

Spanish/English Translation

Ella es una niña, no una “opción”/She’s a Child, Not a “Choice”

Para más información For more information

Vida Humana Internacional

Vida Humana Internacional (VHI) - Hispanic Section of Human Life International - collaborated in producing this newspaper in Spanish. The mission of VHI is to promote and defend the sanctity of human life and the family among Hispanics around the world, through prayer, services and education. VHI is a link between the U.S. and the Latin American pro-life movements, as a strategy to end the culture of death and build the culture of life. It has affiliated organizations in Hispanic countries, consult its website. It offers free an enewsletter to which you can subscribe in the link "News and more". Its online catalog includes educational resources where it concerns life and family issues.

Imperialismo mortal Deadly Imperialism

The United Nations (UN), started in 1945, has grown to become a powerful international arbitrator in law, economic development and human rights. (1) By 1968, its authority included “family planning.” As a result of conferences held in Cairo and Beijing in 1994 and 1995, the United Nations Population Fund (UNFPA) issued an injunction stating that women have a right to “reproductive health.” A right defined to include a “satisfying sex life” and “children by choice.” (2)

Consequently, there now exists an intricate web of UN member nations, agencies, NGOs (non-government organizations) and advocacy groups using international sanctions to promote legal and unrestricted abortion worldwide. The International Planned Parenthood Federation (IPPF) is a major link in this network.

IPPF’s programs teach children, as young as 10 years of age, that as “sexual beings” they have a basic “need” and “right” to have the sex life of their “choice.”(3) This “education” ensures that young people will be dependent on its services of contraceptives, abortion and post-abortion treatment. IPPF is an advocate for legal abortion in 183 countries and has 151 member associations providing its services worldwide. (4) This includes the U.S. based Planned Parenthood Federation of America (PPFA). PPFA has affiliates working in thirteen Latin American countries. (5)

An important link in this chain of power coerces the courts to liberalize or abolish existing laws, is the United States Center for Reproductive Rights. The Center uses “high-impact litigation to ensure all women have the right . . . to end a pregnancy” (6) Using the Cairo/Beijing mandate to charge nations with being in violation of “International Law,” and threatening loss of desperately needed financial aid, is an example of “high impact litigation.”

Monica Roa, a Columbian lawyer, made legal history by winning her case challenging Columbia’s anti-abortion laws on the premise that they are in violation of “international obligation derived from human rights treaties.”(7) Roa, a graduate of New York University Law School (NYU), received financial support from the Center. She was well prepared to argue for “sexual and reproductive rights” in her fellowships at the Center and post-graduate work at NYU. (8,9) The Center has also been successful in securing abortion rights in Mexico and Peru.

A powerful component fueling the web of pro-abortion organizations is the network of patrons they have garnered. IPPF is funded by UN agencies, member nations, foundations and individuals. (10) Other pro-abortion organizations, including the Center for Reproductive Rights, depend largely on foundations.(11) Those supporting abortion advocacy and services include:

Bill and Melinda Gates, William and Flora Hewlett, John D. & Catherine T. MacArthur, The Summit, David and Lucile Packard, WestWind, Contorer, Erik E. & Edith H. Bergstrom, Ford, (12) The Wallace Alexander Gerbode and The Rebecca Susan Buffet foundations; The John Merck Funds; and, The George Soros Open Society Institute & Foundations Network.(13)

1 For a brief history of the UN, see “United Nations” at http://en.wikipedia.org/wiki/United_Nations Accessed 2/25/07. | **2** Sadik, Nafis, MD, Executive Director, UN Population Fund, “Women: The Right to Reproductive and Sexual Health” at www.un.org/ecosocdev/geninfo/women/womrepro.htm(3) Accessed 2/25/07. | **3** “The Five A’s: Abortion, Access, Adolescents, Advocacy, Aids/HIV,” – “Adolescents,” at <http://www.ippf.org/en/What-we-do/> Accessed 2/25/07. | **4** “IPPF at a Glance,” p.8 at www.ippf.org/NR/rdonlyres/F3B814BA-AF96-460A-AA47-4142366BCC74/0/IPPF_Glance_ENG.pdf Accessed 2/25/07. | **5** “Planned Parenthood Federation of America – International,” p.8 at www.plannedparenthood.org/files/ppfa/about-050401-five-year-report.pdf Accessed 2/25/07. | **6** “Annual Report 2004,” p.2 at http://www.reproductiverights.org/ab_financials.html. | **7** Indymedia-Ireland, “Monica Roa Addresses Safe and Legal Forum in Dublin,” 11/18/06 at <http://www.indymedia.ie/article/79749> accessed 2/25/07. | **8** “Landmark Decision by Columbia’s Highest Court Liberalizes one of the World’s Most Restrictive Abortion Laws,” at http://www.clrp.org/pr_06_0511columbia.html. Accessed 2/25/07. | **9** NYU Law, “Global Public Service Law Project,” at www.law.nyu.edu/programs/globalpublicservice/fellows/2003.html. Accessed 2/25/07. | **10** “IPPF Annual Performance Report 2005,” at http://www.ippf.org/NR/rdonlyres/39BD1725-16B2-459D-91C8-C1A12A3B6391/0/APR_2005.pdf Accessed

EEUU: RACISMO REPRODUCTIVO CONTRA LOS HISPANOS

Reproductive Racism

In July of 2008, Alan Guttmacher Institute, the research branch of Planned Parenthood, reported that 22% of all abortions in the U.S. were performed on Hispanic women.¹ Robert J. Kendra, P.E. in an article written for *Social Justice Review*, “A Statistical Analysis of Racial Populations in the United States” reveals disturbing evidence of genocide. “Despite minorities comprising only a quarter of the population, they account for more than half of all abortions”.²

Anti-life organizations, based in the United States, continue to target Hispanics. The goal of these organizations is to promote abortion and birth control to the Hispanic population even though the majority are opposed to abortion. Surveys indicate 40% believe that abortion should never be legal, an additional 11% would allow abortion to save the life of the mother and 27% more are opposed to abortion except in cases of rape and incest.³ (HLA and HLI firmly believe that direct abortion is a grave evil in all cases. However, these surveys do show that most Hispanics, although imperfectly, are indeed pro-life.)

