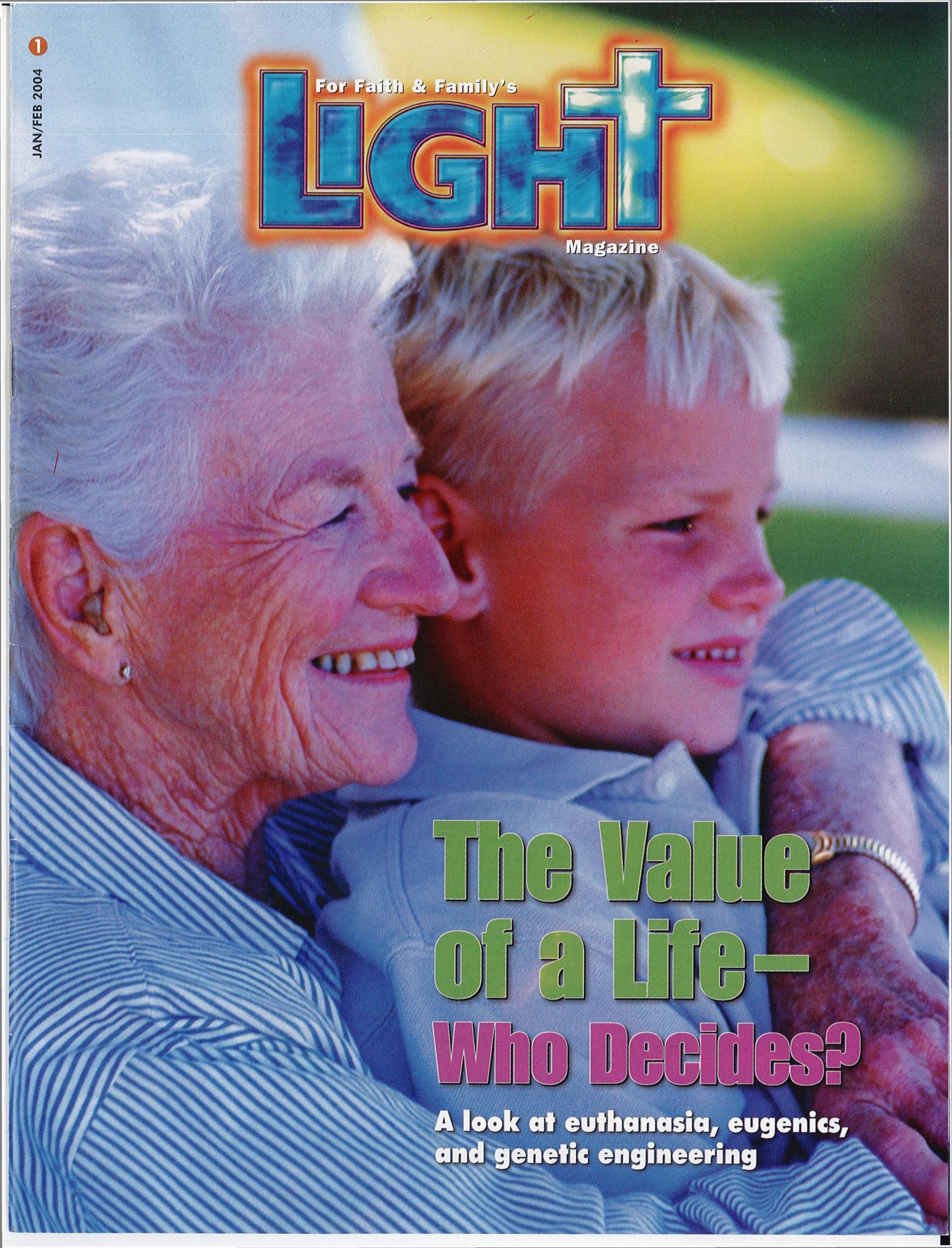


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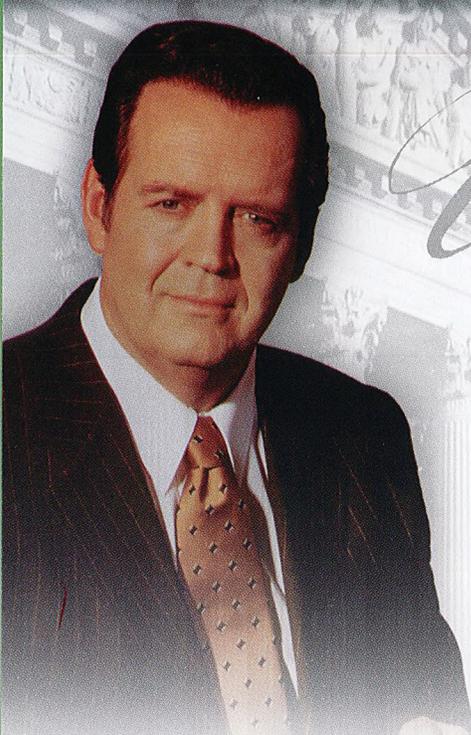
LIGHT

Magazine



The Value of a Life— Who Decides?

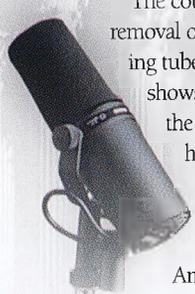
A look at euthanasia, eugenics,
and genetic engineering



Who decides?

MAKING THE CASE FOR HUMAN LIFE:

BY RICHARD LAND, President of the SBC's Ethics & Religious Liberty Commission and host of the nationally syndicated daily radio broadcast, For Faith & Family



FOR Faith & Family
with Dr. Richard Land

The court order to allow the removal of Terri Schiavo's feeding tube is instructive. It shows us just how deeply the sanctity-of-life ethic has been eroded in our culture. This case should be a wake-up call that not all Americans regard human life as precious. Our national leaders would be wise to begin addressing this issue to ensure that all humans—regardless of their age and physical or mental condition—have a right to be protected from predators who might seek to “pull the plug” on their life.

Many of our courts have been infected with this quality-of-life ethic, which has its roots in our nation's permissive attitude toward abortion. By allowing this barbarity—for over thirty years now we have been killing a baby every twenty seconds—we have brutalized our whole society, including our court system, in that we have devalued and desanctified human life to the point that now a court can casually sentence a human being to die by starvation and dehydration.

When did artificial feeding become artificial means? There is a huge difference between a machine that will breathe for you and pump your heart and a simple apparatus that will feed

you. If your ninety-year-old grandmother becomes bedridden and can't get up and get to the refrigerator, is it okay to let her starve to death because she can't feed herself? We are crossing a line that must not be crossed. To define nutrition and hydration—food and water—as artificial or extraordinary means, to put food and water on the same level that you put a respirator or even dialysis is to cross a very, very dangerous line.

The crux of the whole controversy over Terri Schiavo is that her husband says she once expressed to him that she would never want to be kept alive by artificial means. We have only his word for that. There are

no written documents and no witnesses.

I find the court's blind loyalty to spousal rights over parental rights to be totally wrong-headed. A spouse can do things that terminate a good-faith relationship between married partners. It appears Terri's husband has done that. He's living with another woman. She has given birth to one child and is expecting another. He says he wants to marry her. I'd say there's at least some doubt that he has his wife's best interests at heart.

While the spouse should be the one making these decisions if there is no medical directive or living will, a spouse who has abandoned his wife should

The case of Terri Schiavo reflects the clash of two very disparate civilizations—the Judeo-Christian civilization, which is based upon the sanctity of all human life, and the neo-pagan civilization, which zealously promotes a relativist quality-of-life perspective. When these two totally antagonistic worldviews come up against each other, it makes a real difference in peoples' lives because real people die when the quality-of-life ethic usurps the sanctity-of-life ethic.



Protesters erected a prayer memorial outside Woodside Hospice. Terri's feeding and hydration tubes were removed Oct. 15, 2003, but the Florida legislature intervened and Gov. Jeb Bush signed an order directing their reinsertion. Terri's husband questioned Bush's right to take such an action, and the case is in court once again. Photo by Joni B. Hannigan/Florida Baptist Witness



Bob and Mary Schindler stand outside Woodside Hospice in Pinellas Park, Fla., where their daughter, 40-year-old Terri Schiavo, has lived for more than three years. The Schindlers have repeatedly offered to relieve their son-in-law of the guardianship of their daughter, who they say has not received any rehabilitation therapy in 10 years.

Photo by Joni B. Hannigan/Florida Baptist Witness

not make this decision.

Of course, the better alternative would have been if Terri Schiavo had made this decision herself. How is it possible for a person to make this decision if she is unable to express her wishes?

The answer is through an Advance Medical Directive, a generic term for a document expressing your preferences regarding the use of various medical treatments and life-sustaining procedures should you become unable to make those decisions. There are many types of Advance Medical Directives, including Living Wills and Medical Powers of Attorney. While a Living Will outlines the treatments that you would not want under certain circumstances, a Medical Powers of Attorney authorizes another person to make health care decisions for you should you become incapable of doing so.

It should be noted, however, that the standard Living Will is neutral, at best, when it comes to questions of the sanctity of life versus the quality of life. A pro-life alternative is called a Will to Live, which differs from a standard Living Will in its strong presumption in favor of life and against euthanasia. (See box above at right.)

We must remember that there is a huge difference between taking steps to

THE WILL TO LIVE OFFERS A PRO-LIFE ALTERNATIVE

The Will to Live instructs your doctors to do what is necessary to preserve your life without discrimination based on your age, your physical or mental disability, or the quality of your life. It rejects any action or omission that is intended to cause or hasten death. It designates food and water as basic necessities and allows you to specify treatments you would want withheld or withdrawn under certain circumstances. The Will to Live defines imminent death as when a reasonably prudent physician who is knowledgeable about the case and the treatment possibilities judges that death would occur within a week even if lifesaving treatment is provided. For more information on a Will to Live, visit the Web site of the National Right to Life Committee at www.nrlc.org/euthanasia/willtolive.

prolong life and taking steps to shorten life. I personally do not believe it is ever ethical to take active steps to shorten life or to take away basic treatments that maintain life. For instance, the idea that Terri Schiavo's husband did not want her given antibiotics for a urinary tract infection is horrific. That's tantamount to manslaughter.

I also do not believe that giving food and water to a person who is in a semi-conscious or unconscious state is an extraordinary measure. Feeding someone is not a radical, intrusive medical procedure; that is basic, civilized, Christian behavior.

God is the giver of life and is sovereign over all of life. In

Romans 14:7-8, Paul says that we belong to the Lord both in life and death. The end of our time on earth is not our decision. It is in God's hands. We draw our next breath based upon God's desire for us. We have an assurance of eternal life. We have an assurance of the resurrection. Death and the grave have lost their sting and their victory because they have been swallowed up in the resurrection of our Lord Jesus Christ.

God's Word declares that humans of all ages and in all conditions are made in His image and infinitely precious to Him and that we should care for each other as He cares for us. We must not grow weary in the task. ☩



Background: Terri Schindler-Schiavo on her wedding day in 1984.

