

For Life



First Quarter | 2019

Please copy and distribute freely

Providing Help. Creating Hope.

Office for Human Life-Catholic Charities Diocese of Cleveland

Some Thoughts on Suffering and the Narrative of Redemption

Michael Brescia, MD

There are four ways [to help those who are suffering emotionally]. The first way is to be present. These patients can't be alone. You have to try as much as possible for them to have contact, presence. The second way is touch. When we touch someone we are no longer the same; there is a bond. Babies in their mother's womb touch the uterine wall. We have to touch our patients. That's the way to love anybody. The third way is to hold, to embrace someone so they know they are not alone. The fourth way is to say it: "I love you. I promise never to abandon you." I have said it a thousand times a day. You have to be present, to touch, to hold, and you have to say it. Families need the same care as patients. About 80 percent of our day is spent with families. Be present, give information, touch them, hold them, and tell them that they are a gift to you; their loved one is a gift . . . When I enter a patient's room, I always stop on the saddle of the door and I pray, "My dear Lord God, my love for You brings me here for Your greater glory." Then it is no longer a patient's room; it's now a sanctuary. When you ask God to come, He comes. I know He's there. I can feel it. And when someone is dying, you think that room is a part of this earth? No! You are not in this world. You have entered the vestibule of heaven.

Jane Dominic Laurel, OP

The Fathers of the Church saw Christ as present in the suffering poor. The medieval drew our attention to the suffering as those who show us the face of Jesus. Pope Francis now invites us to touch, to bind up, and to heal the very wounds of Christ Himself incarnate in the flesh and wounds of the suffering sick. In caring for the wounds of the sick, we care for the wounds of Christ . . . Thereby, in the marvelous designs of a merciful God, the mediators of God's salvific mercy and love also become the privileged recipients of that self-same salvific mercy and love.

Mike and Chasity Short

Mike: I think this a part of what life is for. He is totally trusting. He trusts us to take care of his body, and in this he shows us that we should have total trust in God. It is the hardest thing to do. He shows us how to do that on a daily basis.

Chasity: We named him Dominic, after St. Dominic (that great preacher), and we call our Dominic "the preacher without words." His life, his presence, his appearance shock people. The most active time of Christ's life was when He was nailed to the cross, when He couldn't do anything. Dominic is like that. He is not able to do anything, and yet he is having a very active life. We just pray constantly that we're able to say yes to whatever God asks Dominic to do, because we have to bring him to do it.

Narrative from a [video](#) created in France for Down Syndrome Day

On the ninth of February, we received this email from a future mom. "I'm expecting a baby. I've discovered he has Down Syndrome. I'm scared: what kind of life will my child have?" Today we reply to her like this: Dear future mom, don't be afraid. Your child will be able to do many things. He will be able to hug you. He'll be able to run towards you. He'll be able to speak and tell you he loves you. He'll be able to write to you if someday he is far away. Because, indeed, he'll be able to travel too. He'll be able to help his father fix his bicycle. He'll be able to work and earn his money. And with that money he'll be able to invite you out for dinner. Or rent an apartment and go living alone. Sometimes it will be difficult. Very difficult. Almost impossible. But isn't it like that for all mothers? Dear future mom, your child can be happy. Just like I am. And you'll be happy, too.

<https://youtu.be/Ju-q4OnBtNU>

National Catholic Bioethics Quarterly Autumn 2017

FROM THE DIRECTOR

Many people may have an idea of the type of woman who comes to Project Rachel, a post-abortion ministry in the diocese, for help. I had an idea in my head before I started answering the phone fourteen years ago. I no longer “know” what to expect because the diversity has been immense.

We learned early on in our formation in the faith that the mission or purpose of the Church is the salvation of souls. Project Rachel was created for the souls of women and men who participated in abortion to assist with this very specific obstacle to reconciliation and wholeness.

I have spoken with women from 16 into their 70s. I have spoken to women who had an abortion 3 weeks ago and a few women who had an abortion 50+ years ago. Yes, those 50+ ones were done illegally. I have spoken to fathers and grandparents of children who were aborted. Women have stated they are married, were married, never married, engaged or dating.

