

Quarterly Newsletter Fall 1997

W e fix our eyes not on what is seen, but on what is unseen.

Investing in Eternity

by Randy Alcorn

If you have enough food, warm clothes, live in a home that shields you from the weather and own some kind of reliable transportation, congratulations—you are in the top fifteen per-

cent of the world's wealthy.

Add a little savings, a hobby that requires equipment (such as hunting, fishing, painting or golf), two cars in any condition, a variety of clothing and your own house, and you have reached the top five percent. I'm there--are you?

We may not feel wealthy. But that's only because we're comparing ourselves to those who own even more.

To get a better handle on reality, con-

sider that more than 1.1 billion people in the world live on less than the equivalent of one U.S. dollar per day. Five hundred million people are hungry and another 500 million are so poor they don't get enough food to be fully productive.

Though the proportion of the world's hungry is slowly declining, population increases mean the number of hungry persons is the highest in history. Every day nearly 75,000 people, most of them children, die because of dirty drinking

water, disease or malnutrition.

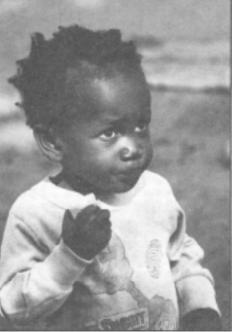
By the year 2000, two billion children will live in extreme poverty or highrisk situations. By 2020, the number of street children is expected to skyrocket

from today's 100 million to 800 million. (We'll talk about those street children in our next newsletter.)

Much of the world lives with an even worse shortage: the good news that Jesus died for our sins and is the way to eternal life. Ninety-five percent of these unreached groups live in an area from West Africa to China known as the 10/40 Window. Of these 3.1 billion people, twothirds have never heard of Jesus, at least

not as Savior. (Eighty-five percent of the world's poorest also live in this region).

I don't share these statistics to heap guilt on us, nor to advocate taking a vow of poverty. I share them because they are signposts of opportunity. All of us invest our lives in something—our investments are wherever we choose to put our money, time, labor, gifts, thoughts and energies. All of us are investors—the question is, in what do we invest, and how long will it last? Will our invest-



ments make a difference in eternity?

In my book Money, Possessions and Eternity, I talk about how financial counselors advise us to look bevond the next few months and even beyond the next ten years. They tell us we should ask ourselves how our money will be paying off for us in another twenty, thirty, or forty years, when we're retired. While financial counselors are right to say "think ahead," the truth is they don't think ahead nearly far enough. What we need to ask ourselves is what we're doing with our money today that will be paying off twenty million years from now.

I'll never forget a phone call from a pastor who told me after reading *Money, Possessions and Eternity*, he sold his BMW and give the money to missions. He did not regard this as some great sacrifice. Let's face it, by historical and global standards it didn't qualify as sacrifice at all. But it was a great investment. What excited this pastor was that the reality hit home he should pursue eternal rewards by storing up treasures in heaven instead of on earth.

Once a wealthy Christian plantation owner invited John Wesley to his home. The two rode their horses all day, seeing just a small part of all the man owned. At the end of the day the plantation owner proudly asked, "Well, Mr. Wesley, what do you think?" After a moment of silence, Wesley replied, "I think you're going to have a hard time leaving all this."

The plantation owner was attached to the world he was in. Wesley was attached to the world he was going to. All of us form attachments. All of us have a place we call home. The question is, do we think and live as if this world, or the next world, is our

home? Is our mind on earth or on heaven?

The saying goes, "he's so heavenly minded he's of no earthly good." Yet Scripture *commands* us to set our minds on heaven, where Christ is (Colossians 3:1).

William Wilberforce, who did more than any one man to abolish slavery in England (and was of obvious earthly good), said this: "It is since Christians have largely ceased to think of the other world that they have be-

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come so ineffective in this one." The truth is, those who are heavenly minded are of the most earthly good.

Self-preoccupation isn't unique to America, but our society cultivates materialism in powerful ways. As the earth holds the moon in orbit by its gravity, the more possessions we have the more likely they will hold us in their gravity. The best way to get free from them is to give them away and to generously share those we keep, recognizing they belong to God not us.

Loosening the grip of materialism on our lives is a good reason to live more simply. There are a thousand ways to do this. We can buy used cars instead of new, choose a modest home over an expensive one, shop at thrift stores, carpool or use a bicycle instead of another car. What's the point? Paul explained in Ephesians 4:28 that the reason for productive work is so we can "have something to share with those in need." When we earn more, we should use those resources to help others. When we make more money, we shouldn't assume God is telling us to increase our standard of living, but our standard of giving.

As Christians, we must always be concerned with spreading the gospel through missions work. But we also need relief and development agencies to provide food and medicine. Jesus said of the cold, hungry, sick and needy, "Whatever you did for one of the least of these brothers of mine, you did for me" (Matthew 25:40). If the person in need was your Lord Jesus, would you sacrifice to help him? Then do it, and Christ will regard it as a gift to him.

If your church isn't doing anything to feed the hungry and reach the lost, share with your leaders some of the information in this newsletter. Be an advocate for reaching out to the needy, getting them the gospel *and* bread and water. Just because you can't help the whole world is no reason not to help one, two or ten. How do you feed a billion hungry people? One at a time.



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There are many worthy missions and famine relief organizations that need help. Before giving to one, do your homework to make sure they will use your donations wisely.

You also need to know that the ministry is Christ-centered and biblically sound, that its leaders have character and integrity, and that it maintains accountability for how it spends its funds. Consider, too, that ninety-five percent of Western missions money and resources go to areas where there is already an established or emerging church. Only five percent help areas where there is no church. You might want to consider those.

Missionaries, missions pastors and missions professors at colleges and seminaries are often good sources of information about foreign ministries. At EPM we also have some knowledge of them, and are glad to try to answer anyone's questions.

Finally, don't forget to have an eternal investment mentality. When you give to your suffering brothers and sisters in Christ, remember what Jesus said: "And if anyone gives even a cup of cold water to one of these little ones because he is my disciple, I tell you the truth, he will certainly not lose his reward" (Matthew 10:42).

He also said, "But when you give a banquet, invite the poor, the crippled, the lame, the blind, and you will be blessed. Although they cannot repay you, you will be repaid at the resurrection of the righteous" (Luke 14:13-14). God is saying, "I'm watching, and I'm keeping track of everything you do to help the needy; and in eternity, I'll reward you beyond your wildest dreams."

Jesus says, "Lay up for yourselves treasures in heaven" (Matthew 6:20). If your treasures are on earth, each day you are moving away from them. If your treasures are in heaven, each day you are moving toward them.

He who spends his life moving away from his treasures has reason to despair. He who spends his life moving toward his treasures has reason to rejoice.

Note: An example of a great eternal investment opportunity is World Relief's community banking project in Mozambique. See the article by Barry Arnold on pages 4 & 5.

Dominion Makes An Impact

s of September 1997 Dominion bestsellers list eleven months in a row, eight of those months in the top 10. Responses to the book have been overwhelming. Here's a few of them:

"My wife and I lost our 4-mo-old

daughter 2 1/2 years ago, and ever since, our hearts are being pulled more and more towards our real home, and our reunion with her. Your picture of heaven and the reunions experienced touched us greatly."

Brian from Medford, OR

"I just finished reading your book *Dominion* last night. What a wonderful piece of work! I have never been challenged so much about my views on racism. I don't know whether you are black, white, yellow

or purple but you have an incredible understanding of the deepest emotions of the black community. I would like to read more of your work. I plan to find a copy of *Deadline* this week.