Photo courtesy of the Terri Schindler-Schiavo Foundation. Used with permission.

For more information on Terri's case, visit www.terrisfight.org.

See page 5 for additional resources on critical life issues.



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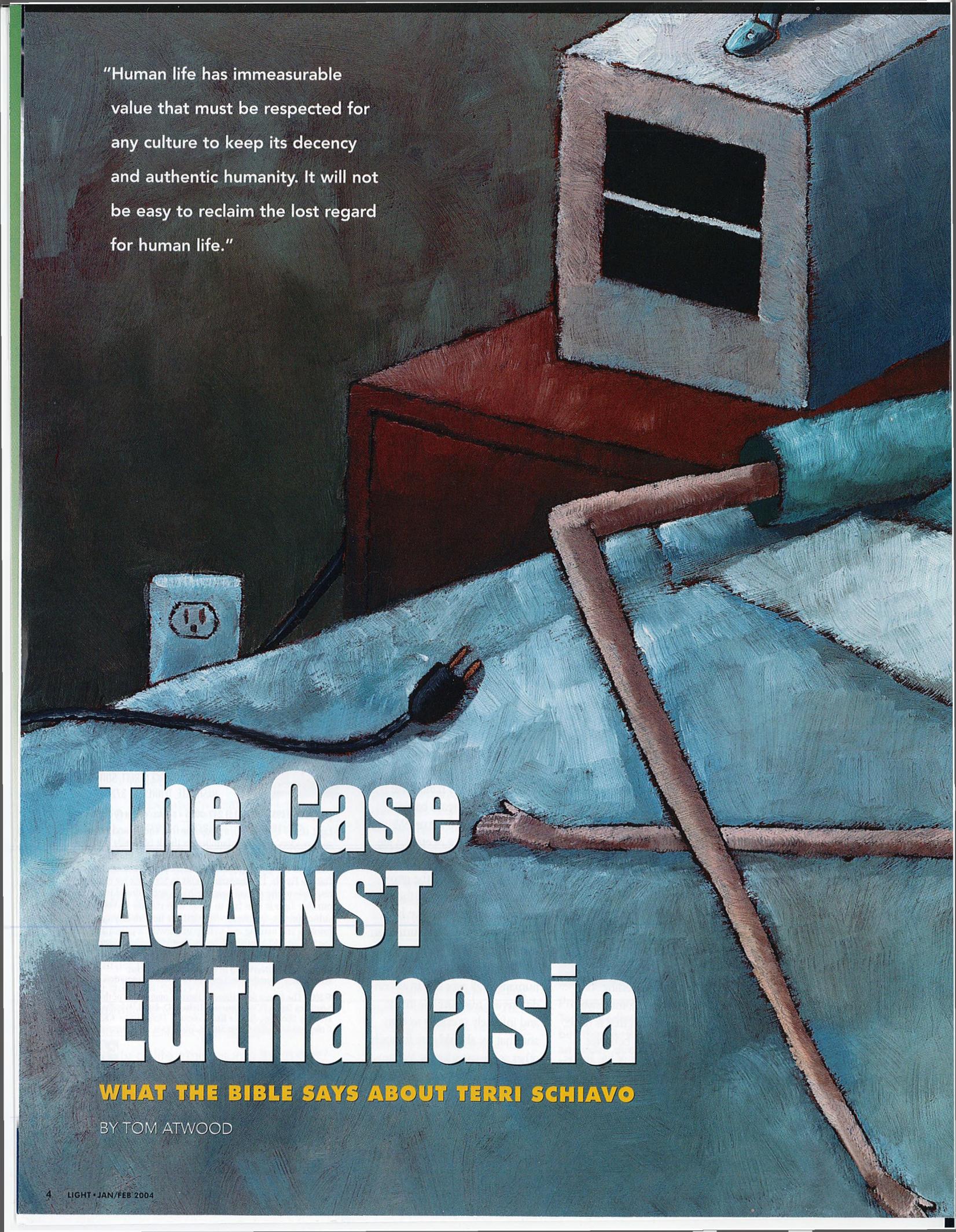
Light, (ISSN 1538-0734), a magazine that equips and encourages readers and their families to think biblically and act Christianly, is published six times a year by the Ethics & Religious Liberty Commission and its outreach ministry, *For Faith & Family*. The magazine looks to Scripture for a proper response to the critical moral, ethical, and cultural issues of our day. *Light* is sent free to those who request it. Voluntary subscriptions, for those who wish to help defray costs of printing and mailing and to help underwrite a growing mailing list, are \$10 annually. Checks should be made payable to *Light*. Canceled checks serve as tax-deductible receipts.

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A painting of a hospital room. A patient is lying in a bed with a blue blanket. A power outlet is visible on the wall, and a window is in the background. The style is expressive and somewhat somber.

“Human life has immeasurable value that must be respected for any culture to keep its decency and authentic humanity. It will not be easy to reclaim the lost regard for human life.”

The Case AGAINST Euthanasia

WHAT THE BIBLE SAYS ABOUT TERRI SCHIAVO

BY TOM ATWOOD

Virtually every adult in America knows who Terri Schiavo is. Her husband wants her killed—legally, of course. A judge has agreed. She has loving parents who want to care for her but a husband who will gain substantially if she dies. A large sum of money and a marriage to his girlfriend await—after the funeral, of course. Sounds like a TV drama, doesn't it? But let's put this steamy story aside and take a look at the larger issues.

Massive brain damage has left Terri Schiavo severely impaired; but her vital organs work, and she responds to some external stimuli. She is a living human being. Should she be euthanized because she is able to enjoy so few of life's pleasures? Should she be put to death to get her out of this condition? Has she, as *Newsweek* said, "descended into a private purgatory" (11/3/03, p. 50)? Does she need to be killed as a remedy? Do those who affirm the culture of death have it right while Bible believers have it wrong?

God Is . . . and Has Spoken

God has not left us uninformed on life issues. We have His Word to guide us. Secularism says that either God does not exist or He exists in a withdrawn or limited state from which He is unable or unwilling to speak on this issue. Orthodox Christians affirm that He does exist and that He has spoken to us clearly in Scripture. So, what does Scripture say?

Our Creator

"In the beginning God created the heavens and the earth" (Gen. 1:1). In the process of creation, God periodically surveyed His work and declared it to be good. After creating a male and

a female human He looked at all He had made and declared it "very good" (Gen. 1:31). The value of human life flows from the fundamental fact that God is its creator.

The secularists, it seems, are caught in an indefensible position. In spite of their claims to rational answers, they struggle with the absence of a rational and objective norm for placing value on human life, at least in any absolutist form. In the end they must conclude that the only value human life possesses is whatever value other humans place on it. What a sad and despairing view of human life.

Humans: God's Unique Creation

Genesis 1:26-27 clearly states that, in contrast to all the rest of His creation, God created humans in His own image. Though hard to grasp, this concept informs us that persons are created to communicate with God and to live in relationship with God. Nothing else in all of creation is granted such status. If people are in the "likeness" of God, their lives have incomprehensible value. Therefore, without an opposing justification of equal value, a human life must be unqualifiably protected.

The Value of the Individual

God creates persons, including Terri Schiavo, as individuals, one at a time. Her unique value in His eyes should dominate any appraisal of her. King David, the psalmist, saw this defining reality. With a clarity of comprehension driven by divine inspiration, he wrote, "You created my inmost being; you knit me together in my mother's womb. . . I am fearfully and wonderfully made" (Ps. 139:13-14).

What a profound concept! It is one thing to believe that long ago God created a pair of

humans with self-perpetuating power, as if He had created a clock, then wound it up and removed Himself from it, allowing it to unwind. It is quite another to view God as personally involved in the creation of each individual.

Turning the Tide

One media outlet reflected the view of too many in our culture when it opined that life should not be defined by whether it exists but by whether it is "meaningful." And what is meaningful? Ours is a generation that evaluates life in terms of the pleasures that are enjoyed. When there is no pleasure, there is no meaning to life. How tragic!

Human life has immeasur-

able value that must be respected for any culture to keep its decency and authentic humanity. It will not be easy to reclaim the lost regard for human life. Terri Schiavo's husband, Michael, has gained court approval not for voluntary suicide but for involuntary homicide. Is this the ghoulish end for millions—to die at the hands of self-absorbed relatives?

We should pray that God will raise up a scripturally informed generation who, like David, will celebrate life as God's great gift, a generation who will cry out, "I praise you because I am fearfully and wonderfully made" (Ps. 139:14) ☩

Tom Atwood is a retired pastor living in Oxford, Mississippi.

resources

The Right to Die?

Journalists have dubbed it the "Death with Dignity" movement, but what does the Bible have to say about euthanasia or physician-assisted suicide? In *The Right to Die?* Mark Blocher exposes the philosophy behind euthanasia, tracing the movement's history from the legalization of abortion to the present debate, then presents alternatives and shows readers how they can help protect the sanctity of human life.

BKDIE (212 pages)

\$10.79 ea.

BIOBASICS BOOKLETS

Advances in medical technology have blessed many with longer and healthier lives, but they also have provided us with interventions and procedures that call for serious ethical evaluation. The BioBasics Series of booklets, produced by the Center for Bioethics and Human Dignity, serves as a compass through a maze of challenging questions while showing an uncompromising respect for human life.

Suicide and Euthanasia

Many promote suicide, assisted suicide, and euthanasia as acceptable answers to serious physical and emotional problems. This booklet counters that philosophy, answering questions such as "Is suicide the unpardonable sin?" "Do I have a right to die?" and "What's the difference between active and passive euthanasia?"

BKSUEU (75 pages)

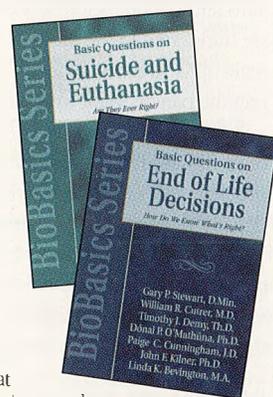
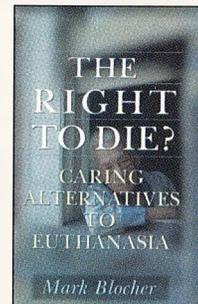
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End of Life Decisions

The value we place on human life will determine how we treat ourselves and others throughout the end-of-life process. Christians need to address crucial questions about the end of life, such as "Should I consider organ donation?" and "How can I determine my own medical treatment?"

BKEND (82 pages)

\$5.39 ea.



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"Have it your way"?

"It is possible that in the not-too-distant future parents will order up their children the way they buy other products, making babies the ultimate shopping experience in a post-modern world."

—Jeremy Rifkin, *Los Angeles Times*

Genetic Engi

BY TOM STRODE

If you could choose long before your child's birth to make sure he or she would be protected from a genetically caused disease, would you? If you could program into your child a quality you found particularly beneficial, would you? If you could create a second child who would carry the genetic makeup to provide a remedy for your first child's debilitating or terminal ailment, would you? What if other children would have to die as a result of your choices?

