

PROLIFE APOLOGETICS

DISCUSSION GUIDE



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Scripture quotations are taken from The Holy Bible: NIV

Watermark Community Church | 7540 LBJ Freeway | Dallas, Texas 75251 | 214-361-2275



a•pol•o•get•ics

noun

reasoned arguments or writings in justification of something, typically, a theory or religious doctrine.

The term *apologetics* derives from the Ancient Greek word *apologia* (ἀπολογία). In the Classical Greek legal system, the prosecution delivered the *kategoria* (κατηγορία), the accusation or charge, and the defendant replied with an *apologia*, the defense.

The word *apologetics* consists of two components:

apo = from

logos = knowledge, or logic, reason

So, *apologetics* literally means “from logic or reason”.

Welcome to ProLife Apologetics!

ProLife Apologetics is an equipping resource for Christians exploring reasoning and logic to promote life for women, men, and the preborn concerning unexpected pregnancy and abortion. We love that you are joining us and searching for ways to grow in your ability to engage in God-honoring conversations and serve in your community. We want to encourage and equip you with insights and tools to reflect on your convictions and be an effective advocate for the vulnerable.

This is a guide to help you process the content we share whether you are working through this on your own or in a group. We want you to do more than critically think about or absorb information. So, each session involves questions to process each video, homework to exercise what you are learning, resources to consider as you develop or join initiatives with your church, on your high school or college campus, in your community, or at your workplace.

While *ProLife Apologetics* is a resource developed by Watermark Community Church in Dallas, Texas, a number of Christian friends have contributed to sharpening this content. If you are learning with a group, we understand there are varying experiences and anticipate some differences in perspective and conflict will arise. We think conflict is a great opportunity for growth and want to encourage you to be charitable with one another yet stay engaged so you can be sharpened to articulate your convictions kindly and care for those in need. We will provide some more clarity about how to engage with one another.

If you are learning on your own, utilize the comments section online below each video to look for questions, answers, and conversations before posting. You may contribute to an existing thread and help encourage others all across the world.

We are not under the impression we have covered every argument or idea related to *ProLife Apologetics*. We developed this content to create discussion for reasonable arguments that promote the equal protection of the preborn and the care of their mothers and fathers while also wanting to move God's people to develop meaningful ministry in their communities.

As you watch and engage with each story and session, understand you may have questions we answer in a later session, but write those questions down in the event there is something we miss. Your group will be a great resource for thinking through those ideas as you work together.

Thank you for trusting us with your time as we faithfully pursue God through *ProLife Apologetics*!

Sincerely,
The Life Initiative Team at Watermark

GUIDING DISCUSSION

“Therefore, having put away falsehood, let each one of you speak the truth with his neighbor, for we are members one of another.” Ephesians 4:25

Utilize the guardrails below for interacting with others in-person or online.

Be Charitable.

While most participants in *ProLife Apologetics* are Christians, we are not immune to being unkind, making assumptions, and being inconsiderate. As we mature in our faith to become more like Christ, we will become more charitable towards others. Keep in mind other participants may have wounds that include unexpected pregnancy and abortion. If you are commenting online, recognize how text cannot communicate tone or nuance and post accordingly. If any abusive language is used, facilitators should be notified and work through conflict. If a lack of charity is repeated towards others, the individual may be excused from the group or comments online removed.

Presume Ignorance Before Malice.

If someone shares something hurtful or offensive, ask questions for clarity and seek to reframe their thought to confirm the idea. Reshaping an idea or seeking clarity should not involve belittling the individual. Words have meaning, so we want to articulate ideas using good words, but we are susceptible to defining words or ideas differently and allowing negative experiences to shape those words or ideas. Be quick to listen and overlook minor issues of word choice. (See also *Hanlon's razor*.)

Stay In the Ring.

We assume there will be disagreements – don't avoid conflict in order to appear peaceful and then passively grow frustrated. Avoid benign statements like, “No one is perfect” or over-spiritualizing difficult realities for vulnerable populations. Challenge one another with the intent to be helpful and encouraging. Fight for truth together without seeking to score points for who was right or wrong.

Share the Mic & Stay on Topic.

If you find yourself or someone else in the group dominating the conversation, ask someone who has yet to share to contribute their thoughts. When we are all required to articulate our ideas more clearly, we gain a more compelling apologetic. Additionally, be brief both in-person and online. Long statements are difficult to track and follow a train of thought that can be engaged, clarified, or refined. Finally, avoid unrelated issues. There may be other apologetics you want to explore, but this is a prolife apologetic course.

Be Patient.

This discussion guide is meant to spur critical thinking, but we cannot address all of the aspects at once. So, write thoughts from each session knowing some points are addressed later and form a response to each question and engage with one another. Take time to ponder and research between sessions to form your convictions.

TABLE OF CONTENTS

Session 1 Where You Stand & Why It Matters	7
ProLife Profile Ally Wall	11
Session 2 Gospel Implications	12
Session 3 The Science of Life	16
<i>Attachment: The Carnegie Stages</i>	
Session 4 The Church's Response	22
<i>Attachment: Launching ProLife Ministry</i>	
ProLife Profile Dominique White	28
Session 5 Caring for Women	29
<i>Attachments: Birth Control Guide</i>	
<i>Considering an Abortion?</i>	
<i>Counseling a Friend After an Abortion</i>	
Session 6 What the Bible Says	41
Session 7 Arguments & Responses (Part 1)	46
Session 8 Arguments & Responses (Part 2)	52
<i>Attachment: The History of Eugenics</i>	
Session 9 The Reality of Abortion	60
ProLife Profile Michael Delgado	65
Session 10 The Politics of Life	66
Session 11 The Witness of the Church	71
ProLife Profile Meredith Hall	75
Session 12 A World without Abortion	76
Glossary	81

S1: WHERE YOU STAND & WHY IT MATTERS

INTRODUCTION

We all believe something about abortion which is often influenced by our experiences. We bring what we believe to life as we make decisions in our relationships, finances, politics, and more. We may not all be able to talk about what we believe or have a conversation explaining to someone else why we believe it. So, we want to start by identifying what experiences influence our beliefs, use similar terms to communicate with one another, and share where we stand on the issue of abortion.

SCRIPTURE

But in your hearts revere Christ as Lord. Always be prepared to give an answer (ἀπολογία) to everyone who asks you to give the reason for the hope that you have. But do this with gentleness and respect, keeping a clear conscience, so that those who speak maliciously against your good behavior in Christ may be ashamed of their slander. For it is better, if it is God's will, to suffer for doing good than for doing evil. **1 Peter 3:15-17**

Dear children, let us not love with words or speech but with actions and in truth. **1 John 3:18**

INSIGHT

Know your stance and its significance as you begin exploring or revisiting why you believe what you believe about abortion.

DEFINING TERMS

hu●man (noun): a whole individual person, especially distinguished from other animals representing the human species in capacity or potential

fer●til●ization (noun): the fusion of sperm and egg creating a new human being with unique DNA often believed to be equivalent to 'conception'

a●bor●tion (noun): intentionally ending the life of a preborn human being through a chemical or surgical procedure

pro●choice (adjective): advocating legalized abortion

pro●life (adjective): opposing abortion and euthanasia

NOTES

PERSONAL REFLECTION

Check the following statements you agree with:

- ☐ I consider myself pro-life.
- ☐ I consider myself pro-choice.
- ☐ All human life begins at the point of fertilization.
- ☐ Abortion is permissible in rare exceptions like rape and incest.
- ☐ Abortion is justified because it involves a woman's body and choice.
- ☐ The government should not be involved in abortion, only a woman and her doctor.
- ☐ I would not personally choose abortion, but I won't tell others what to do with their lives.
- ☐ Pro-choice people really just want to kill unwanted babies.
- ☐ Pro-life people don't care about children after they are born.
- ☐ All Democrats want to keep or expand abortion.
- ☐ All Republicans want to abolish abortion.
- ☐ A Christian can be pro-choice.
- ☐ A Christian can be pro-life.
- ☐ Abortion should be legal until a child is born.
- ☐ Abortion should be legal only until a child can survive outside the womb.
- ☐ Abortion should be legal if the pregnancy endangers the mother's life.
- ☐ Abortion should never be legal.
- ☐ Women need abortion to get out of poverty or abusive relationships.
- ☐ Without abortion, more men would exploit, traffic, or use women.
- ☐ Free birth control would reduce the need for abortion.
- ☐ The Church should just teach the Bible and leave abortion and birth control to medical and legal professionals.
- ☐ I feel confident about my views related to abortion and equipped to serve women and men considering or those who have had abortions.

QUESTIONS & DISCUSSION

1. Why did you decide to participate in this course? What do you hope to learn or do?
2. What is your experience with unexpected pregnancy or abortion?
3. What influenced your current views on abortion the most?

4. What, if anything, are you questioning about your beliefs related to abortion?
5. Regardless of which position you take, what new information would you need to change your view on abortion?

HOMEWORK

Take a position and write it below. *If you had to make the laws of our nation regarding abortion, what would they be? What exceptions would you include if any? What would be the responsibilities of fathers and mothers? What would be the consequence for abortion for the involved parties if any?*

DID YOU KNOW?

Until 1965 it was agreed that pregnancy began at *conception*, when a sperm and egg unite, also called *fertilization*.

However, in 1965 the *American College of Obstetricians and Gynecologists* (ACOG) redefined *conception* to the point of implantation when an embryo attaches to the lining of the uterus. This became the beginning of pregnancy.

While ACOG continued to assert that “pregnancy begins at conception,” its meaning is different and has implications for in vitro fertilization and the function of birth control. This change in terminology has not been universally accepted. However, there is no dispute that the early embryo will implant five to seven days after fertilization, and that disrupting a pregnancy after this point is an abortion.

Learn more:

[ACOG Media on the Question of](#)

ProLife Profile: Ally Wall

REFLECTION

What were your initial thoughts after hearing Ally's story?



As Ally shared her story, she mentioned it was hard to talk with her parents. What is it about the role our parents play in our lives that makes hiding our sin or mistakes from them preferable?

How does abortion promote secrecy in ways that are believed to be beneficial? What is harmful about abortion remaining a secret?

If a young woman or man you know shared they were pregnant and asked you to help them, would you be willing to drive them to an abortion clinic? What if it was out-of-state? What if they asked for help obtaining abortion pills? What if they could not afford the abortion? How else could you help care for them or their child?

S2: GOSPEL IMPLICATIONS

INTRODUCTION

All abortions involve a decision, loss, pain, and death. There are certainly those who say abortion was the right choice for them, however a decision, loss, pain, and death are indicators something was wrong. Three simple and helpful questions to continue the conversation are:

What was intended?

What went wrong?

How can it be made right?

These are big questions that help us think about our design and existence, our morals and dreams, our relationships and experiences, and lead us to the *implications of the Gospel*. The Gospel gives us a foundation to understand what was intended, what went wrong, and how can it be made right. It is not just for the past or the future—the Gospel impacts us right where we are today.

SCRIPTURE

For all have sinned and fall short of the glory of God. **Romans 3:23**

So God created mankind in his own image, in the image of God he created them; male and female he created them. God blessed them and said to them, 'Be fruitful and increase in number; fill the earth and subdue it'.... God saw all that he had made, and it was very good. **Genesis 1:27-31a**

But God demonstrates his own love for us in this; While we were still sinners, Christ died for us. **Romans 5:8**

For the wages of sin is death, but the gift of God is eternal life in Christ Jesus our Lord. **Romans 6:23**

Therefore, there is now no condemnation for those who are in Christ Jesus. **Romans 8:1**

When he had received the drink, Jesus said, "It is finished." With that, he bowed his head and gave up his spirit. **John 19:30**

If you declare with your mouth, “Jesus is Lord,” and believe in your heart that God raised him from the dead, you will be saved. For it is with your heart that you believe and are justified, and it is with your mouth that you profess your faith and are saved.

Romans 10:9-10

INSIGHT

Identify the root issue of abortion, discuss why someone who may not believe God exists should weigh the implications of the Gospel, and explore how to communicate the Gospel to someone with an unexpected pregnancy or past abortion.

NOTES

QUESTIONS & DISCUSSION

1. What is wrong with abortion if a person does not believe in God? Is there a moral or societal problem with taking a human life apart from God?
2. Read the *Did You Know?* section. How does the lack of regret for post-abortive women misrepresent the problem of abortion? And, why might it become all the more important that the Gospel communicates value and purpose for human life first rather than the guilt of sin?
3. Are you tempted to believe the Gospel is not practical enough when considering solutions for women with unexpected pregnancies and past abortions? Why?
4. Apart from the Gospel, how would you tell a woman considering abortion or who had an abortion that her or her child's life had value or purpose?
5. What is one question you could ask when discussing abortion to address Gospel implications?

DID YOU KNOW?

According to a study published by Cambridge University Press in 2018:

Over 85% of women in the study reported at least one of these adverse reactions (grief, guilt, loss), with a third reporting five or more negative reactions. These negative reactions were offset by positive responses (relief, happiness, and satisfaction) by over 85% of women. Importantly, by age 30, nearly 90% stated that the decision to have an abortion was the correct one, and only 2% reported that they believed the decision to be incorrect. The accumulated evidence on this topic does not support recent claims from pro-life advocates that large numbers of women who have abortions regret their decision.

Read the full article by searching *British Journal of*

HOMEWORK

Engage someone in a conversation this week and share the Gospel.

Utilize the *the Roman Road* and *Bridge Illustration*¹. In your conversation you might explain that you are working through this content and wrestling with the issues around abortion, and ask, “How do you determine when someone has value or the right to life?”

RESOURCES

A Gospel Primer by Milton Vincent

The Complete Evangelism Guidebook by Scott Dawson

Reasonable Faith by William Lane Craig (reasonablefaith.org)

The Gospel Coalition (thegospelcoalition.org)

Supporting the church by providing resources that are trusted and timely, winsome and wise, and centered on the gospel of Jesus Christ.

¹ Watch *How to Share the Bridge Illustration* on YouTube from Watermark’s founding pastor, Todd Wagner, at <https://youtu.be/wQCeXkn0aMU>.

S3: THE SCIENCE OF LIFE

Featuring Dr. Ingrid Skop, M.D.

Senior Fellow & Director of Medical Affairs, Charlotte Lozier Institute, lozierinstitute.org

INTRODUCTION

The Bible does not provide the cellular or scientific detail we so often crave in conversations related to abortion, and while science has its limitations, it can observe what God has designed. Since the invention of the microscope and the advent of ultrasound, science has grown exponentially in its ability to add knowledge to how humans begin and grow to the wisdom of why humans have value and purpose.

