchased around the country and through the CLR store (www.CLRStore.com).

You Don't Want a "Living Will"



by Rev. Robert Fleischmann
National Director of Christian Life Resources

“Do you have that ‘living will’ document my pastor told me about?”

The Christian Life Resources office often gets this question. Over the years we have dispensed thousands of legal documents that help people in their medical care in the later years of life. But never once have we dispensed a “living will” because you don’t WANT a living will.

Over the last couple of decades Americans have wanted more say in their medical care. Four driving forces caused this change:

1) Medical Advancements: Decisions in medical care which were once simple are now clouded with options. As with all options the door is opened for more input from others with only peripheral experience. For example, when two options expand to six options, chances are that the patient and/or acquaintances of the patient may have had some related experience with one of those choices. More people then interject their opinion into the process of medical-decision making, requiring clearer lines of authority to make decisions for a loved one.

2) Physician Liability: With others pressing harder for their voice to be heard the physician finds himself in a precarious situation. He faces legal responsibility for decisions that he may not necessarily feel are in the patient’s best interest. Rather than engage in troublesome quarrel with the patient or family he

acquiesces to the patient as long as the physician is relieved of any legal responsibility for the consequences of the decisions made.

3) Temporal and Eternal Confusion: Some people view a life of hardship as less valuable to sustain than a life of pleasure and ease. Others become attached to the things of this world and cling to them with morbid obsession. The result is a desire to control the extent of the discomfort while also pressing for “any and all efforts” to remain in this world.

4) Changing Values in Medicine: At one time doctors were among the most trusted people in society. They kept secrets; came to the patient’s home in the middle of the night; sacrificed, coddled and cared for each patient as if caring for a family member. The doctor was the life “sustainer.” To a Christian, the doctor was an agent of God helping each of us to be better stewards in caring for the blessing of life. But, the medical profession is not immune from what Scripture calls the increasing coldness of people (Matthew 24:12). Some doctors see death as a personal defeat and try all medical means to save a patient. Others become agents of death to dispatch those patients whom they feel have lost the quality of their lives. To protect themselves from being an experiment or a death statistic, the patient wants more say.

In 1990, the U.S. Congress passed the “Patient Self Determination Act” (effective December 1, 1991). The first medical directive forms developed came from medical organizations and were overly complicated. They would query a person about medical care which left the average patient lost in fog. They so categorized every malady yet ignored the simple reality that every medical case is different. Some circumstances of a medical crisis demand one course of action, and different circumstances demand another course of action. The documents were too rigid.

Capitalizing on this interest in making medical decisions for yourself was the “Society for the Right to Die.” As the name indicates, this group was a “pro-death.” They were a “pro-euthanasia” group

(agencies that advocated the “good death”). Since the founding of America various segments and organizations of society have advocated the notion that some lives are not worthy to continue. Margaret Sanger, the founder of Planned Parenthood, was a leading advocate in “purifying” the race (i.e., eugenics). She found common ground with those who advocated the right to die because this right was predicated on the fact that when our lives did not seem worth living, then we should be able to end it.

The eugenics and pro-euthanasia movements grew in popularity and were sought out by other countries to share their approach to these issues. One country that took a strong interest was Nazi Germany. When the atrocities of World War II became known, however, these agencies faded away only to be resurrected in the past several decades using the same basic message.

*Living wills had two flaws:
1) they expounded a pro-death bias;
& 2) their overly-general nature provided little direction when hard decisions had to be made.*

The Society for the Right to Die capitalized on America’s new sense of individual liberty advocated in the 1960s and created the “living will” document. It was a draft of a model for medical-decision making legislation for each of the 50 states. The document was shorter and far more general than its predecessor. Instead of articulating each detail for medical care the patient simply summarized a philosophy about end-of-care which became the “living will.”

Since this model was written by the Society for the Right to Die, it leaned toward a predisposition for death. It assumed that as life’s quality diminished, so also did the worthiness of life’s continued existence in this world. So the document guided you to state that you do not want to be sustained by artificial means. Most significantly for the Christian community, it left God out of the picture.

Living wills had two flaws: 1) they expounded a pro-death bias; and 2) their overly-general nature provided little direction when hard decisions had to be made.