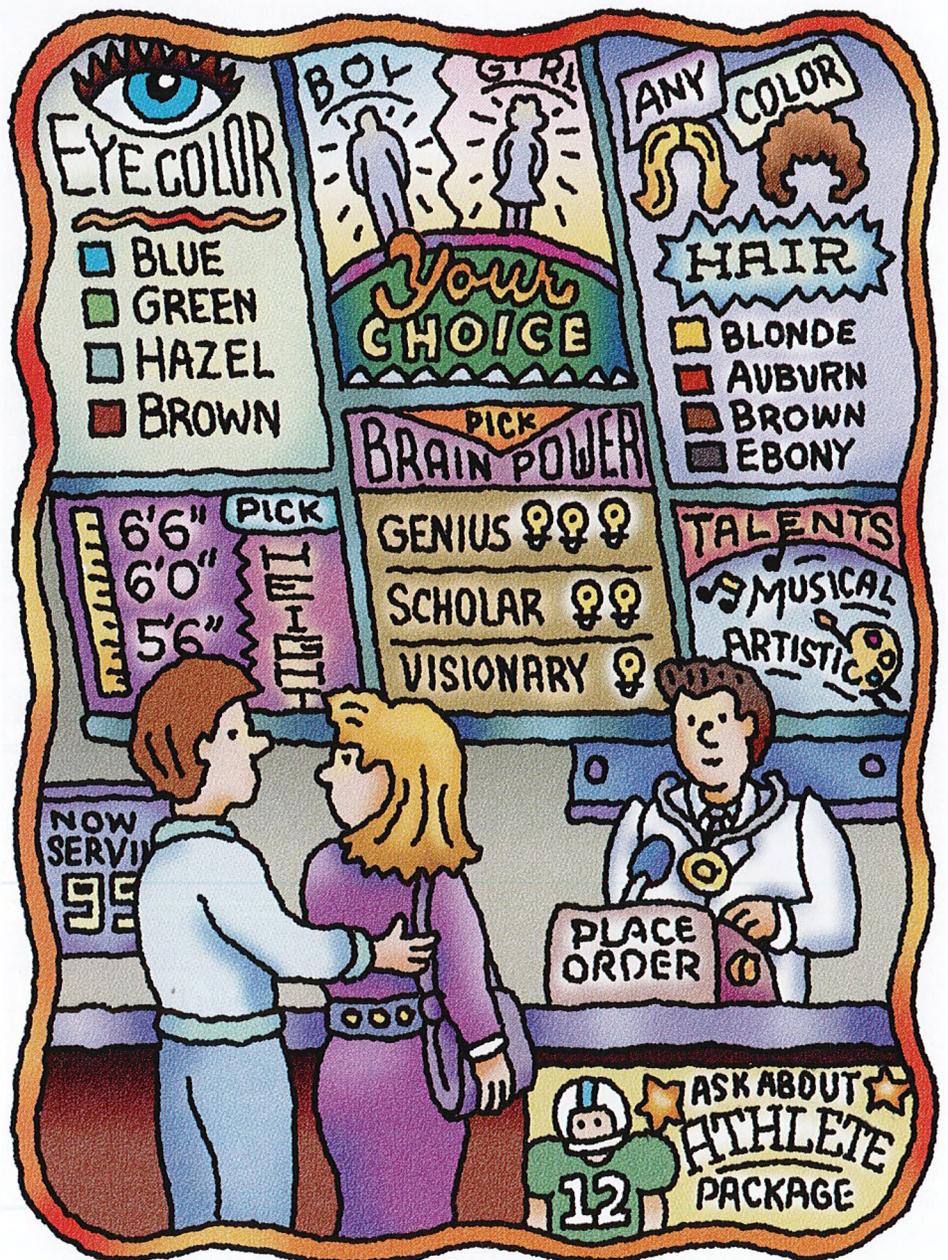
Welcome to the world of preimplantation genetic diagnosis (PGD). It is a brave new world of conception outside the mother's body, prediction of the future for embryonic children, selection of the fittest, and execution of the many for the few. Or, as bioethicist C. Ben Mitchell called it, the "latest assault on a truly human future."

PGD provides men and women the ability to check for both desirable and undesirable genes in their children. Those children have to be conceived through in-vitro fertilization. Before any of the resulting embryos are transferred to the mother's womb, their genetic makeup is screened. The embryos who are free of the trait the parents want to eliminate—or who have the trait desired—are implanted. If successful, at least one of the transferred embryos will be born without a problem. The embryos who don't pass the test are destroyed or are used in research that results in death.

The destruction of preborn children that results is grievous, but that is not the only way PGD clashes with a biblical worldview. This new technology produces other societal costs as well.

PGD fosters a eugenics mindset.

The ability to screen out human beings because of their genetic makeup revives the eugenics movement of nearly a century ago. Instead of welcoming all human beings and treating those with diseases or compassionately serving those with impairments, our society eliminates those it perceives as "defective."



neering

"Who decides who is a 'desirable' or 'undesirable' embryo?" said Mitchell, associate professor of bioethics at Trinity Evangelical Divinity School. "Our culture's emphasis on the genetically 'fit' and our difficulty in embracing those who are 'less fit' fuel this new eugenics mindset.

"Selection of our offspring has never been easier. Embryonic death has never been more acceptable in our culture," said Mitchell, a consultant for the Ethics & Religious Liberty Commission. "This is eugenics with a vengeance."

PGD turns children into a means to satisfy their parents' ends.

Children become valuable for their genetic material. If a child is not free of a disease or "undesirable" gene, he is discarded. If a child lacks a disease gene but is not a suitable match to help a seriously ill older brother, she is rejected. Such valuations through the use of PGD appear destined to be made not only based on preventing the birth of diseased children or saving the lives of previously born children but to fulfill the desires of parents. That may mean selecting an embryo based on sex or on the potential for a desirable trait.

The Genetics and IVF Institute advertises PGD for "family balancing." In other words, a couple may use PGD for sex selection—for instance, making sure they have a boy since they have all girls so far.

As another example, there are genes associated with quality of hearing. "In one situation I'm aware of, a doctor was asked by a musical couple if he would help them have a child with perfect musical pitch," Mitchell said. "He refused, but the point is that couples will be increasingly asking for PGD to select the kind of children they want."

Chuck Colson analyzed the situation this way in a "Breakpoint" column: "We're fast approaching a world where kids will be seen to exist merely to enhance their parents' sense of fulfillment. Parents creating the personality of their kids fits our narcissistic culture, but it is dehumanizing in the extreme."

As biotechnology critic Jeremy Rifkin described PGD in a piece for the February 3, 2003, *Los Angeles Times*: "It is possible that in the not-too-distant future parents will order up their children the way they buy other products, making babies the ultimate shopping experience in a post-modern world."

For followers of Christ, taking a stand against the use of PGD when it appears to produce so much good may prove unpopular and uncomfortable.

"It's not easy to say, 'Not so fast!' when the subject is a sick child. But if the 'cure' takes humanity to places like this, we've got to say, 'Stop!'" Colson wrote. "If Christians don't deliver this message, who will?"

eu·gen·ics
(yu-'je-niks)

n: a science that deals with the improvement of hereditary qualities of a race or breed

EUGENICS

BY C. BEN MITCHELL

With the development of preimplantation genetic diagnosis and other technologies, eugenics has reemerged. *Eugenics* is a compound word from two Greek words meaning "good" and "genes."

The eugenics movement began at the turn of the last century in England and the United States and became a powerful social force.

"Fitter Families" contests were held across the United States in the 1920s and 1930s to identify families with fewer incidences of physical and mental disability. Their ethnic heritage also had to remain intact. Racial intermarriage disqualified families. Thus, the fitter families were exclusively Caucasian. Mary T. Watts, cofounder of the first contest at the 1920 Kansas Free Fair, said, "While the stock judges are testing the Holsteins, Jerseys and white-faces in the stock pavilion, we are judging the Joneses, Smiths and Johns." Winners were given a medal inscribed with the slogan: "Yea, I Have a Goodly Heritage."

The eugenics movement tried to create "better humans through breeding," but breeding was not the only way to achieve the desired goals. In order to prevent "undesirables" from reproducing, mandatory sterilization laws were enacted. The "feebleminded," "indolent," and "licentious" were sterilized either without their consent or against their will. So-called "eugenical sterilizations" increased from around three thousand in 1907 to more than twenty-two thousand in 1935. By the 1930s, most states had mandatory sterilization laws.

Now, six decades since the eugenics movement collapsed amid the horrors of Nazi Germany, eugenics has a new face with the same heart. PGD is a powerful weapon in the revived eugenics arsenal.



Light magazine talked with bioethicist C. Ben Mitchell about the current realities regarding Preimplantation Genetic Diagnosis.

Light: How does preimplantation genetic diagnosis work?

CBM: The process begins by giving a woman drugs to make her create large numbers of eggs. This is called “hyper-ovulation.” The eggs are harvested and fertilized in vitro. At the six-to-eight-cell stage, the embryos that result are then subjected to genetic tests—technically called “embryo biopsy”—to determine whether or not they have certain genetic markers. Several embryos that are free from genes that cause disease are transferred to the mother’s uterus in hopes of achieving pregnancy. The embryos with the markers for disease genes are either destroyed immediately or during or after they are used for research.

Light: What genetic conditions can be detected using PGD?

CBM: The list is growing all the time, but a partial list includes cystic fibrosis, Down syndrome, Turner syndrome, Lesh-Nyan syndrome, Tay-Sachs disease, retinitis pigmentosa, Fragile X, and a host of genes associated with our sex genes that make us male or female. In some cases, “good” genes also can be detected.

Light: How frequently is PGD used?

CBM: Currently, there are more than one thousand children who have been born using PGD, which was first offered in 1989. About fifty centers offer the procedure in the United States. But, like the number of detectable genes, the number of clinics is growing as couples learn about the procedure.

Light: Why would PGD be offered to a couple?

CBM: First, it may be offered if they know they have a high risk of having a child with a genetic disorder. In some cases, if they already have had a child with a genetic disease, PGD will be offered to the couple to avoid having another child with the same genetic condition. In several cases, PGD has been combined with tissue matching in order not only to have a child without a certain genetic condition but also to provide a donor for an existing child with that disorder.

Light: Does this happen frequently?

CBM: Again, PGD is being increasingly offered for both reasons. The most celebrated case is that of Adam Nash. Molly Nash was born with Fanconi’s anemia, a rare blood disorder. She needed a bone marrow transplant in order to survive long term. So, her parents chose to have another child using PGD. By using this process, they could not only avoid having a child with Fanconi’s anemia, but they also could select embryos who would be a good tissue match for Molly. In 2001, six-year-old Molly Nash received her brother’s umbilical cord blood and was treated successfully for Fanconi’s anemia.

Light: This all sounds good on the surface. Are there moral problems here?

CBM: Well, yes. The Nashes created thirty embryos—that is, using in vitro fertilization, they created thirty human beings. Using PGD, they found that only five had the right genetic code. On the fourth attempt, implantation occurred. In other words, nearly thirty embryos either died or were used in research for the purpose of having a child who met the parents’ criteria. Destroying human embryos made in God’s image is unethical and immoral, but that’s not the only problem. PGD also gives parents the power to select the kind of children they want and to discard the others. Adam Nash’s parents chose him not necessarily because they wanted another child but so he could be a donor for his sister. Children are to be loved for their own sake, not for the goods they may provide for others.

