

A woman with long dark hair, wearing a white sleeveless dress, is captured in mid-air, jumping joyfully on a sandy beach. She has her arms outstretched and her head tilted back, looking up at the sky. The background is a vibrant sunset over the ocean, with the sun low on the horizon, casting a warm, golden glow. The sky is filled with soft, colorful clouds in shades of orange, pink, and purple. The overall mood is one of freedom, happiness, and empowerment.

THE  FEMINISTS FOR LIFE
OF AMERICA
AMERICAN
FEMINIST

*Breaking
Barriers*

THE AMERICAN FEMINIST®

A publication of Feminists for Life of America

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Established in 1972, Feminists for Life of America is a nonsectarian, nonpartisan, grassroots organization that seeks real solutions to the challenges women face. Our efforts are shaped by the core feminist values of justice, nondiscrimination, and nonviolence. Feminists for Life of America continues the tradition of early American feminists such as Susan B. Anthony, who opposed abortion.

Feminists for Life of America recognizes that abortion is a reflection that our society has failed to meet the needs of women. We are dedicated to systematically eliminating the root causes that drive women to abortion—primarily lack of practical resources and support—through holistic, woman-centered solutions. Women deserve better than abortion.

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Spring/Summer 2019

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WHEN A MAN STEALS TO SATISFY HUNGER, WE MAY SAFELY CONCLUDE THAT THERE IS SOMETHING WRONG IN SOCIETY—SO WHEN A WOMAN DESTROYS THE LIFE OF HER UNBORN CHILD, IT IS AN EVIDENCE THAT EITHER BY EDUCATION OR CIRCUMSTANCES SHE HAS BEEN GREATLY WRONGED.

—Mattie Brinkerhoff,
The Revolution, September 2, 1869



HASTEN THE DAY...



Last Christmas, I received the best gift. And it was sent by you. But it didn't start well.

You see, a desperate young college student had just told her mother she was pregnant. Her mother was *absolutely furious*. **It was the worst possible reaction.**

Her mother demanded the keys to the car and told her daughter to find a new place to live. **She would be on her own**—including paying for her own tuition.

Her mom (well, maybe you already guessed) had been pregnant at the same age, and she had an abortion. Now, she demanded her daughter do the same—or else.

Thankfully, the student called my sister, who advised her to go back to her mother and tell her that while she understood her feelings and was sorry for her loss when she was her age, she was going to have the baby, *her mother's first grandchild*.

During that call, my sister also remembered Feminists for Life's Women Deserve Better website and directed her to the "LEARN" section.

So this student, who was *so distraught* during the call, was able to tell her mother that there were lots of resources and support, that she *didn't* have to quit school—or have an abortion!

I credit my sister, who was the one who had built a good relationship mentoring her. She had wisdom to advise this young woman how to better communicate to her mother.

But my sister told me that "the clincher" was directing her to the "LEARN" section of WomenDeserveBetter.com. **Fear and hopelessness were replaced by hope and tangible help.**

On top of that, I had moderated an FFL Pregnancy and Parenting Resource ForumSM at her university, so she knew there was on-campus support (especially by pro-life students as well as administrators and the director of a local pregnancy resource center), or that she could transfer if she needs to be close to family.

She *can* graduate. She *can* have her baby. ***They have a future.***

Of course, I have heard many, many stories of women and men being converted to pro-life feminism over the years, and every one of them is affirming and exciting to hear.

INTRODUCTION

And we know that WomenDeserveBetter.com has been helping about 5,000 expectant moms and dads, parents, and their caregivers. But this was the **first time that I heard that a woman felt empowered to have her baby because of our work on the website and on campus.**

Her baby will be born, and yes, there is a real possibility that there will be a dad in the picture!

While this woman carries a child, we carry her secret for now. She hasn't told her classmates yet. But this semester, there will be a pregnant student on campus who won't be alone. **We are with her.**

And as her child grows, the resources on our website and on campus will grow, too. Because as Feminists for Life, we know that we care for them well after birth, not just before!

Hearing this on Christmas Day was incredibly special. As I cry joy-filled tears, I wanted to share this because you helped make this possible.

Because as we close out this school year, I wanted to let you know that a young woman is now anticipating the birth of her firstborn—rather than dreading an abortion. A little hand will curl around her mother's finger. Newborn eyes will meet with a new mom's.

Because I wanted to let you know that a mother who has been hurt by her abortion will now become a grandmother.

And because a boyfriend will become a man, a father. He will be called Dada, Daddy, Dad.

They have so much to look forward to!!

Congratulations are in order all around. Here's to happy beginnings this new year. I raise a glass to you. *L'chaim.* To life.

Because women deserve better,



Serrin M. Foster
President

A photograph of a woman wearing a black graduation cap and gown, smiling and holding a baby. The baby is wearing a white shirt and a grey striped vest. The background is dark and out of focus, suggesting an indoor setting like a graduation ceremony.

WORK: LIFE AS A STUDENT PARENT TO A WORK-AT-HOME MOM

BETHANIE RYAN

In September 2011, the last thing I wanted to be looking at was a positive pregnancy test.

The Grand Plan was that my husband and I would stay in Syracuse, New York, for three or so years, enough time for me to finish my certification to become a hospital chaplain, and then we'd move back to Missouri for our "real" life to begin. I would be a proud career woman with a burgeoning brood.

Now, I was pregnant three years early looking forward to 40 weeks of interning at the local Level 1 trauma center and with no idea how I was going to continue down that career path with a baby in tow.

My supervisor at the hospital, Rev. Terry Culbertson, came to my rescue those 40 weeks. She remembered being a young mom starting her career as a Church of God (Anderson, Indiana) pastor. She told me that she personally loved seeing me running around because it reminded her of herself in that time.

Luckily, the pregnancy was fairly easy. My body seemed to love being pregnant. A lot of the chronic issues I have were actually alleviated during my pregnancy, rather than made worse. When I arrived at the hospital every morning, I sat for a little while and ate breakfast while doing paperwork. Then I would check my blood pressure

because the doctors wanted me to keep a close eye on that. I would then waddle my pregnant body up to the floors that I would be ministering to that day.