Pro-abortion organizations are very slick. To sell their agenda to the Hispanic population, they wed “reproductive rights” to immigration. They realize that most Hispanics would self identify as “conservative” but would most likely vote for liberal political candidates if they are offered help with immigration issues. Also, “A selling point to Latinos was the idea that they would march not just for abortion rights but for a range of issues that affect immigrant women including the need for better prenatal health care, medical insurance and access to birth control”.⁴

One notorious anti-life organization that targets Latinos is The National Latinas Institute for Reproductive Health. Their purpose is to insure access to abortion as a “fundamental right” through activism and education.⁵ This organization’s roots lie in Catholics for Free Choice (now called Catholics for Choice), an organization based in the US. Their main objective is to promote abortion⁶. These organizations are not Catholic and have been denounced by the Catholic Church, most recently by the Conference of Catholic Bishops of Brazil. NLIRH also seeks to obtain unlimited access to abortion for minors without parental consent and to ensure that abortion is easily accessible and paid for by the government.⁷

NLIRH also has close ties to Planned Parenthood⁸. Planned Parenthood is known for their promotion of contraceptives and abortion, especially to minority populations. Planned Parenthood clinics are mainly located in areas heavily populated by African Americans and Hispanic Americans⁹. Planned Parenthood was founded by Margaret Sanger, who believed that Blacks, immigrants and indigents were “human weeds”, “reckless breeders,” and “spawning...human beings who never should have been born.” Margaret also believed birth control was “to create a race of thoroughbreds” and “More children from the fit, less from the unfit—that is the chief aim of birth control.”¹⁰

There are many anti-life groups in Latin America and the United States who are dedicated to an anti-life, anti-family agenda. They are a very real threat. The evidence is the decline in the birth rate due to abortion and birth control among Hispanics.

1. *Guttmacher Policy Review*, summer 2008, vol.11, number 3 pg.9 | 2. *Social Justice Review*, “The American (Abortion) Holocaust and Catholic Complicity,” vol.94, No.9-10 (September-October, 2003) Robert J. Kendra, P.E.,<http://socialjusticereview.org> | 3. “Hispanic Americans are Pro-Life, Though Groups Back Abortion March,” *LifeNews*; p.2; April 30, 2004; *The U.S. Times; United States of America*. | 4. “Against Abortion But in Favor of Choice”, *The New York Times*; p.1; April 26, 2004; *United States of America*. | 5. About NLIRH-section: Our Mission www.latinainstitute.org/about/index.html | 6. Catholics for a Free Choice; *United States of America*. www.catholicsforchoice.org/about/ourwork/default.asp | 7. Hispanic Americans are Pro-Life, Though Groups Back Abortion March;” *LifeNews*; p.2; April 30, 2004; *The U.S. Times; United States of America*. | 8. National Latina Institute for Reproductive Health; *United States of America*.-NLARH refers Hispanics to Planned Parenthood www.nwaforchange.org/nwa/site_images/latinas%20institute.pdf.see also: www.latinainstitute.org/publications/links.html. | 9. To obtain more information about Planned Parenthood and how it targets Hispanics in the U.S., visit at VHI website: www.vidahumana.org/vidafam/ippf/ppfa_index.html | 10. Margaret Sanger Founder of Planned Parenthood In Her Own Words; Diane S. Dew; cc 2001; www.dianedew.com

Sabía usted que...?

Did you know?

On January 22, 1973 the U.S. Supreme Court legalized abortion through the ninth month of pregnancy.

Since abortion was legalized in 1973, surgical abortion alone has extinguished the lives of 47 million pre-born babies.

About 24% of pregnancies end in surgical abortion.

Girls between the ages of 20 and 24 have the most abortions.

In 2001, white women had 164 abortions per 1,000 live births while Hispanic Americans had 233 abortions per 1,000 live births.

According to a 2004 report by the Centers for Disease Control 12,000 late-term (>21 weeks of pregnancy) abortions were performed in 2001.

Forty-eight percent of abortions performed in the U.S. are repeat abortions.

A developing baby's heart begins to beat at 21 days.

1. Doe vs. Bolton, U.S. Supreme Court, No.70-40, IV, P.11, Jan 1973. | 2. Guttmacher Institute. "In Brief – Facts on Induced Abortion in the United States." May 2006. http://www.guttmacher.org/pubs/fb_induced_abortion.html. | 3. Ibid. | 4. Ibid. | 5. U. S. Department of Health and Human Services, Centers for Disease Control and Prevention, Morbidity and Mortality Weekly Report – Nov 2005. "Abortion Surveillance --- United States, 2002" - Table 4. www.cdc.gov/mmwr/preview/mmwrhtml/ss5407a1.htm. | 6. Ibid - Tables 9 and 10. | 7. Ibid - Table 1. | 8. Color Atlas of Life Before Birth, Marjorie England, Yearbook Publishers.

SIN REMORDIMIENTOS: Una historia verdadera

No Regrets: A True Story

When I first found out I was pregnant I couldn't control my crying. I shook uncontrollably.

I had never felt so lonely or confused in my life.

I wanted my boyfriend's support. I shouldn't have been surprised when he told me to have an abortion.

My mind raced to justify the abortion.

Perhaps my child would be better off dead than in a broken family. I thought that an abortion would be the answer to my problem. I tried to tell myself that my child wasn't really a baby he was just tissue...

But no matter how hard I tried to fool myself, I knew I carried a baby. I realized if I were to take my baby's life I would regret it forever.

I never knew such relief.

It didn't take long for me to face reality and see my baby as a gift. I realized it was my duty as a mother to protect my child's best interest.

Many relatives didn't understand why I was even thinking of adoption. Who would give up their child?

Me. That's who. But beyond my wants I knew my child deserved more. Adoption was the best way I could show love to my child.

My boyfriend was not overly thrilled about adoption...

But was willing to look at several different couples with me. The couple we chose was married, deeply in love, and welcomed our son as their own.

Their love for my child is divine.

