

Lifespan *news*

Volume 40 Number 6

Presenting the Pro-Life Message in Southeastern Michigan Since 1970

Sept./Oct. 2011



*Right to Life - LIFESPAN Educational Fund's
5th Annual*

CIDER WALK

“Children In-utero Deserve Equal Rights”

Sunday, October 9, 2011

1:30 - 3:30 p.m.

Will you walk with us to help save lives?

Heritage Park

27300 Farmington Rd.

Farmington Hills, MI

(between Ten and Eleven Mile Rds.)



*See page 11 for registration form
and more details*



News Notes

11th Circuit Decides Health Care Reform Individual Mandate Is Unconstitutional

The individual mandate provision of the 2010 health care reform law is unconstitutional, the U.S. Court of Appeals for the Eleventh Circuit decided in *Florida v. HHS* on August 12th. The Sixth Circuit previously held in *Thomas More Law Center v. Obama* that the individual mandate is constitutional. Therefore, the Eleventh Circuit decision creates a circuit split, making it more likely that the U.S. Supreme Court will tackle the issue.

The law's individual mandate requires individuals to maintain a specific minimum level of health insurance coverage beginning January 1, 2014, or pay a federal tax penalty for each month in which such coverage is not maintained. The law also requires an individual taxpayer to maintain the minimum required coverage for his or her dependents.

The Eleventh Circuit upheld a lower federal court's decision that Congress exceeded its commerce clause powers in enacting the individual mandate because Congress cannot "mandate that individuals enter into contracts with private insurance companies for the purchase of an expensive product from the time they are born until the time they die."

However, the lower court had declared the entire health care reform law invalid because it found the unconstitutional individual mandate to be legally non-severable from the rest of the law. The Eleventh Circuit disagreed, deciding that the individual mandate could be severed from the rest of the health care reform law.

Despite the Eleventh Circuit's decision on the legal severability issue, the individual mandate is one of the central tenets on which the health care reform law is based; thus, without it, the health care reform initiative will fail to achieve principle goals.

The fate of health care reform rests with the U.S. Supreme Court at this

point. We will continue to monitor health care reform legal challenges that are pertinent to employers. Meanwhile, the health care reform law provisions that directly impact employers and their group health plans remain "the law of the land," so employers should continue to comply with applicable provisions and prepare for compliance with provisions having future effective dates.

Jackson Lewis LLP's interdisciplinary Health Care Reform task force provides guidance to employers and plan sponsors regarding obligations and strategies under the health care reform law and related laws.

—Monique Warren, August 15, 2011
www.benefitslawadviser.com

Planned Parenthood Sues Michigan County

Planned Parenthood of Mid-and South Michigan (PPMSM) filed a lawsuit in Oakland County, Michigan to challenge the deed restriction that has thus far thwarted the abortion provider's plans to open a 17,000 square-foot clinic in Auburn Hills.

This covenant deed restriction was initiated over ten years ago when a parcel of land was sold to a hotel in close proximity to the building purchased by Planned Parenthood at 1625 N. Opdyke Road. The deed restriction permits the building to be used for a restaurant, retail store or "office."

When the owners of the hotel discovered that would not be the purpose of the building, they sought to enforce the deed restriction to protect their business interests. When notified of the owners intent, Planned Parenthood filed a motion before Oakland County judge James Alexander challenging the restriction.

—LifeNews.com, June 23, 2011

Planned Parenthood Cuts Contraception Not Abortion After De-Funding

Planned Parenthood abortion businesses in various states are making decisions on what to cut now that they

have faced cuts in taxpayer funding or elimination of the funds entirely. The cuts came because Planned Parenthood is the biggest abortion business in the nation but, instead of stopping abortions to regain the funds, officials have cut out birth control.

In New Hampshire, following news that the Executive Council revoked a \$1.8 million contract, Planned Parenthood decided to halt birth control and pelvic exams.

"Patients who used to be able to come to us for their pills now have to walk away," said Jennifer Frizzell, a spokeswoman for Planned Parenthood of Northern New England.

According to Reuters, "Planned Parenthood has stopped providing birth control pills and other contraception in New Hampshire after the state's executive council rejected up to \$1.8 million in funding for the group, which also provides privately-funded abortions. The move is expected to affect an average of 120 low-income women each day.

Other services provided by Planned Parenthood, including pelvic exams, were also in peril."

Another Planned Parenthood staffer said, "If you're against abortion, you ought to be leading the way on birth control," yet the abortion business is cutting family planning services rather than stopping abortions.

In Wisconsin, a \$1 million cut in taxpayer funding may jeopardize non-abortion services, but not abortions.

As one newspaper notes: "The Oshkosh center continues to provide health care screenings and birth control services as usual, but that could change depending on what happens with other state and federal programs that provide funds for health care services for low-income users."

"It's a shame some political personal beliefs are taking away resources that make sure women in Wisconsin have access to basic family planning health care," an official with the abortion business said.

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LIFE CHAIN

Sunday, October 2, 2011

2:00 - 3:30 p.m.

Hundreds of thousands of participants across the United States will silently stand in peaceful, prayerful witness to their commitment to love and protect the unborn and their mothers on National Life Chain Sunday. Gather family, friends, neighbors, fellow church members to join LIFE CHAIN! Signs will be provided with the following messages: **Abortion Kills Children, Adoption is the Loving Option, Abortion Hurts Women, Pray to End Abortion and Life, the First Inalienable Right.** Lifespan invites churches and organizations to host Chains on their own property in order to bring this event closer to all who wish to participate. We will provide the pre-printed signs, bulletin announcements, guidelines and anything else necessary to help you have your own LIFE CHAIN. If your church is interested in hosting LIFE CHAIN at your own location, call 248-478-8878. Call for updates to this list of LIFE CHAIN routes.

- ☆ Washtenaw Ave. and Platt Rd., **Ann Arbor**
- ☆ Main St. and Five Points, downtown **Belleville**
- ☆ Woodward Ave., from 11-12 Mile Rds., **Berkley/Royal Oak**
- ☆ Sashabaw Rd., between Waldon and Maybee Rds., **Clarkston**
- ☆ Gratiot Ave., between 15 and 16 Mile Rds., **Clinton Township**
- ☆ Commerce Rd., west of Union Lake Rd., **Commerce**
- ☆ Michigan Ave., west of Schaefer, in front of City Hall, **Dearborn**
- ☆ Telegraph Rd., between Oxford & Princeton (s. of Mich. Ave.), **Dearborn**
- ☆ Annapolis and Telegraph Rd., **Dearborn Heights**
- ☆ Ann Arbor Trail and Kinmore St., **Dearborn Heights**
- ☆ Telegraph Rd., between Colgate and Lehigh Sts., **Dearborn Heights**
- ☆ Telegraph Rd., at Ford Rd., north to Hass St., **Dearborn Heights**
- ☆ Gratiot Ave., at Six Mile Rd., **Detroit**
- ☆ Halsted Rd., just north of 12 Mile Rd., **Farmington Hills**
- ☆ 12 Mile, btwn Orchard Lake and Farmington, **Farmington Hills**
- ☆ Woodward Ave., between 8 and 9 Mile Rds., **Ferndale**
- ☆ 14 Mile Rd., west of Utica Rd., **Fraser**
- ☆ M-59 at Milford Rd., **Highland**
- ☆ M-24/Lapeer Rd., at Indianwood, **Lake Orion**