Without a doubt the pro-death mentality is alive today. Although the living will faded, it enjoyed a resurgence when the Terri Schiavo case became front-page news. Reporters encouraged people to “get a living will” without realizing that living wills are woefully inadequate.

Today states have settled on a far more effective approach for declaring medical wishes. They created statutes to designate health care agents or surrogates to make decisions when the patient cannot do so. Simply put, they allow for the creation of a document called a “power of attorney for health care.” Health care surrogate documents allow designation of a primary and a secondary health care agent who is to understand your views about life, death, and your religious convictions.

Every state has guidelines for drafting medical directives. Your attorney can draft a basic directive for you, but for a Christian-based directive I suggest you get it from us. If you have access to the Internet you can download this document for FREE from our website. It is 100% valid and you can state both your medical wishes and especially provide a witness to your faith in God as your Creator and Jesus as your Savior.

Also download the “Supplement” to the medical directive. It will guide you in filling out the document in the light of God’s Word.

If you do not have access to the Internet you can purchase it, along with additional helpful materials, from Christian Life Resources and it will be mailed directly to your home.

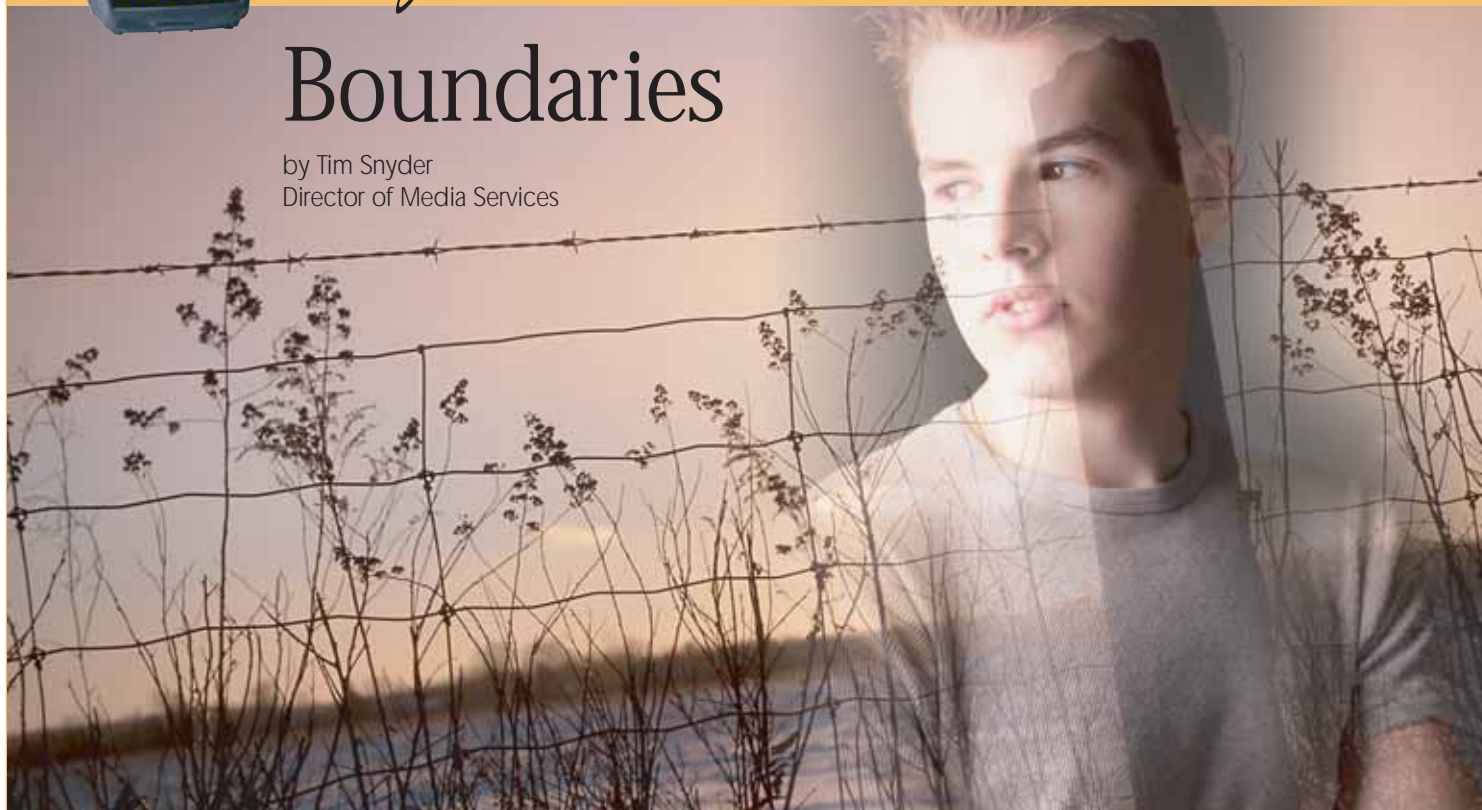
Your life is not your own (1 Corinthians 6:19) but a blessing from God to be cared for by you. The living will does not do this. You do NOT want a living will. Create a power of attorney for health care and use this opportunity to witness to your faith. ✝

