



Voice for Life Newsletter October 2016

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Do Lives Matter?

By Edward Kiernan, President

Anyone who followed the news during the last few months can hardly help feeling numb to stories of rampant killing. Suspicious deaths of black suspects during encounters with police in the USA and Canada, and lethal revenge attacks on police officers, terrorist atrocities and random killings carried out by fanatics have been so frequent that people ask when it will end.

The response to increasingly audacious violence is also disturbing: extreme policing at home and assassination tactics abroad by countries that for decades stood out as peaceful and safe.

Since the early years of the abortion policy debates in the 1960s and 70s, pro-lifers warned of a "slippery slope": loss of respect for human life in the early stages would lead to general indifference to the right to life of others. Worse, that killing unborn children to solve problems for individuals and society, would lead people to seriously consider killing human beings as a "positive" solution to other kinds of problems.

Are we experiencing the early stages of what it feels like to live in a world where nothing, not even human life, is sacred?

The lesson of history being played out on the world stage is harsh – when individuals and groups want something badly enough, the lives of others do not matter. Will the respect for the right to life of human beings ever make a comeback?

Pro-lifers fight this trend, educating everyone about the reasons why human lives matter. Let's recap what some of those reasons are:

- Each human being is a unique, irreplaceable individual. The loss of a human being is a true loss that cannot be made up for, because no one else can be that person.
- The human species is unique among the rest, having intellect, will and a memory that gives each person a unique identity. Other animals lack, or possess only pale imitations of the characteristics exemplified in the human soul.
- Human beings do cause a lot of problems for this world, but we are also the world's problem-solvers. Each person matters because he or she may be able to meet a unique need or solve a particular problem.
- Human beings are uniquely the cause of the happiness of other human beings. Ending one person's life prevents that person from giving happiness to many, many other people.
- Human beings, both as individuals and as a group, have long realized that we are special because we have a special purpose for existing.

Lives matter. If good can come of the spate of bloodshed we are witnessing across the globe, it can only be to wake people up to renew their respect for human life.



"Promoting, through public education, the respect for life from the moment of conception to the end of natural life."

ORGANIZATION NEWS

Barra Gots, Editor



FESTIVALS

Voice for Life successfully had the Information Display tent at the **Simcoe Lynn River Music Festival (July 30, 31, Aug. 1)**, the **Hagersville Summers End Festival (Sept. 3)**, and the **Delhi Fall Fest (Sept. 16-18)**. A well-deserved thank you to all those who helped with set-up and volunteering for various shifts.

MOVIE MATINEE & TREATS, August 31

Our first movie, *I am Potential*, was shown at the Simcoe Branch of the Norfolk County Public Library in the afternoon. This was well received, and it is hoped that this event can be repeated soon, and become a regular occurrence.

WALK-A-THON: OUR 39TH ANNUAL WALK FOR LIFE FUNDRAISER, Sept. 10

Voice for Life is most grateful for those who came out to Walk to be a visible witness for life, and made individual donations or sought out sponsors. In particular, Lou Craig, Maryanne Simon and Ronin Hayward each undertook a great effort to get pledges from sponsors. This provided a generous contribution to Voice for Life. Proceeds from pledges go towards Voice for Life community outreach - to promote, through education, the respect for life from the moment of conception to the natural end of life; regardless of stage of development, physical and mental ability, and age.

Nicolina Martino from 92.9 The Grand, Caledonia, covered the event. Took this photo ->

NATIONAL LIFE CHAIN, October 2, 2-3 p.m.

Voice for Life hosted Life Chain in the Haldimand-Norfolk area with simultaneous chains in Jarvis and Simcoe. There was a threat of rain in Simcoe but it held off until the last few minutes; in Jarvis it did not rain at all. Thanks be to God. This is an hour of visible witness and prayer for an end to abortion and for those affected by one. Please consider participating next year.

NORFOLK COUNTY FAIR, October 4 - 10

Voice for Life was pleased to be able to have a Booth at the Fair as usual despite some financial concerns. The volunteer effort was wonderful from set-up to take-down. It is worthwhile to be there, and to be able to promote life over such an extensive time frame in a good location. With the 'spinner' and 'fishing', children and their parents were more curious and often stopped, where before they might just walk by. The Truth Booth and fetal models gave visible, hands-on information, and many mothers pointed out to their child or a friend at what stage they were in their own baby's growth.

