Back on Campus

As the 20th century draws to a close, college students face “rape drugs,” morning-after contraception and more at their schools.

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It was exciting for my friends and me to be in college in the '70s during the fight for the Equal Rights Amendment. Like most women, we felt limited in our choices when it came to our future. We could enter admirable vocations such as teaching, nursing and motherhood, but other professions were closed off or just on the verge of opening up to women. Like many, I got caught up in the excitement as the ERA was being championed.

I believed NOW's battle cries for equality. I shared their opposition to violence and discrimination.

But a drumbeat in the distance became louder and louder as NOW's leadership began to champion abortion—as if abortion was not a form of violence against women and the ultimate discrimination against children.

The patriarchy was replaced by a matriarchy—not true feminism.

Women were supposed to pass as men, in the workplace and at school. Pregnancy and parenting were seen as obstacles to a woman's career goals—especially on campus.

Sarah Weddington, the attorney who represented Norma McCorvey (a.k.a. Jane Roe) in Roe v. Wade, made that point during her oral arguments before the Supreme Court in 1972. Weddington stated that pregnancy could completely disrupt a woman's life, citing the many Texas schools and colleges that required a woman to quit if she became pregnant while attending school.

According to a 1996 study conducted by the Foundation of the College and University Personnel Association and the Family and Work Institute, little has changed. Although fewer colleges expel students, the number of institutions of higher education with focused work-family agendas is still relatively small, with most of those programs intended for staff, not students.

Sarah Norton, the first woman to successfully argue for women's admission to Cornell University, said in 1870, "Child murderers practice their profession without let or hinderance, and open infant butcheries unquestioned ... . Is there no remedy for this ante-natal murder? ... Perhaps there will come a day when...an unmarried mother will not be despised because of her motherhood... and when the right of the unborn to be born will not be denied or interfered with."

Feminists for Life proudly carries on a 200-year-old legacy of feminism whose core principles rightly include nonviolence, non-discrimination and justice for all.

Serrin M. Foster
President
Not Just "Emergency Contraception"

It is critical for women to be fully informed about the effectiveness, safety and function of morning-after pills before blindly accepting them as just another artificial contraceptive method.
In March 1997, the federal Food and Drug Administration ruled that the “morning-after” pill was “safe and effective” for prevention of pregnancy. Since then, proponents, including the Planned Parenthood Federation of America, have been promoting this method on college campuses as an inexpensive and effective means to prevent unintended pregnancy after sexual intercourse. Although these supporters call morning-after pills “emergency contraception,” the term is a misnomer, as the pills actually act as an abortifacient in many cases by preventing the implantation of an already-fertilized human embryo.

Morning-after pills are a potent recombination of birth-control pills containing the hormones estrogen and progesterone. The pills can be taken immediately after unprotected intercourse and up to 72 hours beyond. They do not protect against AIDS or other sexually transmitted diseases and are supposed to be used only for a “one-time” incident. The treatment schedule is one dose within 72 hours after unprotected intercourse and a second dose 12 hours after the first. These pills should not be confused with RU-486, which is a chemical abortion method used within the first seven weeks of pregnancy (although PPFA announced that they would eventually like to market RU-486 as an “emergency contraceptive” as well).

Morning-after pills work by providing a short, strong burst of hormones that may prevent pregnancy in some cases by temporarily stopping production of eggs, inhibiting transport of the egg or sperm within the fallopian tubes, or preventing fertilization—depending on the time during the menstrual cycle that they are taken. If, however, a woman conceives during sexual intercourse, the pills function by stopping implantation of the embryo in the uterus, effectively miscarrying the child. As Dr. Bruce M. Carlson of the University of Michigan notes in Human Embryology and Developmental Biology: “After fertilization, the pre-implantation embryo remains extremely vulnerable. The ‘morning-after’ pill, with its high estrogen content alters the endometrium (uterine lining) so that implantation fails to occur.” According to Wellesley College’s Morning After Pill web site, the chances of a woman’s conceiving after unprotected sex during her fertile period are as high as 30%.