Light: Are there any laws governing PGD?

CBM: Currently, fertility clinics are the most unregulated of all medical industries. The Food and Drug Administration enforces safety regulations, but PGD is only regulated by the ethics of the fertility clinic and the individuals who request it. 

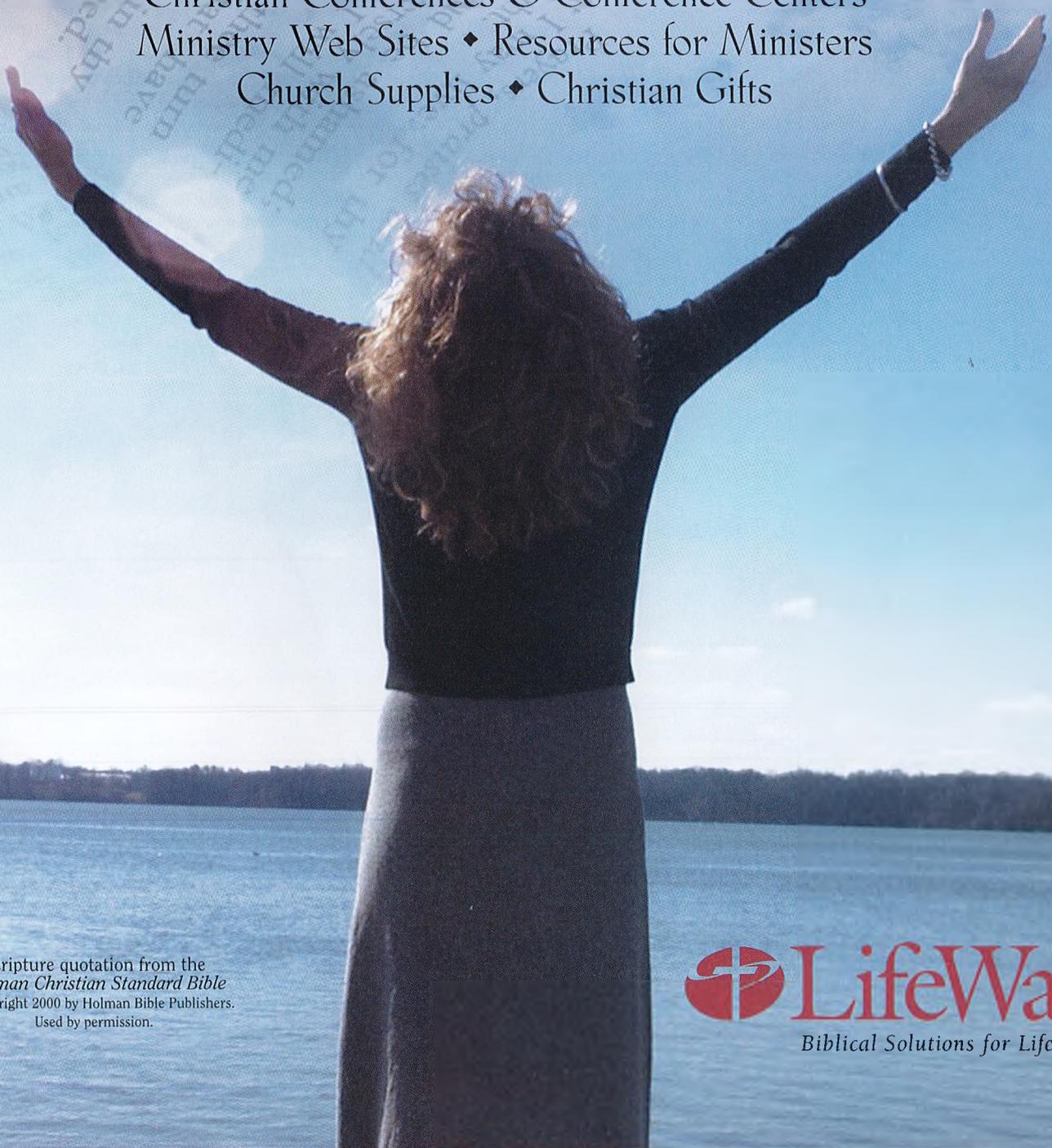
For more information on preimplantation genetic diagnosis (PGD), visit www.cbhd.org.

“I hope in Your word.”

Psalm 119:81

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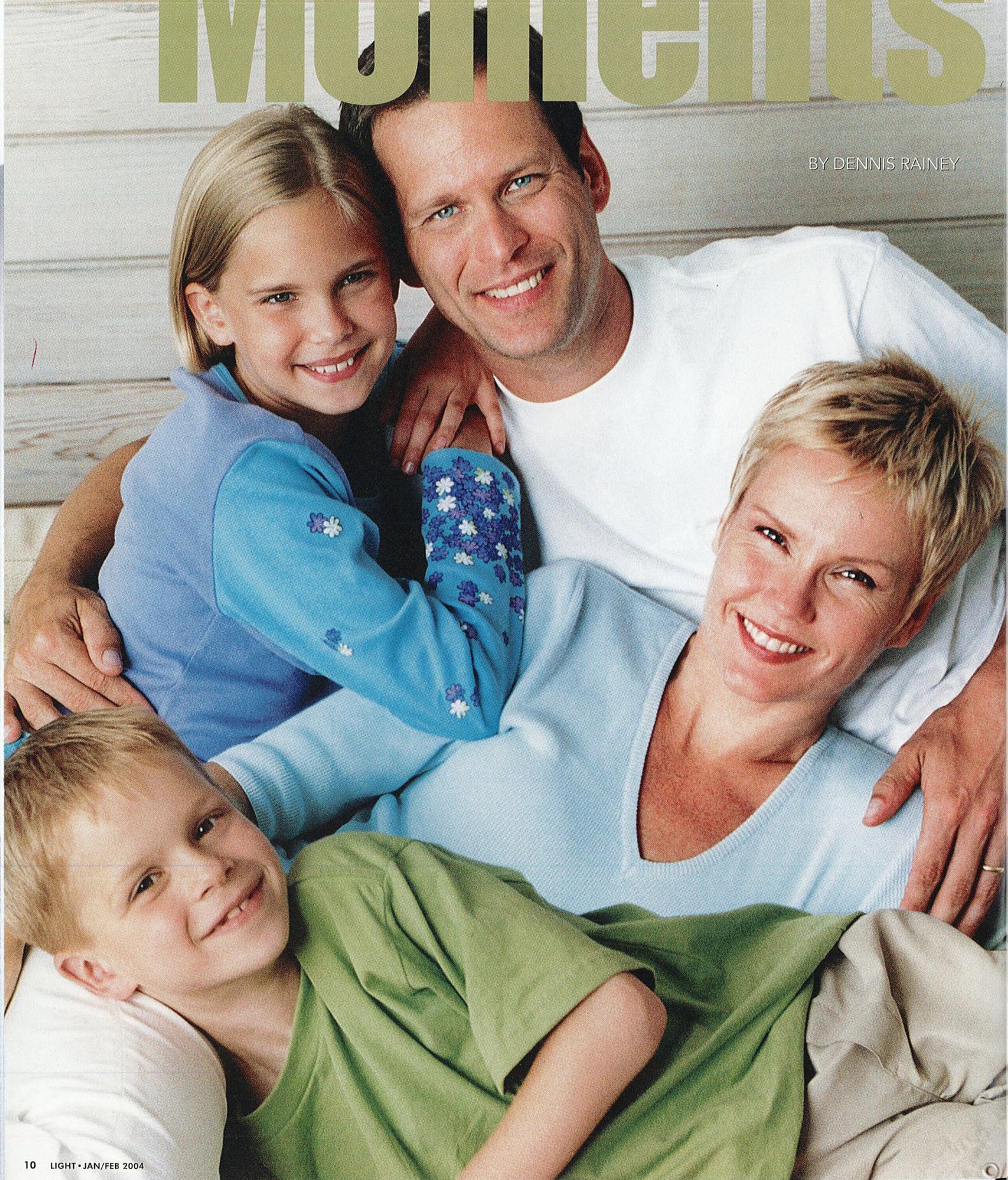
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Moments

BY DENNIS RAINEY



Together

Relationships Require Time

What if you approached your mate after your wedding and said, "Now that we're married, please don't make me spend time with you"? Naturally your mate would say, "You're crazy! How can we build a marriage unless we spend time together?"

The same is true with your children. Barbara and I discovered that as our kids grew older and began to spend more and more time with friends, we had to work harder to spend time with them.

Be creative as you think of things you can do that your children would enjoy. Smaller children, for example, love things as simple as a trip to a convenience store to buy a candy bar or an ice-cream cone.

We have lived out in the country, so when we were in town with two cars, we needed to decide who would ride with Mom and who would ride with Dad. Usually our two youngest girls said, "We want to go with Daddy." You know why? Because if I stopped for gas at the convenience store, they figured I was a soft touch; they would try to ease me on over to the ice-cream or candy section.

And you know what? I was—and am—a soft touch. I loved spending time with them. It was an opportunity to enjoy something together that they liked to do. Was it always fat free and

super healthy? No, but it was healthy for the relationship.

A great thing to do with teenagers is to go shopping with them. My girls enjoyed shopping for clothes while the boys looked for sporting equipment. It wasn't the purchase that was important; it was the time we spent together.

Another great thing to do, which we're losing in today's culture, is reading to our kids. It is a real sacrifice of love and an easy way for both moms and dads to get involved with their kids. I once read *Chronicles of Narnia* to one of my sons and he loved it!

I remember one night when my teenage son, Samuel, and I went to town to get some groceries and waste some time together without any agenda. His response? "Dad, I'm glad we just spent some time together without any big goals. It was great to be with you!"

When's the last time you wasted an evening with one of your children for no other reason than just being with them?

Plugging In to God

Families should be a place of security and a place where parents teach their children that ultimate security is in God's hands, not theirs.

One morning as I pulled out of our garage to go to the airport, my daughter Ashley, then a preteen, rushed out to give me one more hug. I could tell something was troubling her. Reaching out through the car window to hold her hand, I asked, "What's wrong, princess?"

"I'm afraid your airplane is going to crash," she said, obviously a bit embarrassed by her admission. A recent airplane crash in Dallas had sent unsettling shock waves of fear through my daughter.