I can hold my head up high and people are amazed. The birthfather, my family, and my friends came to realize my decision was out of love.

Yes, I grieved the loss of my child. But the joy far exceeds the sorrow.

I thank God that I don't have to visit the memory of an aborted baby. I can live with my decision and so can my son... With no regrets.

EL LENGUAJE DEL EL LENGUAJE DEL ENGAÑO

The Language of Deceit

"Freedom to Choose"

It sounds almost patriotic. Our great American freedoms: freedom of speech, freedom of assembly, and freedom of religion. How can these freedoms be equated with the freedom of a woman to abort her unborn baby? We might as well be "pro-choice" on rape, child pornography, and prostitution.

“Safe” Abortion

Many young women believed this lie until it was too late. The book, *Lime 5*, documents over 200 cases of women injured or killed by legal, so-called “safe” abortions.¹ The end result of an abortion is a dead baby, and the potential for cervical cancer, breast cancer, infertility and psychological pain.² Where’s the “safe” part?

A “Wanted” or “Planned” Child

Does your value depend on the degree that someone wants you or plans your existence? Let’s be honest—a child is a child. How could any baby be called unwanted when there are over one million couples waiting, hoping, and praying for a chance to adopt a child?

“I’m Personally Opposed, But I Can’t Tell Others What To Do”

What if people in our society had been willing to accept this justification for tolerating slavery? Our forefathers took away the “rights” of slave owners in order to give freedom and respect to African American people. Our youngest and most vulnerable are still slaves to the life and death decisions of others.

“Reproductive Health”

If we really care about the reproductive health of women, legal abortion is not the answer. Abortion increases the risk of future premature births, infertility, suicide, and death.³ Where’s the healthy part? We have come too far to reduce women’s “health” to mean the “right to kill our own children.”

It’s Not Human Till Birth

Perhaps you think that the unborn is simply tissue and part of the woman’s body. Consider the following facts: Simple tissue does not have a beating heart, brain waves, fingerprints, and unique DNA. A woman can carry a baby with a different gender or blood type from her own. After the moment of fertilization, nothing new is added to the baby except oxygen, nutrition and time. The only differences between a newborn and a preborn baby are size, level of development, environment, and degree of dependency. All of these facts confirm the reality that you are a human being worthy of protection from the moment of fertilization.

Illegal Abortions

According to the Centers for Disease Control, 39 maternal deaths occurred in the United States due to illegal abortions in 1972 (the year prior to the *Roe v. Wade* decision that legalized abortion nationally).⁴ Any loss of life is tragic, but this number is nowhere near the alleged “thousands of deaths by illegal abortions.” Legalizing abortion will not reduce the number of abortions. Poland made abortion illegal and in six years dropped the abortion rate from an average of 150,000 a year to 174 in 2003.⁵

Rape and Incest

As traumatic as rape is, abortion does not un-rape the mother. The baby doesn’t deserve to die for the crime of his or her father. Patricia, a victim of rape, said, In my experience, abortion only compounded the trauma and pain I was already experiencing.... I would definitely discourage a woman from having an abortion. While it may seem to be the quickest and easiest solution to a painful, humiliating ‘problem,’ it is a band-aid approach with horrible ramifications of its own. For me, the effects of abortion are much more far-reaching than the effects of the rape in my life.⁶

Most women who become pregnant through rape don’t want an abortion. In the only major study of pregnant rape victims ever done, Dr. Sandra Mahkorn found that 75 to 85 percent chose against abortion.⁷ People assume abortion is the best answer for rape and incest victims. Joan Kemp, a rape crisis center counselor, said, “I am familiar with no case of incest-related abortion that did not make matters worse for the victim. These abortions are done for the benefit of the adults involved, not the incest victim.”⁸

Fetal Deformities

No one’s perfect. Abortion for fetal deformities is a form of discrimination against disabled people. Eighty percent or more of Down syndrome babies are now aborted.⁹ Who’s to say their lives aren’t worth living? When we make life and death judgments based on “quality of life,” we start down the slippery slope of eugenics.

1 Crutcher, Mark. *Lime 5*. 1996. | 2 Elliot Institute. “Research and Key Facts: Abortion’s Harm to Women.” www.voteeyesforlife.com/docs/ResearchBooklet.pdf. Accessed 2/13/07. | 3 Elliot Institute. “Research and Key Facts: Abortion’s Harm to Women.” www.voteeyesforlife.com/docs/ResearchBooklet.pdf. Accessed 2/13/07. | 4 Centers for Disease Control. “Abortion Surveillance—United States, 2001.” www.cdc.gov/mmwr/preview/mmwrhtml/ss5309a1.htm. Accessed 2/13/07. | 5 Demographic Situation in Poland, Center of Information Systems of Health Care, Statistics Research Program of Public Statistics. 2001-2003. | 6 Family Research Council. The ‘Hard Cases’ of Abortion. 2000. p.11. | 7 Mahkorn, “Pregnancy and Sexual Assault,” *The Psychological Aspects of Abortion*, eds. Mall & Watts, (Washington, D.C., University Publications of America, 1979) 55-69. | 8 Family Research Council. The ‘Hard Cases’ of Abortion. 2000. p.16. (9) Neumayr, George. “The New Eugenics.” *The American Spectator*. July 13, 2005. http://theamericanprowler.com/util/print.asp?art_id=8418>.

Con sus propias palabras: Declaraciones de ex aborteros y ex empleados de centros de abortos In Their Own Words: Former Abortionists and Clinic Staff Speak Out

“There is a great difference between the intellectual support of a woman’s right to choose and the actual participation in the carnage of abortion... seeing body parts bothers the workers...”

- Judith Fetrow: Former Clinic Staff
 (“Abortion Providers III”)

“I want the general public to know what the doctors know—that this is a person; that this is a baby. That this is not some kind of blob of tissue...”

- Dr. Anthony Levantino: Former Abortionist
 (“Meet the Abortion Providers”)

“We were told to find the woman's weakness and work on it. The women were never given any alternatives. They were told how much trouble it was to have a baby.”

