Project Rachel Ministry
A Post-Abortion Resource Manual for Priests and Project Rachel Leaders

2009 Edition

Committee on Clergy, Consecrated Life, and Vocations
Committee on Pro-Life Activities
United States Conference of Catholic Bishops

United States Conference of Catholic Bishops
Washington, D.C.
The document *Project Rachel Ministry: A Post-Abortion Resource Manual for Priests and Project Rachel Leaders* was developed as a resource by the Committee on Clergy, Consecrated Life, and Vocations and by the Committee on Pro-Life Activities of the United States Conference of Catholic Bishops (USCCB). It was reviewed by the committee chairmen, Cardinal Seán O’Malley and Cardinal Justin Rigali, respectively, and has been authorized for publication by the undersigned.

Msgr. David J. Malloy, STD
General Secretary, USCCB
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In Ramah is heard the sound of moaning, 
of bitter weeping!
Rachel mourns her children, 
she refuses to be consoled because her children are no more.
Thus says the Lord:
Cease your cries of mourning, 
wipe the tears from your eyes.
The sorrow you have shown shall have its reward... 
There is hope for your future.

Jeremiah 31:15-17

My daughter, know that My Heart is mercy itself. 
From this sea of mercy, graces flow out upon the whole world. 
No soul that has approached Me has ever gone away unconsolated. 
All misery gets buried in the depths of My mercy, and every saving and sanctifying grace flows from this fountain... 

... . Sooner would heaven and earth turn into nothingness than would My mercy not embrace a trusting soul.

Diary of St. Maria Faustina Kowalska, 1777
The Popes Speak to Women
Who Have Had Abortions

The Church is aware of the many factors which may have influenced your decision, and she does not doubt that in many cases it was a painful and even shattering decision. The wound in your heart may not yet have healed. Certainly what happened was and remains terribly wrong. But do not give in to discouragement and do not lose hope. Try rather to understand what happened and face it honestly. If you have not already done so, give yourselves over with humility and trust to repentance. The Father of mercies is ready to give you his forgiveness and his peace in the Sacrament of Reconciliation. You will come to understand that nothing is definitively lost and you will also be able to ask forgiveness from your child, who is now living in the Lord. With the friendly and expert help and advice of other people, and as a result of your own painful experience, you can be among the most eloquent defenders of everyone's right to life. Through your commitment to life, whether by accepting the birth of other children or by welcoming and caring for those most in need of someone to be close to them, you will become promoters of a new way of looking at human life.


The Church, after the example of her Divine Teacher, always has the people themselves before her, especially the weakest and most innocent who are victims of injustice and sin, and also those other men and women who, having perpetrated these acts, stained by sin and wounded within, are seeking peace and the chance to begin anew.

The Church's first duty is to approach these people with love and consideration, with caring and motherly attention, to proclaim the merciful closeness of God in Jesus Christ. Indeed, as the Fathers teach, it is he who is the true Good Samaritan, who has made himself close to us, who pours oil and wine on our wounds and takes us into the inn, the Church, where he has us treated, entrusting us to her ministers and personally paying in advance for our recovery.

Pope Benedict XVI, Address to an International Congress on “‘Oil on the Wounds’: A Response to the Ills of Abortion and Divorce” (April 5, 2008), www.vatican.va

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Foreword

In his 2009 homily on the Feast of Sts. Peter and Paul, Pope Benedict XVI soberly cautioned that “without the healing of souls, without the healing of man from within there can be no salvation for humanity.” How essential then to the mission of the Church are the pastoral and apostolic activities that draw women and men burdened by the sin of abortion closer to God's merciful heart. It is no exaggeration to say that the Church’s ministry of healing and reconciliation after abortion is at the heart of the Church’s mission at this time in her history.

Many great saints marveled at the mercy of God. The Curé of Ars, St. John Vianney, the patron of priests in whose memory this Year for Priests is being observed, understood well this great treasure of God. In his “Letter Proclaiming a Year for Priests,” Pope Benedict writes, “In his time the Curé of Ars was able to transform the hearts and lives of so many people because he enabled them to experience the Lord's merciful love. Our own time urgently needs a similar proclamation and witness to the truth of Love: Deus caritas est.”

St. John Vianney would often say, and Pope Benedict affirms in his Letter, that “the priesthood is the love of the heart of Jesus” and that “without the priest, the passion and death of our Lord would be of no avail. It is the priest who continues the work of redemption on earth.”

Priests are therefore central to post-abortion ministry. Through the Sacrament of Reconciliation, they alone can bring the unconditional love and mercy of Christ to those broken by sin. Through the sacrament and pastoral counseling, priests help to restore spiritual, emotional, and mental health to those wounded by the sin of abortion and to assist them on the path of conversion and healing. The Catholic bishops of the United States, in their very first Pastoral Plan for Pro-Life Activities (1975)—which was developed in response to the legalization of abortion nationwide—committed “the pastoral resources of the Church” to “the specific needs of . . . those who have had or have taken part in an abortion” (no. 6). The bishops stressed in that document that “it is important that we realize that God's mercy is always available and without limit, that the Christian life can be restored and renewed through the sacraments, and that union with God can be accomplished despite the problems of human existence” (no. 24).

Project Rachel—a network of healing in the heart of the Church—was founded in 1984 by Vicki Thorn, then the diocesan pro-life director for the Archdiocese of Milwaukee. As a diocese-based ministry, Project Rachel is a network of specially trained priests, counselors, and laypersons who provide a team response of care for those suffering the aftermath of abortion. Depending on diocesan resources, support groups and retreats may be offered in addition to individualized care. More than 150 dioceses have programs of post-abortion ministry, most often called Project Rachel. The ministry has expanded into Canada, Latin America, Australia and New Zealand, Europe, and Asia.

The first edition of Post-Abortion Ministry: A Resource Manual for Priests was published in 1999. New material in this revised edition addresses the spiritual, emotional, and psychological impact of abortion on the fathers of aborted children, on the grandparents of these children, and on others involved in the abortion decision or hurt by the loss of the child, such as other family members, including siblings.

 Except where noted, all papal excerpts come from the Vatican Web site: www.vatican.va.
A new section (Five) proposes a model for diocesan post-abortion ministry and includes detailed guidelines on how to develop and strengthen the diocesan ministry. Periodic updates will keep Project Rachel leaders informed of best practices for training priests, counselors, team members, and office volunteers and for promoting awareness of the abortion aftermath and of the opportunity to find God's peace. It is our profound hope that the distribution of this resource manual in every diocese of the United States to all ordained ministers, as well as to all the consecrated and laypersons involved in post-abortion ministry, will ensure that the fullness of Christ's mercy is proclaimed and available to those who have been wounded spiritually and emotionally by participation in an abortion. In this Year for Priests, let us make the prayer of St. Claude de la Colombière, SJ, the spiritual director of St. Margaret Mary, our own:

Lord, I am in this world to show Your mercy to others.
Other people will glorify You
By making visible the power of Your grace
By their fidelity and constancy to You.
For my part I will glorify You
By making known how good you are to sinners,
That Your mercy is boundless
And that no sinner no matter how great his offences
Should have reason to despair of pardon.
If I have grievously offended You, My Redeemer,
Let me not offend You even more
By thinking that You are not kind enough to pardon me. AMEN. 3

Cardinal Seán O'Malley
Chairman
USCCB Committee on Clergy,
Consecrated Life, and Vocations

Cardinal Justin Rigali
Chairman
USCCB Committee on
Pro-Life Activities

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SECTION ONE

Mothers
Understanding Abortion’s Aftermath
for the Mother of the Aborted Child

On average, abortions are performed more than 3,000 times a day in the United States. Since 1973, more than 50 million children have been destroyed by abortion. While some of their mothers report relatively little trauma following abortion, none come away truly unscathed. For many, the experience is devastating, causing severe and long-lasting emotional, psychological, and spiritual trauma. Every abortion loss can also have an impact on the child’s father, grandparents, and siblings, as well as the mother’s friends and even her future spouse and children.

Evidence of post-abortion trauma that lasts for decades, once solely anecdotal, has now been verified by psychologists, professional counselors, academic researchers, and those involved in post-abortion ministry. Citations to leading journal articles measuring dysfunction after abortion can be found in the “Resources” section of this manual.

It is important to remember that abortion did not begin with Roe v. Wade. That decision simply made abortion legal throughout the United States. Priests encounter many elderly women who had abortions during the Great Depression and World War II. These women may appear agitated as death approaches. When called to minister to someone like this, it is good pastoral practice to say, “There is nothing God cannot forgive, not adultery or abortion . . .” and name some other sins. By mentioning abortion, you have given her permission to unburden her soul.

The meaning and impact of an abortion may change over the course of a woman’s life. It is impossible to predict when abortion-related problems will prompt a woman to seek help. Some women call Project Rachel or other programs almost immediately after an abortion. Often they are in great turmoil but describe themselves as “numb.”

Some women seek counseling and the Sacrament of Reconciliation when they are ready to become mothers or when they experience another pregnancy.

Other women may confront the loss when they are faced with infertility, a subsequent pregnancy loss, a severe illness, or the death of someone close to them, especially another child.

Others may not recognize the loss until their friends are becoming grandparents or they have reached old age or are preparing to die. It is important to be aware that dying women may be carrying a heavy burden of guilt from involvement in abortion, a burden they have difficulty confronting and confessing.

It is impossible for a woman to forget any of her pregnancies, even though she may be in denial as to how many abortions she has had. Research has shown that women carry cells from every pregnancy they have experienced, apparently for the rest of their lives.

In today’s world, it is widely acknowledged that traumatic events can cause considerable emotional injury and overwhelm a person’s ability to cope with the pressures of life. Abortion is often described by women and men as a traumatic loss; as a result, prolonged and unresolved grief and other post-traumatic problems can occur. The intention of using the term “post-abortion trauma” is not to label or encourage stigmatization, but rather to acknowledge how difficult healing from an abortion can be for some, and to affirm their suffering. Traumatic loss can also be experienced by fathers, grandparents,
and other family members. Grief and loss need acknowledgment, expression, time, compassion, and education for healing to be possible.

Grief in the aftermath of abortion is normal. It is the grief of a mother who has lost a child in a traumatic and unnatural fashion. Some women, especially young women, may seek help for “what they did” and may not yet be ready to acknowledge their grief and their loss of a child. Providing these individuals an opportunity to talk with a compassionate and aware Project Rachel priest or counselor can open the door for them to address their feelings about their abortion. It is always important to meet the post-abortive woman where she is, rather than where the caregiver thinks she should be.

With so many millions of abortions occurring for so many years, it is increasingly clear that many individuals have either experienced an abortion first-hand or know of a partner, family member, or friend who has aborted. The negative psychological aftermath of abortion is now recognized around the world. The myth that abortion’s aftermath is a result of “Catholic guilt” or pro-life propaganda is fallacious. Many women and men who have no faith have recognized the enduring and painful loss of their child from abortion. Their grief and suffering are not religion-based. This is shown by the grief responses of women in Japan, where Catholics represent only about 0.4% of the population and most of the population is Buddhist. In the absence of pro-life “propaganda,” their need for forgiveness and reconciliation with their unborn child has been strong for decades, and it continues to remain so.

While abortion supporters in the United States have tried to ignore the lived truth of how abortion can negatively impact women’s lives, today they too are coming to realize that some women do in fact need help following an abortion.

Every woman exhibits her own unique cluster of grief symptoms. The following are some of the commonly reported manifestations:

- Guilt and shame
- Grief that she cannot share
- Depression and low self-esteem, sometimes to the point of becoming suicidal
- Withdrawal and/or alienation from partner/spouse, family, and friends
- Fear that God will punish her, or is punishing her, for committing the “unforgivable sin”
- Eating disorders, self-punishing behaviors such as “cutting” (deliberate self-harm)
- Sexual dysfunction, hypersexuality, or loss of sexual interest; problems with intimacy
- Problems bonding with her other children or subsequent children, including being overprotective, emotionally distant, unavailable, or abusive
- Deep and unrelenting anger at herself, her partner/spouse, family, friends, abortion provider, even God
- Sleep problems, including abortion-related nightmares, flashbacks, or “hearing” sounds of a baby crying
- Alcohol and drug dependency used for self-medication

“If it weren’t for Project Rachel, I would still be crying, daily. My Decision was the first thought that entered my head when I would wake up in the morning. My Decision reminded me that although I could move through my daily routine, I was not allowed to enjoy funny movies or special moments with my family. My Decision would literally stop me mid-laughter. I did not deserve to laugh. I had committed an unforgivable act.”
• Desire for a “replacement” baby, rapid repeat pregnancy, and increased risk for subsequent abortion
• Anniversary reactions of grief or depression on the date of the abortion or the baby’s expected due date
• Anger or avoidance when conversations turn to babies or abortion
• Involvement in the pro-choice movement or an unhealthy or imbalanced involvement in the pro-life movement
• Workaholism

Stress and fear can play a large part in a woman’s abortion decision. Some women describe being in an almost altered state of mind at the time of the decision and during the abortion. Isolated, fear-filled, and disbelieving that they can and should seek help from those who love them the most, many women make abortion decisions without consulting others. At the abortion clinic, their fears may be reinforced when they are encouraged to make an immediate decision. Often there is little or no discussion of alternatives, insufficient time offered in “counseling,” pressure to proceed, and insufficient and inaccurate disclosures about the physical and psychological safety of abortion.

When women are pregnant and frightened, the instinct for self-preservation takes over. The pregnancy may be seen as a life-threatening problem, and pregnant women who feel this way will do whatever is necessary to escape the problem. It is in this mode that many women seek abortion. Later, when reality sets in, they may be puzzled and even horrified that they could have had an abortion. Women who experience this sort of stress reaction may be more likely to abort subsequent pregnancies. Nearly one out of two abortions performed today are repeat abortions.

The scientific evidence supporting abortion as a traumatic stressor with adverse outcomes has dramatically increased in the last decade. Data from two of the most scientifically sound studies (Fergusson et al., 2006, 2008) have demonstrated that abortion significantly increases mental health risks for young women:

• 27% of women who aborted reported suicidal ideation, a rate four times greater than for never-pregnant women and more than three times greater than for women who delivered.
• There was a 61% increased risk of suicidal ideation associated with abortion.
• There was a 31% increased risk of major depression associated with abortion.
• 42% of the young women who aborted reported major depression by age twenty-five.

Other large-scale scientifically rigorous studies affirm similar increased risks for adult women:

• Women with an abortion history are nearly three times as likely as their peers without an abortion experience to report significant depression (Pedersen 2008).
• The suicide rate is nearly six times greater among women who aborted compared with women who delivered (Gissler et al. 1996, 2005).
• Suicide risk is 154% higher among women who aborted compared with those who delivered (Rardon et al. 2002).
• Abortion increases the risk of developing bipolar disorder by 167% and major depression by 45% (Coleman et al. 2009b).
Given the above research findings, it is appropriate for the priest, counselor, or Project Rachel team member to inquire about the woman’s post-abortion feelings; high-risk behaviors she may be undertaking; feelings of hopelessness, shame, or suicidal thinking; and her overall functioning. Be alert to comments that she “wants to be with her baby.” This could indicate suicidal intent, in which case you would want to refer her immediately to a mental health professional.

One of the most important gifts you can give the post-abortive woman is listening compassionately, asking questions sensitively, displaying your understanding of the pain that abortion can cause, and building a relationship lifeline for hope and change. There is no greater gift for a traumatized and isolated individual struggling in the currents of self-loathing, grief, sadness, and guilt. In doing so, you walk in the footsteps of the Divine Healer and bring his love and mercy.
The Recently Aborted Woman

For many years, recently aborted women were hesitant to approach Project Rachel for help. Some were in denial, others were emotionally numb, still others may have just felt relief. More often now, the recently aborted woman may be seeking help within days of her abortion. This can be very beneficial for her and help prevent years of suffering.

For some women, the trauma of abortion may not surface for months or years. For others, it may surface on the anticipated due date.

It is not unusual for a woman to attempt to become pregnant again within a year following her abortion. This rapid-repeat pregnancy may be an attempt to undo the traumatic abortion by compulsively reenacting the same circumstances that led to the abortion with the hope of making a choice to keep her child. Sadly, this scenario often deteriorates into another abortion and increased feelings of failure. If the woman seeking your guidance mentions a desire for a replacement pregnancy, assure her that it is a normal desire, but that she needs to first attend to healing her own feelings of grief and loss before thinking of becoming pregnant again. Other women may feel pressured to become pregnant as a means of feeling loved and secure in their primary relationship. Too often, a rapid-repeat pregnancy results in another abortion and the double loss of her relationship. There may also be biological/hormonal mechanisms at play that can influence an abortive woman’s desire to become pregnant again.

The recently aborted woman can be in a state of physiological, psychological, and spiritual shock. Shock is commonplace after experiencing a traumatic event. Even if the woman begins grieving, the primacy of shock can block out feelings of sadness or depression. Emotional numbing is part of shock. Some women in shock express few feelings; others are flooded with regret and emotional pain. Over time, shock may dissipate and defenses may loosen, bringing some women into contact with strong negative emotions previously unfelt. Some women have breakthrough guilt, anxiety, sadness, and grief when the due date of the aborted child arrives, or when a sibling or friend becomes pregnant. Note that a recently aborted woman in a state of shock or emotional numbness (characterized, for example, by limited or expressionless countenance) will most likely not be able to process what has happened. To press her to do so would be counterproductive. She may attempt to be cooperative by going through the motions because a priest or counselor tells her to do so. She may enter what is called “pseudo-recovery”; and, when she enters a further stage of grieving, she may believe that there is something inherently wrong with her because the unresolved issues have returned. She may not seek additional help, but she may turn to dysfunctional coping mechanisms like alcohol or drugs, and may even experience suicidal ideation.

“I have had so much pain: the shame and guilt and the fear that God hates me. I still cry every day and think of my baby... How can God ever forgive me?”

“I can honestly say that my deepest consolation as a priest has been assisting post-abortive women in their desire for God’s mercy. Why? The salvation of souls is God’s work and his primary concern and is therefore the priest’s work and his primary concern. The Father of Mercies is begging his priests, in whom he acts in such a unique way, to assist the countless souls who are lost through abortion and are seeking good shepherds to bring them home.”

Msgr. Robert Panke, Archdiocese of Washington, D.C.
It is important that you meet her where she is and listen to the concerns she shares. These may relate to how awful the abortion procedure was, coercion from her parents or partner to have the abortion, lack of support during the abortion, the end of a relationship with her partner, or the isolation of not being able to tell anyone about the abortion; or, if she has told someone, they may be telling her what a good choice it was. If she is a very young woman, she may even be distressed by something trivial. Even a seemingly minor issue may overwhelm her at the moment. She can only deal with the issues that she feels safe in approaching. Plus, she likely is testing you to see if you care, if you are willing to really listen, and if you understand her. Follow her lead in addressing what she is comfortable with discussing. If she speaks about her baby, you can do so as well. If she does not, do not bring it up at this time. God brings the full truth forward at the time she is able to cope with it.

If she speaks of any medical concerns following the abortion, she should be advised to be seen by a physician or urgent care facility. Hormonal disruption may cause her to feel volatile, to weep, to rage, and to feel generally unsettled. Severe sleep deprivation and poor nutrition after an abortion may contribute to psychotic symptoms and suicidal thoughts.

