

Dr. Paul Saba Author and Physician: This Thanksgiving Weekend Support Women Who Want To Keep Their Babies

If women were given financial, educational, work, social and medical support, most would probably keep their babies. It's a question of fairness and equity.

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EINPresswire.com/ -- "This Thanksgiving Weekend is a good time to reflect on our gratitude for our lives and the lives of our friends, family and neighbors and this includes mothers who have faced different challenges in pregnancy."

A 2005 study published by the Guttmacher Institute, asked American women to list the different reasons they decided to abort their pre-born baby. Most provided more than one response. 73 % listed financial concerns whether married or single. 74% we're concerned that having a baby would significantly change their life including loss of education and career opportunities. Almost half had relationship challenges. 14% of their partners wanted the abortion. 13% in the survey expressed concerns about the possible health of the future baby. 1% we're concerned about their own health.

<https://www.guttmacher.org/sites/default/files/pdfs/pubs/psrh/full/3711005.pdf>

Dr. Saba states the following: "One of my patients, a single woman in her 30s with a low paying job discovered she was pregnant. Some of her friends encouraged her to abort because of her limited financial resources and another young child she was already caring for. Her boyfriend threatened to leave the relationship if she didn't proceed with the abortion. Despite financial pressures, the father's refusal to help and risk of losing the relationship, she decided to continue her pregnancy and recently delivered a beautiful daughter who is her joy."

In the book " Made to Live" madetolivel.com, the story of Dr. Saba's daughter Jessica highlights the challenges parents face bringing into the world children with possible health disabilities.

MADE
TO
LIVE

A Physician's Journey
to Save Life

PAUL SABA M.D.



Dr. Paul Saba M.D. author of book "Made to Live"



Women wanting to birth and care for their babies and children would benefit from more medical, psychological, financial (including career opportunities), educational and social support. "

Dr. Paul Saba

Prior to her birth at 20 and 24 weeks, ultrasounds demonstrated that Jessica had a severe cardiac abnormality. Dr. Saba and his wife Marisa were also informed that Jessica was probably a Down's baby. They were encouraged to consider abortion which they refused. Marisa stated that if God allowed them a child with a disability, He would also equip them to take care of our child. She was even asked how aggressively the medical team should intervene after the birth of Jessica if there were problems regarding her survival. His wife courageously answered "I've done everything to bring the baby to this point, I expect you to do everything to save my

baby." madetolive.com

Because of amazing medical care and support at the Montreal Children's hospital, today Jessica is a beautiful, bright, and articulate 13 year old teenager, according to Dr. Saba.

Abortion goes against the Judeo-Christian ethics of medicine based on the Good Samaritan model. This has been the bedrock of modern medicine for centuries. The Good Samaritan model ensures medical care and support for life no matter what the cost. This was enshrined in the teachings of Sir William Osler who is considered as the father of modern medicine and medical ethics. He was a graduate and Professor of Medicine of McGill University and the Montreal General Hospital. He also helped found Johns Hopkins Medical School. Dr. Osler's story and medical philosophy is further detailed in Dr. Saba's book "Made to Live."

One of the arguments utilized by abortion advocates are the financial costs that poorer women cannot afford during or after birthing their babies and the extra economic costs to governments.

According to a 2015 US congressional policy report, The Effect of Abortion on the Black Community, over 19 million black babies had been aborted since the Roe v. Wade decision in 1973 with the majority of abortion facilities within minority communities contributing to the high rate that black women obtain abortions.

<https://www.congress.gov/115/meeting/house/106562/witnesses/HHRG-115-JU10-Wstate-ParkerS-20171101-SD001.pdf>

In a 1996 study it was estimated that for poor women in the United States who are often covered by Medicaid programs, there would be an additional \$1.2 billion savings annually for the government if these women did not bring into the world the babies of their unplanned births

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8101771/#pone.0250692.ref044>

Another study published in 2003 estimated that in the United States, abortions would save \$4

for every dollar spent on low-income women for prenatal care, delivery services, and medical assistance over a two year period. <https://pubmed.ncbi.nlm.nih.gov/12667113/>.

Dr. Saba states: "Economic savings should not be used as an argument to prevent pregnant moms who want their children from giving birth. Furthermore, mothers who are in financial distress should not feel pressured to abort their offspring. Companies willing to pay for abortion services including transportation costs, should also consider paying for birth, parental leave and child care expenses for mothers wanting to keep their babies. These same companies should also provide fair and reasonable salaries so that mothers can adequately provide for their families. Governments must also step up and help. Women wanting to birth and care for their babies and children would benefit from more medical, psychological, financial (including career opportunities), educational and social support. They should and must be treated fairly and equitably."

"Corporations and governments should invest in life rather than just promote abortions." It has been estimated that to date over 63 million babies lives have been lost in the United States in the 50 years since the Roe v Wade decision. <https://nrlchapters.org/saus2022report/> If the same percentage of babies is calculated using the American experience, approximately 1.5 billion children lives have been lost worldwide.

The long term economic, social and healthcare costs of lost lives include a depleted workforce of nurses, teachers and other essential workers who could have contributed to a more robust and sustainable society.

According to Dr. Saba, "We need to value babies, children and future adults because as my daughter Jessica inscribed above the family portrait she painted at age seven, we are "Made to Live."

Dr. Paul Saba graduated from McGill University Medical School and is currently a family physician practicing in Montreal. He has trained and worked in Canada, the United States and internationally in underdeveloped countries. He is a dual American and Canadian citizen. He is the co-founder of the Coalition of Physicians for Social Justice and is the author of "Made to Live" madetolive.com

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