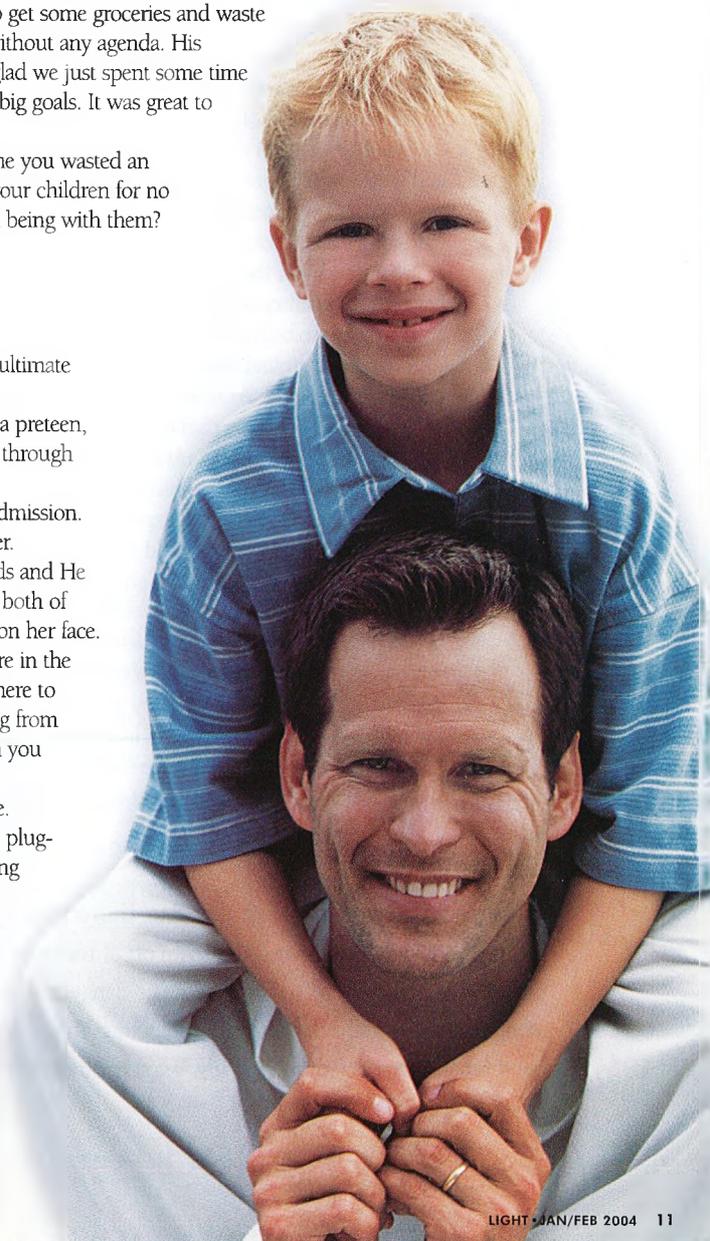
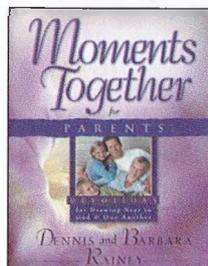
"Planes are safer than driving, Ashley," I said reassuringly. "Besides, my life is in God's hands and He knows what He's doing." By now my tenderhearted young Ashley was clutching my hand in both of hers, and I could see that my theological lesson had fallen short of its mark. Fear was visible on her face.

I went on to explain that fear is a normal emotion but that she could give it to God. "You're in the process of learning how to depend less on me and more on Him," I said. "I won't always be here to answer your questions—but God will. Now it's as if there are invisible electrical cords coming from you to me and your mom. And our responsibility is to unplug those cords from us and teach you how to plug them in to God."

I then took one of her hands and gently unplugged one of those invisible strands from me. She frowned and then grinned as I guided her hand above her head and helped her visualize plugging in to God. "Ashley," I said as I tenderly squeezed her hand, "I need to go, and you're going to have to take your fear to Jesus Christ. He can give you the peace."

As I pulled out of the driveway, I waved at Ashley and she grinned back. I thought about how the culture she was growing up in did not know where to plug in. I was glad I could point her to the Lord.

Excerpted with permission from *Moments Together for Parents*, by Dennis and Barbara Rainey (Regal Books, 2003).



Talking about Drugs

BY JIM BURNS

When Steve Arterburn and I wrote the book *Drugproof Your Kids*, we were amazed at two statistics that kept popping up in our research. Ninety-two percent of all pastors said there was a problem with drugs and alcohol in their community, but only 13 percent thought there was a problem with drugs and alcohol in their churches. Incidentally, Christian parents believed the same. The second troubling statistic was that there was only about a 5 to 10 percent difference in the use and abuse of drugs and alcohol between kids who attended church and kids who didn't.

There has never been a time when children were more susceptible to drug and alcohol abuse, and yet—without trying to offend you—most parents are either in denial or are ignorant of the issues of drug and alcohol abuse until it is too late. Parents of happy, healthy families study the threat of drug and alcohol abuse and teach their children about the dangers.

All parents should help their kids understand from a young age the usual progression of a young person's involvement with alcohol and drugs. A child or teen will begin to experiment with a gateway drug and then will continue along the road to dependence on hard-core drugs. Let me explain this process in more detail.

Beer and wine, the gateway drugs. Here's how they work: Kids begin their experimentation with beer and wine—that's usually where substance abuse begins. As I mentioned before, today the average first drink happens around age twelve. The majority of kids will try alcohol before they graduate from high school. If kids do try beer and wine, they have a greater chance of moving through the gateway onto the road to substance abuse. Another step on this road is nicotine.

Nicotine. The tobacco industry has done a pitiful job of keeping future, underage addicts from experimenting. But is it really the tobacco industry's fault, or should the blame equally fall on us, parents who haven't taught our kids about the harmful effects of the very strong drug called nicotine? Did you know that it's actually easier to get off heroin than nicotine? The detoxification period of heroin is terrible, but after about five days, the drug has passed through the user's system. In contrast, some say it's nearly impossible to shake the habit of using nicotine because of its intensely addictive nature. The fact is that 81 percent of kids who smoke cigarettes will move farther through the gateway to experiment with marijuana, yet only 20 per-

cent of the kids who do not smoke cigarettes will ever try marijuana.

Harder alcohol. First of all, let's get something straight: Alcohol is a drug. It's a drug because it is mood and mind altering. It's also a poison; it's toxic. Most teenagers—and especially college students—know someone who has died or who became extremely sick from drinking too much alcohol.

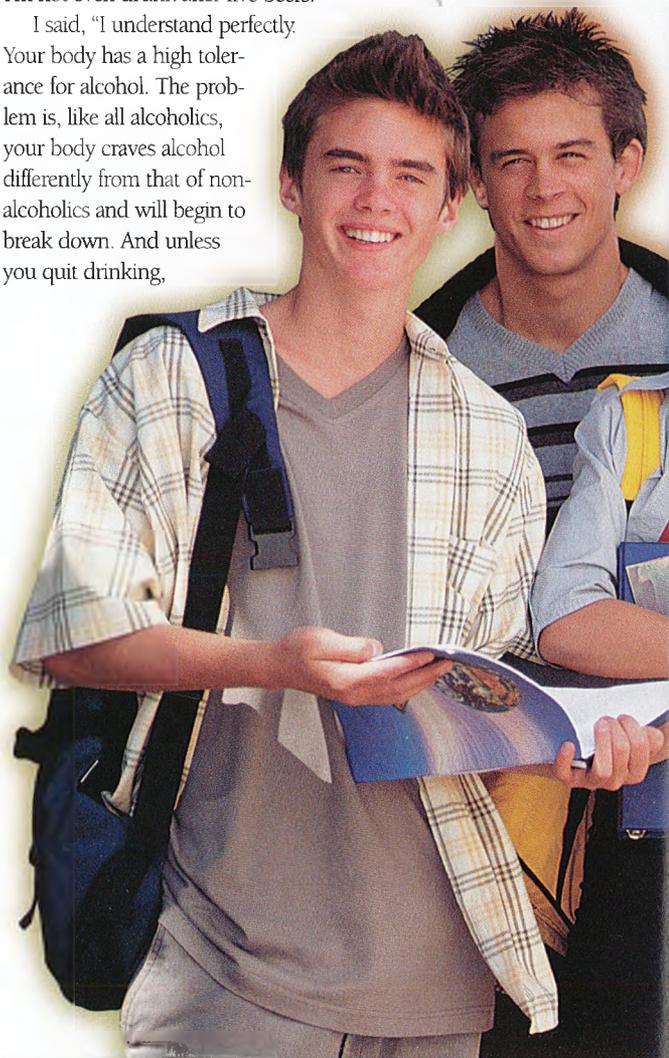
All alcoholics have a high tolerance for alcohol and can consume a great amount of alcohol without it affecting them like it does non-alcoholics. In fact, many budding alcoholics consume large quantities of alcohol; yet since they drink below their tolerance level, they are praised for being able to hold their liquor.

I know a sixteen-year-old young man who proudly told me he could drink five beers and not get drunk. He was surprised when I answered, "I believe you, and in fact, I would rather have you as the designated driver than someone who is slushy drunk on two beers." But then I went for the jugular when I bluntly said, "You must be a budding alcoholic."

Surprised, he protested, "Maybe you didn't understand. I'm not even drunk after five beers."

I said, "I understand perfectly. Your body has a high tolerance for alcohol. The problem is, like all alcoholics, your body craves alcohol differently from that of non-alcoholics and will begin to break down. And unless you quit drinking,

Are your kids in college, or heading there soon? Talk to them about alcohol use before you drop them off at the dorm. Teens whose parents regularly talk with them about the dangers of drugs, including alcohol, are **42%** less likely to use drugs than those whose parents don't broach the subject. Amazingly, **75%** of students say their parents *never bring it up*.



Alcohol

you will live a life very similar to your dad's." (He had already told me that he had little respect for his father, who was a drunk and who had left the family for his secretary. His father's alcoholism had messed up his own life as well as taken a toll on the whole family.)

Because our family has alcoholism throughout our family tree, we have had to teach our kids about this frightening disease; and they—Christy Meredith Burns, Rebecca Joy Burns and Heidi Michelle Burns—are the three reasons I choose not to drink. I believe there is a biological predisposition toward alcoholism passed on from generation to generation. Since I have alcoholism on both sides of my family, I choose not to drink just in case it's in my system and in my daughters' genes. If they see Dad drink, they may justify their own drinking because of me. Because I'm aware of the issues, I am able to make conscious choices that will protect my children.

Marijuana. Marijuana, another step on this path to substance abuse, is similar to alcohol in that it's inexpensive, plentiful, and intoxicating. When I graduated from Anaheim High School in 1971, we were told that marijuana wasn't harmful to our health. Hardly anyone is saying that today. We still don't know everything about this popular drug, but we do know that in many people it produces a sickness called amotivational

syndrome—when one's brain is lazy and lethargic. Most of us have a friend or two who smoked just a bit too much pot, and although they function, they are just slo-o-o-o-w.

The other important factor for parents to know is that the marijuana that Bill Clinton and others did not inhale in the 1970s is not the same as the marijuana kids are using today. Today's marijuana is five to twenty times stronger and is often laced with more dangerous drugs.

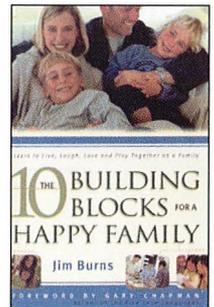
Heroin, LSD, and cocaine. Then we move on to heroin, LSD, and cocaine. Your children likely won't start their experimentation with these drugs, but as kids move through the gateway, they find it easier to violate their value systems and move to harder drugs. Each step past the gateway brings people closer to hard-core drugs and brings more destruction.

