

FALL 2017

FAMILY

north carolina

Families Fighting Back

The unsung
heroes of the
opioid crisis

A Doctor's Right To Kill
Duke Physician Resists Cultural Shift
on Assisted Suicide

Happily Ever After
Three Couples Share Their Secrets
To A Happy Marriage

ISBN 0-9785025-1-5



9 780978 502515

Dig Deeper!

The wonderful thing about NC Family's lovely print magazine is the ability to tuck it into a bag or take it along to an appointment, on a trip, or to the car pool line. Something about holding the articles in your hands is advantageous when you really want to dig deep into a subject. You can underline, highlight or dog-ear the pages, and it's easy to pass along to a friend or family member.

As Americans who have a passion for influencing our own communities and who understand the importance of good public policy, we need to make it a practice to dig deep on topics and continue to learn every day. This means turning off the "talking points" of television and radio, and educating ourselves on the topics that everyone is talking about—and at times, even more importantly, those topics that mainstream media are talking about!

President Abraham Lincoln is the consummate example of a lifelong learner. Growing up desperately poor on a small farm in rural Indiana, he received less than 12 months of formal education in his lifetime. Instead of college, he studied borrowed law books, rereading some over and over before sitting for the bar exam. He passed on the first try.

But his education never stopped. While on the road as a circuit lawyer, he spent quiet evenings and weekends reading and in deep study.

Life on the circuit provided Lincoln the time and space he needed to remedy the "want of education" he regretted all his life. During his nights and weekends on the circuit, in the absence of domestic interruptions, he taught himself geometry, [...] astronomy, political economy, and philosophy that his fellow lawyers had learned in college. "Life was to him a school," fellow circuit rider Leonard Swett observed, "and he was always studying and mastering every subject which came before him."

—*Team of Rivals: The Political Genius of Abraham Lincoln*,
by Doris Kearns Goodwin

On that note, we plunge into a couple of deep topics in this edition of *Family North Carolina*:

Our staff of writers and researchers teamed up to bring you a family perspective on the crushing opioid crisis that has drawn so much attention lately—and rightly so! It's a scourge on our nation, and several North Carolina cities have been hit especially hard. We found a local mom and son who were willing to talk to us about their journey through the dark alley of opioid abuse, and they offer help and hope to all of us who fear that our family and friends might fall into this insidious trap.

In addition, we are privileged to have obtained the transcript of a reasoned and passionate argument against the rising trend of physician-assisted suicide. Dr. Farr Curlin, a fellow Christian, medical doctor, and professor at Duke University, presented his arguments in a public—and at times hostile—debate on Duke's campus.

Finally, we have a bit of fun, as three couples offer funny stories and friendly advice on their marriages. Get to know some of your fellow NC Family supporters in a new way, and perhaps pick up a few tips on how to make your own marriage (or future marriage) more rich and happy.

Get digging! 🛠️

Traci DeVette Griggs is Director of Communications for the North Carolina Family Policy Council and is Editor of Family North Carolina.

FAMILY

north carolina

Fall 2017

Vol. 12, No. 2
ISSN 1935-7761
ISBN 0-9785025-1-5

Editor

Traci DeVette Griggs

Associate Editors

Brittany Farrell
Jake Sipe

Design

Courtney Volker

Circulation

Catherine Strickland

Contributors

Eileen Brown, Brittany Farrell, Rachel Lee Brady, LouRae Holt, Thomas Graham, Traci Griggs, Jere Royall, John Rustin, Jake Sipe, Catherine Strickland

President

John L. Rustin

Family North Carolina is a publication of the North Carolina Family Policy Council.

The North Carolina Family Policy Council is an independent, nonpartisan, nonprofit research and education organization organized in 1991 and recognized for tax-deductible giving by the federal government. *Family North Carolina* is a registered trademark of the North Carolina Family Policy Council. Copyright © North Carolina Family Policy Council. All rights reserved.

Internet

Visit us on the Internet at ncfamily.org, where you can read selected stories from this issue, including endnotes. Publication of website addresses of other organizations featured in our stories does not constitute endorsement by the North Carolina Family Policy Council of those groups or the contents of those sites.

Subscriptions

If you do not already receive *Family North Carolina* magazine, you can request a free one-year subscription by: visiting our website at ncfamily.org; calling our offices at 919.807.0800; or sending a written request to NC Family at: PO. Box 20607, Raleigh, NC, 27619.



articles

4 Families Fighting Back

An opioid epidemic is raging, and the battle is being fought not on faraway dark streets and alleys, but in our own neighborhoods and, in many cases, our own families. How can we all play a role in safeguarding our family and friends, and what can we do when we find that someone we love has been pulled under by this insidious and rampant plague?

14 Happily Ever After

We've all heard that marriage is hard work. But shouldn't it also be fun and romantic and adventurous and deeply satisfying? We bring you insights from three happily married couples. Their answers about what leads to a happy and long marriage may surprise you.

18 Q & A

Our *Family Policy Matters* radio show/podcast brings a North Carolina angle to national events! In this edition of *Family North Carolina*, we feature an excerpt of an interview with Brad Wilcox regarding the cost of putting the baby carriage before marriage. We feature an interview by Ryan Anderson with The Heritage Foundation on how to speak sense to an angry culture. And Family Research Council's Dr. Kenyn Cureton helps NC Family debut a new monthly "Focus on Faith" edition of *Family Policy Matters* with a conversation on how pastors can get involved in influencing public policy.

20 A Doctor's Right To Kill

Dr. Farr Curlin, a Duke University physician made a very public stand against physician-assisted suicide in a debate on Duke's campus. NC Family's Rachel Lee Brady was there: "I walked away wondering if anyone in the room had ever heard a case for life as masterfully presented as that made by Dr. Curlin that evening, and in an atmosphere that seemed to me much like a lion's den." Read his defense of life.



feature

departments

at issue 2

About this magazine

numbers 7

Stats and Infographics

etcetera 11

Quotes, quips and other items of interest

front lines 12

NC Family in action

perspective 23



18



20

14






Families Fighting Back

“Spewing profanity, our twenty-year-old son, Ethan, stormed out of our house on Mother's Day of 2014. Having confronted him with illegal drug activity we suspected from texts on his phone, he decided to leave the comforts of our home on foot, walking down the street to we knew not where.”

Ethan's mom, Shannon, remembers, “For our family's peace of mind and to feel safer, we had the door locks changed. We had nightmares of drug dealers breaking in to shoot us. The two younger children still at home had their own set of fears.” Little did Shannon know at that time, but hope was on a distant horizon.

This nightmare, experienced by a church-attending, small town North Carolina family, is being replayed in rapidly-growing numbers of families all across our state and nation. An opioid epidemic is raging, and the battle is being fought not on faraway dark streets and alleys, but in our own neighborhoods and, in many cases, our own families. We have read many stories about how governments and police departments are grappling with this epidemic, but how can parents and families play a role in safeguarding our family and friends, and what can we do when we find that someone we love has been pulled under by this insidious and rampant plague?



The unsung heroes of the opioid crisis

North Carolina has been hit especially hard. According to the Centers for Disease Control, four North Carolina cities—Wilmington, Hickory, Jacksonville, and Fayetteville—rank in the top 20 cities nationwide for opioid abuse. Wilmington has the highest opioid abuse rate in the nation with 11.6 percent of the city’s citizens reportedly abusing opioids! In Wake County, home of the state capital, EMS officials answer two to three overdose-related calls a day and up to ten calls per day on weekends.

