



Perspectives 2007

THE DEVEBER INSTITUTE FOR BIOETHICS AND SOCIAL RESEARCH

Research and Scholarship for an Informed Social Response to Human Life Questions

Abortion Grief on the Deathbed

In our latest project, we are surprised to find an unexpected correlation between two issues at the heart of the Institute's research: abortion and palliative care. Jean Echlin, in her career as an award-winning palliative care nurse, was confronted by women whose previous abortions became a central issue on their deathbed. Most notably, their unresolved guilt and psychological pain about the abortions stood in the way of their dying peacefully, even to the point of impeding the effectiveness of the pain medication. Only when the issue was resolved for these women – typically by being listened to and assured of forgiveness – was the pain medication made effective and the women able to die peacefully.

These stories are from Jean Echlin's notes:

Caroline's Story

This 92 year old lady had two abortions at her husband's insistence. This was after the birth of two children who were born 16 months apart. Her husband took her to an abortion clinic in a United States city and left her to face everything alone and to get home by herself afterwards. She almost lost her life with severe hemorrhage after her second abortion performed when she was five months pregnant. The word 'obey' in her marriage ceremony was a vow that she intended to keep. Caroline became pregnant with another child at the age of 40. This pregnancy was very difficult due to incompetent cervix. Caroline and her husband decided not to abort this child. Her doctor gave her diethylstilboestrol in an attempt to ensure the baby's viability.

At the end of her life she shared with me her agony over her lost babies. From age 50 on she felt that she had committed murder. She was very worried that God would never forgive her ...

Caroline was referred to palliative care because of a high level of "death anxiety" shown by extreme restlessness and agitation. Abdominal pain occurred as well.

Lydia's Story

Lydia, at the age of 59, was dying from breast cancer that had spread to her lungs, liver and bone. Her physical pain was exhausting and its management very difficult. Even with the use of the pain pump, which gave her 24-hour morphine at a steady rate, her pain did not respond. Medication for anxiety did very little except to leave her drowsy and in pain with restlessness... I asked her if her faith or prayer could be of any comfort. Lydia remained silent except for her moaning. The following day she called me to visit her "right away." She made me promise that I would not discuss with anyone what she had to tell me. Her words were: "I can't pray.... God won't listen.... I killed a precious baby when I was 18 and got pregnant. The abortion clinic treated me like "a piece of dirt". They kept calling my baby a fetus and when I cried they told me to stop being such a baby... "You got pregnant and now you have to pay for the fun.""




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Abortion Grief on the Deathbed

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Addressing psychological and spiritual pain during death is not unusual from a medical perspective. Cecily Saunders was one of the founders of Palliative Care, along with Elisabeth Kubler Ross. She created the Cecily Saunders' Model of Total Pain Control, which addresses all pain including physical, psychological, social, and spiritual pain.

Indeed it has often been the experience of the palliative care provider that even previously non-religious people will ask profound spiritual questions on their deathbed and request spiritual guidance.

These women's stories show that women suffer from abortion in many ways. They need our compassion, and they deserve to have their pain and suffering recognized by their medical care providers. The de Veber Institute publishes work like this and *Women's Health After Abortion: the Medical and Psychological Consequences*, to better inform and equip care providers who care for women before or after an abortion, and those who create policy related to such women. Women need to be better informed of the risks of abortion, and the problems resulting from abortions need to be recognized and treated more effectively. 

You are invited to attend
The de Veber Institute for Bioethics and
Social Research 25th Anniversary AGM
Lecture

Young Women at Risk:

Abortion and Consent



Dr. Deborah Zeni, M.D. C.C.F.P.
Contributor to *Women's Health After Abortion:
The Medical and Psychological Evidence*

Thursday October 25, 2007
7 p.m. Refreshments and Jazz Quartet
8 p.m. Free Public Lecture

Tax Receipts will be issued for all donations.
DeVeber publications will be available for purchase.

Charbonnel Lounge
81 St. Mary Street
(in Eimsley Hall, on the south side of
St. Mary Street, near Bay & Bloor)
St. Michael's College,
University of Toronto.



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DE VEBER

Best Wishes, Bambi

We wish to express our gratitude to Bambi Rutledge for the years she dedicated to The de Veber Institute as Executive Director. Bambi is now a full time staff member with the Catholic Centre for Bioethics.

We are going to miss her "smiling voice" greeting callers, her enthusiasm and her warmth. Bambi brought a professionalism and vision to all her work, which is evident in the fine quality of our major publication *Women's Health After Abortion: The Medical and Psychological Evidence*.

Bambi, we extend to you our deep thanks and best wishes.


Thanks to our design experts

The de Veber Institute would like to thank Barry Jamieson and Allen Fujiwara for their creative talent and technical expertise in designing the de Veber newsletter.

New Place, New People

The de Veber Institute has undergone some significant changes. The office has moved to a cosy space at 305 Jane Street in the west end of Toronto, in order to economize. We have, however, maintained the same telephone and fax numbers, as well as email and website addresses.

We have been fortunate to have the assistance of several university students. Nicole Lau and Linda Smith have been sharing their writing and organizational skills.