SCRIPTURE

For you created my inmost being; you knit me together in my mother's womb. I praise you because I am fearfully and wonderfully made; your works are wonderful, I know that full well. **Psalm 139:13-14**

INSIGHT

Answer the questions: *When does life begin?* and *What are the preborn?*

DEFINING TERMS

Carnegie Stages (noun): a system used by embryologists to describe the apparent maturity of embryos; an embryo is assigned a Carnegie stage (numbered from 1 to 23) based on its external features independent of the chronological age nor the size of the embryo

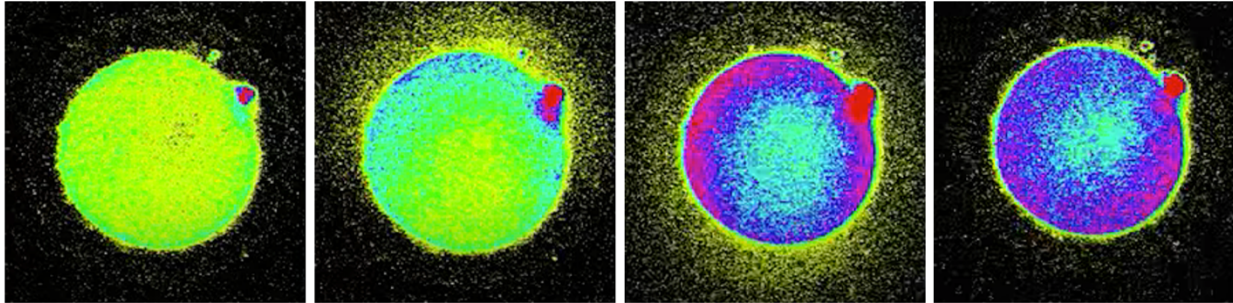
embryology (noun): the branch of biology and medicine concerned with the study of embryos and their development

eugenics (noun): a philosophy started by Sir Francis Galton, cousin to Charles Darwin, in the 1800s applying evolutionary theory to humans and promoting "good genes" while working to eliminate less desired traits through birth control, forced sterilization, and eventually, abortion.

DID YOU KNOW?

- Sperm wasn't discovered until the 1600s
- When an egg is fertilized, you can see a spark of zinc fluorescence under a microscope
- Ultrasounds have only been widely available for the past 50 years.
- In utero surgery is a fairly new procedure.
- At 12 weeks, a baby has:
 - A heartbeat
 - A unique fingerprint and fingernails
 - Tiny tooth buds appearing under their gums
 - Has a brain, nervous system, liver, intestines, urinary tract, ears and eyelids
 - Can make a fist
 - Can feel pain

ul•tra•so•no•gra•phy (noun): a technique using echoes of ultrasound pulses to delineate objects or areas of different density in the body



fe•to•sco•py (noun): a technique that utilizes a small camera or scope to examine and perform procedures on the fetus during pregnancy

zinc fluor•esc•ence (noun): *in embryology*, a novel marker and chemical reaction of zinc at the point of fertilization released from the female's egg creating a "spark" (look at the images below or search "zinc fluorescence fertilization" to watch)

ob•stet•rics (noun): the branch of medicine and surgery concerned with childbirth and the care of women giving birth

gy•ne•col•o•gy (noun): the branch of physiology and medicine which deals with the functions and diseases specific to women and girls, especially those affecting the reproductive system.

NOTES

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QUESTIONS & DISCUSSION

1. Prior to this session, when would you have said human life began? What factors seemed most compelling to identify when a human is a human (i.e. heartbeat, brain function, viability, birth)?
2. What was new information for you from this session?
3. Having established when life begins, how would you establish when life is worth protecting?
4. In hearings before the United States Congress in 1981 on the question of “when human life begins”, prominent scientists stated:

The fact that after fertilization has taken place, a new human has come into being, is no longer a matter of taste or opinion.

In biology and in medicine, it is an accepted fact that the life of any individual organism reproducing by sexual reproduction begins at conception (fertilization).

By all the criteria of modern molecular biology, life is present from the moment of conception.

Human life begins at the time of conception.

Human life begins when after the ovum is fertilized the new combined cell mass begins to divide.

The beginning of a single human life is from a biological point of view a simple and straightforward matter—the beginning is conception.²

With such consensus over the past 80 years from the scientific community, why do you think abortion continues to be promoted?

² Jerome Lejeune, Micheline Matthews-Roth, Hymie Gordon, Alfred Bongiovanni, Jasper Williams, Watson A. Bowes Jr., all quoted in *Abortion: The Silent Holocaust* by John Powell (1981: pages 70-74).

5. What changes about the way you are living your life if you accept when life begins?
6. How could this information impact those considering in vitro fertilization?

in vitro fertilization (noun): a medical procedure whereby an egg is fertilized by sperm in a test tube or elsewhere outside the body. This procedure is followed by *genetic testing* for quality of cellular structures and *cryopreservation*, or freezing the embryo, until a uterus is prepared for implanting the embryos. Not all embryos are implanted and many may be destroyed if it is believed the embryos aren't of sufficient quality to survive or additional embryos remain after a successful pregnancy and delivery.

HOMEWORK

Identify a ProLife obstetrician, gynecologist, midwife or doula in your church or community. Reach out and ask some of the following questions:

- How can I pray for and support your medical practice?*
- How are you caring for women with unexpected pregnancies?*
- How are you caring for women with ectopic pregnancies?*
- Any concerns related to recent abortion laws?*
- Does your office pray with the mothers and fathers you care for?*
- How can we support and care for couples who receive life-limiting diagnoses en utero?*
- How can we help care for women and men with past abortions?*

RESOURCES

American ProLife OBGYNs (aaplog.org)

A physicians network and resources promoting the unique value and dignity of individual human life in all stages of growth and development from fertilization onward.

Contend Projects (contendprojects.org)

Making essential scientific facts easily accessible to educate people in simple, positive ways as a matter of basic education.

Charlotte Lozier Institute (lozierinstitute.org)

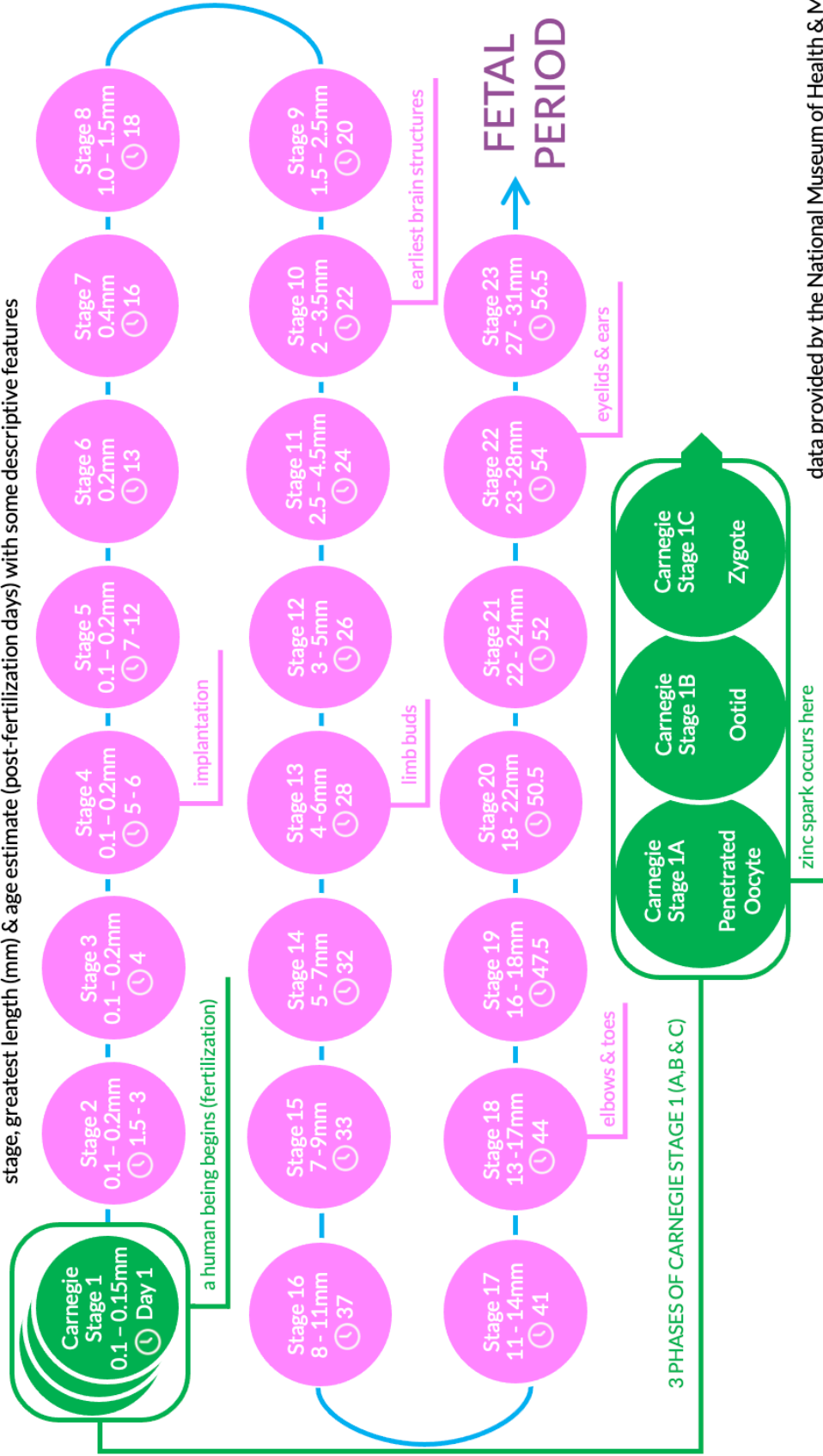
Life-related research, public policy, and media.

Watermark Statement on In Vitro Fertilization, Cryopreservation & Genetic Testing

Visit watermark.org/shiloh and scroll down to the Resources section.

THE CARNEGIE STAGES

23 Distinct Stages in the 8 Week Embryonic Development Period
stage, greatest length (mm) & age estimate (post-fertilization days) with some descriptive features



data provided by the National Museum of Health & Medicine

S4: THE CHURCH'S RESPONSE

INTRODUCTION

Before we continue engaging in biological and biblical truth in order to think rightly, we want to challenge and improve upon your decisions and actions to live rightly. We will explore more opportunities to lead in our communities in **Sessions 5, 11 & 12**, but we want to begin by looking at what a local church can do and how you can initiate or help lead those efforts.

SCRIPTURE

Do not merely listen to the word, and so deceive yourselves. Do what it says.
James 1: 22

INSIGHT

The Church can be a better partner by equipping, discipling, and organizing its members to engage in prolife ministry throughout its community.

DEFINING TERMS

School Health Advisory Council (SHAC): a group appointed by a school district to serve at the district level to ensure local community values are reflected in health education instruction including mental, physical, sexual, and emotional health. *In Texas, a majority of members must be parents and not employed by the district—see your states guidelines for more specifics.*

Pregnancy Resource Center (PRC): a non-profit organization providing counseling services to women with unexpected pregnancies. Services typically include: pregnancy testing, STD testing, sonograms, parenting classes, referrals for prenatal care, assistance obtaining Medicaid, and more.

DID YOU KNOW?

Pregnancy resource centers outnumber abortion clinics nationwide...

3 to 1.

In some states the ratio is as high as...

15 to 1.

Statistic provided by NBC News and the National Library on Internal Medicine.

NOTES

QUESTIONS & DISCUSSION

1. What do you believe is the greatest gap where the Church is not currently serving women and men with unexpected pregnancies or past abortions?
2. Do you know if that gap truly exists in your community or is that just what you have heard or believe? What have you observed or researched about that gap in caring for this population?
3. What has kept you, your school, or your church from investing your time, energy, or resources from being a part of the solution for reducing that gap in caring for this population?
4. Proverbs 15:22 says, "Plans fail for lack of counsel, but with many advisers they succeed." As you have begun and will continue processing issues and opportunities, who is your biblical community to help discern what you are learning and where you might serve?
5. What could be an unintended consequence of promoting adoption in a prolife ministry serving women and men with unexpected pregnancies?

HOMEWORK

Search online for "abortion near me" online and observe how both pro-choice and pro-life organizations attempt to reach clients. Then, identify if there is an abortion clinic near you and go pray there for one hour this week. If you're in a state where abortion clinics are all closed, find the location where one formerly existed and go pray for one hour. Pray for the abortionist(s), clinic workers, the clients, and the community.

RESOURCES

Ascend (weascend.org)

Equipping and uniting the national sexual risk avoidance (SRA) field to empower youth to make healthy choices about sex, relationships, and marriage.

ProLife Apologetics (watermark.org/prolifeapologetics)

A 12 session course for individuals, groups, schools, colleges & churches to be equipped with the biblical & biological truth of life and encouraged to engage their communities.

Unexpected Pregnancy Mentor Training (watermark.org/pregnant)

An 8 session video-based training for churches equipping their members to mentor women and men with unexpected pregnancies and partner with referral sources like pregnancy resource centers, urgent care clinics, immigration services, and schools.

Worth More (watermark.org/worthmore)

A 12 session course for women with past abortions seeking healing and restoration as well as an individual Bible study for men with past abortions to process their experiences.

Sidewalk Advocates for Life (sidewalkadvocates.org)

Peaceful, prayerful, loving, and law-abiding sidewalk outreach outside abortion facilities in the U.S. and beyond, redirecting all to life-affirming alternatives, to end abortion.

And Then There Were None (abortionworker.com)

Helping people in the abortion industry leave their job and rediscover peace and joy.

Brave Love (bravelove.org)

A pro-adoption movement dedicated to changing the perception of adoption by acknowledging birth moms for their brave decision.

Human Coalition (humancoalition.org)

A national network for pregnancy resource centers, telehealth, and online marketing efforts to reach and care for women and men with unexpected pregnancies

LAUNCHING PROLIFE MINISTRY

Use the following to explore and launch a prolife ministry at your church or on your school campus.

Gather Leaders. Share your heart for prolife ministry with others and ask them to gather with you. You may share this with people generally, but you will definitely want to target specific individuals and personally ask them to join you. If you are unable to find others at your church or school to join you, consider reaching out to other churches or schools across your county. In your initial gathering, pose the question, “What can we do together we cannot do on our own?” Ask about people’s interests, experiences, and passions related to prolife issues, and then spend a concerted amount of time praying together for direction, resources, and favor from God. Have another gathering date & time already planned for no more than one month from this initial meeting.