If she is not ready to talk directly about her abortion experience—much less what it means to her now—give her the means to remain connected to the Project Rachel network for additional care when she is ready. When she gets past the anticipated due date, she may feel more open to your guidance and counseling. She may not return at all, or she may return for help when she can no longer bear the grief and sorrow. Gentle care during this time makes it possible for her to seek help at a later time.

“In my work with Project Rachel, I have encountered men and women who felt trapped by shame and isolation. They struggle with depression and even suicidal thoughts. Through the healing ministry of Jesus, as expressed in my priesthood, I have been able to bring these isolated people to reconciliation with God and with themselves. The Project Rachel ministry offers a way out of the darkness and into the light, and it has been deeply rewarding for me to be part of this work. Because priests are the ‘doctors of the soul,’ I would encourage my brother priests to utilize the gifts we have received through our ordination to bring much-needed healing to those who have been harmed by abortion.”

Fr. Jim Stack
Archdiocese of Washington, D.C.
Ministering to Mothers Hurting from Abortion

There is no single profile of a woman who seeks out a priest for post-abortion healing. She may identify herself as Catholic but have little formation in the faith. Or she may exhibit overly pious or scrupulous behavior, or even be deeply involved in church activities as a form of atonement for her abortion. She may attend Mass regularly and be raising her children Catholic. Or she may not have stepped inside a church since the day of her abortion. She may be very young or very old or somewhere in between. She may be the very angry woman who criticizes her parish priest when he preaches about abortion.

She may never have confessed her abortion, or she may have done so numerous times. In any case, she certainly believes she has committed a grave sin. She fears rejection by the Church, but at the same time she desperately desires healing and reconciliation with God.

She needs to know at the outset that there is hope, there is healing, and there is the promise of help and reconciliation from the Church, who cares about her.

A woman who has had an abortion may approach a priest at any time. She may do so in the confessional, or she may be referred by a friend or by the local post-abortion healing ministry. She may understand that she has a deep spiritual wound that only God’s mercy and love can heal. Simultaneously, she may believe that she has committed “the unforgivable sin” and may fear God’s judgment (which she may feel is deserved).

Her lifestyle may have taken her down a path that was harmful to her. In fact, she may never have known true spiritual or emotional health. In the words of one woman,

“The abortion was almost inevitable the way my life was going. I made no commitments, not serious ones, saw nothing wrong in having sex just because I wasn’t married, and when I found out I was pregnant, I guess I didn’t see anything wrong with having an abortion.

The woman who has had an abortion may come to a priest with questions, the answers to which are indispensable to beginning her healing journey. She may ask, “Can God ever forgive me? Can my child forgive me? Will the Church kick me out when I confess this sin? Where is my child? Will this horrible pain ever go away? Is healing possible?”

Truly, she is in desperate need of pastoral compassion and care. A priest may meet with her only once or work with her over a period of time, most often in concert with the diocesan Project Rachel ministry. However the ministry proceeds, God has chosen the person of the priest to be his instrument in helping her.

Given the sense of shame that many women carry about their abortion experience, they may have an understandable reluctance to contact a priest in their own parish. This is particularly true of women who are very involved in parish life. Project Rachel can confidentially refer women and men to trained priests outside their immediate parish. Priests should not become disappointed or feel as though they have failed in their outreach if women in the parish do not approach them directly. Their healing ministry may reach many whom they will never know have benefited from their actions.

“Speaking to women who have been affected by abortion has helped me to understand that the spiritual desolation they experience is astounding. Many feel they have committed the unforgivable sin and are destined for hell, or that they deserve to be on death row. Most suffer this spiritual desolation in silence, too ashamed and feeling unworthy to seek reconciliation from God.”

Msgr. Robert Panke
Archdiocese of Washington, D.C.
The information that follows will assist priests in ministering to those hurting from abortion, whether through the Sacrament of Reconciliation or through pastoral counseling, often in conjunction with the local diocesan Project Rachel ministry.

**The Sacrament of Reconciliation**

When he celebrates the sacrament of Penance, the priest is fulfilling the ministry of the Good Shepherd who seeks the lost sheep, of the Good Samaritan who binds up wounds, of the Father who awaits the prodigal son and welcomes him on his return, and of the just and impartial judge whose judgment is both just and merciful. The priest is the sign and the instrument of God's merciful love for the sinner.

_Catechism of the Catholic Church_, no. 1465

God counts on us, on our availability and fidelity, in order to work his wonders in human hearts. In the celebration of this sacrament, perhaps even more than in the others, it is important that the faithful have an intense experience of the face of Christ the Good Shepherd.

Every encounter with someone wanting to go to confession, even when the request is somewhat superficial because it is poorly motivated and prepared, can become, through the surprising grace of God, that “place” near the sycamore tree where Christ looked up at Zacchaeus. How deeply Christ’s gaze penetrated the Jericho publican’s soul is impossible for us to judge. But we do know that that same gaze looks upon each of our penitents. In the Sacrament of Reconciliation we are agents of a supernatural encounter with laws of its own, an encounter which we have only to respect and facilitate.

This is what happens in every sacramental encounter. We must not think that it is the sinner, through his own independent journey of conversion, who earns mercy. On the contrary, it is mercy that impels him along the path of conversion. Left to himself, man can do nothing and he deserves nothing. Before being man’s journey to God, confession is God’s arrival at a person’s home.

In confession, therefore, we can find ourselves faced with all kinds of people. But of one thing we must be convinced: anticipating our invitation, and even before we speak the words of the sacrament, the brothers and sisters who seek our ministry have already been touched by a mercy that works from within. Please God, we shall know how to cooperate with the mercy that welcomes and the love that saves. This we can do by our words and our attitude as pastors who are concerned for each individual, skillful in sensing people’s problems and in delicately accompanying them on their journey, and knowing how to help them to trust in God’s goodness.


Recent surveys of priests indicate that many women who have had abortions approach them first in the Sacrament of Reconciliation during the regularly scheduled time for confession. If this occurs, the following points are recommended:

- Affirm her courage and humility, her hope and trust in coming to the sacrament.
- Gently ask her if this is the first time she has ever confessed this sin. She likely has seen multiple confessors, some of whom may have reinforced her guilt or shamed her inadvertently.

• She may also feel that her sin is greater than God's mercy can ever bear, so assure her of God's great love, mercy, and compassion for each of us—no matter what our sins.

• Do not deny the gravity of the sin of abortion. Not only would this be incorrect, but it denies the reality of her experience in the aftermath of abortion.

• Let her talk. She needs to tell what she has not been able to tell before: the story of her abortion, her subsequent pain, and her worst fears. Assure her that her reactions are normal. Many women—for many years—find themselves unable to cope with abortion's aftermath. Many share the same pain and the same fears that she has.

• Ask her how long ago the abortion(s) took place. Women who have recently aborted require particular care. Please refer to the section on “The Recently Aborted Woman and the Role of the Priest” on page 23.

• Be aware that she may believe she has been excommunicated. Please refer to Section Six, “The Canonical Perspective on Abortion,” on page 67, for a detailed explanation of this topic.

• Choose an appropriate penance to facilitate her healing and acceptance of God's forgiveness. In choosing a penance, remember that she may have suffered for many years already. The penance should be life-affirming. Keep in mind that she is often scrupulous. Make sure that the penance has a definite end and clear parameters. If you suggest she attend daily Mass, for example, she will be fearful that if she ever misses even one daily Mass, she will no longer have God's forgiveness. Some helpful examples of an appropriate penance are as follows:

  — Ask her to pray (a Rosary, the Chaplet of Divine Mercy, or a fixed number of specific prayers) for others involved in her abortion loss. It is a good idea to keep holy cards with instructions for praying the Rosary and the Chaplet of Divine Mercy in the confessional and to encourage the penitent to take one of these cards when you assign either of these devotions as penance.

  — Suggest she offer a weekday Mass for her aborted child and/or the healing of the family.

  — Invite her to read, pray, and reflect with one or more of these Scripture passages, entering into the story to hear the Lord's voice:

    Luke 13:11-13 (healing of the crippled, bent-over woman)
    Luke 7:36-50 (woman who washes Jesus' feet with her tears)
    John 4:7-42 (the Samaritan woman at the well)
    John 8:2-11 (the woman caught in adultery)
    Psalm 51 (a prayer of repentance)
    Psalm 103 (praising God's mercy)

Consider asking her to be the Good Samaritan to those she encounters in the next three weeks, or to volunteer in a soup kitchen or participate in other-directed activities that may help her focus away from herself and help to make a difference in another's life. In doing so, she can increase her feelings of self-worth as a child of God. Actions to directly help others, coupled with prayers and Scripture, are very beneficial.
For a detailed discussion on the removal of the censure of excommunication, see Section Six, “The Canonical Perspective on Abortion,” beginning on page 67. In the event that a penitent is subject to the penalty, most diocesan bishops have granted the faculty to remove the censure of excommunication to priests within their dioceses. When in doubt, it is best to confirm this with the diocesan chancery.

There are time constraints in regularly scheduled times for confession. Further support of the penitent may be important for her ongoing healing. It is essential, however, to maintain the integrity of the seal of confession. Priests active in post-abortion ministry have offered the following points for consideration:

- It is important to assure her that the Sacrament of Reconciliation is sufficient to bring forgiveness of sins and the fullness of God’s mercy.

- You may also want to suggest that the often unacknowledged grief and pain associated with past abortions can be the source of profound emotional and spiritual suffering and that, for this reason, additional counseling and support may be very beneficial.

- If the woman indicates that she has confessed her abortion(s) multiple times, it may be helpful for her to understand why she is not accepting God’s forgiveness and mercy.

- You may offer to be available for pastoral counseling at another time. You might also encourage her to work with another priest in the parish or the Project Rachel network if you are not available for pastoral counseling or spiritual direction. It would be important to explain that owing to the protections ensured to all penitents under the seal of confession, she must take the initiative in approaching you to set up a time to meet, even if it is right after the confession time. The most appropriate means of facilitating a referral would be to give her the name and number of another agency or person. Business cards and brochures for Project Rachel or other referral points are important items to keep on hand or in the confessional.

- You may want to give her a prayer card to help her continued healing. A suitable “Trust in God’s Mercy” prayer card is available from the Secretariat of Pro-Life Activities (see “Recommended Resources” section in this manual). You might also give her a copy of Pope John Paul II’s moving words to women who have had abortions, the text of which is included in this manual on page vii.

**The Priest’s Role in Post-Abortion Counseling and Healing**

Either prior to or following sacramental reconciliation, a priest in Project Rachel ministry may be of great service in helping women in their healing journeys from post-abortion pain and grief to a new life in Christ. The spiritual guidance envisioned in this ministry differs little from the priestly ministry of leading souls to Christ. It is not professional counseling, nor need it involve spiritual direction per se,
unless the priest is specially trained in these areas. The following recommendations have been offered by priests experienced in providing short-term spiritual counseling to post-abortive women.

**The Pastoral Setting**

Before the woman arrives for her first spiritual counseling visit, pray to the Holy Spirit for the wisdom to guide her to healing.

It is wise to arrange your office in such a way that the person coming to see you can sit between you and the door. In today’s climate, it is perhaps wise to keep the door slightly ajar, provided there is no possibility of your conversation being overheard from the hallway. If your office door is already fitted with a glass panel, this precaution would not be necessary. Keep a box of tissues within her reach. The post-abortive woman needs to be free to cry and not feel that she is making you uncomfortable. Some stories are so painful and horrific that they may induce you to tears. It is important that you be able to acknowledge your own feelings and share them with the person seeking your help. The priest/counselor can model openness, and this can have a considerably positive impact for good.

It is important to remind parish staff of the highly confidential nature of these visits in order to avoid a potential breach of confidentiality in rectories or parish offices. When a person calls for an appointment and mentions to a secretary or housekeeper that she has been referred by Project Rachel or saw an announcement about Project Rachel in the parish bulletin, this information must be treated with great discretion. Also, assumptions should not be made that all people calling about Project Rachel have been involved with abortion.

**Time Frames and Referrals**

The post-abortive woman will generally meet with you one or more times during the healing process for short-term spiritual counseling and guidance. Initially, meetings can take place once a week or several times a month, transitioning to once a month until completed.

Do not be reluctant to refer to others for additional help. If you think that progress is overly slow, or if you suspect deeper problems (e.g., mental illness, addictions, eating disorders, sexual abuse, and perhaps certain relationship issues), you will want to refer her to a therapist in the Project Rachel network or to one known to understand the profoundly negative impact of abortion on women, as well as these additional complicating factors in her life. If you refer women to a mental health professional outside the Project Rachel network, make sure that you are well aware of his or her belief system and treatment approaches, etc. Referring to an uninformed therapist who personally believes in abortion rights, is ambivalent, or does not hold similar values can be disastrous.

**Boundaries**

The issue of boundaries in ministry is critical in today’s world. As a priest in counseling sessions, you must be the person setting the boundaries. Perhaps now more than ever, this awareness must be uppermost in your mind.

Post-abortion ministry is a no-touch ministry. Many of the women whom you will counsel have been repeatedly hurt by men. Some bear the wounds of sexual abuse in addition to the wounds of abortion.

If, in the course of counseling a minor or young adult, she reveals that she has been the victim of sexual abuse while a minor, you may be required to report such abuse pursuant to state law. Your diocesan office of child and youth protection can inform you of applicable requirements.
Some women may be seductive, believing that their sexuality is all they can rely upon, seeking to determine if you can be trusted, or trying to self-sabotage yet another relationship among many. Some women may feel the need to test you, to see if you are who you say you are. This caution is not meant to frighten you. It is meant to make you aware and help you minister more effectively.

Recognize that, as a male, you are innately a protector. Your instinct to protect can be triggered when dealing with wounded, and possibly needy, women. Recognize this about yourself and pay attention to your responses. You are neither the savior nor the “knight in shining armor.”

An experienced Project Rachel priest developed these rules regarding boundaries:

- When she arrives, it would be impolite not to shake her hand. This is a socially expected sign of welcome.
- It is best to simply allow the person to cry, rather than reaching out to comfort her with a touch on the hand or saying “it’s okay.” The person who is crying may perceive the touch or remark to mean that her tears are making you feel uncomfortable. The act of crying is very therapeutic and should not be interrupted.
- This is not a ministry of hugs. It is too easy for her to receive confused messages. If she wants to give you a hug after some counseling session, refuse in a light-hearted way or simply say, “Sorry. Nothing personal. I just don’t accept hugs when I’m doing ministry,” or “This is really God’s work. Give him the thanks.”
- When you are celebrating the Sacrament of Reconciliation, if you are in the habit of laying hands on the penitent’s head, you should always ask first if it is all right for you to do so. The touch on the head can be associated with past sexual abuse in both men and women. It is respectful to ask and give them the option.
- Finally, in bringing closure to the relationship, then and only then might you decide to accept a hug. You must use your pastoral wisdom in making this decision.

Women truly appreciate and need your clear boundary setting. For many women, you are the first nonjudgmental, nonhurtful male they may have encountered. They deeply appreciate your respect for them. For the first time, they may come to see themselves as persons worthy of respect, no longer persons to be used by others.

Women have said that they appreciate it when a priest wears his clerical collar or religious habit for these sessions. It signals that you are a priest in persona Christi.

**The First Meeting**

Affirm her courage in seeking healing, acknowledging how difficult it can be to talk about decisions that evoke guilt and shame, and how difficult it is to reveal the painful emotional and behavioral consequences of having made poor choices.

Establish an atmosphere of safety (see “The Pastoral Setting,” above). It is important to inform her that part of the healing is her telling her full story, not a sanitized version. This is not easy and is itself painful. Traumatic experiences can be overwhelming to narrate, so it is important to have her understand that she can stop telling her story at any point if she chooses. This gives her a sense of control over her feelings, over which she may feel very little control.

Listen carefully to her concerns and her story to determine where she is in her healing process. Some women will have begun the process intuitively on their own. Others may have had a bad experience in a previous attempt to find healing.
If the only way that you would be acquainted with her is through post-abortion counseling, assure her that you will not acknowledge her in public unless she first acknowledges you.

The Process

For the woman who has had an abortion, the core process of healing abortion trauma involves

1. Self-honesty
2. Acknowledging and reconnecting with her deceased child
3. Surrendering of this child to God
4. Giving and accepting of forgiveness
5. Reconciliation and commitment to a new life

Explaining this process and getting her support is important and the most effective place to begin.

Of all the steps, forgiveness is the most critical. When she chooses to forgive those who hurt her in the process of her abortion decision, it becomes possible for her to believe that God can forgive her, that her baby can forgive her, and that she can forgive herself. Note that she can forgive others without their participation or knowledge.

Reconciliation is related to forgiveness, but it involves the restoration of a relationship that is profoundly damaged. Reconciliation is necessary in her relationship with God, her baby, and herself.

Assurance of God’s Mercy

From the beginning, assure her of God’s love and mercy. She may be more focused on God’s judgment. You may want to tell her that the Church has been in the forefront of post-abortion healing for decades. Continue this assurance throughout your time with her.

Invite and encourage her to say a prayer giving God permission to heal her. It can be as simple as “God, I give you permission to heal me. I believe in you and want your love.” Explain that we often feel so unworthy of God’s love and mercy that we keep God’s mercy at arm’s length. You can use the image of the painting that shows Jesus knocking at the door, reminding her that there is no doorknob on his side. God always respects our free will, but once we have opened ourselves to him, he will lead us through our healing. Prayer will open the door.

In the last century, Jesus asked St. Faustina (Maria Faustina Kowalska, 1905-1938) to spread the message of his divine mercy. St. Faustina was given the divine mercy image (his open arms and his heart flowing with love and graces) and the Chaplet of Divine Mercy. She was also given many beautiful messages concerning God’s immense love for each of us, which she recorded in her Diary. You may want to share passages from St. Faustina’s Diary, such as these:

I want to pour out My divine life into human souls and sanctify them, if only they were willing to accept My grace. The greatest sinners would achieve great sanctity, if only they would trust in My mercy. (Diary, 1784)

The greater the misery of a soul, the greater its right to My mercy; [urge] all souls to trust in the unfathomable abyss of My mercy, because I want to save them all. (Diary, 1182)

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Recounting Her Story

She needs to tell her story, with all its pain, and you need to be a compassionate listener. She may experience a myriad of feelings, but most likely deep hurt, shame, and guilt will top the list. She may need to recount her story more than once. The first time she may minimize or exclude parts of it, until she is sure you are trustworthy. In the retelling, she may risk more of the pain and tell you perhaps of multiple abortions or past relationships. When a person trusts another with such shame-filled trauma, it is both a powerful and a humbling experience. At the end of the meeting, thanking this person for her courage to share, and her confidence to share it with you, is entirely appropriate and beneficial.

Dissipating Anger

Anger is a feeling, an uncomfortable one certainly, but a legitimate feeling. When anger is acted out, it can be injurious to self or others. When anger is expressed as the deep hurt that it really is, relief and healing are possible. You need to give the woman who has had an abortion permission to be angry with those who betrayed her in some fashion during the abortion decision and experience. This could be the father of the baby, her parents, friends, or people in the abortion facility. She may not feel entitled to her anger, she may be out of control with her anger, or she may be somewhere in between. Remind her that anger is a legitimate feeling and, if unresolved, can lead to depression or worse.