VOICE FOR LIFE BANQUET & FUNDRAISER, Friday, November 18

This year's Banquet is on Friday, November 18th, at Trinity Anglican Church, 80 Colborne St. S., Simcoe. Meet & Greet begins at 5:30 p.m. The Dinner will be held at 6:00 p.m. Come out for a fun and informative time. Tickets are \$25 for adults; \$10 for children, 12 and under.

Order by November 14 - **Call 519-583-0277, or E-mail voiceforlife@amtelecom.net**. The ticket cost covers the meal, hall rental, and incidentals. This year, donation envelopes will be placed at each table. It is hoped that those who come will add a donation to that envelope. Please bring your cheque book.

SIMCOE CHRISTMAS PANORAMA

Simcoe's downtown parks are filled each year with lighted Christmas displays. Any group with a display has their name before a broad audience. Voice for Life is pleased to be a part of this community effort, and, we need your help. Without help, this Project will be difficult to complete, but one way or another it will be done. God will provide. Please pray for us.

At this point, materials are being assembled and painted. Any help is most welcome - physical and financial. Physical in the sense of actual hands-on helping with the construction of the display, especially cutting out the figures for the four scenes representing parts of the Christmas story from Jesus' conception to birth. Financial in directing a donation to this Project to help off-set the cost of materials, etc. needed to assemble it. The display has to be ready and set up before November 26th. **Call 519-583-0277 or E-mail: voiceforlife@amtelecom.net** to find out more, and get involved in this first-time ever experience for our organization.



A HOUSE OF MERCY

By Cori Salchert, Sheboygan, Wisconsin, Guideposts Magazine, June 2016

*MEET A NURSE WHO BRINGS
HOPE TO THE DYING*

"How can you do it?" That's what I'm often asked when people hear that my husband, Mark, and I foster or adopt babies with a life-limiting or terminal diagnosis and care for them until God calls them home. "Aren't you afraid? Doesn't it break your heart?"

Yes, even though I have come into contact with just about every kind of patient in more than 20 years as a registered nurse, even though I am an experienced mom (Mark and I have eight children, ranging in age from 14 to 27), I am afraid. Seizures and other medical problems don't deter me, but I still worry that a little one might suffer if I make a mistake. And yes, when a baby passes from this life into the next, my heart aches terribly. There are times I think I can't take care of these babies anymore, that the pain of losing them is too much to bear. But I don't want to live my life crippled by fear.

I've been called to this work ever since one day in 2008. I was working in a hospital then. A baby was born extremely prematurely. His lungs were nowhere near developed enough for him to survive, though his heart was beating faintly. His parents were emotionally overwhelmed. They couldn't look at him or touch him. I didn't judge them for not being able to handle the situation. It was intense. "Take him with you, please," his mother begged me. "I can't . . ." She broke into sobs.

I took the baby into another room and sat on the windowsill, cupping him in my hand, he was that tiny. It felt right to be with this little guy when he was at his most vulnerable and without his family. Right for him. And right for me.

It was redemption. You see, for years, I'd struggled to make sense of what had happened to my younger sister. She had suffered brain damage after a bout of meningitis as an infant and lived in a home for severely disabled children. When she was 11, she wandered out an unlocked door and drowned in a nearby pond. It tore at my soul to think of her gasping for breath, dying frightened and alone.

I sat on that hospital windowsill for an hour, singing to and marveling at the baby I held. His foot was no bigger than the nail on my pinkie, and yet he was beautifully formed. Only a God of infinite love could make such a tiny being so wonderfully. And a God who loved that much would never leave his most vulnerable children comfortless. He must have been with my sister in her last moments, just as he was here with this baby. I laid my finger against the boy's cheek as the color faded from it, feeling strangely at peace.

Later, though, in the privacy of a friend's office, I wept. "I wish I could have done something to help that little boy," I said. "But you did help," she said. "If all he knew of life outside the womb was that one hour with you, knowing your touch, then he knew love."

It struck me that babies like him might never be taken out of their cribs if they were tethered to a ventilator or a feeding tube, never held. They might never have a family or a home, if their parents, unable to take care of them, gave up guardianship. Maybe there was something I could do—bring these babies home and care for them. Let them spend the time that they had—whether it was days, weeks or months—living. Being part of a family. Being loved.

I talked to Mark. He shook his head. "We both work full-time. We have eight kids," he said. "It's just not happening." I didn't press the issue. Foster care and adoption work best when all parties are fully committed. It was a good thing I waited. Over the next few years my own health took a nosedive. I got so sick I had to leave my job at the hospital. It wasn't until the spring of 2012, when I was diagnosed with and treated for several autoimmune diseases, that my body began to heal. By then Mark had come around to the idea of fostering hospice babies. We talked to our kids, and they were all for it. I got in touch with a local treatment-foster-care program that places children with severe behavioral or medical challenges in foster homes. I said we were willing to take in a baby with a life-limiting or terminal diagnosis.