Meet Regularly. Your group will likely begin to shrink, and you will identify people who have the time and ability to lead with you versus those who will be supportive but may not commit to help drive the efforts of the ministry. Meet at least once a month and identify the scope of what your ministry can accomplish. There are numerous opportunities and needs so avoid getting sidetracked. Use your time together to list everything the leaders are interested in doing but focus in on the efforts leaders are able and willing to commit to. Begin to assign leaders tasks to seek out what existing efforts are already active to avoid replicating an initiative. Some leaders may be gifted behind-the-scenes so have them consider what administration and finances will be needed to support the overall ministry and begin exploring and setting up data management, email addresses, social media accounts.

Assess Needs & Assets. Every community has needs and resources – things people need as well as things people already do well or have. It’s possible you do not need to start something new, and you need to redirect your group to join something already in motion. Too many ministries exist because someone felt they had a unique vision or brand in mind when in reality someone just wanted to do something they could call their own. But if you explore the various opportunities your group is interested and committed in leading, and no one else is doing it, consider if the resources needed (usually leaders & finances) are accessible, and if they are... keep praying & get started!

Start Small. Identify a single initiative your ministry can start with and gain the most momentum around (i.e. unexpected pregnancy mentoring & support, prolife apologetics equipping, advocacy efforts for pregnant and parenting moms, after abortion care, etc.). You may seek out approval or permission from a church staff member or administrator at your school, but you may be better served to begin leading an effort and allow a church staff member or school administrator to learn about the impact as it grows. Eventually, you may need permission to use space or become an official ministry or group of your

church or school, so determine what is required for becoming “official”. Be sure your administrative and financial support is not overrun by the demands or needs of your program. Better to under-promise and over-deliver than communicate a big vision and not be able to follow through.

Raise Some Money. Everything costs something. Time, talent, money. Leaders are leaders when they are invested. You can start by asking your leadership to contribute something small on a regular basis (i.e. \$20/month). Even filing to become a non-profit organization or leading a ministry at your church costs money... and raising money can be a full-time job. Share your vision and what efforts you are leading, and then personally ask people to prayerfully consider giving. Be transparent about where money is going, and designate a leader with someone else to provide checks and balances. If you and other leaders are raising thousands of dollars and your efforts feel like a job as well as a passion, start considering staff, salaries, etc. Until then, support the women and men you serve!

Sustain, Grow & Multiply. As you refine your initial effort and build your capacity to sustain it, begin to explore other initiatives following the same model of identifying leaders and starting small. As you grow, share what you learn with others so they can create similar efforts in their community. Your ministry will become more complex, and at some point, you will need to bring other leaders around you who can do what you are doing especially if being the primary spokesperson for the ministry is not your strongest gift. Delegate to other trusted leaders and remember to say “no” to things you might add if you will lose effectiveness regarding the efforts the group has already started. It is okay to prune efforts that don’t make an impact or keep experimenting.

Find Friends. There are undoubtedly other churches and school ministries in other parts of your state or region of the country you can lock arms with, learn from, and be an encouragement to. They need your experiences as much as you need theirs. Find them, share ideas, sharpen your efforts, and keep going. Leading alone is incredibly difficult and doing it for a short-time may be necessary if you’re pioneering in your community, but it is not a sustainable place to stay.

Avoid Mission Drift. Leaders who launch ministries can reach a point of burnout or get sidetracked with other issues they care deeply about. Set limitations on your time, and be realistic about what you can control and accomplish. We tend to over-estimate what we can do in one year and under-estimate what we can do in 5 years. Slow and steady wins the race. Continue to invite other people to lead with you by giving them small things to prove their willingness and giftedness. Be determined to learn more and mature as a leader with others.

ProLife Profile: Dominique White

REFLECTION

Many women believe abortion is preferable to adoption to prevent their child from feeling abandoned. How might you respond to a pregnant woman to clarify this thought?



According to *Human Life International*, only 4% of women with unexpected pregnancies choose adoption. Why is adoption *not* the first or only answer for women with unexpected pregnancies?

Some expecting mothers assume adoption requires their child to go into foster care. How would you ensure an expecting mother knows what adoption entails while you prioritize her caring for her child?

DID YOU KNOW?

There are 2x as many couples waiting to adopt as there are women with unexpected pregnancies in the United States.

Statistic provided by the National Review

What is open adoption?

When biological parents continue a relationship with the child(ren) placed for adoption. It can be limited to letters and pictures or a biological parent could also be treated like extended family enjoying holidays, vacations, and more together

S5: CARING FOR WOMEN

INTRODUCTION

Women with unexpected pregnancies have unique needs we can address individually, as a church, in our businesses and schools, and in our laws. As we continue to develop a theoretical prolife apologetic and begin or continue to exercise an applied apologetic, consider what norms have become accepted for women and men related to sex, pregnancy, and parenting. Weigh how you would respond to a woman in need understanding her unique circumstances and the opportunities to promote a father's and mother's capacity to parent as you support them both.

SCRIPTURE

When the woman saw that the fruit of the tree was good for food and pleasing to the eye, and also desirable for gaining wisdom, she took some and ate it. She also gave some to her husband, who was with her, and he ate it. **Genesis 3:6**

For I am convinced that neither death nor life, neither angels nor demons, neither the present nor the future, nor any powers, neither height nor depth, nor anything else in all creation, will be able to separate us from the love of God that is in Christ Jesus our Lord. **Romans 8:38-39**

INSIGHT

Christians do not have to wait until ministry is organized or programs are ready in order to serve, we can thoughtfully care for vulnerable women, men, and families right where we are and right now.

DEFINING TERMS

Title IX of the Education Amendments of 1972: protects people from discrimination based on sex in education programs or activities that receive federal financial assistance, and states: *No person in the United States shall, on the basis of sex, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any education program or activity receiving Federal financial assistance.*

Family Medical Leave Act of 1993 (FMLA): provides certain employees with up to 12 weeks of unpaid, job-protected leave per year. It also requires that their group health benefits be maintained during the leave. FMLA applies to all public agencies, all public and private elementary and secondary schools, and companies with 50 or more employees. These employers must provide an

DID YOU KNOW?

51%

of women who had an abortion were utilizing a contraceptive.

Statistic provided by the Guttmacher Institute

eligible employee with up to 12 weeks of unpaid leave each year for any of the following reasons:

- For the birth and care of the newborn child of an employee;
- For placement with the employee of a child for adoption or foster care;
- To care for an immediate family member (i.e., spouse, child, or parent) with a serious health condition; or
- To take medical leave when the employee is unable to work because of a serious health condition.

NOTES

QUESTIONS & DISCUSSION

1. How does your business, church, or school provide support to expecting and new mothers and fathers? Is it limited to only what the government requires?
2. If an under-resourced individual or family in your community, workplace, or church experienced an emergency (medical, financial, property, etc), what is already in place to help them? What could be developed to avoid enabling a cycle of crises while ensuring help was available?
3. Is birth control a helpful solution to care for women? What other implications should we consider? *Is pregnancy a problem to be avoided? Would increased access or free birth control reduce unexpected pregnancies or abortion? In what ways do hormonal contraceptives impact women's health positively and negatively?*
4. In Dominique's story, someone shared with her 'abortion was not unforgiveable' but there was more to discuss. How would you express abortion is not *unforgivable* without communicating grace gives us permission to sin?

HOMEWORK

Go to the website for your school, work, or church as if you were a woman or man with an unexpected pregnancy. Are you able to find help? Is there a page, link, or phone number to get assistance?

If you have to provide care for a woman or man with an unexpected pregnancy, where would you direct them for...

a place to live? _____

prenatal care? _____

child care? _____

Make recommendations to your school, work, or church leadership for how to improve availability to resources.

RESOURCES

HerPlan (herplan.org)

A national online database with community resources for healthcare, housing, transportation, employment, mental health services, childcare, etc.

Birth Control Guide (watermark.org/birthcontrol)

A resource to help women and men consider the use and methods of birth control for their health, marriage, and family decisions.

IF Gathering (ifgathering.com)

Equipping women with gospel-centered resources, events, and community so they may learn who God is and disciple other women right where they are.

A Woman's Right to Know (<https://www.hhs.texas.gov/services/health/women-children/a-womans-right-know>)

A booklet and resource directory for women with unexpected pregnancies.

Counseling a Friend Considering Abortion or After an Abortion (watermark.org/tli)

Two resources to prepare for conversations with friends and loved ones considering or after an abortion.

Embrace Grace (embracegrace.com)

Inspiring and equipping the church to love and encourage single and pregnant young women and their families through global support groups.

Better Man (betterman.com)

An outreach to help leaders and churches reach and unleash men in their communities with God's timeless manhood.

As you consider your future family and having children, utilize the following information to be informed on your choices related to birth control. *While this information and the accompanying chart on birth control is occasionally updated, due to the continual changes in medicine, women and men should consult their doctors regarding the most recent research available.*

Sex was given to husbands and wives by God to glorify Him, increase intimacy in marriage, grow the family through reproduction, and teach us about ourselves and Christ. Sex is physically pleasing, and yet outside of marriage it creates health risks, undermines relational trust, and limits intimacy. Birth control decreases the likelihood of pregnancy, however it does prevent sexually transmitted diseases and erodes God's purposes for sex. Using birth control does not make premarital sex a consequence-free sin.

- Read Matthew 19:4-6, Genesis 2:20-24, Genesis 1:27-28, and Ephesians 5:31-32. *Why did God create sex?*

God values children from the point of fertilization and designed parents to treasure their sons and daughters. When we approach birth control with a negative attitude by considering children a nuisance, commodity, or obstacle in our future plans, we undermine the value God places on human life. Passages like Matthew 18:10 and Mark 10:13-16, reveal how Jesus clearly valued children and those who are vulnerable.

- Read Psalm 127 and Psalm 139 with your fiancé or spouse. How does God view children? According to these passages, when does life begin?

Through the study of human embryology, science confirms every life begins at fertilization when a man's sperm penetrates a woman's egg. This is seen in the fact that a whole human being is present with unique human DNA distinct from the mother and father.

Birth control is a method, medicine, or device used to prevent pregnancy. Birth control devices function to prevent ovulation, fertilization, or implantation. Ovulation is a monthly cycle when a woman's ovaries drop an egg to be fertilized in her fallopian tubes. Fertilization is when a man's sperm penetrates a woman's egg in her fallopian tubes creating a whole new human at the earliest stage of development known as the primordial embryo. And, implantation is when the embryo travels to the woman's uterus and is caught by the lining of the uterus.

There are currently five categories of birth control: *sterilization* (vasectomy, tubal ligation), *long-acting reversible contraception* (hormonal implants and intrauterine devices/IUDs), *short-acting hormonal methods* (pills, patches, vaginal rings, shots, morning after pills), *barrier methods* (condoms, diaphragms, sponges, and cervical caps), and *natural rhythm methods* (abstinence and fertility timing).

60% of all women and 20% of all men of reproductive age currently use a birth control method, also known as contraception. Birth control varies in effectiveness in preventing fertilization. Hormonal methods, such as IUDs, have a 1% to 10% failure rate and some contraceptives may miscarry an embryo by preventing implantation before a mother realizes she was pregnant.¹ Barrier and natural rhythm methods have a failure rate up to 25%. Male contraception involves the least risk when compared to options for women. Condoms fail less than 15% of the time and vasectomies are less invasive than tubal ligation. While there is no male alternative to the contraceptive pill yet, condoms and vasectomies don't impact male hormones or risk miscarriage or abortion. Vasectomies can be obtained to prevent male fertility and can also be reversed up to 15 years after the procedure if/when a couple wants to conceive.

¹ <https://www.guttmacher.org/fact-sheet/contraceptive-use-united-states>

BIRTH CONTROL

Some birth control methods, specifically progestin-only contraceptives, may cause a woman to miscarry an embryo prior to implantation. These methods are possibly abortifacients.² Hormonal birth control methods utilize estrogen and progestin to prevent ovulation, increase the thickness of mucus in the cervix to prevent fertilization, and thin the lining of the uterus to prevent implantation. The contradiction is once an egg has been fertilized a new human, created in God's image, exists. This means methods that prevent implantation can cause a miscarriage before a mother knew she was pregnant.

Due to the abortifacient potential of some hormonal birth control methods, Watermark discourages couples from using these methods for the purpose of birth control. It is important to note hormonal birth control methods are often prescribed to treat non-pregnancy related issues including severe acne, migraines, premenstrual syndrome (PMS), polycystic ovarian syndrome (PCOS), endometriosis, and irregular, painful or heavy periods. If a woman is utilizing hormonal birth control to address a health issue, her husband may utilize other forms of male contraception to prevent fertilization.

Before selecting a method of birth control, you and your spouse should consider:

1. How your view of children effects your choice to use birth control.
 - Are children a blessing or an inconvenient probability?
 - Do you want to have children? If so, how many and when?
2. The risk some hormonal methods of birth control have for causing a miscarriage.
 - Ask your OB/GYN, could this method cause an embryo even at the earliest stages of development to not implant?
3. Your overall health and any possible side effects from birth control.
 - How will this method effect my body?
 - Do we need to use another method to ensure we do not cause a miscarriage?
4. The effectiveness of preventing fertilization.
 - Which method(s) is most effective to prevent fertilization, and who will be responsible for ensuring it is used?

Next Steps

- If you are on birth control for medical reasons, research and understand the short-term and long-term side effects of what you put in your body and clarify issues related to implantation with your doctor. (Resource: <https://www.webmd.com/sex/birth-control/birth-control-pills#4>)
- If you are unmarried and sexually active, communicate your thoughts about birth control with your Community Group and seek accountability to abstain from sex until marriage. (Resource: <http://realtruthrealquick.com/christian-premarital-sexual-relationship/>)
- If you are concerned that prior use of hormonal birth control may have led to miscarriage, contact pastoralcare@watermark.org.

Resources

1. The Life Initiative at Watermark: a ministry to women, men, and families for sex education, unexpected pregnancies, and past abortions (watermark.org/tli)
2. ProLife OB/GYNs: the American Associations of ProLife OB/GYNs (aaplog.org)
3. Centers for Disease Control and Prevention: the national public health protection agency (cdc.gov/reproductivehealth/contraception)

For more information or questions concerning birth control, email thelifeinitiative@watermark.org.