After Ethan left home on that Mother’s Day, Shannon remembers they did not know day-to-day whether he was dead or alive. “We would ride by his workplace and peer in the window hoping to get a glimpse of him to know he was okay. He was mad at us when we told him the door locks had been changed, and swore he would never be back home.” As statistics show, Shannon had good reason to be frightened for her son’s life.

According to the State Center for Health Statistics, four North Carolina residents die every day from drug and medication overdoses. The number of Americans who died of overdoses in 2015 (52,000) easily surpassed the death rates from gun homicide and car accidents. *(See graphics on page 7.)*

If They're Legal, They Must Be Safe

Opioids are an essential tool for suppressing pain and are freely prescribed by physicians, hospitals and even veterinarians. Quite often, young people looking for “party drugs” scavenge the family’s medicine cabinet and grab up unused pain meds, thinking since they are legal, they are safe. It’s not uncommon for people in these circumstances to develop an addiction that leads to abusing legal prescription opioids like morphine, oxycodone, hydrocodone and fentanyl, which is said to be 80 to 100 times more potent than morphine. These addictions end in death all too often, with half of all opioid overdose deaths from prescription drugs. Heroin is often the fallback drug for those who can no longer obtain prescription opioids. As an illegal drug available only on the street, it is completely unregulated or safety tested.

Shannon’s family doesn’t need the statistics to tell them what this epidemic is all about. They have lived it. Their son, Ethan, spent years caught in the middle of this crisis, but he did not become an angry, jobless, college drop-out drug addict overnight. It developed gradually with warning signs that were easy to dismiss. Shannon remembers that her son’s early signs of drug use were related to marijuana. However, when asked, he assured his parents there was nothing to worry about.

Shannon recalls: “Rumors that he was smoking pot with fellow co-workers after work late at night devastated us. And when we confronted him with it, he was outraged that we would believe the rumors and not him. Turned out the rumors were true. Shortly thereafter, his first arrest was for possession of marijuana, which almost cost him his college admission. But in the end, it didn’t matter. He had withdrawn from college by Thanksgiving of that year.”

Vulnerability of Adolescents

While the opioid epidemic is in no way isolated to the young, changing hormones, a developing brain, and the angst of adolescence leave young people more susceptible to addiction. The National Institute on Drug Abuse explains that “the adolescent brain is often likened to a car with a fully functioning gas pedal

(the reward system) but weak brakes (the prefrontal cortex).” In other words, the areas of the brain that process feelings of reward are fully developed; however, the part of the brain that processes decision-making is not fully developed typically until the mid-twenties. Adolescents may want a quick reward or retreat from the stresses of young adulthood, but they are not fully developed enough to understand the great costs of their poor decisions. Add the availability of opioids and peer pressure to the mix, and it’s easy to understand how opioids pose a grave threat.

“Everyone is doing something and you just start doing it too, thinking it will be okay,” Ethan explained. “This is not who I was raised to be, but insecurities and trying to forget things and feel better about myself is why I was using in the first place. I wanted an escape. The thing that sticks out most is how, when I smoked [weed for the first time], it was almost like instantly, I was comfortable in my own skin. For the first time, I felt free. Little did I know that this temporary facade was only masking over some deep-rooted problems that no drug was going to fix.”

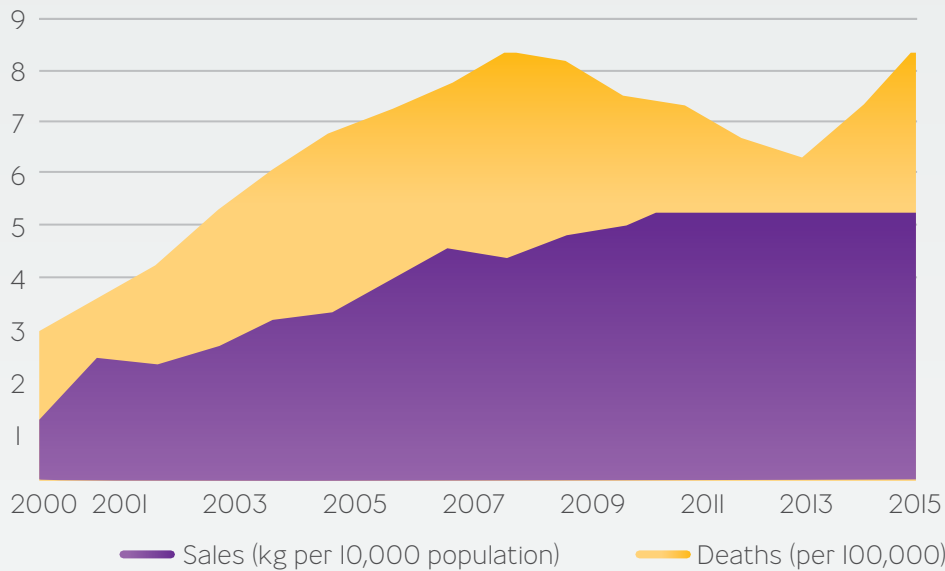
Why The Spike In Opioid Abuse?

The National Institute on Drug Abuse cites several factors for the increase in prescription opioid abuse, including: “drastic increases” in drug prescriptions (written and dispensed); “social acceptability” of using prescription drugs; and “aggressive marketing” of drugs by the pharmaceutical industry. Meanwhile, the Centers for Disease Control attributes spikes in heroin use to: relatively low price (compared to prescription opioids); and increased availability. These last factors are driven by a deluge of heroin pouring into our country. Since 2008, the amount of heroin confiscated from those trying to cross into the U.S. via our southwest border has more than quadrupled.

The Signs of Abuse

The Mayo Clinic provides a host of signs to look for if you suspect someone is suffering from opioid abuse. Nausea, slowed breathing rate, drowsiness, confusion, and poor coordination are all bodily signs that a person may be suffering from addiction. Behaviors to watch

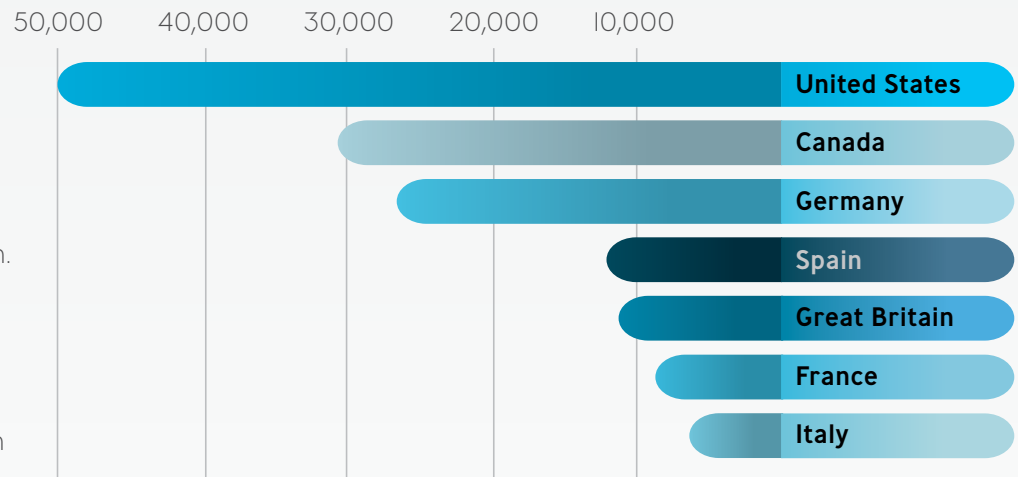
Prescription Opioid Analgesic Sales vs. Deaths North Carolina 2000-2015



In 2015, North Carolina drug overdose death totals jumped dramatically with **738** deaths caused by prescription opioids (an 884 percent increase since 2010), **363** deaths caused by heroin, and **291** deaths caused by cocaine.