Suggest that she write to those with whom she is angry, because in writing she may be able to gain access to the truth in her heart. The letters will not be sent. She is free to say all she needs to say. After finishing each one, she should set it aside and then go back and reread it. Often profound insight is gained in doing this. If she wants to share the letters with you, invite her to read them to you. Giving voice to her anger and pain can be very healing. For some priests and counselors, hearing anger expressed can be unnerving and discomforting. If this is the case for you, this would be a good area for further self-exploration and prayer.

Encourage her to do something symbolic with the letters: destroy them, bury or burn them, etc. Explain to her that whatever she decides, the action can be symbolic of letting go of her anger so she can move to forgiveness of these people. If she does not forgive, she will be in bondage to these old relationships, which may have an impact on her future relationships.

Forgiving Others

Explain that she may need to ask God for the grace to forgive others. Forgiveness is difficult.

Invite her to pray for those who have hurt her and whom she is attempting to forgive. A helpful prayer is, “God, may your will be done in the life of _______. ” You may also offer to say a Mass for the healing of all those involved in this abortion.

Understanding Abortion and Accepting It as the Death of Her Child

In our world, those who favor abortion rights have colluded to convince our culture that

- An unwanted pregnancy is not really “human”
- The woman’s right to be free of whatever is unwanted is morally right and justifiable
- What will be aborted is “just tissue,” or it is so small or strange-looking it couldn’t be human. The post-abortive woman may have accepted this “information” to rationalize her decision, and thus she remains in denial about the humanity of the fetus, much less her “child.” The priest/counselor
can assist the woman in breaking through this denial by compassionately asking her about what she believed she aborted.

It is incredibly painful to acknowledge that abortion is a death experience. It can be so terrifying that some women never acknowledge the abortion to others. They live out their lives surrounded by fear and shame. It is the role of the priest/counselor to hold out hope that healing is possible. Reconciliation and healing, though, are only open to a woman who acknowledges what an abortion really is, and the reality that she participated in this death event.

When denial breaks and the woman has the relationship with the priest/counselor to assist her, the emotional floodgates open, and grief, sadness, and tears find expression. This may be preceded or interrupted by periods of silence as she comes to grips with what she is feeling and realizing. Encourage her to accept these feelings, invite her to share them with you, and assure her that you will be silently praying for our Lord to embrace her. This may take place in only one meeting with you or during multiple visits with only partial disclosure and/or release of feelings.

Grieving for the Lost Child

Grieving for the aborted child can evoke traumatic reexperiencing and negative reactions for those whose abortions are recent, especially for teens and others who are not emotionally mature or not ready to address the trauma of their abortion. Such women may not be ready to accept the reality that they have been instrumental in the death of their child. Building a trusting and confident relationship with you is primary; traumatic disclosures should only be timed for when that relationship is sufficiently strong and the woman is ready and willing to disclose. Please refer to the “The Recently Aborted Woman and the Role of the Priest” on page 23.

The post-abortive woman who is ready to disclose her feelings, share her story, and accept the reality of her child’s death needs to be encouraged to actively grieve for her lost child or children. It is important to be sensitive to her cultural background and encourage her to grieve in the way that is culturally comfortable to her. Be aware that when you first begin working with her, she may not recall, or feel comfortable telling you, how many abortions she has had. She may recall one vividly or talk about one with you as a test, but the others may be inaccessible, vaguely recollected, or purposefully withheld as too shame-inducing. When she begins to grieve specifically for her child, God may reveal to her how many other children she has lost, or she may simply blurt out that there were more. When people have multiple traumas, these traumatic memories are often stored away in a part of the brain that is not easily accessed. That is the nature of trauma: i.e., attempts to master feelings that were overwhelming and threatening by alternating between painful reexperiencing (partial or full) and avoidance/denial, with intermittent periods of intense feelings or behaviors.

She may want to know what happened to her child or children. Read to her or refer her to paragraph 99 of Evangelium Vitae (The Gospel of Life), in which Pope John Paul II assured women that nothing is definitively lost, and that her child is living in the Lord (see text included on page vii).

The Child’s Sex

You should gently ask her if she has a sense if her baby was a girl or a boy. We cannot mourn whom we don’t know. A generic child is not the same as “my son” or “my daughter.”

She may acknowledge that she knows her child’s sex. She may say, “No, but if it had been born, she would be eighteen now.” Point out her instinctive use of the female pronoun.
She may say she has no idea. Encourage her to take the time to be silent and pray for the knowledge of her child’s sex. It is also possible that a woman may have aborted twins and not have been aware of it. You should raise this possibility with her should she continue to change the sex of the child when she speaks about him or her.

**The Child’s Name**

If she feels reasonably certain about the sex of her child or children, invite her to name each one and then refer to each by name. This is an enormous gift to her. Naming a child is a privilege that parents uniquely exercise. Naming gives the child a concrete personal identity and helps her to form a spiritual and emotional bond with her child. Remind her of Jeremiah 1:5: “Before I formed you in the womb I knew you, / before you were born I dedicated you.”

**Beginning a New Relationship with the Child**

Encourage her to write a letter to her aborted child (or children), saying all the things that her mother’s heart desires. She might explain about the circumstances surrounding the abortion (her fears, pressure, the lack of support, her misinformation, her lack of trust in others, her desperate desire to hold onto her boyfriend, etc.). She may express her love for her child, share her sorrow for what she did, and ask the baby’s forgiveness. This is not easy homework, and she should be encouraged to spend time doing this. Typically, tears are woven between each sentence. She may need to put the letter down and continue it later. When she returns with the letter, invite her to read it aloud to you if she wishes. It may also be helpful after her reading this special letter to have her close her eyes and reflect in silence what she believes her child would say in response. This can be very powerful and healing. Some women have also written poems or songs to their children.

**Surrendering Her Child to God**

Fr. Robert Sears, SJ, formerly of the Institute for Pastoral Studies at Loyola University, suggests the following alternative. Invite the woman, in prayerful imagination, in keeping with Ignatian contemplation, to place the baby with Jesus or the Blessed Mother. She should ask them to care for her child, and she should speak the desires of her heart to Jesus and to her child. It comforts the woman to know that her child is in a safe place. This addresses her need to take spiritual responsibility for her child.

Encourage her to develop a new relationship with her child in light of the Communion of Saints. This child can be a powerful intercessor for her and for her family. She is forever the child’s mother; abortion did not end that relationship. Help her to realize, as John Paul II indicated, that her child is now “living in the Lord” and entrusted to our Heavenly Father’s mercy.

**Memorializing the Child**

Encourage her to find a special and personally meaningful way to memorialize her child. There are as many creative ways of doing this as there are women.

Since she never had a funeral for her child, you could offer to say a Mass of Remembrance for her child. It can be a private Mass or a daily Mass for a special intention. Include prayers of healing for all those involved. If this is a private Mass, she could be encouraged to incorporate Scripture and music that have personal meaning for her, as long as they are appropriate to the Mass.

Memorializing may also be done by purchasing or making an object to remind her of the child: a locket or necklace she will wear, a tree or other living plant for her yard, a statue (such as an angel with
a child), or a piece of art or needlework that symbolizes the child or her own healing. If she decides to
plant a tree, explain that if for some reason it dies it is not a “sign from God” and that she can replace
it with another living plant to serve as a memorial.

**Addressing Anger at God**

Speak with her about her relationship with God. She may be very angry with him for “letting her get
pregnant” or “not preventing the abortion.” If she is angry with God, tell her it is all right.

Remind her that in the Old Testament people spoke openly with God when they were upset with
him. Assure her that God will not punish her for her anger. Encourage her to be honest and open in
sharing her feelings with God. This type of purging prayer is best done when she is alone, in an isolated
place, or even in a car, where no one can hear her. Invite her to yell at God, to express all her pain,
and to say whatever she needs to say. Verbalizing this pain is much more effective than simply thinking
about it or intellectualizing it. She will know she is done when she is emotionally spent. A deep sense
of peace follows this unloading of emotion. She could also write a letter to God, but this may not be as
effective as orally expressing her pain or anger. How she expresses her anger depends on the woman’s
personality and her individual characteristics.

Some women who find it difficult to reconcile with God may first deepen their relationship with
the Blessed Mother, as a first step in developing a relationship of loving trust in God. Be aware that
while this can be an excellent first step toward trusting in God for many women, there are others who
also struggle to connect with Mary because their own mothers were emotionally unavailable to them or,
perhaps, did not protect them from abuse in the home due to their own emotional struggles.

Many women may feel unworthy of God’s love and forgiveness. It is important to speak often about
God’s bountiful mercy and gentle love. One priest used to say to women that there isn’t one of us who
has not aborted God’s will at some point in our lives. That is the basis of sin.

**Self-Forgiveness**

The post-abortive woman needs to move toward accepting the forgiveness that God wants to bestow on her or has already
devoted on her if she has gone through the Sacrament of Reconciliation. A woman who has a history of abuse may
have a difficult time with this step. In her own mind, she has
moved from being a victim to being a victimizer. The priest/
counselor may well need to help her address these prior trau-
mas in order to help her resolve the abortion trauma. Alter-
atively, a referral to a mental health professional through the
Project Rachel Ministry may be appropriate.

If she has had Bible study or other religious instruction
in which she was told that self-forgiveness is not possible,
the post-abortive woman may be confused. Her healing may
be impeded. If she is to be truly free to accept God’s forgive-
ness, she must let go of self-shame and recrimination. Affirm
to her that guilt is a valuable emotion and helpful in correct-
ing wrong behavior, but explain that shame is counterpro-
ductive and self-injurious. Shame-based thinking includes
“I am bad because I did wrong and am guilty.” God’s divine
mercy proclaims that no sin is greater than his love and that it is his will that she accept his forgiveness and forgive herself. Reading Scripture to her can be most affirming. For example, Mark 11:25 says, “When you stand to pray, forgive anyone against whom you have a grievance, so that your heavenly Father may in turn forgive you your transgressions.” This may take some time and education. It can be helpful to explain that when we continue to judge ourselves harshly after we have asked for God’s forgiveness we are walking close to the sin of pride. We assume that we know better than God and place limits on his limitless love and mercy. The prayer of St. Claude de la Colombière concludes with this consoling thought and advice:

No sinner no matter how great his offences should have reason to despair of pardon. If I have grievously offended You, My Redeemer, let me not offend You even more by thinking that You are not kind enough to pardon me.

In his June 16, 2009, “Letter Proclaiming a Year for Priests,” Pope Benedict XVI turned again and again to St. John Mary Vianney as the model priest-confessor and apostle of divine mercy:

“It is not the sinner who returns to God to beg his forgiveness, but God himself who runs after the sinner and makes him return to him.” “This good Savior is so filled with love that he seeks us everywhere.”

We priests should feel that the following words, which [the Curé of Ars] put on the lips of Christ, are meant for each of us personally: “I will charge my ministers to proclaim to sinners that I am ever ready to welcome them, that my mercy is infinite.” From St. John Mary Vianney we can learn to put our unfailing trust in the sacrament of Penance, to set it once more at the center of our pastoral concerns, and to take up the “dialogue of salvation” which it entails. The Curé of Ars dealt with different penitents in different ways. Those who came to his confessional drawn by a deep and humble longing for God's forgiveness found in him the encouragement to plunge into the “flood of divine mercy” which sweeps everything away by its vehemence. If someone was troubled by the thought of his own frailty and inconstancy, and fearful of sinning again, the Curé would unveil the mystery of God’s love in these beautiful and touching words: “The good Lord knows everything. Even before you confess, he already knows that you will sin again, yet he still forgives you. How great is the love of our God: he even forces himself to forget the future, so that he can grant us his forgiveness!”

If the post-abortive woman seems unable to accept forgiveness, suggest the following exercise. Her goal is self-forgiveness. In cases where the abortion happened years earlier, explain that abortion segments a woman’s perception of herself. The woman who had the abortion stands apart from the woman who is here today seeking healing. She needs to think about who the woman was who had the abortion and to see herself compassionately as God sees her. What happened to her as a young woman that led her to get involved in sex? What were the circumstances of her pregnancy? Why did she have the abortion? Perhaps she has had more than one abortion. How did that come about? After she has had time to think about this, suggest she write a letter to the woman who had the abortion and include in it all the observations and insights she has garnered. Suggest the letter conclude with her writing that she forgives this woman, or that she is trying to do so with God’s grace and the help of her confessor or spiritual director. Another method is to have her write a letter of forgiveness to a friend or family member to elicit the feelings involved in doing so. Some women have grown up in families that encouraged grudges and exemplified unforgiveness. Addiction- or abuse-based families often injure family members this way. Encourage her to keep praying for the grace to be able to forgive herself. For some, this is a
process that takes considerable time; for others, working through the above can help them to come to forgiveness and be set free.

The Father of the Child

Here, too, it is important for you to hear the woman’s story describing the father of the aborted child. Often coercion, pressure, or subtle persuasion factored largely into her decision to abort. Fr. Sears suggests that you pray with the woman for the father of her aborted child, asking that he be given the gift of repentance and God’s forgiveness. Abortion is not just about the mother; it is about the relationship of mother, father, and child. There needs to be prayer for reconciliation of all involved. (For more information on men’s suffering in the aftermath of abortion, see Section Two of this manual, beginning on page 25.)

Speaking Publicly

If the woman says she wants to speak publicly about her abortion, first assess how long it has been since she received healing from her abortion. Second, determine her motivation for doing so. You may need to ask, “Why do you want to do this?” If she is doing so to make up for what she did, discourage her from speaking publicly. She has not finished healing if she is still trying to “make up for” her abortion. Third, determine if she is feeling pressured to speak by others or circumstances in her community (sometimes communities, churches, or groups need a speaker to address this topic or even testify at a public hearing). Fourth, she needs to answer the following questions: Who might be hurt by publicly telling her abortion story? Do those involved in her abortion story know that she is going to make it public? Are those involved opposed to her making the story public? It is always contraindicated for a woman who is not fully healed from the trauma of her abortion to present her story or testimony in public.

If she has other children, urge great caution. Her children may not speak honestly about how they feel because they do not want to hurt her. Abortion information may also be too much for a young child, and it may trigger survival guilt. A child might have to put up with taunting from friends if they hear the child’s mother speak about her abortion. A child might also not want his or her mother’s past to be made known. This can be a significant issue for teens in particular.

The post-abortive woman may be better able to share her story privately or anonymously. Some women have seen others speak publicly and assume they must do likewise to be healed. Dispel this notion and encourage her to take her time and reflect prayerfully before making a decision. God wants her to be free to live the life he is calling her to live.

One priest used to ask women to write an anonymous letter telling her story that he could use in the bulletin. Whenever he printed such an anonymous letter, several others would often seek him out for healing.
If she decides to speak publicly on TV or write a blog, recommend that she not include the words “Project Rachel” or her own name. Women seeing it may wrongly think that they will also have to go public. The name “Project Rachel” can be spoken, but it should not appear on screen when associated with someone telling her personal story.

**Ongoing Issues and Opportunities**

The post-abortive woman in the process of healing may still be tempted at times to believe she is not forgiven by God. She may hear a little voice saying, “What a terrible person you are.” This is not the voice of God but a temptation to despair. Encourage her to respond with prayer. A simple prayer such as “Jesus, have mercy on me” or “Lord, help me” will keep her in God’s presence at such times of temptation. Then, too, such a person may have struggled all her life with low self-esteem, and the abortion has simply confirmed to her how inadequate she really is and always will be. Remind her that everyone makes bad choices at times and that she has repented, embraced God’s forgiveness, and now has the opportunity to live a healthier life.

There may be times when something will remind her of her child and she will feel very sad. This may occur at a graduation, wedding, or the birth of a sibling’s child or her own children or grandchildren, for example. Such sadness does not mean that she is unhealed. Rather it is a sign that her mother’s heart was restored to her when God healed her. It is very natural to feel sad sometimes when we have lost a loved one. Even though we have passed through grief into healing, we are still on earth and, in our humanity, we miss our loved ones.

New life circumstances may cause a reopening of her abortion wound (for example, a birth, a miscarriage, menopause, never marrying, never having children, or seeing her friends become parents or grandparents). Encourage her to find someone to talk to when this happens. This can be an appropriate time to turn to Project Rachel Ministry.

Encourage her to remain faithful to prayer and the sacraments. You may find it appropriate to catechize her on offering her suffering as a sacrifice in union with Christ on the cross. You might suggest she meditate on the words of St. Frances Xavier Cabrini:

> Why, dearest daughter, do you waste time in sadness when time is so precious for the salvation of poor sinners? Get rid of your melancholy immediately. Don’t think any more about yourself. Do not indulge in so many useless and dangerous reflections. Look ahead always without ever looking back. Keep your gaze fixed on the summit of perfection where Christ awaits you. . . . Carry your cross then but carry it joyfully, my daughter. Think that Jesus loves you very much. And in return for such love, don’t lose yourself in so many desires, but accept daily with serenity whatever comes your way.⁶

Encourage her to continue her spiritual growth through participating in eucharistic adoration, reading Scripture and spiritual classics, praying the Rosary and Chaplet of Divine Mercy, watching Catholic programs, listening to Catholic radio, going on a retreat, and, possibly, receiving personal spiritual direction. Encourage her to ask others to pray for her at her church or a Bible study group.

She may find she has a lot more energy now that she no longer needs to keep in check all the abortion pain that has been released. Encourage her to put her life-affirming energy to work in positive ways. An excellent place to begin would be loving her spouse and children in a new and better way, becoming involved in various parish ministries, helping an elderly neighbor, or taking part in some life-affirming effort.

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If you detect dysfunctional behaviors, discuss them and refer her to a therapist in the Project Rachel network or one known to understand the profoundly negative impact of abortion on women and their families.

Bringing closure to your relationship is as important as how you began your work with her. Bring up the topic of the end point of this healing journey in advance. Help her realize that problems have been identified and addressed, that she has honestly faced her abortion experience, that grief work was commenced and perhaps even concluded, that she has worked hard on forgiveness, and that now she must start reconciling all that has happened into her life today. She remains a mother, even of her deceased unborn child, waiting for reunion on the Last Day. Thank her for allowing you to be her companion on this journey of healing, and let her know you are available in the future should she decide to do further work on her abortion, or if other issues arise (if you are willing and able to do so).

The Recently Aborted Woman and the Role of the Priest

If the recently aborted woman approaches you in the Sacrament of Reconciliation, it is critical to remember that she may not yet understand all the ramifications of her sin. Meet her where she is, and trust that the grace of the sacrament will help her to move into her healing process. Many women speak of the incredible grace that the first confession brings them, giving them courage to continue the healing process.

Speak about her courage in approaching the sacrament. She often will tuck the abortion sin in among other things, hoping to get rid of it. Pick up on the abortion; ask the questions you need to determine culpability. Tell her there is help available to process this loss when she is ready. Explain that there is a spiritual wound that the Sacrament of Reconciliation addresses and a human wound of a mother who lost a child in a traumatic and unnatural fashion. Add that at some time she will need to address this. Through Project Rachel, there are professional counselors, spiritual directors, trained staff, and others who can help her to do this. It is advisable to have in the confessional business cards with contact information that she can take with her. Assure her of God’s love and mercy, and choose an appropriate penance, but one that has a specific limit. As mentioned earlier, these women can become very scrupulous.

