

Michigan Nurses For Life

1637 W. Big Beaver Rd., Suite G • Troy, Michigan 48084

December 2023

Supporting pro-life nurses since 1998

**Michigan Nurses for Life
25 Years**

AMA Retains Policy Against Assisted Suicide

Wesley J. Smith

I am a frequent critic of the medical establishment. But not this time. It didn't make much news, but the American Medical Association had another vote to repeal its existing policy against assisted suicide, and for the fourth time—good on them—the delegates refused to budge. The current policy remains in place, which states in part:

Euthanasia is fundamentally incompatible with the physician's role as healer, would be difficult or impossible to control, and would pose serious societal risks. Euthanasia could readily be extended to incompetent patients and other vulnerable populations.

The involvement of physicians in euthanasia heightens the significance of its ethical prohibition. The physician who performs euthanasia assumes unique responsibility for the act of ending the patient's life. Instead of engaging in euthanasia, physicians must aggressively respond to the needs of patients at the end of life. Physicians:

- (a) Should not abandon a patient once it is determined that a cure is impossible.
- (b) Must respect patient autonomy.
- (c) Must provide good communication and emotional support.
- (d) Must provide appropriate comfort care and adequate pain control.

The AMA also refused to change the descriptive and accurate term "assisted suicide" to the euphemistic "medical aid in dying."

The death agenda can be stopped. Onward.

—National Review, November 13, 2023

Ohio's Issue 1 Vote Marks a Temporary Setback, Not a Surrender

The National Association of Pro-Life Nurses (NAPN) is expressing deep disappointment over the passage of Ohio's extreme, deceptive abortion initiative. Despite the passage of Issue 1, NAPN remains committed to upholding ethics in healthcare practice.

Issue 1 undermines common-sense health and safety protections by lowering the standard of care in Ohio. Its passage will enshrine discriminatory abortion practices into the state's constitution, including for reasons of gender or disability. Further, the ballot initiative will expand abortion into the third trimester, when a preborn child is capable of feeling pain. Issue 1 is radically out of touch with the 7 in 10 Americans who support common-sense abortion limits after 15 weeks. NAPN firmly believes in upholding the principles of compassion, empathy, and respect for all human life, echoing the fundamental principles of the nursing profession.

Executive Director Marie Ashby, on behalf of the NAPN, stated, "While we are deeply concerned by the passage of extreme, anti-life legislation, it does not diminish our resolve to protect human life in all its stages. We must continue to support families facing unexpected pregnancies through pregnancy resource clinics and Federally Qualified Health Centers. NAPN remains steadfast in advancing a higher standard of patient care, which is fundamentally incompatible with abortion."

NAPN will continue to push back against healthcare disinformation, as it paves the path forward for excellence in nursing practice. The National Association of Pro-Life Nurses calls upon policymakers to consider the profound ethical implications of legislation that erodes patient protections. The association stands ready to counter public health threats by educating lawmakers and healthcare providers on policies that seek to undermine patient care.

The National Association of Pro-Life Nurses is a not-for-profit organization uniting nurses who are dedicated to promoting respect for every human life from conception to natural death, and to affirming that the destruction of that life, for whatever reason and by whatever means, does not constitute good nursing practice.

—National Association of Pro-Life Nurses, November 7, 2023

The National Association of Pro-life Nurses is accepting scholarship applications until February 14, 2024. For further details visit: www.nursesforlife.org

Michigan Nurses For Life



Our Purpose:

...To raise the consciousness of the nursing profession to protect all human life from conception until natural death

...To form an educated core of nurses who can speak for their profession by acting as a community resource for life issues

...To promote public education and awareness about life issues on both ends of the spectrum, from abortion to euthanasia

...To uphold and defend human life in all stages and conditions of development

Michigan Nurses For Life

1637 W. Big Beaver Rd., Suite G
Troy, Michigan 48084-3540

Office: 248-816-8489
Email: info@mnfl.org
Web Site: www.mnfl.org

Officers:

Diane Trombley, RN, BSN, President
Mary Anne Barrett, RN, Secretary
Alice Maher, RN, MSN, Treasurer

Board Members:

Martha Jacobs, RN
Leann Roosa, RN, BSN
Phyl Sallee, RN, MS, CPNP
Linda Seng, RN
Susan Stumbo, BSN, MS
Phyllis Sullivan, BSN
Mary Lou Temple, RN, MS, Nursing

Administrative Assistant:

Marilyn Schepansky

Editor and Layout:

Marge Bradley

FROM THE PRESIDENT

Diane Trombley, RN, BSN

Dear Colleagues,

2023 has been a rather difficult year for us in Michigan. Our state is now an abortion destination state with the passage of the Reproductive Health Act. I still don't think that most of those who voted for it, and for Proposal 3, know what they approved. An unborn child has no protection at any stage of life in our state and common-sense safeguards for his mother have also been removed. The entire impact of these measures was never fully explained, their consequences unrecognized.

Also on the horizon, is a renewed push to allow physician-assisted suicide in our state. Admittedly, the issue of suicide is a more difficult concept to discuss, but when we look around and see places that allow assisted suicide, like Canada (MAID—medical aid in dying) and which allow for children as young as 10 to request and receive a suicide option, it is clear that we will have a great deal of work to do.

As always, we try to provide information and assistance to you, the pro-life nurse. To be as effective as possible, we could certainly use input from those of you experiencing the impact of these issues.

We on the board of Michigan Nurses for Life wish each of you a peaceful Christmas and a New Year filled with blessings. Love Life! Diane



*Welcome to our newest board member, Leann Roosa,
Director of Nursing at Spero Pregnancy Center in Port Huron.*



A Christmas Prayer

*God of love and mercy,
in this season of Christmas,
we offer you our thanks and praise.*

*We want to spread the word of peace
you give us through Jesus Christ.*

*May the birth of your son
Overcome human suffering, calm our fears
and bring peace to our homes,
our families and the world.
~ Sacred Heart League ~*

**Wishing you a joyous and blessed Christmas
filled with hope and peace in the New Year!**

MNFL Membership Renewals will be coming in January

Upcoming Events

RTL-LIFESPAN PRO-LIFE CHRISTMAS CARDS AVAILABLE

Call Troy Office 248-816-1546 or Livonia Office 734-422-6230

LIGHTS FOR LIFE TREE

Help illuminate the LIFESPAN tree by remembering those you love
Early December through first week in January
734-524-0162

RIGHT TO LIFE - LIFESPAN 2024 MOVEMENT IN MOTION YOUTH BUS TRIP TO MARCH FOR LIFE, WASHINGTON, DC.

Contact Lynn at 248-816-1546
Registrations closing soon—Bus departs January 18, 2024

Michigan Nurses for Life 25 Years



Mary Lou Temple
Co-Founder MNFL

Mary Lou Temple

Michigan Nurses for Life is celebrating its 25th anniversary this year! In the mid 90s, I began to wonder if there was a pro-life nursing group in Michigan. I called the Educational Center for Life in Troy and found out there had been one, but it dissolved in the 1980s. Another nurse, Jackie Blackwood, wondered the same thing and called the Ed Center, too. Phyllis Sullivan, a nurse who worked there, connected us and we all met in a local restaurant to discuss it further.

Phyllis was very encouraging and Jackie was very passionate, so we set to work to do it! We developed bylaws, talked about our purpose, mission and activities. It was an ideal time to start because nurses were

required to get 25 contact hours every two years, and most nurses, at that time, fulfilled this requirement by attending conferences.

The first conference was held at Madonna University in 1997; we had three speakers, including Richard Thompson, a local attorney. It was the era of Jack Kevorkian and assisted suicide.

Jackie and her husband adopted a nine-month-old baby girl from Russia, Tashia, who had some physical limitations, so she never actually was able to attend our conferences. Jackie and her family moved to South Carolina in 2015 and she passed away three years ago.

Our first board was very committed to the pro-life cause. Diane Trombley has been our president for the past several years. We were in our 50s when we started MNFL; now we're in our 70s and 80s, so we are looking for some new young blood to take over the organization.

Recently, health care workers in general and nurses in particular are finding that their personal convictions are at odds with the facility at which they work. It is our goal to continue to be a resource for nurses, providing up-to-date information on evolving issues. As we move towards a new year and new challenges, we invite you to help us continue to be that resource.