Early on, I thought at some point we would be seeing a new demographic of who was seeking help post-abortion. This would come from women who aborted many years ago close to the Roe v Wade Supreme Court Decision. These would be women in hospice or some other type of end of life care. They would have carried the stigma, pain, suffering, and shame of their abortions for so very many years. As death approached, they would be faced with an issue of the soul they had hidden deep for a good part of their life.

So now is the time. There has been a noticeable uptick in women bringing up a past abortion to their spiritual caregivers while preparing for imminent death. I have spoken with two chaplains who told me the topic comes up almost weekly in the last year or so.

There are many reasons why this phenomenon is happening. First, women entering their senior years, when most life-threatening illness occurs, were in their childbearing years when abortion became legal. The numbers of abortions skyrocketed when it became legal.

The rest of the reasons pertain more to how they coped during their lives. For some this could be their “last chance” to reconcile with God. Some have stuffed this portion of their life so deep that it is coming up only in

this extreme circumstance. They may have let their fear of telling another person keep them from confession and/or healing. For many it is easier to tell a stranger and often chaplains or spiritual care ministers are strangers to them. Finally, they may have confessed, but they have some incorrect concept of abortion as “the unforgiveable sin.” People working with those in the dying process may be able to assist the patient with the process of obtaining this healing by knowing some possible signs. Women may speak of an “unforgiveable sin” that scares them. As death approaches, they may experience an inordinate fear of facing God. Sometimes the signal could be as simple as a restlessness of their body they cannot explain. You may never expect this to come up. It may be good to consider, however, before a delicate soul presents it to you. Project Rachel is available whenever a soul is ready.

Peggy Gerovac

NCBC Welcomes HHS Final Rule Protective of Employer Conscience

November 2018

After numerous interim rules, concerning which the NCBC submitted public comment, the US Dept. of Health and Human Services (HHS) on November 7, 2018, issued its Final Rule pertaining to the “Contraceptive Mandate.” The “Contraceptive Mandate” had required that virtually all employers who offer health insurance provide contraceptive coverage, including abortifacients, to employees, even if this violated the employer’s deeply-held religious beliefs. Such coverage was termed “preventative” health care as part of the implementation of the Affordable Care Act. The NCBC is grateful that in this Final Rule HHS has provided religious and conscience protections consistent with NCBC’s public comment. Persons and businesses with a religious or moral objection (in the case of a publicly-traded business it must be a religious objection) are exempt from the mandate. The only provision supported by NCBC that was not included in the Final Rule is the exemption of publicly-traded companies with a moral (but not religious) objection. This Final Rule is a significant win for the civil right to religious and conscience protections.

© 2018 by [The National Catholic Bioethics Center](http://www.ncbc.org)

New law links pornography & human trafficking

Unlike reality shows, pornography is very real. The sexual abuse and degradation that female and child porn actors suffer isn't much different than what prostitutes go through. As the internet and other technologies help blur the line between pornography, actors and other sex workers, what remains clear is that the majority have been victims of sex trafficking. A new Minnesota law — the first of its kind in the country — is drawing attention to the problem of sex trafficking and pornography through data collection and a new penalty for those involved in both.

"We consider pornography sex trafficking with the camera turned on," said Jason Adkins, executive director of the Minnesota Catholic Conference, which helped draft the law. "I think that's an important point to drive home to people: When you use [pornography] you're fostering and nurturing the sex-trafficking trade."

Destructive appetites

Pornography is feeding an appetite for commercial sex, which in turn is filmed and posted on the internet to aid in more solicitation, experts say. Often through online trafficking, women and children are being coerced into sex work and forced to participate in increasingly violent acts. When they are filmed, traffickers may use the images to prevent victims from leaving the industry.

Sex trafficking has been a serious problem in Minnesota, and there is evidence that pornography plays a role, said Rep. Kathy Lohmer, one of the state legislators who sponsored the legislation. Empirical data generated under the law will provide proof of the connection.

The law adds pornography to the list of issues studied in the legislature's annual human trafficking report, it increases in that report the number of crimes identified for connections to human trafficking, and it directs fines associated with those crimes, while adding a surcharge to help victims.