The call came one day in August. There was a baby girl, two weeks old. No name. No one to care for her. No right or left hemispheres of her brain, only the brain stem. She was in a vegetative state, unresponsive to stimuli except pain. Could we give her a home?

"Absolutely," Mark and I said. Social workers did the required checks, and two days later, we brought the baby girl home. We named her Emmalynn.

She went from not having any family to having two parents and eight older siblings, all of whom adored her. Everyone jumped in to bathe, dress, feed and cuddle her, even check her vital signs. I felt reassured. But not even a week in, Emmalynn was struggling to breathe. She turned blue. I hooked her up to an oxygen cannula and sat



down with her cradled to my chest. "God, it's too hard seeing her suffer," I whispered. "I can't do this." Then what?



What was God trying to tell me? That phrase came again: Then what? Face your fears. I found myself thinking, Okay, I can't do this. Then what? I'd take Emmalynn to the hospital. Then what? They'd lay her on a table and take her clothes off to examine her. Then what? She would be cold. She didn't regulate her temperature well. Then what? She could die right there. On that cold examination table. Was that what I wanted? No. I wanted her to die at home in my arms.

So then what? There was nothing to do but hang tough and keep going. That's what God was telling me. I'd promised to love Emmalynn through this. To stay, even when it was gut-wrenching.

Emmalynn couldn't be left alone, and our family had to keep on living. We took her everywhere with us—the grocery store, restaurants, the beach. There came an evening when I saw she was fading. Our whole family was home and got to hug her and kiss her. Mark held her close with her little head tucked under his chin and sang to her. Eventually everyone went to bed. I stayed up with Emmalynn. I snuggled her into my fuzzy bathrobe. I was singing "Jesus Loves Me" to her when it occurred to me that I had not heard her breathe for a few minutes. I looked at her. Our beautiful Emmalynn was gone. She had lived 50 days and left this world hearing my heartbeat. She didn't suffer, she wasn't in pain and she most certainly wasn't alone.

After Emmalynn died we fostered other children who were not terminal and who left our home to live with forever families. I never know for sure how long a child is going to be placed with us and don't want to have regrets that they could have been better cared for. So I love every one with my whole heart.

That makes it hard when they leave us. One time the heartache was so painful that I would have stopped doing treatment foster care if it hadn't been for Mark and the kids, who insisted they were ready to do it again. One of our daughters said, "Mom, what if some kid really needs us and you're just sitting there with a broken heart?"

In October 2014, a four-month-old boy named Charlie became our foster child. We adopted him about a year later. Charlie has severe neurological impairments and is dependent on a tracheostomy, a ventilator and a feeding tube. He wasn't initially considered terminal, but children with his type of brain damage typically don't live past the age of two. I've found my own breath catching in my chest at the number of times we've resuscitated this little guy. I can't stand the thought of suffocating, and it's so hard knowing that having to draw all of his breaths through a tiny straw is Charlie's reality. His lungs fill with fluid, making it hard for the ventilator to do its job. Someday, I won't be able to clear his airway when this happens.

Still, there is a lot of joy with him. Our house is a hive of activity, with so many kids and their friends in and out. Music is constantly playing, and we've been known to spontaneously break into singing and dancing. Charlie is in the thick of it. He has a hospital bed in our family room, and we got one large enough for us to snuggle with him while he's attached to the tubes and machines that keep him alive.

He usually has his head turned to the right. I crawl into bed on his left. He turns his little face so we're lying nose to nose. Even though he isn't able to smile, the steadiness of his gaze when he looks at me, instead of having his eyes rolled back in his head, tells me he knows I'm there. He reaches out to touch my face. He loves to have me kiss his palm and hold his hand, and so I do.

"How can you do this?" people ask. My answer is, "How can I not?"

Charlie will die. That's the reality of caring for hospice babies. There's no changing that. But we can make a difference in how they live and, most of all, how they are loved.

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[In a way I cannot explain properly, this article touched my heart and I hope, for those who read "A House of Mercy", it does the same and really shows that 'Every Life Matters'. The love and care nurses like Cori Salchert provide is vital. Thank you to Guideposts Magazine for allowing reproduction of this article. - Barra]