- Debra Henry: Former Clinic Staff
 (“Meet the Abortion Providers”)

“But I think the greatest thing that got to us was the ultrasound... The baby really came alive on TV and was moving... That picture of the baby on the ultrasound bothered me more than anything else... We lost two nurses. They couldn’t take looking at it.”

- Dr. Joseph Randall: Former Abortionist
 (“Meet the Abortion Providers”)

Las secuelas del Las secuelas del aborto The Aftermath of Abortion

They tell you “it’s a quick fix...”

They say, “It will solve your problems and allow you to get on with your life...”

They’re wrong.

Having an abortion carries a lasting physical and psychological aftermath that few women are told about. If they had been warned...would they really have “chosen” abortion?

Because of the nature of the procedures used to abort children, women are susceptible to serious physical complications. Women can face hemorrhage that requires transfusion, perforation of the uterus, cardiac arrest, endotoxic shock, major unintended surgery, infection resulting in hospitalization, convulsions, undiagnosed ectopic (tubal) pregnancy, cervical laceration, uterine rupture, and death.¹ Besides these possible immediate complications, abortion may harm a woman’s future pregnancies.

A woman who aborts is more likely to experience ectopic pregnancies, infertility, hysterectomies, stillbirths, miscarriages, and premature births than women who have not had abortions.² Also, in the United States, 13 out of 15 studies show an increased risk of breast cancer in women who have had an abortion.³

In addition to the physical risks, women face the risk of psychological problems from their abortions. Compared to pregnant women who had their babies, pregnant women who aborted had a 6 times higher rate of suicide.⁴ Teenagers who abort are 10 times more likely to attempt suicide than teens who have not had an abortion.⁵ A recent study of American women found that women who aborted were 65% more likely to be at risk of long-term clinical depression.⁶

Women who abort are not only putting their own lives and health at risk, they are also endangering the lives of their current and future children. Women who abort are 144% more likely to physically abuse their children.⁷ And women who had a previous abortion had a 60% higher risk of miscarriage.⁸

Ann Marie, a post-abortive woman, shares, “Abortion changes you forever. I thought the abortion would free me up from a responsibility I felt I was not ready for. Instead it held me in bondage to feelings of regret, remorse, depression and despair. My soul became a slave to self-hatred and worthlessness. My sanity was the price I would pay. Women deserve better than abortion.”

The physical and psychological aftermath of abortion is devastating. Listen to the many voices of hurting post-abortive women like Michelle who cry, "Please, don't make the same mistake I did." Read some of their stories at www.vidahumana.org/vidafam/aborto/testpost_index.html.

1. Warren Hern, *Abortion Practice*, (Philadelphia: J.B. Lippincott Company, 1990), p. 175-193. | 2. Strahan, T. *Detrimental Effects of Abortion: An Annotated Bibliography with Commentary* (Springfield, IL: Acorn Books, 2002) 168-206. | 3. Association of American Physicians and Surgeons. "Medical Journal: Political Correctness Prevents Women From Learning About Abortion Risks." August 2003. www.aapsonline.org/press/abortioncancer.htm. | 4. M. Gissler et. al., "Injury deaths, suicides and homicides associated with pregnancy, Finland 1987-2000," *European J. Public Health*. 15(5):459-63, 2005. | 5. B. Garfinkle, *Stress, Depression and Suicide: A Study of Adolescents in Minnesota*. (Minneapolis: University of Minnesota Extension Service, 1986). | 6. JR Cogle, DC Reardon & PK Coleman, "Depression Associated With Abortion and Childbirth: A Long-Term Analysis of the NLSY Cohort," *Medical Science Monitor* 9(4):CR105-112, 2003. | 7. Priscilla K. Coleman, Charles D. Maxey, Vincent M. Rue, and Catherine T. Coyle, "Associations between voluntary and involuntary forms of perinatal loss and child maltreatment among low-income mothers," *Acta Paediatrica* 94, 2005. | 8. N. Maconochie, P. Doyle, S. Prior, R. Simmons, "Risk factors for first trimester miscarriage—results from a UK-population-based case-control study," *BJOG: An International Journal of Obstetrics & Gynaecology*, Dec 2006.

Declaraciones de feministas provida Pro-Life Feminists Speak Out

Alice Paul - Author of the original Equal Rights Amendment (1923). She opposed the later trend of linking the ERA with abortion. A colleague recalls her saying:

"Abortion is the ultimate exploitation of women. How can one protect and help women by killing them as babies?" (1)

Elizabeth Cady Stanton – Leader in the early women's rights movement in the United States

"When we consider that women are treated as property, it is degrading to women that we should treat our children as property to be disposed of as we see fit."(2)

Mattie Brinkerhoff – Early American Feminist

When a man steals to satisfy hunger, we may safely conclude that there is something wrong in society - so when a woman destroys the life of her unborn child, it is an evidence that either by education or circumstances she has been greatly wronged." (3)

Daphne Clair de Jong – Feminist and full-time writer in New Zealand

Women will gain their rights only when they demand recognition of the fact that they are people who become pregnant and give birth—and not always at infallibly convenient times—and that pregnant people have the same rights as others. To say that in order to be equal with men it must be possible for a pregnant woman to become un-pregnant at will is to say that being a woman precludes her from being a fully functioning person. (4)

The feminist claim to equality is based on the equal rights of all human beings. The most fundamental of all is the right to life. If women are to justify taking this right from the unborn, they must contend that their own superiority of size, of power, or of physique or intellect or need, or their own value as a person, transcends any right of the unborn. In the long history of male chauvinism, all these have been seen as good reasons for withholding human rights from women. (5)

1 Derr, Mary Krane and Angela Kennedy. "Feminism and Abortion." *History Today*. 49(8) 34 August 1999. | 2 *Letter to Julia Ward Howe, October 16, 1873, recorded in Howe's diary at Harvard University Library*. | 3 *The Revolution*, 4(9):138-9 September 2, 1869. | 4 Daphne Clair de Jong, "The Feminist Sell-Out," in *Prolife Feminism Yesterday & Today* edited by MacNair, Derr, & Naranjo-Huebl (New York: Sulzburger & Graham Publishing, Ltd.; 1995). | 5 Daphne Clair de Jong, "Feminism and Abortion: The Great Inconsistency," in *Prolife Feminism: Yesterday & Today* edited by Rachel McNair; 1995.