- ☆ M-24 (Main St.) & M-21, **Lapeer**
- ☆ Farmington Rd., between Lyndon and I-96, **Livonia**
- ☆ Middlebelt, Jamison (2 blks. s. of 5 Mile Rd.) to 6 Mile Rd., **Livonia**
- ☆ Plymouth Rd., between Farmington and Merriman Rds., **Livonia**
- ☆ 620 General Motors Rd., between S. Milford Rd. & Main St., **Milford**
- ☆ North Territorial Rd. between Sheldon and Beck Rds., **Plymouth**
- ☆ John R, between Auburn and Hamlin Rds., **Rochester Hills**
- ☆ Gratiot Ave. and 13 Mile Rd., **Roseville**
- ☆ Schoenherr Rd., between 21 and 22 Mile Rds., **Shelby Twp.**
- ☆ Ryan and 18 Mile Rds., **Sterling Heights**
- ☆ Telegraph Rd. at Northline Rd., **Taylor**
- ☆ M-59 & Van Dyke Rd., **Utica**
- ☆ Pontiac Trail and Maple Rd., **Walled Lake**
- ☆ Ryan and 11 Mile Rds., **Warren**
- ☆ 26 Mile Rd., between Van Dyke and Mound Rds., **Washington**
- ☆ Elizabeth Lake Rd., west of Telegraph Rd., **Waterford**
- ☆ M-59 at Airport Rd., **Waterford**
- ☆ Intersection at Wayne and Warren Rds., **Westland**

Academic Advisors: A New Threat to the Pro-Life Movement?

Our team and the thousands of students we work with across the nation know how tough starting and maintaining a student-run, pro-life campus group is. Not only do these students face the liberal agendas of their college administrations and professors, but garnering support for anything controversial can be a bigger job than tackling the actual issue at hand. Even students at Christian and other known religious and conservative schools have discovered that leading a pro-life group is no cakewalk.

What has been brought to my attention more and more recently though is the growing number of pro-life student groups that are close to extinction because of the inability to find an academic advisor.

In fact, this was an issue for me when I was in college. The few pro-life professors on campus were too afraid to sponsor our group at the risk of losing tenure, and the fight to find an advisor nearly crippled our group. Before graduation, I was finally able to convince a liberal, pro-abortion political science professor who respected me as a pupil to be our official advisor. She obviously didn't agree with our views, but she knew that our threat of being wiped out based solely on not being able to find an advisor simply wasn't right.

And it's not. But how does this coincide with the mantra of most universities to be open to new ideas, thought and expression?

Advisors of student-run groups are a necessity at most colleges and universities in the U.S., since they, theoretically, help with administrative logistics, resources and almost

always help get your group "official" recognition by the university administration. But the growing number of student pro-life groups who are unable to find a sponsor are shining a light on a whole new injustice.

If you can't find a professor who is pro-life or willing to stand up for their beliefs, your constitutionally protected right of speech is silenced.

"I recently had this problem," said former Students for Life of America Missionary, Julia Pritchett, "but I began hunting around and networking. I found a professor who is on the local pregnancy resource center's board, and he was thrilled to be our advisor." Prichett recommends that students in this position research if and where faculty members hold board positions in addition to campus churches and professors who have adopted children.

The fact is, plenty of professors may not have the time, willingness, or courage to sponsor student-run pro-life groups, no matter what their views, and this poses a real threat to the exposure of the pro-life movement to young people across the country. The professor who ultimately took on my campus' group was a rarity, and now more than ever, students must look outside the box and examine other resources to continue to Turn the Tide in our favor.

If your pro-life group is facing this situation on campus, contact Students for Life of America (SFLA) immediately as we can provide support and resources and connect you with legal aid if needed.

— *Students for Life*, <http://studentsforlife.org>, August 11, 2011

The Two-Minus-One Pregnancy

The “ethics” of aborting a healthy twin

Comment: It's hard to read this article without becoming sick. The excuses for these barbaric abortions range from "protecting" a marriage or possible "neglect" of older siblings to fear of "exhaustion" from rambunctious toddler twins. Really??? This article shows that evil never can limit itself. It must be stopped.

By Ruth Padawer

As Jenny lay on the obstetrician's examination table, she was grateful that the ultrasound tech had turned off the overhead screen. She didn't want to see the two shadows floating inside her. Since making her decision, she had tried hard not to think about them, though she could often think of little else. She was 45 and pregnant after six years of fertility bills, ovulation injections, donor eggs and disappointment—and yet here she was, 14 weeks into her pregnancy, choosing to extinguish one of two healthy fetuses, almost as if having half an abortion. As the doctor inserted the needle into Jenny's abdomen, aiming at one of the fetuses, Jenny tried not to flinch, caught between intense relief and intense guilt.

“Things would have been different if we were 15 years younger or if we hadn't had children already or if we were more financially secure,” she said later. “If I had conceived these twins naturally, I wouldn't have reduced this pregnancy, because you feel like if there's a natural order, then you don't want to disturb it. But we created this child in such an artificial manner—in a test tube, choosing an egg donor, having the embryo placed in me—and somehow, making a decision about how many to carry seemed to be just another choice. The pregnancy was all so consumerish to begin with, and this became yet another thing we could control.”

For all its successes, reproductive medicine has produced a paradox: in creating life where none seemed

possible, doctors often generate more fetuses than they intend. In the mid-1980s, they devised an escape hatch to deal with these megapregnancies, terminating all but two or three fetuses to lower the risks to women and the babies they took home. But what began as an intervention for extreme medical circumstances has quietly become an option for women carrying twins. With that, pregnancy reduction shifted from a medical decision to an ethical dilemma. As science allows us to intervene more than ever at the beginning and the end of life, it outruns our ability to reach a new moral equilibrium. We still have to work out just how far we're willing to go to construct the lives we want.

Jenny's decision to reduce twins to a single fetus was never really in doubt. The idea of managing two infants at this point in her life terrified her. She and her husband already had grade-school-age children, and she took pride in being a good mother. She felt that twins would soak up everything she had to give, leaving nothing for her older children. Even the twins would be robbed, because, at best, she could give each one only half of her attention and, she feared, only half of her love. Jenny desperately wanted another child, but not at the risk of becoming a second-rate parent. “This is bad, but it's not anywhere as bad as neglecting your child or not giving everything you can to the children you have,” she told me, referring to the reduction. She and her husband worked out this moral calculation on their own, and they intend to never tell anyone about it. Jenny is certain that no one, not even her closest friends, would understand, and she doesn't want to be the object of their curiosity or feel the sting of their judgment.

This secrecy is common among women undergoing reduction to a singleton. Doctors who perform

the procedure, aware of the stigma, tell patients to be cautious about revealing their decision. (All but one of the patients I spoke with insisted on anonymity.) Some patients are so afraid of being treated with disdain that they withhold this information from the obstetrician who will deliver their child.

What is it about terminating half a twin pregnancy that seems more controversial than reducing triplets to twins or aborting a single fetus? After all, the math's the same either way: one fewer fetus. Perhaps it's because twin reduction (unlike abortion) involves selecting one fetus over another, when either one is equally wanted. Perhaps it's our culture's idealized notion of twins as lifelong soul mates, two halves of one whole. Or perhaps it's because the desire for more choices conflicts with our discomfort about meddling with ever more aspects of reproduction.

No agency tracks how many reductions occur in the United States, but those who offer the procedure report that demand for reduction to a singleton, while still fairly rare, is rising. Mount Sinai Medical Center in New York, one of the largest providers of the procedure, reported that by 1997, 15 percent of reductions were to a singleton. Last year, by comparison, 61 of the center's 101 reductions were to a singleton, and 38 of those pregnancies started as twins.