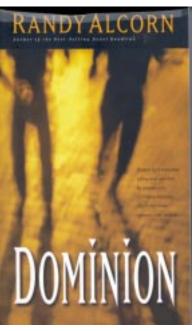
Mary from Colchester, CN

"I just finished *Dominion* and once again have been extremely blessed! (I previously thought *Deadline* was one of the best books I've ever read, but it has just been supplanted.) I want to thank you for sharing with us, and encouraging us to keep our eyes fixed upon Jesus, and the eternal perspective God has blessed you with."

Tony from Cape Cod, MA

"I need to share with you how much Dominion has meant to me. The characters and plot of this story are fabulous. I have had my eyes opened to areas I have *never* considered about racial issues, political issues and most importantly, heaven. I used to feel that people who talked of heaven too often were giving up on life somehow. I now feel that *not* talking about it has meant giving up on life eternal. Thank you!"

Laurie from Sisters, OR



"I just wanted to tell you how much I enjoyed your book Dominion. It brought me to laughter and tears on many occasions. I could never put it down, and I wanted there to always be more pages to read. I loved the realness and depth of the characters. I am fifteen and I never really thought a lot about racial issues. Thank you for writing such a powerful book! I'm ex-

pecting to see another one—PLEASE!"

Candace from Belton, TX

"I just finished the book and all I have to say is: you're going to have to give up writing novels now-there's just no way you could possibly top this one."

Doreen from Gresham, OR

"Your writing style combines suspense, laughter, tears, education and, most importantly, a gift of making me look at the way I am living my life and realizing I am not putting God first. You should feel good to know your writing of *Deadline* and *Dominion* has made at least one person (I'm sure thousands) want to strengthen her relationship with the Lord."

Tricia from Visalia, CA

Dominion is available from EPM at quantity discounts: 1 book, \$13; 2-9 books, \$12 per book; 10-19 books, \$11 per book; case of 20, \$9 per book; two cases, \$8.50 per book; three or more cases, \$8 per book.

Community Banks: An Eternal Investment

by Barry Arnold, Missions Pastor, Good Shepherd Community Church

Note from Randy Alcorn: I asked my friend Barry Arnold to write an article for Eternal Perspectives concerning a wonderful development he witnessed first hand in a visit to Mozambique. This is something to get excited about!

If, with \$50, you could start a business that would require no extra work on your part but would completely provide for a family in one of the poorest nations on earth, would you do it? Of course! Well, you can.

Mozambique, a country in southern Africa, is recovering from more than two decades of war, drought, and famine that drove a third of its people from their homes. As a result of a 1994 peace agree-

ment, a two-party parliamentary government is offering the hope of stability to this country. But Mozambique has a long way to go.

War has robbed the country of infrastructures and the ability to provide for itself. More than 25 percent of Mozambican children don't live to celebrate their fifth birthday. Malnutrition stunts the growth of 55 percent of the children. Thousands continue to die of preventable and curable diseases like malaria and diarrhea. Seventy percent of the people have no access to health care—of any kind.

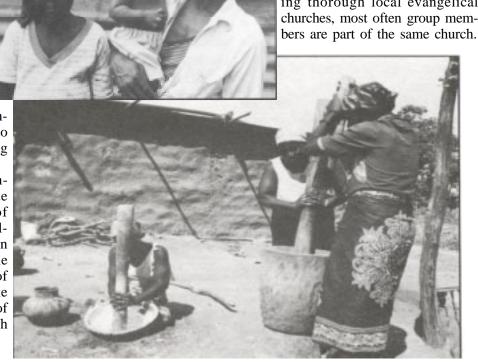
Mozambique Stats

- 60% of the adults are illiterate.
- 46 years is the average life expectancy.
- 37% of the people do not have access to safe drinking water.
- Mozambicans consume only 77% of calories they need on a daily basis (U.S. average: 138%).
- GNP is \$90, the poorest in the world (U.S.: \$25,880) 55% of children suffer from impaired growth due to lack of nutrients.
- Only 40% of the children are fully immunized.
- 27% of children die before their fifth birthday.
- In rural areas only 30% have access to health services.
- Only 35% of children get a 5th grade education.

World Relief, the relief and development arm of the National Association of Evangelicals, has successfully instituted an ingenious program whereby the poorest of the poor can be set up in business and freed from the clutches

of poverty. It's called Community Banking. A Community Bank works like this:

Step 1 Fifteen or twenty adults form a group to request a Community Bank. Because World Relief emphasizes working thorough local evangelical churches, most often group members are part of the same church.



Step 2 The group meets once a week for six weeks to learn about simple business practices, nutrition and health, stewardship, and how the bank will operate.

Step 3 Members receive their first loan, up to \$50. With the loan some might purchase flour, oil, and yeast in quantity to begin a bread-baking business. Or, a member might purchase fresh fish to sell in the market, or food staples, or charcoal to sell along the roadside.

Step 4 Each week for 16 weeks members meet to make a loan repayment. Members pay interest at half the commercial rate. Along with the payment of principle and interest, members are required to put at least 5% of their earnings into a personal savings account.

Step 5 When all the loans are repaid, members are eligible for another loan—this time equal to the amount they received in the first cycle *plus whatever amount they have put into their personal savings account.*

The program is entirely self-sustaining after the initial capital investment of \$50 per member. In the past three

years World Relief has provided more than 5,000 loans to Mozambican families. And, the repayment rate? One-hundred percent!

The key of the program's success lies in this: Only when all loans are fully repaid can the group qualify for a new loan cycle. Peer pressure works!

Fifty dollars doesn't sound like much to us. However, it's a lot to the average Mozambican who lives on just \$90 a year.

I watched how one Mozambican family in the village of Barringia used their \$50 Community Bank loan. Early in the morning the husband and wife mixed flour, water, oil, and yeast in a large galvanized tub. After letting the dough rise for a couple hours the woman took the dough into her mud hut, kneaded it on a piece of white canvas, and shaped it into 120 small loaves which she arranged onto pans.

While the loaves were rising, the woman went back outside and built a wood fire on the top of a piece of sheet iron. She then slid the sheet iron (galvanized roofing) over a 2 X 3 by 1 ft. deep hole in the ground, just large enough to hold the bread pans. When the loaves had raised sufficiently the woman moved the sheet iron off the now preheated "oven," set a bread pan in the hole, and slid the iron back over the hole.

Fifteen minutes later the loaves were golden brown and a new pan went into the oven. The woman stacked the loaves into a pyramid on one bread pan. Then her eleven-year-old son, Mandito, hoisted the pan onto his head and carried the bread to the marketplace about a block away.

Sold for ten cents a loaf the bread would net \$12.00 for the day. Total cost of ingredients was \$8.00! Not a bad profit margin for any business! The four dollars would pay the bank loan, purchase rice, maize, nuts, and vegetables, and provide clothing for this Mozambican family.

Presently World Relief has 85 Community Banks, with 2,200 active members in Mozambique. World Relief has instituted Community Banking programs with similar success rates in Cambodia, Nicaragua, Honduras, and even war-torn Liberia.

World Relief's Community Banks offer help and hope in Jesus' name to the poorest of the poor. With the returns the Community Banks offer, few investments could be more worthwhile for Christians in this country. Your family or your business could easily provide an initial loan for another family—or, perhaps, ten, or twenty families—and in so doing you'd enable the poorest of the poor to provide for themselves.

A little really can do a lot—if it's invested right!

Note: EPM invites your financial gifts designated to "Community Banks." 100% of all funds so designated will be sent to World Relief to fund these exciting projects.

EPM: A Giving Alternative via United Way

Por years many Christians have struggled because of the annual office pressure to have full participation in giving to The United Way.

The problem is, United Way funds have gone to Planned Parenthood and similar proabortion groups, as well as prohomosexual groups and others committed to anti-Christian beliefs and actions. Naturally, Christians want to lead the way in generosity, but this has been an ongoing sore spot.