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A lot of the chronic issues I have were actually alleviated during my pregnancy, rather than made worse.

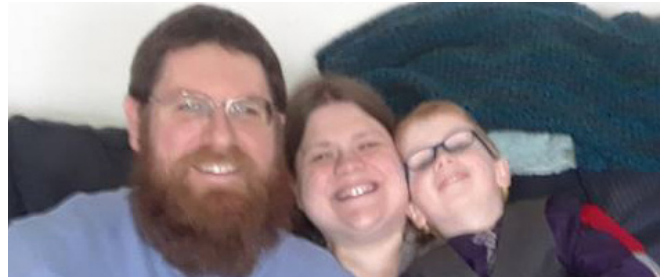
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My supervisor and I made sure that I met all the requirements for my internship well before my son was due. I finished the first part of my internship two days before I was put on bedrest for the remaining three weeks of my pregnancy.

In order to graduate with my master's, I had to do another semester of internship at the hospital. James was born in April, and I was back to the hospital the following September. Again, Rev. Culbertson was an enormous help. She allowed me to do the practical part of the internship on the weekends.

But things were changing in my life and in my priorities. Having my son unexpectedly gave me a whole other perspective on women with unplanned pregnancies.

I had always been pro-life, but now I knew firsthand how utterly life-changing and devastating an unplanned pregnancy can be. I was lucky: I was married. My husband has a good job. We are both pro-life. Many, too many, women every year cannot say the same.

After that second semester of internship at the hospital, I became a volunteer as I thought about my next steps. I saw an advertisement for interns and volunteers for Feminists for Life. I figured I was too old to apply for an internship, but I'd kick myself if I didn't try. I was accepted. That summer, with my son cuddled up on my lap, I contacted representatives to invite them to the Capitol Hill Briefing, and I helped put together the current Feminists for Life website and the old Raising Kids on a Shoestring website, now WomenDeserveBetter.com. The telecommuting internship gave me the flexibility I needed to take care of my 1-year-old son while gaining experience in fields I had previously had very little exposure to. Just as Rev. Culbertson was a good, flexible supervisor for my hospital internship, FFL President Serrin Foster was a



My internship at Feminists for Life turned into a job as College Outreach Coordinator. My schedule would remain largely unchanged until he started school. Serrin and our other staff have always been flexible in working around what I needed as a working parent.

As children grow, their needs change. James was breastfed until he was a year and a half (because he wanted to be, not because we wanted him to). He was also a grazer. He'd eat for 15 minutes and then go do something else for a little while until he was hungry again. This worked well with me working on the computer because he could eat or nap on me while I worked. I became quite the master of typing with one hand or typing in some weird positions.

As he grew, he continued to graze. Working on the computer allowed me to step away from time to time as he requested snacks that would remain half-eaten. He was awake longer and required more hands-on time while awake. Working from home, I was able to take the time when I needed to in order to play with James and take him to appointments. I got to see all of those milestones, first words, and first steps. One of the biggest lessons I've had to learn is to keep up open and honest communication with my boss. Working from home is simply not possible without that kind of communication.

Like other parents, I've had to adjust my expectations. Being a parent rarely goes according to plan. I've become less worried about his screen time because, let's face it, when you're on a teleconference, you have to keep the kid busy. They say you have to keep kids busy and active outside the home, but sometimes working from home means your child has a week off school and you never leave the house.

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Having my son unexpectedly gave me a whole other perspective on women with unplanned pregnancies. I had always been pro-life, but now I knew firsthand how utterly life-changing and devastating an unplanned pregnancy can be.

”

great, flexible boss for my internship and later employment at Feminists for Life.

My son, even at that age, was a night owl. I'd get up early in the morning and get as much work as I could get done before he woke up. I'd take care of him for a few hours, stealing away 10 minutes here or there if I needed to and I could. We'd nap together sometime in the mid-afternoon, and then the evening would usually be family time unless something needed to be done.

Like everything in life, it is a give and take. You sacrifice some time, and you find other time elsewhere. James has learned to entertain himself. His vocabulary and his reading skills are off the charts from time spent around adults and reading.

James started pre-K in September 2017. Now, I work mainly when he is at school. I see him and my husband out the door in the morning, fire up the computer, and try to stay on task until around 1:30 when it's time for me to leave to get him from school. After I pick him up, he regales me with stories of his day and has to show me

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Working from home, I was able to take the time when I needed to in order to play with James and take him to appointments. I got to see all of those milestones, first words, and first steps.

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everything in his folder. He demands around an hour of my time and then runs off to do his own thing. I go back to work until evening.

Keeping on top of everything as the mother of a school-aged child who works from home, I've fallen back in love with planners. I used one religiously for a while when my son was first born, but I fell off the bandwagon for a few years. Now, I'm back, and my planner never leaves my side.

I've learned that children are people, too. Just because I work from home, it doesn't mean that I don't have to deal with human beings every second with all their quirks and gifts. Just like adults change and have good days and bad days, children do, too! What works one day to get the job done with everyone happy won't necessarily work the next. That flexibility is important for all parents, but especially working around having a child at home.

While this is not the life I had planned for myself, it is the life I have. I love my son more than anything. I don't think anything can replace the joy of working to help others while my son naps curled up in a ball right beside me. □

“

One of the biggest lessons I've had to learn is to keep up open and honest communication with my boss. Working from home is simply not possible without that kind of communication.

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***Editor's Note:** To learn more about working from home, check out the *WORK* section of *WomenDeserveBetter.com*, including Bethanie's article, "9 Tips to Make Working from Home Work for You," and many others.



Bethanie Ryan

*Women Deserve Better Contributor
Website Coordinator*

Calling All Experts—and Those with Expertise!

If you are an expert on content we currently do not feature on *WomenDeserveBetter.com* or have a point of view that is currently not being represented and that would benefit others to learn from (such as personal finances, everyday frugal solutions, medical care, relationships, etc.), please contact info@womenservebetter.com.



