about seeing that little face . . . I know I'm not going to burn in hell anymore. But I'm still kind of concerned about how it all fits together."

A physician assistant from New York said she does ultrasounds to determine gestational age on women with advanced pregnancies.

"When I can identify the four chambers of the heart, I start feeling miserable. And when I put my hands on somebody to feel how big they are and I get kicked, I'm barely able to talk at that minute.

"I want to say to that woman so badly: 'What went on here? Why weren't you here six weeks ago?'"

Beresford said it is quite common for the counselor to identify more with the woman and the nurse to identify with the fetus. "One of the things that those of us who do counseling get that often the doctor or the nursing staff don't get," she said, "is we get the lives of these women. We know what they're dealing with, we know what their issues are, we know how hard it was for them to make the decision, or why they came late.

"We're more easily able to identify with that woman on the table, even when the doctor is pulling out fetal parts of an advanced pregnancy."

Tough questions; tough answers

One of the most vexing problems providers face is their feelings about procedures done for reasons that make them — or others — uncomfortable.

Sometimes it's "sex selection" — the patient wants a boy and is carrying a girl. Sometimes the woman tried unsuccessfully for years to become pregnant, then changed her mind when it finally happened.

One counselor talked about a couple who had been married for 12 years and had "an absolutely wonderful life." When they became pregnant, they were confused. They loved children, but never consciously decided one way or another to have them. They went to the abortion clinic for advice: Would this baby make their lives better or worse? They ultimately chose abortion.

The counselor said the case was one of her most difficult, because usually "there is some factor that's really bending the person's decision." In this case, she said, the couple made a choice with no concrete reason.

"Damn it," responded one discussion leader. "This is where the opposition has had an effect on us. Stop and think: Where did you get this notion that there has to be some very special, particular reason that's better than some other sort of reason? I think you got it from the anti-abortion movement in America. They have so little to hang their hat on, that one of the things they've chosen to hang it on is that there are all these women out there who are having abortions for frivolous reasons.

"People's lives are complicated . . . And those people would have a baby or have an abortion for a multiplicity of reasons, not one that stands out that you put on a bumper sticker." she said.

"The truth of it is, none of us is nonjudgmental," Beresford said. "And . . . different patients push different buttons for different people.

"Even though we say, 'No woman should have to justify her abortion,' 'Any reason is an adequate reason,' in your heart you know that you are more sympathetic at this time in your life to certain reasons than you are to certain others. And it changes for us over time."

One thing that doesn't change over time, however, is the kinds of questions patients ask. Questions that sometimes stump the staff.

Like whether the fetus feels pain during the procedure.

"This is a big concern" for both staff and patients, said a clinic employee from Massachusetts. After all, she said, "it is a dismembered body."

She deals with the issue by comparing it to the saline abortion she had years before, performed because of a fetal anomaly.

"In all of the choice movement, there is a balance between the fetus and the woman," she said. "And between my experience with a saline abortion where I suffered, vs. the option of a D&E where yes, the fetus may suffer, I always choose the woman."

Patients also sometimes ask to view the fetal remains. A Toronto physician said she didn't know "who and whether we [should] protect the patient from the reality of the procedure." She said she regularly hid the ultrasound screen and "whisked away" the "fetal products."

"She's probably not prepared for what she's going to see," she said of the patient.

Beresford said that before that particular workshop, some had asked her what they could say to staff "to make them not look so shocked when they look at a 20-week fetus."

"The answer is: There's isn't any one thing you can say," she said. "And there's nothing that you can say once that will do the trick. This is ongoing business for people who work in abortion. It has to do with doctors. It has to do with nurses. It has to do with counselors and lay personnel.

"It has to do with who carries the instruments out of the room and who bags the fetal remains and who carries the bags to wherever you carry them. It has to do with every single person in a clinic. It has to do with the bookkeeper whose mother wants to know why she doesn't keep books in some nice little business that can be mentioned at the dinner table."

It's hard being in a profession "where you have a hard time answering the question that other people ask you about what you do," she said. "You come to not feel so good about what you're doing even when you thought you were doing something wonderful."

'Everybody is ambivalent'

Sometimes these feelings surface with patients.

A nurse who had worked in an abortion clinic for less than a year said her most troubling moments come not in the procedure room but afterwards. Many times, she said, woman who had just had abortions would lie in the recovery room and cry, "'I've just killed my baby. I've just killed my baby.'"

"I don't know what to say to these women," the nurse told the group. "Part of me thinks, 'Maybe they're right.'"

Such self-doubt is not uncommon in the abortion field, Beresford said.

"People have different feelings at different times. And they get scared. They start to think they're not really pro-choice because they're feeling sort of icky about some of what they're seeing." But such ambivalence is normal, she said.

"Everybody in the world is ambivalent about abortion. Abortion is about life, death and sex. And except for eating, that's everything that matters to us. So it's no wonder we've got issues."

Semantic Manipulation - Dehumanization of the Unborn

The following are examples of pro-abortionists' abuse and misuse of language to cover up the immorality of abortion:

• Phillip Wylie: The unborn child is a "protoplasmic rubbish" and "a gobbet of meat protruding from a human womb."

• A.I. Csapo: The unborn baby is "the fetal-placental unit."