If a woman keeps returning to confess the abortion, it is a sign that she has not completed the human phase of her grieving, and it would be prudent to discuss this with her. She cannot feel God’s forgiveness when she is filled with grief and self-judgment. You can gently point this out to her and help her to find someone through Project Rachel who can be a companion to her on the rest of the journey.

The recently aborted woman may not be able to embrace the truth of her lost child yet. You may not be able to lead her through the steps of post-abortion spiritual guidance described under the “The Priest’s Role in Post-Abortion Counseling and Healing” section (page 12) because these address the situation of women who are more emotionally mature and whose abortions are less recent. Raising the issue of her dead child too quickly may push her into depression, emotional numbness, or suicidal thinking.

“I finished the post-abortion reconciliation offered through Project Rachel two months ago.
“I can’t find words to describe how wonderful this experience was. I was helped to shed all the denial, anger, lies, stubbornness and tears that were in my heart. To tell you I sinned is one thing—but I grieved my God and I was so sure he had turned his back on me! How wrong I was!

“Through this care the walls came down and in their places stood compassion, forgiveness, grace, faith, and love.

“Thank you for Project Rachel, for it has surely blessed me and changed my life!”
The Role of the Priest with Those Who Aborted After an Adverse Prenatal Diagnosis

There is absolutely no controversy about the psychological devastation of abortion for a “wanted” child, particularly one with a fetal anomaly. The scientific literature is universal in affirming the trauma of abortion in these circumstances.

Individual women (or couples) who have succumbed to medical persuasion to end their disabled child’s life experience a complex array of feelings, including anger (at self, God, and others), disbelief, ambivalence regarding the doctor, hurt that God abandoned them in their hour of need, confusion about the abortion decision, and shock waves of emotional numbness. Clearly, what happened was wrong, but gentleness is the key to helping these mothers (or couples).

Consider offering a prayer service for the baby to help the mother reach closure. She may not know where the child’s body is buried, if it is buried, or if it has been disposed of as medical waste. In many of these circumstances, the pregnancy was desired. She and the father of the baby may have been living in a state of terror and grief throughout the diagnostic process. Offer to speak to the couple together and speak about how men typically process grief differently than women. Reach out to the father when the woman is not present and ask him how he is doing. If she is present, he may cover his feelings and focus only on protecting and caring for her. Privately, a man may speak to another man and be willing to acknowledge his loss.

You may be approached to be pastorally present in an uncomfortable situation. In light of the increasing tests now available to determine the health of the unborn child, you may find yourself dealing with parents who were caught in overwhelming situations and made tragic decisions.

Clearly, in the Scripture stories of Jesus with women, his response was always gentle; he healed them and called them to a new life. Nothing is gained for anyone when our response is harsh or judgmental. This can drive people away from the Church instead of calling them to conversion.

Often couples whose doctors have recommended terminating pregnancy due to a grave prenatal diagnosis seek the advice of their pastor before deciding whether to abort or to carry their child to birth. Suggestions on how to counsel such couples are given in Appendix A in this manual, beginning on page 83, along with resources helpful to all parents of children with life-threatening or severe disabilities.
SECTION TWO

Fathers
When people think of abortion, they think of this as a woman’s issue. But clearly, pregnancy occurs with the involvement of both a woman and a man. Abortion can have a deep impact on the father of the aborted child. When people think about the role of men in abortion, they usually seem to think about the stereotype of the man who forced the abortion or who abandoned the mother of his child. That is only one of many possible roles fathers may have had in the abortion decision. The impact of abortion on the father depends in large part on the role he played. Note that some men have been involved in multiple abortions, each with a different scenario. Because of this, the priest/counselor must be sensitive to these multiple scenarios and encourage the man to take the time to talk about the abortion, or each abortion, in detail, including the pre-abortion circumstances. Some of the differing scenarios of involvement and diverse reactions of men are described below.

The father who adamantly opposed the abortion and tried to stop it
This man tried to prevent the abortion, perhaps offering to raise the child himself or to marry the partner, if they were not already married. He welcomed fatherhood and was excited and invested in becoming a father. He may have an immediate and overwhelming response to the loss of his child. It is hard for him to separate out the feelings he is experiencing—including grief, guilt, rage, anger, and a sense of male impotence—because he was unable to protect his partner or the child. If they are now separated, he may be inclined to make repeated contacts with his partner to try to understand why the abortion took place or to make an effort to salvage the relationship and have “something” left after losing his child. This is an example of a “trauma bond” that may persist throughout his life. But this does not mean that it is appropriate that he reunite with the mother of his aborted child. You may need to encourage him to cease attempts to contact her or to stop fantasizing about reconciliation with her. For some men who feel compelled to reunite with their sexual partner, such behavior can be viewed as stalking or lead to violence.

The father who opposed the abortion but did not go to great lengths to prevent it
This father may have initially opposed the abortion but then ceased to communicate his opposition or the strength of his feelings. He may also have an immediate reaction of sadness, grief, anger, and the sense of not being able to protect those whom he should protect. He may experience anger, but not the full-blown rage or strong emotions mentioned above.

The father who first supported the abortion decision but then changed his mind, yet whose partner proceeded with the abortion
He may hold himself deeply responsible because he agreed to the abortion at first. This seems to happen more frequently within marriages. It can become an issue that interferes with the couple’s basic trust and intimacy within their relationship. Often feelings can fester and distancing can result. He may not
say anything for decades yet secretly resent his wife. It becomes the “unspeakable” between them in their marriage.

**The father who appeared to be neutral about the abortion**

He seemed to support whatever the woman chose, although he may have secretly opposed the abortion but felt pressured by peers and society to support her decision to abort. Or he may have found the decision to serve him well at that time in his life.

Unable to articulate how he really feels, he may react with sadness, grief, anger, or a sense of not being able to protect those whom he should protect. The man who was truly in agreement with or neutral about the abortion decision may not feel any reaction until years later. Sometimes the abortion comes up in mid-life—in a religious conversion, in psychotherapeutic treatment or addiction treatment, or when he is a father again. Time does not heal all wounds, but it can bring insight that wounds exist and need healing.

**The father who abandoned the woman in the face of pregnancy**

The man who abandoned his partner and child may not be troubled by the abortion or may later be bothered only by the fact that he failed to support the woman. This man may have had several abortion experiences with a similar scenario. He may have significant pre-abortion responsibility issues, feelings of entitlement, low self-esteem, dependency fears, feelings of abandonment from family of origin, or a narcissistic personality.

**The father who forced the abortion decision or threatened to withdraw support if abortion was not chosen**

The man who forced the abortion decision may have had many abortion losses in his lifetime, as well as many failed relationships in his past. The woman who is forced into an abortion decision may have an immediate adverse reaction, which she may not be comfortable verbalizing for fear of attack or abuse. Any feelings the woman may have may be considered irrelevant to this kind of male who cares little and has emotional barriers and control issues. Abortion is seen as a “free ride” for such a male. He may coldly just tell her to “get over it” if she tries to speak of her negative feelings. Her discomfort may frustrate him, and he may see it as sufficient “permission” for him to end the relationship and move on.

**The father who was not told about the abortion until after it occurred**

He may react with hurt and confusion that his partner did not discuss this matter and that she made a unilateral decision. Sometimes he finds out much later from her or someone else. He may experience many conflicting emotions, wrestling with the fragility of their relationship, the lack of trust, sadness coupled with anger, and feelings of retribution. Often much ambivalence is experienced in these scenarios, which can contribute to either considerable relationship instability or dissolution.

**The father who was never certain that an abortion occurred, but who, upon hearing a description of the aftermath of abortion in women, recognizes the symptoms in a former partner**

This man wonders if he was responsible for a child being conceived, but he is unable to confirm that a pregnancy had occurred. This can lead to many unanswered questions and conflicted feelings. Should
something happen that has an impact on his ability to father future children, such as testicular cancer, he may feel that his one chance at biological fatherhood was extinguished forever. If he is no longer able to have children, encourage him to consider adoption.

The man whose wife had an abortion experience with someone else prior to their marriage

This man may be engulfed in his wife’s confusing emotions related to her previous abortion(s). He may not have been told about her abortion experience before they were married. He may be confused by his partner’s distress and very concerned about her well-being. He may also feel a lack of trust in her if she chose not to disclose this important information before they were married. Some men report feeling manipulated and feeling a loss of respect for their spouse. Forgiveness is critical in this scenario, but it is not a simple statement nor a simple process. He may begin wondering, “What else did she conveniently withhold from me?”

Common Psychological and Behavioral Reactions Seen in Fathers of Aborted Children

Fathers of aborted children may experience some of the following reactions to a partner’s abortion.

Rage or Anger

Anger may be internalized (linked to non-communication and depression) or externalized (evidenced by acting out aggressively toward others). Expressed rage or anger can take the form of name-calling, interruption, disrespected communication, shouting, criticism, etc. When acted upon, rage or anger may precipitate an impulse to strike out physically at anyone, or at the girlfriend/spouse involved in the abortion loss.

Impairment of Masculine Self-Image

In many ways, men feel responsible for those they love, and part of that responsibility is protecting them from harm. After an abortion, men may sense that they failed in their obligation to protect their sexual partner or offspring. This reaction can be psychologically demoralizing and sexually incapacitating, and it can cause men to dwell on this and to feel helpless.

Impotence

An abortion loss can interfere with the sexual functioning of both partners, including frequency of sexual relations, type of sexual behaviors, and arousal prohibitions. For men, impotence is a significant problem in and of itself, occurring naturally with age or as a result of medical conditions. The loss of sexual prowess has an impact on a man at his very core and assaults his sense of self-worth and identity.

Grave Concern for His Partner and Her Well-Being

A man may seek information on the aftermath of abortion for women out of concern for his partner. He may try to encourage her to seek professional help because of the symptoms he believes are present as a
result of the abortion. If she refuses, some men may become angry and demand that she seek help. He will need to be helped to see that abortion healing occurs as a process and that she may be resistant—not because she does not love him, but because she is frightened about facing her own fears and the trauma/tragedy of what she experienced. He should be counseled that, until she is ready to do the grief work necessary to be healed, he may help her best by being patient and supportive.

**Inability to Communicate with His Partner About Their Experiences**

Communication can break down following an abortion. Women and men respond to grief in different ways. For example, one partner might be struggling, while the other partner is unaware. Some communication breakers may end up being used, such as, “Why don’t you just get over it?” Obviously, such responses are counterproductive and tend to increase conflict rather than decrease it.

**Chemical Use and Abuse (Excessive Alcohol or Drug Use)**

This is a common coping mechanism shared by many men. Some will seek help through Alcoholics Anonymous or another treatment program. If someone is working with a man on the program’s Fifth Step (in which the man reveals in detail his defects and past wrongs), the issue of abortion should be raised. Without confronting it, recovery could be impaired.

**Risk-Taking Behaviors**

Driving fast cars or motorcycles, breaking horses, sky-diving, bungee jumping, or hang gliding can be the product of frustration and anger associated with unresolved grief from an abortion experience. Fathers who opposed the abortion may verge on being suicidal or actually attempt suicide.

**Grieving and Sadness**

Men’s emotional reactions may catch them by surprise. In our culture, men may have difficulty articulating feelings. This is often frowned upon by society, particularly when the feelings include the vulnerability experienced in grief and sadness. Men do not anticipate feeling this way and are usually troubled when they do, because they often do not have close friends with whom they can share these feelings and may be too embarrassed to seek counseling or other forms of help. For some men, active grief may take the form of psychosomatic illness.

**Obsessive Thoughts of the Lost Child**

Some men describe intrusive thoughts concerning their lost child as unwelcome or even torturous. They may find themselves compulsively looking at babies and at dads with their children. Obsessive thoughts and compulsive behaviors can become crippling if unresolved and untreated.

**Nightmares in Which Someone or Something Vulnerable Is Being Threatened**

Nightmares can reenact scenes of fathers and children, providing elements of danger and the rescue of a child or a failed attempt to prevent the child’s death. Nightmares are often about some large threatening animal, like a shark or a lion, that is menacing a smaller and vulnerable animal or person, and there is nothing the man can do in the dream to protect the vulnerable being. He may awaken in a cold
sweat with a sense of doom looming over him. Feelings of impotence, failure, and personal deficiency are common themes.

**Desire for Another Child, and Subsequent Behavior to Try to Achieve That Goal**

The desire to have a replacement pregnancy is not uncommon for both women and men. It is a way of undoing the trauma of the abortion. Wanting to re-impregnate the partner who had the abortion may become almost an obsession. This desire may also generalize to impregnating another woman. If infertility arises, the man may believe he is being punished for his past abortion involvement.

**Suicidal Ideation (Thinking About Committing Suicide)**

In some cases, young men of high school or college age involved in an abortion may attempt or successfully commit suicide following an abortion experience. Typically, only a close friend may know about the abortion, while the family was unaware of it. There have been news reports of attempted and successful suicide pacts by couples who were despondent following an abortion.

**Emotional Abuse and/or Spousal Battering**

There appears to be a predisposition for individuals with abortion histories to find partners with the same history. The man’s new partner may remind him of the woman who aborted his child against his will, and he may remind her of the boyfriend who insisted that she have an abortion. This predisposition can be an attempt to assert some control or mastery over a past abortion experience, without either the man or the woman being consciously aware of this need.

When communication deteriorates dramatically, honesty becomes impossible, respect for the feelings of the other is lost, and the relationship is at risk of failure. At this point it is not difficult to understand how heightened frustrations and control issues can collide and burst into emotional or physical battering. For many, this downward spiral ends with divorce.

**Pro-Life Activism**

A man may feel that he is atoning for his involvement in abortion by becoming active in pro-life work and struggling to save others from his mistakes. This should be discouraged unless he has resolved his own grief related to the abortion. Pro-life work can be fine, as long as there is not an unhealthy or imbalanced need to be involved. The same issues raised for the woman in the previous section should also apply to men who have experienced an abortion and want to “go public” or become active in the pro-life movement.

**Other Observations**

Some men describe suffering great anxiety when their partner becomes pregnant again, and they remain anxious until the baby is born. Some men describe being overly protective fathers, who so fear that something will befall their children that their concern becomes detrimental to their children’s normal development. Some describe becoming emotionally enmeshed in their children’s lives; others are emotionally distant, but overly protective. Some men describe becoming the parent who is the major caretaker of the child, pushing away the mother and overreacting to normal childhood occurrences. For example, a cold or minor cut could lead to an emergency room visit.
Very rarely, a man may act out in socially destructive ways: setting church fires, committing murder or suicide, or attacking an abortion clinic.

Some men become involved in viewing pornography and develop a sexual addiction following an abortion loss. In the walled-off world of these men, this provides relief and seemingly shelters grief with pleasure seeking. The result, however, is decreased self-esteem, depression over the inability to stop, and increased risk-taking behaviors that can spiral out of control with devastating consequences.

When men are able to pinpoint the deeper issue that is troubling them after an abortion, they identify it as the loss of fatherhood.

Vincent Rue, PhD, a pioneer researcher in the field of men and abortion, has observed that “men do grieve following abortion, but they are more likely to deny their grief or internalize their feelings of loss rather than openly express them. . . . When men do express their grief, they try to do so in culturally prescribed ‘masculine’ ways, i.e. anger, aggressiveness, control. Men typically grieve in a private way following an abortion. Because of this, men’s requests for help may often go unrecognized and unheeded by those around them.” Dr. Rue adds: “A guilt-ridden, tormented male does not easily love or accept love. His preoccupation with his partner, his denial of himself and his relentless feelings of post-abortion emptiness can nullify even the best of intentions. His guilt may prevent him from seeking compassion, support or affection. In turn, he ‘forgets’ how to reciprocate these feelings” (Rue and Tellefsen 1996).
Ministering to Men Hurt by Abortion

Sometimes the post-abortive man makes contact with a caregiver, such as a Project Rachel counselor, under the guise of seeking help for his partner or trying to understand what his partner is experiencing. If he is looking for materials about the aftermath of abortion, ask if this is for himself or a partner. If it is for a partner, he can be asked, “Are you the father?” This is difficult for him to discuss, but it is critical to acknowledge that men can struggle after an abortion loss. He can be asked, “How can I be of help to you?” It would also be helpful to determine if this is his first abortion experience. Listening to him and affirming his fatherhood can be of great assistance.

The Sacrament of Reconciliation

See pages 9-24 under “Ministering to Mothers Hurting from Abortion.” Much of the material in that section will apply to men as well. To help understand the depth of God’s love and his readiness to forgive repentant sinners, the Parable of the Prodigal Son (Lk 15:11-32) is particularly beneficial for men to meditate on.

The Priest’s Role in Ministering to Men Hurt by Abortion

Men can benefit from the same general steps in healing that are described in the prior section on counseling women, beginning with “The Process” on page 15.

The first crucial step in healing begins with the post-abortive father telling his story. Fr. Martin Pable, OFM Cap., in his booklet Healing for Your Soul: A Guide for Post-Abortion Fathers, suggests areas that are helpful to explore. If the post-abortive father provides a very abbreviated account of the abortion experience, these questions can be raised to help him share his story more fully:

- What was your age and marital status at the time?
- What led up to the decision for abortion?
- What was your part in the decision?
- Did you pay for the abortion?
- Did you accompany your partner to the abortion clinic?
- How did you feel afterwards, and what did you do?
- In what ways, if any, did the abortion affect your sense of self? Your life from then to now?
- How did it affect your relationship with the woman?
- How did it affect your relationship with God and your religious practice?
Men who choose to do this “fearless moral inventory,” as Alcoholics Anonymous terms it, say it feels like a huge weight being lifted off their shoulders.

The father should also be encouraged to name his child, so the child becomes a person to him and not an abstract, generic child. Fathers are fathers forever, even if the child died before birth.

The post-abortive father needs to understand that God is ready to forgive him in the Sacrament of Reconciliation and that he needs to accept God's forgiveness. The Gospels are filled with examples of Jesus forgiving sinners. In addition to the Parable of the Prodigal Son and numerous stories of Jesus forgiving repentant women, Jesus told the paralyzed man, “Courage, child, your sins are forgiven” (Mt 9:2). Fr. Pable also refers men to a line from the prophet Micah: “Who is there like you, the God who removes guilt / and pardons sin . . . ? / You will cast into the depths of the sea / all our sins” (7:18-19).

It is important for the post-abortive father to ask forgiveness of the child’s mother if his words or actions (or silence and inaction) contributed to her decision to have the abortion. If they are married, his humility and graciousness in asking forgiveness could draw them closer emotionally and strengthen their marital bond. If the mother of his aborted child is no longer a part of his life, expressing remorse and asking for forgiveness becomes more complicated. She may not welcome his intrusion into her life, especially if she is now married and her family is unaware of her abortion. Regardless of whether such contact is advisable, the post-abortive father can offer Masses and prayers for her healing.

A man who opposed the abortion decision should be advised to sincerely forgive the mother of his child. A man who coerced his sexual partner into having an abortion needs to forgive himself, as well.