To get your medical directive, you can download a free document from our website www.christianliferesources.com/?mdstatement or call 1-800-729-9535 to place an order.



Boundaries

by Tim Snyder
Director of Media Services



Toll-Free Calling

Since Christian Life Resources opened the doors to the national office in July of 1988 the work has grown dramatically. Not only did we need to provide support services for the 20+ counseling centers around the country but a growing number of people had questions about life issues that needed answering. We could always say that we were “just a phone call away” but sometimes a long-distance call was too much of a deterrent for someone to call.

Your gifts have gone to support toll-free calling to Christian Life Resources for over a dozen years. You don't think about how important that is until you need help. No matter where you are in the United States you can call, toll-free, the national office for advice and direction.

And that is not all. For more than ten years we have provided 24-hour emergency service with that toll-free number. If you have a genuine life issue crisis that occurs after normal business hours you can still call that toll-free number. You will be directed to make a series of selections and then leave your name and phone number. In turn, the phone system will call a member of the Christian Life Resources staff to call you back.

Over the years we have counseled the mourning, the troubled, the suicidal, the pregnant, the ailing, and the dying. This has been possible because the occasional gifts of many donors have found this means to make a difference in the lives of many others. On their behalf we thank you. 🍀



City streets and loose dogs don't mix well. That is why our backyard has a fence around it. Our dog, Amy, is confined to the yard for her own safety. If she were to roam free, it would be a recipe for disaster.

Dogs are not the only ones who need boundaries. People need them too. I was reminded of this as I explored a website hosting a roundtable discussion on “parental restrictions.” Teens were sharing their opinions on the Parental Advisory system that is in place for music CDs with questionable content. It was apparent that many of them were not happy with the boundaries their parents had placed on them. Here are some of the typical words they used to describe their parents: “overprotective,” “strict,” “uncaring” and “wrong.” Some also felt their parents didn't understand them.

Too much freedom and teens don't mix well (I can already hear the groans of any teens who might be reading this). If it's any consolation, adults don't always handle freedom so well either. We need safeguards in place too. Just like a dog who only sees the fun that can be had roaming free, sinful people

also focus solely on their own enjoyment. The dog is unaware of the fatal danger in a busy street and people also seem oblivious to the spiritually fatal danger lurking in the things of this world.

“For . . . many live as enemies of the cross of Christ. Their destiny is destruction, their god is their stomach, and their glory is on their shame. Their mind is on earthly things” (Philippians 3:18,19).

As Christian parents, you owe it to your children to set boundaries for them. It's an almost impossible task. Teens will find ways around the “fences” that their parents put up to protect them. Sometimes all it takes is going to a friend's house to listen to forbidden music or watch a restricted movie. One teen even bragged about his ability to hack into the

home computer and access those sites his parents tried to block. “I will always know more about computers than my parents.”

Our society loves its freedom. But sad to say, this loved freedom is often not the liberties that our founding fathers intended, but the freedom from being held to any moral standards. Many people have made their god their stomach. Their motto is, “If it feels good do it.” The apostle Paul describes these people like this:

“For...many live as enemies of the cross of Christ. Their destiny is destruction, their god is their stomach, and their glory is on their shame. Their mind is on earthly things” (Philippians 3:18,19).

Maybe your kids are right when they label you as overprotective or strict. They are definitely wrong when they call you uncaring. Loving parents set boundaries for their kids. Caring parents do the right thing by doing everything in their power to protect their children from the dangers of this world. Dangers that lead to eternal destruction.