Healthy, parental drug education is an answer. The chances of young people abusing drugs lessen when parents proactively teach their kids and set a good example themselves. The first step in preventing your kids from abusing drugs and alcohol is self-examination. I know one father who tried to get help for his two sons for several years. On the day he admitted he had a problem with alcohol, his sons followed him to treatment.

Most likely, every parent reading this book has made the decision to teach his or her children positive, healthy morals and values and to foster those values. Most parents are frightened by the amount of negative distractions and temptations facing today's children. However, if our children are given proper education, a good example, positive faith and proactive parenting, they can make it through the maze of negative influences and develop positive morals and values that they will pass on to their children. ☺

Jim Burns, president of Youth-Builders, will be the first to tell you that no family is perfect—including his own. In *The 10 Building Blocks for a Happy Family*, Burns writes from one Christian parent to another, covering almost every aspect of parenting—from helping your children deal with stress to learning to play together as a family. (Regal)

Excerpted from *The 10 Building Blocks for a Happy Family*, by Jim Burns. ©2003 Regal Books. Used by permission.



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The Power of Personal Example

BY KAREN COLE

I was with my mother when she died.

Fifteen months earlier she had been diagnosed with a recurrence of the cancer that had been beaten into submission many years before. For those fifteen months, our extended family had ridden the roller coaster ride of serious illness along with her.

My brothers and I, all with families, demanding jobs, and busy schedules, had taken weeks away from work and traveled many miles to stay with her when she couldn't manage alone. Other family members and friends filled in the gaps when we couldn't be there.

She was in and out of the hospital for treatments and tests. During some bad times, we spent days and nights in the ICU waiting room, pressing doctors for answers they couldn't give and praying for God's will to be done.

I accompanied her to select a wig, and I shared her joy when chemotherapy ended and her hair grew back enough to go without it. I took her to a workshop for women with cancer and listened as a specially trained cosmetologist talked about skin care during cancer treatment and re-creating missing eyebrows with makeup. I watched with dismay as her athletic

frame shrunk to an emaciated seventy-two pounds.

I left my husband and children in another state to live with her full time for her last month. I did my best to make her comfortable. I kept track of multiple medications and the instructions issued by physicians, home health care workers, and finally, hospice nurses. I worked hard to prepare food that appealed to her, and I was thrilled beyond description when she ate a few bites. I rearranged her beautiful bedroom furniture to accommodate a rented hospital bed. I learned to operate the feeding pump and oxygen machine that enabled her to live her last days at home. I held her wasted body and prayed for God to take her when she felt as if she couldn't breathe. And I was at her bedside when she died.

Through it all, I had a hard time accepting that she had apparently chosen this roller coaster ride not only for herself, but also for her family. You see, my mother had smoking-related lung cancer.

Once, in exhaustion and anger, I had confronted her: Why had she made the choices that put her and so many others through this ordeal? She calmly explained that as a child, she had watched the adults around her as they smoked. As a young teenager, she followed their lead.



People who are important to us are watching and perhaps imitating our every word and action. Which of our habits or behaviors will they take into adulthood?

Unfortunately, like many others, she quickly became addicted and had not been able to quit in all the years since.

The power of a parent's personal example "is the most underutilized tool in helping teens steer clear of tobacco, alcohol, and illegal drugs," one study reported. Likewise, as a teenager my mother imitated the adults in her world

and brought years of pain and suffering on herself and her family.

As hard as it might be to admit and accept, people who are important to us are watching and perhaps imitating our every word and action. That realization should prompt each of us to prayerfully consider our lifestyle choices and their long-term ramifications for those we love. †

God has high standards for His people.

Living in a world that acknowledges no absolutes of right and wrong, our children and teenagers desperately need us to practice our faith and to "bring them up in the training and instruction of the Lord" (Eph. 6:4).

Simply put, when Scripture instructs us to avoid the recreational use of mood-altering substances in order that we represent our Lord well, we should do it—no questions asked. The pleasures of alcohol and drug use are fleeting and often lead to a lifetime of heartache. And there is no need to try to escape the pressure or pain life brings in alcohol or other drugs, for the strength to bear the most difficult times is found in Christ alone.

Human sexuality is at the center of another cultural struggle being waged in our day. Far too many young women don't know right from wrong when it comes to appropriate dress because they have bought into the low standards of modesty promoted on television and in contemporary movies and music. We must help young women understand that the expression of their sexuality is a beautiful gift from God and that He intends it to be shared with one man in marriage.

I highly recommend these Scripture-based resources that will help you and your family live in a way that brings glory to our Lord.

Richard D. Land, ERLC President

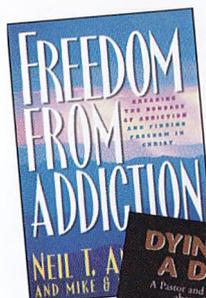


SUBSTANCE ABUSE PREVENTION RESOURCES

Freedom from Addiction

Neil Anderson's Christ-centered model for recovery has helped more than a million people grasp the truth that can set them free from the vicious cycle of addiction.

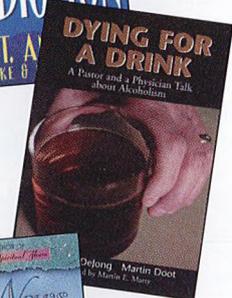
BKFRE (356 pages) \$15.29 ea.



Dying for a Drink

Pastor Alexander DeJong shares how family support, group therapy, and the care of a Christian physician helped him recover from alcohol addiction.

BKDYI (63 pages) \$7.20 ea.



Good News for the Chemically Dependent

Author Jeff VanVonderen shares what family, friends, and the church should—and should not—do to help a chemically dependent person.

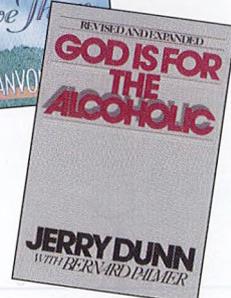
BKG00 (226 pages) \$11.69 ea.



God Is for the Alcoholic

A recovered alcoholic, Jerry Dunn shares tips for understanding alcoholism, ways to help the alcoholic, and ways the alcoholic can help himself.

BKGDIS (237 pages) \$11.69 ea.

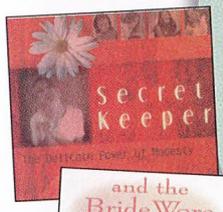


MODESTY/SEXUAL PURITY RESOURCES

Secret Keeper: The Delicate Power of Modesty

In an age of low-rise jeans and skin-tight shirts, many girls and young women cannot even define modesty, much less know how to live it out. Dannah Gresh has a message for them: Modesty itself holds a delicate yet formidable power. In a very "cool" way, she teaches that modesty expresses your love for and obedience to God and issues a challenge for one man to earn your virtue.

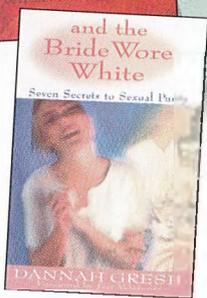
BKSEC (78 pages) \$8.09 ea.



And the Bride Wore White

Dannah Gresh uses a warm and revealing writing style to reach the hearts of teen girls, exposing Satan's lies about sex and giving seven secrets of sexual purity to apply during the dating years.

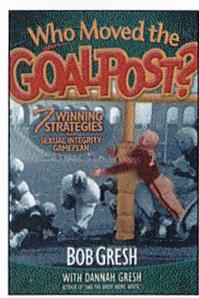
BKBRI (184 pages) \$11.69 ea.



Who Moved the Goal Post?

Yes, there is hope for young men who struggle with the issue of sexual purity. In a casual, humorous way, Bob Gresh exposes Satan's lies about sex, shares God's powerful truths, and outlines winning strategies to live by each day.

BKMOV (224 pages) \$11.69 ea.



BULLETIN INSERTS

Faith & Family

This monthly cutting-edge resource addresses some of the most critical issues of our day—a new topic each month—in an expanded 4-page format. It offers biblical insights on a wide range of issues built around real-life stories of victory and gives prayer points, action steps Christians can take, suggested resources, and more. Most importantly, Faith & Family includes a step-by-step outline of the plan of salvation.

Faith & Family is included in the monthly Culture Response Kit (call for subscription information). The publication is also available for purchase in lots of 50 by specifying the product code at right.



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In 1999, an estimated four million people aged twelve and older used prescription medication for nonmedical reasons. Research has indicated rising instances of prescription drug abuse by women, older adults, and adolescents.

PLAIN TALK ON PRESCRIPTION DRUG ABUSE

BY DON W. BUCKLEY, M.D.



It all began with a curious call from the pharmacist. She told me that a woman who said she worked for me had just phoned in a refill for a popularly abused substance. There were two problems with this scenario: (1) No such person worked in my office; and (2) It was a Saturday, and the office was closed. A bit of detective work soon revealed that this woman had contacted other pharmacies, using similar claims in an attempt to illegally obtain addictive medications. She now faces criminal prosecution.

Unfortunately, this story is not uncommon and illustrates the growing problem of prescription drug abuse in the United States.

The National Institute on Drug Abuse reports that in 1999, an estimated four million people aged twelve and older used prescription medication for nonmedical reasons. Research has indicated rising numbers of prescription drug abuse by women, older adults, and adolescents.

Physicians are aware of this growing problem because we see it in our offices and emergency rooms, but everyone needs to learn the facts about prescription drug abuse in order to recognize it in others and avoid it for ourselves.

The three most commonly abused classes of prescription drugs are opioids, CNS (central nervous system) depressants, and stimulants.

Opioids

Opioids are pain-relieving drugs often known as narcotics. They include such drugs as codeine, morphine, oxycodone (Oxycontin), propoxyphene (Darvon), meperidene (Demoral), and hydrocodone (Lortab). These compounds can be very useful in treating severe, acute pain such as pain after surgery and the chronic pain of cancer patients. They work by blocking the transmission of pain signals to the brain and often have an initial euphoric (giddy) effect desired by abusers.

Narcotics are safe and effective if prescribed and used appropriately. Their misuse, however, can result in drug tolerance, physical dependence, and addiction. *Tolerance* means that due to excessive drug use, higher and higher doses are needed to achieve the same pain-relieving effect. The patient who is *physically dependent* on narcotics will show withdrawal symptoms when the medication is cut back or stopped. These people exhibit such side effects as restlessness, body aches, diarrhea, vomiting, and cold flashes. *Addiction* has occurred when the narcotic use has led to uncontrolled, compulsive use of the medication accompanied by drug-seeking behavior. Addiction results in part from chemical changes the narcotics have produced in the brain.