That shift has made some doctors in the field uneasy, and many who perform pregnancy reductions refuse to go below twins. After being rebuffed by physicians close to home, Jenny went online and found Dr. Joanne Stone, the highly regarded head of Mount Sinai's maternal-fetal-medicine unit. Jenny traveled thousands of miles to get there. She still resents the first doctor back home who told her she shouldn't reduce twins and another who

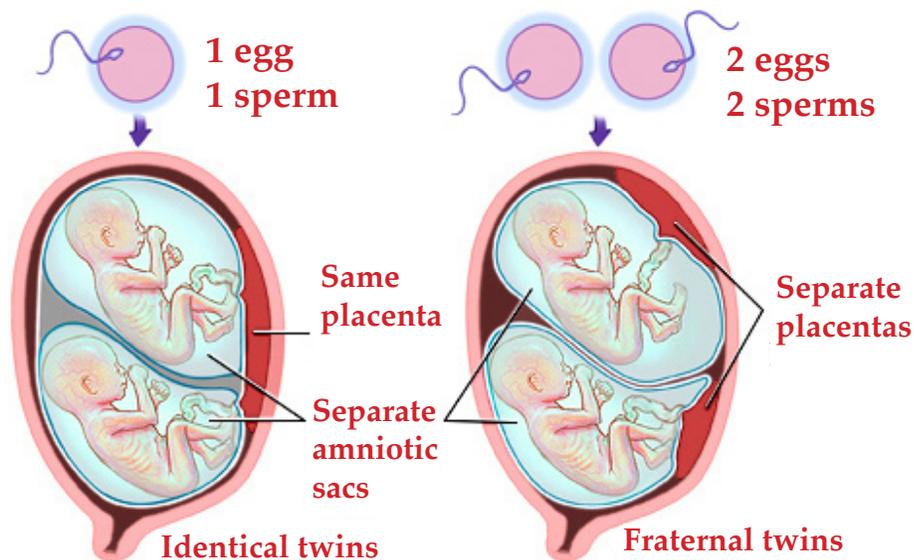
dismissively told her to just buck up and buy diapers in bulk.

Even some people who support abortion rights admit to feeling queasy about reduction to a singleton. "I completely respect and support a woman's choice," one commentator wrote on UrbanBaby.com, referring to a woman who said she reduced her pregnancy to protect her marriage and finances. One fetus was male, the other female, and the woman eliminated the male because she already had a son. "Something about that whole situation just seemed unethical to me," the commentator continued. "I just couldn't sleep at night knowing that I terminated my daughter's perfectly healthy twin brother."

Dr. Mark Evans, an obstetrician and geneticist, was among the first to reduce a pregnancy. He quickly became one of the procedure's most visible and busiest practitioners, as well as one of the most prolific authors on the topic. Early on, Evans decided the industry needed guidelines, and in 1988, he and an ethicist with the National Institutes of Health issued them. One of their central tenets was that most reductions below twins violated ethical principles.

Two years later, as demand for twin reductions climbed, Evans published another journal article, arguing that reduction to singletons "crosses the line between doing a procedure for a medical indication versus one for a social indication." He urged his colleagues to resist becoming "technicians to our patients' desires."

The justification for eliminating some fetuses in a multiple pregnancy was always to increase a woman's chance of bringing home a healthy baby, because medical risks rise with every fetus she carries. The procedure, which is usually performed around Week 12 of a pregnancy, involves a fatal injection of potassium chloride into the fetal chest. The dead fetus shrivels over time and remains in the womb until delivery. Some physicians found reduction unnerving, particularly be-



cause the procedure is viewed under ultrasound, making it quite visually explicit, which is not the case with abortion. Still, even some doctors who opposed abortion agreed that it was better to save some fetuses than risk them all.

Through the early 1990s, the medical consensus was that reducing pregnancies of quadruplets or quintuplets clearly improved the health of the woman and her offspring. Doctors disagreed about whether to reduce those to triplets or twins and about whether to reduce triplet gestations at all. But as ultrasound equipment improved and doctors gained technical expertise, the procedure triggered fewer miscarriages, and many doctors concluded that reducing a triplet gestation to twins was safer than a triplet birth. Going below twins, though, was usually out of the question.

In 2004, however, Evans publicly reversed his stance, announcing in a major obstetrics journal that he now endorsed twin reductions. For one thing, as more women in their 40s and 50s became pregnant (often thanks to donor eggs), they pushed for two-to-one reductions for social reasons. Evans understood why these women didn't want to be in their 60s worrying about two tempestuous teenagers or two college-tuition bills. He noted that many of the women were in second marriages, and while they wanted to create a child with their new spouse,

www.webmd.com/hw-popup/twin-pregnancy-types

they did not want two, especially if they had children from a previous marriage. Others had deferred child rearing for careers or education, or were single women tired of waiting for the right partner. Whatever the particulars, these patients concluded that they lacked the resources to deal with the chaos, stereophonic screaming and exhaustion of raising twins.

Evans's new position wasn't just a reaction to changing demographics. The calculus of risks had also changed. For one thing, he argued, in experienced hands like his, the procedure rarely prompted a miscarriage. For another, recent studies had revealed that the risks of twin pregnancies were greater than previously thought. They carried an increased chance of prematurity, low birth weight and cerebral palsy in the babies and gestational diabetes and pre-eclampsia in the mother. Marking what he called a "juncture in the cultural evolution of human understanding of twins," Evans concluded that "parents who choose to reduce twins to a singleton may have a higher likelihood of taking home a baby than pregnancies remaining with twins." He became convinced that everyone carrying twins, through reproductive technology or not, should at least know that reduction was an option. "Ethics," he said, "evolve with technol-

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Two-Minus-One Pregnancy

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that is because we're the ones who have the skills to do it, but that's not why we got those skills," he said. "It didn't start with people who conceived twins and said, 'I only want one'; it ended up with that."

Other doctors refuse to reduce below twins unless the pregnancy presents unusual medical concerns. Among them is Dr. Ronald Wapner, director of reproductive genetics at Columbia and another reduction pioneer. Sometime in the late 1990s, when Wapner practiced in Philadelphia, he received his first two-to-one request. "She said, 'Either reduce me to a singleton, or I'll end the pregnancy.'" He consulted his staff, all women, and they concluded that if a woman can choose to end a pregnancy, she can reduce from two to one. Besides, in this case, the team would be saving a fetus that would otherwise be aborted.

As word spread, a stream of patients called Wapner's office, scheduling reductions to a singleton. A few months later, after the last patient of the day left, the sonographer who had worked with Wapner for nearly 20 years stopped at his office. She told me what happened next, on condition of anonymity because she doesn't want her relatives to know everything her work entails: "I told him I just wasn't comfortable doing a termination of a healthy baby for social reasons, and that if we were going to do a lot of these elective reductions, I thought he should bring in someone else who was more comfortable. From the beginning, I had wrestled with the whole idea of doing reductions, because I was raised in the church. And after a lot of soul searching, I had decided there were truly good medical reasons to reducing higher-order multiples to twins. But I had a hard time reconciling doing reductions two to one. So I said to Dr. Wapner, 'Is this really the business we want to be in?'"

Wapner immediately called a meeting with his staff. Every one of them—the sonographer, the genetic counselors, the schedulers—sup-

ported abortion rights, but all confessed their growing unease with reductions to a singleton. "There's no medical justification in a normal twin pregnancy to reduce to one," Wapner said. "So we decided to allocate our resources to those who would get the most benefit. We were in the business to improve pregnancy outcomes, and those reductions didn't fit the criteria." He hasn't done an elective two-to-one reduction since.