² <https://aaplog.org/birth-control-pill-abortion-and-contraceptive/>

STERILIZATION



TUBAL LIGATION

A procedure that permanently closes your fallopian tubes so egg and sperm are unlikely to meet.

99% EFFECTIVE

A surgeon must perform the procedure, but is permanent.

Abortifacient? **NO**



VASECTOMY

A surgery done to block off the small tubes in your scrotum that carry sperm, to prevent it from leaving your body.

99% EFFECTIVE

A doctor has to perform the surgery. It is possible for reversal.

Abortifacient? **NO**

LONG-ACTING REVERSIBLE CONTRACEPTION



HORMONAL IMPLANTS

Releases progestin to prevent ovulation, increase the thickness of mucus in the cervix to prevent fertilization, and thin the lining of the uterus to prevent implantation.

99% EFFECTIVE

A doctor inserts the implant into your upper arm, and can last up to 5 years.

Abortifacient? **POSSIBLY**



IUDS

Utilizes progestin or copper to prevent ovulation, increase the thickness of mucus in the cervix to prevent fertilization, and thin the lining of the uterus to prevent implantation.

99% EFFECTIVE

A doctor inserts an IUD into your uterus and can last 5 or 10 years.

Abortifacient? **POSSIBLY**

SHORT-ACTING HORMONAL METHODS



PILLS

COMBINED
Releases estrogen and progestin to prevent pregnancy. Used with infertility treatments to prepare the uterus for implantation.

98% EFFECTIVE

PROGESTIN-ONLY
Releases progestin to prevent pregnancy. Commonly known as the "mini-pill".

91% EFFECTIVE

You have to take the pill typically around the same time each day.

Abortifacient? **NO**

Abortifacient? **POSSIBLY**



PATCHES

Releases estrogen and progestin to prevent pregnancy

91% EFFECTIVE

You put a new patch on every 3 weeks.

Abortifacient? **NO**



VAGINAL RINGS

Releases progestin and estrogen to prevent ovulation, increase the thickness of mucus in the cervix to prevent fertilization, and thin the lining of the uterus to prevent implantation.

91% EFFECTIVE

Abortifacient? **NO**



SHOTS

Releases progestin to prevent ovulation, increase the thickness of mucus in the cervix to prevent fertilization, and thin the lining of the uterus to prevent implantation.

94% EFFECTIVE

A doctor or a nurse must give you a shot every three months.

Abortifacient? **POSSIBLY**



MORNING AFTER PILLS

Plan B releases levonorgestrel, a type of progestin to prevent ovulation, fertilization, or implantation. Ella, another morning after pill, releases ulipristal which is similar to the chemical in abortion pills.

95% EFFECTIVE IF TAKEN WITHIN 24 HOURS.

You can take Plan B up to 72 hours after unprotected sex. **Abortifacient? POSSIBLY**

BARRIER METHODS



CONDOMS

Acts as a barrier by covering the penis to prevent sperm from getting into the vagina.

85% EFFECTIVE

A new condom must be used each time.

Abortifacient? **NO**



DIAPHRAGMS

Acts as a barrier by covering the cervix to prevent sperm from getting into the vagina.

88% EFFECTIVE

A new diaphragm must be used each time.

Abortifacient? **NO**



SPONGES

Acts as a barrier by covering the cervix to prevent sperm from getting into the vagina. Also contains spermicide to slow down sperm so it will not reach the egg.

76-88% EFFECTIVE

A new sponge must be used each time.

Abortifacient? **NO**



CERVICAL CAPS

Acts as a barrier by covering the cervix to prevent sperm from getting into the vagina.

71-86% EFFECTIVE

A new cervical cap must be used each time.

Abortifacient? **NO**



SPERMICIDE

A chemical put into the vagina which blocks the entrance to the cervix and stops sperm from getting to the egg.

71% EFFECTIVE

Have to use each time.

Abortifacient? **NO**



WITHDRAWAL

Pulling out before ejaculating prevents the sperm from getting to the egg.

78% EFFECTIVE

Have to pull out every time.

Abortifacient? **NO**

NATURAL RHYTHM METHODS



ABSTINENCE

Prevents pregnancy by keeping semen away from the vagina.

100% EFFECTIVE

Actively abstain from intercourse.

Abortifacient? **NO**



FERTILITY TIMING

A method to track your menstrual cycle to know when ovaries release an egg, to prevent intercourse occurring during ovulation.

76-88% EFFECTIVE

You have to track your cycle daily.

Abortifacient? **NO**



BREASTFEEDING

When breastfeeding exclusively, your body will stop ovulating for the first 6 months, or until your period returns.

98% EFFECTIVE

Must breastfeed every 4-5 hours in the day, 6 hours at night.

Abortifacient? **NO**

PROMOTING DIGNITY AND HOPE FOR EVERY HUMAN LIFE BY EQUIPPING THE CHURCH TO CARE FOR WOMEN, MEN, AND THE PREBORN IN UNEXPECTED PREGNANCIES AND ABORTIONS.

 **THE LIFE INITIATIVE**

CONSIDERING ABORTION?

a guide for counseling through an unexpected pregnancy

With unexpected change comes a sense of fear and uncertainty. You are not alone. Take a deep breath. The best thing you can do in moments like this is consider our options (parenting, adoption, and abortion) and identify a few trusted family members or friends who will encourage and support us along the way.

The most common reasons given for choosing abortion are the cost of parenting, a lack of support from the child's father, or the fear of telling parents or others. These are legitimate concerns; however, biology and the Bible agree—life begins at conception which means abortion ends the life of a human being. We understand the allure of choosing abortion because some of our leaders have found hope and healing in Jesus Christ after aborting a child. Here are some of the insights they want to share with you.

Grace changes everything. God sees you in the midst of your pain, secrecy, and unexpected circumstances. He not only sees you but loves you deeply and is working out his plan in your life in ways you rarely see in the moment. Jesus died to rescue you because you can't rescue yourself. The Gospel truth extends to every human being – you, your child, and everyone you meet that God uniquely formed and sustains (2 Samuel 14:14; Romans 5:8).

Circumstances are real. Pregnancy and parenting are hard and costly, and if caring for a baby frightens you or is not something you think you are ready for, abortion can appear to be the best choice. Only abortion is final for you and your child, but your fear and caring for a baby are circumstances that can change with support and hope for what's ahead. Rather than being overwhelmed, divide up the most pressing issues at hand rather than letting them all bear down at once; then take them one at a time. Every new parent goes through fears of uncertainty and learning curve. You are more capable than you realize, but we all need help to care for a child. Find people who will build you up through a local church, medical professionals, and your family and friends. You will be surprised to find hope and care among people in the church who have experienced the same struggles you are facing (1 John 3:18).

God created and cares about ALL life. While your child is the most vulnerable person in this situation, start by focusing on yourself. Your life began at the point of fertilization and bears God's image. This means God values you... he loves you! This means your value is not dependent on worldly success. You are not hopeless because of your mistakes, and your life is not defined by your present situation. God created you and this child in his image. God says his design in creating every human in his image is very good (Genesis 1:27, Genesis 1:31).

Listen and pray. If being pregnant is not something you expected, you may only tell one or two of your most trusted friends. Listen to what they have to say. *Do they recognize the value of your child even if they acknowledge this wasn't what you planned? Do they offer real support or only to support whatever you decide? Do they preach at you or ask you good questions and listen to your concerns?* Amidst any advice you get, take time to quiet yourself and all the thoughts spinning in your mind and pray.

The Lord is near to all who call on him in truth. He fulfills the desire of those who fear him; he also hears their cry and saves them. - Psalm 145:18-19

Consider more than the circumstances. Abortion seems to address one set of problems while creating another set of problems. Many believe it's a compromise they are willing to make even if it leaves a path of regret and pain. Don't negotiate your life or the life of your child with your circumstances. Give your family and friends, the people who love you, the chance to care for you. If you decide to have an abortion, be clear on what risks are involved for you and your child (Psalm 139:13-16).

Be informed. Ask good questions about your pregnancy, adoption, or your abortion procedure. A pregnant woman can only choose to take the abortion pills if they are no more than 10 weeks pregnant. At 10 weeks, your child has already developed a heartbeat, fingers, toes, eyes, ears, and his or her brain is forming connections. In the state of Texas, a woman is required to receive a sonogram at least 24 hours before an abortion procedure, and she cannot abort after 22 weeks. Most women find out they're pregnant around 6 weeks. Whether you have insurance or not, you can get prenatal care and a sonogram from a pregnancy center to find out how developed your child is usually for free. **Call the Pregnancy Helpline at 888-884-8160.**

Most women and men are not prepared for the physical, emotional, and spiritual impact of abortion. What initially felt like relief may be replaced by intense feelings of guilt, shame, pain, anger, or numbness. Some suffer in silence for years, or even decades, from the consequences of the decision to end their child's life. As you consider your options, think about these insights:

DO:

Listen and eliminate distractions.
afraid.
Acknowledge feelings but stand firm in truth.
Invite trusted friends to share truth and help.
going through.
Identify real concerns about parenting.
Consider adoption.
Pray continuously.
Be educated about pregnancy, adoption, and abortion.
Take the next step.

DON'T:

Presume others' reactions because you are
Allow feelings to validate your choices.
Pretend no one knows what you're
Let every concern overwhelm you all at once.
Believe co-parenting is not possible.
Tolerate lies you may be told to linger.
Ignore information that is hard to hear.
Get stuck without seeking help.

God's love, mercy, redemption, and design is bigger than any circumstance you are facing right now. The moment the egg and sperm combined, a new life with all of its unique DNA was created -- God was not caught off guard by this! Be reminded that every life is valuable and trust that God is not done with you. Pray without ceasing, be comforted with passages like Matthew 11:28-30 or Isaiah 61:1-3 and allow us to take the next step with you.

Next Steps

Unexpected Pregnancy Mentoring: pregnant@watermark.org; (972)454-9868
Thrive Women's Clinic: thrivewomensclinic.com; (214)343-9264
Human Coalition Virtual Clinic: humancoalition.org; (888)884-8160
Watermark Urgent Care: watermarkurgentcare.com; (469)317-0028
CHIP Perinatal: yourtexasbenefits.hhsc.texas.gov/programs/health/women/chip-perinatal

COUNSELING A FRIEND AFTER AN ABORTION

a guide for counseling after an abortion

Being the friend willing to talk through hard things is vital. Abortion is a unique experience yet 1 in 4 women will have an abortion before the age of 45 (Guttmacher Institute). After an abortion, most women and men are not prepared for the physical, emotional, and spiritual after-effects. What initially felt like relief may be replaced by intense feelings of guilt, shame, pain, or anger. Some may suffer in silence for years, or even decades, from the trauma of their decision to end a pregnancy. They may stay silent because of fear of rejection from loved ones, friends, the church, and/or society; or they may stay silent as a form of denial that it happened. These ineffective coping strategies may leave them grasping to make sense of their experience and heal from their pain.

Women and men may go through stages of what is called “Post-Abortion Syndrome” (a term used to describe the anguish following an abortion). Symptoms such as intense guilt, shame, anxiety, self-hate, prolonged grief, bitterness, anger, depression, emotional numbness, and even suicidal thoughts are just a few of the feelings they may experience. While some similarities exist in how men and women process an abortion, there can be sharp differences in how each individual grieves or perceives their role in the abortion. In talking with someone who has had an abortion, remember the following Biblical insights:

Abortion is not the unforgivable sin. Christ’s death and resurrection heal us from our sin - and abortion is no exception. Despite the depth of our anguish, His love prevails. Abortion does not define your friend, Christ does. (Romans 8:1, Psalm 103:10-12)

God created and cares about ALL life. Every human life began at conception and bears God’s image, this places intrinsic value on all of us. This value and worth extends not only to every child who has been aborted, but also to every woman and man who have participated in abortion. (Psalm 139:13-16, Genesis 1:27)

The pain from abortion is real. Regardless of what stage of development the abortion took place, it ended a life. This causes a void and intense feelings which must be resolved before healing can take place. (Psalm 32:3-5)

God loves your friend and is pursuing them. God uses redemption and restoration, not guilt and shame, to heal His children. Your friend may feel they are unworthy to receive the gift of grace He offers, but you can remind them they are worthy and redeemed by Christ. (Romans 5:20-21, 2 Samuel 14:14-15)

There is freedom and restoration in Christ. Shame and guilt can be a prison we willingly leave ourselves in. The good news is God is in the business of setting people free from what enslaves them. If you know someone who is enslaved by guilt and shame from a past abortion, bring them the good news that Jesus paid the penalty already, and they can be free. (Isaiah 61:1, 2 Corinthians 3:17)

They are not alone. Your friend may feel like they are suffering alone. Not only do they have you as a supportive friend, but there are many who have shared this experience, and there is support to help them find healing. (Isaiah 41:10)

As you engage in conversations, discern what your friend needs: someone to listen, or someone to speak truth? counseling from biblical community or professional therapy alongside community? an after-abortion bible study or support group? Being a good friend starts by being a good listener. An abortion was not a stand-alone, simple choice for your friend. They didn't just have an abortion, they had everything that led up to it as well. As your friend is grappling with conflicting emotions, the best thing you can do is listen. Instead of focusing solely on the act of the abortion, focus on the whole person.

Ask, "Would you tell me about your story?" Be an active listener acknowledging their feelings while also taking opportunities to clarify facts as well as emotions. Validate the stress and conflict they may have struggled with leading up to her abortion with statements like, I am so sorry for all that you experienced during your pregnancy, I want you to know you are not alone, and I care.

Ask perceptive and open-ended questions. It is unhelpful to add your own feelings to theirs or share stories unrelated to abortion of your own. Do not feel the need to answer or respond to everything your friend is sharing. Your friend might have kept their abortion a secret for many years, and isolated their self. Your friend is seeking a way out from the judgment, guilt, shame, and fear they feels. You may validate those realities without needing to increase them. Avoid giving advice. Questions like, Have you shared this with others? How have you coped with this? How has this impacted other areas of your life? What have you read or watched that has impacted how you think about your choice? can help your friend process their experience.

DO:

- Listen and eliminate distractions.
- Affirm feelings.
- Speak truth in gentleness.
- Physically comfort and encourage them.
- Ask good questions.
- Circle back to the Gospel.
- Pray continuously.
- Provide a next step.
- Follow up and follow through.

DON'T:

- Disengage because you are uncomfortable.
- Allow feelings to validate their choice.
- Feel you have to prove why abortion is wrong.
- Remain distant or diagnose their problems.
- Share your own stories and issues.
- Dismiss the power of God's Word.
- Allow lies your friend may believe to linger.
- Assume they will figure it out on their own.
- Avoid further conversations.