Read more from Susan Klemond OSV Newsweekly

Embrace Clinic & Care Center (180 1st Street NW, Barberton, OH 44203)

in collaboration with the Summit County Fatherhood Initiative

Invites you to its Steadfast Father Series, featuring "*The 7 Habits of a 24/7 Dad*"

Wednesdays, 6:30-8:00pm from February 6th-March 13, 2019

Receive a \$10 gas card or bus pass for every session you attend! Attend all classes and get a One Year Family Pass to the Akron Zoo! Open to all Dads and Dad Role-Models in Summit County. Admission is free!

For more info or to register, call the **Embrace Clinic & Care Center at 330.825.1900 or email info@embraceccc.org**

Nothing can diminish
the priceless worth of
any human life.

Every person is
cherished.

usccb.org/respectlife

God creates every
person for eternal
union with Himself.

Every person is
chosen.

usccb.org/respectlife

We are called
to be messengers
of God's love.

Every person is
sent.

usccb.org/respectlife

Advance Planning in the United States – Some things to consider

- [There is] a cultural drift that emphasizes autonomy in a way that diminishes the attractiveness of accompaniment and palliative care.
- [There is] a need for greater clarity in what defines and distinguishes palliative care, along with the call to more clearly present the distinct Catholic perspectives and positive arguments for the benefits it offers.
- Concerns give rise to calls for greater “protection of life,” so much so that a label of “vitalist” has been assigned to some proponents. Vitalism holds that the preservation of human life is an absolute imperative in every case, regardless of moral consideration of futility or burden. Palliative care professionals must balance these views against the long-standing tradition of the Church that recognizes the sacredness of life, but does not hold that the preservation of human life has absolute value.
- Pope Francis’ description: “Palliative care is an expression of the truly human attitude of taking care of one another, especially of those who suffer. It is a testi-

mony that the human person is always precious, even if marked by illness and old age. Indeed, the person, under any circumstances, is an asset to him/herself and to others and is loved by God. This is why, when their life becomes very fragile and the end of their earthly existence approaches, we feel the responsibility to assist and accompany them in the best way.”

Catholic tradition supports a provider-patient relationship characterized by social discernment model of advance care planning rooted in the virtues of counsel and prudence. Such social discernment means that all stakeholders involved in care planning continuously reevaluate circumstances during the progression of disease, revisiting decision making and goals of care accordingly. This ongoing “re-visioning” process stands in contrast to the culturally dominant model in which the isolated patient is an autonomous individual making decisions based purely on informational consultation with providers and family. In the later model, the patient’s plan is to be implemented by the care team and family, regardless of circumstances.

Advance Care Planning, Palliative Care and End-of-Life Care, Elliot Louis Bedford et al

Forgiveness Prayer

“God made us for joy. God is joy, and joy of living reflects the original joy that God felt in creating us.”

St. John Paul II

When we have been treated less than our dignity demands, it can feel like something’s been taken from us – like there is a debt now owed to us. Over the years, I found that, even though I would forgive someone and bring my heartache to the Lord, something was still left lingering, unresolved. One day, I stumbled across this forgiveness prayer: *I release [this person] from his/her debt, and I give that debt to You, Jesus. I ask You to give [this person] a blessing instead.*

This prayer powerfully acknowledges that there is a debt and that the person who owes it cannot pay it. I began to pray this prayer whenever I would feel hardness of heart, pain, or bitterness toward someone. It began to shift my heart, letting Jesus free me and fill my emptiness. This prayer becomes especially powerful when the person who needs forgiveness is me: *I release my debt into your hands, Jesus. I ask you to give me a blessing instead.*

Handing over our debts to Jesus, especially in the Sacrament of Confession, releases a newness of soul and fills us with joy!

by Sister Faustina Maria Pia, SV

Genome Editing

“While this kind of technology is far from being widely available, it raises questions for Catholics about whether, given the opportunity, humans should force our personal ideas on what is right or good about creation ahead of God’s.”

- Wyatt Massey, *The Scientific Method, U.S. Catholic*, January 2019



March 6 through
April 14, 2019

Unite with hundreds of other cities around the world for the largest and longest coordinated pro-life mobilization in history: the *40 Days for Life* campaign. Recognizing that "with God all things are possible," people of faith are praying that this effort will help bring an end to the tragedy of abortion.