Work

Find a Job

- 9 Tips to Make Working from Home Work for You
- Is CNA Work Right for You?
- Is Construction the Place for You?
- Applying for Unemployment
- Steps for Negotiating Your Salary
- Pursuing Jobs in the STEM Fields
- How to Create Your Own Portfolio
- What Is Telecommuting?
- Is This Job Right for Me?
- How to Write a Résumé
- What (Not) to Wear to an Interview
- Job Search Resources and Networking 101
- Interviewing for Jobs As a Parent
- How to Complete a Job Application
- How to Find Employment and Training Programs
- How to Interview for Jobs When Pregnant

Build a Career

- 9 Great Re-Entry Programs for Moms
- Is an Apprenticeship a Good Option for You?
- Maternity Leave and Your Career Path
- How to Ask for a Raise
- How to Start a Military Career

Take Maternity Leave

- What Is a Returnship and Why They Are Awesome
- 4 Top Tips on Taking Maternity Leave for Business Owners
- 3 Tips for Choosing When to Start Maternity Leave
- 3 Places to Find Professional Peer Support When Requesting Maternity Leave
- Returning to Work After Maternity Leave
- What Is Paternity Leave?
- 4 Financial Tips for Parents Taking Unpaid Leave
- 4 Tips About Maternity Leave
- How to Talk to Your Employer About Your Pregnancy

Thrive As a Working Parent

- 5 Tips for Going to Work While Pregnant
- How to Work with Your Employer for Family-Friendly Solutions

Know Your Rights at Work

- How to Confront Sexual Harassment
- What Are Your Rights with a Large Company?
- What Are Your Rights with a Medium-Sized Company?
- What Are Your Rights with a Small Company?



LEARN:
DISABLED ON CAMPUS

TATIANA FEDEROFF

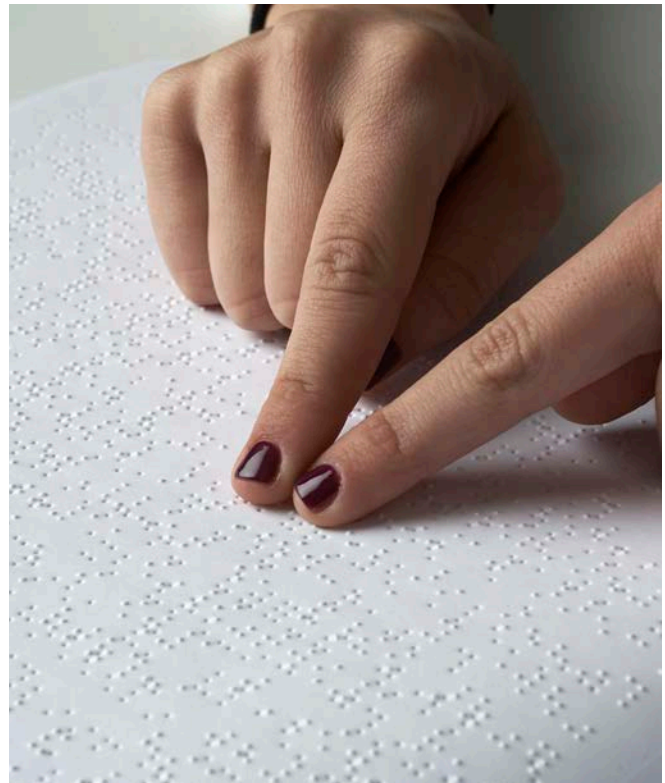
LEARN: Disabled on Campus

It's tough to not fit into the mold. In college, there is tremendous pressure to be the typical young adult: going out drinking, staying up late, having a vibrant social life full of activities and fun. But disability changes that. As someone living with Ehlers-Danlos syndrome, a painful collagen disorder that results in arthritis-like symptoms throughout my whole body, I have faced the broken molds of college life.

At Franciscan University of Steubenville, the famous Catholic and pro-life powerhouse, I've dealt with serious challenges. In the three-story academic building where most of my classes are held, there is a single accessible bathroom stall, and the elevator is behind a door that opens outward and requires a sharp turn to enter, both of which are difficult when one is in a wheelchair. An uneven floor in one of the buildings, covered by a rug, caused me to fall, tearing the fragile ligaments in my ankle. I cannot go out drinking because of my medications, cannot stay up late without my joints paying the price, and cannot fill my life with activities because it is simply too difficult to move around.

Beyond physical issues, I have had to approach academics in different ways because of my disability: Because the joints in my hands are damaged, I find it hard to hand-write assignments and need extra time to complete tests. I also must arrange my schedule around when I need to take medication, so I must avoid early morning classes.

These facts gave me pause when I began to think about going to college, until my parents discovered Franciscan University's Student Academic Support Services. The Student Academic Support Services (SASS) office has been "committed to providing the highest quality service to each student with a disability... to ensure that every student with a disability has an equal chance to participate in and benefit from university programs." SASS is led by the much-beloved director Tina Greathouse, who works with students to determine how Franciscan University can best help them. Greathouse says she views her role on the campus as dual, working with students and university organizations.



"I work one-on-one with students to provide support, training, and encouragement," she says. "This can be seen through testing accommodations (extended time, reader, scribe), classroom accommodations (note-taking assistance, ASL interpreting, preferential seating), housing accommodations (ADA room, dorm with elevator, air conditioning, parking needs), and dietary accommodations (specific dietary needs, meal plan changes)."

Greathouse also works with individual faculty and university offices to make sure accommodations are provided and federal regulations are met. She says the number of students on campus with disabilities and learning differences has increased dramatically. As the number of disabled students on campus has increased, so have accommodations and programs to enable their success. But many students do not take advantage of these accommodations because they believe negative stigmas are attached to them. These students may fear censure from others, or that disability information will be put into their college transcripts. These fears, Greathouse says, are completely false.

“The key to remember is that accommodations provide a student with a disability equal access to the learning environment. Accommodations do not give a student an unfair advantage, alter fundamental objectives of a course, or weaken academic rigor,” she says.

