Sondra (and many others like her) find hope at True Care. Thank you for your faithful support!

Sondra Finds Hope

by Gayle Irwin, Patient Resources Director

Twenty-two-year-old Sondra already had four children. Unmarried and unsure who the father of this possible baby was, she sought our services after learning about True Care from her aunt. Sondra’s mother wanted her daughter to abort, but the aunt and cousin would support a decision to carry-to-term.

Sondra experienced several issues that would cause many women to consider abortion: she was unemployed; didn’t feel safe with her current boyfriend; and suffered from depression and other mental health challenges. However, she didn’t want to hear about abortion nor did she take the informational pamphlet offered to her by her Advocate.

“I don’t intend to abort, no matter what my mother says. I may not be the best parent, but I would not kill a child,” she said. “Because of my circumstances and my topsy-turvy emotions, I’m considering an adoption.”

As they waited for her pregnancy test results, the Advocate presented the Gospel to a hesitant Sondra. “I’m really not much on religion; I’d probably set the whole place on fire if I walked into a church,” she said.

The Advocate graciously told our patient about God’s love, forgiveness, and grace. By the end of the discussion, the young woman’s heart had opened up. Accepting the “Steps to Peace with God” brochure, Sondra said, “I’ve really never heard this before. Perhaps I should read one of those Bibles on my bookshelf at home.” Her Advocate encouraged her to do just that and to spend time with God in prayer. She also provided Sondra with referrals to the Self Help Center.

Upon learning her pregnancy test was positive, Sondra had an ultrasound, which showed a tiny flicker of a heartbeat, not large enough to measure. The Nurse rescheduled our patient for the next week.

When she returned, she told her Advocate that she had started to read the Bible. “I know I need to make changes in my life. I started reading the Bible and I’ve spoken with someone at the Self Help Center who helped me get a restraining order against my boyfriend. I feel I’m on a better path, and I want to thank you all for your help and encouragement,” Sondra said.

We are thankful for the many seeds of hope we can plant into the hearts and minds of women like Sondra.
CEO Commentary

When True Care became a medical clinic 12 years ago, we envisioned helping more abortion-minded women see the truth of the life within them via ultrasound. We wanted to become more relevant to our target audience by offering important medical services at no cost. Those goals have been met. Last year more than 70 percent of the patients we assessed as abortion-minded or abortion-determined chose to carry their babies to term. Yet, there are still some who leave our center planning to abort.

Women who go through with an abortion procedure often regret their decision. Help is available through the Save One abortion recovery program. True Care is blessed to partner with people in our community who lead these classes.

But what if there was a way to reach women before it’s too late? For those who have taken the medical abortion pill, there is! True Care began offering a new service, abortion pill reversal, last month. We are the only pregnancy center in the state providing it – and at no charge!

Abortion Pill Reversal is a relatively new treatment for women who have started a chemical abortion and regret that decision. Many people don’t realize that the abortion pill can often be reversed. The reversal process is called Pregnancy Sustaining Progesterone Therapy (PSPT) or Abortion Pill Reversal, and in about 50 percent of cases, a woman goes on to deliver a healthy baby.

Dr. George Delgado is the director of the national Abortion Pill Reversal hotline. He and others developed the steps to reverse a chemical abortion. Although abortion pill reversal is a fairly new and a somewhat controversial medical regimen, Dr. Delgado testified earlier this year before the Colorado Legislature stating, “Our overall success rate is 50-55%.”

A woman has a short window of time to begin the progesterone therapy, usually within 72 hours of taking the first of the two pills she is given as part of a chemical abortion. Beginning the PSPT regimen within 24 hours has the greatest chance of success. The woman receives an ultrasound to be sure there is a fetal heartbeat before starting the process. She may receive the progesterone in daily injections or pills/suppositories.

This is a long term commitment, and some pregnancies still fail, but there have been many success stories of healthy deliveries.

True Care’s board and staff discussed offering abortion pill reversal a few years ago. Finding an insurance company willing to walk alongside us was somewhat challenging, but once that issue was resolved and our staff was trained, we made plans to launch this important service.

When we began offering medical services more than a decade ago, we couldn’t have imagined this day.