It is important to remember that a man who has been involved in an abortion may have issues with his own father, for example, abandonment through divorce or death. He may be grieving profoundly, and it is important to help him understand the grieving process. Men have a hard time understanding and accepting feelings of grief; they want to “fix” it, but they can't.

The post-abortive father should ask forgiveness of his child, writing a letter to his son or daughter if he is so inclined. Such a tangible expression of his fatherhood may help make his son or daughter more real to him so that he may begin to be comforted by the realization that the innocent soul of his child is living in the Lord.

A man who opposed the abortion and tried to stop it may struggle with controlling his anger. You may want to suggest physical means to discharge some of this emotion: for example, running, working out, or anything that requires physical exertion. He should not be encouraged to hit things, even inanimate objects, or strike things when alone. In sharing work side by side, men sometimes find it easier to speak about what they are feeling. If there is any indication that the man may be prone to acting out in violence toward someone involved in the abortion, it is important to keep everyone safe. Rage can be directed at others or at self, and both scenarios can be very dangerous. Prevention of acting-out behaviors or suicidal actions should be of primary concern for priests/counselors. Direct questions about his intent to harm himself or others should be asked when discussing anger/rage. This may need to be the focus for some time until his self-control and safety are better regulated and managed. With time he, too, will need to forgive all those involved in the abortion.

He may also experience “human impotence,” the sense that he is unable to protect those entrusted to his care. He may exhibit anger toward God, and it may be helpful to point out that God the Father also witnessed his innocent Son's death and that the Father grieves with us. Invite him to work on the spiritual issues in his life if he seems willing. The consolation and grace of the Sacrament of Reconciliation can be of great assistance.

If the man has been involved in more than one abortion, he may work at resolving one abortion but deny the need to process the rest. In helping a man work through these, you may need to help
him in sorting out each abortion, what role he played in each, and what feelings he continues to carry and why.

The post-abortive man can also have a Mass celebrated for his child and for the healing of everyone hurt by that abortion. Wives sometimes offer to spiritually adopt their husband’s aborted children, and husbands may offer to spiritually adopt their wife’s aborted children. This can bring great peace to the relationship.
SECTION THREE

Others Hurt by Abortion
Understanding Abortion’s Aftermath for Others Hurt by an Abortion

Abortions can have serious, lasting consequences for the loved ones of the mother and father of the aborted child. Regardless of whether these family members or friends influenced the decision to abort or cooperated in some way to bring about the abortion, the relationship they once had with the post-abortive parent may change significantly. Intimacy and trust may suffer. Family and friends may struggle as they observe the pain and seemingly inescapable sorrow of the post-abortive mother or father, pain that they are powerless to allay. They may be angry, disappointed, or supportive; but regardless of their attitude toward the abortion, the grief of the parents will cast a pall over all their relationships. The grandparents of the aborted child may grieve over the loss of their grandchild and regret their conduct and that of their daughter or son as keenly as do the aborted child’s parents.

Grandparents

Grandparents may struggle with the knowledge of an abortion and the loss of a grandchild. Their reactions are often linked to their involvement in the abortion decision. Parents of the mother undergoing an abortion may have forced the abortion, may have known nothing about it until afterward, or may have been opposed to the abortion but supportive of whatever choice their daughter made.

Grandparents may exhibit some of these symptoms:

- Grief or sadness over having lost a grandchild
- Anger at their child for becoming pregnant or having the abortion
- Anger at the son’s or daughter’s partner or the partner’s parents
- Concern for their child, wanting to resolve their child’s emotional/behavioral problems
- Guilt, particularly if they forced the decision or if they believe that they missed the cues that signaled a pregnancy

Occasionally there will be tragic circumstances where parents witness their child’s life taking a disturbing turn toward chemical dependency, severe psychotic reactions, eating disorders, dangerous lifestyles, and even suicide. Such parents need a great deal of support and help in coping with their pain and witnessing their daughter’s or son’s struggles.

Abortion may run in families, with the mother, an aunt, a grandmother, or some other close relative also having had an abortion. This can cause what is described as a generational wound, and prayers specifically for binding and healing these wounds should be offered. A recent family abortion may trigger unresolved pain in other family members, related to their own abortion losses.
Ministering to Grandparents

Although both grandparents may be troubled, it is often the grandmother of the aborted child who will come for healing. Listen to her story. Explain that mothers whose daughters have lost a child to abortion may often need to process this before the daughter may be ready to begin doing so.

Invite the grandmother to sort out her feelings and deal with her grief and anger now. Suggest that she write a letter to her daughter—a letter that she will never give her and, in fact, that she will destroy when she is ready to do so. In this letter she can express all her feelings of anger, disappointment, and sadness.

Invite her to grieve for her grandchild and write a letter to her grandchild, saying all the things her grandmother’s heart now longs to say. Encourage her to make or purchase something as a memorial for this lost child. No one else has to know about this. If she is responsible for forcing her daughter to have an abortion, she will need to seek forgiveness in the Sacrament of Reconciliation and also directly from her daughter. Suggest that she have a Mass said for the intention of her grandchild, the parents of her grandchild, and the healing of the family.

When her daughter is ready to seek her own healing, she will now be able to be present to her daughter because she has already begun to deal with her own issues and feelings.

Grandfathers—like fathers of aborted children—experience different reactions following their daughter’s abortion, or son’s involvement in abortion, depending on the role they played in the abortion decision.

If the grandfather is pro-life or would have otherwise opposed the abortion, yet was unaware of it until afterward, he may struggle with ambivalent feelings toward his own child and the child’s partner. A grandfather may continue to question why his child either did not come to him for help or did not follow his advice. Such a grandfather can benefit from the same steps detailed in the section on ministering to men who have been hurt by abortion (beginning on page 33): discussing his story, seeking forgiveness, naming the grandson or granddaughter, and praying for the healing of all involved in the abortion decision. A grandfather who is pro-life may devote tremendous energy to pro-life efforts to end abortion. Pro-life work can be fine, as long as there is not an unhealthy or imbalanced need to be involved.

In contrast, the grandfather who forced the abortion on his daughter, because the pregnancy was an embarrassment to him, may have great difficulty coming to terms with the loss. He may be inclined to be narcissistic, tending habitually to exert power over others to get them to conform to his wishes. He may feel unable to ask forgiveness from his daughter and may feel unable to take even the first step in healing. With the patient support of his family members seeking to bring about true reconciliation with each other, and with God’s grace, even these grandfathers may find the humility to ask forgiveness and to forgive in turn.

Abortion Survivors and Siblings of Aborted Children

Individuals who have themselves survived a failed abortion as a child in the womb may struggle with profound questions throughout their lives. They may have a diminished sense of self-worth and may attempt suicide.

Some individuals may have lost a twin in a failed abortion procedure and may bear deep psychological wounds from this loss. Some individuals may have lost several siblings to abortion. When given permission, these individuals will grieve deeply for their lost siblings. This is becoming more common
now with *in vitro* fertilization (IVF) pregnancies, where a group of children survive implantation and some are subsequently “selectively reduced” to improve the survival chances of the rest of the siblings.

Those who have lost siblings to abortion may be more likely to have an abortion themselves.

The surviving children of earlier or later pregnancies in a family may exhibit survivor syndrome similar to that seen in children who lose a sibling to cancer or accidental death. They may struggle with being “replacement children” or “chosen children.” These children often have impossibly high expectations placed upon them for achievement. They may be objectified by the parent, pressured to become “the replacement” and not unique children in their own right.

Often they experience a lack of proper bonding with their mother, or their relationship with their mother changed after her abortion. Sometimes a wounded parent, in a fit of rage, will say something like “I should have aborted you instead of that other one!”

Some children sense that someone is missing in the family system. From conversations overheard or intuition, children may surprisingly perceive a family loss.

**Ministering to Abortion Survivors and Siblings**

These deep wounds require exploring and healing. There may be rage toward the mother who tried to abort them or defense of her right to choose to abort them. There may be survivor guilt that a twin or sibling was lost, while they survived.

Listen to them and acknowledge the loss they feel. Having someone they can talk to helps a great deal. Affirm for them how much God wanted them to exist. Encourage them to forgive their parents and all involved in the abortion decision. They could participate in a Mass for their lost sibling and for the healing of their parents. Explain to them that in the Communion of Saints we are still spiritually connected to deceased family members and that they are powerful intercessors for us. Invite them to write a letter to the lost child and say all that they have been carrying in their hearts. Encourage them to find a way to memorialize their lost family member.

**Extended Family Members and Friends**

Aunts and uncles of the aborted child may know about the abortion. They may have questions about how to facilitate the mother’s healing, in addition to having their own need to grieve for the lost child. They need to work through their own feelings, which may include sadness, anger, and guilt if they had known about the pregnancy and had not tried to stop the abortion. Even cousins of the aborted child are sometimes aware that there is a person missing from the extended family. Grieving seems to be most pronounced in those who are closest in age to the lost child.

Often it is the friends of the pregnant couple who are consulted and drawn into the web of the abortion decision. They may support it or reject it, but they will be the first ones to observe changes in the behavior of their friends. They may seek help in understanding what has happened to their friends.

**Ministering to Extended Family Members and Friends**

Relatives and friends may have found out about the abortion, whether before it happened or afterward. They carry sadness and concern for the parents of the child as well as a sense of loss of the child. Encourage them to pray for the parents and to try to continue loving the parents unconditionally while
they are healing. This makes it possible for the person who was involved in the abortion to eventually be able to speak about it without fear of condemnation and judgment.

If they have heard about the abortion from a third party, encourage them to respect confidentiality, even in their zeal to help the parents heal.

Praying for those hurt by abortion may be the most effective outreach. While family members and friends cannot force healing in a person who isn’t ready, they may be able to casually share information about post-abortion healing and point them to local resources in a conversational manner, or even just inform them that they have just read something about grief following an abortion and how they didn’t realize abortion can cause emotional injuries.

Family members and friends can be invited to have a Mass said for the healing of all those involved. Also invite them to write a letter to the lost child and say all the things they long to say. These lost children, as members of the Communion of Saints, can be powerful intercessors for their parents, siblings, and the rest of the family.

Abortion Providers

Abortion providers—including doctors, nurses, receptionists, and clerical staff—experience a great deal of stress in their jobs. Seminars in stress management are often offered at their annual meetings. Many abortion providers struggle with alcoholism, divorce, and accidents. Many who work in the field have their own abortion histories.

Ministering to Abortion Providers

If abortion providers come seeking help, it may be for their own abortion first. They should be welcomed with gentleness. Respond only to the issues they bring up. Those responding must not be overbearing in addressing the work of the abortion provider. Often involvement in the abortion business is a way of coping with their own abortion experiences. As they heal their loss, the reality of their daily involvement in the tragedy of abortion comes to them, and they will usually leave the abortion business. The greatest gift we can offer is unconditional love to those seeking help and the recognition that abortion has profoundly scarred their lives.

The Society of Centurions of America was founded by Dr. Philip Ney as a support group for former abortion providers. (For more information, see the “Recommended Resources” section.)
SECTION FOUR

The Parish
Communicating Hope and Healing in the Parish

A number of practical steps can be taken to create a parish atmosphere that encourages women and men who are suffering from abortion to seek healing and reconciliation, helps parishioners to be compassionate and supportive toward those who have experienced abortion, and creates a better understanding of the Church’s teaching on abortion, which always encourages and supports reconciliation and healing. These steps include the following:

- Effective homilies on post-abortion reconciliation and healing
- Parish connection to the diocesan Project Rachel or post-abortion healing ministry
- Memorials to children who have died before birth or in childhood
- Prayers and intercessions

**Effective Homilies on Post-Abortion Reconciliation and Healing**

Many women and men have acted on their need for post-abortion reconciliation and healing following a parish homily on the topic. This can be one of the most effective ways to reach post-abortive women and men in the parish.

When preparing to preach on post-abortion healing, pray to the Holy Spirit and be open to the Spirit’s promptings. Decide how to use the readings of the day to speak about God’s love, forgiveness, mercy, or another topic you want to highlight. Use these readings as the starting and closing for your homily so that it makes sense to the congregation that God wants this spoken to, today. Make sure that your message is age-appropriate to the audience. Be especially mindful of children, and do not assume that an elderly audience does not need to hear about abortion.

You might begin by asking those in the congregation who have had an experience of abortion to pray for you, so that you might speak the truth of their experience. Recognize that any discussion of abortion may stir deeply felt emotion. Today, almost everyone knows someone who has been affected by abortion. In addition to mothers who have an abortion, many other people may have been involved in abortion. Invite them also to seek reconciliation and healing, and tell them where to find help.

Speak of the pain of women who have had abortions. Read sections of testimonies written by women at “In Their Own Words” on the USCCB’s Web site (www.hopeafterabortion.org) or from books such as *A Path to Hope*, *Catholic Women and Abortion*, and *The Jericho Plan*. (See “Recommended Resources” section of this manual.) You may also know women who would allow you to use their written testimonies anonymously.
Speak of the pain experienced also by the fathers, grandparents, siblings, aunts, uncles, and friends. Again, anonymous testimonies may be helpful.

Share God’s compassionate and merciful love. Explain the Church’s post-abortion outreach, and describe the Holy Father’s words to women who have had an abortion (Evangelium Vitae, no. 99; see page vii). You may wish to mention the devotion to divine mercy, God’s unfathomable ocean of mercy that he wishes to pour out on us, and our traditional response of “Jesus, I trust in you.”

Invite people to pray for those whom they know personally who have had abortions; or encourage them to “spiritually adopt,” through prayer, someone who has had an abortion and is in need of healing. Emphasize the use of the Chaplet of Divine Mercy for this purpose.

Invite your parishioners who are dealing with a past abortion and want to seek healing to call you in the coming week. Some will call; after meeting with them, you can connect them to Project Rachel Ministry.

If someone leaves during your homily when you talk about the aftermath of abortion, trust that God has touched them in a profound way and is calling them to healing. When you speak about this issue, you are telling people that the Church cares and that healing is possible. This is a profound and liberating message for someone stuck in the pain of abortion.

Do not be afraid to mention God’s forgiveness and healing of abortion on holidays when extended families get together and non-practicing family members may attend Mass. People want to know it is safe to come home. They long to put their sin of abortion to rest.

If, after speaking about abortion, you encounter an angry parishioner, do not get defensive, and do not argue with him or her. Instead say, “You feel very strongly about this. Would you be willing to share a little about that so I can better understand your feelings?” Listen quietly, make eye contact, and when they finish, simply thank them for sharing. Say you’d be happy to talk with them again if they like. Their anger is not directed at you personally. The anger is sign of deep personal hurt of some kind, or it arises in the defense of someone they love. In listening, you allow them to vent their feelings, leaving room for God’s grace to work. People may not often be argued into a pro-life position, but many have been loved into one.

Parish Connection to the Diocesan Project Rachel or Post-Abortion Healing Ministry

Listing of Parish Resources

List the appropriate diocesan post-abortion healing ministry phone number in your parish resource lists. You may also want to list a different resource and phone number for those needing help with a pregnancy, such as a local pro-life pregnancy help center. The same information can be listed in your parish phone directory and on your parish Web site. On the cover page of your parish bulletin, also consider permanently listing these same resource phone numbers.

The Parish Bulletin

The parish bulletin is probably the most underrated vehicle for promoting the message of God’s love and mercy for women and men suffering from an abortion experience. Many women report having
come to a Project Rachel ministry after learning about it in the parish bulletin. Said one woman who called Project Rachel, “When I saw it for the third time in my parish bulletin, I decided you people were really serious about this.” Nor is the woman who had the abortion the only beneficiary. Everyone involved in an abortion decision can learn of the Church’s care when they read that message.

Occasionally you can run post-abortion healing announcements in the body of your parish bulletin. These would include diocesan announcements related to Project Rachel events, trainings, Masses, prayer services, or awareness programs.

Here are some examples of bulletin announcements:

The pain and sorrow of a past abortion need not endure for a lifetime. Call Project Rachel for a confidential referral to those who can help: (area code and phone number).

Trust in the mercy of God’s love. Do you know someone who is carrying the grief and sorrow of past abortions? Share with them the Good News of God’s merciful love. Call Project Rachel for a confidential referral to those who can help: (area code and phone number).

A word from Pope John Paul II to those suffering because of abortion: “Do not give in to discouragement and do not lose hope. . . . The Father of mercies is ready to give you his forgiveness and his peace in the Sacrament of Reconciliation” (Evangelium Vitae, no. 99). Call Project Rachel for a confidential referral to a priest and/or counselor who can help: (area code and number).

Are you experiencing shame, sleepless nights, guilt, or other negative emotions after abortion? You are not alone. Any woman or man who has had abortion touch their life personally is invited to contact Project Rachel, a post-abortion healing ministry. Trained, nonjudgmental staff can refer you to those who can help. All contacts are confidential. Take courage and call or e-mail us at (area code and number; e-mail address).

**Bulletin Inserts**

Consider occasionally stuffing a special insert in your parish bulletin, such as one of these:

- Relevant text from Pope John Paul II’s *Evangelium Vitae*, no. 99 (reprinted in this manual on page vii)
- An anonymous letter from a parishioner (or even a non-parishioner) explaining about his or her healing journey, which can help to allay others’ fears and encourage them to seek reconciliation
- A brochure describing the Project Rachel post-abortion ministry in your diocese, the brochure *Project Rachel: In the Heart of the Church*, the brochure *How to Talk to a Friend Who’s Had an Abortion* (see “Recommended Resources” section), or a brochure developed by your diocesan office
- A message from the pastor that speaks about the painful aftermath of abortion and the availability of pastoral help and the Sacrament of Reconciliation
Business Cards

These can be put in pews before holiday Masses. Cards also can be distributed by parishioners who leave them in public places where people can find them, such as restrooms or self-service laundries. Less conspicuous than brochures, they can also be kept in the confessional and given discreetly to people. The printed text can state simply:

Struggling after abortion?
For confidential care, call Project Rachel
(area code and phone number)
for women and men

To guard the innocence of young children, the cards could instead ask: “Seeking peace after a pregnancy loss?” Business cards can be printed in English on one side and Spanish (or French or another appropriate language) on the other side, depending on the local community. Contact your diocesan Project Rachel ministry to see if they can provide these cards for you or to obtain their logo and contact information for you to print your own.

It is important to have the cards available at diocesan and parish meetings held in conjunction with marriage preparation, with adults coming into the Church, and with the sacramental preparation of children. These occasions can heighten awareness of one’s need to reconcile with God. The presenters can call attention to the materials by saying that perhaps they know someone, a relative or friend, who could benefit from the information, and they should feel free to take a card or brochure for them. (People are naturally reluctant to take such material if they believe others would think it was intended for them personally.) Cards or brochures can also be included in any packets of information handed out in conjunction with marriage prep, natural family planning (NFP) training, RCIA, and classes for other sacramental preparation.

The Literature Rack and the Bulletin Board

The parish bulletin board is another tool for reaching post-abortive women and men. Project Rachel information, fliers, and posters should regularly be posted for general information, and the literature rack should always include brochures and educational resources on post-abortion healing. “Bulletin boards” on the parish Web site should also be used in the same way.

Memorials to Children Who Died Before Birth or in Childhood

One way to foster the parish’s presence as a community of healing is by establishing a memorial in remembrance of children who died before birth. A place of remembrance for parents who have lost a child before birth or in childhood can be a means of great consolation.