In response to Christians speaking out and saying this situation violated their conscience, United Way has set up an alternative program through which Christians can still participate through their place of employment, while designating the full amount to a specific alternative organization they do believe in. However, this can't be just any organization, only those United Way has officially approved.

Someone requested that they be able to give to Eternal Perspective Ministries through United Way, so United Way sent us an application form. We filled it out, with some skepticism, I admit, doubting we'd be approved.

Well, United Way contacted us to tell they officially approved Eternal Perspective Ministries as an alternative recipient. So when you are asked to give to United Way you can do so knowing that 100% of your gift will go to an organization you agree with. (Well, if you *do* agree with us, that is.)

So, when asked at the office to give to United Way, you now have the option of saying "yes, but I have a specific United Way-approved organization I'd like the funds to go to." Just provide them with EPM's name and address (Eternal Perspective Ministries, 2229 East Burnside #23, Gresham, OR, 97080).

If you want to confirm that the money has actually come through to EPM, contact us and let us know the amount, and when it comes through we'll notify you.

Thanks for thinking of us, and above all for being sure your money (*God's* money) stays away from what he doesn't approve of and goes to what he does approve of.

W ho Do WeThirk WeAre by Randy Alcorn

Note: I wrote these thoughts just a few days after the November 1994 election, in which the citizens of Oregon made one of the most shocking decisions in human history—the decision to implement state-approved physician-assisted suicide. Amazingly, we have now been given a second chance, another ballot measure that gives us an opportunity to reverse this horrendous decision and stand up for what is right. Since time has a way of desensitizing us to the importance of issues, it seems appropriate to go back to my reflections from three years ago.

Who do we think we are? The question haunts me.

Today, November 10, 1994, the outcome was declared official. Oregon became the first jurisdiction in the history of the human race to legalize physician assisted suicide. Even the Netherlands, which commonly practices it, and Nazi Germany, which practiced it in its involuntary form, were not so bold and presumptuous as to legalize it. No one on the planet has ever done that until now.

On election night, when men fantasize that morality is determined by majority vote and anecdotes, an Oregon man lamented before television cameras that to make her "final exit" his wife had to put the plastic bag over her own head and he was forced to leave her and take a walk. "If Measure 16 would have been in force," he said, "I could have assisted her, I could have been there for her."

Born and raised in Oregon, educated here, living and ministering here, I take Measure 16 personally. I went out early this morning, and as I sipped coffee, I browsed through the *Oregonian*. A prominent editorial on Measure 16 began like this:

Oregonians, by passing Measure 16, have made their state the first in the world to cross the boundary line between allowing death to occur in the terminally ill and causing such death to occur. Voters have declared a new personal liberty: the right to medical assistance in

choosing the timing and manner of one's death. It is a sovereign decision, made after much soul-searching, and should be respected as such. Unreasonable regulation must not thwart it.

I have a few questions about this analysis. Who set that "boundary line" we have now crossed? Where do we get off ignoring the no-trespassing sign that says "violators will be shot"? On whose authority do we now go where no one has gone before?

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Who has the right or authority to "declare a new personal liberty"? Are liberties created by people? Or are they established by God?

How can we have a "right" to medical assistance to kill ourselves when the Scriptures and all who have preceded us concur that it is morally wrong? Obviously, anyone can violate the standards and kill themselves or kill someone else. But how can we declare the "right" to do what is by nature wrong? We have an *ability* to do wrong—that goes without saying. But the *right* to do wrong is a contradiction in terms. Physician-assisted suicide makes about as much sense as pastor-assisted adultery.

The Oregonian editorial says voters decided on Measure 16 after "much soul searching." Really? Does hearing sound bites in the background while traveling from the frig with beer in hand really qualify as "soul searching"? Is it soul searching to take your cues from a man on a radio ad who announced indignantly "I don't want to waste my children's inheritance [to keep myself alive]". How long will it be before children say, "I don't want to waste my inheritance to keep those old folks alive"? Answer: it's already happening.

For those who did "search their souls," and I know there were some. I'd suggest we learn to search something more reliable. Many people who have committed horrible crimes have searched their souls before doing so. Instead, we should "Search the Scriptures" (Acts 17:11). Why? Because God's Word has a moral authority our souls do not.

We are told by the Oregonian that this decision to legalize physician-assisted suicide decision "should be respected." But why? Because people voted for it? So what? In times past people—even the Supreme Court itself—voted that black people deserved to be slaves, and had no rights as citizens. Should that decision have been respected? Twentytwo years ago the Supreme Court voted to invent a right to kill helpless preborn babies. In another twenty years we may

vote to legitimize adults having sex with children. Such decisions do not deserve our respect, but our scorn.

Of all the words that stick out in the *Oregonian* editorial, the one that grabs me is the word "sovereign." That's a theological word. It cuts to the issue's core—who shall be God?

Are we in control of the universe? Do we write laws on tablets of stone that come down from Sinai? Hardly. We write laws on tissue paper with blunt pencils and erasers worn off because we have had to rub out so

many of our previous moral decrees.

Who do we think we are? Who are we kidding? We can't make sovereign decisions, for one simple reason. We aren't sovereign! Only God is.

If Oregonians voted the law of gravity no longer pertains, and that every person has the "right to fly," what would change? Perhaps people would line up to step off the top of ten story buildings. But the results would be just the same as before the vote. We have no power over the truth—we have only the choice to accept or reject it.

For the last two days I have heard on local radio talk shows and in newspapers the sound of Oregonians slapping themselves on the back, congratulating themselves that they do not toe the party line, that they are rugged individualists, fiercely independent. "We're first again," they brag. But first in what? It is a badge of honor to be first in righteousness. It is a badge of shame to be first in evil.

I flip further through today's newspaper. There's the story of a woman who threw her newborn baby to be mauled and killed by pit bull. People are appalled. But I don't get it. If a few days earlier the same woman had paid a doctor to do to the baby exactly what the pit bull did, it would have been perfectly legal, perfectly acceptable, and anyone who criticized her for it would have been a self-righteous bigot. Same baby. Same mother. Same kind of violent death. What's the difference?

Today's paper is also filled with expressions of shock and outrage that a North Carolina woman drowned her two sons. Again, I don't get it. Wasn't that just a lifestyle choice? Who are these self-righteous bigots condemning this woman who made a soulsearching and courageous decision?

After all, Planned Parenthood's slogan is "Every child a wanted child." Susan Smith didn't feel like she could raise her sons anymore. And giving them up for adoption would have been an agonizing trauma. Who are we to question her choice? After all, she killed them quietly, in the privacy of a lake. Which brings us to the

real meaning of Planned Parenthood's slogan—"Every unwanted child a dead child."

Where are all the pro-choice advocates whose self-centered philosophy is precisely what inspired Susan Smith's despicable act? Some of them have expressed outrage. Of course, it's perfectly all right to kill babies on their terms at their times in their clinics. But people have no right to come up with their own methods, their own times and their own places to kill the very same children.

Susan Smith was taught by the Supreme Court, the law, the media, Planned Parenthood and the educational system—and an endless parade of politicians—that she had the "sovereign" right to end the life of her children up until the moment they were born. In other words, she had ownership of her children. If they were inconvenient, interfering with her lifestyle, presenting a financial hardship, it was her right to take them out.

"Better that such children not exist than they be raised in a home where they're not wanted." According to the prochoice philosophy, Susan had every right to kill the Smith boys, if only she'd done it sooner. Her only mistake was a technicality—it wasn't the killing of her children, it was only the timing of killing her children.

Abortion was higher up on the slippery slope, paving the way for Measure 16, which itself paves the way for the nonconsentual killing of the same kind of people who now will step forward and volunteer to die. It is of course foolish to believe euthanasia will *remain* voluntary. It began that way in the Netherlands, but now studies show 70% of killings by Dutch physicians take place without the patient's consent.