The apostle Paul reminds us that we are not to be like those who live as enemies of the cross of Christ:

“But our citizenship is in heaven. And we eagerly await a Savior from there, the Lord Jesus Christ, who, by the power that enables Him to bring everything under His control, will transform our lowly bodies so that they will be like His glorious body. Therefore, my brothers, you whom I love and long for, my joy and crown, that is how you should stand firm in the Lord, dear friends!” (Philippians 3:20-4:1).

It's true, you cannot shield your children from everything. However, you can teach them right and wrong. Share with them what forms of entertainment are acceptable and which ones are not. Put up fences for their safety and repair them whenever necessary. Most critical of all, point them to Word and Sacrament. It's there, through the Means of Grace, that they will grow and receive the strength to stand firm in the Lord.

You may get tired of always being labeled the “bad guy” by your teenage children, but I encourage you to never falter as you fulfill your high calling as a parent. Fight the good fight! 🍀

Downward Abortion Trend Continues!

According to the June 2005 issue of the *National Right to Life News*, the total number of U.S. abortions since its legalization in 1973 is now at 45,951,133, based on numbers reported by the Alan Guttmacher Institute 1973-2002, with estimates of 1,293,000 for 2003-2004. According to NRLC, "After reaching a high of more than 1.6 million in 1990, the number of abortions annually has begun to decrease to levels not seen since the late 1970s."

[SOURCE: June 2005 - *National Right to Life News*]

Pediatricians Denounce Abstinence-Only Education

The American Academy of Pediatrics issued new recommendations in July 2005 regarding its official policy guidelines on teen pregnancy. Of note is the AAP's criticism of abstinence-only education and advocacy of teens' access to birth control and emergency contraception. The 1998 guidelines were revised by dropping the statement, "abstinence counseling is an important role for all pediatricians." In the new recommendations adolescents are encouraged to postpone early sexual activity. The message, however, is being criticized for its ambiguity because it encourages access to birth control by all teens — not just those who are sexually active.

[SOURCE: 7/7/05 - *Concerned Women for America*]

California's Assisted Suicide Bill Still Active

A bill to legalize physician-assisted suicide in California which was quietly dropped in mid-2005 for lack of legislative support is being resurrected. The California Compassionate Choices Act will be introduced in early 2006 by authors Lloyd Levine and Patty Berg. If enacted, California would become the second state to sanction doctor-assisted suicide. It models Oregon's euthanasia law which allows a terminally-ill person the right, with conditions, to receive a doctor's prescription to cause his or her death. Right-to-life and disability advocacy groups continue to strongly oppose the measure.

[SOURCE: 7/14/05 - *Californians Against Assisted Suicide*]

Ruling Determines Wisconsin Hospitals Cannot Intentionally Allow Newborns to Die

The Wisconsin Supreme Court ruled July 13 in favor of a case involving the birth of a premature baby who was intentionally not resuscitated and later died. In its ruling, the high court determined Meriter Hospital was in violation of a law that requires federally-funded hospitals to screen and stabilize people who come to the emergency room requesting treatment. Hospital personnel intentionally refused treatment of the baby boy because hospital policy would not allow it. Bridon Preston was born at 23 weeks, one week earlier than the policy's minimum age requirement. Tom Marzen, one of the attorneys who litigated the case, said: "These hospital officials tried to sidestep federal law and shirk their obligation toward this little boy. ... the Wisconsin Supreme Court recognized this, and we hope this tragedy will never happen again."

[SOURCES: 7/13/05 - *Alliance Defense Fund*; *Wisconsin Supreme Court website*]

High Incidence of Substance Abuse Found Among Abortive Women During Subsequent Pregnancy

A study published in the July 2005 issue of the *British Journal of Health Psychology* reveals women with a history of induced abortion are three times more likely to use illegal drugs during a subsequent pregnancy. The study suggests women with a history of abortion may exhibit unresolved grief and turn to drugs and alcohol during a later pregnancy. One of the study's authors, Elliot Institute director Dr. David Reardon, suggests post-abortion counseling and substance abuse programs for these women to help protect the unborn child from exposure to dangerous substances and help the mother to resolve issues related to the traumas of a past abortion.