• Joseph Fletcher: Unborn babies are "gametic materials." and "fallopian and uterine cell matter."

• Thomas Szasz: The unborn child is merely "a part of the mother's body."

• Ellen Frankfort: The unborn baby is "unwanted fetal tissue."

• F. Raymond Marks: The preborn baby in his mother's womb is "subhuman, non-personhood."

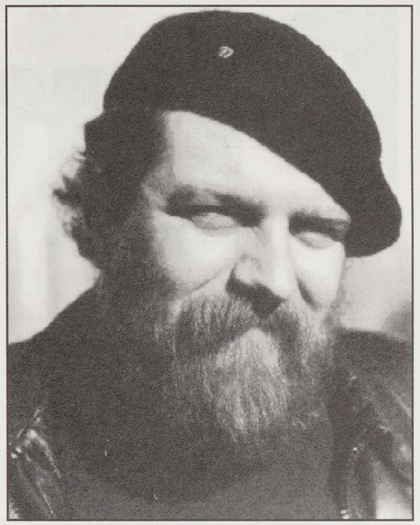
• Peter Stanley: Preborn children are "so much garbage."

• Malcom Potts: the unborn child is "live human material," a "collection of cells," "the conception."

• Sarah Weddington: The human being inside his mother's womb is "the fertilized ovum."

Mouthpieces of God

by Paul deParrie



God uses things.

He uses, sometimes, the oddest things to send His Word. Most often we think of the prophets, in all their dignity and uprightness, bringing Divine messages. But that is not always the way of things.

God, it seems, hates being put in a box. He, for His own reasons, will sometimes speak in the oddest ways. I suspect that this is to keep us on our toes — not getting too accustomed to a particular way or ritual.

He has spoken through a burning bush, King Saul (while he chased David), and even a jackass (which proves he may even use me from time to time).

So it was not entirely implausible to me last week while I was in Wichita to visit Shelley Shannon, that I thought I might have heard the voice of God from a most unlikely source.

If you read the lead stories this month, you know that U.S. Attorney General Janet Reno was in Wichita while I was there. She was there under the auspices of speaking to the growing problem of violence — street gangs, drugs and the like — in Wichita. The solutions proffered, of course, were to implement every word of Bill Clinton's agenda to "strengthen the family."

There *were* some undercurrents that there was also some private discussion of Shelley Shannon and Michael Griffin, but that was not something I could confirm.

Operation Rescue was also on hand in the persons of Keith Tucci, Pat Mahoney, and Bob Jewett, all of whom were there to try to obtain a meeting with Reno about the Freedom of Access to Clinic Entrances bill or the Fugitive Rescuer Act. For months, they tried, to no avail, to get a meeting and had been met with dead silence.

All this stimulated some changes in the one and only public meeting on Reno's itinerary. Instead of opening to questions from the floor, queries would originate with a panel of worshipful politicians. The plan did not entirely work. Nancy Kassebaum, a quisling-Republican Kansas Senator, for no apparent reason opened to the floor and the first question, accompanied by boos and hisses, out of the box was, "Why won't you meet with Operation Rescue leaders?"

From this, Operation Rescue walked away with its trophy — a promise to meet with them back in Washington, D.C.

The two-hour meeting ended as it began — with a standing ovation for the popular, plain-spoken Attorney General.

When the applause died down, Reno said she had one final thing to say to the people of Wichita. It comes from the last few verses of the Old Testament, she explained. Then she said,

"Behold, I will send you Elijah the prophet before the coming of the great and dreadful day of the Lord.

"And he will turn the hearts of the fathers to the children, and the hearts of the children to their fathers, lest I come and strike the earth with a curse."

Let me tell you, I was shocked — shocked that a member of the Clinton Administration would quote Scripture like this (from memory, no less) and that it would include text about the Lord "striking" anything.

But it really didn't sink in for about two hours.

"Caiaphas!" I suddenly realized. "Caiaphas, that wicked high priest who condemned Jesus, had prophesied —unknowingly — simply because he was in a God-ordained office.

Janet Reno is also in such a position — and notably while standing in a church —may have sent a warning to Wichita that the fathers had better turn toward the children or God was going to act.

I couldn't help but think of the diminutive Shelley Shannon sitting at that very time in the Sedgwick County Jail accused of shooting abortionist George Tiller while hundreds — probably thousands — of Wichita fathers had done nothing to stop the slaughter of their own (or other's) children.

How could God possibly turn the hearts of the *children* who are involved in gangs and drugs toward their fathers if the fathers were so callous with the lives of the children. I mean, why had no angry father — boyfriend or husband — ever tried what Shannon had done, or even some lesser assault, on the killer of their own child.

The utterance by Reno says that Elijah will come to attempt to bring this turning of hearts about, but ends with a threat that if the response is not correct, that God Himself will intervene. This intervention will not so much be directed at the abortionist, however, who is just following his demonic way. The "curse" in the verse is aimed at those who will not "turn their hearts" — a frightful prospect in a city where so few men have sought*any* means to protect the children.

Possibly I am wrong about Reno's "prophecy," but I don't want to chance it. If Reno had intended to just link up the language of "turning the hearts" of parents and children in Malachi with her agenda to nationalize the family, I'm sure she would have discarded any useless language of Elijah and "smiting the earth with a curse."

This one, I think, bears watching.