The first company to market morning-after pills as such is Gynetics Inc. Its product, called Preven, is a prepackaged “Emergency Contraceptive Kit” complete with a pregnancy test and instructions. Already some pharmacies, most notably Wal-Mart Corp., have refused to stock Preven. Says FFL President Serrin Foster: “Wal-Mart’s position is really pro-woman, since the long-term effects on women’s reproductive systems and other side effects from this pill are unknown.”

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Safety is a major concern in light of the fact that the FDA made the unusual decision to accept applications for the manufacture and marketing of the drug without requiring standard drug trials. Abortion advocates are offering instructions on the use of the pills without requiring that a woman first go to the doctor. Standard medical practice dictates that a doctor review a patient’s medical history before prescribing powerful medications or that the patient give some form of informed consent. Yet Planned Parenthood is offering services such as “Dial EC,” which allows first-time patients to receive a prescription and instructions for morning-after pills over the phone with no clinic visit required. Planned Parenthood is also offering “EC-to-Go,” in which women can have morning-after pill kits to take home “just in case.”

The “just in case” mentality has raised concerns about larger issues of sexual responsibility. Says Foster, “There is no such thing as an after-sex AIDS pill.” Critics fear that morning-after pills will encourage unprotected sex. Planned Parenthood ads only reinforce that fear. Says one ad, “Just had sex? Worried about pregnancy? If you have had unprotected sex for any reason (felt too good to stop, the condom broke, unwanted intercourse, forgot to take the Pill, the diaphragm slipped out of place) emergency contraceptive pills are available which can prevent pregnancy if used within 72 hours of unprotected sex.” The fact that Planned Parenthood deals with “unwanted intercourse” so lightly is also frightening.

Princeton University’s student health clinic, jumping on the unprotected-sex bandwagon, placed a large ad in that school’s student newspaper in May in preparation for Princeton’s biggest party weekend—a weekend in which there is high consumption of alcohol. Says Foster: “Obviously the attitude has shifted from prevention to ‘Take a pill—don’t bother us with your problems.’”

Several pro-life groups on college campuses nationwide are speaking out to protest the morning-after pill while their on-campus health centers seek to promote it. For example, students at the University of Virginia are petitioning their school to stop the student health center from distributing the pill. UVA’s Student Health Director, James C. Turner, quoted in UVA’s student newspaper, The Cavalier Daily, says, “I don’t think it’s a medical abortion. I think it’s a form of contraception.” According to UVA Student Health Gynecologist Christine M. Peterson, Student Health staff prescribes the pill to several students each week. UVA’s student pro-life group, First Right, is petitioning the school on the basis that students have to pay a $99 “student health fee” as part of their tuition. First Right President Ashley Graham told The Cavalier Daily, “We don’t want our money going to something that we have a moral disagreement with.”

The University of Virginia is not alone in promoting morning-after pills. Campus student health clinics throughout the country are stocking the pills. Wellesley College and Princeton University even post their schools’ names as contacts for morning-after pill information on Abortion Clinics On-Line, a national listing of abortion clinics and abortion information providers.

**Questions of women’s health still remain unanswered.** Short-term side effects of the morning-after pill include nausea and vomiting, headaches, breast tenderness, dizziness, weakness and fluid retention. Long-term effects have yet to be determined or thoroughly studied. At the University of Colorado at Boulder, where Boulder Planned Parenthood vigorously advertises, a student described her experience to a reporter for Campus Press, saying she “felt the effects of the hormonal charge, and after taking it, she vomited the entire day.”

As of yet, there have been no reliable studies of women who gave birth following failure of morning-after pills. Supporters maintain there is no need for such studies because prior research examining births to women who took oral contraceptives after they unknowingly became pregnant found no increased risk of birth defects. However, morning-after pill dosages are dramatically higher than those of oral contraceptives—a difference comparable to that between moderate consumption of alcohol and binge drinking.

It is critical for women to be fully informed about the effectiveness, safety and function of morning-after pills before blindly accepting them as just another artificial contraceptive method. Distinctions between morning-after pills and oral contraceptives are deliberately being blurred by the morning-after pill’s promoters in an effort to market this new drug to women.