Evans estimates that the majority of doctors who perform reductions will not go below twins. Shelby Van Voris was pregnant with triplets when she discovered this for herself. After she and her husband tried for three years to get pregnant, they went to a fertility doctor near their home in Savannah, Ga. He put Shelby, then 30, on fertility drugs, and when that didn't work, he ramped things up with injections. By then, her husband, a 33-year-old Army officer, had been deployed to Iraq. He left behind three vials of sperm, and she was artificially inseminated. "You do weird things when mortars are flying at your husband's head," she said. She soon found out she was carrying triplets. Frantic, she yelled at the doctor: "This is not an option for us! I want only one!"

Her fertility specialist referred her to a doctor in Atlanta who did reductions. But when Shelby called, the office manager told her that she would have to pay extra for temporary staff to assist with the procedure, because the regular staff refused to reduce pregnancies below twins. She contacted three more doctors, and in each case was told: not below two. "It was horrible," she says. "I felt like the pregnancy was a monster, and I just wanted it out, but because we tried for so long, abortion wasn't an option. My No.



Twins in utero appear to kiss

www.dailymail.co.uk

1 priority was to be the best mom I could be, but how was I supposed to juggle two newborns or two screaming infants while my husband was away being shot at? We don't have family just sitting around waiting to get called to help me with a baby."

Eventually, she heard about Evans and flew to New York for the procedure. "I said, 'You choose whoever is going to be safe and healthy,'" she says. "I didn't give him any other criteria. I didn't choose gender. None of that was up for grabs, because I had to make it as ethically O.K. for me as I could. But I wanted only one."

She paid \$6,500 for the reduction and left Evans's office incredibly relieved. "I went out on that street with my mother and jumped up and down saying: 'I'm pregnant! I'm pregnant!' And then I went and bought baby clothes for the first time."

Today, her daughter is 2½ years old. Shelby intends to tell her about the reduction someday, to teach her that women have choices, even if they're sometimes difficult. "I am the mother of a very demanding toddler," she says. "I can't imagine this times two, and not ever knowing if I'd have another person here to help me. This is what I can handle. I'm good with this. But that's all."

Who doesn't want to create a more certain and comfortable future for themselves and their children? The more that science makes that possible, the more it has inflated our expectations of what family life should be. We've come to believe that the improvements are not only our due but also our responsibility. Just look at the revolution in attitudes toward selecting egg or sperm donors. In the 1970s, when sperm donation took off, most clients were married women with infertile husbands; many couples didn't want to know about the source of the donation. Today patients in the United States can choose donors based not only on their height, hair color and ethnicity but also on their academic and athletic accomplishments, temperament, hairiness and even the length of a donor's eyelashes.

Sheena Iyengar, a social psychologist at Columbia Business School and the author of *"The Art of Choosing,"* suggests that limitless choice is a particularly American ideal. In a talk at a TED conference last year in Oxford, England, Iyengar said that "the story upon which the American dream depends is the story of limitless choice. This narrative promises so much: freedom, happiness, success. It lays the world at your feet and says you can have anything, everything." Nevertheless, she subsequently told me, "we are in the midst of a choice revolution right now, where we're trying to figure out where the ethical boundaries should be."

Reduction is hardly the only area in which reproductive innovation has outpaced cultural consensus. Americans disagree bitterly about abortion. They also debate the ethics of egg donation, sex selection, gestational surrogacy and menopausal women being impregnated with younger women's fertilized eggs. And yet all these options are now available, at least to those who are well heeled or well insured.

The ability of women to control their fertility has created all kinds of welcome choices. "But the dark lining of that otherwise very silver cloud is that you make the choice of

when to get pregnant, and so you feel really responsible for its consequences, like do you have enough money to do it well, and are you going to be able to provide your child with everything you think you ought to provide?" says Josephine Johnston, a bioethicist at the Hastings Center in Garrison, N.Y., who focuses on assisted reproduction. "In an environment where you can have so many choices, you own the outcome in a way that you wouldn't have, had the choices not existed. If reduction didn't exist, women wouldn't worry that by not reducing, they're at fault for making life more difficult for their existing kids. In an odd way, having more choices actually places a much greater burden on women, because we become the creators of our circumstance, whereas, before, we were the recipients of them. I'm not saying we should have less choices; I'm saying choices are not always as liberating and empowering as we hope they will be."

Consider the choice of which fetus to eliminate: if both appear healthy (which is typical with twins), doctors aim for whichever one is easier to reach. If both are equally accessible, the decision of who lives and who dies is random. To the relief of patients, it's the doctor who chooses—with one exception. If the fetuses are different sexes, some doctors ask the parents which one they want to keep.

Until the last decade, most doctors refused even to broach that question, but that ethical demarcation has eroded, as ever more patients lobby for that option and doctors discover that plenty opt for girls. Some patients, like Shelby Van Voris, want no part in the decision. Others say that as much as they hate the idea of choosing based on sex, if there's a choice to be made, they want to be the ones to make it.

Society judges reproductive choices based on the motives behind them. Though roughly half of Americans identify as "pro-choice" and half as "pro-life," polls also show the distinction blurs depend-

ing on why the woman is aborting. If a woman is the victim of incest or rape, or if her health is threatened, far more people—including abortion opponents—understand her choice to end the pregnancy. Support falls off if a woman aborts for financial reasons and is lowest of all if she aborts because of the fetus's sex.

Think about the common reaction to a woman who aborts because contraception failed versus a woman (and her partner) who took no precaution at all. "It changes our judgment of the moral character of the individual making the abortion decision," says Bonnie Steinbock, a philosophy professor who is on the ethics committee of the American Society for Reproductive Medicine. "In the first case, it wasn't her 'fault'; in the second, it was. It doesn't mean the careless person shouldn't have the right to an abortion, but it does mean we're going to have a very different reaction to that choice." Likewise, people may judge two-to-one reductions more harshly because the fertility treatment that yielded the pregnancy significantly increased the chance of multiples. "People may think, You brought this about yourself, so you should be willing to take some of the risk," Steinbock says.

Women who reduce to singletons sometimes think the same thing. "Most of the two-to-one patients have gone to incredible lengths to get pregnant," Donna Steinberg, a clinical psychologist in Manhattan who specializes in counseling infertility patients, says. "They've paid a lot of money and put their bodies through tremendous stress, and they've gotten what they wanted—and now they're going to reduce? Outsiders think, How is that possible? And that's also where the patients' guilt comes from."

It's not only the parents who may feel guilty. Even if parents work hard to conceal it, the child may discover the full story of his or her origins, and we don't know what feelings of guilt or vulnerability or loss this discovery might summon.

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oakland/macomb

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40 Days for Life

The 2011 fall campaign for 40 Days for Life will take place from September 28 through November 6 with locations in Lathrup Village, Bloomfield Hills and Sterling Heights. This is a 7-day-a-week prayer vigil. For specific locations and open time slots, call Barb Yagley at 248-703-3577 or go to www.40daysforlife.com/southfield.

Amazon purchase helps Lifespan

In a short article below, you will find instructions on how to order from Amazon and help Lifespan at the same time. No codes or special numbers are needed. Just click on the link on Lifespan's web page and you will go straight to Amazon to shop and place your order. A percentage of the cost of your order will go to Lifespan's Educational Fund. That's it. We are making every effort to find funding for Lifespan and our Educational Fund

Kroger customers!