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Many students do not take advantage of these accommodations because they believe negative stigmas are attached to them. These students may fear censure from others, or that disability information will be put into their college transcripts. These fears are completely false.

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By law, every college or university that receives federal funding must provide accommodations to disabled students, in accordance with the Americans With Disabilities Acts of 1990 and 2008. Most universities have a disabilities services coordinator, such as Greathouse, who handles these accommodations. This person may be called the Section 504 Coordinator, ADA Coordinator, Disability Services Coordinator, or another title. In order to qualify, students must provide documentation of their disabilities. No student with a documented disability can be turned away or denied appropriate and reasonable accommodations, nor can students be charged a fee for their accommodations, according to the U.S. Department of Education. The implementation of these accommodations can have incredible effects on the college experience of students with disabilities.



Thanks to Greathouse and Student Academic Support Services, I was able to get accommodations for my physical needs, such as the ability to record academic lectures instead of writing notes and extra time to complete tests. The SASS office also allows disabled students to sign up for classes up to a week before the official add/drop period begins, so students have more access to classes that fit their unique schedules.

Some things cannot be fixed. But there are people who are fully committed to making university life as easy as possible for students with disabilities, so we can focus on the usual student woes of tight deadlines and strict teachers and worry less about whether circumstances beyond our control will interfere with our education. If you are a disabled student struggling with the mold of college life, you have the right to be accommodated so you can succeed. □



Tatiana Federoff

Women Deserve Better Contributor



Learn

Earn Your Degree As a Parent

- Khan Academy Can Help Mom and Dad As Well As Kids (for Free!)
- 7 Questions to Ask Before Enrolling in Community College
- Taking Care of Yourself While Pregnant in College
- 13 Study Tips for Parents
- Online School As an Option
- Is Transferring Schools Better for You?
- Building a Support System at School
- How to Talk to Professors About Your Pregnancy

Know Your Rights on Campus

- 10 Things Disabled Students Need to Know
- Your Rights As a Pregnant Student & Mother

Finance Your Education

- Financing Your Education
- Where to Find Help with Student Loans

Medical Care for Student Moms

- 6 Options to Consider When Preparing for Childbirth
- What Is Prenatal Care?
- 8 Tips for Choosing a Pediatrician

Housing for Student Parents

- Student Housing for Pregnant Women and Families

Child Care While You're in Class

- How to Find Child Care As a Student

NEED A GIFT FOR MOTHER'S DAY, FATHER'S DAY, OR GRADUATION?

Mom, Dad, and new grads (high school, college, or graduate school) will all appreciate a gift membership to **Feminists for Life**.





LIVE: HOW THE HEALTH CARE CRISIS COSTS THE MOST VULNERABLE

KELLAN MONROE

As lawmakers in both major parties struggle to agree on viable solutions for health care-related issues, rural American women struggle to access OB-GYNs.

Women Suffer in the South

Even as maternal mortality rates have improved globally, they have increased in the United States, according to *Obstetrics and Gynecology*. Inadequate access to medical professionals puts Georgia at the highest rate of maternal mortality and one of the highest rates of infant mortality in the United States, according to a *Maternal and Child Health Journal* study. *Atlanta Magazine* reported only 79 of 159 Georgia counties have even one OB-GYN service. In 2017, the nonprofit National Rural Health Association estimated that almost 700 rural facilities were at risk of closing, out of over 2,000. In Alabama, only 16 rural hospitals offer prenatal services.

The rest of the southeast and the Appalachian region don't fare well when it comes to women and children's health. The American College of Obstetricians and Gynecologists reported in 2014 that less than 50 percent of rural American women live within a 30-minute drive of prenatal care.

Rural Americans are less healthy in general than their urban and suburban counterparts due to a variety of factors, including poverty, ignorance about nutrition, lack

of access to care, and social stigmas about seeking help. Rural women in particular experience complicated pregnancies more frequently than non-rural women.

In 2016, the Centers for Disease Control reported that Alabama has the highest infant mortality rate in the U.S., with Mississippi ranking a close second. Besides Delaware, most of the states with the highest rates of infant mortality are located in the South or Midwest.

Substance Abuse Hurts Mother and Child

Despite a plethora of well-known research proving the high risks of substance abuse while pregnant, women (particularly in the very poorest areas) continue abusing. Nearly 16 percent of women in the U.S. have used tobacco

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Less than 50 percent of rural American women live within a 30-minute drive of prenatal care.

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while pregnant, 8.5 percent have consumed alcohol, and 5.9 percent have used illegal drugs, according to the U.S. National Library of Medicine. While these statistics

account for women nationwide, opioid abuse is particular to rural Appalachia, with high rates of opioid-related deaths—and babies born addicted—in West Virginia, Ohio, Kentucky, and Pennsylvania, according to West Virginia Public Broadcasting.

African-American Women and Immigrants

Maternal mortality affects women of every race, but African-American women especially, according to the United Health Foundation. It's a logical correlation, because they are more likely to live in poverty. According to the CDC, black women are three to four times more likely to die from pregnancy-related causes as their white counterparts.

The disparity between black and white infant mortality dates back centuries but has actually *widened* since 1850, according to *The New York Times Magazine's* 2018 feature, "Why America's Black Mothers and Babies Are in a Life-or-Death Crisis." One of the possible causes of this disparity, the article suggests, is "weathering," or the premature deterioration of black women's bodies as a result of the everyday discrimination they face, including in health care.

"Black women also disproportionately have the most abortions. Could this play a role in maternal mortality, miscarriages, and births?" asks FFL President Serrin Foster.

"The cards are stacked against black women for a number of reasons," explains Dr. Ingrid Skop, an OB-GYN who has practiced in San Antonio for more than 25 years. "In addition to being more likely to live in poverty, black women are more likely to have preexisting conditions such as obesity, hypertension, and diabetes. They may also

have a poor social support system. In 2015, the National Center for Health Statistics reported that 77 percent of black mothers were unmarried when they gave birth. Without the help of a supportive partner, these women may be less likely to access health care if they become ill. They also are more likely to opt for an abortion due to coercion or lack of resources."