Fact Sheet: Abortion and Mental Health

continued from back page

Unwanted abortions

Of special concern is the harm abortion does to women who feel pressured into abortions, the focus of CLI's peer-reviewed *Unwanted Abortions Studies*. In one study, our national survey of 1,000 women found that over 60 percent of those who had abortions reported high levels of pressure to abort. Most reported a desire to have given birth if they had received more support from others. Sixty-seven percent described their abortions as either inconsistent with their own values or preferences (43 percent), unwanted (14 percent), or even coerced (10 percent). As predicted by the APA, women who felt pressured blamed their abortions for causing more mental health problems, feelings of loss or grief, and disruptions of their relationships and daily life.

There is no evidence that abortion ever improves women's mental health. In a 2013 literature review and meta-analysis, the prominent and self-identified pro-choice researcher David Fergusson concluded, "There is no available evidence to suggest that abortion has therapeutic effects in reducing the mental health risks of unwanted or unintended pregnancy."

Notably, one well-known survey of a small cohort of women who sought abortions beyond legal gestational age limits, and were therefore turned away (the "Turnaway Study"), did report that women who were unable to get abortions had slightly more anxiety and lower self-esteem one week later.

However, this difference was greatest for women who were still seeking abortions, and the differences diminished over time. Despite the significant biases in and limitations of the study, including a high drop-out rate, no other mental health differences were identified over the five-year study period. The results also showed that women who obtained abortions reported high rates of regret, guilt, sadness, and PTSD.

There is no evidence to suggest that abortion ever directly benefits women's mental health. In contrast, nearly every study has found that abortion is linked to more mental health problems in women, especially those who have one or more of the known risk factors. While nearly all psychological conditions are multifactorial, abortion can be a contributing factor in mental illness for some women, and numerous studies controlling for prior mental health issues have indicated that abortion is an independent risk factor for more mental health problems.

—www.lozierinstitute.org, September 2023



Fact Sheet: Abortion and Mental Health



Charlotte Lozier Institute

The evidence is clear: abortion contributes to mental health problems, at least for some women. For example, a 2016 analysis of data from the National Longitudinal Study of Adolescent to Adult Health (Add Health) has shown that each exposure to abortion increases the risk of mental disorders by 23 percent, even after controlling for 25 other factors, including prior mental health issues.

A 2023 study also indicates that pressure to undergo an abortion is associated with poorer mental and emotional outcomes. The American Psychological Association (APA) has acknowledged that these and other risk factors—including lack of support from others, feelings of stigma, pre-existing mental or emotional problems, wanting to keep

the pregnancy, and repeat abortion—are associated with more mental health problems following an abortion.

These findings have been confirmed by a recent peer-reviewed CLI analysis of state Medicaid data showing that, compared to women who give birth, women who have an abortion in their first pregnancy are 3.4 times more likely to experience an increase in outpatient mental health visits and 5.7 times more likely to experience an increase in inpatient admissions. Similarly, another peer-reviewed CLI study of Medicaid data demonstrates that women with a history of pregnancy loss, including abortion, are approximately 35 percent more likely to require post-partum mental health treatment following their subsequent first live birth.

Substance abuse

- A 2011 meta-analysis shows that, compared to women without abortions, women who have abortions are over three times as likely to use marijuana and more than twice as likely to use/misuse alcohol.
- The Add Health study shows that women who have abortions are twice as likely to abuse alcohol, 2.5 times as likely to misuse marijuana, and over three times as likely to use illicit drugs.

Depression/anxiety

- According to the 2011 meta-analysis, women who have abortions are 37 percent more likely to suffer from depression and 34 percent more likely to have anxiety, compared to women without abortions.
- This is backed up by data from Add Health showing that women who have abortions are 30 percent more likely to experience depression and 23 percent more likely to have anxiety.

Suicide and violent death

Studies of women in the United States, Italy, and Finland show that women who have abortions have approximately two to six times the risk of suicide within a year compared to women who give birth. This risk increases with multiple abortions. Additionally, women who undergo abortion have a significantly higher rate of death from violent causes. Together with an elevated risk of death from other stress-related illnesses, national record linkage studies demonstrate that each abortion increases the risk of premature death by 50 percent.