Lifespan is enrolled in the Kroger Community Rewards Program. A percentage of the purchases of all those who register their Kroger Plus cards online will be rewarded back to Lifespan! This is a great way to help fund our pro-life efforts; we encourage everyone to *register online for this program!*

Go online to: www.krogercommunityrewards.com and be sure to have your Kroger Plus card handy to register your card. (If you do not yet have a Kroger Plus card, they are available at the customer service desk at any Kroger.) Most participants are new online customers, so they must click on "Create an Account." Sign up for a Kroger Rewards Account by entering your email address and creating a password. Enter your zip code for the Kroger store nearest you. Enter your Kroger Plus Card number. Confirm your info and agree to terms and conditions. You will then get a message to check your email inbox and click on the link within the body of the email to activate your account.

in this difficult economy and this is a no-cost-to-you-or-us way to do it!

Farewells are hard

Sue Ducharme, Lifespan's secretary at the Main Office, is moving from the Detroit area and has resigned her position with us. Goodbyes are always difficult and this is no exception. Thank you, Sue, for all you have done for us, and good luck with your new adventure.

Entertainment Books

The 2012 books are in and you can still get a 2011 (at no additional cost) that is good until November. Give us a call to the office, 248-816-1546, and order one. There are lots of goodies in this year's book!

Christmas cards

It is only September, but now is the time to start thinking about Lifespan Christmas cards. Several area churches will have the cards available in late October and during November, but we always need new places to offer them. If you think that your church, club, service organization or group might like to be part of this project, please give us a call at the office. There are no "up front" charges, you decide the day/s when you will offer them, and the proceeds will go a long way in helping us keep the doors open and the lights on at the office!

Travel with Lifespan!

Visit Right to Life - LIFESPAN's travel site at: www.ytbtravel.com/lifespan. You'll find the same airlines, hotels, rental cars and cruises as on other travel websites! You'll get great travel prices! Each time you book travel, a portion of the travel commissions will go to Lifespan!

Log onto your account and use your email address and password to sign in. Click on "Edit Community Rewards Program" and input Lifespan's NPO number 83138, click "Search," select "Right to Life - Lifespan Ed Fund," and save selection.

REMEMBER, purchases will not count for Lifespan until after you register your card online as described above. ALSO, KROGER REQUIRES THAT YOU RE-REGISTER EVERY APRIL. If you need more information, see "frequently asked questions" on the Kroger website or call Lifespan at 248-478-8878.

Shop Amazon.com and Help LIFESPAN!

Lifespan has joined Amazon Associates, an affiliate program with amazon.com. When you visit Lifespan's website, you will find a link to amazon.com on our Events page. If you use this link to amazon.com and make a purchase, Lifespan will receive a percentage of your sale. What a great way to shop AND protect human life—all at the same time! See the events section on www.rtl-lifespan.org and click on the Amazon link on the Events page (3rd item) to shop today and help Lifespan in our mission to protect all human life!

wayne west/downriver

14600 Farmington Rd., Ste. 108, Livonia, MI 48154-5431
Phone 734-422-6230 • Fax 734-422-8116
e-mail: wwdr@rtl-lifespan.org
Office Hours: Monday-Thursday 10-4; Friday Closed
Patricia Holscher, Director; Laurie Masiarak, Ofc. Mgr.

Our library

The book, *unPLANNED*, by Abby Johnson, and on loan from our office, is a must-read! "Abby joined Planned Parenthood as a college student because she wanted to help women in crisis—a goal she believed the organization shared. As she rose through the ranks to become a clinic director, however, things started to shift. Finances grew tighter, clinic practices changed, and Abby became increasingly unsettled about what she was being asked to do. But, it wasn't until she helped perform an actual abortion procedure that Abby fully realized what she'd been a part of all these years."

"As I took the ultrasound probe in hand, I could not have imagined how the next ten minutes would shake the foundation of my values and change the course of my life."

"This is a compelling story of crisis and change. *unPLANNED* is also a reminder of how grace finds us in unlikely places, and how we can all reach out with love to those who stand on opposing sides." —Taken from the book's jacket. This book is new and exposes what really

goes on inside Planned Parenthood offices. Call now to reserve it for you.

Entertainment Books

Purchase a 2011 Entertainment Book and receive a FREE 2010 book while supplies last. 2010 Entertainment Books are good until November 1. (Some coupons are good until December 31.) If you've already used your coupons for your favorite places, NOW you can go again! Perhaps you have some unused coupons, you could invite another two people to go with you. With your help, this can be a really big fundraiser for our chapter. Books are \$25 which is \$10 less than retail stores. If you plan, you always get your money back.

E-mail

Please send your e-mail address to us at wwdr@rtl-lifespan.org. We will not be sending trivial messages to you, but if we can save postage, which is costly, we can use your donations for other projects. We need hundreds of e-mails to make this work. PLEASE help us!

40 Days for Life

Forty Days for Life is a community campaign that draws attention to the evil of abortion through the use of a three-point program: first, prayer and fasting, secondly, constant vigil, and thirdly, community outreach. Dates for this event are September 28 through November 6. For more information, call Barb Yagley at 248-703-3577 or go to www.40daysforlife.com/southfield.

wee care

A Program of Right to Life - LIFESPAN
Educational Fund
29200 Vassar, Ste. 545, Livonia, MI 48152-2193
Phone 248-478-8884 • Fax 248-478-8854
Office Hours: By appointment
Karen Patrosso, Director



Dear Friends,

Last month there was a very unfortunate incident regarding scam artists trying to receive money, gift cards and baby supplies using Wee Care's name and the names of Lifespan board members.

They approached churches and various St. Vincent de Paul organizations with a phoney sob story that would have earned them an academy award!

Please be aware—Wee Care and Lifespan board members NEVER give referrals or send people in need to other organizations or churches. It is just the opposite! Churches, hospitals, schools, social service agencies, crisis pregnancy centers, lifespan members and others send the mothers to us.

Once we receive a request for help, we verify that it is a legitimate referral—that there truly is a need—and THEN we put together a package.

For someone who has used their social security check to purchase a baby item—

For a child who has done chores to earn money to go to the dollar store to buy a small gift for a baby—

For someone who has spent weeks crocheting a beautiful afghan—

For someone who has spent hours and hours making arrangements for giving trees and baby showers—

For someone who has made a monetary donation for our little ones—

To all of you and everyone who has ever donated or helped my Wee Care babies in any way—I promise you that we will do our very best to make sure that a mom and her precious baby WHO TRULY NEEDS HELP will benefit from your kindness. I consider that a very special part of my job—a sacred trust between us. Thank you for everything and God bless you!
Love, Karen



All material and monetary donations to Wee Care are tax-deductible. Checks must be made payable to Right to Life - LIFESPAN Educational Fund.

Two-Minus-One Pregnancy

continued from page 7

The doctors who do reductions sometimes sense their patients' unease, and they work to assuage it. "I do spend quite a bit of time going through the medical risks of twins with them, because it takes away a little bit of the guilt they feel," says Stone, the Mount Sinai doctor. Sometimes, she says, couples disagree about whether to reduce a twin pregnancy, and she encourages them to see a therapist so they can be at peace with whatever they decide.

One of Stone's patients, a New York woman, was certain that she wanted to reduce from twins to a singleton. Her husband yielded because she would be the one carrying the pregnancy and would stay at home to raise them. They came up with a compromise. "I asked not to see any of the ultrasounds," he said. "I didn't want to have that image, the image of two. I didn't want to torture myself. And I didn't go in for the procedure either, because less is more for me." His wife was relieved that her husband remained in the waiting room; she, too, didn't want to deal with his feelings.

In some ways, the reasons for reducing to a singleton are not so different from the decision to abort a pregnancy because prenatal tests reveal anomalies. In both cases, the pregnancies are wanted, but not when they entail unwanted complications—complications for the parents as much as the child. Many studies show the vast majority of patients abort fetuses after prenatal tests reveal genetic conditions like Down syndrome that are not life-threatening. What drives that decision is not just concern over the quality of life for the future child but also the emotional, financial or social difficulty for parents of having a child with extra needs. As with reducing two healthy fetuses to one, the underlying premise is the same: this is not what I want for my life.