Michelle Poggi is an advertising copywriter and freelance writer who lives in Philadelphia, Pa.
REBECCA (A PSEUDONYM), a first-year college student, thought the young man was trustworthy. He was polite and observant of social graces. At the party, Rebecca remembers, "I was definitely being encouraged to drink." As she came out of the restroom into the hallway, he was there, all 6'4" of him, directing her into an adjoining room. She felt uncomfortable when he kissed her, but not scared. But then he got rough. "He forced me to have oral sex with him. He held my hair and intimidated me to where he didn’t have to use a lot of physical force. I thought, ‘Oh my god, if I don’t do what this guy says, he’s already shown that he’s going to hurt me.’ I was like a rag doll to him. He scooped me up and put me on the bed and then he was on top of me. He was so big, there was no way I was getting out from under him."

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Although she didn’t realize it at the time, Rebecca was a victim of acquaintance rape (also called “date rape”). She is not alone. According to a 1998 survey jointly funded by the Department of Health and Human Services and the Department of Justice, nearly 1 in 5 American women is a survivor of rape or attempted rape. The number of rapes on college campuses is comparable. A national survey undertaken in 1985 by Mary P. Koss (now a professor of psychology at the University of Arizona) indicated that 15% of female students on college campuses are survivors of rape and a further 11% are survivors of attempted rape. The Bureau of Justice Statistics reports that 77% of violent crimes against women, including rape and incest, are committed by someone women know. Acquaintance rape on college campuses is prevalent.

Women can attempt to protect themselves by 1) communicating clearly about what they do and do not want to do, 2) trusting their own instincts, and 3) understanding that alcohol and drugs are often related to rape. Unfortunately, caution does not always prevent attack. If a woman is raped, local sexual-assault service organizations can help. “We support the survivor in many ways. We help her work through the system, from going to the hospital to filing a police report, if that’s what she chooses to do,” says Elizabeth McCravy, community education coordinator at Sexual Assault Support Services in Eugene, Ore.

In predator cases in which the rapist first drugs his victim (often by slipping something into her drink), paying attention to the first warning signs is crucial. Flunitrazepam (Rohypnol), a sedative in the Valium family, and gamma hydroxybutyrate (GHB), a powerful synthetic drug recently promoted for body building, are used by sexual predators to render their victims defenseless. What is especially disturbing about these drugs is the memory loss that occurs, leaving the victim unable to remember what she did, or what was done to her. When mixed with alcohol, both Rohypnol and GHB can be fatal.

Rohypnol, illegal in the United States but legally prescribed worldwide, has many street names: roofies, roaches, LaRoche (for its manufacturer, Hoffman-La Roche, Inc.), ruffies, and R2. When crushed and slipped into a drink, it is colorless, odorless and tasteless. In the first 20 to 30 minutes after ingestion, drunken-like symptoms appear—confusion and impaired motor skills and speech. Within two hours, most victims lose consciousness. Said Los Angeles Police Department detective Trinka D. Porrata, in a statement before the U.S. House of Representatives Subcommittee on Oversight and Investigations, “It seems from my exposure that much of the worldwide use of flunitrazepam is abuse… . [T]he manufacturer doesn’t want to give up this drug worldwide since it generates more than $100 million per year for them.”

GHB is another extremely dangerous drug. Like Rohypnol, GHB is colorless and odorless when mixed in a drink, but it may leave a slightly salty or bitter taste. On the street it’s called Liquid Ecstasy, Grievous Bodily Harm or Liquid-G. It is often used as an experience enhancer, and it can cause heightened sexual desire. “GHB is on the rise and is a lot more dangerous (than Rohypnol),” says Bob Nichols, assistant state’s attorney and a leading drug-rape prosecutor with the Sex Crimes Unit in Fort Lauderdale, Fla. “It’s even more of a nightmare. It takes a capful of GHB to incapacitate somebody, and you can mix up a gallon with ingredients from a local hardware store for about $10.” The effects of GHB vary from person to person and can include dizziness, confusion, severe drowsiness, and loss of consciousness. Symptoms are noticeable in about 15 minutes. “It’s kind of hard to say because GHB is always a different strength,” says Nichols. “There are hundreds of recipes on the Internet, and you never know how strong it is.” According to Porrata, “GHB is perhaps the youngest in terms of discovery by abusers, though it is now literally exploding around the world.”
Among the many hot spots that Porrata lists for these rape drugs: 1) College/high school gatherings and 2) restaurants and clubs catering to 21-35-year-olds with college degrees. Because these drugs are widely used, drinks should never be shared or left unattended, and women should avoid drinking from punch bowls and other open containers. They should never accept drinks from men at bars when the drinks have not been ordered from a bartender. If a woman wakes up feeling fuzzy, experiences memory lapse, or cannot account for a period of time, she may have unknowingly ingested Rohypnol or GHB. In such a case, preservation of physical evidence is critical, and women are advised not to shower or change clothes. Traces of Rohypnol stay in the system in a detectable form for up to three days, but GHB is gone in 12 hours.

