

4. Assist. If appropriate, consider offering to be available for continued pastoral counseling. You may also direct them to professional post-abortive healing agencies listed below. Here are some other specific tools you may incorporate:

- Write a letter. Encourage the post-abortive individual to write a letter to help process his or her thoughts and feelings. This letter may be directed to the deceased child, God, an individual who played a role in the abortion whom they may feel betrayed by, etc., but it will not be sent. If the individual feels comfortable, they may read their letter aloud to you. Voicing these thoughts and feelings can be a powerful tool in the healing process.
- Grieve. Allow the post-abortive individual to grieve for their child. Encourage them to give the deceased child a name, begin a new relationship with him or her, and surrender him or her to the Lord. They may find healing is a gesture of memorializing their deceased child (they may consider asking a pastor about a memorial remembrance service or Mass, planting a tree in the deceased child's memory, etc.).

Specific Cautions

- When walking with a post-abortive individual, it is responsible to inquire about post-abortive feelings such as hopelessness, shame, and suicidal thinking. Be wary of comments like "I want to be with my baby." If any kind of suicidal intent is detected, immediately refer the individual to a mental health professional.
- Physical touch is not advised in this ministry.

- Speaking publicly can be healthy for a post-abortive individual, but not if the individual is doing so to "make up for" abortion. A post-abortive person should be successfully healed and feel fully forgiven before speaking publicly about an abortion.
- Pro-life activism can be good for a post-abortive individual, unless there is an obsessive need to be involved.

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Abortion Apologetics: Responding to "Exceptions"

It is not uncommon to hear of individuals, or even churches, which claim to be pro-life but hold that abortion is justifiable in certain exceptional cases such as potential genetic disability diagnosis, pregnancy resulting from rape or incest, or a pregnancy that may endanger the life of the mother. Although this viewpoint is typically motivated by a sincere desire for compassion, it is often the case that compassion in these instances has been misunderstood or misguided. Because an individual is fully human from the very moment of fertilization, his or her life must be affirmed, even in difficult cases.

Prenatal Diagnosis of Genetic Disability

Although individuals with genetic disabilities (and their caretakers) are faced with unique challenges and struggles, they have no less human dignity or worth than typically-developing individuals. Nonetheless, these individuals are often victims of discrimination in the womb, as many are aborted based on prenatal diagnoses. These are diagnoses which have the potential to yield "false positives" and may or may not accurately predict an individual's level of functioning and perceived quality of life. It is common for those with disabilities (and their caretakers) to express a deep recognition of the unique joy and fullness of life that they experience, even with the difficulties they may often face. Still, even in cases in which a preborn child has little chance of survival, his or her life is still fully human, sacred, and thus, infinitely valued. Although the most extreme situations often involve deep suffering, there is no case in which one can rightly say, "It would have been better for you to have never existed at all."

Pregnancy Resulting from Rape or Incest

When considering cases of pregnancy by force, one must always acknowledge that rape and/or incest are tragic acts of violence. Utmost pastoral care should be taken to assist survivors in dealing with the pain and suffering experienced as a



result. In cases of pregnancy resulting from rape or incest, there are two victims: the mother and the preborn child. Just as no woman asks to have such a heinous crime committed against her, neither does a preborn child ask to come into being through this act of violence.

Nonetheless, both lives are infinitely valued and must be cared for in the aftermath.

Although carrying a pregnancy resulting from a forced act of violence involves unimaginable emotional

and physical challenges, mothers who have done so have

characterized their relationship with their

preborn children as "healing."

Likewise, children whose mothers afford them the chance at life after being forcibly conceived have shared immense gratitude for their mothers' heroic sacrifices.

Continued Pregnancy Endangering the Life of the Mother

Modern medical technology has made circumstances rare (some doctors say non-existent) in which it is medically necessary to end a preborn child's life to save the life of the mother. Still, scenarios may be conceivable in which continuing pregnancy would make it impossible for a mother's life to continue without serious risk of death. In these instances, one may reasonably believe that it is possible for only one of the two lives to be saved. In these cases, a surgery may be performed to save the life of the mother, e.g., the removal

of a portion of a woman's fallopian tube in the case of ectopic pregnancy. Sadly, this may cause the unintended ending of the pregnancy. This is, however, different from an abortion, which is the deliberate termination of a human pregnancy. Even in extraordinary, medically difficult pregnancies, there are two patients, and every effort must be made to nurture and protect both lives.

See the booklet included in the back pocket of this binder for additional common pro-choice arguments.