CNS depressants

These drugs are typically used by physicians to treat incapacitating anxiety and sleep disorders. Such medications as diazepam (Valium), chlordiazepoxide (Librium), alprazolam (Xanax), and lorazepam (Ativan) are commonly used for anxiety disorders. Triazolam (Halcion) is used for insomnia patients on a short-term basis. These drugs slow down brain activity, resulting in drowsiness and a calming effect. The abuse of these drugs leads to tolerance, physical dependence, and withdrawal complications (if the medication is reduced or stopped abruptly). Typically they should not be mixed with alcohol, cold and allergy medicine, or prescription pain medication. Of course, they should be used only at the advice of a physician fully aware of the patient's physical and emotional health.

CNS stimulants

CNS stimulants are drugs such as dextroamphetamine (Dexedrine) and methylphenidate (Ritalin) used for the treatment of narcolepsy (daytime sleepiness) and attention-deficit hyperactivity disorder (ADHD). They work by increasing the chemicals norepinephrine and dopamine in the brain and can have a euphoric/energizing effect. Current studies show that while ADHD patients who take these medications appropriately are not at increased risk for drug addiction, the improper use of these medications often leads to addictive/compulsive drug-seeking behavior. The abuse of these medications can cause hostile and paranoid behavior as well as severely high blood pressure and seizures. These medications should never be used along with cold medications (decongestants) or anti-depressants except on the advice of a physician.

Who's at risk

While anyone is at risk, there are three groups in whom prescription drug misuse in this country is on the rise—the elderly, adolescents, and women.

The elderly use three times more medication than the general population and have the poorest record of taking medication as directed. This can easily lead to an inadvertent addiction.

Just as we face an epidemic of illegal drug abuse in this country with our teens and young adults, we face a similar problem with *prescription* drug abuse. A recent national study reported that the most dramatic increase in new users of prescription drugs for nonmedical purposes is in the twelve-to-twenty-five age group. There also has been an alarming rise in college students abusing oxycodone and hydrocodone based on a study of emergency room visits.

Finally, women should note that they are one and one-half times more likely than men to be prescribed an abusable prescription medication and are twice as likely as men to become addicted to CNS depressants. Certainly these medications should be used only when clearly indicated.

Time for a little talk

Now that you know the facts it's time for a little talk with the family physician. God has given us medication—just as He has the rest of creation—for its wise and proper use. While medication can be a great blessing if used appropriately for the treatment of physical or emotional illness, its improper use can be a curse. It is the role of the Christian steward to realize when these drugs should be used and when they should be avoided.

Life is full of stresses and pain as a direct result of living in a sinful world. Those that are occasional or minor or not incapacitating need not be treated with medication. However, there are indeed times when we are faced with more severe mental/physical pain, anxiety, and sleep or learning disorders that prevent normal functioning in life. Such conditions are not sinful, nor are they character flaws. They are neurochemical abnormalities that I see in my office every day and should be treated with medication just as we treat diabetes with medication.

If you suspect that you or a loved one is suffering from such a disorder you should seek the advice of a physician whom you trust. Remember that God often uses human hands and means (physicians, counselors, and medication) to bring about His healing on this earth. 

Don W. Buckley, M.D., is medical director of Spanish Trail Family Physicians in Pensacola, Fla., and a Founding Fellow of the ERLC's Research Institute. He and his wife, Janice (also a family physician), and their children attend Olive Baptist Church in Pensacola.



Use Prescription Drugs with Care

In order to avoid the improper use of prescription medication:

- ◆ Use prescription medication only with the advice of your physician.
- ◆ Use the medication only at the proper dosage, frequency, and duration.
- ◆ Be aware of possible drug warnings and interactions with other medications.
- ◆ Never use someone else's medicine.
- ◆ Call your family physician or pharmacist if you have questions concerning the proper use of prescription medication.

DOCTOR PREACHES MINISTRY AND PRACTICES MEDICINE

BY TIM MCKEOWN

Combining medicine and ministry, Ray Bandy, M.D., sees his calling as both physician and preacher as interrelated as Matthew 4:23 described Jesus' ministry: "And Jesus went about . . . preaching the gospel of the kingdom and healing all kinds of sickness and all kinds of disease among the people." Bandy serves full-time as senior pastor-teacher at Trinity Southern Baptist Church in Lewisville, Texas, as well as medical director for the Lewisville-based Christian Community Action Adult Health Center.

"Medicine and ministry are tremendously interrelated because the illustrations and applications in healing the body and healing the soul are inseparable," Bandy said, adding that the patients he treats at the health center are "walking, talking sermon material."

In addition to medical healing, Bandy has been used to cause some spiritual healing by helping resurrect a church seven years ago, a church that had failed to start in three prior attempts. Two years later, the church had increased in size, forcing it to double its education space. In 2001, the church completed a new auditorium.

"We started with only six cars in the parking lot and maybe fifteen to sixteen folks coming. Both the Denton Baptist Association and the Baptist General Convention of Texas were thinking about selling it, but the church wanted to keep going." Now the church has a clean bill of health, with about 225 in worship and 180 in Sunday School.



Ray Bandy, M.D., the senior pastor of Trinity Southern Baptist Church in Lewisville, Texas, also serves as medical director of the Christian Community Action Adult Health Center.

A heavenly call

At age 45, Bandy admits that his calling into a dual career wasn't always so clear. Growing up on a farm in southwest Missouri, Bandy was saved at a revival at age seven and was raised in a Christian family. He describes his mother as a dedicated Christian and a strong Bible student who raised five children who all now serve in Southern Baptist churches.

But a call into the ministry? "I never even had a thought about becoming a preacher." Instead, he wanted to play baseball and earned a full scholarship to Crowder College. During those years, Bandy said he realized he "wasn't going to be the next Mickey Mantle," and began praying about what God wanted him to do. Since he had a talent and love for science, he studied

medicine. Leaving behind his baseball scholarship, Bandy transferred to Southwest Baptist University in Bolivar, Missouri, where he received an academic as well as spiritual education from dedicated Christians.

It was on a Sunday evening during the middle of the worship service that Bandy had an experience never to be repeated but also never to be forgotten. To this day he can explain it no other way than God sent him his undeniable calling. "During the service, a spiritual being, maybe an angel or messenger from God, appeared to me above and in front of me and said 'You are going to preach.' I heard a literal voice, and it shocked me. I looked around because I thought surely others saw it and heard it but no one else did."

Being a man of science, Bandy finds it ironic that God would use such a supernatural way to call him into something he'd never even considered. "I can't explain it, other than as a result of that experience, I know I cannot ever give up on my call. The force of the command was so strong that it has never been a question of whether or not God has called me to preach."

For eleven years, Bandy assumed God was calling him into medical missions. He finished his medical studies at the University of Missouri Medical School, then did his residency and taught at the University of Oklahoma, specializing in infectious diseases and tropical medicine. He then attended Southwestern Baptist Theological Seminary, and while in Fort Worth, met his future wife, Jan.

"And Jesus went about . . . preaching the gospel of the kingdom and healing all kinds of sickness and all kinds of disease among the people." MATTHEW 4:23 (NKJV)

in action

The vision clarified

While he was in private practice in Dallas, Denton Baptist Association contacted Bandy to serve as a pastor. It was then that God began to unveil the medicine and ministry vision. For fifteen years, Christian Community Action founder Tom Duffy and others had been praying for a doctor to begin a medical clinic for the poor. With the donation of a 2,500-square-foot building, Bandy, a nurse, and a physician's assistant began seeing patients one afternoon a week.

It's easy now for the Bandys to see the call of the Lord, but seven years ago it was a major decision the couple made to go to a church that had, in baseball terms, already struck out three times.

Without regret, Bandy honestly admits both ministries

have been personal struggles at various times. "We've sacrificed time, talent, money, everything to see these go successfully. Jan has had to do double duty," he said. "I believe I am a better man as a pastor of a small church and providing medical help for free, than I was as a private physician. And I think Jan would agree with that," Bandy said, grinning. The Bandys are strongly pro-life both in their beliefs and in their practice, having adopted their three children, Caroline, Luke, and Nathan.

A call confirmed

Now, Bandy puts in twelve to fourteen hours a week as director of the Christian-based health center that treats about four thousand families a year. The staff includes five volunteer physicians, an ophthalmol-

ogist, a team of specialists, and volunteers from a variety of denominations. "Last year, we calculated we distributed about \$1.2 million worth of free medical care for patients. [The

allows him to serve at the clinic, Bandy said.

Beyond his own personal growth, Bandy recalled numerous successes, including his church praying about an abor-

This article is reprinted with permission from the Southern Baptist Texan, April 21, 2003. Photos by Kyle Felts.

"Dr. Bandy exemplifies the conviction of people who want to practice what they preach. Presenting Jesus as the Great Physician for both physical and spiritual needs is a rare privilege that he has. Thank God for his commitment.

—Jim Richards, Executive Director, Southern Baptists of Texas Convention

patients] are treated like VIPs, receiving quality care by board-certified physicians."

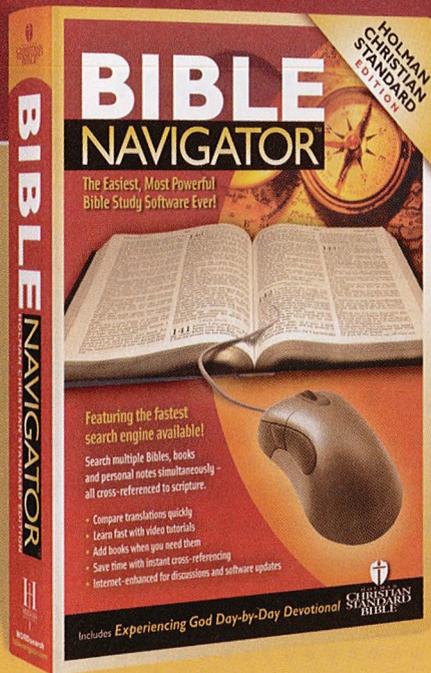
While he works full-time at the church, Trinity Southern Baptist has "an incredibly giving heart" for ministry, giving 14 percent of its undesignated donations to missions and the Cooperative Program. It's the church's giving heart that also

tion clinic in the city. Church members took turns kneeling in prayer on the sidewalk outside the clinic during its open hours, volunteered to adopt the babies who would otherwise be aborted, and even offered cookies to the clients and staff. "We did that for two years. I have an article from the local paper when the clinic closed, and the abortionist said it was the protests that closed the clinic. There were no protests, but there were prayers; and God closed it."

Oftentimes at the health center, patients come in with apparent medical problems that in reality are deeply rooted spiritual problems. "Two months ago, a woman came in tired and depressed and wanted a pill to make her feel better. After a medical examination we saw she had a liver problem and was drinking as much as a bottle of whiskey a day. We had a great opportunity to minister to her, and she gave up drinking cold turkey, went through the shakes, and now is coming to church," he said. "We share Christ to meet physical and spiritual needs." ☩



"Medicine and ministry are tremendously interrelated because the illustrations and applications in healing the body and healing the soul are inseparable." —RAY BANDY



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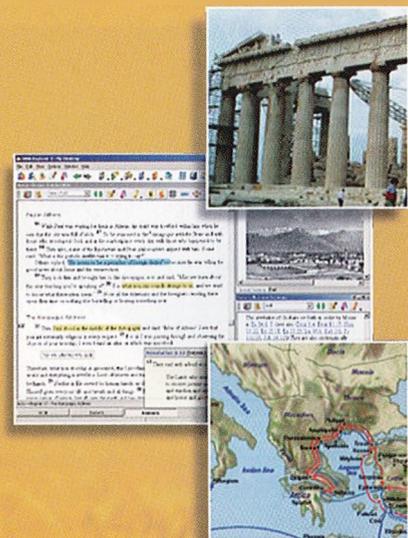
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ELECTION 2004:

Stand and be counted

The 2004 election is one of the most critical in the history of our nation. At stake is a basic unit of society—a divinely-ordained building block of society—marriage. A significant number of Americans, even many who are not committed to any faith, understand that there is something fundamental at stake when people start redefining marriage.