The Guttmacher Institute, the former research arm of Planned Parenthood, found in 2014 that a plurality of women who receive abortions in the United States are black (28 percent), despite making up just 15 percent of all women of childbearing age.

"Studies indicate that women who have abortions may have elevated risks of premature delivery, breast cancer, and mental health disorders," Dr. Skop says. "Unfortunately, black women already have more preterm babies and are more likely to die of breast cancer, so adding the risk factor of abortion only magnifies the odds that a black woman or her child may suffer health problems or early death."

Even if rural areas could afford hospitals, many rural Americans cannot afford health insurance. The problem has persisted for decades, and recent attempts to reform health care have done little to alleviate these issues. In 1989, *The Journal of Public Health Policy* reported record rural hospital closings for the year 1987. Underfunded, understaffed, underprepared—country hospitals have always been insufficient in general. But the situation is especially bleak for pregnant women and their unborn babies, who need and deserve extra attention and ongoing care. □

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Black women are three to four times more likely to die from pregnancy-related causes as their white counterparts.

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Kellan Monroe
Women Deserve Better Contributor



Child Care

- What to Do If Your Child Is Bullied
- Helpful Hints on the Child Care Tax Credit
- 6 Types of Child Care Explained
- How to Find Child Care in Your Community
- What Are Au Pairs, and How Do They Save You Money?

Feeding Your Family

- When You Can't Breastfeed
- Your Cheat Sheet to the Formula Aisle
- How to Afford a Breast Pump
- Getting Help Paying for Your Food
- 5 Tips for Planning and Budgeting for Meals
- Should You Breastfeed?
- 8 Tips for Formula-Feeding Your Baby
- When and How to Start Your Baby on Solid Foods
- How to Apply and Qualify for School Meal Programs
- Breastfeeding 101
- 6 Common Breastfeeding Questions Answered
- Breastfeeding Pro Tips and Advice
- Will Breastfeeding Hurt?
- What Do I Need to Breastfeed?

Housing

- Where to Find Help Paying for Housing
- Tips for Furnishing Your Home
- How to Make Your Home Safe for Baby

- Your Housing Rights: Leases, Landlords, and Children
- Tips for Buying Your First Home
- When You Don't Feel Safe at Home
- 7 Questions to Ask When Considering Where to Live

Clothes

- Where to Get Free Diapers
- What Type of Diaper Is Best for Your Baby—and You?
- 6 Tips to Save on Maternity Clothing
- 5 Tips to Get Kids' Clothes for Less

Medical Care

- Predicting and Preventing Preterm Birth
- What to Expect When You Have a Premie
- What Is Kangaroo Care, and How Can It Help Premies?
- What You Need to Know About Genetic Testing
- Should I Be Worried About a Zika Infection?
- Labor and Delivery Q&A
- Do You Need a Monitrice or a Doula?
- Keeping Up with Your Prenatal Health
- 4 Tips for Dealing with Morning Sickness
- What to Expect During Labor? A Birth Doula Explains
- Whatever You Need Is OK When Dealing with Pregnancy Loss
- Vaccines 101
- Health Insurance 101

Getting Around

- How to Lease a Car
- 3 Simple Steps to Buy a New Car
- Vacationing on a Budget
- Carpooling Tips and Tools
- Tips and Tricks for Using Public Transportation

Money Matters

- 10 Things to Know About Homeschooling
- Making Your Clever Checkbook Calendar
- Money Management 101
- 8 Tricks to Handling Debt
- An Insider's Guide to Your Credit Rating
- What to Consider When Choosing Cable, Internet, and Phone
- 10 Ways to Save on Monthly Expenses

Special Needs

- How to Care for a Child with Special Needs
- How to Get Health Coverage for Your Child with Special Needs
- Best Resources for Kids with Special Needs
- How to Find Activities for Kids with Special Needs
- How to Navigate Special Education

Fun

- 3 Ways to Get Halloween Costumes Cheap
- 10 Affordable Ways to Entertain Your Kids
- Vacationing on a Budget

- Celebrating on a Budget
- 6 Budget-Friendly Ideas for Family Fun
- How to Save Money with Hobbies

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LOVE: WHEN YOUR CHILD HAS EXTRA NEEDS

CHERYL BLAKE

Molly Pannell is a former FFL staffer, past editor of The American Feminist, WomenDeserveBetter.com contributor, and mother. She and her husband, George, are the parents of six children, ages 3 to 17: three girls and three boys. Their 8-year-old daughter has a rare genetic condition that causes intellectual disabilities and serious medical conditions. Molly was kind enough to sit down with us to discuss her experience as the mother of a child with special needs:

Q. Learning that your child will have special needs can initially be quite a shock. What resources, including other parents of children with special needs, helped you to grow into your role as a parent so that you could best support your child?

A. Honestly, for us it wasn't too much of a shock. I have a sister with multiple disabilities so for me, having a family member with disabilities always seemed like a possibility.

And I must say that my daughter's needs are not "special." Her needs are the same as any other child's: education, food, clothing, medical care, friends, understanding, and love. She accesses these things in a variety of ways that are not always typical, and her medical care is definitely complex. But her needs are not special. The example of my parents and extended family definitely helped me develop as a parent of a child with disabilities. Growing

up seeing them welcome and accept people as they are laid the foundation for me to welcome my daughter and other people with disabilities. As a parent, I've also found great support and resources from other parents of children with disabilities. These parents have been there, done that, and share information on a variety of topics from the mundane (where to find a specialized toothbrush for a sensory-sensitive kid) to the emotional (coping with a bad IEP [Individualized Education Program] meeting or being worn down from constantly having to advocate for basic services for your child).