Métodos abortivos más utilizados Common Abortion Methods

Emergency Contraception – Plan B(The Morning-After Pill)

Emergency Contraception (EC) contains synthetic progesterone (not to be confused with naturally occurring progesterone) and is a large dose of the common birth control pill designed to be taken as a single dose within 72 hours after "unprotected sex." EC works in three ways. First, it attempts to stop ovulation. Depending on where a woman is in her cycle, ovulation may or may not have already occurred before EC was taken. Second, EC attempts to stop fertilization by impeding the transportation of either the sperm and/or the egg. Third, EC tries to stop implantation by altering (thinning) the lining of the endometrium (uterus) so the embryo cannot implant and receive nourishment from the mother. The first two methods are contraceptive, but if they fail, the third method can cause an abortion because it occurs after fertilization. (see "What About Birth Control?" p.10)¹

RU-486 – Mifeprex (The Abortion Pill)

Mifeprex blocks the action of the hormone progesterone, which is needed to maintain the lining of the uterus providing oxygen and

nutrients for the baby. Without it, the baby dies. Mifeprex is used in conjunction with the drug Cytotec (misoprostol) which is taken two days after Mifeprex, causing uterine bleeding (sometimes profuse), strong contractions, and expulsion of the baby.

The pregnant woman first visits the abortionist to obtain the Mifeprex pills, returns two days later to receive misoprostol, and a third time to verify that the abortion is complete. The failure rate of this method is about 8% if the pills are taken within 7 weeks and up to 23% at 8-9 weeks. If the baby survives the abortion, there is an extremely high risk that he or she will suffer mental and/or physical birth defects from the misoprostol.^{2,3}

Vacuum Aspiration

In this first trimester procedure, the abortionist inserts a hollow plastic suction tube into the dilated cervix. The uterus is emptied by either a manual syringe or high-powered suction machine. The baby's body is torn into pieces as he or she is being pulled through the hose.^{4,5,6}

Dilation and Suction Curettage (D&C)

This is similar to the vacuum aspiration, but is generally used after 14 weeks. After the baby is suctioned out of the uterus the abortionist inserts a curette, a loop-shaped steel knife, up into the uterus. With this the abortionist cuts the placenta and umbilical cord into pieces and scrapes them out into a basin. The uterus is again suctioned out to ensure that no body parts have been left behind. Bleeding is usually profuse.⁷

Dilation and Evacuation (D&E)

Once the cervix is dilated considerably further than in first trimester abortions, the abortionist inserts a narrow forceps that resembles a pliers. This instrument is needed because the baby's bones are calcified, as is the skull. The abortionist inserts the instrument into the uterus, seizes a leg or other part of the body and, with a twisting motion, tears it from the baby's body. The spine is snapped and the skull crushed. Body parts are then reassembled and counted to make certain that the entire baby has been removed and that no parts remain in the womb.^{8,9,10,11}

Induction or Prostaglandin Abortion

Labor is induced using prostaglandin drugs and the cervix is dilated. To ensure the baby will be dead upon delivery and to start uterine contractions, the abortionist will sometimes inject either saline (salt water) or urea (a substance naturally found in urine and blood). To guarantee against a live birth and legal complications, doctors will often inject the drug Digoxin or potassium chloride directly into the baby's heart to kill the child before delivery. This method is used in the second or third trimester.¹²

Partial-Birth Abortion or Dilation and Extraction (D&X)

After undergoing two days of dilation, the abortionist performs an ultrasound to locate the child's legs and feet. The abortionist then uses a large forceps to grasp one of the baby's legs. He pulls firmly, forcing the child into a feet-down position.

Using his hands instead of forceps, the abortionist delivers the baby's body in a manner similar to a breech birth. The baby's head remains inside the birth canal. The abortionist uses surgical scissors to pierce the child's head at the base of the skull. The scissors are forced open to enlarge the skull opening. The abortionist then inserts a suction catheter into the brain and vacuums out the child's brain tissue with a machine 29 times more powerful than a household vacuum.

In the 2007 decision, *Gonzales v. Carhart*, the Partial-Birth Abortion Ban Act of 2003 was upheld. The Partial Birth Abortion Ban did not limit the frequency of late-term abortions. The "Ban" merely regulated one method used in late-term abortions. It is still legal for a doctor to kill a child up until the time he or she is born using a modified version of Partial-Birth Abortion. The baby can be delivered up to the navel and then killed.¹³

1 Duramed Pharmaceuticals. "Plan B Prescribing Information." 2006. (Also see citations from "What About Birth Control?" page 10). | 2 National Abortion Federation. "What is Medical Abortion?" 2006. | 3 RU486Facts.org. "Effectiveness." 2008. | 4 American Pregnancy Association. "Surgical Abortion Procedures." 2006. | 5 National Abortion Federation. "First Trimester Abortion: A Comparison of Procedures." 2008. | 6 National Abortion Federation. "I'm Pregnant. What are my Options?" 2008. | 7 American Pregnancy Association. "Surgical Abortion Procedures." 2006. | 8 National Abortion Federation. "I'm Pregnant. What are my Options?" 2008. | 9 National Abortion Federation. "2007 Clinical Policy Guidelines." 2007. | 10 American Pregnancy Association. "Surgical Abortion Procedures." 2006. | 11 Web MD. "Dilation and Evacuation (D&E) for Abortion." 2006. | 12 WebMD. "Induction Abortion." 2006. | 13 American Pregnancy Association. "Surgical Abortion Procedures." 2006.