Measure 16 is the natural offspring of Roe v. Wade, arriving twenty-one years later. It is Oregon's declaration of independence from God. It is a pronouncement of war against his sovereignty.

Psalm 2 tells us the Creator laughs at such arrogant declarations of men:
Why do the nations conspire and

the peoples plot in vain? The kings of the earth take their stand and the rulers gather together against the LORD and against his Anointed One. "Let us break their chains," they say, "and throw off their fetters." The One enthroned in heaven laughs; the Lord scoffs at them. Then he rebukes them in his anger and terrifies them in his wrath, saying, "I have installed my King on Zion, my holy hill." (Psalms 2:1-6)

Oregon has taken its stand. We have gathered together against the Moral Authority of the universe, and against his Anointed One, Jesus Christ. "Let us break their chains," we have said, "and throw off their fetters. Let us ignore the eternal laws of God, and make up our own rules."

How does God respond to our attempt to put his moral laws up for the vote of popular opinion? He laughs, not the laugh of amusement but of derision. He scoffs at us. And we may be sure he will rebuke us in his anger and terrify us in his wrath.

Who do we think we are? The answer is clear. We think we're God.

Oregon was not first. A self-congratulatory angel named Lucifer was first. We have merely followed in his footsteps. We have joined him in saying, "I will ascend to heaven; I will raise my throne above the stars of God . . . I will ascend above the tops of the cloud; I will make myself like the Most High" (Isaiah 14:12-15). And after all the bravado, where did he end up? The next verse tells us—"But you are brought down to the grave, to the depths of the pit."

Look out Oregon. Look out America. "If God doesn't judge us, he'll owe Sodom and Gomorra an apology."

Note: On November 4, 1997 Oregon voters have a chance to vote to repeal Measure 16, Physician Assisted Suicide. If you would like to become involved in helping to repeal this measure, call 1-503-296-0058.

See EPM website, the "Ethics" category for a biblical study by Randy Alcorn, entitled "Euthanasia: Mercy or Murder?" (Select from main menu at http://www.epm.org/~ralcorn)

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"When Does Human Life Begin?" The Answer of Science

Scripture demonstrates, that there is a point at which human life does not exist and then is suddenly created by God. In science this is known as the point of conception.

Dr. Alfred M. Bongioanni, professor of obstetrics, University of Pennsylvania:

"I have learned from my earliest medical education that **human life begins at the time of conception**. I submit that human life is present throughout this entire sequence from conception to adulthood and any interruption at any point throughout this time constitutes a termination of human life."

Dr. Jerome LeJeune, genetics pro-

fessor at the University of Descartes in Paris (discoverer of the Down Syndrome chromosome):

"After fertilization has taken place a new human being has come into being. . . . This is no longer a matter of taste or opinion. Each individual has a very neat beginning, at conception."

Professor Micheline Matthews-Roth, Harvard University Medical School:

"It is scientifically correct to say that an individual human life begins at conception."

Professor Hymie Gordon, Mayo Clinic:

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

Dr. Watson A. Bowes, University of Colorado Medical School:

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

Dr. Landrum Shettles, pioneer in sperm biology, fertility and sterility, discoverer of male and female producing sperm:

"I oppose abortion. I do so, first, because I accept what is biologically manifest—that human life commences at the time of conception—and, second, because I believe it is wrong to take innocent human life under any circumstances."

God Has Exclusive Prerogatives Over Human Life and Death

"See now that I myself am He! There is no god besides me. I put to death and I bring to life, I have wounded and I will heal, and no one can deliver out of my hand." (Deuteronomy 32:39)

"The LORD brings death and makes alive; he brings down to the grave and raises up." (1 Samuel 2:6)

"You shall not commit murder." (Exodus 20:13)

Note: Except when he specifically delegates that right to men (e.g. capital

punishment, self defense, or just war), God alone has the right to take a human life

"And for your lifeblood I will surely demand an accounting. . . . And from each man, too, I will demand an accounting for the life of his fellow man." (Genesis 9:5)

"If men who are fighting 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 21:22-25)

"Nothing in all creation is hidden from God's sight. Everything is uncovered and laid bare before the eyes of him to whom we must give account." (Hebrews 4:13)

The Early Church Leaderson Abortion

"You shall love your neighbor more than your own life. You shall not slay a child by abortion. You shall not kill that which has already been generated." (*Epistle of Barnabas* 19.5; second century)

"Do not murder a child by abortion or kill a new-born infant." (*The Didache* 2.2; second century catechism for young Christian converts)

"The fetus in the womb is a living being and therefore the object of God's care" (Athenagoras, *A Plea for the Christians*, 35.6; 177 A.D.)

"It does not matter whether you take

away a life that is born, or destroy one that is coming to the birth. In both instances, the destruction is murder." (Tertullian, *Apology*, 9.4; second century)

"Those who give abortifacients for the destruction of a child conceived in the womb are murderers themselves, along with those receiving the poisons." (Basil the Great, Canons, 188.2; fourth century)

Jerome called abortion "the murder of an unborn child" (*Letter to Eustochium*, 22.13; fourth century). Augustine used the same phrase, warning against the terrible crime of

"the murder of an unborn child" (*On Marriage*, 1.17.15; fourth century).

Origen, Cyprian and Chrysostom also condemned abortion as child-killing.

John Calvin, sixteenth century reformer, said, "The fetus, though enclosed in the womb of its mother, is already a human being and it is a most monstrous crime to rob it of the life which it has not yet begun to enjoy. If it seems more horrible to kill a man in his own house than in a field, because a man's house is his place of most secure refuge, it ought surely to be deemed more atrocious to destroy a fetus in the womb before it has come to light."

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"When Does Human Life Begin?" The Answer of Scripture

"The **babies** [Jacob and Esau] jostled each other within her [Rebekah]" (Genesis 25:22). The Hebrew word *yeled* is the same for babies born and unborn. There wasn't a different word for the unborn, for just like the newborn child he was regarded as a little person at just an earlier stage.

"In the womb **he** [Jacob] grasped his brother's heel; as a man **he** struggled with God" (Hosea 12:3). The man Jacob who struggled with God was the same person in his mother's womb, only youngerand smaller.

In Job 10:8-12 Job gives a detailed description of God's dealings with him in his mother's womb: "Your hands shaped me and made me. Will you now turn and destroy me? Remember that you molded me like clay. Will you now turn me to dust again? Did you not pour me out like milk and curdle me like cheese, clothe me with skin and flesh and knit me together with bones and sinews? You gave me life and showed me kindness, and in your providence watched over my spirit." Notice that when Job was in his mother, when his body was yet being formed, his spirit, his immaterial soul, was already there.

"Did not he who made me in the womb make them? Did not the same one form us both within our mothers?" (Job 31:15)

David says in Psalm 139:13-16, "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... 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." Notice that even when his body was "unformed," David was already a person in his mother's womb. At five or six weeks after conception, before the earliest surgical abortions, the human body is already formed, down to hands and feet, toes and fingers. Every organ is already present. Before that time, though, David was already a person.

"Surely I was sinful at birth; **sinful** from the time my mother conceived me" (Psalm 51:5). As Romans 5 teaches, every human being has a sin nature from his very beginning. Rocks, trees and animals don't have moral natures. Only people have moral natures. The only way someone can be sinful at the moment he's conceived is to be a person at the moment he's conceived.

"Before I formed you in the womb I knew you, before you were born I set you apart; I appointed you as a prophet to the nations." (Jeremiah 1:5)

"His mother Mary . . . was found to be with child through the Holy Spirit . . [the angel said] 'what is conceived in her is from the Holy Spirit'" (Matthew 1:18-20). Jesus is referred to as existing within his mother from the time of his conception. The word translated "child," brephos, is elsewhere used of the already born Jesus, of the children people brought to Jesus that he blessed, and in Acts 7 of the children killed by Pharaoh

at birth. Every woman who is pregnant, from the earliest moments of her pregnancy, is "with child," not merely with that which will sometime become a child.