We are pleased to introduce Elaine Zettel who is working part time in the new office as Executive Director. She recently graduated from McMaster University in Arts and Science, with a minor in biochemistry. Elaine also assists at L'Arche in Toronto. 

Reaching Out to Those Who Care for the Dying

Current research can be presented in many forms. The de Veber Institute has published several articles and books about important human life issues. Recently we had the opportunity to inform the public through a new medium. We have been reaching out to families by putting on a series of talks in community venues. These talks - "Compassionate Care in Home, Hospice or Hospital" - bring together families and caregivers with experts in the field of palliative care who can answer their questions. The intimacy and positive energy of good palliative care become evident during these evening presentations. These events help families to be caregivers, to control pain, and to explore the role of honesty. Families are presented with access to community resources to support them in this difficult time.



For one of Canada's palliative care pioneers, **Dr. Barrie de Veber**, "to truly care for a dying person is to ensure someone is with them in their time of need, that their pain symptoms are compassionately managed and that their life is treated as sacred until its end." Dr. Paul Zeni is an associate of the de Veber Institute and Palliative Care Consultant for North Halton, Ontario. According to Dr. Zeni, a desire for euthanasia is often fuelled by fear of pain. Generally, when proper pain control is provided, people do not consider euthanasia as an option.

The de Veber Institute would like to thank Franco Palladini of Al Palladini's Pine Tree Ford and Lincoln for his Gold Sponsorship, and Mario Romano for his Silver Sponsorship of the event in Woodbridge.

We would especially like to thank three churches St. Clare of Assisi (Woodbridge), All Saints and St. Clare (Toronto) for their hospitality and support.

"[the de Veber Institute's Symposium on Palliative Care] really helped me to make decisions about my Mom because I found a lot of my questions about palliative care were answered by the speakers that night. When the time came for my Mom to use the service - I was ready with choices and they were made with less fear and a lot more courage than I thought I'd ever have" ❁

-Maria Luisa Furfaro

Activities of the de Veber Speaker's Bureau

Associates of the de Veber Institute shared their expertise and experience in several public speaking engagements, including:

Dr. Barrie de Veber spoke on palliative care and euthanasia at the University of Western Ontario last year, and will speak there again about prenatal testing this year.

Dr. Deborah Zeni spoke at 'Reaching Minds through Media' in London; to groups in Listowel, Kincardine, St. Thomas and Kitchener-Waterloo and Windsor and; at McMaster, Toronto and Waterloo Universities. She will speak in Aylmer, Kitchener-Waterloo, Ottawa and Toronto this fall. She will also speak to medical students in Toronto and at the October 25th de Veber Institute AGM this fall.

Professor Ian Gentles spoke at the University of Toronto on recent research on the impact of induced abortion on women's mental health. An expanded version of this talk was published in Human Life Review, vol. xxxiii, no. 2 (spring, 2007). He spoke at York University on recent findings in the area of stem-cell research, and was interviewed on CTS television on the subject of women's health and abortion. ❁

The deVeber Institute
For Bioethics and Social Research

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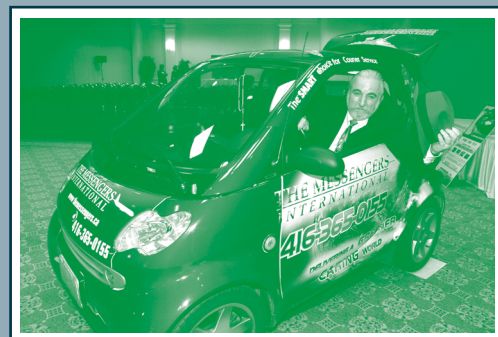
Are You Giving Money to the Government When You Could Give it to the Institute?

Do you have stocks, bonds or mutual funds? Did you know that donating appreciated securities is the most tax-effective way to make a gift? The 2006 Federal Budget eliminated the capital gains tax on donations of publicly listed securities and stocks to registered charities such as The de Veber Institute for Bioethics and Social Research. Now when you donate publicly traded stocks, bonds or mutual funds, you do not pay tax on the capital gain – and, as always, you also receive a charitable tax receipt for the full contribution amount.

For an example, if you donate appreciated securities with a fair market value of \$1000 or cash to The de Veber Institute, you will receive a tax credit of \$460 (based on top marginal tax rate of 46%). However, by choosing a gift of stocks instead of a gift of cash, you will receive an additional tax benefit due to the elimination of the tax on the capital gain. If the cost base of the stock was \$400, the capital gain is \$600. Previously, the tax on this would have been approximately \$140; now you no longer must pay that \$140.

Why not consider making a donation of securities to The de Veber Institute? It will make a difference to informing the discussion of human life questions, and will potentially mean tax savings for you. Donors should consult with their professional advisors with respect to authoritative advice on potential tax savings for gifts of securities. ❁

Why I Support the Institute



“I’d rather be doing presentations in classrooms, but I have to work, so I use (the profits from) my work to plant seeds in life issues.”

Frank d’Angelo
President, The Messengers International,
Toronto’s most professional courier company.