Anyone who thinks she may have been dosed with these drugs should go to a hospital for drug-toxicity testing as soon as possible. It is a mistake, though, to think that a positive test is required for police to pursue the case. “There’s a lot of undercover work that can be done,” says Nichols. “No matter how poor their recollection is, or whether they took the drugs themselves, or whatever they think of their case, I encourage victims to call the police. Because even if the police can’t do something about it, they can at least document that this particular person seems to have a history of it, or this particular bar had this occur in it. If nobody speaks up then nothing happens.”

Brett A. Sokolow, a specialist in campus safety and director of Campus Outreach Services, says, “I don’t like to call Rohypnol and GHB date rape drugs. I know everyone does, but the fact of the matter is that a lot of people who use Rohypnol to perpetrate crimes are not dates. They’re not even acquaintances. I would refer to it as a drug that is used to rape. We emphasize if you’ve had two beers and you feel like you’ve just had 10, if at any point you feel a stronger reaction to a substance than you expect to have, immediately get to a hospital. Have somebody take you and get tested. It’s not worth the risk of what might happen later on.”

Sokolow writes in “To Hear, Or Not to Hear Rape, Is the Question?:” “It is estimated that one rape occurs on every college campus in this country every 21 hours.” What is being done to address this problem? Many campuses have 24-hour hotlines. Prevention, safety and peer education programs are flourishing. Concerned women and men on campuses throughout the country have established rape awareness programs. The Campus Security Act of 1990 requires colleges to promote awareness of rape and other sex offenses. At least 70 colleges nationwide have implemented sexual assault policies and procedures from the guidebook Total Sexual Assault Risk Management Strategies for Colleges by Sokolow and Katie Koestner, founder of Campus Outreach Services. The issue of college adjudication of rape/sexual assault cases is controversial. Some administrators feel a duty to the students, while others think that hearing rape cases requires trained adjudicators. If colleges choose not to hear these cases, however, the victims lose again because the backlog for criminal rape prosecution is up to two years.

Action is being taken against acquaintance rape on college campuses, but the problem persists. The advent of drugs like Rohypnol and GHB puts even more women at risk. And although rape is a sexual act, it is actually a crime of power. The rape of women will begin to decrease only when individuals and institutions take collective action to examine and eliminate the underlying attitudes and causes.

Karen J. Gordon is a writer and FFL member living with her husband and son in Eugene, Ore. She has three children and one granddaughter.
For decades, academics at colleges and universities have accepted or imposed an abortion-choice ethic on their campuses, particularly within their women’s studies and women’s history programs. The narrowness within academia on the abortion issue has left little room for alternative views. Nonetheless, there have been lights in the darkness. FFL sought out pro-life women professors in various disciplines who have remained steadfast in their views despite the lack of openness on campus.

Elizabeth Fox-Genovese founded and directed the Institute of Women’s Studies at Emory University in Atlanta. But when she spoke at a meeting of Feminists for Life of New York and accepted a pro-life student into the women’s studies program, she was soon asked to resign. The grumbling in the department “was subtle,” she says. “Nobody ever spoke with me directly.” Although she still teaches history, literature, and women’s studies at Emory, she no longer works with undergraduates. “There’s not much discussion about life issues,” she says. “Which is a loss because students aren’t happy with only one view.”