"But the angel said to Mary 'you will be with child and give birth to a son, and you are to give him the name Jesus. . . . The Holy Spirit will come upon you, and the power of the Most High will overshadow you. So the holy one to be born will be called the Son of God'" (Luke 1:30-31, 35). Notice the future tense. When the angel says these words, the Holy Spirit has not yet moved to conceive Jesus.

Luke 1:39-44 says that after the angel left, Mary "hurried" (v. 39) to get to Elizabeth. Unborn John the Baptist (in his 6th month after conception) responded to the presence of the unborn Jesus inside Mary. Allowing for travel, Jesus would have been no more than 8-10 days beyond conception when they arrived, possibly less. Implantation doesn't begin until 6 days after conception and isn't complete until 12—most likely Jesus was not yet fully implanted in his mother's womb when unborn John responded to his presence.

Theology quiz: In what city did the incarnation take place? Where did God become flesh? 99.9% of Christians would say Bethlehem, but that is wrong. The answer is Nazareth. (Or possibly outside Nazareth, during Mary's journey to Elizabeth.) Jesus was conceived about nine months before his mother and he traveled to Bethlehem.

God's view of Children who are Handicapped or Conceived by Rape

"The LORD said to him, 'Who gave man his mouth? Who makes him deaf or mute? Who gives him sight or makes him blind? Is it not I,

"Woe to him who quarrels with his Maker, to him who is but a potsherd among the potsherds on the ground.

the LORD?" (Exodus 4:11)

Does the clay say to the potter, 'What are you making?' Does your work say, 'He has no hands'? Woe to him who says to his father, 'What have you begotten?' or to his mother, 'What have you brought to birth?' "This is what the LORD says, the Holy One of Israel, and its Maker: . . . do you question me about my children, or give me orders about the work of my hands?" (Isaiah 45:9-11)

"Neither this man [who was born blind] nor his parents sinned,"

said Jesus, "but this happened so that the work of God might be displayed in his life." (John 9:3)

Jesus said, 'When you give a banquet, invite the poor, the crippled, the lame, the blind, and you will be blessed. Although they cannot repay you, you will be repaid at the resurrection of the righteous." (Luke 14:12-14)

"Fathers shall not be put to death for their children, nor children put to death for their fathers; each is to die for his own sin." (Deuteronomy 24:16)

Does the Birth Control Pill Cause

Abortions? by Randy Alcorn

Note: The following quotes come from a new full-length booklet by the same name, which carefully documents the answers to this critical question. The article is posted at the EPM website and single-printed copies of the booklet are available from EPM at no charge. Quantities of the booklet are also available at low cost. See website at http://www.epm.org/~ralcorn or call EPM at 503-663-6481.

"The Pill" is the popular term for more than forty different commercially available oral contraceptives. The Pill is used by about fourteen million American women each year. Across the globe it is used by about eighty million.

The question of whether it causes abortions has direct bearing on untold millions of Christians, many of them prolife, who use and recommend it. For those who believe God is the creator of each person and the giver and taker of human life, this is a question with profound moral implications.

Before going further, let me affirm a truth that is a foundational premise of all I am about to address: *each human being is created by God at the point of conception*. This is the clear teaching of the Bible and is confirmed by the scientific evidence. If you are not *completely* convinced of this, please stop now and read the two articles on pages 8 and 9. They both answer the question, "When Does Human Life Begin?" One gives the answer of Scripture, the other the answer of science.

Physician's Desk Reference

Contraceptives are chemicals or devices that prevent conception. A birth control method that sometimes kills an already conceived human being is *not* merely a contraceptive, it is an abortifacient.

The Physician's Desk Reference is the most frequently used reference book by physicians in America. The PDR, as it's often called, lists and explains the effects, benefits and risks of every medical product that can be legally prescribed. The Food and Drug Administration requires that each manufacturer provide accurate information on its products, based on scientific research and laboratory tests. This information is included in *The PDR*.

As you read the following information, keep in mind that implantation, by definition, *always* involves an already conceived human being. Therefore any agent which serves to prevent implantation is functioning as an abortifacient.

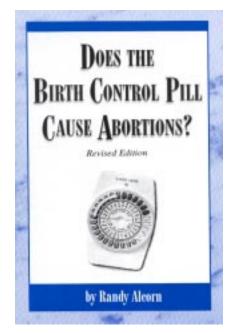
This is *PDR's* product information as listed by Ortho, one of the two largest manufacturers of the Pill, under Ortho-Cept:

Combination oral contraceptives act by suppression of gonadotropins. Although the primary mechanism of this action is inhibition of ovulation, other alterations include changes in the cervical mucus, which increase the difficulty of sperm entry into the uterus, and changes in the endometrium which reduce the likelihood of implantation. (*The PDR*, 1995, page 1775).

The FDA-required research information on the birth control pills Ortho-Cyclen and Ortho Tri-Cyclen also state that they cause "changes in . . . the endometrium (which reduce the likelihood of implantation)" (*The PDR*, 1995, page 1782).

Similarly, Syntex says this in *Physician's Desk Reference* (1995, page 2461) under the "Clinical Pharmacology" of the six pills it produces (two types Brevicon and four Norinyl):

Although the primary mechanism of this action is inhibition of ovulation, other alterations include **changes in** the cervical mucus (which increase the difficulty of sperm entry into the uterus), and **the endometrium** (which may reduce the likelihood of implantation).



Wyeth, on page 2685 of The *PDR*, 1995, says something very similar of its combination Pills, including Lo/Ovral and Ovral: "other alterations include changes in the cervical mucus . . . and **changes in the endometrium which reduce the likelihood of implantation."** Wyeth makes virtually identical statements about its birth control pills Nordette (*The PDR*, 1995, page 2693) and Triphasil (page 2743).

A young couple showed me their pill, Desogen, a product of Organon. I looked it up in *The PDR* (1995, page 1744). It states one effect of the pill is to create "changes in the endometrium which reduce the likelihood of implantation."

The inserts packaged with birth control pills are condensed versions of longer research papers detailing the Pill's effects, mechanisms and risks. Near the end, the insert typically says something like the following, which I am quoting directly from the Desogen pill insert:

If you want more information about birth control pills, ask your doctor, clinic or pharmacist. They have a more technical leaflet called the Professional Labeling, which you may wish to read. The Professional Labeling is also published in a book entitled *Physician's Desk Reference*, available in many bookstores and public libraries.

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Of the half dozen birth control pill package inserts I've read, only *one* included the information about the Pill's abortive mechanism. It's dated July 12, 1994, and found in the oral contraceptive Demulen, manufactured by Searle. Yet this abortive mechanism was *referred to in all cases* in the manufacturer's Professional Labeling, as documented in *The Physician's Desk Reference*. (Again, the full disclosure in the Professional Labeling is required by the FDA.)

What does this demonstrate? That according to multiple references throughout Physician's Desk Reference, which articulate the research findings of a variety of birth control pill manufacturers, there are not one but three mechanisms of birth control pills: 1) inhibiting ovulation (the primary mechanism), 2) thickening the cervical mucus, thereby making it more difficult for sperm to travel to the egg, and 3) thinning and shriveling the lining (endometrium) of the uterus to the point that it is unable to facilitate the implantation of the newly fertilized egg. While the first two mechanisms are contraceptive, the third is abor-

When a woman taking the Pill discovers she is pregnant (according to *The Physician's Desk Reference*'s efficacy rate tables, listed under every contraceptive, this is 3% of pill-takers each year), it means that **all three of these mechanisms have failed**. Clearly then, this third mechanism *sometimes* fails in its role as backup, just as the first and second mechanisms sometimes fail. Each and every time the third mechanism succeeds, however, it causes an abortion.