[SOURCES: 7/12/05 - *Elliot Institute Press Release*]



Man Receives Ten-Year Term in Wife's Strangulation Death

An 84-year-old Virginia man was given a ten-year prison term in the strangulation death of his wife who suffered with Alzheimer's disease. William Wallace Hurt was sentenced in mid-July for killing his wife, Neva Hurt. On Easter morning 2004, Hurt attempted to kill the 83-year-old by placing a plastic bag over her head. The woman died from manual strangulation, according to a medical examiner's report. Judge James Swanson said during the sentencing, "Having some experience as a caregiver, I am fully cognizant of the relentless nature of that awesome responsibility. It cannot justify what happened. It cannot." The prosecutor in the case pointed out that social workers were scheduled to meet to arrange in-home health care for the Hurts before the woman's death.

[SOURCE: 7/14/05 - *www.chron.com*]

Spain Poised to Allow Therapeutic Cloning

Spain plans to introduce legislation allowing therapeutic cloning, its Health Minister Elena Salgado said in a July interview. Salgado told the *El Mundo* daily newspaper the legislation could be enacted as early as next year. The legislation would permit therapeutic cloning of human embryos for research purposes but would outlaw such cloning for reproductive purposes, she confirmed. A final version of the measure which is expected to be completed by bioethicists in September will be brought before the Spanish Parliament by year's end.

[SOURCE: 7/14/05 - *Kaiser Daily Reproductive Health Report*]

U.S. Leads World in Embryo Research Funding and Available Lines

Proponents of destructive human embryonic stem cell research argue that America's lack of funding and available lines are limiting their work. However, a June 20 special report in Britain's *Financial Times* dispels that argument by showing that the United States leads in the number of lines as well as in the dollars allocated for embryonic research. "The Future

of Stem Cells," a 35-page report produced by the *Financial Times* and *Scientific American* magazine analyzed the status of embryo research in nine countries and the European Union. The results show that the \$200 million in private American funding, the federally-funded \$24 million for research on embryo lines created before August 2001, and the \$3 billion committed by California and New Jersey far exceed other countries' funding. For example, the United Kingdom funds \$100 million between the government and private companies; in South Korea \$60 million is committed in government money; and in Sweden the government funds between \$10-\$15 million. America also dominates in the number of human embryo lines, at 46. South Korea has 29 such lines for research, Sweden has 8, the UK three, and Brazil, Israel, and Australia each have one line.

[SOURCE: 6/30/05 - *Catholic World News*]



Christian Life Resources is looking for donations for its upcoming

Silent Auction

Can you help us?

The Silent Auction will be held in conjunction with CLR's Convention on November 5th.

If you would like to contribute an item, please give us a call as soon as possible to let us know.

414-774-1331 or
angelal@christianliferesources.com

*Donated items need to be in the CLR office by **October 15th.***

by Paul Snamiska
WELS Lutherans for Life Administrator

Q: I've heard a great deal about the new forms of birth control. Which ones are acceptable for a Christian married couple to use?

A: Christian Life Resources has consistently stated that natural methods and barrier methods are truly contraceptive and can be safely used as birth control options. We also need to say that motive is the first determinant in evaluating the use of any means to control or limit the birth of children in your family. Many of the new birth control options are called hormonal forms because they introduce hormones into the woman's body that help her avoid or continue a pregnancy. Some of them clearly cause an abortion and should be avoided. Other hormonal forms of birth control have led to considerable debate within Christian circles as to whether they are truly contraceptive or abortifacient.

CLR continues to monitor the newest forms of birth control as they are developed. Always feel free to contact us with any specific questions.

Q: With aging Supreme Court justices and recent retirement discussions, how likely is it that the U.S. Supreme Court will overturn the infamous *Roe v. Wade* decision?

A: There has been a strong belief within the pro-life community that *Roe v. Wade* would be overturned some day, but a number of changes would have to take place first. For instance, the general public would need to change their attitudes about abortion, and people would need to see the immediate and long-term negative effects of abortion. Evidence tells us that these types of changes are occurring. National polls indicate a majority of Americans are opposed to full abortion rights, and abortion statistics are decreasing to numbers that have not been seen since the late 1970s.