Source: N.C. State Center for Health Statistics, Vital Statistics-Deaths, 2000-2015. DEA ARCOS data, North Carolina, 2000-2015. Analysis by Injury Epidemiology and Surveillance Unit.

Americans Consume More Prescription Opioids Than Any Other Country



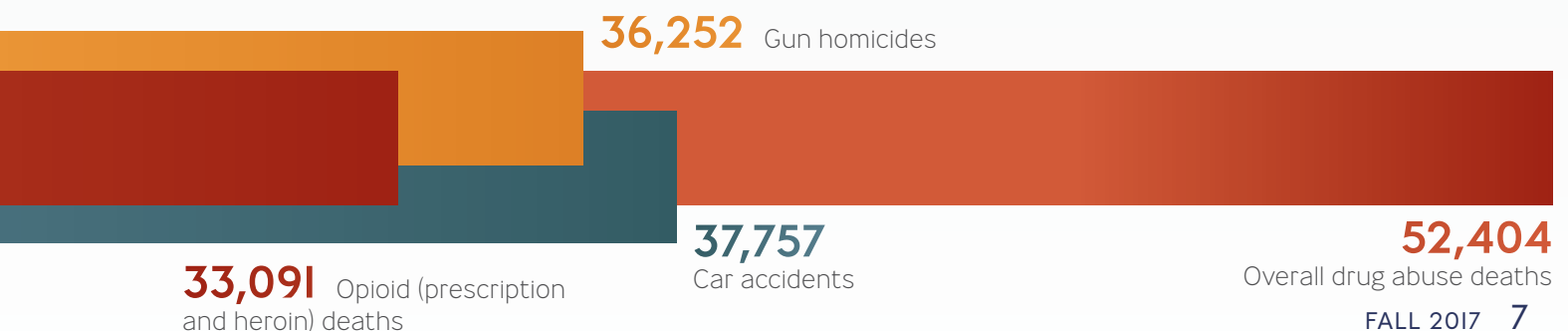
“So consider the amount of standard daily doses of opioids consumed in Japan. And then double it. And then double it again. And then double it again. And then double it again. And then double it a fifth time. That would make Japan No. 2 in the world, behind the United States.” (Japan doesn’t even make the top 25.)

—Stanford drug policy expert Keith Humphreys

Standard daily opioid dose for every 1 million people

Source: United Nations International Narcotics Control Board
Credit: Sarah Frostenson

Drug Overdose Leading Cause of Accidental Deaths In U.S.



out for include stealing, taking higher doses of medication than prescribed, excessive mood swings, poor decision-making, seeking prescriptions from more than one doctor, and “losing” prescriptions so that more have to be written.

Shannon said lying was one of the biggest red flags in their family’s experience. She remembers finding drug paraphernalia as she and her husband helped unpack Ethan at college. They threw it away, but the pit in their stomachs only grew deeper when he tested positive for drugs during one of his weekend trips home. She remembers, “Claiming the positive test was from ‘secondhand smoke’ at a party he had attended, gullible us decided to trust him once again. Of course we now know it was all just a ‘smokescreen’ for a growing addiction that he was not going to be able to control.”

‘I’m going to get right and do good and stop being miserable.’ And in the next minute, the memory of the high or of a good time gets in my head and I was out the door with keys in hand and money to go buy drugs again. I really began to experiment with multiple other types of drugs and it quickly spiraled out of control. The sick thing is that, for an addict, this is the common denominator. We will try a drug that will temporarily seem to fix everything. But after a while, we are always searching for more or some other fix.”

“The wedge was huge between my husband and me on how to ‘discipline’ an 18-year-old disobeying every rule we had ever established,” recalls Shannon. “Keg parties when we were out of town, taking the car when privileges had been revoked, and finding drugs in our car and

off of us was when we admitted to our church family that we were struggling mightily with a prodigal child. There was no shame or finger-pointing, only much care and concern and prayers.”

The angst over how to deal with an addicted loved one is compounded because many addicts reject the very help they need and profess to want. “This is how sick the disease of addiction can be,” Ethan says. “You can be calling out for help, but when it comes, you simply let it go by the wayside without a second thought.”

After subsequent arrests with multiple felony charges Ethan admitted, “I knew I needed help. I said to myself, ‘I’m miserable. I’m about to kill myself. I’m broke.’”

There Is Hope

One day Shannon started to see Ethan’s attitude change. “He started coming by the house again wanting to talk. He asked to stay over one Saturday night. It broke our hearts to tell him no and have him ride off not knowing if we would see him alive again. But the next day after church, he was waiting at our house when we got home. We talked all afternoon and gave ground rules again for living at home. He agreed to them and we let him stay on the couch, kicking ourselves that we were so weak and stupid, but loving our son and hoping against hope that this time was different. It was. He agreed to move out of where he was living with a drug dealer across town. We prayed fervently as he went to pick up his things and see that roommate one last time.”

Shannon and her husband found several options for help and presented them to their son. Ethan got recommendations from his lawyer, as well as from his family doctor and their pastor who had experience working

After coming to grips with the fact that someone you know is mired in opioid abuse, the next steps are not for the faint of heart.

Seeking Help

After coming to grips with the fact that someone you know is mired in opioid abuse, the next steps are not for the faint of heart. Despite the addict’s claims that he or she can stop whenever they want, professional help is essential.

Ethan remembers: “I had sworn off all alcohol and drugs before I went to college. I told myself I was going to be extremely focused and do well. But the need for drugs takes over the mind. I could wake up one morning and say to myself,

home were not something we knew how to handle. Who does? Where is the guidebook for this kind of behavior?” For the next year and a half, Shannon and her husband found themselves asking the same question over and over, “Lord, what do we do now?” She says they “had no clue how to respond appropriately, if there even was such a thing.”

They eventually found relief in their community and their faith. As parents, she says, “One thing that lifted a huge burden

with and ministering to drug addicts. This is an important step for finding a good program, as not all are created equal and some are scams. There are a wide variety of good options available to fit differing needs: inpatient or outpatient; 30-day, 90-day or year-long rehabilitation or residential treatments; some are faith-based; some offer employment opportunities; some are expensive, others are free. The Substance Abuse and Mental Health Services Administration (SAMHSA) also provides digital toolkits for opioid overdose survivors and their family members on how to seek assistance.

"We made him make the phone calls to decide on a rehab location when he agreed to go at the urging of his lawyer," says Shannon. "Ethan believed he needed to go somewhere far away or else he would be easily lured back in by acquaintances who lived close by. In September, we drove him to a 30-day rehab facility in Nashville, Tennessee where he was introduced to the 12-step program of Alcoholics Anonymous and Narcotics Anonymous."