A Wealth of Scientific Evidence

As a woman's menstrual cycle progresses, her endometrium gradually gets richer and thicker in preparation for the arrival of any newly conceived child who may be there to attempt implantation. In a natural cycle, unimpeded by the Pill, the endometrium experiences an increase of blood vessels, allowing a greater blood supply to bring oxygen and nutrients to the child. There is also an increase

in the endometrium's stores of glycogen, a sugar that serves as a food source for the blastocyst (newly conceived child) as soon as he or she implants.

The statements in *The Physician's Desk Reference*, and others to follow, testify that the Pill keeps the woman's body from creating the most hospitable environment for a child, resulting instead in an endometrium that is thin and depleted, deficient in both food (glycogen) and oxygen. This deficiency may result in the child's death by starvation and suffocation. Scientifically, one does not have to have a stomach to starve or lungs to suffocate.

Typically, the blastocyst (new person) attempts to implant six days after conception. If implantation is unsuccessful, the child starves to death and is flushed out of the womb in an early miscarriage. When the miscarriage is the result of an environment created by a foreign device or chemical, it is an abortion, despite the fact that the mother neither intends it, nor is aware of it happening.

The March 1996 issue of *Fertility and Sterility* presents significant research results, then states,

These data suggest that the morphological changes observed in the endometrium of OC users have functional significance and provide evidence that **reduced endometrial** receptivity does indeed contribute to the contraceptive efficacy of OCs. (Somkuti, et al., "The Effect of Oral Contraceptive Pills on Markers of Endometrial Receptivity, Fertility and Sterility, Volume 65, #3, 3/96, page 488.)

In an extensive study, Chowdhury & Joshi point to the diminished capacity of the endometrium as part of the effectiveness of the Pill ("Escape ovulation in women due to the missing of low dose combination oral contraceptive pills," *Contraception* 1980; 22:241).

In a study of oral contraceptives published in a major medical journal Dr. G. Virginia Upton, Regional Director of Clinical Research for Wyeth International (one of the major birth control pill manufacturers), says this: The graded increments in LNg in the triphasic OC serve to maximize contraceptive protection by increasing the viscosity of the cervical mucus (cervical barrier), by suppressing ovarian progresterone output, and by causing endometrial changes that will not support implantation. ("The Phasic Approach to Oral Contraception," *The International Journal of Fertility*, volume 28, 1988, page 129.)

Dr. Goldzieher (Hormonal Contraception, page 122) says as a result of the combined Pill's action "possibly the endometrium in such cycles may provide additional contraceptive protection." Note that the author redefines "contraceptive," which historically meant something which prevents conception, yet is now used by some to include preventing an already conceived person from implantation.

The medical textbook Williams Obstetrics (Cunningham, et al, Stamford, CT: Appleton & Lange, 1993, page 1323) states, "Similar to estrogens, progestins produce an endometrium that is unfavorable to blastocyst implantation."

Drug Facts and Comparisons says this about birth control pills in its 1996 edition:

Combination OCs inhibit ovulation by suppressing the gonadotropins, follicle-stimulating hormone (FSH) and lutenizing hormone (LH). Additionally, alterations in the genital tract, including cervical mucus (which inhibits sperm penetration) and the endometrium (which reduces the likelihood of implantation), may contribute to contraceptive effectiveness.

"The Pill: How does it work? Is it safe?" (The Couple to Couple League, PO Box 111184, Cincinnati, OH, 45211) states on page 4:

When the Pill fails to prevent ovulation, the other mechanisms come into play. Thickened cervical mucus may make it more difficult for the sperm to reach the egg: however, if the egg is fertilized, a new life is created. The hormones slow the transfer of the new life through the fallopian tube, and the embryo may become too old to be viable when it does enter the uterus.

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If the embryo is still viable when it reaches the uterus, underdevelopment of the uterine lining caused by the Pill prevents implantation. The embryo dies and the remains are passed along in the next bleeding episode which, incidentally, is not a true menstruation, even though it is usually perceived as such.

A standard medical reference, Danforth's Obstetrics and Gynecology (Philadelphia: J.B. Lippincott Co., 1994, 7th edition, page 626) states this: "The production of glycogen by the endometrial glands is diminished by the ingestion of oral contraceptives, which impairs the survival of the blastocyst in the uterine cavity."

In her article Abortifacient Drugs and Devices: Medical and Moral Dilemmas (Linacre Quarterly, August 1990, page 55), Dr. Kristine Severyn states,

The third effect of combined oral contraceptives is to alter the endometrium in such a way that implantation of the fertilized egg (new life) is made more difficult, if not impossible. In effect, the endometrium becomes atrophic and unable to support implantation of the fertilized egg. . . . the alteration of the endometrium, making it hostile to implantation by the fertilized egg, provides a backup abortifacient method to prevent pregnancy.

When president of the Food and Drug Administration (FDA), Dr. J. Richard Crout said this of combination birth control pills:

Fundamentally, these pills take over the menstrual cycle from the normal endocrine mechanisms. And in so doing they inhibit ovulation and change the characteristics of the uterus so that it is not receptive to a fertilized egg. (FDA Consumer, HEW publication number 76-3024, reprinted from May, 1976.)

In 1970, J. Peel and M. Potts's *Textbook of Contraceptive Practice* (Cambridge University Press, 1970, page 8) acknowledged,

In addition to its action on the pituitary-ovarian axis the combination products ["the Pill"] also alter the character of the cervical mucus, modify the tubal transport of the egg and may

have an effect on the endometrium to make implantation unlikely.

In their book Ovulation in the Human, P.G. Crosignani and D.R. Mishell (Academic Press, Inc., 1976, page 150), stated that birth control pills "alter the cervical mucus . . . as well as affect the endometrium, reducing glycogen production by the endometrial glands which is necessary to support the blastocyst."

The 1977 sixth edition of the *Handbook of Obstetrics & Gynecology*, a standard reference work, states on pages 689-690,

The combination pill . . . is effective because LH release is blocked and ovulation does not occur; tubal motility is altered and fertilization is impeded; endometrial maturation is modified so that implantation is unlikely; and cervical mucus is thickened and sperm migration blocked.

Notice that in this case four mechanisms are mentioned, and the prevention of implantation is listed before the prevention of conception by the thickened cervical mucus.

The book *My Body, My Health* (Stewart, Guess, Stewart, Hatcher; Clinician's Edition, Wiley Medical Publications, 1979, page 169-70) states.

In a natural cycle, the uterine lining thickens under the influence of estrogen during the first part of the cycle, and then matures under the influence of both progesterone and estrogen after ovulation. This development sequence is not possible during a Pill cycle because both progestin and estrogen are present throughout the cycle. Even if ovulation and conception did occur, successful implantation would be unlikely.

Proabortionists Know I's The

If most prolifers have been slow to catch on to this established medical knowledge (I certainly have been), many proabortionists are fully aware of it. In February 1992, writing in opposition to a Louisiana law banning abortion, Tulane Law School Professor Ruth Colker wrote,

Because nearly all birth control devices, except the diaphragm and condom, operate between the time of conception... and implantation . . . the statute would appear to ban most contraceptives. (*The Dallas Morning News*, February 6, 1992, 23A)

Colker referred to all those methods, including the Pill, which sometimes prevent implantation.

Similarly, in 1989 attorney Frank Sussman, representing Missouri Abortion Clinics, argued before the U.S. Supreme Court that "The most common forms of . . . contraception today, **IUDs and low-dose birth control pills . . . act as abortifacients**" (*New York Times*, National Edition, April 27, 1989, pages 15 & B13).