Beth McCallister (a pseudonym), a former professor of women’s history and women’s studies who wishes to remain anonymous, found the same intolerance among her colleagues. “In the field of women’s history and women’s studies, it’s a no-no,” she said. When co-editing a women’s history anthology, her colleagues were interested only in including an abortion-choice feminist view on the abortion debate. They included a pro-life feminist essay at her urging, but only “after serious objections.” McCallister says that within academia in general, “The pro-choice view is just taken for granted. So many have known people who have had abortions that they feel it would be wrong to say anything. It creates a whole new set of complications in talking about the issue. There’s a fear of being uncompassionate.”

Barbara Newmann, an English professor at Northwestern University in Illinois, says she remembers a time in the early ’80s when a professor was rejected for tenure after becoming pregnant with twins during her tenure-review year. She already had one child. A senior faculty member said, “I trust you’ll have an abortion.” Says Newmann, “The attitude was that if she was going to have three children, then it showed she wasn’t serious.” Both the professor and the senior faculty member are no longer at Northwestern.

Teresa Collett’s colleagues advised her that talking about the abortion issue could harm her chances for tenure. “Colleagues prior to tenure counseled me vigorously to restrict my research and speaking efforts. They were concerned about how it could hurt me professionally.” The law professor at South Texas College of Law, affiliated with Texas A & M University, chose to continue scholarly legal work on the abortion issue.

Her most recent article in the Wake Forest Law Review defended the position of an attorney who did not want to represent a court-appointed client seeking an abortion. “I cited a similar case in which a lawyer who was morally opposed to the death penalty did not have to represent a client who wished to seek it.” She is currently the annual conference coordinator for University Faculty for Life.

Collett says that constitutional law classes “have typically taught Roe v. Wade as good law even though much of the scholarship which came out after the decision was critical of the judicial methods.” However, Collett says she is starting to see a shift in thinking. “There is an increasing interest in communitarianism versus radical individualism.”

McCallister and Fox-Genovese agree. “There has been a change. The mid-’70s were pretty far-out,” McCallister says. “The new generation of feminists is beginning to recognize the importance of all aspects of women’s lives. There’s a new attitude towards motherhood.”

“The new generation of feminists is beginning to recognize the importance of all aspects of women’s lives. There’s a new attitude towards motherhood.”
of women's lives. There's a new attitude towards motherhood.” Says Fox-Genovese, “There is a subtle sea change and it's real. Now is a very good time to raise awareness of life issues at colleges.”

Newmann says the change she has seen most is in the level of debate. “Twenty years ago students were more heated on the issue. During the ‘80s there was such heated debate. People got sick of the issue. People take it for granted unless challenged.” According to Newmann, “People are more likely to be open if they have a personal experience on the issue. Individuals in general are more open to experience than argument.”

Newmann’s pro-life views recently brought her an opportunity to assist an unexpectedly pregnant student. “A colleague who knew my views contacted me because a freshman student was having difficulty finding a way to stay in school and keep her baby. I was able to give her information on a local pregnancy resource center.” She says the student did complete her freshman year, “but I haven’t seen her on campus this year. I don’t know whether she’s taken a leave of absence.” In her 18 years of teaching, Newmann says that student is the only pregnant undergraduate she has ever seen on campus.

Nearly all the professors FFL spoke with agree that there are few resources for pregnant and parenting students on campus. “Emory has day care, but it's expensive,” says Fox-Genovese. Said McCallister: “The student health center promotes abortion.” Both Fox-Genovese and McCallister would like to see Pregnancy Resources Forums at their schools.

All these professors are on the front lines teaching future leaders and educators. Their own courage to think and act independently is a lasting example to their students.
FOR THE PAST TWO DECADES, Planned Parenthood Federation of America and other abortion providers have placed abortion clinics close to college and university campuses. College-age women continue to account for more than a fifth of all abortions in the U.S. Yet there is a growing indifference to or rejection of abortion-choice ideology among college-age women and men. Therefore, abortion-rights groups have stepped up efforts in the past two years to target college-age women and men through a massive media and outreach campaign.