The philosophy of 12-step programs works on the premise that addiction is a disease with three components: mental, physical, and spiritual. The addict is viewed as dealing with a physical allergy of the body, a mental obsession of the mind and an underlying spiritual malady of the heart. Unless these three aspects of the condition are treated, they contend, the individual will not be able to escape addiction.

While at the rehab facility in Tennessee, Ethan found the key to his recovery: "I found God in the most intense way that I can imagine. I already knew God, or so I thought, but this was different. There was so much shame, guilt and anger that was separating me from God. One

sunny afternoon, I stumbled into the chapel there. I probably had a total of 20 days sober or so. I was feeling somewhat physically better, but I was ready to crawl out of my skin. I was so emotionally and mentally uncomfortable that it was bringing me to tears almost at every moment. I dropped to my knees, and in that moment I called out to God. I told Him that I didn't want to live like this anymore. I was miserable, and I needed His help. I didn't know what else to say. I hadn't said much to anybody up unto this point. I sat there for a few minutes crying on the floor, and God answered me."

In retrospect, Shannon says an incident from Ethan's childhood may have been an emotional trigger for his addiction. He felt immense guilt at eight years old over not protecting his little brother from a harmful incident. His first steps of recovery involved forgiving himself and others and accepting God's forgiveness. "We heard almost immediately from his counselor that Ethan revealed his struggle with what happened and anger at the perpetrator. Since then, we have read, and other counselors have confirmed, that childhood trauma can be a precipitating factor in addiction later in life."

"I believe 100 percent," Ethan says, "no doubt in my mind that faith was the number one thing that led to my ability to be able to recover."

Following his time in the Tennessee 30-day rehabilitation program, Ethan successfully completed a 90-day residential treatment at a facility in southern California and then transitioned into a sober living home. Now, at 23, employed full time and living on his own, he is on the road to full recovery, having been clean and sober for three years.

"I have big motivation not to go back. I don't want to go back to nothing," Ethan says. But "I can't live in fear (of relapse), even healthy fear. Each day I have to be honest with myself about who I am. I have found a routine that works for me. I don't put myself in bad situations. I have cut off people who aren't on the same page."

For Shannon and her family, the Al-Anon 12-step program for loved ones of addicts, provided hope and healing. "I looked up local meetings to attend as soon as we got home and cried at every one the first few weeks. To know that I was not alone in my struggle with loving an addict was a balm to my soul."



Climbing out of opioid abuse can be a harrowing, lifelong struggle. This makes prevention the best and most effective way to protect against the consequences of drug abuse.

Guarding Loved Ones Against Opioid Addiction

Despite a recent increase in funding for rehabilitation programs, 40 to 60 percent of addicts relapse. Climbing out of opioid abuse can be a harrowing, lifelong struggle. This makes prevention the best and most effective way to protect against the consequences of drug abuse.

While there is no silver bullet that will guarantee that someone will be able to resist the lure of drug use, parents and family members can take practical steps toward safeguarding loved ones who may be vulnerable. Experts across the board stress that consistent, open and honest parent-child communication is the biggest key to helping young people avoid drug use and preventing it from becoming an irreversible or fatal problem. The Partnership for Drug-Free Kids is a good place to start. It has tool kits, information sheets, videos, scripts, and other resources for parents, adolescents, teachers, and law enforcement. Among their tips are:

- Always communicate from a place of love, even during tough or serious conversations.
- Clearly communicate the risks of alcohol and drug use, the temptations your

children are likely to face, and your disapproval of alcohol or drug use.

- Set and enforce clear “no use” rules, balancing positive and negative reinforcement.
- Look for natural, everyday teachable moments to talk about drinking and drugs, like movies and news stories.
- Frequently talk and listen to your children about how things are going in their lives.
- Monitor friends, school performance and activities, and the moods of your child for changes.
- Keep prescription medicines secure and keep track of their quantities; then dispose of unused prescriptions promptly and properly.

Ultimately, at its core, the opioid crisis is a symptom of human brokenness. Too many in our culture turn to fleeting solutions to escape from pain and suffering or to fill the genuine human ache that can only be filled by God, faith, love, and healthy relationships with others. As parents and members of our local communities, we need to continually reinforce the inherent dignity, joy and fulfillment that comes from being created uniquely and intentionally in the image of Almighty God. Remind your children of their intrinsic value on a daily basis. Remind them of what

is right and good. Remind them that real friends will build them up and support them in making wise decisions. Remind them that escapism is not a solution to challenges or disappointments.

As a parent who has seen this beast of an epidemic in all of its gory detail, Shannon says there is no magic formula that will guarantee success in protecting your loved ones from opioid abuse or in walking them out of it successfully. Her heart aches for the many parents who lost a child to this horrendous epidemic and she understands how close she came to losing her son. “I didn’t want to have a prodigal child. I planned to do everything ‘right’ and my family would turn out perfectly. Before this trial, I would have pointed my finger at others’ failings and pointed out what they did wrong as if I knew! God has filled our hearts with compassion for others who struggle and given us a desire to be available to parents in similar situations. We are so thankful God has given us a success story for now. But it is not because of anything we did. We did it all wrong. We didn’t know what we were doing. We were overwhelmed with doubts and insecurities. We had to cling to God and depend on Him like no other time in our life. It’s the only way to get through it.” 🙏

This article was a joint labor of love by NC Family writers, Rachel Lee Brady, Brittany Farrell, LouRae Holt, and Traci DeVette Griggs. Our sincerest gratitude to the North Carolina mother and son who were willing to relive their painful experiences in order to provide their personal account for this story. For a footnoted version of this article, please visit www.ncfamily.org.

“In all of this litigation and debate, this Department of Justice will never allow this secular government of ours to demand that sincere religious beliefs be abandoned. We will not require American citizens to give intellectual assent to doctrines that are contrary to their religious beliefs. And they must be allowed to exercise those beliefs as the First Amendment guarantees.”

—U.S. Attorney General Jeff Sessions

“Iceland isn’t actually eliminating Down Syndrome. They’re just killing everybody that has it. Big difference.”

—Patricia Heaton tweet on August 14

“If you’re thinking about getting a divorce, give it a year - there’s a 50 percent chance that your feelings will change quite dramatically.”

—Writer Helen Metella in her article, “Half of those considering divorce change their feelings within a year.”

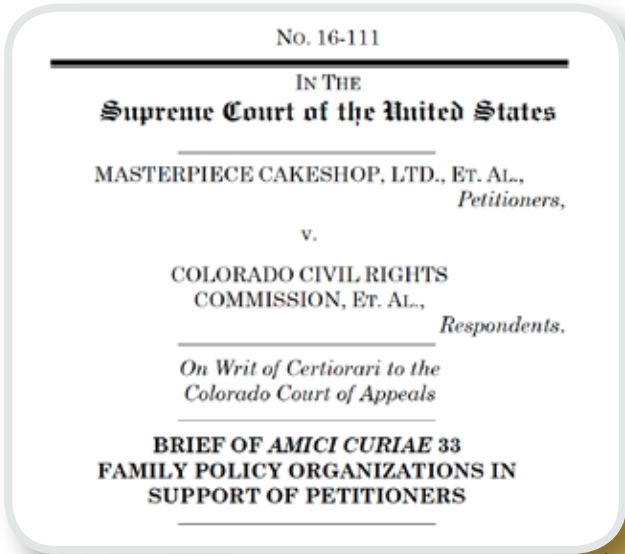
“Marriage is foremost a vocation. Two people are called together to fulfill a mission that God has given them. Marriage is a spiritual reality. That is to say, a man and a woman come together for life, not just because they experience deep love for each other, but because they believe that God loves each of them with an infinite love and has called them to each other to be living witnesses of that love. To love is to embody God's infinite love in a faithful communion with another human being.”