That was the thinking of Dr. Naomi Bloomfield, an obstetrician near Albany who found out she

was pregnant with twins when her first child was not quite a year old. "I couldn't have imagined reducing twins for nonmedical reasons," she said, "but I had an amnio and would have had an abortion if I found out that one of the babies had an anomaly, even if it wasn't life-threatening. I didn't want to raise a handicapped child. Some people would call that selfish, but I wouldn't. Parents who abort for an anomaly just don't want that life for themselves, and it's their prerogative to fashion their lives how they want. Is terminating two to one really any different morally?"

"Something about that whole situation just seemed unethical to me...I just couldn't sleep at night knowing that I terminated my daughter's perfectly healthy twin brother."

I was eight weeks pregnant when my husband and I, with our 2-year-old daughter in tow, visited friends who had recently had twins. Our friends, two of the most laid-back parents we knew, looked exhausted, beaten, overrun. Between their infants and their 3-year-old, it seemed someone was always hungry, howling or filling a diaper. The second my husband and I stepped into our car to drive home, we said in unintentional unison, "Thank God we're not having twins."

One week later, I began to cramp and bleed, so my midwife did an ultrasound to see if I had miscarried. The fetus was fine. It wasn't, however, alone. "Twins," the midwife announced cheerfully. My terror was instantaneous, and for the next few days, I could not seem to grab enough oxygen to breathe. Aborting half the pregnancy didn't occur to us—who knew it would even be doable?—but for a few panicky hours, we wondered if it was possible to give one up for adoption.

I was right to be afraid. Studies report enormous disruption in families with multiples, and higher levels of social isolation, exhaustion and depression in mothers of twins. The incessant demands of caring for two same-aged babies eclipse the needs of other children and the marriage. It certainly did for us. There's no doubt that life with twins and a third child so close in age has often felt all-consuming and out of control. And yet the thought of not having any one of them is unbearable now, because they are no longer shadowy fetuses but full-fledged human beings whom I love in a huge and aching way.

Plenty of infertility patients who conceive twins are ecstatic from the start about getting a two-for-one deal; some studies indicate that the majority of I.V.F. patients prefer twins. Though most doctors don't believe reduction below twins is medically justified, they do argue that it is best to avoid a multiple pregnancy from the outset. Fertility drugs and in vitro fertilization both markedly increase the chance of multiples. About 5 to 20 percent of pregnancies from fertility drugs turn out to be twins or higher, according to the American Society for Reproductive Medicine, and half of babies conceived through I.V.F. are part of a multiple pregnancy. Perinatologists and obstetricians have lobbied fertility specialists to use ovulation-inducing drugs more judiciously and to transfer fewer embryos into their patients. Over the past few years, the campaign has resulted in fewer pregnancies of triplets and up, but the number of twin pregnancies continues to climb. Clearly there is room for improvement. The problem is that for all the choices and opportunities that fertility treatments offer, there is still a lot that doctors cannot control.

Ruth Padawer (ruthpadawer@yahoo.com) is a writer and teacher. Her most recent article for the magazine was about how DNA testing is changing fatherhood.

*—Excerpted from New York Times
August 10, 2011*

CIDER Walk...Because...

CHILDREN IN UTERO DESERVE EQUAL RIGHTS!

Pre-register ♦ Fill out the registration form below and mail to **Right to Life - LIFESPAN Educational Fund, 29200 Vassar St., Ste. 545, Livonia, MI 48152, by Thursday, October 6.** A signed registration form is required for each individual walker.

Collect pledges ♦ Collect pledges from your family, friends, co-workers, boss, staff, church, clubs, salons, neighbors, professors, coaches and gym buddies. You will be asking them to sponsor you with a single, generous gift for your participation in CIDER Walk. Visit www.rtl-lifespan.org, *Events* page, for pledge sheets and map.

Not collecting pledges? ♦ For anyone not collecting pledges, a minimum donation is requested—with advance registration (form below): \$10/person or \$25/family; or day of event: \$15/person or \$30/family. Any additional donation will be greatly appreciated.

Turn in pledge form and donations ♦ Turn in pledge form and donations at the Walk. You may continue to collect pledges and mail them by the November 1 deadline. Make checks payable and mail to: “**Right to Life – LIFESPAN Educational Fund,**” 29200 Vassar St., Ste. 545, Livonia, MI 48152.

Have fun at the Walk! ♦ Registration begins at 1:00 p.m. The Walk begins at 1:30 p.m. Cider and donuts will be served after the Walk. Free t-shirts will be available for all attending while supply lasts. A pro-life pin will be given to walkers who bring in \$100 or more in pledges. A \$100 Savings Bond will be awarded to each of two walkers who collect the most pledges, above \$150, and which are received by the Right to Life - LIFESPAN Educational Fund office (address above) by **November 1, 2011.**

What if it rains? ♦ Bring your umbrella! Unless there is lightning, the Walk will go on as planned. If you don't have an umbrella, just bring the forms to us on the day of the Walk, and walk on your own as soon as possible. If you are unable to attend, walk in your neighborhood, gym or shopping mall.

Need more information? ♦ Call Lifespan's Main Office: 248-478-8878; Oakland/Macomb Chapter: 248-816-1546; or Wayne West/Downriver Chapter: 734-422-6230.



CIDER Walker Registration Form (please PRINT) Must be postmarked by Thursday, October 6, 2011.

A signed Registration Form is required for each individual walker. I am an/a: Adult Teen Child
If collecting pledges, registration is FREE. If not collecting pledges, \$10/person, \$25/family is payable with this registration or \$15/person, \$30/family day of event. See www.rtl-lifespan.org, *Events*, for pledge forms.

I will be collecting pledges. I will not be collecting pledges; enclosed is my registration fee of \$ _____
I release Right to Life – LIFESPAN Educational Fund from any liability for this event.

Name _____ Signature (of parent if minor) _____

Address _____ City _____ State _____ Zip _____

Phone # _____ Email _____

Church/School/CivicGroup _____

How did you hear about the CIDER Walk? Church Mail Friend School Newspaper Other _____

* YOUTH NEWS *

Hello teens, parents of teens, college students, young adults, youth group leaders/coordinators at schools and churches, teachers, principals, pastors, priests and all others who work with young people!

In this newsletter you will find fliers and information on several activities and events coming up that you can participate in with your family, friends, school clubs and church youth groups. Please share our information with others in whatever ways you can!



Silent Day of Solidarity Tuesday, October 18, 2011

Young people and adults from all over the nation will give up their voices for a day in solidarity with the children who lose their lives each day in the name of "choice." Students from Catholic Central HS, Clarkston HS, Pinckney HS, Troy Athens HS, Troy HS, Eastern Michigan University, Michigan State University and Northwestern Michigan College, have already signed up to participate. You can also register as an individual or as a homeschooled group. Go to www.silentday.org for more details about this event and to register.



"Movement in Motion" Youth Bus Trip Washington, D.C., January 2012

I am so excited that registration has begun for the Bus Trip! Seats will fill up fast, especially seeing as we are only

sending four buses this year instead of five (it is a big year of training college students and young adults to lead the bus trip in 2013, so we cut back a bus to make it a little easier). If you and/or your group are planning on joining Lifespan this year, you'll want to register as quickly as possible! Please call me at 248-816-1546 or e-mail oakmac@rtl-lifespan.org to get the necessary Registration Forms mailed to you. If you send an e-mail, put "Bus Trip Registration" in the subject line. I hope to hear from lots of you!