Titled the Pro-Choice Public Education Project (PEP), it specifically targets “young women ages 16-25,” according to PEP press releases. In an essay on PEP’s web site titled “Choice On Our Own Terms: Young Women Speak Out About the Reproductive Rights Movement,” PEP’s college interns acknowledge the reason for the new campaign: “Most involved in the reproductive rights movement today were alive before abortion was legal.” The abortion-choice movement is losing a generation of activists. So they are doubling their efforts to recruit college women.

PEP’s steering committee includes the National Abortion and Reproductive Rights Action League (NARAL), Planned Parenthood and the Robert Sterling Clark Foundation. Its leadership council is composed of organizations such as the National Education Association and the American Association of University Women—an organization of 160,000 university professors and staff.

The Center for Gender Equality, headed by former commissioner a survey of women’s attitudes about found the results of her own survey “disturbing restrictions on abortion, and 53% opposed all abortions of rape or incest or to save the mother’s life.
PEP's first efforts to target college-age women began in 1997 with ads on MTV that reached cable markets throughout the U.S. One ad shows a young college woman nervously waiting for the results of a pregnancy test. The voice-over begins: “Yesterday, she was worried about mid-terms, paying for her education and her big game. Today (pause)…What would you do?”

The follow-up to the MTV ads has been a blitz of print ads on subways, buses and university campuses throughout New York, New Jersey and Connecticut. According to PEP organizers, campuses and public transportation in these three states are being used as a testing ground for a national blitz because they provide “a highly concentrated and diverse population of young women ages 16-25.” One ad shows a Volkswagen, a lava lamp, platform shoes and a wire hanger and reads; “Of all the things from the ’70’s to make a comeback, there’s one we really hate to see.” Many ads feed on women’s fears. None offer resources or support nonviolent choices such as marriage, single parenthood or adoption. All of them underestimate women.

Others reinforce anti-male stereotypes often attributed to feminists. One, titled “Geek,” contains a series of identical pictures of a greasy-haired man with big glasses. The tag line says: “Pick a boyfriend. Not having a choice sucks, doesn’t it?” Another features grumpy-looking older white men in suits and ties. Planned Parenthood director Faye Wattleton, in an interview with The American Feminist, said that 70% of women wanted to see more reproductive choices or would make exceptions only in cases of rape.

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states a false statistic: “77% of anti-abortion leaders are men. 100% of them will never be pregnant.” Interestingly, the members of the creative team at DeVito/Verdi, the New York ad agency that designed the spots, were all men who wanted to bring “humor” to the abortion issue. Once these ads reach colleges on a national scale, few students will be able to escape them.

Although PEP is one of the largest pro-choice outreach campaigns ever launched to target college women, organizations such as NARAL have had their own college outreach programs since as early as 1989. NARAL’s Campus Organizing Project joined with the United States Student Association a decade ago to form coalitions on college campuses, motivate student activists, and organize leadership training sessions. (PEP’s leadership council includes Medical Students for Choice.) “I’ve been so worried about how to reach young women,” NARAL President Kate Michelman told The Washington Post in 1998. “NARAL’s membership is old; the average age is 55 or 60.”

The lack of available resources for pregnant and parenting students, coupled with university staffs pushing an abortion choice ethic on campuses, leaves the post-Roe generation bombarded with pro-choice ideology and few life-affirming alternatives.

Yet the intolerance for alternative views may not have had the effect abortion-choice advocates intended. In “Choice On Our Own Terms: Young Women Speak Out About the Reproductive Rights Movement,” PEP’s interns confess, “Too many young people perceive pro-choice activists as extremists…” Perhaps the post-Roe generation, whose mothers and friends have experienced the tragedy of abortion, are looking beyond the rhetoric and deciding that women deserve better than “humorous” ads about the complex issue of abortion.

The American Council on Education and the Higher Education and Research Institute at UCLA conducted a 1998 survey of 275,911 first-year students on 469 campuses across the country. The survey found that less than 51% favor keeping abortion legal—the lowest level in more than two decades.