Aborto y cáncer de mama

Abortion and Breast Cancer

Women who experience at least one full-term pregnancy in their lifetime develop four types of breast lobules. During adolescence, the majority of lobules are Type 1 and Type 2, which are immature and cancer susceptible. Throughout the first trimester of pregnancy, the number of Type 1 and 2 lobules rapidly increase. As a result, breasts have more sites for cancer to start. In the second trimester, the breast lobules start maturing into Type 4 lobules, which are cancer resistant. By the end of the third trimester, 85% of the breast has fully matured. Only 15% of lobules remain immature and cancer susceptible, leaving fewer opportunities for cancer to start. After birth and weaning, Type 4 lobules regress to Type 3. There is evidence of permanent changes in the genes of Type 3

lobules which provide life-long cancer resistance.

A premature delivery before 32 weeks doubles the risk of breast cancer because it leaves the breast with more places for cancer to start. In the same way, abortion also stops the progression of breast lobule development. This prevents the development of Type 4 and subsequently Type 3 cancer resistant lobules. Induced abortion of a normal pregnancy results in increased risk of breast cancer for the mother since more Type 1 and 2 lobules remain.

Approximately 90% of miscarriages occur in the first trimester. However, the vast majority of natural miscarriages in the first trimester do not increase the risk of breast cancer. In these cases, pregnancy hormones are lower than those of a normal pregnancy due to either a fetal or ovarian abnormality. Therefore, a breast may not have grown more Type 1 and 2 lobules (sites where cancer starts) in response to pregnancy hormones, or at least very few. For more information visit: www.bcpinstitute.org/reproductive.htm.

Adapted with permission from: Breast Cancer Prevention Institute. "Reproductive Breast Cancer Risks and Breast Lobule Maturation." 2007. www.bcpinstitute.org/reproductive.htm. | Breast Cancer Prevention Institute. "Breast Cancer Risks and Prevention: Fourth Edition." 2007. www.bcpinstitute.org/booklet4.htm#history.
Recommended Resource: See www.abortionbreastcancer.com

Visto desde la otra parte: El remordimiento de un padre **The Other Half: A Father's Regret**

"I was a participant in two abortions with my ex-wife...It has been six years since the last abortion, nine since the decision for the first one. Every time I see children of the approximate age of the two lost ones, I cry, no matter where...church, the mall, the park, the library."

"I want to call their names, Michelle, Danielle, Stephen, William. Their legacy is gone. Their beauty unfinished, nullified by a decision to which I agreed...I have gone from pro-choice to pro-child."

— E-mail message from a father to Human Life Alliance

Hay que cuestionar la "salida fácil" **Questioning the "Easy Way Out"**

"Tim, I think I'm pregnant." My boyfriend sighed deeply, his gaze remaining fixed on the TV. He then muttered something that made me feel completely deserted.

I knew from firsthand experience how tough it was to raise a child as a single mother. I already had a 2-year old daughter, Jennifer, from an earlier unsuccessful marriage. When my pregnancy was confirmed, Tim's non-committal response to my distress and his move to Chicago, 400 miles away, left me despondent and convinced that abortion was the "easy way out." I was already struggling financially with one child. How could I raise two?

I felt desperately alone. I often cried myself to sleep. I decided to confide in a couple of college professors who collected money to fly me out of town to have an abortion. Now I felt obligated to go through with it. Still, I agonized!

I was summoned to the room where the abortions were performed. I could hear a woman sobbing hysterically in the recovery room. That memory haunts me still.

As the doctor was examining me, prior to performing the abortion, he suddenly stopped and said to the nurse, "Get her out of here! She's too far along!" Relief instantly washed over me! How odd. I had thought I wanted an abortion but now felt instantly relieved to know I was still pregnant.

I decided to muster every ounce of courage to deal with my pregnancy. My ambivalence turned into love for my unborn daughter, Melanie. It took energy and creativity to support the three of us. My two daughters inspired me to do great things. I finished my degree; then I went on to get my Master's and Ph.D.

When we endure something tough, our character and self-esteem are strengthened. Many women who have confessed to me that they've had abortions have discovered that the "easy way out" is just an illusion. Some are in abusive relationships, on anti-depressants, or just seem detached from life. Some sadly remember their aborted child's "would be" birthday each year.

I cannot promise that it will be easy. I can only promise that the anguish will pass and that there are people who will help you through this trying time. One day you will look back on the birth of your child, and know that you did the right thing.

Sincerely,
Dr. Angela Woodhull

La historia de Michelle

Michelle's Story

I was 18 years old when I got pregnant. Since I had already enlisted in the Air Force, I thought I had to have an abortion in order to make something out of my life.

My best friend drove me to the abortion clinic. It was like an assembly line. When the ultrasound was being done I asked to see it. But this wasn't allowed—so much for “an informed decision.” Then I asked how far along I was. I was told I was nine-and-a-half weeks pregnant. That hit me hard. I started doubting, and wanted to talk to my friend, but I wasn't allowed to.

When it was my turn the nurse told me that I was going to feel some discomfort, like strong menstrual cramps. The truth is that the abortion was more pain than I've ever felt in my life. It felt like my insides were literally being sucked out of my body. Later I went into shock.

After the abortion, I tried to make up for it by trying to get pregnant again. I wanted my baby back. I never got pregnant again. I don't know if I can ever have another baby. I named my baby. I found out later that this is part of the grieving process.

Two-and-a-half years later, I ended up in the hospital with bulimia. I felt that no one had punished me for what I had done so I was punishing myself. I became obsessed with women who were pregnant. My life was in shambles! I was suffering from post-abortion trauma.

When I was 21 years old I received help from a woman who was involved with pro-life activism. I went through a program called “Conquerors.” Not only did I experience forgiveness, I was also challenged to help others. I answered the challenge!

I started sidewalk counseling. There is a healing process that comes from getting involved in the pro-life movement. I talk to youth groups and students and share my testimony. To them, and to you, I plead, “Please don't make the same mistake I did.”

— Michelle

¿Y qué hay de los anticonceptivos?

What About Birth Control?

All hormonal contraceptives (the pill¹, patch², mini-pill³, shot⁴, vaginal ring⁵, emergency contraception⁶, intrauterine devices^{7,8}, etc.) have the capability to cause an abortion. Hormonal contraceptives work in three ways: by attempting to stop ovulation, by thickening cervical fluids to prevent fertilization, and by thinning the lining of the uterus to prevent implantation. The first two methods are contraceptive, but if they fail, the third method can cause an abortion because it occurs after fertilization.