Since 1992 local Knights of Columbus councils have erected hundreds of memorials on church properties throughout the country. You may want to ask your local council if they have dedicated a monument in your locality or if they would consider undertaking such a project in your parish. It is important to work closely with your diocesan Project Rachel office in the development of such a memorial. Sometimes the best intentions may lead to a memorial with wording or images that actually cause harm to those struggling from child loss, especially abortion.
Some possibilities for memorials (though this is an area for great creativity):

- A garden area on the parish grounds.
- A monument or a statue of the Blessed Mother in the parish cemetery or on the parish property.
- A niche or corner in the church dedicated to the memory of these children.
- A “Room of Remembrance,” which provides a place of prayer, and a “Book of Remembrance,” in which parents can write the names of their children who died before birth or in childhood.
- A “Blanket of Love” memorial quilt (see Resource section). Anyone can be invited to make a block for a child they know who was lost to abortion or other infant loss. Local quilters can assemble the blocks. The quilt can be displayed in the vestibule of the church or in the parish hall. Blocks can include the first name of the child and the year and date of death, if known. Small symbols of new life—the Cross, a flower, leaves, a butterfly, or a baby lamb, for example—can be embroidered on each square.

A prayer service for dedicating memorials to children who lost their lives to abortion is reprinted in Appendix C of this manual.

As with all aspects of post-abortion counseling, the memorials and dedications themselves must take care not to violate confidentiality, so that persons participating are not labeled as “post-abortive.” To prevent this, these opportunities for healing and remembrance can be advertised for parents, families, and friends who have lost a child to miscarriage, stillbirth, abortion, or other childhood loss, and for those parish (or organization) members who wish to join them in prayer and solidarity.

**Prayers and Intercessions**

Prayers and intercessions for the healing of all those hurt by abortion are foundational. Take advantage of the opportunity to regularly include an intention for post-abortion healing in the Prayer of the Faithful.

**Sample Texts for the Prayer of the Faithful**

For parents who have lost a child to abortion
that their hearts would be open to the mercy of God:
that they would know the grace of repentance, confession,
and the healing embrace of the Father,
we pray to the Lord:

For parents overwhelmed by grief and remorse
at the loss of their child to abortion:
that Jesus the Good Shepherd,
so rich in mercy and compassion,
would heal their broken hearts,
we pray to the Lord:

For those who are haunted by the memory of an abortion:
that they would be given the grace
to seek healing in Christ,
we pray to the Lord:
For all whose hearts ache from the sin of abortion:
that God will soothe and heal them
with the balm of his mercy,
we pray to the Lord:

For all who counsel parents who have lost children to abortion:
that God would reward them for their witness to his divine mercy,
strengthen them, and grant them the words of wisdom to lead lost souls home to him,
we pray to the Lord:

For the children who have died from abortion in our nation:
that their mothers, fathers, and other family members would
seek the mercy, the peace, and the loving embrace of Christ,
we pray to the Lord:

Consider offering a Holy Hour or Mass for the intention of all those hurt by abortion. (A “Holy Hour for Life” is printed in Appendix D of this manual.)

Pray the “Rachel Rosary,” which includes meditations and intercessions for those involved in abortion. (See “Recommended Resources” section of this manual.)

Distribute prayer cards with a prayer for healing, such as the following prayer:

Eternal Father,
Source of all mercy and love,
out of love for us you sent your Son,
and willed that blood and water
flow from his side to cleanse us of sin
and restore lost innocence.

Hear the cry of each woman who mourns
the loss of her child to abortion.
Forgive her sin, restore her to your grace,
and still the terror of her heart
with a peace beyond all understanding.

Through the intercession
of the Blessed Virgin Mary,
Mother of all tenderness and our Mother,
strengthen her faith in you.
Give her the consolation to believe
that her child is now living in the Lord.

We ask this through Christ our Lord,
who conquered sin and death,
and who lives and reigns with you,
in the unity of the Holy Spirit,
one God, for ever and ever. Amen.

Msgr. James P. Moroney

(See www.hopeafterabortion.com/hope.cfm?sel=G84D; this prayer card can be purchased from the USCCB Secretariat of Pro-Life Activities: call 866-582-0943.)
SECTION FIVE

The Diocese
Project Rachel and Related Programs: A Diocesan Commitment to Post-Abortion Healing

The Church offers reconciliation as well as spiritual and psychological care for those suffering from abortion’s aftermath primarily through diocesan-based programs, most often called Project Rachel. . . .

Every church-sponsored program and identifiably Catholic organization and agency should know where to refer those in need of post-abortion healing.7

Today more than ever, the Church is called to proclaim that all human life is sacred and that abortion takes the life of a unique individual who is created and loved by God. At the same time, the Church offers effective pastoral care to those who have experienced abortion loss.

Introduction

Project Rachel is the post-abortion healing ministry of the Catholic Church in the United States (and now in many foreign countries) and is active in some form in most dioceses under the Project Rachel name or a similar title. The Project Rachel ministry is a network of healing composed of specially trained caregivers, which may include priests, deacons, sisters, lay staff and volunteers, mental health professionals, spiritual directors, mentors, chaplains, and others, such as medical personnel. These individuals, often working as a team, provide direct care to women, men, and adolescents who have been touched by abortion loss, enabling them to grieve, to develop a personal relationship with Christ, and to be reunited with the Church through the Sacrament of Reconciliation.

Each diocese controls and operates the Project Rachel ministry under the supervision of its ordinary. While some dioceses may rely on different structures, the Project Rachel outreach generally includes a dedicated referral telephone line answered by Project Rachel staff or volunteers, as well as a diocesan Project Rachel director or coordinator who oversees diocesan personnel and trained volunteers, who answer calls and arrange referrals to priests, mental health professionals, and various team members within the Project Rachel network.

Priests are central to the Project Rachel ministry, providing spiritual care through the Sacrament of Reconciliation and ongoing spiritual direction, when possible. Knowledgeable, compassionate counseling is also provided by priests, mental health professionals, and others in the network.

A diocesan Project Rachel ministry may choose to offer additional helpful programs, such as support groups, days of prayer and reflection, or retreats, augmenting the core elements of Project Rachel. Support

groups and retreats can benefit some women and men by providing validation of their loss and their grief in a community setting.

### How to Begin (or Strengthen) a Project Rachel Ministry in Your Diocese

#### First Steps

As with any diocese-based outreach program, it is most important to have the support of the diocese and key leaders, while at the same time preparing the logistical foundation for the ministry.

- **Permission**: Obtain permission and support from your bishop to establish a Project Rachel ministry.
- **Prayer Support**: Establish a network of intercessors who will pray for the success of the ministry, as well as praying for those who will provide care and for those in need of healing.
- **People Support**: Engage the support and involvement of others involved in similar and complementary programs in your area, and of those who may volunteer to help. These may include pregnancy care center staff, counselors, Catholic Charities and social service staff, Catholic hospital staff, chaplains, and others.
- **Leadership**: To oversee and coordinate the ministry choose a director who is knowledgeable and committed to the healing ministry. It is essential to screen out individuals who may be struggling with their own issues of healing from an abortion.
- **Location**: Determine a location in the diocese where staff, volunteers, and a dedicated telephone referral line will be housed. This can be in the family life office, the respect-life (or pro-life) office, the chancery, a diocese-based counseling agency, or perhaps even in a convent.
- **Staffing the Phone**: Prepare to staff the dedicated phone line with employees or volunteers who are trained to answer questions about the ministry, to prayerfully listen with gentleness and compassion to the person calling for help, and to make appropriate referrals. A phone line answered by Project Rachel alone is very important. The same phone line should not be answered for other programs such as crisis pregnancy assistance. Post-abortive individuals can be unintentionally turned away by a generic message aimed at trying to counsel a caller away from having an abortion. They are already suffering from having made the wrong decision.

Initial phone calls are usually brief, but sometimes they can be lengthy, requiring undivided attention. The phone staff can be an employee with other responsibilities, provided that these calls are given appropriate priority. When the ministry begins, the volume of calls is not overwhelming. Calls will increase gradually, depending on the level of public awareness and advertising of the ministry. It is not necessary to provide twenty-four-hour telephone coverage. The Project Rachel number is a referral line, not a crisis hotline. When personnel are expected to answer calls at night, they may be put in impossible situations if a caller is suicidal, threatening, or sexually suggestive. Taking calls at home can lead to staff or volunteer burnout, can be disruptive to family life, and may cause pain to the caller if they can hear the voices of children or other distractions in the background.
There is sometimes a question about whether a ministry should provide twenty-four-hour hotline service via cell phone. Unless an extraordinary public outreach has been undertaken, this should generally not be done. The goal of ministry is to provide referral care, not emergency care. Emergency care information, such as a suicide prevention hotline or emergency room contact, can be provided in the after-hours recorded message.

**Developing Interest Through Awareness Programs**

Offering one or more Project Rachel post-abortion awareness programs can be a very effective way to attract volunteers as well as people looking for help.

A post-abortion awareness program is an educational and outreach effort that includes information on the biology of pregnancy and abortion, the symptoms experienced by women in the aftermath of abortion, the impact of abortion on other family members including men, the process of healing, and the particular needs of the recently aborted versus women and men who have suffered the impacts of abortion for a long time. The program may include a personal witness by someone who has experienced an abortion, or a video on a similar topic. The program should conclude with an explanation of current resources for post-abortive women and men, or programs and resources that are being planned.

The post-abortion awareness program serves many purposes and audiences. Those who have been involved in an abortion often do not know where to turn for help. An awareness program can both inform them about the availability of help and, should they attend it, instill a sense of security they may need before approaching strangers for help in recovering from an experience they consider deeply shameful.

Family members and friends of those struggling in the aftermath of abortion can similarly become more knowledgeable about the abortion experience, get acquainted with the Church’s post-abortion healing ministry, and acquire information and brochures to share with the post-abortive friend or family member, directly or by casually leaving brochures where they will be noticed.

Many in the general public are unaware of the emotional and spiritual suffering that often follows abortion. The reality of that experience can change the hearts of those who favor abortion because they think it may be a “good choice” for a woman who has an unplanned pregnancy. Through an awareness program, attendees can learn that there are at least three victims of abortion: the mother, the father, and the child. While the child is now “living in the Lord” (*Evangelium Vitae*, no. 99), his or her parents are entrusted to us, to help lead them to the Divine Healer. It is a great privilege that God trusts us to be messengers of his mercy, bringing wounded souls to healing and grace through reconciliation.

Knowledge of the post-abortion experience of women and men can also soften the hearts of a small minority of pro-life advocates who can sometimes be harshly judgmental of women who have undergone abortion.

An abortion awareness program is also an effective tool for reaching mental health professionals, priests, and other community leaders.

Lastly, the media need to be educated about how abortion harms women, men, and adolescents. Once they become knowledgeable, some can be counted on to write stories, facilitate interviews, and create opinion pieces exploring the aftermath of abortion and giving the ministry free publicity.

In planning an awareness program,

- Choose a central location that is readily accessible to as many people as possible. Most often a parish location works well.
- Advertise broadly within the communities that you hope to attract to the program.
• Consider having the awareness program following a “Mass of Hope and Healing,” celebrated for the healing of those who have experienced a pregnancy loss, or following a prayer service for those suffering from abortion, miscarriage, or other child losses. (See information about a “Morning or Afternoon of Prayerful Remembrance and Intercession” in the “Recommended Resources” section.) This combination may also attract a wider group, especially those willing to pray for the ministry.

• Consider offering additional awareness programs throughout the year and in different locations in the diocese. This will continue to generate more volunteers and more people looking for help.

At the awareness program, hand out a form for attendees to sign up to become part of the Project Rachel network in various capacities, from prayer support to professional counseling. Subsequent to the program, the director of the ministry should meet individually with all prospective volunteers to determine if they have the competence for their desired role, are respectful of church teaching on all moral issues, and can appropriately respond to the spiritual, emotional, psychological, and/or physical needs of post-abortive women and men. Of particular concern is screening out individuals with the best of intentions who may be struggling with their own issues of healing or the need to be a “healer” for others.

Screening Professional Counselors and Therapists

The Project Rachel director/coordinator should personally contact each of the mental health professionals to ascertain licensure, proper insurance, specifics of the referral process, and costs, including their willingness to offer their professional services at a slightly reduced fee and, in some instances, to occasionally offer a session or two pro bono. It is also important to find out if the mental health professional is in agreement with church teachings, for example, on contraception and sexual activity outside of marriage.

This is important because a therapist who is unfamiliar with church teaching or who disagrees with some or all of it can cause great problems for women or men referred to them. One cannot assume that someone who works for a church agency, social service, or counseling program is Catholic, knowledgeable about church teaching, or in agreement with church teaching. Even those working in Catholic agencies, hospitals, retreat centers, schools, and programs must be thoroughly screened.

The question may arise about how to handle referrals for persons without financial or insurance resources for professional counseling. In some dioceses, the office has established a fund that will pay for a certain number of sessions for those in need. Sometimes a reduced fee schedule can also be arranged. The money can come from fundraisers, private donors, Knights of Columbus councils, Catholic women’s groups, and parish respect-life committees.

Screening Volunteers and Staff

In today’s world where perhaps one in three women under the age of forty-five has had an abortion, it is critical to ascertain with reasonable certainty the lived experience of those involved in volunteering for or staffing this ministry. This is a matter of safety and enforcement of boundaries for all who are involved. For instance, the person answering the phone should not be put into a situation that could be dangerous for her mental health, nor should the person calling be put at risk from someone who is perhaps unhealed and/or has boundary issues. If someone has experienced pregnancy loss, we must make sure that she has engaged in the process of healing before allowing her to provide services. Proper supervision must be provided by the director.
Below is a checklist of discernment questions for people who are interested in volunteering or who will answer the Project Rachel telephone line.

- Why do I feel called to work in this field?
- What is my story?
  - Have I experienced a crisis pregnancy?
  - Did my child or someone I love experience a pregnancy outside of marriage? Did the pregnancy end in birth, adoption, miscarriage, or abortion?
  - Have I experienced a pregnancy loss?
  - Have I had an abortion?
  - Did my mother attempt to abort me?
  - Have I lost a family member to an abortion? (a sibling, niece, or nephew, for example)
  - Has someone I know been touched by an abortion experience? (an aunt, grandmother, friend, brother, cousin, mother, spouse)
  - Have I struggled with the loss of a child through miscarriage, stillbirth, ectopic pregnancy?
  - Have I struggled with infertility?
  - Have I actively grieved these experiences, or have I kept my grief under control with activities?
  - If I have had an abortion, have I been involved in a post-abortion healing outreach? Does the issue still come up sometimes?
  - Why do I want to be involved in this? Am I “making up for something”? Do I want to fix someone?

Other questions for reflection:

- When a woman has had an abortion, I believe that . . .
- A woman chooses abortion because . . .
- What are my limits in helping someone? Are there some people I find impossible to deal with? What about them affects me that way?
- When I think about someone towards whom I would have trouble being compassionate, I think of . . . Why?
- If a woman has had multiple abortions, I would wonder if . . .
- When I think about talking to a man who has been involved in an abortion, I . . .
- When I think of talking to an abortion provider who is coming to deal with his or her own abortion loss, I want to . . .
- When I think of talking to a mother who forced the abortion on her pregnant daughter, I . . .
- To process the stories and emotions I will experience in doing this work, my means of coping are . . .
- Do I have a spiritual director?
- What professional skills or training do I have that would be applicable?

These are questions for personal reflection initially but also for discussion. If these questions are answered in writing, the Project Rachel director/coordinator must treat them as highly confidential. The Project Rachel director/coordinator has an obligation to keep everyone safe in this process and cannot assume that anyone who comes forward to help is in a position to be able to do so.

**Diocesan Training**

Training for specific audiences should follow the general awareness programs mentioned above. Consider specialized training for priests (preferably all priests in the diocese, both diocesan and religious order), seminarians, deacons, spiritual directors, staff of retreat centers, religious men and women, mental health professionals, Catholic Charities and social service staff, high school and college chaplains and counselors, hospital chaplains, geriatric caregivers, hospice workers, medical professionals, pro-life pregnancy center staff and volunteers, clergy of other faiths, and any volunteers who work with women who have unintended or “crisis” pregnancies.

In dioceses with active Project Rachel ministries, about 10% of priests choose to become involved in the Project Rachel referral network. Ideally, however, all priests should be trained because all will likely hear confessions of those who have been involved in abortion. All priests need to know how to be most effective in assisting post-abortive women and men during the Sacrament of Reconciliation, and they need to know how to refer people to the Project Rachel network for ongoing support.

Once Project Rachel is established in the diocese, calls will come from people of all faiths. Therefore, it is important that clergy of other faith traditions are trained and available to receive referrals. Project Rachel is a powerful evangelization ministry, but it is not the place of Project Rachel staff or volunteers to proselytize a post-abortive woman or man. Gently conveying the power of God's love and the message of hope offers wonderful opportunities to evangelize without proselytizing. It is God who will move the individual along the journey of faith.

**Keeping the List of Priests Confidential**

The list of priests and other clergy involved in Project Rachel ministry must remain confidential. Only the director, the bishop (and others he deems appropriate), and those who make direct referrals should have access to the list. This is advisable for many reasons:

- Priests are more willing to be part of the ministry if they know they can choose to accept (or reject) referrals. Sometimes it is necessary for a priest to ask that referrals not be sent to him for a while; he may be ill or changing parishes or may simply have too many commitments at the moment.
- If everyone knows that “Father so-and-so” is a Project Rachel priest, parish personnel or parishioners may assume that a woman coming to see Father has had an abortion, and they may unintentionally breach confidentiality or may even gossip.
- Should a priest on the list prove not to be a good referral, Project Rachel staff can quietly choose not to refer to him without it becoming known throughout the network. If names are public knowledge, it could be impossible to delete a priest’s name from the referral list without uncharitable assumptions being made.
Sometimes lay Catholics do not understand the value of the Project Rachel ministry, and they may become critical of the priest for participating in it.

Abortion providers may use a published list of priests to assure Catholic women that it is all right for them to have an abortion because the Church expects this to happen and has provided a list of priests who can “provide forgiveness” afterward. This has happened more than once.

Keeping All Other Lists Confidential

The list of other caregivers must also be kept confidential. Again, this allows volunteers and professionals to serve as appropriate. Should someone on the list prove inappropriate, his or her name can be confidentially removed without public knowledge.

Launching and Promoting the Project Rachel Ministry

Once priests, professionals, and volunteers have been trained and the ministry is ready to function, offer a special Mass to pray for those wounded by abortion and to publicly announce that help is available. Ideally, the bishop will celebrate this Mass and preach about God’s love and desire to heal the wounds of abortion. This is an opportunity to invite people from throughout the diocese and to invite the press. The media are often very interested in this ministry because it runs counter to what they expect from the Church. The media assume that the Church condemns both the sin and the sinner and are surprised that the Church offers pastoral care to those who have suffered the impacts of abortion.