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LOVE: When Your Child Has Extra Needs

Q. What resources help you now (e.g. assistive learning curricula, assistive devices, websites)?

A. We benefit greatly from a program in our city that provides loaner hearing aids for children. Most private insurance companies do not cover pediatric hearing aids. Hearing aids cost from \$4,000 to \$8,000 for a pair. The loaner program helps children have access to sound while giving parents time to complete the often lengthy process of applying for Medicaid for a child with disabilities. (Medicaid will cover hearing aids.)

We are also so very thankful for the excellent special education coordinator and teaching staff at the public charter school our daughter attends.

Q. What is a challenge you face as a parent that could be remedied by more outside awareness and support?

A. In a very broad way, I wish other people realized just how much parents of children with disabilities carry with us. Parents of children with disabilities and medical conditions carry what a friend and fellow parent of a medically complex child calls “The List.” We carry The List with us in our heads and on our hearts at all times. It never goes away. The List contains the very possible medical emergencies that our kids could face, their allergies, their favorite foods, their medications, their physical limitations, their intellectual challenges, their favorite TV shows, worries about their future health, safety, and employment.

When parents of a typical child worry about their child falling on the playground, for example, they may worry about a skinned knee or, at worst, a broken arm. I worry about a skinned knee, a broken arm, a shunt knocked out of place (requiring a surgical replacement and long hospital stay), or an already severe brain malformation being aggravated by the fall. My fears are not dramatized or overblown. My daughter recently spent nearly two weeks hospitalized and had three surgeries all because of a tiny break in her skin that ended up exposing the tubing from her shunt.

So when a parent of a child with disabilities seems tired or overwhelmed, it's likely because in addition to all the ups and downs of parenthood, we also carry The List and all of



its scary possibilities with us. And while other people can't do anything to alleviate The List, it would be helpful for them to acknowledge that we are carrying a lot.

On a more practical level, it would be wonderful if people reacted to my daughter's frequently unusual behavior with a smile, or a polite question, instead of staring. It seems like such a simple thing, but it really goes a long way.

Although my daughter does not have mobility challenges, I have heard from parents of children who use wheelchairs that they welcome and greatly appreciate other people speaking up against abuse of parking spots reserved for those with disabilities. Again, such a simple thing, but it makes a huge difference for parents.

Q. Have you seen any positive changes in how the world interacts with those who have special needs?

A. Yes, but there is still so much work to be done!

Q. What are the joys of having a child with special needs?

A. Oh, gosh! So many! My daughter brings joy everywhere she goes. She has given our entire family the gift of accepting and loving people as they are. Our daughter also has a zany sense of humor, which has led to many laughs around the dinner table.

Q. You are a caretaker of your child in a special way. What are some things your child has taught you in return?

My daughter is strong, resilient, and hard-working. She doesn't let challenges get in her way. Her unique perspective reminds me to be curious about the world.

Q. Many expectant parents, when they learn that they will have a child with special needs, are encouraged to abort and “try again.” Do you have any encouragement for parents in such a situation?

A. I would encourage parents to remember that they do not have to make a decision immediately. I have heard many stories of doctors who give parents a prenatal diagnosis of disability and immediately offer to schedule an abortion. Parents, take time. This is huge news, and you do not need to make a decision immediately! If you can, meet some people who have the disability your baby has. Meet their parents, families, teachers, friends. These people can give you a more accurate picture of what their actual lives are like. If you can't meet in person, do it online.

Q. As pro-life people, we believe all life is precious. But what can the pro-life movement do to help better the lives of children with special needs and those who take care of them?

A. First, realize that Medicaid is not a dirty word. Seriously, so many families would be financially ruined by the costs of surgeries, hospitalizations, therapies, equipment, etc. without Medicaid and the Katie Beckett waiver program.

Hosting a pro-life speaker on your campus or in your community? Make sure ASL interpretation is available. Make sure the building and the event space are wheelchair accessible.

Respect the individuality of people with disabilities. Include them. Ask for their opinions.

Reach out to parents of children with disabilities and ask if they have specific needs you can help with.

Finally, lawmakers were able to work across party lines just last year to pass the RAISE Family Caregivers Act, which will require the federal government to develop a

national strategy to address the needs of family caregivers, including those supporting people with developmental disabilities. We can do this at every level, starting in our own communities. □



Cheryl Blake

Women Deserve Better Contributor

SUBMIT YOUR STORY!

We value all perspectives:
working moms, stay-at-home moms,
adoptive moms, birthmoms, foster
moms, and of course, dads!

If you have helpful information
or insights that could help other
pregnant women, mothers, and
birthmothers, please contact us at
info@womensdeservebetter.com.

We want your voice!!

A young girl with voluminous, curly brown hair is smiling warmly at the camera. She is wearing a white long-sleeved top. Her hands are being held by an adult's hands, which are visible from the left side of the frame. The adult is wearing a light blue sweater and dark blue jeans. The background is a soft, out-of-focus light color.

FOSTERING LOVE

ALANNA MORGAN

A young child is sitting on the floor crying in the middle of the aisle of a grocery store. Quickly, you leave your cart and drop the cereal you had picked up. Scooping the child into your arms, you pick her up and walk through the next aisles trying to find her parents. When this doesn't work, you walk to customer service holding her while they call her parents over the intercom. The child has left a stain from her tears on your shirt's shoulder, but you keep rocking and holding the child until a worried parent arrives. Regardless of what you wanted or needed to buy at the store or where you were racing off to next, you did not leave the child crying in the aisle. A child needed you, and you helped her.

Right now, over 100,000 children in foster care are waiting to be adopted. That is enough to fill the largest football stadium in the United States. An additional 300,000 children are in foster care in desperate need of a loving temporary home, which unfortunately is not always available. In 2016, **over 50,000 children were placed in group homes and institutions.**

Kathleen Domingo, the Director of the Office of Life, Justice and Peace for the Archdiocese of Los Angeles, shared at last summer's National Forum on Foster Care how she visited an old, dark, grimy Social Services office and recalled how the employees had resorted to pushing all the desks against the wall to line the rooms with cribs for infants because there was no place for them to go. **Eighteen percent of children in foster care are under 1 year old.** In addition to the difficulty of finding them a home, Domingo says these children often face multiple forms of trauma. It is in their homes they are trying to escape and often in the shuffle from home to home that they seek in refuge.