40 DAYS FOR LIFE™

40 Days for Life

has achieved proven results:

| | |
|--|--|
| 765,000 people mobilized worldwide | 186 converted abortion workers |
| 15,256 lives saved from abortion | 100 abortion facilities closed |

40 Days for Life is made up of three components:

PRAYER & FASTING:

believers throughout our city are invited to join together for 40 days of fervent prayer and fasting for an end to abortion

COMMUNITY OUTREACH:

help take a positive, upbeat pro-life message to every corner of our city through media efforts, advocacy, and public visibility

PEACEFUL VIGIL:

stand for life during a 40-day peaceful public witness at the vigil sites listed below...

Preterm – Cleveland
12000 Shaker Blvd.
Peggy 216-382-9170
www.40daysforlife.com/cleveland

Planned Parenthood
25350 Rockside Road
John 216-641-6587
www.40daysforlife.com/bedfordheights

Family Planning – Painesville
54 South State Street
Carol 440-823-1204
www.40daysforlife.com/painesville

Learn how you can speak up for those who cannot speak for themselves by visiting:

www.40daysforlife.com/cleveland

John, Campaign Director 216-245-9744

Disabilities and Recruitment for Human Trafficking

Any vulnerable person is at risk for human trafficking, however, individuals with disabilities may face increased risk for several reasons. The Office for Victims of Crime Training and Technical Assistance Center details the vulnerabilities that increase the risk for individuals with disabilities to being trafficked. Some of them are outlined below:

1. Traffickers may seek out victims with disabilities to gain access to their public benefits such as Supplemental Security Income (SSI) or Social Security Disability Insurance (SSDI) benefits.
2. Individuals with disabilities may require a caregiver to meet their basic needs and this caregiver can take advantage of this dependency and force them into prostitution or labor. Even if the caregiver themselves is not the trafficker, people with disabilities may have a learned response to comply with caregivers' wishes due to their dependence on them. Therefore, they may have normalized an unequal power dynamic in their relationships, which could carry over into their relationship with a trafficker or abuser.
3. Some individuals with disabilities may have difficulties with communication and/or speech. This may affect their ability to get help and report the abuse they are suffering and could require them to depend on their trafficker for interpretation. For these victims, suffering in silence takes on a very literal meaning.
4. People with disabilities may be sheltered and isolated and therefore crave friendships and relationships. In one example from the National Human Trafficking Hotline, an adult potential victim with a developmental disability was recruited from a recreational and vocational training center. The potential trafficker posed as a boyfriend and made the victim believe that counselors, family, and friends did not want her to be an independent adult. He used her fear of being treated as a child against her, which caused her to be isolated from those looking after her interests. He then convinced her to engage in commercial sex out of their home.
5. People with disabilities may be desensitized to touch due to isolation, a lack of informed sex education, or medical procedures related to their disability. They may be unaware of their right to object or reject unwanted touching. They may be unsure of what constitutes a crime and what their rights are as a victim of a crime.

Traffickers may also target individuals with disabilities because of the social discrimination and prejudice they face. This can cause authorities and even their own family and friends to not believe victims when they report their abuse. This is especially true for victims with disabilities that affect intellectual, cognitive, or communication functions or those individuals with mental health diagnoses. In some cases the National Hotline has seen, it has required nonprofit organizations to add their voice to the victim's report before their experience and needs are addressed properly.**Illegal mail-order abortion:** The Food and Drug Administration (FDA) is investigating a European online organization, Aid Access, for violation of US drug laws. Aid Access reportedly provides women with online "consultations" and offers them prescriptions for misoprostol and mifepristone, abortion-inducing drugs. The prescriptions are then filled by a pharmacy in India and mailed to women in the US. The "service" costs \$95. The FDA warns that such medications should not be obtained online because the Aid Access process "bypass[es] important safeguards designed to protect [woman's] health." The FDA further states, "drugs purchased from foreign Internet sources are not the FDA-approved versions of the drugs, and they are not subject to FDA-regulated manufacturing controls or FDA inspection of manufacturing facilities."