A 1996 Gallup Poll found that women with a high school education are more pro-life (47%) than pro-choice (37%), while those who have attended college but not completed a four-year program are more pro-choice (59%)—an increase in the pro-choice group of 22 points. The margin of pro-choice over pro-life responses is even greater among women who have completed a four-year college program—73% to 24%.
ENERGIZED BY FFL PRESIDENT Serrin M. Foster’s presentation of “The Feminist Case Against Abortion” at Rice University in April, student leaders plan to host a Pregnancy Resource Forum at the university during the spring 2000 semester. According to Mize, the College Outreach Program has given her group “attainable pro-woman, pro-resource goals to work towards … [the College Outreach Program] was the missing link for Rice for Life to go from wondering how to make a difference to making important changes.”

Students at the University of California-Berkeley also plan to host a Pregnancy Resource Forum. Foster presented “The Feminist Case Against Abortion” there in November 1998, to an enthusiastic crowd of both pro-life and pro-choice students. Pro-life student leaders are working to dispel the myth that having a child while in college marks one as a failure. At UC-Berkeley, as at many other schools, the drive to succeed is strong; students and administrators often see pregnancy as a major setback to a woman’s academic and social life.

“It doesn’t have to be,” says Foster. Her lecture at Texas A&M University in College Station, spurred weeks of discussion in The Battalion, the university’s student newspaper and The Bryan-College Station Eagle, a regional newspaper. Letters to the editor and opinion pieces poured in and sparked conversations among students and faculty alike. One writer to The Bryan-College Station Eagle wrote, “Abortion has been tried and it has failed. Let us get on with real solutions.” Brazos Valley Coalition for Life Executive Director Lauren Donohue (who helped organize Foster’s visit) summed up the group’s desire to work with advocates of abortion choice to provide resources on campus for women and children, saying, “We are talking about similar, almost identical problems, and are trying to provide women with the best solutions for their situation.”

“The presentation made me realize that I want to take a stand against abortion.”
—Karin Koerbel* junior, University of California-Berkeley

“I am pro-choice and found your presentation very interesting.”
—Jasmine Robinson* sophomore, University of Pittsburgh

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FFL's College Outreach Program Components

Across the country, both pro-life students and advocates of abortion choice have reacted with enthusiasm to FFL's College Outreach Program. The different phases of the program address the problems faced by pregnant and parenting students, and unite administrators, students and faculty to provide resources for pregnant and parenting students.

Pregnancy Resource Kits
These kits—with different versions tailored for clinic staff, counselors, student groups, pro-life advisors, FFL leaders and other concerned individuals—include materials such as detailed counseling guidelines, pregnancy resource Rolodex cards, information on child support, and FFL's You Have Choices brochure.

Feminist History Kits
FFL's Feminist History Kit fills a critical information gap in our institutions of learning. Targeted to libraries, women's studies professors and women's resource centers, this kit includes the book Pro-Life Feminism: Yesterday and Today, FFL's women's history poster and a one-year subscription to The American Feminist.

The Feminist Case Against Abortion
This dynamic presentation, delivered by FFL President Serrin M. Foster and other trained speakers, shares the rich history of pro-life feminism and outlines the future of pro-life feminism for the next millennium. Through this presentation, FFL speakers have educated audiences and sparked dialogue at college and universities across the United States, Canada, England and Ireland.

Pregnancy Resource Forum
These forums bring together students, faculty and administrators to assess campus and local resources for pregnant and parenting students—and create new solutions. Preceded by "The Feminist Case Against Abortion" lecture, these forums provide a blueprint for action on campuses.

Posters and Ads
This series of posters and ads helps students “Question Abortion,” educate campuses and communities on key issues, create interest in upcoming speeches and forums and publicize FFL's web site as a source for more information.

You can order one of FFL's College Outreach Program kits for your alma mater, a local university, or wherever the need is greatest by filling out the order form on the back cover of The American Feminist. To schedule a speaker, please contact FFL Public Education Coordinator Molly Pannell at 202-737-FFLA or FFLCOP@aol.com.