—Henri J.M. Nouwen, *Here and Now: Living in the Spirit*

If we say we love God, but hate others, we are liars. For we cannot love God, whom we have not seen, if we do not love others, whom we have seen.

– The Holy Bible, I John 4:20





Opposing Casino “Game Nights”

When a bill made its way through the NC General Assembly to essentially legalize Las Vegas style casino gambling across the state, NC Family fought hard against the bill. When it was apparent the bill would pass, we worked with key legislators to get important limitations added prior to its passage. Gov. Cooper then vetoed the bill, and, as of this writing, his veto has not been overridden.



Supporting Vital Court Cases

NC Family has thrown its support behind critical court cases at our nation’s highest level by signing on to three amicus (“friend-of-the-court”) briefs to the U.S.

Supreme Court: *Masterpiece Cakeshop* in support of religious liberty; *Kenosha v. Whitaker*, regarding the definition of “sex,” and bathroom access for students identifying as transgender; and *Christie v. NCAA* in support of a federal law that prohibits state-sponsored gambling and other betting on sporting events.

Pictured are Jake Sipe, John Rustin, Jere Royall





Protecting NC from a Massive Gambling Casino

After hearing the concerns of NC Family, North Carolina Congressman Robert Pittenger introduced an amended version of the “Lumbee Recognition Act” in the U.S. House to add language expressly prohibiting the Lumbee tribe from conducting gambling activities in the state if the bill were to become law. “This is not about gaming. My bill specifically prohibits the Lumbee Tribe from conducting gaming activities,” said Rep. Pittenger in testimony before the House Natural Resources Subcommittee on Indian, Insular, and Alaska Native Affairs on Sept. 26, 2017.

Partnering with Valued Allies Across NC

Church leaders and elected officials from across Eastern NC gathered at the God & Country Christian Alliance’s annual “God & Country Banquet” in Havelock in mid-October, where NC Family was recognized for our tireless efforts to defend and promote the sanctity of human life, religious liberty, and the family. NC Family deeply values our partnership with like-minded individuals and organizations across the state.



Standing for Personal Privacy and Religious Liberty

NC Family worked throughout the 2017 legislative session to hold the line and defend important measures that protect the privacy and dignity of women and children in public bathrooms and other intimate facilities across the state. Although NC’s House Bill 2 was repealed, it was replaced with another bill that maintained many of the fundamental aspects of privacy and religious liberty protection.

Happily Ever After

Three couples
share their
secrets to a
happy marriage



W

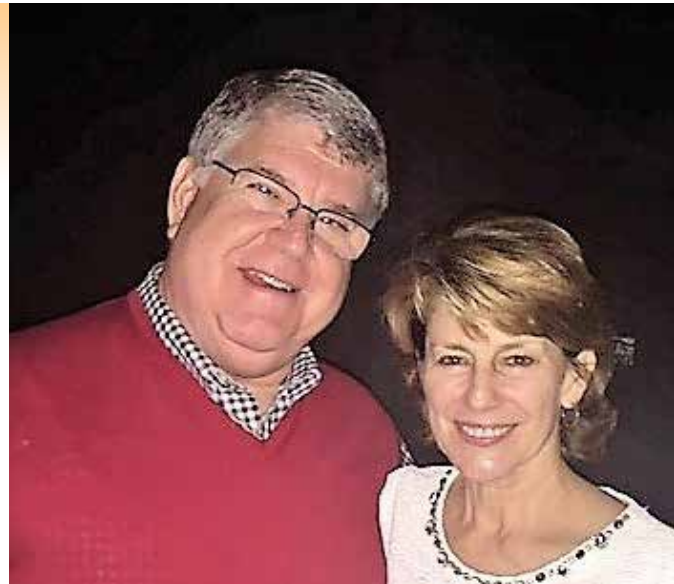
e've all heard that marriage is hard work. But what does that mean exactly? Shouldn't it also be fun and romantic and adventurous and deeply satisfying? We sent a long list of probing questions to three couples whose friends attest to their strong relationship with each other and with God. Their answers to basic questions about what leads to a happy and long marriage may surprise you. They are not necessarily the stuff of fairy tales but through it all, these couples are living proof that there really can be a "happily ever after."

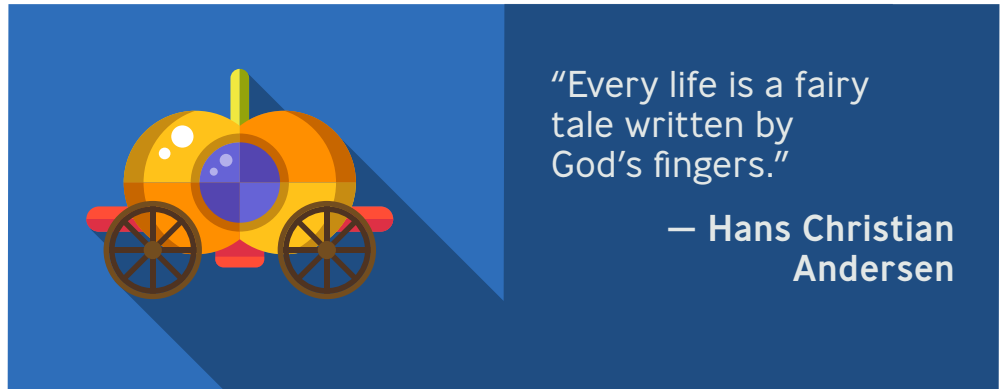
Herb and Martha— Duke Ormond

Greenville, NC

Married: 1985

Children: Rose (29),
Catherine (27),
Anna (24)
and 1 grandchild





“Every life is a fairy tale written by God’s fingers.”

— Hans Christian Andersen

Q: How important is it to be friends with your spouse?

MARTHA-DUKE: We were very romantic and in love when we got married; we weren't the best of friends, and our friendship has grown.

HERB: I think it is important to learn to not just do your own thing, but learn to participate to some significant degree with something the other person likes. Martha-Duke loves birds; in my natural flesh, I couldn't care less about birds, but I have found in the last three, four, five years, it's fun to just sit and watch birds at our birdfeeder. It's something fun to do together. And then on the flip side of that, Martha-Duke did not grow up around boats. I love boats. And although she didn't fall in love with water skiing, my sweet wife learned how to drive a boat, and to this day, she's the person I prefer taking me skiing.

Q: What is your philosophy about how to spend money in your house? Do you agree on this?

MARTHA-DUKE: We were not the same on money at all. We were not even closely on the same page. But one thing that partners begin to understand is what each other's strengths are, and the financial world is definitely one of Herb's strengths.