It is likely that new Court appointments will lead to a decision that would overturn *Roe*. When that happens, abortion would not automatically become illegal throughout the country, but rather would revert to the states and each state would decide how to handle the abortion issue. You also need to realize that our ultimate goal is to change hearts with God's Word (Matthew 28:18-20). Only with hearts of faith can actions be truly pleasing to God (Hebrews 11:6). ❀



Tentative or Tenacious

By Rev. Doug Bode
Spiritual Director, New Beginnings – A Home for Mothers

By definition the word “tentative” means “hesitant, uncertain.” It refers to something that is not fully worked out or developed. That can include anything from a smile to a career choice, lifestyle, or goals in life. On the other hand, “tenacious” is defined as “not easily pulled apart, cohesive, tough.” One might think of tangible things like industrial Velcro or Gorilla Glue, or intangibles like values, priorities, or plans for life.

How do these words fit in at *New Beginnings - A Home for Mothers*? We often see babies develop into toddlers during their stay at New Beginnings. Initially they learn to pull themselves up using a coffee table or chair. Then they start those first hesitant steps around the piece of furniture (or Mom's legs). All these are very tentative steps, but they develop into something more solid and sure. Pretty soon they take those initial, unsure actions where they learn to put one foot in front of the other to walk independently. After much practice (and many tumbles!) they can eventually walk steadily and even start running down the halls of *New Beginnings*. Something extremely tentative develops into something much more dogged and determined.

The same holds true in the lives of our residents. It may be education or employment; it may also be spiritual development or a steely resolve to correct a lifestyle and improve her life and that of her child.

What does it take to accomplish this? There are words of instruction, reminders, encouragement, correction – sometimes even rebukes. Sometimes words have to be backed up by actions that show there are consequences for walking down the wrong road in life. Above all, there is the Word to which residents are exposed on a daily basis. As St. Paul reminds us, “*All Scripture is God-breathed and is useful for teaching, rebuking, correcting and training in righteousness, so that the man of God*



may be thoroughly equipped for every good work” (2 Timothy 3:16).

While we try to help residents turn their lives around in a material sense, it is our goal to share Jesus with them so that their earthly lives are finally transferred to that eventual goal of eternal life with Jesus in heaven. With His Word and its power brought into the resident's life, what often starts out as tentative develops into a tenacity that by God's grace has the power to guard and keep Christian faith as well as produce many fruits of faith. It's not uncommon to see demonstrated the truth of Jesus' words: “*I am the vine; you are the branches. If a man remains in me and I in him, he will bear much fruit; apart from me you can do nothing*” (John 15:5).

It is always our goal to help residents in their walk with God. We've housed young ladies who did not know God at all, one who thought God's name is Allah, and a number of them who simply had to get re-acquainted with God. It is our privilege and pleasure to sow the seeds of God's Word that alone can accomplish the steps of faith that progress from tentative to tenacious. While we can't always see the progress (and sometimes even see regression instead of progression), we have confidence that in each case the Seed of the Word will accomplish what God desires. ❀

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or call 1-800-729-9535

The Abortion Pill & the Morning-After Pill: Are They the Same?

There is much confusion about the two drugs which are often called “The Abortion Pill” and “The Morning-After Pill.” Surveys have shown that a majority of respondents are either misinformed or unaware of the differences between these two drugs.¹

The Abortion Pill

In 1980, a Frenchman, Dr. Etienne-Emile Baulieu, discovered a steroid hormone similar to progesterone called mifepristone. The sole purpose of this drug is to abort an early pregnancy. The French pharmaceutical company, Roussel-Uclaf, patented the drug. The company’s initials provide the first part of the drug’s label, namely, RU-486.

Due to pressure from American pro-life organizations, European manufacturers became concerned about marketing RU-486 in the United States. The manufacturing rights were handed over to a newly-formed American company, Danco Laboratories, and the name of the drug was marketed as Mifeprex (which is derived from the generic name, mifepristone).

Mifeprex is designed to terminate a pregnancy within the first seven weeks, although it has been used to abort babies as late as nine weeks.^{2,3}

Because this drug was established as a non-surgical abortion method, it is often referenced as “The Abortion Pill.”