Remind them that God's love and mercy is bigger than any sin. Thank them for having the trust to talk with you. Share passages like Matthew 11:28-30 or Isaiah 61:1-3, and provide a next step.

Next Steps

Worth More (after abortion care): watermark.org/worthmore

ReGeneration (for all recovery related issues): watermark.org/regen

Ask, Is there anyone else we can share this with to encourage and comfort you? When would be a good time for me to follow up with you about this? What other resources would be helpful as you begin healing? How should I pray for you?

S6: WHAT THE BIBLE SAYS

INTRODUCTION

The Bible describes itself as *God-breathed* and useful for teaching, correcting, and training in righteousness so the people of God are equipped for every good work (1 Timothy 3:16). While the Bible is written for our benefit, we are also not the original audience nor do we speak the languages or live in the times over the centuries it was written. We should be discerning about what the Bible says and how it was understood throughout history. Fortunately, we can study and see what was understood by those it was originally written to so we are not misled by those who want to redefine what the Bible *really* says today.

SCRIPTURE

For the word of God is alive and active. Sharper than any double-edged sword, it penetrates even to dividing soul and spirit, joints and marrow; it judges the thoughts and attitudes of the heart. **Hebrews 4:12**

RELATED TO WHEN LIFE BEGINS

Then the LORD God formed a man from the dust of the ground and breathed into his nostrils the breath of life, and the man became a living being. **Genesis 2:7**

For the life of a creature is in the blood, and I have given it to you to make atonement for yourselves on the altar; it is the blood that makes atonement for one's life. **Leviticus 17:11**

As you do not know the way the spirit comes to the bones in the womb of a woman with child, so you do not know the work of God who makes everything. **Ecclesiastes 11:5 (ESV)**

PROBLEM PASSAGES

...May this water that brings a curse enter your body so that your abdomen swells or your womb miscarries. **Numbers 5:22 (NIV)**

...and this water that brings a curse shall go into your stomach, to make your belly swell up and your thigh shrivel. **Numbers 5:22 (NASB)**

...Now may this water that brings the curse enter your body and cause your abdomen to swell and your womb to shrivel. **Numbers 5:22 (NLT)**

...May this water that brings the curse pass into your bowels and make your womb swell and your thigh fall away. **Numbers 5:22 (ESV)**

Give them, Lord—what will you give them? Give them wombs that miscarry and breasts that are dry. **Hosea 9:14**

RELATED TO VALUE

Then God said, “Let us make mankind in our image, in our likeness, so that they may rule over the fish in the sea and the birds in the sky, over the livestock and all the wild animals, and over all the creatures that move along the ground.” So God created mankind in his own image, in the image of God he created them; male and female he created them. God blessed them and said to them, “Be fruitful and increase in number; fill the earth and subdue it. Rule over the fish in the sea and the birds in the sky and over every living creature that moves on the ground.” **Genesis 1:26-28**

Children are a heritage from the LORD, offspring a reward from him. Like arrows in the hands of a warrior are children born in one’s youth. Blessed is the man whose quiver is full of them. They will not be put to shame when they contend with their opponents in court. **Psalms 127:3-5**

Jesus said, “Let the little children come to me, and do not hinder them, for the kingdom of heaven belongs to such as these.” **Matthew 19:14**

For you created my inmost being; you knit me together in my mother’s womb. I praise you because I am fearfully and wonderfully made; your works are wonderful, I know that full well. My frame was not hidden from you when I was made in the secret place, when I was woven together in the depths of the earth. Your eyes saw my unformed body; all the days ordained for me were written in your book before one of them came to be. **Psalms 139:13-16**

DID YOU KNOW?

The *Didache*, an early church commentary resource, stated, “do not murder a child by abortion or kill a newborn infant.”

This is among several quotes from early church leaders who explicitly opposed abortion.

BEN & BREPHOS³

Jacob & Esau in Rebekah’s Womb

The babies (*ben*) jostled each other within her... **Genesis 25:22**

³ Other Hebrew (*yeled, na’ar, teknon*) and Greek (*uios, paidi, tekno*) phrases for children may distinguish between boys and girls, sons and daughters, nursing infants, weaned children, or adolescents. We also see these words used for adult men and women at times. Variations can be accounted for as the Hebrew and Greek languages developed or the author changed from one context to another (i.e. Israel, Babylon). However, no distinguished word is used for a preborn child in the womb versus a child outside of the womb even when words and phrases for womb, miscarriage, and infertility were consistent and realities the Hebrews and Greeks had words and language for.

Moses' Birth

...and she became pregnant and gave birth to a son (*ben*).
Exodus 2:2

John the Baptist in Elizabeth's Womb

...the baby (*brephos*) in my womb leaped for joy... **Luke 1:44**

Jesus Lying in a Manger

...they hurried off and found Mary and Joseph, and the baby (*brephos*), who was lying in the manger... **Luke 2:15**

RELATED TO ABORTION

Rescue those being led away to death; hold back those staggering toward slaughter. **Proverbs 24:11**

If people are fighting and hit a pregnant woman and she gives birth prematurely but there is no serious injury, the offender must be fined whatever the woman's husband demands and the court allows. But if there is serious injury, you are to take life for life, eye for eye, tooth for tooth, hand for hand, foot for foot, burn for burn, wound for wound, bruise for bruise. **Exodus 21:22-25⁴**

Who was *Karl Marx*?

A German philosopher who lived in the 1800s and authored *The Communist Manifesto* promoting economic theories and political revolutions to bring about communism and eliminate socioeconomic classes. Marx believed religion functioned to calm feelings of uncertainty regarding suffering and would be unnecessary when communism was achieved.

OTHER PASSAGES TO BE AWARE OF

Leviticus 27, Job 3 & 31:15, Psalm 51:5-6, Jeremiah 1:5

INSIGHT

The Bible is trustworthy, timeless, and relevant to help us discern what is true and live life in the ways God designed and intended.

DEFINING TERMS

her•me•neu•tics (noun): the branch of knowledge that deals with interpretation, especially of the Bible or literary texts

⁴ For more insights related to Exodus 21:22-25, visit *Stand to Reason* and the following link: <https://www.str.org/w/what-exodus-21-22-says-about-abortion>

NOTES

QUESTIONS & DISCUSSION

1. Prior to this session, what did you think the Bible said about abortion? What passage(s) informed your convictions?
2. How does the Bible's teaching on the value of life and children differ from what you learn and hear about life and children outside of the Bible?
3. Could it be helpful to approach prolife apologetics with Scripture to address what we use to value life before referencing the biological facts for when life begins? Why or why not?

HOMEWORK

Read Psalm 119 and count and meditate on the references to God's word, statutes, laws, precepts, commands, and decrees. Consider how you view and interpret the Bible.

Is the Bible's teaching a suggestion for the way you live your life that competes with other ideas and worldviews? Do you follow the Bible for your life except when it comes to certain areas (i.e. finances, sexual habits, dating relationships, entertainment)? Do you know how to interpret the Bible exploring the language, genre, context, audience, etc?

RESOURCES

Bible Project (bibleproject.com)

A crowdfunded project that produces media to help people everywhere experience the Bible as a unified story that leads to Jesus.

***The Case for Life* by Scott Klusendorf**

***30 Days to Understanding the Bible* by Max Anders**

***When Children Became People* by OM Bakke**

***Early Church Leaders Opposing Abortion* (carm.org/abortion/abortion-and-the-early-church/)**

S7: ARGUMENTS & RESPONSES (PART 1)

INTRODUCTION

Classic apologetics involves an accusation and defense, and as we embark into responses to the pro-choice arguments, we want to be charitable and engage in good faith conversations that aren't reduced to personal, or *ad hominem*, attacks. While abortion has incredibly personal consequences and implications, our responses need to address ideas and the practice of those ideas with a desire for the best ideas to win out. But keep in mind, every person you talk to has a story and relationships. So, engage to the best of your ability without losing the opportunity to have the next productive conversation recognizing when an apologetic exchange turns into a pastoral opportunity.

SCRIPTURE

Speak up for those who cannot speak for themselves, for the rights of all who are destitute. Speak up and judge fairly; defend the rights of the poor and needy.

Proverbs 31:8-9

For I am convinced that neither death nor life, neither angels nor demons, neither the present nor the future, nor any powers, neither height nor depth, nor anything else in all creation, will be able to separate us from the love of God that is in Christ Jesus our Lord. **Romans 8:38-39**

Do you not know that your bodies are temples of the Holy Spirit, who is in you, whom you have received from God? You are not your own; you were bought at a price. Therefore honor God with your bodies.

1 Corinthians 6:19-20

INSIGHT

There are reasonable and thoughtful responses to engage in critical conversations that strengthen and win others to the biblical and biological position for equal protection of the preborn.

EQUAL PROTECTION CLAUSE OF THE 14TH

AMENDMENT, SECTION 1

All persons born or naturalized in the United States, and subject to the jurisdiction thereof, are citizens of the United States and of the state wherein they reside. No state shall make or enforce any law which shall abridge the privileges or immunities of

DID YOU KNOW?

- Most women report their reason for getting an abortion as it would interfere with their career or education.
- Right behind that reason is economic hardship.
- Abortion enables abusers to continue sexual abuse.
- Planned Parenthood has a reputation for not reporting suspicious activity regarding alleged

citizens of the United States; nor shall any state deprive any person of life, liberty, or property, without due process of law; nor deny to any person within its jurisdiction the equal protection of the laws.

DEFINING TERMS

person (noun) – a brief list of the basic and more complex attempts to define *personhood*

1. *Oxford Dictionary*: a human being regarded as an individual
2. *Merriam-Webster*: human, individual
3. *Dictionary.com*: a human being as distinguished from an animal or a thing
4. *Dictionary.com (In Philosophy)*: a self-conscious or rational being
5. *Wikipedia*: a being that has certain capacities or attributes such as reason, morality, consciousness or self-consciousness, and being a part of a culturally established form of social relations such as kinship, ownership of property, or legal responsibility
6. *The Mind Project*: any entity that has the moral right of self-determination⁵

personhood: a philosophical and legal debate with implications to citizenship, equality, liberty, rights and protections, privileges and responsibilities; critically the debate relates to slavery, property, and abortion and rests on an individual's nature or capacity.

bodily autonomy: an individual's right to govern what happens inside or outside of their body without external influence or coercion; examples for the need for bodily autonomy include: rape, incest, genital mutilation, circumcision, slavery, trafficking.

bodily integrity: an individual's right to use and control their body as they see fit; examples for the need for bodily integrity include: organ or blood donation, freedom to work, freedom to travel or possess property, torture, etc.

NOTES

⁵ https://mind.ilstu.edu/curriculum/what_is_a_person/what_is_a_person.html



QUESTIONS & DISCUSSION

1. What apologetic framework is most helpful for you?

SLED (Size, Level of Development, Environment, Degree of Dependency or Desirability) by Stephen Schwartz, *The Moral Question on Abortion*

Trot Out the Toddler by Scott Klusendorf, *prolifetraining.com*

AHA (Ask, Agree, Apply, Aha) by Trent Horn

Columbo Tactics by Greg Koukl, *Stand to Reason (str.org)*

- What do you mean when you say...?
- How did you come to that conclusion?
- Have you considered...?

2. Among the three arguments (personhood, bodily autonomy & bodily integrity), which ones have you found the most difficult responding to?
3. How would you differentiate between *human DNA*, *human beings*, and *human persons*? How are the philosophical definitions of a *person* (refer to *Defining Terms* section in this session) helpful or unhelpful?
4. What do you believe is the central question of the abortion conversation? Is it “*What are the preborn?*” or something else?
5. What are the most compelling questions you could ask of someone who is pro-choice requiring them to defend their position? What could you ask someone who says they are pro-life to help them refine their convictions? *If there was always an exception for rape, would you oppose abortion in all other cases?*

THOUGHT EXPERIMENT

The two sonogram images below are 12 week old fetuses.



On your own, consider the following questions.

Can you identify which fetus was conceived through rape or will be born into poverty?

If rape, incest, or any other qualification is an exception for abortion, how do you determine which fetus can be aborted?

HOMEWORK

Engage in an abortion-related conversation with someone in-person or online. You may choose someone going through *ProLife Apologetics* with you, or someone else you know well and tell them you are practicing so they enter with more curiosity and open-mindedness.

Make a note here of who it was and how it went:

RESOURCES

ProLife Answers to ProChoice Arguments by Randy Alcorn

Life Training Institute (prolifetraining.com)

Empowering others with the knowledge and conviction necessary to make a case for life that changes hearts and minds.

Stand to Reason (str.org)

Training Christians to think clearly about their faith.

Reasonable Faith (reasonablefaith.org)

Providing an intelligent, articulate, and uncompromising yet gracious Christian perspective on the issues concerning the truth of the Christian faith.

Crucial Conversations: Tools for Talking When Stakes are High by Kerry Patterson, Joseph Grenny, Ron McMillan & Al Switzler

S8: ARGUMENTS & RESPONSES (PART 2)

INTRODUCTION

Two great questions to ask when statistics or claims are made that may sound good or believable are: *Is that true? How do you know?* There is a lot of information and research available around issues of unexpected pregnancy and abortion. Even peer-reviewed studies by trusted medical journals are susceptible to confirmation bias.

Remember back to the study we referenced in *Session 2: Gospel Implications* by the *British Journal of Psychiatry* stating 90% of the women participating did not regret their abortion. If you look at the summary of that study, it notes the assessment period stopped at age 30. So, while the study and conclusions are believed to be accurate and unlikely influenced by selection bias, it is limited to the maturity and perspective of women at age 30. Another study⁶ conducted in the early 1990s of 260 women who sought post-abortive counseling found that 92% of women experience some level of “emotional deadening” up to 10 years after the abortion.

The point being, we have to be careful to take statistics as undeniable evidence to support and deny a claim.

At the 10:56 mark of Session 8, we reference that “90% of the preborn diagnosed with Down Syndrome en utero are aborted.” This quote is generally true but only for mothers who confirm the diagnosis through *amniocentesis* which is not available until 16 weeks gestation. Overall, only 35% of women who learn their child may have Down Syndrome through other diagnostic testing will abort. This was clarified in an article in 2015 by Christianity Today⁷.