In addition to being removed from their home, children are often separated from their own siblings. The Children's Bureau records that approximately two-thirds of the children in foster care have a sibling in care. Children's Rights reports that in 2013, **60 to 73 percent of sibling groups did not live in the same placement as their siblings.**

According to the National Foster Youth Institute, more than **20,000 children age out of the foster care system every year.** The impact is staggering:

- 20 percent of these children become homeless instantly
- 25 percent will not graduate from high school or pass their GEDs, and less than 3 percent receive college degrees
- 25 percent have PTSD
- 50 percent will develop substance dependence
- 50 percent will be gainfully employed by 24
- 60 percent have been convicted of a crime
- 70 percent become pregnant before they are 21

FFL President Serrin Foster has described the trauma her father endured as a child when an abusive foster parent waterboarded and starved him emotionally and physically; even as an adult, he could no longer go in bodies of water. Thankfully, he was later placed with a loving family who reported that he would go to bed hiding food, not knowing if he would be out on the street again in the cold in summer clothing.

"My dad was a real foster child during the Great Depression. Improvement is long overdue. Feminists for Life of America has worked with the late, great Gov. Bob Casey of Pennsylvania, along with Rep. Chris Smith, Sargent Shriver, Ambassador Mary Ann Glendon, and others to make adoption of the so-called 'unadoptables' a reality for families. But now it is time for each of us to think of what we can do—one couple, one person at a time," Foster says.

What Can You (Realistically) Do?

There is a desperate need for loving homes, whether temporary or permanent, for these children. To foster a child, there is no requirement to be wealthy, married, a homeowner, or a stay-at-home parent. A foster parent should provide a stable and loving home, whether it is for a few days or a few years. Age minimums are between 18 and 25 years old, depending on the state.



Other requirements include being a “team player” with your family and a child’s welfare worker, completing an orientation or training, passing a background check, home study, and an income verification.

Another option is to become a Court Appointed Special Advocate (CASA) for young people who age out of foster care. Young adults can opt into the CASA program to gain a special advocate or mentor. Maybe the young person has received financial assistance to attend school but needs a place to sleep during breaks. Learning to cook, do laundry, or how to budget and getting help applying to college are just a few things someone in CASA can do.

To become a foster parent, you can reach out to both public and private local agencies near you.

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There is more than one way to make a difference in the life of a foster child, however. Consider donating the old high chair you don’t use anymore to new foster parents, cooking dinner for a foster family on a busy night, or carpooling and providing rides home from school or to sibling meetings for foster children.

You can also contribute to an organization that helps foster children. An example of this is the Suitcase Project by the Treehouse Foundation. When children are placed into foster care, they are given a single garbage bag to pack up all their belongings and lug with them from house to house. The Suitcase Project aims to “restore their hope and dignity” by providing a suitcase or duffel bag for the child. This gift can remind a child how she is worthy of respect and how even though you do not know her, there is someone out there who values and cares about her.

Right now, there is a child who needs you. Now that you see her, how will you help? □



Alanna Morgan
Author



Love

Fathers

- 7 Reasons Why Dad Needs to Stay Around
- Fathers Talk About Becoming a Dad
- 8 Tips to Help Dad Be a Dad to a Newborn
- How to Tell Him He's Going to Be a Dad
- Fatherhood on the Brain
- What You Need to Know About Paternal Support
- When Paternal Involvement Isn't an Option

Your Parents

- How to Work with Grandparents
- How Do I Tell My Parents I'm Pregnant?

Adoption

- Should YOU Become a Foster Parent?
- 4 Considerations for Prospective Foster Parents
- 8 Tips When Choosing International Adoption
- An Adoption Journey of Openness and Authenticity
- Best Resources Regarding Adoption
- What is Semi-Open Adoption?
- Pros and Cons of Open Adoption
- What You Need to Know About Closed Adoption
- What Is Domestic Adoption?
- How to Adopt Internationally
- How Can Tax Benefits Help When Adopting
- Your Rights As a Birthmother in the Workplace

Support Networks

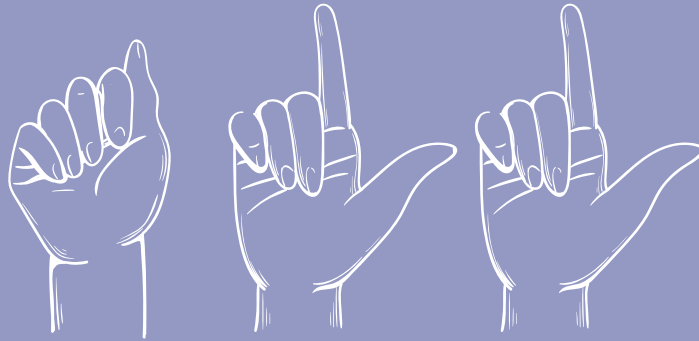
- What to Expect When Raising a Multiracial Child
- Have You Heard About Financial Abuse?
- Why Friendship Matters (and How That Changes As a Parent!)
- Why Friendship Matters (and How That Changes While Pregnant!)
- When You Need to Call for Help: Domestic Violence
- Find Your Village
- How to Work with Grandparents
- Do You Know the Signs of Intimate Partner Violence?
- 8 Tools for Coping with Miscarriage
- What to Do If You Have Been Sexually Assaulted
- Whatever You Need Is OK When Dealing with Pregnancy Loss
- How to Get Help If You Are Being Trafficked



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HEAR THE DEAF

JOYCE MCCAULEY-BENNER

No matter where you go or what service industry you interact with, communication is a necessity—even in these modern times of automation. So imagine needing a service or simply trying to enjoy a coffee or meal, and no one understands you. Even worse, the resources available to meet your needs are slim.

This is the reality of many in the Deaf* community. Often, the Deaf community is left out of translation services, which primarily focus on spoken languages. Some do read lips, which is helpful, but not entirely accurate. Some resort to writing notes back and forth, which gets frustrating and exhausting for all parties. The end result is that many people in the Deaf community are left isolated and either unaware or too deflated to apply for services of any kind.