"Born to Be a Lady" Modest Fashion Show March 24, 2012 Sterling Heights

Young ladies, ages 13+, please mark your 2012 calendars for the Fashion Show coming up on Sunday, March 24th at Ss. Cyril and Methodius Slovak Catholic Church in Sterling Heights. If you are interested in attending the show as a guest, have questions, or want to get a model application, please call me at 248-816-1546 or e-mail oakmac@rtl-lifespan.org. If you send an e-mail, put "Fashion Show" in the subject line. I hope many of you young ladies and your friends will join me on this special day!



Jr. High, high school, and college students are needed as volunteers throughout the school year to help at the office with phone calls, data entry and mailings. They are also needed for cutting and tying ribbons to our "Thanks Mom for Life" tags that are tied on carnations for the Mother's Day Carnation project that takes place on Mother's Day weekend. Supplies are provided to anyone interested in working on this project at home. In addition, volunteers will be needed to help at the CIDER Walk event with various duties. If you would like to help with any of these opportunities, please call me at 248-816-1546 or e-mail oakmac@rtl-lifespan.org and put "Volunteer" in the subject line. Thank you! I hope you have a spectacular September and an outstanding October!

*Your friend for Life,
Lynn Gura, Youth Programs Coordinator
Right to Life – LIFESPAN Educational Fund*

Right to Life - LIFESPAN'S

19th Annual STUDENT ESSAY CONTEST

Who is your pro-life hero?

Eligibility: 9th - 12th grade students (public, private, homeschool); must be a resident of Wayne, Oakland or Macomb county; cannot be in immediate family of a Lifespan board member.

Rules:

1. The theme will be about your pro-life hero, past or present, like a grandparent, parent, sibling, friend, youth minister, teacher, doctor, leader, etc.
2. The essay will be 1000 words. No poems will be accepted.
3. The essay will be typed and submitted with an Entry Form that can be obtained by calling 248-816-1546 or e-mailing oakmac@rtl-lifespan.org.
4. One entry per student.
5. Each entry will become the property of LIFESPAN, and each student who enters the contest assigns copyright for the entry to LIFESPAN.
6. Each entry will be considered by impartial judges selected with experience in content and style. Judges reserve the right to award no prize winner if no entry is deemed meritorious of the prize. Decisions of the judges shall be final.
7. All entries must be received by **Wednesday, November 2, 2011** and mailed or delivered to Lynn Gura, Youth Programs Coordinator, **Right to Life – LIFESPAN, 1637 W. Big Beaver Rd., Suite G, Troy, MI, 48084-3540**. Questions? Call 248-816-1546.
8. Prizes will be awarded to the First, Second and Third Place Winners at Lifespan's Rally for Life in January 2012. The winning entry will be printed in the Lifespan newsletter and the annual Resource Book.



Attention: 14 to 21-Year-Olds!

"MOVEMENT IN MOTION"

Youth Bus Trip to Washington, D.C., January 2012

REGISTRATION: Tuesday, Sept. 6 - Friday, Nov. 25 or until all seats are filled—First-come, first-served basis!

COST: Red Eye Bus: \$120.00 per person. Extended Trip Buses: \$170.00 per person. *You will be responsible to find a sponsor or sponsors, if you cannot afford the cost of the trip. A non-refundable deposit of \$50.00 is due at the time of registration (final payment due by November 25). The deposit holds a seat for you!*

BASIC ITINERARY: Red Eye Bus 1 will leave on Sunday evening, January 22 from Troy and Livonia, arrive in Washington, D.C. on Monday morning, go to breakfast, tour some outside memorials and the inside of the U.S. Supreme Court, go to lunch at the Old Post Office Pavilion, meet up with the other bus groups, participate in the March for Life, visit a State Representative, drive home and arrive back on Monday morning, January 24. *Breakfast, lunch and dinner at own cost.* Extended Trip Buses 2, 3 and 4 will leave on Saturday, January 21 from Troy and Livonia, arrive in Washington, D.C. on Sunday morning, stop for a short visit at the Basilica of the National Shrine, go to breakfast, tour Madame Tussaud's Wax Museum, go to lunch at Harriet's, tour the Washington Monument and Air and Space Museum in the afternoon, and have dinner at Queen of Apostles Catholic Church (host church) where we will be staying overnight. There will be Mass at the church in the evening for all who want to attend. *Breakfast will be at own expense, lunch and dinner are included in the above cost. Tours are included in the above cost.* A Continental breakfast will be served at the host church on Monday morning. **If we can get tickets**, we'll go to the Youth Rally and Mass at the Verizon Center or D.C. Armory in the morning before lunch and our participation in the March for Life, but if we can't get tickets, then the groups will follow the itinerary for Bus 1. *Lunch and dinner are at own expense.*

Note: 13 year olds will be able to come with a parent or a legal guardian

MORE INFORMATION? Call 248-816-1546 or e-mail oakmac@rtl-lifespan.org. —Lynn Gura, Bus Trip Coordinator
Help us spread the word to your friends and pro-life groups at church, school and college!

Sponsored by Right to Life - LIFESPAN Educational Fund



Planned Parenthood

continued from page 2

"It's a shame some political personal beliefs are taking away resources that make sure women in Wisconsin have access to basic family planning health care," an official with the abortion business said.

Planned Parenthood of Central North Carolina is also responding to cuts and indicates it may close a center in Durham that does "family planning, cancer screenings and treatments for sexually transmitted diseases." The center refers for abortions but does not do abortions—but Planned Parenthood is considering closing that one instead of a nearby center in Chapel Hill that does abortions.

"Having our Chapel Hill clinic nearby might make it a little easier, if we have to close," a Planned Parenthood abortion business said. "But for many of our clients, that's not just around the corner. Every barrier you put in their way of someone who needs birth control or STD testing or cancer screening is another barrier. It means fewer Pap smears, less contraception, fewer STD treatments."

David Daleiden of Live Action, the pro-life group that exposes abuses at Planned Parenthood centers ranging from not reporting cases of statutory rape to authorities to arranging abortions for the pimps who victimize girls in sex trafficking, says the decisions on what to cut show Planned Parenthood is not as concerned about promoting birth control and contraception as it is selling abortions.

"I hope everyone notices the irony in the news...because [Planned Parenthood] is halting their provision of birth control and, potentially, pelvic exams," he said.

"Why does Planned Parenthood cut contraception and cancer screenings first? Answer: because it's been all about abortion all along." —*LifeNews.com, July 12, 2011*

Lifespan News

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Co-editors: Marge Bradley, Diane Trombley

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Donations are not tax-deductible.

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email: mainoffice@rtl-lifespan.org

website: www.rtl-lifespan.org



Donations have been made—

In honor of the 25th Wedding Anniversary of:

Patrick and Anne McLaughlin

Given by: Maureen McClorey

In loving memory of:

Mary P. Gladysz

Given by: Clarence and Margaret Hessling
Pat Holscher

Denise Dattilo

Given by: Clarence and Margaret Hessling

Tom Fresard

Given by: Karen Bates

Florence DuVal Sturza

Given by: Janice, Nathan and Darryl Erb
Del Siekiera and Harry

Edward O'Connell

Given by: Tom and Katie O'Reilly

Donations may be made in memory of loved ones who have died; a memorial card will be sent by Lifespan in your name to the family of the deceased. Donations may also be made to honor someone special, and near and dear to you, for a particular occasion, or just because...You can live on after death by helping those whose lives are threatened by abortion, euthanasia or infanticide. A bequest in your will to Right to Life - LIFESPAN will be used to save the lives of many through our efforts. Send donations to your local Lifespan office.