While we never intentionally misrepresent statistics to inflate the prolife argument or make a point, we want to be above reproach in our apologetics. Another common statistic shared in the prolife movement is that 90% of women will choose life if they receive a sonogram. This was an anecdotal statement made in the 90s that was then repeated often, but eventually debunked in 2013 by Politifact⁸. The percentage is closer to 10% of women will choose life when they see a sonogram.

DID YOU KNOW?

Margaret Sanger, the founder of *Planned Parenthood*, opposed abortion. She had a stark disagreement about abortion with the man who wrote her biography, Larry Lader. Lader would go on to help begin the National Abortion Rights Action League (NARAL).

Despite her promotion of forced sterilization and eugenics, Margaret said, abortion was a *horror* on par with infanticide and child abandonment.

Quote from *Woman and the New Race* by Sanger.

⁶ <https://afterabortion.org/a-detailed-survey-of-post-abortion-psychological-reactions/>

⁷ <https://www.christianitytoday.com/amyjuliabecker/2015/april/true-or-false-90-of-babies-with-down-syndrome-are-aborted.html>

⁸ <https://www.politifact.com/factchecks/2013/jul/12/rachel-campos-duffy/more-90-women-change-their-minds-about-having-abor/>

While this is still a significant number, it is certainly not the vast majority it is usually promoted to be.

SCRIPTURE

Have nothing to do with the fruitless deeds of darkness, but rather expose them. It is shameful even to mention what the disobedient do in secret. But everything exposed by the light becomes visible and everything that is illuminated becomes a light. **Ephesians 5:11-13**

You shall not murder. **Exodus 20:13**

INSIGHT

There are reasonable and thoughtful responses to engage in critical conversations that strengthen and win others to the biblical and biological position for equal protection of the preborn.

“Abortion is the ultimate exploitation of women.” – Alice Paul

DEFINING TERMS

ectopic pregnancy: a pregnancy in which the fetus develops outside the uterus, typically in a fallopian tube. Approximately 200,000 cases in the US annually.

equality (noun): the state of being equal, especially in status, rights, and opportunities.

eugenics (noun): a philosophy started by Sir Francis Galton, cousin to Charles Darwin, in the 1800s applying evolutionary theory to humans and promoting “good genes” while working to eliminate less desired traits through birth control, forced sterilization, and eventually, abortion.

DEATHS FROM ABORTION

YEAR	ILLEGAL ABORTION DEATHS	LEGAL ABORTION DEATHS	SOURCE
1930	2,700	Abortion not legal	Guttmacher Institute
1940	1,700	Abortion not legal	Guttmacher Institute
1957	260	Abortion not legal	Planned Parenthood Medical Director
1964	264	Abortion not legal	Dept. Health Education & Welfare
1965	193	Abortion not legal	Planned Parenthood
1966	189	Abortion not legal	National Center for Health Statistics
1972	39	24	United States Center for Disease Control
1973	19	25	United States Center for Disease Control
1976	2	11	United States Center for Disease Control
1979	0	22	United States Center for Disease Control
2008	0	12	United States Center for Disease Control

In 1928, penicillin (antibiotics) was discovered at St. Mary's Hospital in London by Alexander Fleming.

“How many deaths were we talking about when abortion was illegal? In NARAL [the National Abortion Rights Action League], we generally emphasized the frame of the individual case, not the mass statistics, but when we spoke of the latter it was always '5,000 to 10,000 deaths a year.' I confess that I knew the figures were totally false, and I suppose the others did too if they stopped to think of it. But in the 'morality' of our revolution, it was a useful figure, widely accepted, so why go out of our way to correct it with honest statistics? The overriding concern was to get the laws eliminated, and anything within reason that had to be done was permissible.” – Dr. Bernard Nathanson

NOTES

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QUESTIONS & DISCUSSION

1. Among the arguments (hypocrisy, gender equality, wantedness, and personal & public health), which are the most difficult for you to address?
2. Why is it appropriate for pro-life advocates to care about other issues while remaining focused on the abortion issue?
3. What do we communicate about the poor, the disabled, children in foster care, or those in prison when abortion is promoted for reasons related to poverty, suffering, or other quality of life ideas? What does this communicate about God?
4. If men and women are equal but not the same, how can we recognize more dignity in the differences between men and women? What kinds of laws could create more equal opportunity for women?
5. How would you justify aborting an embryo in an ectopic pregnancy? Is it the same as aborting an embryo or fetus in other circumstances? Why or why not?

HOMEWORK

If you haven't already, engage in an abortion-related conversation with someone in-person or online. You may even choose someone you know well and tell them you are working on how to have these conversations so they enter with more curiosity and open-mindedness.

Make a note here of who it was and how it went:

RESOURCES

Subverted: How I Helped the Sexual Revolution Hijack the Women's Movement
by Sue Ellen Browder

Deliver Us From Abortion by Brian Fisher

Abel Speaks (abelspeaks.org)

Supporting families who have chosen to carry a child to term with a life limiting diagnosis.

Hope Story (hopestory.org)

Providing hope to parents who received a Down Syndrome diagnosis.

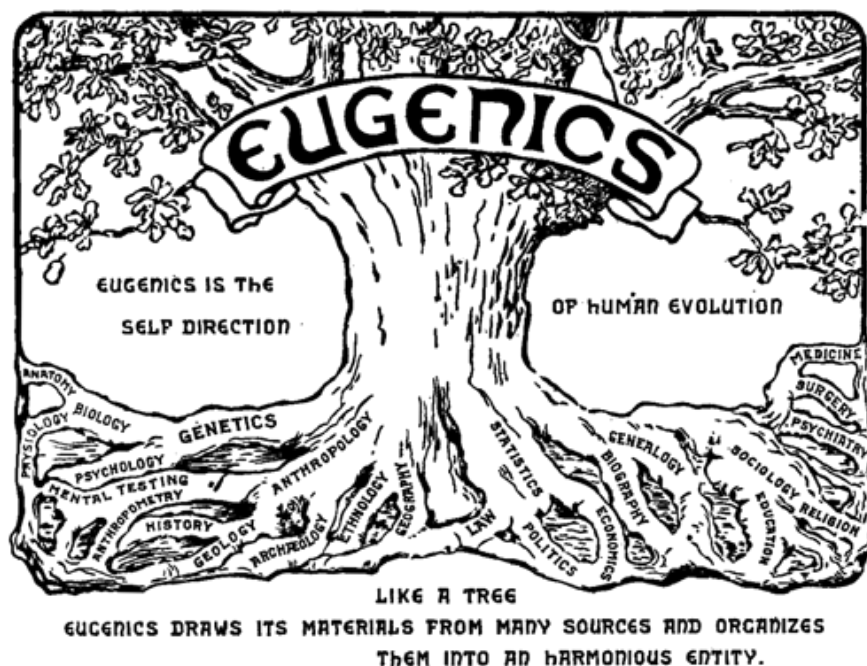
Young Lives (younglives.younglife.org)

Regular gatherings with parenting teenagers and mentors with the support of childcare workers and various community helps.

HISTORY OF EUGENICS

Eugenics (literally “good genes”) is a philosophy popularized in the late 1800s that aims to improve the genetic quality and, therein, behaviors and production of a human population. Historically, the strategy of eugenicists has included altering a population through slavery, contraceptives, forced sterilization, abortion, one-child policies, parent licensing, arranged marriage, socioeconomic or caste systems, systemic racism, infanticide, or genocide.

While eugenics has existed since ancient Greece as Plato suggested principles of selective breeding around 400 BC, it was popularized in England in the late 1800s as the theory of evolution increased interest in the sciences. Philosophers, sociologists, economists, and theologians responded mostly in support of exploring the implications of evolution.



As evolution became the lens science was viewed through, the Birth Control Movement leapt forward alongside the Woman’s Suffrage Movement as the Civil War in the United States transitioned into the Jim Crow era. Birth control and forced sterilization, then, became as associated with sexual freedom to prevent pregnancy for those with “good genes” as it did population control to prevent a welfare state for those with “bad genes.”

Eugenics literature and organizations grew rapidly in the early 1900s with the International Eugenics Conferences in 1912 in London and 1921 and 1932 in New York City. Notable opponents to eugenics included GK Chesterton who authored *Eugenics and Other Evils* in 1917 as well as the Catholic Church. However, Winston Churchill, John D. Rockefeller, Andrew Carnegie, and more men and women of some reputation and means supported, financed, and promoted eugenics in hopes to prevent “racial deterioration” and reduce crime and poverty believing some races lacked the capacity to thrive and could only ever be a burden on society. Forced sterilization laws were upheld by the US Supreme Court in 1927 (the last remaining was not repealed until 1981 in Oregon), and segregation laws were promoted in part to prevent interracial relationships.

Following World War II and the Holocaust (1940s), eugenics as a term and organizations like the *American Eugenics Society* decreased in popularity when Nazis began defending

themselves with the similarities between the US and German eugenics programs. So eugenicists began reframing their language to promote birth control and abortion to women almost exclusively whereas feminists continued to struggle with the lack of male responsibility.

Abortion advocates existed in the late 1800s and early 1900s. Alice Paul who helped author the 19th Amendment giving women the right to vote in 1920 was solicited to include the right to abortion as well. But, abortion in the US gained more support during the Civil Rights Movement which coincided with the Sexual Revolution of the 1960s and 70s. Speculation isn't unreasonable to connect the rise of birth control and abortion access to the increased freedoms of black Americans and President Johnson's "War on Poverty".

In 1960, the birth control pill was invented by Gregory Pincus under the direction and promotion of Margaret Sanger, founder of Planned Parenthood. Trials were done in Puerto Rico where the female population was given ten times the dose required to prevent ovulation. Previously trials in Massachusetts ended abruptly due to the side effects to the mental health of participating women.

In the mid-1960s, Sanger passed away, and Alan Guttmacher, former Vice President of the American Eugenics Society, became the next president of Planned Parenthood. Larry Lader and Dr. Bernard Nathanson helped found the National Abortion Rights Action League and gained the support of the National Organization for Women by convincing their leadership to add abortion rights to their legislative agenda in the mid-1960s as well. Lader was quoted calling eugenic protection acts "humanitarian". When Roe v. Wade was decided by the US Supreme Court in 1973, Planned Parenthood opened a majority of its abortion clinics in minority communities.

In New York, more black children are aborted than born every year. Abortion clients are disproportionately black with almost twice as many black women having abortions (29%) related to the general population (12%). Ideas and practices of population control persist still today through abortion, genetic testing of embryos, in vitro fertilization, "designer babies", and racial and ethnic conflicts around the world. The American Eugenics Society has rebranded under the Society for Biodemography and Social Biology. While this rebranded society, Planned Parenthood, and other population control related organizations have distanced from their eugenics origins, governments funding abortion and tying birth control to foreign aid in African, Latin American, and South American countries is a routine practice.

S9: THE REALITY OF ABORTION

INTRODUCTION

This session contains descriptions of abortion procedures. We have attempted to just share the facts of how each procedure is performed without explaining every graphic detail although some realities are unavoidable. We encourage everyone to visit abortionprocedures.com to let the reality of abortion settle in your mind despite how undesirable it may be regardless of where you stand on abortion.

SCRIPTURE

Sanctify them by the truth; your word is truth. **John 17:17**

INSIGHT

Know what the reality of abortion is and the violence it commits against the preborn in order to dispel those who would promote abortion as gentle, caring, or just.

“Legal abortion is legal murder.” – Fannie Lou Hamer

DEFINING TERMS

abortion (noun): intentionally ending the life of a preborn human being through a chemical or surgical procedure

medical (or chemical) abortion: invented in 1980 utilizing two pills for abortions and miscarriages up to 11 weeks gestation

mifepristone (also known as *RU-486*): first pill in medical abortion regimen cuts off nutrients and hormones to the embryo or fetus

misoprostol: second pill in medical abortion taken up to 48 hours after the first pill, it causes contractions to expel the embryo or fetus from the uterus

aspiration (or suction) abortion: invented in 1958 in China, utilizes a tube placed in the uterus attached to a vacuum or manual pump to suction the embryo or fetus and other contents related to pregnancy from the uterus up to 13 weeks gestation

dilation & evacuation (d&e) abortion: a surgical abortion done during the second trimester by dilating the cervix and pulling apart the fetus with forceps then piecing the fetus back together to ensure the uterus is empty (*may also be called a dilation & curettage if not using suction*)

induction abortion: a surgical abortion done in the third trimester by injecting the fetus in the head or chest with a lethal dose of digoxin (a medicine used to treat irregular heartbeats) followed by dilating the uterus and using forceps to pull the fetus apart and remove it from the womb

abortionifacient (noun): a drug or chemical preparation that induces abortion

OTHER ABORTION PROCEDURES (not addressed in this session)

instillation (or saline) abortion: developed in 1934 but now accounting for a fraction of abortion procedures worldwide due to complications and lower success rates, for abortions between 16 and 24 weeks gestation—performed by dilating the cervix then injecting a chemical solution through the abdomen wall into the amniotic sac where the fetus dehydrates, the skin and organs are burned, and the uterus is stimulated to contract and deliver the fetus

- Gianna Jessen and Melissa Ohden⁹ are two well-known survivors of saline abortions during the 1970s.

partial-birth abortion: outlawed in 2003, a surgical abortion where either the fetal head is delivered, or fetal trunk if breech, and forceps or scissors are used to cut the spinal cord at the back of the neck before extracting the remainder of the fetus, *also known as a dilation & extraction*

- Convicted Dr. Kermit Gosnell was found to use partial-birth abortion procedures as late as 2013 in his abortion clinic in Philadelphia. See the *Resources* section of this session for more information about his case.

NOTES

⁹ Visit giannajessen.com or melissaohden.com to learn more about their stories.

DID YOU KNOW?

The earliest accounts of abortion were first recorded on papyrus in Egypt in 1550 BC involving non-surgical methods.

Tribal groups in North America ingested cocktails with roots and herbs to induce abortion as early as the 1600s.

In the British colonies, abortion was legal if performed before a mother felt her child move, also known as *quickenning*.

QUESTIONS & DISCUSSION

1. What is your initial reaction to the descriptions of the abortion procedures? Do you feel that way about all medical procedures or is there something specific about abortion that sets it apart?
2. What problems could be perpetuated by increasing access to abortion or keeping it legal? Does abortion solve or reduce issues like poverty?
3. Because abortion is not just a procedure but has an incredibly personal impact, imagine someone in your family making an abortion decision if it is not already part of your story.
 - a. Would you offer or agree to take them to get an abortion? Would you help pay for the abortion?
 - b. How would you process the conflict between compassion for a parent, sibling, or your adult child who had an abortion and the life of your sibling, grandchild, niece, or nephew?
 - c. When and how would you tell your spouse and child(ren) about the decision? How might they process the idea that a cousin or family member was not present at family gatherings or holidays?
 - d. Now, imagine you are the one who made the decision to abort. How might shame keep you from your family? What would you need to heal? How would you seek forgiveness with your family knowing you could be rejected?