As a supervisor of a utility assistance program, I discovered this issue firsthand. We had no one on staff who knew American Sign Language—which is an official language—but we had a handful of deaf clients who would apply

for our programs using the aforementioned methods. However, many others in our community were simply not accessing much-needed—and qualified-for—benefits.

I learned about a pilot program that a midwestern utility company was starting that utilized **Video Remote Interpreting (VRI)**. Essentially, this involves the service provider having a tablet/iPad with wireless connectivity that can connect any time to a live interpreter. The client/customer is then able to ask questions and provide feedback. **In the same way that anyone who speaks a different language can get translation services in real time, this technology opened the doors to this vulnerable population feeling welcomed, empowered, and valued.**

The pilot was a huge success for the company, as it was able to reach more households to increase energy efficiency, install safety products, and educate its customers on other available programs. The company was surprised by how many people it was missing before



this was implemented. Overall, the community was strengthened because everyone was safer and included.

While not every business or nonprofit may be able to set up this exact technology, it should at least spark the conversation. How are we going to reach those who are missed? Do we even know what segments of the population we are missing? What is the best way to begin problem-solving? Ask the people directly affected. Our job is to be inclusive, making sure our decisions are made with diverse expertise. The Deaf community surrounding the utility company offered to play a lead role in the program once they knew they were being serviced and welcomed. They provided some of the referrals to the technology and helped spread the word. The partnership has only grown.

I took the lessons learned here back to my own workplace so we could start our own taskforce. I was especially impressed listening to the deaf customers share their experiences. It was profound to see how being treated with respect and having their needs met impacted them.

Video Remote Interpreting can also assist the Deaf and hard of hearing in other workplaces, schools, and medical settings, including doctor’s offices, hospitals—and pregnancy resource centers.

No matter in what ways we strive to help women, families, children, and all in our communities, we should always begin with dignity and respect—and hopefully end with breaking barriers. □

****Editor’s Note:** When capitalized, “Deaf” refers to the broader community of those who cannot hear, and when not capitalized, “deaf” refers to the adjective describing that a person or persons cannot hear.*



FFL Speaker
**Joyce
McCauley-Benner**

Joyce McCauley-Benner presents “**Slaves Among Us: Sex Trafficking in the U.S.**” and “**Victory Over Violence,**” her personal story. For the past 15-plus years, Joyce has worked as an advocate for vulnerable populations, including sex trafficking victims, domestic violence victims, and low-income families.

To have Joyce speak at your next event, please contact us at info@feministsforlife.org.

From Intern to Chair of the Board



In spring of 2015, I was volunteering at a local pregnancy resource center in Pennsylvania called AAA Life Services. The executive director at the time heard that Feminists for Life of America President Serrin Foster was coming to Clarion University's campus and asked me to attend her landmark speech, "*The Feminist Case Against Abortion.*"

This was when I first learned that the original feminists, like Susan B Anthony, Elizabeth Cady Stanton, and Alice Paul, were pro-life. They believed in a world where women had equal rights and a strong voice in society, but not at the compromise of their own motherhood or family.

I was inspired to learn that Feminists For Life was working to continue this pro-woman, pro-life legacy. I was also heartened to hear that they believed abortion is a reflection that our society has failed to meet the needs of women.

So as president of our pro-life student group, I invited Serrin to return to Clarion, this time to moderate a panel of 16 administrators, community service providers, and a student mom for an FFL Pregnancy Resource ForumSM. In *two hours*, we developed a plan to provide better resources on campus for pregnant and parenting students.

During the summer of 2016, I interned with Feminists for Life, working on articles that would ultimately comprise our new WomenDeserveBetter.com website. That summer, I also staffed FFL's table at the first Pro-Life Women's Conference, led by Abby Johnson.

That same summer, I also had the opportunity to work on FFL's Annual Capitol Hill Intern Briefing and then again in 2017, when I spoke to students to encourage them to go back to their colleges and universities and try to assess the needs for their pregnant and parenting students.

Since November 2017, I have served on FFL's national Board of Directors. Last year, I was honored to share our College Outreach Program at the March for Life Youth Rally, and this past year, I helped to distribute FFL materials at the March for Life Expo. Then Serrin and I went onstage with other pro-life leaders at the March for Life in Washington D.C. The next weekend, I was the final speaker at the Erie March for Life.

Now, it is my great honor to serve as Chair of the Board.

As we approach the 2020 Centennial Celebration of the 19th Amendment (aka the Susan B. Anthony Amendment), we have another celebration of our own.

Serrin started at FFL on 4.4.94. This year, we celebrate 25 years of truly impressive accomplishments under her leadership. She thanks each of you for making this possible, and she is asking each of us to stretch a bit to support these much needed projects.

I ask you now to continue to redouble your effort as we remain dedicated to systematically eliminating the root causes that drive women to abortion.

Because you and I are the ones making Women's History now.

Kara A. Sorenson
Chair of the Board

SERRIN'S SILVER ANNIVERSARY

W I S H L I S T

There is nothing Serrin wants more than for the staff to be equipped to fulfill our mission in our lifetime so that children will have theirs and women have the resources and support they need and will no longer feel driven to suffer abortion. Please join the Board of Directors in helping us **make women's history!**



- Introduce 25 people to Feminists for Life through your favorite social network.
- Start or increase your monthly giving by \$25.
- Give \$250 to sponsor a speaker to travel to D.C. for our Annual Capitol Hill Intern Briefing.
- \$2,500 could help us design and print our new FFL philosophy or Women Deserve Better brochures, develop our new website, or pay for our participation at the Pro-Life Women's Conference.
- Host a gathering in your home or community with 25 of your friends and family as part of the 2020 Centennial Celebration and in support of WomenDeserveBetter.com.
- \$25,000 Centennial Sponsor for transit signs and other ads to inform the general public and organize a magnificent celebration!

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