HELP WANTED!

**Secretary/Office Manager wanted
for Right to Life - LIFESPAN
Main Office in Livonia.**

**Word processing, database computer
skills required.**

Fax resumes to 248-478-8854.

Lifespan's Town Hall Meeting and Breakfast

Reservations are required by Wednesday, October 12. Complete the form below, make checks payable and mail to Right to Life - LIFESPAN, 29200 Vassar St., Suite 545, Livonia, MI 48152. For more details, see back page of this newsletter and/or call 248-478-8878 or 734-422-6230.

Yes! I will attend Lifespan's Town Hall Meeting & Breakfast on Saturday, October 15!

Send me ___ tickets @ \$20.00 each

___ tickets @ \$10.00 each (students 21 or younger); \$ ___ total enclosed

Name(s) _____

Address _____ City _____ Zip _____

Area Code/Phone _____ Email _____

Please send a complete list of names and addresses for all people for whom you are ordering tickets.

From the President's Desk

Dear Friends,

It is with great sadness that I say farewell to Sue Ducharme, Lifespan's Main Office office manager for over three years. Sue has been that cheerful, helpful person who answers the Lifespan phone, sorts mail, composes and processes the databases for our projects. Sue has been willing to do anything asked of her in order to promote the respect for human life. She also assists Karen in passing out layettes to our needy moms and is always willing to work with me or any other Lifespan member in order to make our many events successful.

Sue is leaving for Biloxi, Mississippi with her husband, Dave. His new horseless carriage ride business will bring pleasure to the tourist who enjoys the ocean and an old fashioned feel to this area of old Mississippi. Imagine the 17th and 18th century horse-drawn carriage being transformed into the 21st century electric-drawn carriage—all in white, with the driver dressed to depict the fashion of of that era.

I will miss Sue, but maybe she will be able to spend more time with her grandson, Colton. Like all of us in the movement, we never leave it. We may take on different roles or move on to different aspects in fighting this terrible assault on the littlest of our citizens, but we can never walk away from the movement. Sue is a deeply religious person, and I ask that she takes that to Mississippi and prays for all of us daily. Her prayers will be as important as anything one does behind a desk. I will miss you, Sue, your smile, your enthusiasm and your greeting—God speed, dear friend.

I would also like to thank another dear person who I also call one of my Lifespan family friends. A big hug and thank you to Mary Cascos for over a quarter century of work she did as office manager for the Detroit Chapter. After a 40 year presence in Detroit, we finally closed the office which represented the Detroit Chapter. Detroit has been a challenge since the beginning of the movement, but we always had a dedicated core group who worked hard to bring the message of Life to the city. Mary, you have been the rock

that has kept this Chapter alive, and I am so grateful for all your dedicated hard work. No one will ever know, except those who worked with you, the challenges you had to face daily. The Detroit Chapter has been absorbed into our Wayne West/Downriver Chapter, so we are not without representation in Detroit—we just no longer have an office within the City proper. Thank you again, Mary—words cannot express my deep appreciation for all you've done. I thank you also for staying on the Lifespan Board and being in charge of our "Used Book Sale."

As I've said so many times over the years, one of the best things about being part of the pro-life movement are the wonderful people you meet and befriend. I believe, and this is from 40 years of experience, that 99.9% of the people within this movement are kind, loving, non-violent, selfless, creative and dedicated to a cause that is purely related to the welfare of their fellow citizens. God bless you, Sue and Mary. May He also bless all of our members who have given their time, money and energy to promote a respect for all Human Life!

Diane Fagelman, President

Crisis hotline numbers

If you, or someone you know, is experiencing a crisis pregnancy, help is available. Call a Lifespan office, pages 8-9. Bethany Christian Services also has a 24-hour hotline number **800-BETHANY**.

Sheltering homes are available to women in crisis pregnancies, call Abigayle Ministries **586-326-0459**; Fr. Patrick Jackson House, **734-761-1440**; Guadalupe Partners House, www.guadalupepartners.org; Mary's Mantle, **248-376-5338**.

For post-abortion counseling, call Project Rachel **888-722-4355** or Rachel's Vineyard Retreats: **1-877-HOPE-4-ME (1-877-467-3463)**.

For those with life-limiting illnesses, call Angela Hospice **734-464-7810**; Cranbrook Hospice **248-334-6700**, or Hospice of Michigan **888-HOM-5656**.

Project Life, Archdiocese of Detroit, offers pastoral guidance to persons considering abortion or assisted suicide; for this counseling assistance, call **800-281-2102**.

Right to Life - LIFESPAN Membership Form

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

_____ Annual Membership \$ 25.00 _____ Other
_____ Student/Senior Member \$ 15.00

Name _____ Phone _____
Address _____ City _____ Zip _____
Email address _____

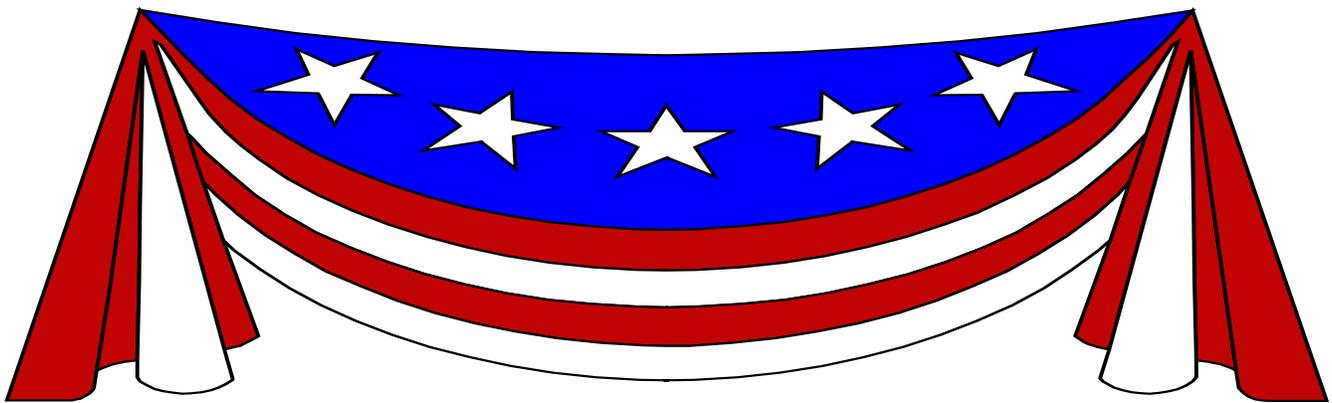
Please complete this form and return with your donation to: **Right to Life - LIFESPAN, 29200 Vassar St., Suite 545, Livonia, MI 48152-2193**. For more information, call **248-478-8878**. Sorry, donations are not tax-deductible.

Right to Life - LIFESPAN
Oakland/Macomb Chapter
Coventry Place
1637 W. Big Beaver Rd., Suite G
Troy, MI 48084-3540

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Right to Life - LIFESPAN

Town Hall Meeting & Breakfast

“Retaining a Pro-Life Majority”

Saturday, October 15, 2011

9:00 a.m. - 12:00 noon ♦ Registration: 8:15 a.m.

Burton Manor

27777 Schoolcraft ♦ Livonia, Michigan

(south side of I-96 service drive, between Inkster and Middlebelt Rds.)

Legislative update will include discussion of current legislation affecting Michigan citizens

For more details, call 248-478-8878 or 734-422-6230

Make checks payable and mail to: Right to Life - LIFESPAN, 29200 Vassar St., Suite 545, Livonia, MI 48152

Reservations are required by Wednesday, October 12 - see page 14 for registration information