HOMework

Go to abortionprocedures.com and watch the animated videos of each procedure.

Prepare your heart to grieve the reality of abortion. If you feel a sense of despair before or after, communicate with someone who will help you process the reality of abortion.

Call the Pregnancy Resource Center closest to your home, church, or school campus, and ask if they provide *Abortion Pill Reversal*. Learn more at abortionpillreversal.com.

RESOURCES

AbortionProcedures.com by LiveAction

A series of animated videos with Dr. Anthony Levitano, a former abortionist, describing each procedure.

Abortion Pill Reversal (abortionpillreversal.com)

A hormone therapy treatment given to women who have taken the first abortion pill (mifepristone) which cuts off nutrients to the uterus in order to restore the delivery of those nutrients before the embryo or fetus dies or the second pill (misoprostol) is taken. Increasingly more *pregnancy resource centers* help women who change their mind about aborting their child.

The Silent Scream by Dr. Bernard N. Nathanson

Dr. Nathanson was an abortionist and founding member of the National Abortion Rights Action League (NARAL), and he created this documentary in 1984 to reveal the reality of abortion after converting to Catholicism. The video includes graphic images of aborted fetuses.

Unplanned (unplannedfilm.com)

The story of Abby Johnson, an abortion client who began working for Planned Parenthood in College Station, TX and became a pro-life advocate.

Gosnell (gosnellmovie.com)

The story of Dr. Kermit Gosnell, whose trial for dangerous and unethical abortion practice led to his conviction on murder and manslaughter charges resulting in a life sentence.

DID YOU KNOW?

Harvesting fetal tissue is an aspect of the abortion and medical industries. Certain fetal organs at a varying stages of development receive specific dollar amounts from medical research institutions. The purpose is to identify new medicines, vaccines, or other breakthroughs to advance medical practice through research.

However, harvesting fetal tissue has two major ethical problems.

First, the issue of abortion as a whole. *Can Christians or any civilized society promote justice while benefitting from abortion whether it's an unintended implication or not?*

Second, the ethics of an abortion procedure. *If abortionists prioritize the type of procedure to harvest the preferred fetal organs rather than the health of the woman, is there a moral conflict?*

ProLife Profile: Michael Delgado

REFLECTION

Do you think men process abortion differently from women? If yes, how? If no, what is similar?

How do birth control and abortion contribute to men being irresponsible when it comes to sex and passive when pregnancy occurs?



Is abortion only a women's issue? Should fathers have a right to protect their preborn child?

What should a father's responsibilities be during pregnancy and after birth?

S10: POLITICS OF LIFE

Featuring Chelsey Youman

National Legislative Advisor, Human Coalition Action, hucoaction.org

INTRODUCTION

We are about to combine three of most emotionally driven talking points that exist in our culture: *politics, religion, and abortion*. This is your reminder to be patient with one another and think of others before you think of yourself. Share your thoughts and experiences, and be brief so others can share as well.

Christians are often encouraged to remain neutral or be apolitical due to our faith and trust in Jesus as King and our citizenship to his kingdom (Philippians 3:20). At the same time, Christians can be prone to inflate their political affiliations to distort their faith either with conservative or liberal views. Yet, the Bible does not exempt God's people from engaging politically but encourages us to seek the peace and prosperity of the places we live (Jeremiah 29:7) and pursue justice, uphold mercy, and walk humbly (Micah 6:8).

Rather than being swayed by accusations that Christians are imposing our religion on others, and we should deprioritize our faith in public, we need discernment to be biblically-informed as we engage our governments at the local, state, federal, and international levels.

SCRIPTURE

For the one in authority is God's servant for your good. But if you do wrong, be afraid, for rulers do not bear the sword for no reason. They are God's servants, agents of wrath to bring punishment on the wrongdoer. **Romans 13:4**

INSIGHT

Christians are not politically neutral or inactive and can rightfully prioritize equal protection for the preborn while insisting the government enact and uphold righteous laws.

DEFINING TERMS

quick•en•ing (verb): reach a stage in pregnancy when movements of the fetus can be felt by the mother

DID YOU KNOW?

The Supreme Court's decision in *Roe v. Wade* cited Larry Lader's book, *Abortion* (1966), eight times. Lader was a founding member of NARAL, author of Margaret Sanger's biography, and influential in convincing the *National Women's Organization* to add abortion rights to their political platform in the mid-1960s.

Lader also wrote: *Breeding Ourselves to Death* (1971), *Politics, Power & the Church* (1987), and *RU 486: The Pill that Could End the Abortion War & Why Women Don't Have It* (1991).

stare decisis (noun): the legal principle of determining points in litigation according to precedent

amicus brief (noun): an individual or organization who is not a party to a legal case, but who is permitted to assist a court by offering information, expertise, or insight that has a bearing on the issues in the case. The decision on whether to consider an amicus brief lies within the discretion of the court. Also known as *amicus curiae*

Roe v. Wade (1973): a case from Dallas County, Texas that rose to the Supreme Court and granted women across the United States the right to an abortion up to birth through judicial activism which read a “right to privacy” in the *Due Process* clause of the 14th Amendment.

Doe v. Bolton (1973): a case from Georgia lesser known but heard at the same time as *Roe v. Wade* before the Supreme Court with similar implications to abortion across the United States.

Planned Parenthood v. Casey (1992): a case from Pennsylvania decided by the Supreme Court that upheld the “essential holding” of *Roe v. Wade* for a woman’s right to an abortion but gave states the ability to restrict abortion up to a point of viability (20-24 weeks) as long as there was not an *undue burden*.

viability (noun): the ability of a human fetus to survive outside the uterus. Medical viability is generally considered to be between 23 and 24 weeks gestational age. Viability depends upon factors such as birth weight, gestational age, and the availability of advanced medical care

Dobbs v. Jackson (2022): a case from Mississippi concerning a state ban against abortions after 15 weeks of pregnancy due to the ability of the fetus to feel pain where the Supreme Court struck down *Roe v. Wade* and *Planned Parenthood v. Casey* re-establishing the opportunity for states to ban abortion. *Dobbs* did not abolish abortion or establish a right to life for the preborn.

Heartbeat Bill: a bill seeking to reduce the point a state can protect preborn life from the point of viability (20-24 weeks gestation) to the point a heartbeat can be detected (usually around 6 weeks gestation). Prior to Texas’ Heartbeat Bill which went into effect in September 2021, nearly ten other states passed heartbeat bills which were rejected by lower federal courts and not ruled on by the US Supreme Court. Texas’ bill was considered ‘novel’ due to the civil penalty it created allowing private citizens to hold abortionists liable without any criminal penalty.

pain capability: the ability for a fetus to feel pain in utero; a study¹⁰ published in March 2017 revealed “adult-like” patterns of nerves established before the end of the first trimester (12 weeks post-fertilization).

NOTES

¹⁰ [https://www.cell.com/cell/fulltext/S0092-8674\(17\)30287-8](https://www.cell.com/cell/fulltext/S0092-8674(17)30287-8)

QUESTIONS & DISCUSSION

1. Do you have difficulty discerning how your faith influences politics? What have you heard people say regarding the influence of faith on politics?
2. What do you believe the government's role should be when it comes to protecting life?
3. How do you weigh abortion among the other issues you care about when voting?
4. Why do you think the Supreme Court did not abolish abortion in the *Dobbs v. Jackson* decision or recognize equal protection for the preborn or their right to life?
 - a. What are the implications for when women travel across statelines to obtain an abortion?
 - b. How might this effect states with abortion bans where cities within the state refuse to enforce the law?

HOMEWORK

Use Ballotpedia.org or visit your State government's website to look up who represents you at every level of government based on your address. Call or email each office to ask how you can pray for them or what they may be working on to support women with unexpected pregnancies, address fatherlessness, or care for vulnerable children and families in your state.

RESOURCES

Human Coalition Action (hucoaction.org)

Providing policy expertise and generating momentum from grassroots to government to solidify victory over abortion.

Free the States (freethestates.org)

Promoting the immediate abolition of abortion and shifting the prolife movement from incremental regulations that compromise equal protection for the preborn.

Students for Life Action (studentsforlifeaction.org)

Training and mobilizing this generation of pro-life leaders to impact policy and influence key elections in order to restrict & abolish abortion in America.

LiveAction (liveaction.org)

Reporting on stories and events the media often refuses to cover to inspire readers to defend the most vulnerable in their communities.

Susan B. Anthony ProLife America (sbaprolife.org)

Fighting for the election of women and men who will fight for life and laws that safeguard the innocent while developing research to demonstrate the good that flows from society when the vulnerable are protected.

S11: WITNESS OF THE CHURCH

INTRODUCTION

If Jesus says he came to “heal the sick” (Matthew 9:12-13), let’s consider the Church’s historic response and ongoing opportunity to live out the mission of Christ (Matthew 28:18-20). While no church is perfect and Christians are by definition people maturing to be more like Jesus, the Bible is filled with evidence that we have always needed the Holy Spirit to graciously correct, rebuke, and encourage us to pursue righteousness and repent from unfaithfulness.

As we address ways to grow in faith, we should be cautious in how we hold one another accountable not to let complaining or cynicism define our conversations. Additionally, we can avoid unproductive statements like, “no church is perfect” so we might be solution-oriented. Jesus never excuses unfaithfulness, nor does he promote legalism. Recognize past failures as well as present opportunities.

SCRIPTURE

Equip his people for the works of service, so that the body of Christ may be built up...
Ephesians 4:12

On hearing this, Jesus said, ‘It is not the healthy who need a doctor, but the sick. But go and learn what this means: I desire mercy, not sacrifice. For I have not come to call the righteous, but sinners. **Matthew 9:12-13**

Come to me, all you who are weary and burdened, and I will give you rest. Take my yoke upon you and learn from me, for I am gentle and humble in heart, and you will find rest for your souls. For my yoke is easy and my burden is light. **Matthew 11:28-30**

INSIGHT

The Church can restore its reputation for caring for the vulnerable through courageous, thoughtful, and proactive initiatives centered on the Gospel.

“With such ambiguity even among conservative evangelicals, it is not difficult to see why American culture evolved to the point of accepting Roe v. Wade without a sense of overwhelming outrage.” – Russell D. Moore

DEFINING TERMS

ab•o•li•tion (noun): the action or an act of abolishing a system, practice, or institution

reg•u•la•tion (noun): control or supervise a company, business, or activity by means of reduction or limitation through rules, fines, sanctions, or legislation

NOTES

QUESTIONS & DISCUSSION

1. What is the role of the Church in addressing sex, injustice, and abortion? To what degree and how often should a church disciple its members and engage its community in these areas?
2. Do you believe there is a “golden age” of the Church Christians need to return to regarding morals, politics, or theology? Why or why not?
3. Discuss how Christians can better disciple and equip individuals to respond in the following ways. *What is one resource or change needed in order to...*
 - a. ... practice care and correction for members of the church having premarital sex?
 - b. ... care for women and men with unexpected pregnancies?
 - c. ... care for vulnerable families and support extended family members to intervene?
 - d. ... care for people hurting from past abortions?
 - e. ... equip Christians to engage in conversations about abortion?
 - f. ... care for people healing from miscarriage and infertility?
 - g. ... reach vulnerable women in cities outside the United States?

DID YOU KNOW?

17% of abortion patients identified as mainline Protestant;

13% as evangelical Protestant;

24% as Catholic;

38% reported no religious affiliation; and

8% reported some other affiliation.

Statistics provided by Guttmacher Institute

HOMEWORK

From the resources or changes you explored above, determine which one you have the time and ability to impact. *Do you need to decommit yourself from something or make a sacrifice of your time or resources in order to make this change possible? Is there someone you could invite to join you in making this happen? Does a resource already exist that you can use? Is there another church or organization in your community you can partner with?*

Identify who is on your School District's School Health Advisory Council (SHAC). *SHACs address all kinds of health-related needs and issues in school districts and are primarily comprised of parents who volunteer. Some key issues are sexual education, drug awareness programs, and mental health services. Every SHAC should have a Christian parent on it, encouraging health services in schools to be influenced by the truth of Scripture.*

RESOURCES

The Life Initiative (watermark.org/tli)

Equipping churches and caring for women and men with unexpected pregnancies and past abortions.

Students for Life (studentsforlife.org)

Empowering students to lead groups on their high school and college campuses to equip and engage their peers and abolish abortion.

If you are a student, find the prolife organization on your campus. If you don't find a group, consider starting one and utilizing ProLife Apologetics to begin equipping and challenging one another.

Love Life (lovelife.org)

Uniting and mobilizing the Church to create a culture of love and life.

End Abortion Now (endabortionnow.org)

A global movement of local Christian churches committed to ending abortion with the Gospel of Jesus Christ.

Christian Alliance for Orphans (cafo.org)

A worldwide network of Christian organizations, churches, and individuals impacting foster care, adoption, and global orphan care.

Compassion Survival (compassion.com/survival)

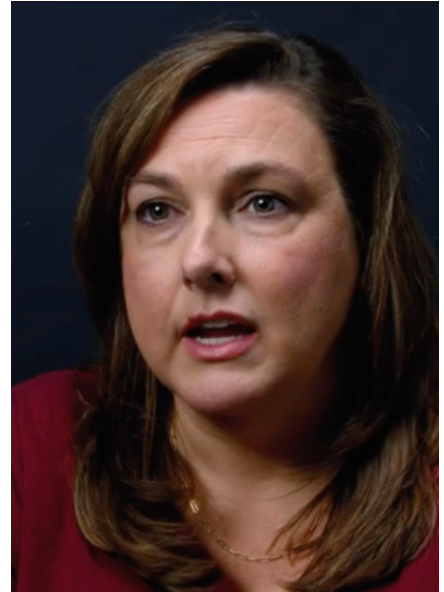
An international sponsorship initiative organized by *Compassion International* to support impoverished women caring for newborns.

ProLife Profile: Meredith Hall

REFLECTION

What fears and uncertainties cause you to hesitate as you consider serving?

What comforts and resources have you enjoyed that God may want you to use to serve those in need?



How does your education, profession, interests, or location give you an opportunity to advocate for vulnerable women and men and the preborn?