By that time all Pills were "low dose" compared to the Pill of the 60's and 70's (which averaged 150 micrograms estrogen) and 97% were low dose by recent standards, with less than 50 micrograms of estrogen.

This is such well-established knowledge that the 1982 revised edition of the Random House College Dictionary, on page 137, actually defines "Birth Control Pill" as "an oral contraceptive for women that inhibits ovulation, fertilization, or implantation of a fertilized ovum, causing temporary infertility." When the Pill successfully inhibits implantation of a fertilized ovum, it causes an abortion. (I'm not suggesting, of course, that Random House or any dictionary is an authoritative source. My point is that the knowledge of the Pill's prevention of implantation is so firmly established scientifically that it can be presented as standard information in a household reference book.)

Breakthrough Ovulation & Backup Mechanisms

One of the most common misconceptions about the Pill is that its success in preventing discernible pregnancy is entirely due to its success in

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preventing ovulation. If a sexually active and fertile woman taking the Pill does not get pregnant in 97% of her cycles it does *not* mean she didn't ovulate in 97% of her cycles.

Many months the same woman would not have gotten pregnant even if she wasn't using the Pill. Furthermore, if the Pill's second mechanism works, conception will be prevented despite ovulation taking place. If the second mechanism fails, then the third mechanism comes into play. While it may fail too, every time it succeeds it will contribute to the Pill's *perceived* contraceptive effectiveness. That is, because the child is newly conceived and tiny, and the pregnancy has just begun six days earlier, that pregnancy will not be discernible to the woman.

Therefore every time it causes an abortion the Pill will be thought to have succeeded as a contraceptive. Most women will assume it has stopped them from ovulating even when it hasn't. This illusion reinforces the public's confidence in the Pill's effectiveness, with no understanding that both ovulation and conception may have not been prevented at all.

Though a woman might not get measurably pregnant in 97% of her cycle months, there is simply no way to tell how often the Pill has actually prevented her ovulation. Given the fact that she would not get pregnant in many months even if she ovulated, and the fact that there are at least two other mechanisms which can prevent measurable pregnancy (one contraceptive and the other abortive), a 97% apparent effectiveness rate of the Pill might mean only a 70-90% effectiveness in actually preventing ovulation. The other 7-27% of the Pill's "effectiveness" could be due to a combination of the normal rates of nonpregnancy, the thickening of the cervical mucus and-at the heart of our concern—the endometrium's inhospitality to the young child.

What does One Pill-Maker Say?

On March 24, 1997, I had a lengthy and enlightening talk with

Richard Hill, a pharmacist who works for Ortho-McNeil's product information department. (Ortho-McNeil and Searle are the largest birth control pill manufacturers.) I took detailed notes.

Hill was not guarded, was most helpful, and never asked me about my religious views or my beliefs about abortion. He informed me "I can't give you solid numbers, because there's no way to tell which of these three functions is actually preventing the pregnancy; but I can tell you the great majority of the time it's the first one [preventing ovulation]."

I asked him, "Does the Pill sometimes fail to prevent ovulation?" He said "yes." I asked, "What happens then?" He said, "The cervical mucus slows down the sperm. And if that doesn't work, if you end up with a fertilized egg, it won't implant and grow because of the less hospitable endometrium."

I asked him how many of the contraceptives available on the market are low dose. He said, "I don't have statistics, but I also work in a pharmacy and I can tell you the vast majority of the time people get low dose pills." He confirmed that there are some "higher dose" pills available, with 50 micrograms of estrogen instead of 20-35 micrograms, but said these were not commonly used. (Remember, even 50 micrograms is only 1/3 of the average estrogen dosage in pills of the 1960's, and is still low dose by those standards.)

I then asked Hill if he was *certain* the Pill made implantation less likely. "Oh, yes," he replied. I said, "So you don't think this is just a theoretical effect of the Pill?" (I asked this because I saw a letter from one Pill Manufacturer written to a doctor saying the effect was only theoretical.) He said the following, as I took detailed notes:

Oh, no, it's not theoretical. It's observable. We know what an endometrium looks like when it's richest and most receptive to the fertilized egg. When a woman is taking the Pill you can clearly see the difference, based both on gross appearance—as seen with the naked eye—and under a microscope. At

the time when the endometrium would normally accept a fertilized egg, if a woman is taking the Pill it is much less likely to do so.

I asked Hill one more time, "So you're saying this is an actual effect that happens, not just a theoretical one?" He said,

Sure—you can actually see what it does to the endometrium and it's obvious it makes implantation less likely. The only thing that's theoretical is the numbers, because we just don't know that.

Imagine a farmer who has two places where he might plant seed. One is rich, brown soil that has been tilled, fertilized and watered. The other is on hard, thin, dry and rocky soil. If the farmer's wants as much seed as possible to take hold and grow, where will he plant the seed? The answer is self-evident. On the fertile ground.

Now, you could say to the farmer that his preference for the rich, tilled, moist soil is based on the "theoretical," because he has probably never seen a scientific study that proves this soil is more hospitable to seed than the thin, hard, dry soil. The farmer might reply, based on years of observation, "I know good soil when I see it—sure, I've seen some plants grow in the hard, thin soil too, but the chances of survival are much less there than in the good soil."

Many more children will survive in a richer, thicker, more hospitable endometrium than in a thinner, more hostile one. In this sense, the issue isn't theoretical at all.

Several articles I read spoke of the mucus's ability to block sperm migration and presented as evidence the fact that the thickness of the mucus is visually observable. Of course, this appearance is not incontrovertible proof that it slows down sperm migration, but it is still considered valid evidence. Why would we question the validity of the endometrium's appearance?

When the Pill thins the endometrium, a fertilized egg has a smaller likelihood of survival. This means a greater likelihood of death. Without question a woman's taking the

Pill puts any conceived child at *greater* risk of being aborted than if the Pill wasn't being taken. Other than for reasons of wishful thinking, can anyone seriously argue against this?

Pill Manufacturer

Cover-up?

On July 2, 1997 I interviewed Karen Witt, who worked for Whitehall-Robins, sister company of Wyeth-Ayerst, from 1986 till August 1995. Both are divisions of American Home Products, one of the world's largest pharmaceutical companies.

Mrs. Witt was a sales representative who provided doctors with product samples and information. She worked with products such as Advil and Robitussin. When the parent company acquired Wyeth-Ayerst, sales representatives were instructed to start providing birth control samples. In their training, they were taken through a manual that included an "Oral Contraceptive Backgrounder."

The manual (I have a copy in front of me) states "the combined pill is virtually 100% effective due to a combination of the following three factors." The third of these is "Suppressed Endometrium," explained this way:

The altered hormone patterns ensure that the endometrium fails to develop to the extent found in the normal cycle. Therefore, even if "escape ovulation" should occur, the endometrium is not in a favorable state for implantation.

When she read this, Karen Witt first realized the Pill caused abortions. Mrs. Witt was also concerned about something else, which she explained:

In company meetings information on the Pill was covered in a totally different way than other products. Our training had always been open and relaxed, and we went through detailed instruction on how every product works; we were expected to explain how they worked to physicians. But the approach to the birth control pills was completely different— "don't worry about how they work, the point is they do; don't ask questions, just give out the samples."

Karen Witt went to her boss to express her concern, first about the Pill causing abortions, and second about what she saw as a directive to withhold important medical information from the physicians she dealt with. As a direct result of expressing these concerns, she claims she was fired from her job of nine and a half years.

Mrs. Witt pointed out to me something I had already discovered in my dealings with Wyatt-Ayerst. The consumer pamphlet they produce, *Birth Control with the Pill*, has a section entitled "How the Pill Works" which lists only the first two mechanisms, not the third. Though both their professional labeling and their salesperson training acknowledge the third way the Pill works, in the literature given to consumers, it is simply left out.