Excerpt from "On-Ramps, Intersections, and Exit Routes: A Roadmap for Systems and Industries to Prevent and Disrupt Human Trafficking" Polaris

WHAT WOMEN CONSIDERING ABORTION NEED

Some women talked about their own abortions. Some women (and two men!) shared about the abortion of someone very close to them. Below are the questions we asked and several of the responses we received.

What do you think was needed before the abortion? Please be as specific as possible. What resources or support was available? Would any other resources or specific support have changed the choice that was made?

Several themes emerged among the responses to this question:

1. No one told her it was possible to have the baby, or showed confidence in her ability to be a mom.
2. She did not know about resources.
3. Parents were not supportive.
4. Chastity/abstinence messaging contributed to feelings of shame, a perceived lack of options, and fear.
5. Circumstances were dire, and she felt she had no other choice.

This is a very condensed summary. For the full article go to www.femcatholic.com/what-abortion-minded-women-need/

NIH to end support for fetal tissue research?

December 15, 2018

The Trump Administration has instructed the National Institutes of Health (NIH) to end the practice of acquiring new fetal tissue for research that it funds. NIH has also announced a new \$20 million program to explore and develop alternatives to the use of such tissue. The instruction and announcement come as the federal government initiates a review of all fetal tissue research overseen by its agencies. In addition, NIH announced that it would only be extending a contract with the University of California San Francisco (UCSF) for 90 days rather than one year due to concerns over fetal tissue research. UCSF had been using NIH funds to study therapies for diseases including Parkinson's and AIDS, but in doing so implanted tissue from aborted fetal remains to create "humanized mice."

Screening embryos for intelligence: A company named Genomic Predictions is contracting with IVF clinics to provide "risk testing" on embryos, the goal being to identify those with intellectual disabilities. The company does not claim that its testing can identify disabilities within particular embryos, but rather it offers an overall risk of predisposition to disease. Genomic Predictions also maintains that its testing methods offer risk profiles for other indications including diabetes and breast cancer.

© 2018 by The National Catholic Bioethics Center

Death Penalty: Catholic Q & A

For people committed to upholding the sanctity of human life, the need to respect and protect innocent human life is clear. For some, however, issues like the death penalty may seem less clear.

Although nothing can substitute for thorough catechesis, the following may be helpful as a starting point for considering the death penalty within the context of respect for God's gift of human life.

Didn't the Old Testament Law allow the punishment of death?

For Israelites in the Old Testament, legal punishment of personal injury did allow "life for life, eye for eye, tooth for tooth" (Exodus 21:23-24). However, when Jesus came, he fulfilled the Old Testament Law and deepened our understanding of both justice and mercy: "I give you a new commandment: love one another. As I have loved you, so you also should love one another" (John 13:34).

We see the fulfilled law every time we participate in the Sacrament of Reconciliation. In justice, after confessing our sins, we receive a penance to complete. Yet any penance we could do never fully "makes up" for the ways we turn away from God. That is precisely why Jesus came to redeem us, and took our rightful punishment upon himself. Although justice does require some action of reparation on our part, at the same time, because of God's mercy, our penance is medicinal, helping to restore us to union with God.



Spring Campaign Kickoff Rally

St. Columbkille Church—Parma
Tuesday, March 5 @ 7PM
Evening begins with Mass at
6pm in the church

Bishop Nelson Perez
Keynote Speaker

Contact John Noall:
clevelandpraysforlife@gmail.com or
216-245-9744 for more information.



PLEASE CONTACT US TO POST YOUR VOLUNTEER NEEDS AND UPCOMING EVENTS.
ALL OF OUR ADS CAN BE FOUND ON OUR WEBSITE FOR PARISH USE!

Contact Us

For Life is a quarterly publication and educational service of the Office for Human Life of the Diocese of Cleveland.

Office for Human Life
7911 Detroit Avenue
Cleveland, OH 44102

(216) 334-2965
pmgerovac@ccdocle.org
www.ccdocle.org/office-human-life

Like us on Facebook

- More audio/visual links on life issues
- Posts on diocesan, local, national, and international items of interest
- Action alerts

This is the fastest way to get breaking news and share it with others.



If you would like to receive more periodic emails & the digital version of 'For Life'...

Please send your e-mail address to:
pmgerovac@ccdocle.org