Promoting the Project Rachel Ministry

Making the public aware of this ministry is crucial to its success. Without sustained publicity the ministry will not flourish. More importantly, those in great need of healing and reconciliation with God may continue to live in alienation and despair, unaware of the forgiveness and grace Jesus makes possible through his Church. Diocesan priests should be encouraged to preach about God’s love and mercy and to speak about the presence of Project Rachel in the diocese. At the beginning of the ministry, it is helpful if the bishop makes a public statement announcing the ministry and explaining how it operates and what services will be provided. The local Catholic paper can interview the bishop, director, and/or a priest involved in Project Rachel ministry to promote the work. Radio stations and local television stations may also be willing to broadcast stories concerning the launch of the Project Rachel ministry.

A diocesan spokesperson who is comfortable with the media should be prepared to convey Project Rachel’s message of hope and healing and explain how the ministry works. The spokesperson, ideally a woman, should be able to articulate that the Church’s strong prophetic stand against abortion is not inconsistent with its pastoral outreach to help those wounded by abortion to find healing and peace.

Radio ads can be aired at night (when advertising costs are lower) and still reach many who have experienced an abortion loss, because of their frequent difficulty in sleeping. In some areas, radio advertising may be available at a reasonable price, and in some cases, it may be donated as a public service. Ads can be downloaded from the USCCB’s Hope After Abortion Web site, which supports the Project Rachel ministry at www.hopeafterabortion.org. Click on “Jubilee Program” and the “radio listen” link.
Small advertisements are relatively inexpensive to place in community newspapers and local shopping guides.

**Continuing the Ministry**

Continue educating participants in the network and the broader community through written materials and occasional workshops.

Offer occasional training workshops for new people so that the network can continue to expand. Even those who are not part of the official referral network can benefit from training so they can knowledgeably recommend Project Rachel to people they encounter in their own area of ministry.

Continue advertising in parish Sunday bulletins and in local secular and Catholic media. Encourage parish pro-life coordinators to display Project Rachel materials within the parish and to distribute Project Rachel information throughout the broader community.

Seek out the media often, making yourself available to them for stories on the growth of the ministry. By effectively and untiringly proclaiming God’s merciful love, by serving his wounded people competently and compassionately, and by remaining faithful in prayer, the diocesan Project Rachel ministry will grow and flourish.

**Additional Healing Services:**

**Masses and Retreats**

**Mass of Hope and Healing**

Once or twice a year, a diocese or parish may plan a “Mass of Hope and Healing” for all those who have lost young children. All promotional materials should make it clear that the Mass is offered for anyone who has been touched by the loss of a child, whether through miscarriage, stillbirth, ectopic pregnancy, early infant death, or abortion. If the event focuses only on abortion, attendance will be extremely low. But if all such losses are included, many will come. Materials on miscarriage, child loss, and post-abortion healing can be displayed in the back of the Church for people to take home.

Some suggestions for the Mass are as follows:

- Place a basket with paper and pencil at the entrance for people to write the name(s) of the child(ren) they are remembering (or, perhaps, they could write “my daughter’s child”). Papers should be placed in the basket, which will be carried to the altar at the Offertory.

- The homily should focus on grief and healing. The story of Lazarus’s death and resurrection could be used as a point of departure, but many other stories from Scripture could be used. It is important to speak about God’s infinite mercy and the healing power of the sacraments.

- Have something people can take home with them at the end of Mass as a remembrance—a prayer card, a small crucifix, a votive candle in glass, or perhaps an attractive artificial flower that can be displayed without prompting others to ask what it means.
Working with Retreat Models

Various post-abortion healing retreat models are now offered through diocesan programs or independent of diocesan offices. Rachel’s Vineyard Ministries, Entering Canaan, Land of Milk and Honey, and Bethesda Healing Ministry have been effective in working in collaboration with, or as part of, diocesan Project Rachel offices.

In some cases, the retreat experience is the first step a woman or man may take on the healing journey. In many cases retreatants are referred after some initial work with a Project Rachel team member, such as a staff member, priest, or counselor. Some women or men may need immediate assistance and cannot wait for the next scheduled retreat before receiving help. Others may want to begin with a priest confessor before doing anything else. The goal of Project Rachel is to provide women and men with competent help and holistic care when they need it. Individual spiritual or psychological counseling, retreats, days of reflection, and post-abortion healing Masses are all part of the broader team approach to healing.

If you are going to add a retreat model to your ministry, here are some considerations:

• Define carefully the relationship between the diocese and the retreat program. Is this an outside referral to an independent entity, or is this a diocese-run ministry? When working with retreat models that operate independently from the diocese, make sure that contracts and insurance issues are evaluated and approved by your diocesan attorney.

• The retreat team should be competent in their particular fields (facilitators, counselors, priests) and should be screened like any other Project Rachel volunteer or staff member (see “Screening Professional Counselors and Therapists”, and “Screening Volunteers and Staff” on page 58).

• Retreatants should be screened as well. Anyone who reveals suicidal thinking, active substance abuse, or an apparent psychological disorder that could prove disruptive should be encouraged to postpone going on the retreat. Inquiring about medications being taken for depression or anxiety may signal the intensity of any psychological disorder.

• A procedural protocol should be in place in the event a retreatant requires mental health or medical care during or following the retreat. In the event a family member needs to be contacted, appropriate contact information should be provided in advance by each retreatant.

• Priests participating on the retreats should ideally be from the local diocese. They are covered by the diocesan insurance policy and are familiar with local resources and the usual and customary practices of the diocese. For instance, local diocesan priests can help a woman approach the tribunal if she needs to pursue an annulment. If a participating priest is from outside the diocese, proper procedures must be followed so he can obtain faculties from the diocese where the retreat is offered.

• If the Blessed Sacrament is to be exposed, proper diocesan permission and procedures must be followed. Make sure to coordinate with your appropriate diocesan office for any unique liturgical questions.

• A printed list of follow-up resources with contact information should be made available to all retreatants at the close of the retreat.
SECTION SIX

The Canonical Perspective on Abortion
The Canonical Perspective on Abortion

It is commonly thought that the Church excommunicates all Catholics who have procured a successful abortion. However, in probably a great many cases, mitigating or extenuating circumstances prevent the individual from incurring the censure of excommunication. The tragedy of abortion triggers distinct and separate questions regarding the personal responsibility of one who procures a successful abortion: has a sin been committed? If so, was the commission of that sin such that it also resulted in the incurring of a penalty?

A sin is a purposeful and deliberate offense against the will of God: an utterance, a deed, or a willfully entertained desire contrary to God’s law. Objectively, abortion is a mortal sin, an act gravely contrary to the moral law.

A crime, which is more commonly referred to as a “delict” in church law, is an external violation of a church law or precept that has been formally established by an ecclesiastical authority who has legislative power (cf. cc. 1311, 1315). While it might be surprising to many people, actually very few sins have been established by the Church as also being crimes. But among those few sins that are crimes, abortion clearly is included among the most grave (c. 1398).

Going hand-in-glove with crime is the reality of a penalty, which is a sanction established by church law that may be applied against a Catholic who commits a crime. This penalty is to motivate that person to return to the Church’s way of life, to repair an injustice committed by the act, and to allow reparation for scandal caused by it (cf. c. 1341). According to the Code of Canon Law,² the Church’s key legislative text, both a person who procures a successful abortion, as well as any accomplice whose positive cooperation was necessary for a successful abortion, incur the automatic (latae sententiae) penalty of excommunication (cf. cc. 1398; 1329 §2; 1314). Actually, excommunication is a censure that should be seen as a medicinal penalty, meaning that it is intended primarily to foster the repentance and reconciliation of the one who committed the act (cf. c. 1312 §1, 1º). Thus, excommunication may be applied only until the offender accepts God’s healing grace and repents, at which time the excommunication is to be lifted in the Sacrament of Reconciliation or by other legitimate means. In other words, the Church has established excommunication as a penalty in cases of abortion to give witness to the gravity of the offense, something not perceived by the secular society, and to assist in the reform of the one who committed or cooperated in the abortion. It is not meant to serve as a permanent stigma for the offender to bear.

A few terms deserve explanation. Abortion is the direct, intentional killing of an embryo or fetus by whatever means and at whatever time from the moment of conception. Procure means to acquire, obtain, induce, or cause directly and intentionally by means of physical or moral action. Consequently, a person who actively participates in the abortive act procures the abortion. Successful means the goal is attained, not simply desired, intended, frustrated, and/or attempted. Hence, while the desire, intention, and/or attempt of an abortion would be gravely sinful, they do not themselves constitute the crime of abortion.

So can we say that all Catholics who procure a successful abortion or who positively cooperate in one in this strict legal sense are automatically excommunicated? Not necessarily. This is due to the fact that, in order for a crime to be committed, church law requires the perpetrators of the act to have acted in a gravely responsible manner. That is, they had to have committed the act with a full and

deliberate will to cause harm and to violate the law. Accordingly, just as civil law recognizes mitigating and extenuating circumstances that remove or reduce responsibility, so does church law.

Thus, the following circumstances, among others listed in c. 1323, might result in a person’s never being subject to a penalty for procuring a successful abortion, even if the act he or she commits might still be considered gravely sinful and is certainly objectively wrong:

1. One who “habitually lack[s] the use of reason” (such persons are actually deemed not capable of committing an offense against the law since they have no capacity to choose to act contrary to the law) (c. 1322).
2. One “who has not yet completed the sixteenth year of age” (c. 1323).
3. One who without any fault was unaware of violating a law or precept of the Church (even though aware that abortion is a serious/mortal sin; however, church law does presume that Catholics know the law by which they are bound) (cf. c. 15 §2).
4. One who acted under compulsion by physical force or in virtue of a mere accident that could neither be foreseen nor prevented when foreseen (cf. c. 1323). However, there is a difference between acting on compulsion of physical force and acting out of grave fear. One who acted out of grave fear is still liable to having a penalty imposed, since the act of abortion is intrinsically evil (grave fear is an internal response of a person to the credible threat of serious evil to be inflicted by another person) (see c. 1324 §1, 5°).

Next, the following persons are not subject to an automatic penalty for procuring a successful abortion, although a lesser penalty might still be imposed as a result of a church process (cf. c. 1324):

1. One with “only the imperfect use of reason” (c. 1324).
2. One “who lacked the use of reason because of drunkenness or another similar culpable” mental disturbance (c. 1324).
3. One acting in the serious “heat of passion which did not precede and hinder all deliberation of mind and consent of will,” as long as “the passion itself had not been voluntarily” stirred up or fostered (c. 1324).
4. “A minor who has completed the age of sixteen years” (c. 1324) but is not yet eighteen years of age.
5. A person who was forced through “grave fear, even if only relatively grave” (c. 1324).
6. One who without any fault was unaware “that a penalty was attached to a law or precept” (c. 1324).

Therefore, for a person to be automatically excommunicated that person must have procured a successful abortion or have positively cooperated in a successful abortion and

1. Have possessed full use of reason
2. Have been at least eighteen years of age
3. Not have been ignorant of the fact that church law includes the penalty of excommunication for the crime of abortion (this is different from simply knowing that abortion is a serious or mortal sin; church law presumes that Catholics are not ignorant of the law by which they are bound: see c. 15 §2)
4. Have been able to exercise his or her free will and not have been operating out of grave fear, serious heat of passion, inadvertent drunkenness, or any other similar mental disturbance

The censure of excommunication can be removed using the formula provided in Appendix I to the Rite of Penance (cf. cc. 1354-1357) by what the law refers to as an “ordinary” of a diocese (the bishop appointed to govern the diocese). In addition, most diocesan bishops have granted this faculty to priests within their diocese. When in doubt it is best to confirm this with the diocesan chancery.

Finally, let's look at what it means to be excommunicated. The penalty of excommunication forbids a member of the Church (cf. c. 1331)

1. “To have any ministerial participation in celebrating the sacrifice of the Eucharist or any other ceremonies of [public] worship whatsoever” (c. 1331).
2. “To celebrate the sacraments or sacramentals and to receive the sacraments” (c. 1331).
3. To discharge “any ecclesiastical offices, ministries, or functions whatsoever or to place acts of governance” (c. 1331).

Please note carefully, however, that an excommunicated person, although outside the sacramental life of the Church and unable to exercise authority of ministry within the Church, still remains a member of the Church—still is a Catholic. Moreover, an excommunicated person is not prohibited from attending Mass or other public acts of worship, nor from taking part in private acts of prayer or devotion. In fact, these should be encouraged so as to help the excommunicated person to become contrite, to reform his or her life, and to aid in the repair of injustice and scandal committed by the act of abortion.

The matters summarized above regarding church law are complex, most especially the questions of who acts as an accomplice in the act of abortion and who has actually incurred the penalty for the act of abortion. If you have any further questions about abortion and canon law, you may want to contact a canonist in your diocese or a priest who can assist you in a confidential manner.
SECTION SEVEN

Recommended Resources
Recommended Resources

Booklets


This booklet contains seven guided Scriptural meditations to help women who are suffering in the aftermath of abortion to experience God’s merciful love more deeply. Beginning in early 2010, it will be available free through The Word Among Us Partners: www.waupartners.org.


Cost is $1.00 each, with discounts for large quantities. Call 203-752-4574, or visit the Knights of Columbus Catholic Information site at www.kofc.org/un/en/about/contact/cis_contact.html.


A prayer resource for individuals or groups.


This booklet is designed to be put in a parish in a location where men can pick it up. It is a gentle introduction to post-abortion healing for fathers, written by a priest psychologist with many years of experience in post-abortion healing ministry and expertise in the spiritual development of men. Available individually or in bulk: $4.00 each, including postage and handling, from menandabortion@yahoo.com. For more information or to place an order, call the National Office of Post-Abortion Reconciliation and Healing at 800-5WE-CARE.


Abortion stories, the obstacles to healing, effects of abortion on others, and healing through divine mercy.

Books


The author, a professional counselor who is post-abortive and who has devoted her practice to helping those suffering post-abortion, presents fifteen stories of abortion and healing.


A collection of stories of men who were involved in abortions and their recovery.


Authored by the founders of the Rachel’s Vineyard post-abortion retreats and Fr. Frank Pavone, this book discusses abortion trauma, the methodology of Rachel’s Vineyard, and tips for counselors and clergy involved in post-abortion ministry.

Deals with what is called “traumatic reenactment” as it pertains to women dealing with an abortion loss.


Resource to understand the wounds of a man after abortion as well as a process to help him heal.


A practical book about how to assist those suffering in the aftermath of abortion, including prayer suggestions, written by a priest who has done post-abortion ministry.


Extremely helpful book for those who assist women and men who have had reproductive losses, including abortion. This relatively short book is an easy read and provides concrete suggestions for clergy, grief facilitators, and mental health professionals; written by experts in the field of grief.


Fourteen stories by women and one by a man recounting their struggles after involvement in abortion and how they eventually found peace.


A marriage and family counselor presents a dozen stories of abortion aftermath and healing, along with a resource section on where to find help for those contemplating abortion, medical risks related to abortion, and chapters on abortifacient contraceptives.


A series of eight short reflections on the lived experiences of women struggling after abortion, tied to the words of Pope John Paul II in paragraph 99 of *Evangelium Vitae* (*The Gospel of Life*). The author, a priest, writes from his own experience as a pastor who has counseled post-abortion women.


This book provides an overview of post-abortion healing, written by a priest who is a pioneer in the field of post-abortion ministry.


Collection of papers presented by experts in abortion aftermath at a conference in Washington, D.C., in 1995. This is an overview book, with a chapter on Project Rachel and a chapter on sacramental healing.


This book is targeted to teens and young-adult women who have had abortions. It can be purchased in quantity by campus ministers and youth ministers and left in a place where people can see it, with a note that says, “For your friends. Please keep it in circulation.” No other book targets the young woman who has recently experienced an abortion loss while not being psychologically mature enough to process all that has happened.

An overview of years of research in the abortion experience. Dr. Reardon is considered one of the world’s experts in the field.


A short, concise resource developed to assist clergy in preaching about the emotionally charged issue of abortion.


Personal stories of women’s different choices and experiences after having conceived a child as a result of a sexual assault.


Based on 500 articles from journals in the past twenty years addressing issues that follow abortion loss. Excellent for anyone looking for an overview of research and issues. Written by a psychologist and bioethicist. Also available online at deveber.org/womens-health-after-abortion.


One woman’s poignant and beautifully written story of her journey from emptiness and regret, after an abortion recommended by doctors, to peace and healing through Jesus Christ.


Having accompanied his girlfriend for her abortion, sociologist Shostak was moved by the experience. This led him to survey 1,000 males in thirty abortion clinics in eighteen states. He was surprised to find that other “waiting-room men” felt excluded, wanted to have counseling at the clinic, and were overwhelmed by their own negative emotional responses to the abortion. This work remains the only academic book on the subject today.


Describes the personal aftermath of abortion experienced by Dr. Stanford-Rue and the long-term healing that is possible.

**Brochures and Articles**


*After the Abortion*, by Sr. Paula Vandegeer (Item #9901-VAN)

*Divine Mercy in My Soul*, by Theresa Bonopartis (Item #0001-BON)

“The Hollow Men”: Male Grief and Trauma Following Abortion, by Vincent M. Rue, Ph.D. (Item #0846)

*How to Talk to a Friend Who’s Had an Abortion* (Item #0120)

*Neither Do I Condemn You* (Item #9906)

*Project Rachel: In the Heart of the Church* (Item #0748)

*A Special Word to Women Who Have Had an Abortion*, by E. Joanne Angelo, MD (Item #9701-ANG)
Pamphlets
Available from www.lifecyclebooks.com:

Do You Know Someone?
The Fear I Felt
Forgotten Fathers
Hope and Healing
The Pain That Follows
Secret Sorrow

Prayer Cards

Prayer for Healing (Item #9911)
Trust in God’s Mercy (Item #9913)

DVDs
Available from www.lifecyclebooks.com:

Dear Children
Beyond Regret

Web Sites
www.hopeafterabortion.org—USCCB Secretariat of Pro-Life Activities, supports the Project Rachel Ministry
www.noparh.org—National Office of Post-Abortion Reconciliation and Healing (NOPARH)
www.menandabortion.info—“Reclaiming Fatherhood,” an educational outreach of NOPARH
www.afterabortion.org—The Elliot Institute
www.bethesdahealing.org—The Bethesda Healing Ministry
www.postabortionhelp.org—Lumina referral network
www.rachelsvineyard.org—Rachel’s Vineyard retreats
www.prolifejoes.com—An information center for pre- and post-abortion men

Morning or Afternoon of Prayerful Remembrance and Intercession
This prayer service—consisting of talks, testimonies, Eucharistic Adoration, Mass, intercessory prayer, and opportunity for confession—was developed by the Sisters of Life and Theresa Bonopartis for the Archdiocese of New York. It has been conducted at the Basilica of the National Shrine of the Immaculate Conception in Washington, D.C., as part of the January 22 Prayer Vigil for Life and is being
replicated in many dioceses around the country. All talks, testimonies, and texts of prayers and hymns are available from Theresa Bonopartis (founder of Lumina post-abortion healing ministry) at 877-586-4621 or lumina@postabortionhelp.org.

**Support Group for Former Abortion Providers**

The Society of Centurions of America was founded by Dr. Philip Ney. Abortion providers may be referred to the Society of Centurions for ongoing support. Its director, Joan Appleton, RN, a former abortion facility nurse, can be reached at 651-771-1500 (Pro-Life Action Ministries) or by mail at P.O. Box 75368, St. Paul, MN 55175.