After numerous interactions with various people at Wyeth-Ayerst, Mrs. Witt became convinced that this was a deliberate cover-up on the part of the company—a cover-up not only from the general public, including users of their products, but a cover-up from physicians, pharmacists and other medical personnel.

Mrs. Witt said to me, "I am not at all quick to use the term 'conspiracy.' But I believe there is a clear conspiracy of silence on the part of the manufacturer about the abortive effects of the Pill."

Conclusion

In the process of research I've had countless conversations with Christians, including physicians, pastors and many others. In the full-length booklet version of this paper, I cover many other important areas, and respond to a number of questions and objections I've heard, including these:

"If this is true, why haven't I heard it before?"

"If we don't know how often it causes abortions, why *shouldn't* we take the Pill?"

"But spontaneous abortions happen frequently anyway"

"But Pill-takers aren't intending to have abortions"

"Life is full of risks—you can't avoid them all"

"Can't we just take higher dose estrogen pills?"

"Without the Pill there would be more unplanned pregnancies and therefore more abortions"

"I never knew this about the Pill—should I feel guilty?"

"How can we exercise birth control without the Pill?"

In the face of overwhelming evidence, our position on the Pill offers a great test of our true convictions. Do we *really* believe God creates every human life at the point of conception, six days before implantation begins? And will we exercise this conviction even at the cost of our personal convenience and preference?

If the church herself is committing them as a way of life, then how can we fight against chemical abortions, which are the clear direction abortion is going today?

Can God, who creates each human life at conception, fully bless the efforts of CPC volunteers and Right to Life workers and sidewalk counselors and pastors and doctors—and any of us prolife Christians—when we turn right around and use, prescribe or recommend a product that can take the life of an unborn child?

Are we consistently prolife or only selectively prolife? Do we oppose later abortions while not really caring about the earliest ones?

These are difficult questions we need to consider in our marriages, our churches, and before our Lord.

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EPM on the WEB

e've got news for you and it's on our website! We can't possibly include all the information we have available in our quarterly newsletter but you can access in on the Internet via our website.

EPM has had over 9,000 visits to our website since its inception in July 1996. Our website address is http://www.epm.org/~ralcorn

Come and visit us and be sure to sign our guestbook. Visit often as we have new articles and website links added regularly. Below is just a *small sampling* of some of the information available to you:

ABOUT EPM

Everything you've wanted to know about Eternal Perspective Ministries and more!

ARTICLES by Randy Alcorn

Strategies to Keep from Falling Sexual Purity: What You Need to Know and Do (Designed for teenagers, their parents and youth workers) Powerful Quotes from the Found-

ing Fathers
Denying the Holocaust
Euthanasia: Mercy or Murder?
Twelve Questions to Ask Before
you Give to any Organization

Two Sources of Self-Esteem: Secular and Christian

BOOKS

Specific information and excerpts from each of Randy's books.

ETERNITY

What Does the Bible Say About Heaven?

Is There Awareness in Heaven of People and Events on Earth?

Eternal Rewards

Heaven: Future Home, Present Reference Point (a sermon on heaven)

PROLIFE

Life Issues: Distraction from the Great Commission or Part of It?

Biblical Perspectives on Unborn Children

Does the Birth Control Pill Cause Abortions?

What they didn't tell me about abortion; How God changed my life, by Diane Meyer

What's Missing in This Picture? 50 Ways to Help the Unborn & Their Mothers

Partial Birth Abortion: What's the Big Deal?

Communicating the ProLife Message (especially to "prochoicers")

MISSIONS

Statistics on World Needs: Physical & Spiritual

Helping the Poor and Homeless Investing in Eternity Famine Relief

PERSECUTION

Persecution of Believers in India Remember the Persecuted

"Top 10" Nations in Persecution of Christians

Prayer Requests for the Persecuted Church

Tithing as the Minimum Standard of Christian Giving

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MONEY

Tithing as the Minimum Standard of Christian Giving

Training Your Children to Handle Money

Debt in the Bible EPM Financial Principles

PSYCHOLOGY

The Bible and Psychology Self-Love and Scripture

ETHICS

Randy's Multnomah Bible College Ethics Syllabus

Randy's Classroom Presentations on Christian Ethics

Civil Disobedience: Is it Right to Break the Law to Save the Unborn?

LINKS

One of our most popular features is our website links to over 120 outstanding Christian sites that are Randy's favorites.

NEWSLETTER UPDATE!

Many of you have asked about this newsletter and wondered if your name had been removed from our mailing list since you haven't received one for the past year. Due to a heavy schedule going back to the writing of my novel *Dominion*, I have been unable to produce the newsletter on a quarterly basis.

Just recently EPM was able to hire a ministry assistant, Kathy Norquist. Hopefully we will now be able to produce the newsletter each quarter. I'll keep writing articles and passing on items to Kathy, but she'll be able to do more of the hands-on work, along with Kristi Knifong, our layout and design expert. Thanks for your patience and thanks for saying you've missed "Eternal Perspectives."

Changing Lives in the Inner City by Karina Alcorn

"For I was hungry and you gave me something to eat, I was thirsty and you gave me something to drink, I was a stranger and you invited me in, I needed clothes and you clothed me . . . I tell you the truth, whatever you did for one of the least of these brothers of mine, you did for me." Matthew 25:35, 40

Inner City Remnant Ministries is living out Matthew 25 in Portland, Oregon. Inner City Remnant Ministries runs a drop-in center for homeless youth. David Goshorn is currently the director; he and his wife Tami-Jo have been working with the ministry since 1991.

The tasks of meeting physical and spiritual needs go hand in hand at Remnant. The organization has two main goals: sharing Christ with street kids, and motivating and empowering them to break the cycle of street life.

The drop-in center is open from 4-6 pm on Tuesdays and Fridays. Street youth 21 and under can come in for free sandwiches, juice, macaroni and cheese, cookies, and some much-needed rest and relaxation. Volunteers and staff cook the food, serve it, and then are able to sit and talk with the kids as they eat. It provides a non-threatening atmosphere for the kids and a great platform to share the gospel.

"Our strategy is developing longterm relationships" said Goshorn of Remnant's ministry style. However, "we don't see the same kids all the time. I would say about 60% move around a lot. For the kids who are in and out, we hope we can be able to provide a good witness and plant some seeds there."



By spending time consistently with the kids, Goshorn has learned a lot about street culture. "On the streets, kids basically create their own family. There is a high level of integrity within the street family, but not a lot of respect for outside authority," he observed. "I'd say about 99% of the kids do drugs and probably 90% are into prostitution."

Despite the ministry difficulties, "we have seen a number of kids get out of street life," Goshorn shared. "Some have gotten jobs, others have moved back home or gotten their own place."

And spiritual needs are getting met too; "We've seen kids get saved," said Goshorn.

Some future goals of the ministry involve more follow-up. They include providing Christian housing for the kids that accept Christ, as well as a formal discipleship program. Transitional housing for kids who want to get off the street and a permanent location used solely for the drop-in are also high on the priority list.

As a volunteer, I've seen firsthand how God is using Remnant. But the group's financial means are stretched beyond the limit. Goshorn spends fifty or more hours a week on the ministry, and is not receiving an income. All the money that comes in goes to supplies and other ministry costs. There's a lot of paperwork, fundraising and organizing that needs to be done to keep the ministry afloat, and there are simply too few people doing too many jobs.

Inner City Remnant ministries needs a support staff and regular, consistent donations to provide a modest income for that staff. If you would like more information or would be interested in supporting Remnant, please call David Goshorn at (503) 735-1449 or write to 7410 N Jordan Ave, Portland, OR 97203.

"I tell you the truth, anyone who gives you a cup of cold water in my name because you belong to Christ will certainly not lose his reward," Mark 9:41.

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