Hormonal contraception does not always stop ovulation. When breakthrough ovulation occurs there is a possibility of fertilization. Studies have shown that ovulation rates in women taking oral contraceptives ranged from 1.7% to 28.6% per cycle. Ovulation rates for women taking progestin only pills (the mini-pill) ranged from 33% to 65%.⁹ When these contraceptives do not stop fertilization, they have the capability to cause an abortion because the lining of the uterus may be too thin and inhospitable for the embryo to implant and receive nourishment. Birth control manufacturers insist that their products do not terminate an existing pregnancy. However, they have incorrectly redefined the terms “conception” and “pregnancy” to mean the moment of implantation rather than the moment of fertilization.

¿“Anticoncepción de emergencia”?

Emergency Contraception?

Emergency contraception (EC) is also known as the morning-after pill. Documented side effects from EC include nausea, abdominal pain, fatigue, headache, dizziness, vomiting, diarrhea, breast tenderness, menstrual changes,¹⁰ and ectopic pregnancy¹¹. Contrary to popular arguments, EC does not decrease pregnancies and surgical abortions. EC has been available in Scotland since 1984, but pregnancy rates have not decreased¹² and STI rates have increased.¹³

1 Ortho-McNeil Pharmaceuticals. <http://www.ortho-mcneilpharmaceutical.com/products/index.html>. | 2 Ibid | 3 Ibid | 4 “Pfizer Medicines and Products.” http://www.pfizer.com/pfizer/download/uspi_depo_provera_contraceptive.pdf. | 5 “NuvaRing Full Prescribing Information.” www.nuvaring.com/Authfiles/Images/309_76063.pdf | 6 “How Plan B Works.” www.go2planb.com/PDF/PlanBPI.pdf. | 7 “Safety Information.” www.paragard.com/paragard/custom_images/Prescribing-Info.pdf | 8 “What is Mirena birth control?” www.mirena-us.com/howmirenaworks.html?C=&c= | 9 Larimore and Stranford. “Postfertilization Effects of Oral Contraceptives and their Relation to Informed Consent.” *Archives of Family Medicine*, Vol. 9, Feb. 2000, 126-133. www.thecbc.org/research_resources/reproduction/fsa8035.pdf. | 10 “How Plan B Works.” www.go2planb.com/PDF/PlanBPI.pdf. | 11 Harrison-Woolrych, Mira, MD. “Progestogen-Only Emergency Contraception and Ectopic Pregnancy. Prescriber Update 2002.” www.medsafe.govt.nz/Profs/PUarticles/ectopic.htm | 12 Anna Glasier et al. “Advanced provision of emergency contraception does not reduce abortion rates.” *Contraception*. Vol. 69, 2004, p361-366. www.cwfa.org/images/content/scotland0905.pdf. | 13 Paton, David. “Random Behavior or Rational Choice? Family Planning, Teenage Pregnancy, and STIs.” Nov. 2003. www.swan.ac.uk/economics/res2004/program/papers/Paton.pdf.

Promesas incumplidas: Las consecuencias de la legalización del aborto en EEUU

Promises vs. Reality: What Legal Abortion Has Done to the United States

The US Supreme Court *Roe v. Wade* decision of 1973 made the right to have a legal abortion mandatory for all states. Ushering in this decision were numerous organizations such as The National Organization of Women (NOW) and the National Abortion Rights Action League (NARAL). Their members worked to secure so-called “reproductive rights” by convincing lawmakers and the general

population of the benefits abortion would have for women and society. Today, over thirty years later, the reality is that legalized abortion has not lived up to the promises its proponents claimed.

Promise: Lawful access to abortion is fundamental to the liberation of women; to be free from male dominance and oppression, women must be given complete control over their fertility.

Reality: There is no liberation when 64% of aborted women report they were pressured by others.¹ There is no freedom from male oppression when 40% of aborted women state abuse and relationship problems as the reason for requesting the termination of a pregnancy.²

Intimate partner violence against women has risen to epidemic proportions. In 2001, the Journal of the American Medical Association reported that pregnant women were more likely to be victims of homicide than to die of any other cause.³ It should also be noted that aborted women are twice as likely to die of homicide as compared to women delivering a full-term baby.⁴

Every state and many charitable organizations have allocated millions to provide services and shelters for battered women; yet funding remains woefully inadequate for the ever growing numbers who request assistance each year. Requests for emergency shelter assistance in the US increased by an average of 13% in 2003.⁵

Promise: Freedom to abort an “unwanted child” will bring an end to child abuse, strengthen families, eliminate illegitimacy and reduce crime.

Reality: Abortion, the ultimate child abuse, has caused the deaths of 47 million unborn children since 1973. The US has the highest abortion rate among the developed countries of the West. In 1996, the US Department of Health and Human Services reported that physical abuse of children had increased 84% and sexual abuse 350% since 1980.⁶ According to the United Nations Children’s Fund, of the 27 most prosperous nations of the world, the United States ranks first in the number of children who die from violence and negligence.⁷

Marriage rates have declined 50% since 1970 and the US now has the lowest percentage among Western nations of children who grow up with both biological parents.⁸ The rise in violent crime over the past 30 years parallels the rise in families without fathers. A broken and abusing family is the principal factor in the emergence of a violent criminal. For every 10 percent rise in out-of-wedlock births, serious violent crime increases 17 percent.⁹

Promise: Legalized abortion will improve women’s reproductive health.

Reality: The higher incidences of suicide, substance abuse, admissions to psychiatric care, infertility and breast cancer in aborted women suggest otherwise. Women who abort are 6 times more likely to commit suicide than women who have carried their pregnancy to term.¹⁰

A study in California found that women who abort are 63% more likely to seek mental health care within the first nine months after birth than women who deliver; requests for mental health treatment remained significantly higher for aborted women throughout all four years of the study.¹¹

Women who aborted a first pregnancy were five times more likely to report subsequent substance abuse than women who carried to term, and they were four times more likely to report substance abuse compared to those who suffered a natural loss (miscarriage, ectopic pregnancy or stillbirth) of their first pregnancy.¹²

Promise: Legal abortion will assure “safe” abortions – no more “back-alley” butchers!