That's why a Federal Marriage Amendment is so important. Just a single sentence, the Federal Marriage Amendment would carry a powerful message:

"Marriage in the United States shall only be between a man and a woman."

Every state and federal race in the upcoming election is critical, because for a federal amendment to be passed, it must receive a $2/3$ majority vote in the Senate, a $2/3$ majority vote in the House, and ratification by 38 states. If that happens, it becomes part of the U.S. Constitution.

Every candidate seeking public office in the 2004 election should be asked the question: "Will you vote to ratify a Federal Marriage Amendment, or not?"

In 2 Chronicles 7:14, God says, "If my people, who are called by my name, will humble themselves and pray and seek my face and turn from their wicked ways, then will I hear from heaven and will forgive their sin and will heal their land."

Never in recent history has there been a more critical time for Christians to vote their convictions. Will you stand and be counted?

ivotevalues.com

Because **how you vote today** determines tomorrow.

"Ultimately, our loyalty belongs not to any political party or candidate but to God Almighty. And when the time comes, I believe God may ask each of us about how we voted and why." —RICHARD LAND

you can help

- V**erify that your candidates of choice favor a Federal Marriage Amendment. Share your findings with friends and family.
- O**btain voter registration forms and absentee voter information from your county clerk's office. Find out filing deadlines.
- T**ake the time to register to vote—then vote. Offer transportation to shut-ins to ensure their participation in the upcoming election.
- E**nlist workers in your church and community to set up voter registration drives and let people know why election 2004 is so critical.

With God's help, God's people can make a difference.

you've been asking

I've heard that Abercrombie & Fitch is using their models to sell clothing in some unique ways, like having them pose without the clothes on. What's going on?

—A shocked parent

What was once a reputable outfitter of outdoorsmen is now using sexually charged messages to sell young people clothing—sort of.

In 1908, Abercrombie & Fitch, the sporting goods store, provided Theodore Roosevelt with equipment for an African safari. According to the Web site www.lowermanhattan.info, the once highly respected company also provided high-quality camping, fishing, and hunting gear to famous clients such as Ernest Hemingway, Robert Peary, Amelia Earhart, Howard Hughes, the Duke of Windsor, and Presidents Taft, Harding, and Kennedy.

That's highly unlikely to happen today.

Abercrombie & Fitch has become the undeniable leader in using sexual messages to attract the attention of the pre-teen and teenage audience.

Their holiday catalog, "Christmas Field Guide," advocates

the company line: There are no sexual boundaries—anything and everything is not only permissible but encouraged.

"They are proclaiming the fruitless deeds of darkness—sexual immorality, sex without boundaries, sex without commitment, sex without consequences. In essence, sex as recreation not procreation," said Rick Schatz, president of the National Coalition for the Protection of Children & Families, on the group's Web site.

The catalog, better known for its nudity than its clothing (the first article of clothing is offered on p. 120), features assorted gatherings of young men and young women all sans clothing and in provocative poses—as if total nudity in a clothing catalog wasn't provocative enough.

The retailer doesn't stay away from sacred ground; it jumps right in. The Christmas catalog, subtitled "Naughty or Nice," features an interview with Mark Millar, a writer for Marvel Comics, who said: "My idea is you have the Old

Testament, the New Testament, and this is the Final Testament. This is a thing about Jesus coming back as a 12-year-old kid . . . pontificating whether or not he should masturbate. . . ."

Abercrombie & Fitch, headquartered in New Albany, Ohio, launched their first X-rated catalog in 1998 and shows no sign of backing off this marketing plan. "It's become the cornerstone in communication to our Abercrombie customer," company spokesman Hampton Carney told the Associated Press. "Everything we do is about a youthful and spirited, responsible life. We never do anything to let our customers down in any way."

The 2003 Christmas edition of the Abercrombie & Fitch catalog was pulled from stores early in December. Company management claimed it was to clear up shelf space for a new cologne (which is reportedly featured in the catalog that is being shelved). Groups that had been pressuring Abercrombie to ditch the catalog



scoffed, saying it was public pressure that led the company to make the catalog available by subscription only.

Abercrombie officials said they weren't altering their marketing strategy, promising a new catalog with more of the same early in 2004. "Our spring quarterly will be back in stores mid-January, and everyone will see that there's no change in our policy toward the catalog or the editorial direction. . . . There'll be partial nudity. It will be sexy, and it will be irreverent," Carney told the *San Francisco Chronicle*.

In the Christmas edition, the author of *The Complete Idiot's Guide to Amazing Sex* and self-proclaimed sex and relationship educator, Sari Locker, provides readers her insight on collegiate activities, saying, "College is the time when you have the greatest opportunity to have sex [and] the highest number of potential sexual partners. . . ."

While Abercrombie & Fitch insists it is targeting college-age adults, their sexualized marketing is drawing a wider age

group into their net. In a survey of teenagers by Teenage Research Unlimited, teens ranked Abercrombie as the sixth-coolest brand out there, ahead of worldwide brands such as Coca-Cola, Levis, and Nintendo, according to the Sept. 4, 2003, *Associated Press* report.

Not surprisingly, Abercrombie's audience likes the company's marketing plan. "There's no question that Abercrombie appeals to teenagers because it's the whole forbidden fruit syndrome. These guys are hormonally driven. What's on the forefront of their minds? It's sex. You don't have to be a marketer to understand that," Peter Zollo, president of Teenage Research Unlimited, told AP.

Parents need to talk with their teenage sons and daughters about the way Abercrombie is marketing to them, said Jack Samad, senior vice president of the National Coalition. "Part of raising awareness is helping teens to think critically about the sexualized messages they receive in the media and

through advertising. This is a great chance for parents to generate dialogue about this topic."

"Teenage girls are led to believe that if they are to be 'cool' then they should be sexually 'free' and liberated. They cannot say no. They are encouraged to become the sexual aggressor. They must be sexually active," Schatz said of Abercrombie's message. "Teenage boys are presented with homoerotic imagery and messages which are intended to desensitize any objections to experimentation with deviant sex acts."

He warned that those who purchase clothing from A&F are supporting the promotion of this ideology, which is producing a "devastatingly destructive lifestyle."

A 2002 Abercrombie & Fitch catalog earned the ire of Mothers Against Drunk Driving and other groups for its emphasis on alcohol, including drink recipes, such as "Brain Hemorrhage." The company pulled that catalog from its stores.❶

FACT:

A&F operates 641 stores in the US (including Abercrombie kids and Hollister Co.).



BUY IT BACK

Talk to Your Kids about the Way Abercrombie & Fitch and Other Retailers Market Their Products

Many parents have voiced the concern that the Abercrombie & Fitch issue has the potential to disrupt their relationship with their teen or inadvertently motivate teens to be even more attracted to wearing A&F clothing. Certainly, many parents who've already bought clothing at A&F are just now becoming aware of the company's advertising.

"We encourage parents to use this opportunity to talk to their kids with an open spirit about sex and about the A&F magalog," said Jack Samad, senior vice president. "Part of raising awareness is helping teens to think critically about the sexualized messages they receive in the media and through advertising. This is a great chance for parents to generate dialogue about this topic."

Dorn Checkley, director of the Pittsburgh Coalition Against Pornography, suggests instituting a "buy-back" policy with kids. "If your kids bought A&F with their own cash, then buy back the clothing with cash or a gift certificate and let them buy elsewhere."

"Above all, don't let this issue become a wedge between you and your kids," Samad added. "Use it as an opportunity to wrestle with these issues together."

For more information about Abercrombie & Fitch, visit www.stopaf.org or call (888) 249-9282.

Building a Foundation for Life

Good Memories

BY DWAYNE HASTINGS

It happened when I was in the third grade. My teacher, Mrs. Nunn, told the class it was time to learn the multiplication table. Things went pretty well until I got to the "sixes": 6 times 7, 6 times 8, and so on. The troublesome "sevens," "eights," and "nines" followed.

Mrs. Nunn told us we would use the multiplication table someday, but I didn't see how. I knew adding was important because I had seen my mom counting out money to give the cashier at the grocery store, but multiplying—never!

Well, I did manage to memorize the multiplication table, and Mrs. Nunn was right—I use it all the time.

As I went through school, I also had to memorize famous dates in history, such as the year Columbus came ashore in the New World, 1492; the date the U.S. Constitution was signed, 1789; and my favorite, the War of 1812 (that one's easy).

Later on, I had to memorize more mathematical facts: All the sides of an equilateral triangle are the same length, and all its angles are the same (60°). Two straight lines can only intersect at one point. And I had to learn science facts: The atomic weight of argon is 18, and light travels at 186,000 miles per second.

Facts are facts. When you are tested on math, science, and history, you either know the answer or you don't. You can't write a long essay and hope to get partial credit when your teacher asks for the product of 4 times 8 times 3 or where the Battle of Gettysburg was fought.

It is the same with the Bible. It is important to read the Bible and to memorize Bible verses. Some people try to make the Bible say things it doesn't. People who try to "read between the lines" of Scripture to distort its words are being dishonest. To know what



is true and what is false, read the Bible for yourself.

When you find yourself in trouble, scared, confused, or even happy, it is good to either have God's Word tucked away in your mind to remember or to read the Bible. God gave us His Word to comfort us, to strengthen us, and to make us wise beyond our years.

Scripture helps us see things more clearly. King David said Bible verses were like a flashlight that helps us see ahead in the dark (Psalm 119:105).

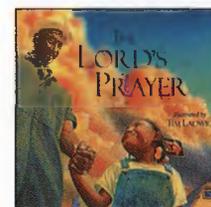
In a special way, the Bible comes alive when we invite Jesus to be our Lord and Savior. He gives us a deeper understanding of what the Bible says. The Holy Spirit helps us memorize Scripture so we have it right in our minds when we are faced with important decisions and want to know what God thinks.

Bible truth: God is pleased when His children read His Book, the Bible.

Bible verse: "I have hidden your word in my heart that I might not sin against you." (Psalm 119:11)

RECOMMENDED READING

The beloved words of *The Lord's Prayer* serve as the text for this remarkable book. In Tim Ladwig's paintings, a young girl and her father spend a day together helping an elderly neighbor. The love and guidance the child experiences in her relationship with her father reflect the heart and will of our Heavenly Father in concrete ways children of all ages will understand. (Eerdmans)



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