HERB: I can be a black and white, cut and dried kind of person and so [...] you've got to allow some freedom and some things that don't necessarily make sense to me, but are important to her; you've got to make room for that. And so, that's one of the lessons that we learned.

Q: What are some specific ways you've found to make finances less of an issue in your marriage?

HERB: We learned this our very first year of marriage and it greatly reduced our conflict: We learned to live by the envelope system for grocery money and spending money and eating out money. We figured out our budget and how much money went in each envelope, so when the envelope's empty, you stop doing it. Thirty-two years later and my friends all laugh about it. We give ourselves the same allowance. It's in an envelope, and you can spend it on whatever the heck you want to, but when it's gone, it's gone. And that has eliminated just tons and tons of disagreements.

MARTHA-DUKE: One financial principle: You have to agree on the amount (\$50, \$100 or \$200), but when it comes to using your "together money" like on a credit card, set a limit so that you never blindsides your partner with a big charge that they didn't know about. For instance, anything over \$50, get in touch with each other, and say, "I would like to spend \$50 for such and such. Is that OK with you?"

HERB: And I've seen, in talking to other couples where they don't have that little parameter set, they end up getting blindsided, which ends up in arguments. And money's certainly one of the things people argue about the most.

Q: Any other practical little bits of advice you'd like to share with other couples?

HERB: One of the other principles that we have lived by—or when we didn't, we got in trouble—is that after 10:00 at night, do not discuss anything controversial, heavy, serious, because arguments happen when you get tired. You are going to say things you regret.

Q: What is the character trait that you most respect about your spouse?

KARA: I think the character trait that I most appreciate about Rhett is his heart for serving, not coming home from work and kicking up his legs and watching TV or the news. He is right there. He's 100 percent parent when he's home and never assumes anything different. We are a team. [Kara says Rhett's 100 percent parenting style is even more of a blessing since they decided to adopt three children (all siblings) in 2015. Kara also left her job as a professional counselor to be a full-time mom.] And of course, aside from his godliness is his sense of humor. We'd just spend a lot of time laughing. We just have a good time.

RHETT: I'd say initially her beauty, like she's really pretty, but then once I got to know her, it was her kindness toward others. I would notice that Kara, even though she was the student body president, would hang out with people that couldn't bolster her, or kind of like what Jesus was saying when he said don't only invite people to your party who can invite you back.

Rhett and Kara Davis

Charlotte, NC

Married: 2003

Children: Eden (9),
Kadence (8), Skyland (8),
Serenity (7), Shepherd (5),
Brecken (4)



Q: What's a mistake you made or almost made in your marriage that taught you a valuable lesson?

RHETT: My family was really enmeshed, so they weren't into the whole "Leave your father and mother and cleave to your wife" concept. My priority, they thought, should be them versus my new wife. So, that was a confusing time for me, and thankfully, Kara's work paid for 10 sessions of counseling, so we took advantage of it and went to a Christian there in Columbia.

KARA: And we would highly recommend [counseling]. I mean, we constantly recommend to engaged couples to get good premarital counseling.

RHETT: You don't want any surprises after you're married. You want that stuff to come out early, so you're on the same page.

Q: Any practical little bits of advice you'd like to share with other couples?

KARA: Don't major in the minors, which is constantly something I have to learn about, especially with children.

RHETT: Ask yourself: How important is this? Don't make a big deal out of something that's not really a big deal, because it's easy to blow something out of proportion.

Q: If you could write a note regarding marriage and send it to your younger self, what would it say?

KARA: Love is a choice. It can be an emotion, but as the Bible says, the heart is deceitful, and often our emotions are fickle [...] and I think I thought that's what love was when I was younger, that it had to be a feeling. I think choosing to love is a richer and more meaningful love. I just think it's an action. It's a choice.

RHETT: The definition of love I go back to is, to will the good of another. And that love is other-centered, whereas lust is me-centered, and God wants us to love other people. He never commands us to like people, which is more emotional, it's hard to control, but He does command us to choose the good of another.

Q: Any books you think are important for young couples to read?

KARA: *Five Love Languages* (by Dr. Gary Chapman). I think it's pretty valuable because your natural tendency is to give love the way you receive it. Rhett's love language is "words of encouragement." That's one of his that was not something I was taught necessarily, so I had to learn how to do that early in our marriage. And I think it's important to meet that person where they feel loved, rather than just focusing on the way you receive love and giving it that way.

RHETT: Another book I'd recommend is, *His Needs, Her Needs* (by Willard Harley, Jr.). We've found that to be a valuable identifier of needs and the way relationships work. Because you want your spouse's needs to be met by you. If they're not met by you, they'll be met by somebody else, and then that busts up the marriage.



"You are never too old to set another goal or to dream a new dream."

— C.S. Lewis

Q: What first attracted you to your spouse?

ANN: [Seven years into marriage and after both of us had committed our lives to Christ] I admitted to Bob that I had married him not because I loved him but because I thought he might well be the last person who would ask me.

BOB: And I had to confess to Ann that my own logic wasn't far from this. Our marriage was an amicable relationship but it wasn't any fun. Most of the marriages I had seen were "arrangements" where the partners put up with the other's faults more or less gracefully and made the best of things. I felt that way about ours, but at the time, I believe I was honestly being as good a marriage partner as I knew how to be. I just didn't understand what love was all about. Life together had developed into a sad sort of game where I tried to stay busy to avoid any kind of deep discussion with Ann.

Q: What was the pivotal point in your marriage?

BOB: I got my priorities straightened out and realized that my wife was God's ideal mate for me. What a revelation! My role was to be a supporter and an admirer of Ann. For me that was the turning point from which we had more enjoyment together—often, good old belly-laughing fun. It's wonderful!

Q: Any practical wisdom you'd like to share with other couples?

BOB: Looking back, we were both clueless when we got married. Two things kept us together. In our families, there was no such thing as divorce. So whatever happens we'll have to work it out somehow. We learned a lot from the sticky times, finally recognizing that we actually liked each other. The other was that we were both interested in making friends and learning new things. In our first year, we had bit parts in a couple of on-stage musicals, and we took a night school course in woodworking. We were building our own history, instead of relying on, "Well, the way we did it in MY family was..."

ANN: Finding something we could enjoy doing together was especially important. We have always been involved with other people wherever we've lived. Before coming to the Lord, it was playing bridge or going to the park. Then we found fellowship in couples' small groups, which we have done in all of the places we have lived. We both enjoy snorkeling, so many of our vacations together have been near beautiful coral reefs.




Bob and Ann Herrick

Cary, NC

Married: 1956

**Children: John (59),
David (58), Jane (54)**



"Once in a while, right in the middle of an ordinary life, love gives us a fairy tale."

— Author unknown

On the Air With ... Dr. Brad Wilcox, Senior Fellow at the Institute for Family Studies, "Millennial Success Sequence"



John Rustin: ...What do your years of research tell you the consequences of these decisions and actions are going to have ... on the children who are born into the homes of young unmarried parents, especially in the areas of health, education, finances, and other critical factors that are such an important part of future success?