The Morning-After Pill

The term, “Morning-After Pill,” has been used to describe a number of different drugs and procedures. Initially, women realized the effectiveness of taking extra birth control pills if they felt there was a possibility of pregnancy. The belief was that these extra pills would help prevent a pregnancy. Pharmaceutical companies realized the value of this method and started marketing specific pills that could be used after sex. These pills are really the same as typical combination oral contraceptives but with a higher dose of hormones.

This Morning-After Pill is really misnamed for a number of reasons. Duramed Pharmaceuticals, the manufacturer of Plan B, provides one pill to be taken as soon as possible and one additional pill to be taken 12 hours later.⁴ Other manufacturers claim a woman must take between two and five of these birth control pills immediately and a second dose in 12 hours for the same effect.⁵ In all cases, the Morning-After Pill requires more than one pill.

Another misconception is that a woman must wait until the next morning after taking these pills. The truth is that the pills are meant to be started as soon as possible, but certainly within the first 72 hours after unprotected sex.

A third concern is the claim that these pills cannot act as an abortifacient. In some cases, the pills prevent ovulation, but in other cases they inhibit implantation of a developing child in the embryonic stage. In cases in which an embryo cannot implant, the drug acts as a chemical abortifacient and that leads to the confusion between the two drugs. Pharmaceutical companies have addressed this issue by referencing this method of birth control as “emergency contraception” instead of the Morning-After Pill.

Summary

Due to confusion between these two drugs, CLR has provided this article to clarify the issue. The Abortion Pill, currently marketed as Mifeprex in the United States and RU-486 in Europe, is used to abort a baby within the first seven weeks of pregnancy. The Morning-After Pill, currently marketed as Plan B, is meant to provide security for a woman who is fearful of a pregnancy due to unprotected sexual intercourse. Although Plan B could serve as a contraceptive, it could also serve as an abortifacient. Therefore, CLR takes the position that while there is clearly a difference between these two drugs, neither should be used due to the risks to the health and life of the mother as well as to the life of the baby. 🌸

Comparison Chart of The Abortion Pill & The Morning-After Pill

The Abortion Pill	
Brand Name:	Mifeprex
Promoted As:	Alternative to surgical abortions
When Used:	Up to 7th week of pregnancy
How It Works:	Keeps progesterone from supporting a pregnancy
Does It Kill a Baby?	Always
Side Effects:	Cramping, nausea, diarrhea, vomiting, but also includes the possibility of heavy bleeding or infection that could lead to hospitalization or even death

The Morning-After Pill	
Brand Name:	Plan B
Promoted As:	Emergency contraception
When Used:	Within 72 hours after sex
How It Works:	Suppresses ovulation and thins uterine lining to prevent implantation
Does It Kill a Baby?	Sometimes
Side Effects:	Similar to birth control pills - nausea, headache, abdominal pain, but also more serious concerns such as blood clotting and heart problems that could lead to hospitalization or even death

¹ Roper Center for Public Opinion poll sponsored by Henry J. Kaiser Family Foundation and Harvard School of Public Health Methodology and conducted by Princeton Survey Research Association, 2001

² National Coalition of Abortion Providers, 2004

³ National Abortion Federation, 2003

⁴ Duramed Pharmaceuticals, Inc., 2004

⁵ Planned Parenthood Federation of America, Inc., 2004

What's New in Parish Nursing?

Updates and revisions, displays and promotions are all part of parish nursing. Here is a short listing:

Suggested Guidelines booklet - this booklet has been revised and updated so it is more

current and applicable for those churches considering a parish nursing program. You can download a free copy from our website.

Parish Nursing display - Pastor Carl Ziemer, WELS Special Ministries Administrator, worked on a formal display for parish nursing. This display has been used at various conferences to help promote parish nursing.

Promotional pamphlet - a new pamphlet has been designed to give basic information on parish nursing and to promote the ministry to those who are interested. You can download a copy from the website.

Parish Nurse shirts - one of our parish nurses helped design a nice shirt that can be worn to identify yourself as a parish nurse. For more information, check out the website.

The next **Parish Nurse Gathering** is scheduled for **Saturday, September 24** at the CLR office in Milwaukee. **Prof. Lawrence Olson from Martin Luther College will be our main speaker as he discusses a course of spiritual training that is available for parish nurses.** 🌸

Information on all these topics and more is available at: www.christianliferesources.com/?parishnursing



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