S12: A WORLD WITHOUT ABORTION

INTRODUCTION

As you have likely prayed about the issue of abortion and the women, men, preborn children, legislators, and leaders involved, in your prayers, have you believed and started moving towards a day when abortion is abolished? Or, have you prayed more like you were making a wish that seemed impossible?

As we conclude *ProLife Apologetics*, we want to touch on a handful of additional opportunities to help Christians utilize their gifts and interests to create a world without abortion.

SCRIPTURE

He has shown you O mortal, what is good. And what does the Lord require of you? To act justly and to love mercy and to walk humbly with your God. **Micah 6:8**

The Lord is not slow in keeping his promise, as some understand slowness. Instead he is patient with you, not wanting anyone to perish, but everyone to come to repentance.
2 Peter 3:9

INSIGHT

The people and places where you already learn, work, worship, and live can benefit from your consideration and leadership as you engage in solutions related to abortion.

NOTES



QUESTIONS & DISCUSSION

1. Understanding the birth control and abortion movements were born out of the complexities of eugenics, inequality barriers for women, silence from evangelicals, the sexual revolution, and pornography, is it too simplistic to insist upon the abolition of abortion? Why or why not?
2. Have you historically avoided conversations regarding abortion? Why or why not? Has *ProLife Apologetics* changed how you will engage in the future?
3. What area of *ProLife Apologetics* do you feel most confident? What areas do you want to learn more?
4. We often think of prolife initiatives as siloed efforts focusing on sex, birth control, unexpected pregnancy, and abortion. What other areas of life and ministry are impacted (finances, marriage, education, etc.)? How might you bring the biblical and biological truth to influence these other areas?

FINAL REFLECTION

Check the following statements you agree with:

- ☐ I consider myself pro-life.
- ☐ I consider myself pro-choice.
- ☐ All human life begins at the point of fertilization.
- ☐ Abortion is permissible in rare exceptions like rape and incest.
- ☐ Abortion is justified because it involves a woman's body and choice.
- ☐ The government should not be involved in abortion, only a woman and her doctor.
- ☐ I would not personally choose abortion, but I won't tell others what to do with their lives.
- ☐ Pro-choice people really just want to kill unwanted babies.
- ☐ Pro-life people don't care about children after they are born.
- ☐ All Democrats want to keep or expand abortion.
- ☐ All Republicans want to abolish abortion.
- ☐ A Christian can be pro-choice.
- ☐ A Christian can be pro-life.
- ☐ Abortion should be legal until a child is born.
- ☐ Abortion should be legal only until a child can survive outside the womb.
- ☐ Abortion should be legal if the pregnancy endangers the mother's life.
- ☐ Abortion should never be legal.
- ☐ Women need abortion to get out of poverty or abusive relationships.
- ☐ Without abortion, more men would exploit, traffic, or use women.
- ☐ Free birth control would reduce the need for abortion.
- ☐ The Church should just teach the Bible and leave abortion and birth control to medical and legal professionals.
- ☐ I feel confident about my views related to abortion and equipped to serve women and men considering or those who have had abortions.

5. Compare your answers with the ones you checked in Session 1. What changed? What is the same?

HOMEWORK

Set a reminder or an alarm on your phone to *Pray at 1:39 (Psalm 139)* each day. Ask God to end abortion in our land and in our lifetime.

RESOURCES

Secular ProLife (secularprolife.org)

A prolife organization focusing on efforts and arguments promoting life and opposing abortion from a non-religious worldview.

*Thank you for participating in **ProLife Apologetics**.
You can re-watch each video on YouTube for refreshers
and engage with those participating online.
For more information or questions, email thelifeinitiative@watermark.org.*

GLOSSARY

Glossary of terms and ideas in alphabetical order.

ab•ol•i•tion (noun): the action or an act of abolishing a system, practice, or institution

a•bor•ti•fa•cient (noun): a drug or chemical preparation that induces abortion

a•bor•tion (noun): intentionally ending the life of a preborn human being through a chemical or surgical procedure

a•mi•cus brief (noun): an individual or organization who is not a party to a legal case, but who is permitted to assist a court by offering information, expertise, or insight that has a bearing on the issues in the case. The decision on whether to consider an amicus brief lies within the discretion of the court. Also known as *amicus curiae*

aspiration (or suction) abortion: invented in 1958 in China, utilizes a tube placed in the uterus attached to a vacuum or manual pump to suction the embryo or fetus and other contents related to pregnancy from the uterus up to 13 weeks gestation

blast•o•cyst (noun): an animal embryo at the early stage of development when it is a hollow ball of cells

bodily autonomy: an individual's right to govern what happens inside or outside of their body without external influence or coercion; examples for the need for bodily autonomy include: rape, incest, genital mutilation, circumcision, slavery, trafficking.

bodily integrity: an individual's right to use and control their body as they see fit; examples for the need for bodily integrity include: organ or blood donation, freedom to work, freedom to travel or possess property, torture, etc.

Car•ne•gie Sta•ges (noun): a system created in 1942 by embryologists to describe the apparent maturity of embryos; an embryo is assigned a Carnegie stage (numbered from 1 to 23) based on its external features independent of the chronological age nor the size of the embryo

con•cep•tion (noun): the action of conceiving a child or of a child being conceived

dilation & evacuation (d&e) abortion: a surgical abortion done during the second trimester by dilating the cervix and pulling apart the fetus with forceps then piecing the fetus back together to ensure the uterus is empty (*may also be called a dilation & curettage if not using suction*)

Dobbs v. Jackson (2022): a case from Mississippi concerning a state ban against abortions after 15 weeks of pregnancy due to the ability of the fetus to feel pain where the Supreme Court struck down *Roe v. Wade* and *Planned Parenthood v. Casey* re-establishing the opportunity for states to ban abortion. *Dobbs* did not abolish abortion or establish a right to life for the preborn.

Doe v. Bolton (1973): a case from Georgia lesser known but heard at the same time as *Roe v. Wade* before the Supreme Court with similar implications to abortion across the United States.

ec•top•ic preg•nan•cy (noun): a pregnancy in which the fetus develops outside the uterus, typically in a fallopian tube. Approximately 200,000 cases in the US annually.

em•bry•o (noun): an initial stage of development of a multicellular organism; in organisms that reproduce sexually, embryonic development is the part of the life cycle that begins just after fertilization of the female egg cell by the male sperm cell

em•bry•ol•o•gy (noun): the branch of biology and medicine concerned with the study of embryos and their development

e•qual•i•ty (noun): the state of being equal, especially in status, rights, and opportunities.

eu•gen•ics (noun): the study and practice of how to arrange reproduction within a human population to increase the occurrence of heritable characteristics regarded as desirable. Developed largely by Sir Francis Galton as a method of improving the human race, eugenics was increasingly discredited as unscientific and racially biased during the 20th century, especially after the adoption of its doctrines by the Nazis in order to justify their treatment of Jews, disabled people, and other minority groups.

Family Medical Leave Act of 1993 (FMLA): provides certain employees with up to 12 weeks of unpaid, job-protected leave per year. It also requires that their group health benefits be maintained during the leave. FMLA applies to all public agencies, all public and private elementary and secondary schools, and companies with 50 or more employees. These employers must provide an eligible employee with up to 12 weeks of unpaid leave each year for any of the following reasons:

- For the birth and care of the newborn child of an employee;
- For placement with the employee of a child for adoption or foster care;
- To care for an immediate family member (i.e., spouse, child, or parent) with a serious health condition; or
- To take medical leave when the employee is unable to work because of a serious health condition.

fer•til•i•za•tion (noun): the fusion of sperm and egg creating a new human being with unique DNA often believed to be equivalent to 'conception'

fe•to•sco•py (noun): a technique that utilizes a small camera or scope to examine and perform procedures on the fetus during pregnancy

fe•tus (noun): an offspring of a human or other mammal in the stages of prenatal development that follow the embryo stage (in humans taken as beginning eight weeks after conception)

gy•ne•col•o•gy (noun): the branch of physiology and medicine which deals with the functions and diseases specific to women and girls, especially those affecting the reproductive system

Heartbeat Bill: a bill seeking to reduce the point a state can protect preborn life from the point of viability (20-24 weeks gestation) to the point a heartbeat can be detected (usually around 6 weeks gestation). Prior to Texas' Heartbeat Bill which went into effect in September 2021, nearly ten other states passed heartbeat bills which were rejected by lower federal courts and not ruled on by the US Supreme Court. Texas' bill was considered 'novel' due to the civil penalty it created allowing private citizens to hold abortionists liable without any criminal penalty.

her•me•neu•tics (noun): the branch of knowledge that deals with interpretation, especially of the Bible or literary texts

hu•man (noun): a whole individual person, especially distinguished from other animals representing the human species in capacity or potential

im•plant•a•tion (noun): opposing abortion and euthanasia

induction abortion: a surgical abortion done in the third trimester by injecting the fetus in the head or chest with a lethal dose of digoxin (a medicine used to treat irregular heartbeats) followed by dilating the uterus and using forceps to pull the fetus apart and remove it from the womb

instillation (or saline) abortion: developed in 1934 but now accounting for a fraction of abortion procedures worldwide due to complications and lower success rates, for abortions between 16 and 24 weeks gestation—performed by dilating the cervix then injecting a chemical solution through the abdomen wall into the amniotic sac where the fetus dehydrates, the skin and organs are burned, and the uterus is stimulated to contract and deliver the fetus

- Gianna Jessen and Melissa Ohden¹¹ are two well-known survivors of saline abortions during the 1970s.

¹¹ Visit giannajessen.com or melissaohden.com to learn more about their stories.

in vitro fertilization (noun): a medical procedure whereby an egg is fertilized by sperm in a test tube or elsewhere outside the body. This procedure is followed by *genetic testing* for quality of cellular structures and *cryopreservation*, or freezing the embryo, until a uterus is prepared for implanting the embryos. Not all embryos are implanted and many may be destroyed if it is believed the embryos aren't of sufficient quality to survive or additional embryos remain after a successful pregnancy and delivery.

medical (or chemical) abortion: invented in 1980 utilizing two pills for abortions and miscarriages up to 11 weeks gestation

mifepristone (also known as *RU-486*): first pill in medical abortion regimen cuts off nutrients and hormones to the embryo or fetus

misoprostol: second pill in medical abortion taken up to 48 hours after the first pill, it causes contractions to expel the embryo or fetus from the uterus

obstetrics (noun): the branch of medicine and surgery concerned with childbirth and the care of women giving birth

pain capability: the ability for a fetus to feel pain in utero; a study¹² published in March 2017 revealed "adult-like" patterns of nerves established before the end of the first trimester (12 weeks post-fertilization).

partial-birth abortion: outlawed in 2003, a surgical abortion where either the fetal head is delivered, or fetal trunk if breech, and the forceps or scissors are used to cut the spinal cord at the back of the neck before extracting the remainder of the fetus, *also known as a dilation & extraction*

- Convicted Dr. Kermit Gosnell was found to use partial-birth abortion procedures as late as 2013 in his abortion clinic in Philadelphia. See the *Resources* section of this session for more.

person (noun) – a brief list of the basic and more complex attempts to define *personhood*

1. *Oxford Dictionary*: a human being regarded as an individual
2. *Merriam-Webster*: human, individual
3. *Dictionary.com*: a human being as distinguished from an animal or a thing
4. *Dictionary.com (In Philosophy)*: a self-conscious or rational being
5. *Wikipedia*: a being that has certain capacities or attributes such as reason, morality, consciousness or self-consciousness, and being a part of a culturally established form of social relations such as kinship, ownership of property, or legal responsibility
6. *The Mind Project*: any entity that has the moral right of self-determination

¹² [https://www.cell.com/cell/fulltext/S0092-8674\(17\)30287-8](https://www.cell.com/cell/fulltext/S0092-8674(17)30287-8)

personhood: a philosophical and legal debate with implications to citizenship, equality, liberty, rights and protections, privileges and responsibilities; critically the debate relates to slavery, property, and abortion and rests on an individual's nature or capacity.

Planned Parenthood v. Casey (1992): a case from Pennsylvania decided by the Supreme Court that upheld the “essential holding” of *Roe v. Wade* for a woman's right to an abortion but gave states the ability to restrict abortion up to a point of viability (20-24 weeks) as long as there was not an *undue burden*.

Pregnancy Resource Center (PRC): a non-profit organization providing counseling services to women with unexpected pregnancies. Services typically include: pregnancy testing, STD testing, sonograms, parenting classes, referrals for prenatal care, assistance obtaining Medicaid, provision of diapers and formula, and more. *Also known as: pregnancy centers, crisis pregnancy centers.*

pro•choice (adjective): advocating legalized abortion

pro•life (adjective): opposing abortion and euthanasia

quick•en•ing (verb): reach a stage in pregnancy when movements of the fetus can be felt by the mother

reg•u•la•tion (noun): control or supervise a company, business, or activity by means of reduction or limitation through rules, fines, sanctions, or legislation

Roe v. Wade (1973): a case from Dallas County, Texas that rose to the Supreme Court and granted women across the United States the right to an abortion up to birth through judicial activism which read a “right to privacy” in the *Due Process* clause of the 14th Amendment.

School Health Advisory Council (SHAC): a group appointed by a school district to serve at the district level to ensure local community values are reflected in health education instruction including mental, physical, sexual, and emotional health. *In Texas, a majority of members must be parents and not employed by the district—see your states guidelines for more specifics.*

sta•re de•ci•sis (noun): the legal principle of determining points in litigation according to precedent

Title IX of the Education Amendments of 1972: protects people from discrimination based on sex in education programs or activities that receive federal financial assistance, and states: *No person in the United States shall, on the basis of sex, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any education program or activity receiving Federal financial assistance.*

ul•tra•so•no•gra•phy (noun): a technique using echoes of ultrasound pulses to delineate objects or areas of different density in the body

vi•a•bil•i•ty (noun): the ability of a human fetus to survive outside the uterus. Medical viability is generally considered to be between 23 and 24 weeks gestational age. Viability depends upon factors such as birth weight, gestational age, and the availability of advanced medical care

zinc fluor•esc•ence (noun): *in embryology*, a novel marker and chemical reaction of zinc at the point of fertilization released from the female's egg creating a "spark" (look at the images below or search "zinc fluorescence fertilization" to watch)

zy•gote (noun): a cell containing two complete sets of chromosomes, one from each parent, resulting from the fusion of two cells from the opposite sex; a fertilized egg at Carnegie Stage 1C.