Brad Wilcox: It's important for everyone to realize that when you put the baby carriage after marriage, you're much more likely to stay together as a family, and your kids are more likely to grow up in a stable married context. People have heard that one in two marriages end in divorce. Well, that's no longer true; it's closer to four in ten. And if you do things right—for instance, go to church together—your odds are down even more. So, I think people need to recognize that when it comes to raising up kids, that marriage provides the most security for the next generation. And that security is important, because kids are more likely to flourish when they have the financial support of their parents and the role modeling of their own father in the household.

... Ryan Anderson, Ph.D.

William E. Simon Senior Research Fellow at The Heritage Foundation, "Religious Liberty: Understanding the Arguments of the Other Side"



John Rustin: How do we restore respectful and fruitful dialogue in our personal and political discussions on these important topics, while at the same time not surrendering our fundamental beliefs?

Ryan Anderson: We do this by making good arguments that are accessible to the people we are speaking to. So, I don't make a theological argument. I make philosophical and physiological [arguments], using social science, using philosophy, using reason and evidence that a secularist could grasp, could understand. If I make a biblical argument to somebody who doesn't accept the authority of the Bible, it will not go very far. If I try to make arguments that other people can access and do it in a way that is friendly, that's civil. So I think, part of this is, how do we restore civility while also defending our views. It's simply by doing it; don't roll over, don't back down, don't mute yourself, don't censor yourself. But when you do speak, do it in a way that's intelligent and civil.

Radio Stations Airing *Family Policy Matters*

Belmont/Gastonia	WCGC 1270 AM	Sunday, 11:30 PM
Bennett/Asheboro	WYTR 88.1 FM	Saturday, 2:00 PM
Charlotte	WHVN 1240 AM WOGF 88.3 FM	Sunday, 11:30 AM Saturday, 3:45 PM
Charlotte/Harrisburg	WGAS 1420 AM	Saturday, 3:45 PM
Fayetteville	WCLN 107.3 FM	Saturday, 7:00 AM
Forest City	WWOL 780 AM	Wednesday, 8:45 AM
Greensboro/ Winston-Salem	WKEW 1400 AM WTRU 830 AM	Sunday, 9:30 AM Saturday, 6:00 AM
New Bern	WSTK 104.5 FM	Saturday, 3:15 PM
Newland	WECR 1130 AM	Saturday, 9:06 AM
Pisgah Forest	WGCR 720 AM	Saturday, 9:00 AM
Raleigh	WTRU 1030 AM	Saturday, 6:30 AM
Rocky Mount	WLQC 103.1 FM	Sunday, 11:00 PM
Salisbury	WOGF 93.3 FM	Saturday, 12:15 PM
Sanford	WLHC 103.1 FM	Sunday, 11:00 PM
Shallotte	WVCB 1410 AM	Wednesday, 10:05 AM Saturday, 4:30 PM
Taylorsville	WACB 860 AM	Wednesday, 5:00 PM
Troy	WJRM 1390 AM	Sunday, 7:30 AM
Wilmington	WZDG 88.5 FM	Sunday, 5:30 AM Sunday, 6:00 PM
Winston-Salem	WBFI 1550 AM WPOL 1340 AM WPIP 880 AM	Sunday, 4:10 PM Sunday, 9:30 AM Sunday, 5:00 PM

You may also stream *Family Policy Matters* online at www.ncfamily.org



John Rustin, NC Family President and Thomas Graham, NC Family Pastor Outreach Director.

We are excited to announce a new addition to the *Family Policy Matters* radio show and podcast! NC Family's Pastor Outreach Director Thomas Graham is hosting a once-per-month segment called "Focus on Faith." This new series will concentrate on the intersection of faith and cultural engagement by talking to pastors and other faith leaders about how they balance these two important responsibilities.

Thomas has lived in North Carolina for 25 years with more than 30 years experience as the senior pastor in interdenominational Evangelical churches. He is also a 12-year veteran of residential contracting and real estate brokerage.

You can learn more about Thomas and his work at NCFamily.org/churchleader. Once there, you can sign up to join a network of pastors and church leaders across North Carolina who are seeking to find the best way to combine their love for Christ and the Church with cultural engagement.



Family Policy Matters is a 15-minute weekly radio program featuring interviews with national, state, and local experts on a wide range of policy issues important to North Carolina families. *Family Policy Matters* airs each week on over 20 radio stations across North Carolina. You can listen and access a full transcript on the NC Family website at ncfamily.org.



... Dr. Kenyn Cureton, Vice President of Church Ministries at the Family Research Council, "Count The Cost Of Speaking Out"



Thomas Graham: What counsel or advice, Kenyn, would you care to offer both pastors and also members of their congregation about the cost that can come with our choosing to engage the culture?

Kenyn Cureton: Jesus told a parable about counting the cost and certainly choices have consequences. And so when a pastor or a church decide to choose that they're going to speak biblically about abortion and sexual anarchy and the loss of religious liberty and all these other issues, there's going to be pushbacks, sometimes from the community, but also from within the church. So count the cost. Know that it's going to happen. Know that you can possibly lose some church members over this. It will happen. But also know that when you take a firm stand on biblical truth, God will honor that. And my stand, [taken when I was pastor of a church], cost me some members. It also gained us some members. And God told Joshua over and over again in the first chapter of that book, "Be bold and courageous..." And I believe He honors us when we obey His word.

A Doctor's Right To Kill Duke Physician Resists The Cultural Shift on Assisted Suicide

written by:
Farr A. Curlin, M.D.



When I entered the auditorium at the Nasher Museum of Art at Duke University one evening this past spring, I was amazed at the packed room. I sat on a folding chair along the back wall, one of the few remaining seats. As I looked around, I had the distinct feeling that everyone present cared very deeply about the subject matter about to be discussed.

Dr. Farr Curlin, who specializes in palliative care, presented arguments against physician-assisted suicide. Dr. Timothy Quill, a professor at the University of Rochester School of Medicine, made a case in favor of the practice.

After the presentations, the physicians took a wide range of questions from the audience, although most of the questions were directed at Dr. Curlin with tinges of hostility.

I walked away wondering if anyone in the room had ever heard a case for life as masterfully presented as that made by Dr. Farr Curlin that evening, and in an atmosphere that seemed to me much like a lion's den. If so few have heard the truth presented well, the need to keep fighting for the sanctity of life is more important than ever before. If we do not champion life, who will? If not now, then when?

The following is an excerpt of Dr. Farr Curlin's argument for life and against physician-assisted suicide presented at Duke University on April 25, 2017.

- Introduction by Rachel Lee Brady, NC Family contributing writer



a breathing machine, even if he came to the point of not being able to breathe on his own.

I then asked his brother and niece if they had ever considered hospice care for Mr. Roberts. Both shook their heads and said adamantly, “We are not interested in hospice.” “Why is that?” I asked. They responded, as I have heard numerous others respond in Durham and on the south side of Chicago [where Dr. Curlin formerly lived and worked]: They described their impression that hospice too often foregoes any effort to provide medical care for patients, instead focusing only on giving potent drugs like morphine and sedatives, and thereby hastening patients’ deaths.

I begin with this story because it points to a question I ask you to consider: With respect to the questions of assisted suicide, which of the following should physicians care most about:

- Maintaining the trust of those who, like Mr. Roberts and his family, already experience the debility, dependence, and suffering that advanced illness brings; or;
- Empowering those who, like Brittany Maynard, seek through assisted suicide, to avoid such debility, dependence, and suffering?