**Memorial Shrines and Sites**

The Marian Fathers of the Immaculate Conception at the National Shrine of the Divine Mercy in Stockbridge, MA, have a Shrine of the Holy Innocents where you can memorialize a child. You can create a lasting memorial for a child on a glass wall tile (either 3 by 5" for $200 or 6 by 5" for $400), on a candle rack ($100), or in the Book of the Holy Innocents ($25). The construction of the new shrine will be completed by 2010; however, memorials are being created now. Call 800-671-2020 or visit memorialsonedenhill.org.

The loved ones of the children memorialized are remembered daily at Holy Mass, in the Rosary for Life, and in the Perpetual Novena to the Divine Mercy at the National Shrine of the Divine Mercy as well as in special Masses on December 12 (the Feast of Our Lady of Guadalupe), on December 28 (the Feast of the Holy Innocents), and on the third Saturday in July.

The National Memorial for the Unborn in Chattanooga, TN, offers nameplates for deceased children ($35). Visit www.memorialfortheunborn.org. Although a lovely setting, this is not a Catholic site.

**Articles in Scholarly Journals**


Reardon, D. C. 2006. “Relative Treatment Rates for Sleep Disorders Following Abortion and Childbirth: A Prospective Record-Based Study.” *Sleep* 29:105-106.


Appendices
APPENDIX A

The Role of the Priest with Those at Risk of Aborting Due to an Adverse Prenatal Diagnosis

Today, nearly every pregnant woman is exposed to a number of diagnostic tests designed to discover problems with the baby or pregnancy. A problem diagnosis will usually cause the doctor to recommend a termination of pregnancy. The doctor may honestly believe that it is “easier” or less risky to end the pregnancy early. He may state that it is more compassionate to “let the baby die now.” He’ll assure the parents that no one has to know. Often though, in reality, his advice may be motivated by the fear of a malpractice or a “wrongful life” lawsuit, in which the parents seek lifetime support from the doctor’s insurer, claiming that the doctor failed to advise them fully about the extent of their child’s disabling conditions.

Working in conjunction with your diocesan Project Rachel office and respect life office, it is advisable to develop a list of parents who have endured early infant loss, completed a pregnancy with a poor diagnosis, or are parenting a special-needs child. These parents can be valuable resources for other parents who are facing the anxiety of a poor diagnosis and are being pressured to abort. It is also wise to have contact information handy for pro-life obstetricians, as well as the specialists in high-risk pregnancies.

Advice to Priests

Mary Kellett, a Catholic mother of eleven, who founded Prenatal Partners for Life after her youngest child was diagnosed in utero with trisomy 18, offers this advice to priests in counseling parents:

Ending the life of a child by early induction is an abortion. Every mother grieves for the loss of her child she aborts. Then she grieves the unknown and the “what ifs.” By allowing God to decide the fate of her child, a mother heals more fully, and in the end, after all the pain heals, she is joyful. There are no regrets. Carrying that child to term doesn’t harm the family or inflict pain upon the pre-born child. What it does is teach the virtue of patience and dependence on God.

When a couple comes in search of answers in their sorrow, it is crucial to do the right thing by counseling them to love that child for as long as God wills it. Such parents come in search of God’s love and God’s truth and God’s will. Priests are the pillars that make the world strong. Stand strong for life.
Helpful Responses

Parents who were given a negative prenatal diagnosis offer the following suggestions as helpful comments in accepting their situation with trust in God:

- God will give you every grace you need.
- I hear your pain. God hears your pain. God loves you and calls all of his children to embrace the sanctity of all human life from conception to natural death. He will be with you and never leave your side.
- You are united to Christ through your suffering.
- God has chosen you to be the mother of this special child.
- Go to our Blessed Mother. She knows your pain and will wrap you in her mantle.
- Name your baby, talk to your baby, and love your baby like any mother would.
- Create wonderful memories of this special time while he or she is still alive and protected in your womb.
- Remember that God can and does perform miracles. Don’t be afraid to ask, and don’t be afraid to hope.
- Every life is created by God and has a purpose.
- These special babies bring with them many spiritual gifts and grace.
- If your baby doesn’t make it to term, there is a Baptism by desire.
- No matter how long your baby lives, he will be your child for all eternity.

Hurtful Responses

Parents also offered suggestions on what not to say (things that may cause confusion and lead a woman to end her pregnancy):

- Only you know what is best for you and your family.
- This is between you and God.
- You need to keep your own health in mind.
- This has got to be hard on your body.
- What do you think is the right thing to do?
- This is a complicated matter.
- Follow your own conscience.
- I’m worried about your mental health.
- Listen to the doctors and do what you think your heart tells you to do.
- If your choice is made with love, it can’t be wrong.
Additional Resources

In addition, you can recommend that the parents visit these Web sites:

**morninglightministry.org**

Morning Light Ministry is a Catholic ministry for bereaved mothers and fathers who have experienced the death of their baby through ectopic pregnancy, miscarriage, stillbirth, or infant death up to one year old. This ministry also welcomes bereaved parents of other Christian denominations, bereaved parents of other faiths, and bereaved parents of no religious affiliation who are struggling with the very notion of faith.

The Hope in Turmoil section of the site provides information and support for those struggling with a poor prenatal diagnosis.

Morning Light Ministry offers help via telephone across Canada and the United States. All telephone help is provided by bereaved parents who have been trained over the course of many months.

**www.benotafraid.net**

Benotafraid.net is an online outreach to parents who have received a poor prenatal diagnosis. The family stories, articles, and links on this site are presented as a resource for those who may have been asked to choose between terminating a pregnancy or continuing on despite the diagnosis. The benotafraid.net families faced the same decision and chose not to terminate. By sharing their experiences, they offer encouragement to those who may be afraid to continue on.

**www.childrensmemorial.org/depts/fetalhealth/overview.aspx**

The Institute for Fetal Health in Chicago is a national resource. It provides an opportunity to speak to world experts and obtain good information on anomalies and treatment strategies. The Institute's Web site states, "Using a multidisciplinary approach, the Institute for Fetal Health provides prenatal consultation and pediatric care planning for pregnant women identified as carrying babies with birth defects or medical problems." Parents can self-refer, or their physician can make the contact.

**www.prenatalpartnersforlife.org**

This site, developed by Mary Kellett, offers support, information, and encouragement for carrying to term with an adverse prenatal diagnosis, as well as support for raising a child with special needs after birth. Parents whose children have been newly diagnosed with a birth defect are put in touch with parents of children with a similar birth defect so the experienced parents can offer support, information, and advice on caring for their children until the day God calls them home.

**www.elizabethministry.com/prenatal.html**

Elizabeth Ministry International offers families who have received a poor prenatal diagnosis spiritual and compassionate support through mentoring companions, development of birth plans, labor and delivery presence, memorial and burial services, retreats, prayer, blessings, support groups, community assistance referrals, and an extensive collection of additional resources.

Information about perinatal hospice can be found at the following sites:

**www.choicesmc.org/pages/pregnant/perinatal.php**

**www.aaplog.org/PositionsAndPapers/PerinatalHospice.aspx?fileID=1**

**www.perinatalhospice.org**
Raising the Issue of Prior Abortion Loss in Marriage Preparation

The question of sexual histories should be brought up in marriage preparation programs as a matter of course. Couples need to be encouraged to be honest with each other from the beginning to set a firm foundation for communication in the marriage. If there is something that troubles either partner (for instance, many past sexual partners, or an abortion experience), it is better to know about it before the marriage while discernment can still occur.

The couple should individually be invited to discuss their sexual histories. There is a myth that what is in the past should stay in the past; however, sexual histories enter the marriage, whether spoken about or not. This is simply an invitation to be honest. It is their choice to pursue the invitation, but at least it has been extended.

The priest or deacon can say, “Past intimate (sexual) relationships become part of our history. Sometimes STDs have been contracted, and your partner has a right to know about that because of a threat to health and future offspring. Intimacy wounds like past abuse and abortions can interfere with the establishment of healthy sexual intimacy. While you may not have thought about these events for a long time, it is important that you share this information with your partner.”

Raising these issues can be very beneficial to the couple. A partner with no abortion history may have a hard time understanding a post-abortive spouse. If either or both partners have abortion losses with other people, they need to be aware of how this may play out in their marriage, especially if they have not yet healed. Deep distrust can surface in their relationship. For instance, a man may have been involved in many abortions. His fiancée needs to know the circumstances because if he has forced these abortions, the same reaction may happen when a pregnancy occurs within their relationship. When the truth is shared, the partner can help the healing by offering to spiritually adopt the lost child or children.

For priests doing marriage preparation, it is advisable to meet with each party separately after meeting with them together. This allows time for discussion and counseling and, in many cases, confession.
Appendix C

Blessing of a Monument to Unborn Children Who Have Lost Their Lives to Abortion

Note: This service can be adapted to include children lost through miscarriage, stillbirth, and in infancy, should a broader focus be desired.

Greeting

When all have gathered, the priest or deacon greets them in the following, or some other suitable, words:

(Book of Blessings, no. 1423)

The grace of our Lord Jesus Christ,
giver of life and conqueror of death,
be with you all.

R/. And also with you.

In the following or similar words, the priest or deacon prepares those present for the celebration:

Brothers and sisters in Christ:
At the beginning of creation, the Spirit of God breathed upon the waters and brought beauty out of chaos.
Then God took the soil of the earth and by his breath put life within our beings.
Yet from the time of Cain, in our human weakness, we have sinned against this beautiful gift of life.

May this monument be a memorial to all children who have died while in their mother’s wombs.
May this become a place to honor their memory and grieve their loss.

May we all trust in God’s mercy,
and may those who have participated in abortion find the healing and mercy of Almighty God.

May we be resolved to encourage and strengthen those who are pregnant and in need and those in need of healing.

Through the intercession of Mary, Mother of All Life, may each of us come to respect, defend, and protect life in all of its stages.
Reading of the Word of God

An appropriate reading may be taken from the *Lectionary for Funerals for Children Who Died Before Baptism* as found in the *Order of Christian Funerals*, chapter 15.

Homily

Intercessions

The priest or deacon introduces the intercessions:

Christ the Lord blotted out sin by dying on the Cross and destroyed death by rising from the tomb. Let us therefore commend these children to his care and place our faith in his mercy.

Another person leads the intercessions:

For all children who have died by abortion, and especially for the children of [diocese, town]. May they rest securely in the loving arms of the Lord:
we pray to the Lord:

R/. Lord, hear our prayer.

For the parents of these children, may God move their hearts to repentance and with courage may they be restored to his peace:
we pray to the Lord:

R/. Lord, hear our prayer.

For doctors and all health care professionals, that, by our patient and loving example, they may be converted to a love for life and practice their professions with true dignity:
we pray to the Lord:

R/. Lord, hear our prayer.

For a growing respect for all human life and a clear proclamation of the Gospel of Life. May we defend the lives of the smallest and weakest following the example of Christ Jesus:
we pray to the Lord:

R/. Lord, hear our prayer.
For all unborn children,
and especially those secure in their mother’s womb,
that we might treasure them as God’s most precious gift:
we pray to the Lord:

R/. Lord, hear our prayer.

The priest or deacon concludes the intercessions by inviting all to pray the Lord’s Prayer:

God hears our prayers,
and so we have the courage to pray:

Our Father . . .

Closing Prayer and Blessing of Monument

(based on Order of Christian Funerals, no. 15)

Lord God,
ever caring and gentle,
we commit to your love these little ones,
quickened to life for so short a time.
Enfold them in your love.

We pray for all responsible for the death of these children.
Give them the gift of true repentance,
and comfort them with a full portion of your mercy.

Bless this monument +
that it may be a sign to us
of our need for your grace.

Heavenly Father,
transform our selfishness and sin
and make us turn to your love.
Help us to embrace the Gospel of Life,
to repudiate sin, selfishness, and death,
and to live only as your children.

We ask this through Christ our Lord.

R/. Amen.
Blessing of Those Present

(Book of Blessings, nos. 1753-1754)

A priest or deacon prays:

May the peace of God,
which is beyond all understanding,
keep your hearts and minds
in the knowledge and love of God
and of his Son, our Lord Jesus Christ.

R/. Amen.

Then he blesses all present.

And may almighty God bless you,
the Father, and the Son, + and the Holy Spirit.

R/. Amen.

The service may be concluded by a suitable psalm or other song.
Appendix d

A Holy Hour for Life

Procession
After all have assembled, a priest or deacon, wearing cope and humeral veil, brings the Blessed Sacrament to the altar for adoration in a monstrance. He may be accompanied by altar servers with candles. A suitable song may be sung (e.g., “O Salutaris Hostia”). The Blessed Sacrament is placed on the altar. The presiding minister then kneels before the altar and incenses the Blessed Sacrament. The opening song is concluded, followed by a period of silent prayer.

Opening Prayer

O God, who adorn creation with splendor and beauty, and fashion human lives in your image and likeness, awaken in every heart reverence for the work of your hands, and renew among your people a readiness to nurture and sustain your precious gift of life. Through our Lord Jesus Christ, your Son, who lives and reigns with you in the unity of the Holy Spirit, God, for ever and ever.

R/. Amen.

Liturgy of the Word

First Reading
A reading from the Book of Genesis 1:24-31a

Then God said, “Let the earth bring forth all kinds of living creatures: cattle, creeping things, and wild animals of all kinds.” And so it happened: God made all kinds of wild animals, all kinds of cattle, and all kinds of creeping things of the earth. God saw how good it was. Then God said: “Let us make man in our image, after our likeness. Let them have dominion over the fish of the sea,
the birds of the air, and the cattle,  
and over all the wild animals  
and all the creatures that crawl on the ground.”

God created man in his image;  
in the image of God he created him;  
male and female he created them.  
God blessed them, saying:  
“Be fertile and multiply;  
fill the earth and subdue it.  
Have dominion over the fish of the sea, the birds of the air,  
and all the living things that move on the earth.”

God also said:  
“See, I give you every seed-bearing plant all over the earth  
and every tree that has seed-bearing fruit on it to be your food;  
and to all the animals of the land, all the birds of the air,  
and all the living creatures that crawl on the ground,  
I give all the green plants for food.”

And so it happened.  
God looked at everything he had made, and he found it very good.  
The word of the Lord.

All: Thanks be to God.

**Responsorial Psalm**

Psalm 139:1b-3, 13-14b, 23-24

R/. Guide me, Lord, along the everlasting way.

O LORD, you have probed me, you know me:  
you know when I sit and stand; you understand my thoughts  
from afar.

My travels and my rest you mark; with all my ways you are familiar.

R/. Guide me, Lord, along the everlasting way.

You formed my inmost being; you knit me in my mother’s womb.  
I praise you, so wonderfully you made me; wonderful are  
your works!

R/. Guide me, Lord, along the everlasting way.

Probe me, God, know my heart; try me, know my concerns.  
See if my way is crooked, then lead me in the ancient paths.

R/. Guide me, Lord, along the everlasting way.
**Gospel Acclamation**

R/. Alleluia, alleluia.

I am the living bread that came down from heaven; whoever eats this bread will live forever.

R/. Alleluia, alleluia.

**Gospel**

A reading from the holy Gospel according to Matthew 18:1-5, 10, 12-14

The disciples approached Jesus and said, “Who is the greatest in the Kingdom of heaven?”

He called a child over, placed it in their midst, and said, “Amen, I say to you, unless you turn and become like children, you will not enter the Kingdom of heaven. Whoever becomes humble like this child is the greatest in the Kingdom of heaven. And whoever receives one child such as this in my name receives me. “See that you do not despise one of these little ones, for I say to you that their angels in heaven always look upon the face of my heavenly Father. What is your opinion? If a man has a hundred sheep and one of them goes astray, will he not leave the ninety-nine in the hills and go in search of the stray? And if he finds it, amen, I say to you, he rejoices more over it than over the ninety-nine that did not stray. In just the same way, it is not the will of your heavenly Father that one of these little ones be lost.”

The Gospel of the Lord.

All: Praise to you, Lord Jesus Christ.

**Homily**

**Silent Prayer or Recitation of the Rosary**
The Lord’s Prayer

The presiding minister then sings or says:

Now let us offer together the prayer our Lord Jesus Christ taught us:

All: Our Father . . .

Benediction

At the conclusion of the Lord’s Prayer, the presiding minister goes to the altar, genuflects, and then kneels. As he kneels, “Tantum Ergo” or another suitable Eucharistic song is sung and he incenses the Blessed Sacrament. After the hymn is finished, he rises and sings or says:

Let us pray.

After a brief period of silence, the presiding minister continues:

(Holy Communion and Worship of the Eucharist Outside Mass, no. 98)

Lord Jesus Christ,
you gave us the Eucharist
as the memorial of your suffering and death.
May our worship of this sacrament of your body and blood
help us to experience the salvation you won for us
and the peace of the kingdom
where you live with the Father and the Holy Spirit,
one God, for ever and ever.

All: Amen.

After the prayer, the presiding minister puts on the humeral veil, genuflects, and takes the monstrance. (Those gathered should be kneeling.) He makes the Sign of the Cross with the monstrance over those gathered, in silence.

The presiding minister removes the humeral veil and resumes kneeling in front of the altar to lead those assembled in the Divine Praises. Each acclamation is repeated by all together.

Blessed be God.
Blessed be His Holy Name.
Blessed be Jesus Christ, true God and true man.
Blessed be the name of Jesus.
Blessed be His Most Sacred Heart.
Blessed be His Most Precious Blood.
Blessed be Jesus in the Most Holy Sacrament of the Altar.
Blessed be the Holy Spirit, the Paraclete.
Blessed be the great Mother of God, Mary most holy.
Blessed be her holy and Immaculate Conception.
Blessed be her glorious Assumption.
Blessed be the name of Mary, Virgin and Mother.
Blessed be Saint Joseph, her most chaste spouse.
Blessed be God in His angels and in His Saints.

Reposition

After the Divine Praises, the presiding minister removes the Blessed Sacrament from the monstrance and returns it to the place of reservation. Thereafter, a hymn is sung (e.g., “Holy God We Praise Thy Name”), and the presiding minister and the servers bow to the altar and leave.
Acknowledgments

The USCCB Secretariat of Clergy, Consecrated Life, and Vocations and the USCCB Secretariat of Pro-Life Activities wish to express their gratitude to the following:

- Rev. James E. Connell, JCD, Archdiocese of Milwaukee, and Msgr. Ronny E. Jenkins, STL, JCD, Associate General Secretary, USCCB, for the discussion of canon law; Fr. Robert Sears, SJ, PhD, formerly of the Institute of Pastoral Studies, Loyola University, Chicago, for his insights on counseling and inner healing prayer
- Vicki Thorn, founder of Project Rachel and director of the National Office of Post-Abortion Reconciliation and Healing (NOPARH), Milwaukee, Wisconsin, for consultation and contributions to the manual
- Vincent M. Rue, PhD, Institute for Pregnancy Loss, Jacksonville, Florida, for his consultation and contributions to the manual
- All priests active in post-abortion ministry, for all the wisdom they have gained and shared
- Those women and men who have walked the healing journey and taught others by their experiences

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