Reality: Bernard Nathanson, MD, former abortionist and forerunner in the fight to legalize abortion, confesses to having fabricated the number of deaths from illegal abortion. Before the advent of Penicillin and sulfa drugs in the 1940’s, many women died from infections following an abortion; however, in the two decades preceding *Roe* rates continuously declined and few deaths were reported. Dr. Nathanson assures his readers that deaths due to abortion, albeit illegal, would most likely have occurred in an emergency room where reporting is mandatory. Forty-one deaths were reported in 1972 – the year before abortion became legal.¹³

Today, an Internet search for “abortion, malpractice” retrieves dozens of gruesome newspaper reports of women who have been killed, seriously injured or sexually abused by abortionists. The same is true for clinics closed or under investigation for unsanitary practices, unlicensed practitioners and fraud. Twenty-four states either have no laws regulating abortion clinics or do not enforce existing laws.¹⁴

Conclusion

Legalizing abortion marked a definitive break with the moral order that had prevailed during the 200-year history of the nation. It cannot be denied that a defensible cause and effect relationship exists between legalized abortion and the subsequent and continuous breakdown of the social order in the United States.

¹ Rue, VM et al., "Induced Abortion and Traumatic Stress: A Preliminary Comparison of American and Russian Women" *Medical Science Monitor*, 10(10): SR5-16, 2004. | ² Glander, SS et al., "The Prevalence of Domestic Violence Among Women Seeking Abortion" *Obstetrical and Gynecological Review*, 1998; 91(6): 1002-06. | ³ Horon, I., & Cheng, D., (2001) "Enhanced Surveillance for Pregnancy-Associated Murders in Maryland," 1993-1998. *The Journal of the American Medical Association*, 285, No. 11. | ⁴ Shadigian, Elizabeth M. MD, Bauer, Samuel T. MD, "Pregnancy Associated Death: A Qualitative Systematic Review of Homicide and Suicide," *Obstetrical & Gynecological Survey*, Vol 60(3), March 2005, 183-190. | ⁵ Full Text of "The Declaration on Human Rights in 2003" at http://english.people.com.cn/20430/eng20040301_136190.shtml. Accessed 11/18/06. See "Full Text of Human Rights Record of the United States in 2005" at http://english.people.com.cn/20603/09/eng20060309_249259.html. | ⁶ US Department of Health and Human Services, Sept. 1996, "The Third National Incidence Study of Child Abuse and Neglect." | ⁷ http://english.people.com.cn/20430/eng20040301_136190.shtml. Accessed 11/18/06. | ⁸ Jayson, Sharon, "Divorce Declining, but so is Marriage," 7/18/05 at www.usatoday.com/news/national/2005-07-18-cohabit-divorce_x.htm. Accessed 10/28/06 | ⁹ Fagan, Patrick F., "The Real Root Causes of Violent Crime: The Breakdown of Marriage, Family and Community," March 17, 1995, at www.heritage.org/research/crime/BG1026.cfm. Accessed 10/26/06. | ¹⁰ Elliot Institute. "Research and Key Facts: Abortion's Harm to Women." at <http://www.voteyesforlife.com/docs/ResearchBooklet.pdf>. Accessed 10/26/06. | ¹¹ Coleman, PK et al., "State Funded Abortions vs. Deliveries: A Comparison of Mental Health Claims Over Five Years," *Am. J. of Orthopsychiatry*, 2002 Vol. 72, No. 1, 141-152. | ¹² Reardon, DC, Ney, PG, "Abortion and Subsequent Substance Abuse," *Am J Drug Alcohol Abuse*, 26(1) Feb. 2000, 61-75. | ¹³ Nathanson MD, Bernard, *Aborting America*, Toronto: Life Cycle Books, 1979, p. 193. | ¹⁴ *The American Feminist*, vol. 9 no. 103, Winter 2002-2003, p.5.

Violación e incesto: los "casos difíciles"

Rape and Incest: The "Hard Cases"

Researchers David C. Reardon, Julie Makimaa, and Amy Sobie completed a nine-year study on pregnancy outcomes of sexual assault victims.

As part of their research the authors drew upon testimonies from 192 women who became pregnant as a result of rape or incest, and 55 children conceived in sexual assault. Following are excerpts from their book, *Victims and Victors*.

Pregnancy resulting from sexual assault is actually a contraindication for abortion. A doctor treating a sexual assault victim should advise against abortion precisely because of the traumatic nature of the pregnancy. The testimonies and studies quoted in this book confirm that both the mother and child are helped by preserving life, not by perpetuating violence.

Research shows that after any abortion, it is common for women to experience guilt, depression, feelings of being "dirty," resentment of men, and lowered self-esteem. These feelings are identical to what women typically feel after rape. Abortion only adds to and accentuates the traumatic feelings associated with sexual assault. Rather than easing the psychological burdens, abortion adds to them.

Kathleen DeZeeuw, whose son Patrick was conceived in rape when she was 16, writes: "I, having lived through rape, and also having raised a child 'conceived in rape,' feel personally assaulted and insulted every time I hear that abortion should be legal because of rape and incest. I feel that we're being used by pro-abortionists to further the abortion issue, even though we've not been asked to tell our side of the story."

The case against abortion for incest pregnancies is even stronger. Studies show that incest victims rarely ever voluntarily agree to abortion. Instead of viewing the pregnancy as unwanted, the incest victim is more likely to see the pregnancy as a way out of the incestuous relationship because the birth of her child will expose the sexual activity.

For example, Edith Young, a 12-year-old victim of incest, writes twenty-five years after the abortion of her child: "The abortion which was to 'be in my best interest' just has not been. As far as I can tell, it only 'saved their [my parents'] reputations', 'solved their problems' and allowed their lives to go merrily on. "

David C. Reardon, Julie Makimaa, and Amy Sobie. *Victims and Victors*. Acorn Books, Springfield, IL 2000. pp.15-17. For further information see www.afterabortion.org.