Please be praying for the True Care staff and for women to find us when they search for the answer to their question: “Can a medical abortion be reversed?” Abortion pundits don’t want people to know this is possible! We stand with God on the front lines, fighting for life for both moms and their unborn. We hope you’ll stand with us through your prayers and by sharing the news that True Care now provides this life-saving medical service.
There is substantial evidence for the benefits of screening and brief intervention for substances such as cannabis, amphetamines, cocaine and opiates. For most women, early and regular prenatal care ensures a healthy pregnancy and delivery without complications. The purpose of the Early KinCare (EKC) program is to help prevent learning disabilities and learning delays by assisting the mother to receive the best care she can and connect her early on in her pregnancy with the appropriate resources. Assessing for drug, alcohol or tobacco use is extremely important when I meet with my patients to discuss the resources they will need.

I met with a young woman recently and asked her when she had last used methamphetamine. She looked down at the floor and said, “Last week.” (week 10 of her pregnancy) The very next patient also admitted to using meth in the past 30 days. She, too, was near the end of her first trimester.

Simply asking a woman, “Do you do drugs?” is not at all effective. Instead, I use the Alcohol, Smoking and Substance Involvement Screening Test (ASSIST) when assessing patients enrolled in the Early KinCare Program for substance abuse. This tool was developed for the World Health Organization (WHO) by an international group of substance abuse researchers. It is an eight question screening tool which addresses everything from tobacco to methamphetamine use. The tool looks at lifetime substance abuse as well as use in the past three months.

Pregnancy can be a very stressful time. The chances are good that if a woman used drugs to cope with stress in her past, she will turn to them again. Most of our patients realize that a vulnerable little one is growing inside them. This is a great motivator to get healthy. Some, however, have never learned good coping skills and do not know where to start to take better care of themselves. They may even be clueless about the dangers to their baby if they continue to use alcohol or drugs. Sometimes patients will tell me, “I have a friend who used meth for her whole pregnancy and her baby turned out fine.” Unfortunately, it is likely the baby is not “fine” and may have severe learning disabilities and developmental delays that will not be evident for years to come.

The Early KinCare Program has been successful in helping many of our patients to stop using drugs and alcohol during their pregnancies. In addition, the ASSIST tool has helped identify more women who are currently using or who have used substances in the past. The very first time I used the ASSIST tool the woman answered “yes” to every single substance. I have been able to encourage many to stay drug free during their pregnancies, referring them to support groups and programs or even helping some check in to in-patient treatment.

Opening the eyes of these women to the dangers of substance abuse, helping them to realize their lives and the lives of their babies are worth saving, is one of the most important goals of the Early KinCare Program.

The Early KinCare Program is open to all True Care patients. The program is funded by the Healthy Birth and Infant Brains Foundation and officially began in January 2013. During this time Cheryl has enrolled 682 patients in the program and made more than 3,101 patient contacts. She has completed 599 Medicaid applications. So far, 466 babies have been born to women who enrolled in the program.
Thanks to the More Than 90 True Care Partners Who Have Sponsored A Day

**TOP 5 Needs**

**Volunteer Patient Advocates, Baby and Me Advocates, and Follow-Up Specialists**
We are especially in need of Patient Advocates! Contact our Patient Resources Director, Gayle Irwin, for more information about these volunteer opportunities. 307-472-2810 or gayle@truecarecasper.org

**Vision Tour Hosts**
Need an idea for your next small group meeting? Invite a few friends or associates to a Vision Tour—a one-hour introduction to True Care. Or—we can come to your office or church! Contact Lilly for more information at 472-2810 or lilly@truecarecasper.org.

**Housekeeping Essentials**
Paper towels, toilet paper and garbage bags. Call 472-2810 for the best time to drop off these items.

**New Baby Clothes and Supplies**
New baby clothing for boys and girls, bibs, size 1 diapers, wipes, etc. are needed for the layettes we give to our mommies when they bring their babies in to meet us. Call 472-2810, ext 10 for the best time to drop off these items.

**Spanish-Speaking Patient Advocates, Follow-Up Specialists and Baby and Me Advocates**
Are you fluent in Spanish? If so, we need you so we can serve Spanish-speaking patients. Contact Gayle at 472-2810 or gayle@truecarecasper.org for more information.

**Friends of True Care** are always asking how they can help. Here we've highlighted five specific needs that we could use a little help with so we can serve our patients well:

**Provisioning**
- Rubbing alcohol
- One-hour introduction to True Care.
- Call 472-2810 for the best time to drop off these items.

**Vision Tour Hosts**
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Want to Sponsor A Day?
See the enclosed response card or call Lilly at 472-2810 ext 17.