Brittany Maynard, you may recall, was diagnosed with brain cancer in January of 2014 and became a prominent public advocate for legalization of physician-assisted suicide. She moved from California to Oregon and, per a plan she specified in advance, died on November 1 of that year after ingesting a lethal cocktail of drugs.

Brittany Maynard’s story illustrates a pattern. Those who seek assisted suicide are rarely driven by the direct experience of refractory pain or other symptoms. At the time she committed suicide, Ms. Maynard was not experiencing symptoms beyond the reach of conventional palliative medicine, nor are such symptoms expected with a brain tumor. Rather, as she herself said, she chose to end her life on her own terms in order to avoid the prospect of further debility and decline, in which she might “suffer personality changes and verbal, cognitive and motor loss of virtually any kind.”

Ms. Maynard’s desire to avoid debility and dependence reflects the pattern found in official reports from Oregon and Washington State, where nine out of ten patients requesting assisted suicide have reported being concerned about “losing autonomy” (91.5

A few weeks ago, I was asked to see a patient in the Emergency Room at one of Duke University’s hospitals, where I practice palliative medicine. The patient, who I will refer to as Mr. Roberts, had advanced dementia. He had not spoken in three years. He was brought to the hospital by his brother and his niece, who for several years, had cared for the patient at home. Initial evaluation by the ER docs made clear that Mr. Roberts had pneumonia and was beginning to suffer septic shock and respiratory failure. After I spoke with them briefly, Mr. Roberts’ family members agreed with my proposal that we give him antibiotics, oxygen, and other supportive therapy, but that we forego putting him on

I walked away wondering if anyone in the room had ever heard a case for life as masterfully presented as that made by Dr. Farr Curlin that evening, and in an atmosphere that seemed to me much like a lion’s den.

percent) and being “less able to engage in activities making life enjoyable” (88.7 percent).

The problem to which assisted suicide poses a solution is not uncontrolled pain. In Oregon, only one in four patients (24.7 percent) has reported even “concern about” inadequate pain control, and at no time in history have physicians and patients had greater access to effective tools for treating pain and other distressing symptoms, tools which can be deployed aggressively under ethical norms that have guided medicine for ages.

Brittany Maynard put the point bluntly in her online manifesto: “I want to die on my own terms.” Ms. Maynard then added, “My question is, who has the right to tell me that I don’t deserve this choice?” That is a powerful question in our day.

That physicians are being asked to cooperate shows that “the right to choose” is, as the late Robert Burt noted, “radically incomplete as a justification for physician assisted suicide.” “[T]he confident assertion of the self-determination right,” he continued, “leaves unacknowledged and unanswered a crucial background question: Who can be trusted to care for me when I am too vulnerable and fearful to care for myself?”

Physicians cannot practice causing the death of their patients without undermining the trust on which the practice of medicine

depends. Physicians who care for patients with advanced illness have long known that both they and their patients will, at times, be tempted to do away with suffering by doing away with the patient. To mitigate against that temptation, physicians have for two-plus millennia sworn in the Hippocratic Oath: “I will neither give a deadly drug to anybody who asked for it, nor will I make a suggestion to this effect.” The AMA has maintained since its founding that, “Physician assisted suicide is fundamentally inconsistent with the physician’s professional role.”

If “verbal, cognitive and motor loss” renders life not worth living, one might think that disability groups would welcome assisted suicide. The opposite is the case. Disability groups overwhelmingly oppose assisted suicide. The

prominent advocacy group, Not Dead Yet, speaks for many in arguing that “it cannot be seriously maintained” that legalization of assisted suicide will not lead to “inappropriate pressures from family or society” for people to end their lives. The group contends that “assisted suicide laws ensure legal immunity for physicians who already devalue the lives of older and disabled people and have significant economic incentives to at least agree with their suicides, if not encourage them, or worse.”

But even if these time-tested reasons have lost their grasp on our imaginations, can we not still say that it is unjust to purchase yet another choice for those accustomed to living life on their own terms at the cost of betraying physicians’ distinctive solidarity with, and thereby undermining the trust of, those who live under the terms of illness and disability, which they have not chosen, but with respect to which, they should be able to count on physicians’ care?

The transcript of Dr. Curlin’s entire presentation can be found at NCFamily.org.

Dr. Farr Curlin is a hospice and palliative care physician at Duke University where he holds a joint appointment to the School of Medicine and Duke Divinity School. For a footnoted version of this article, please visit www.ncfamily.org.

Physicians cannot practice causing the death of their patients without undermining the trust on which the practice of medicine depends.

The Star Spangled Banner

Penned by Francis Scott Key in September 1814
(The National Anthem of the United States of America)

With all the controversy surrounding professional athletes and other prominent figures sitting, kneeling, or choosing to remain absent during the playing of our national anthem, I thought we could all benefit from reading "The Star-Spangled Banner" in its entirety. We respectfully ask that you take a moment to read all of these verses and reflect upon them. Then, let's say a prayer of deepest thanks for those who have gone before us and for those who have sacrificed so much—even their very lives—that we might live in what is currently recognized as the freest and most prosperous nation on the planet. May God bless you and your family, and may God continue to bless America!

Sincerely,

John L. Rustin 

John L. Rustin is President of the North Carolina Family Policy Council.

*O say can you see, by the dawn's early light,
What so proudly we hail'd at the twilight's last gleaming,
Whose broad stripes and bright stars through the perilous fight
O'er the ramparts we watch'd were so gallantly streaming?
And the rocket's red glare, the bombs bursting in air,
Gave proof through the night that our flag was still there,
O say does that star-spangled banner yet wave
O'er the land of the free and the home of the brave?*

*On the shore dimly seen through the mists of the deep
Where the foe's haughty host in dread silence reposes,
What is that which the breeze, o'er the towering steep,
As it fitfully blows, half conceals, half discloses?
Now it catches the gleam of the morning's first beam,
In full glory reflected now shines in the stream,
'Tis the star-spangled banner – O long may it wave
O'er the land of the free and the home of the brave!*

*And where is that band who so vauntingly swore,
That the havoc of war and the battle's confusion
A home and a Country should leave us no more?
Their blood has wash'd out their foul footsteps' pollution.
No refuge could save the hireling and slave
From the terror of flight or the gloom of the grave,
And the star-spangled banner in triumph doth wave
O'er the land of the free and the home of the brave.*

*O thus be it ever when freemen shall stand
Between their lov'd home and the war's desolation!
Blest with vict'ry and peace may the heav'n rescued land
Praise the power that hath made and preserv'd us a nation!
Then conquer we must, when our cause it is just,
And this be our motto – "In God is our trust,"
And the star-spangled banner in triumph shall wave
O'er the land of the free and the home of the brave.*



North Carolina Family Policy Council
PO Box 20607
Raleigh, NC 27619

Equipping North Carolina families to be voices of persuasion for family values in their communities.



www.ncfamily.org
Sign up for email updates!



[NCFamilyorg](https://www.facebook.com/NCFamilyorg)
Like us on Facebook!



[@ncfamilyorg](https://twitter.com/ncfamilyorg)
Follow us on Twitter!



[ncfamilyorg](https://www.instagram.com/ncfamilyorg)
Connect with us on Instagram!

Many ways to get equipped!