"Sweeter even than to have had the joy of caring for children of my own has it been to me to help bring about a better state of things for mothers generally, so their unborn little ones could not be willed away from them."
—Susan B. Anthony

"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."
—Mattie Brinkerhoff
The Revolution 3(9):138-9, Sept. 2, 1869
“If we truly care about the rights of women, the very least we can do is make carrying pregnancy to term a realistic choice,” says Kathryn Getek, past president of the Ivy League Coalition for Life and a 1999 graduate of Princeton University. Pro-life students at Princeton distributed FFL’s You Have Choices brochure to Princeton’s 4,500 students on campus. The brochure highlights practical alternatives to abortion for students and provides contact information for pregnancy resource organizations. Getek says the You Have Choices brochure “on college campuses, for the most at-risk population, approaches the matter in terms that make people listen.”

In the spring 1997 semester, Foster moderated a Pregnancy Resource Forum at Swarthmore College in Swarthmore, Pa. At that time, the college had no college-wide policies regarding pregnant and parenting students and commonly referred pregnant students from the health clinic to local abortion clinics. Co-sponsored by Swarthmore’s Pro-Choice Task Force and Swarthmore Students Advocating Life, the Pregnancy Resource Forum established a set of objective goals for students, faculty and administrators to work toward. Since that time, students and administrators have set up a child care task force to establish on-campus child care for students, faculty and staff. The task force includes members of the campus feminist group, the women’s center and representatives of Swarthmore Students Advocating Life.

“What Students Can Do

Pro-life students provide an essential link to help provide resources to pregnant and parenting students. If you are a college student (or if you know a pro-life college student) here are some things you can do:

- Join—or start—a campus pro-life group.
- Schedule an FFL lecture. Student leaders should contact FFL Public Education Coordinator Molly Pannell at 202-737-FFLA or FFLCOP@aol.com.
- Join FFL! Student membership is just $15.
- Request a College Outreach Program kit for your campus. Parents, alumni and FFL members can sponsor a kit at a college or a student’s membership (see order form on back cover).

“The FFL lecture was great—I especially like the idea of bringing together pro-life and pro-choice groups to solve the problems which cause women to seek abortion.”

— Leticia Fisher*, freshman, Stanford University

“FFL offers women a choice,” says Jena Saporito, a Georgetown University student and intern at FFL’s national office. Georgetown, in Washington, D.C., was the site of FFL’s first Pregnancy Resource Forum and has served as a testing ground for all phases of FFL’s College Outreach Program. Over the past four years, students at the university have hosted Foster’s presentation of “The Feminist Case Against Abortion,” distributed FFL’s You Have Choices brochure to students, and worked with local pregnancy resource centers to increase awareness of resources for students. Since the Pregnancy Resource Forum, student leaders have worked closely with administrators to provide housing for pregnant women, full-time staff for the university’s Pregnancy Services office, and awareness of both on- and off-campus resources. The Pregnancy

continued on next page
Services office provides housing and financial assistance, academic support, adoption resources, and support groups for single mothers. The university's Pregnancy Services committee includes students, administrators, faculty and representatives from local pregnancy resource providers. According to Saporito, the Pregnancy Services office has introduced “a family housing program in which young women — pregnant or with young children — are able to have campus housing...additionally, scholarships have been given to the children of students to enable them to attend Georgetown’s day-care center.”

At these and other colleges and universities, FFL’s College Outreach Program is bringing together students, administrators and faculty to provide women with real choices on campus. And, according to Mize of Rice University, FFL’s program “is the approach that has the power to change the obstacles pregnant women face on campus.”

“FFL isn’t about putting a band-aid on the problem, it’s about eliminating the reasons that women have abortions.”
— Matthew Porter*, senior, University of Notre Dame

* pseudonyms for respondents to FFL's Pregnancy Decision Questionnaire
WE REMEMBER

Jane Doe
1973 – 1993

On June 16, 1993, Jane Doe of Newark, NJ, bled to death in a Bergen County hospital, several hours after abortionist Steven Berkman performed an abortion on her. Doe, a 20-year-old college student and the mother of a four-year-old boy, underwent the abortion on the morning of June 16 and started feeling dizzy in the recovery room. Two hours later, after Berkman examined her and realized he had perforated her uterus, his staff called an ambulance and Jane was taken to a nearby hospital. Jane’s family’s lawyer accused the staff members at the abortion facility of delaying the call for an ambulance for Jane. It is this delay which likely led her to bleed to death. “We had a healthy 20-year-old go into that clinic and not come out,” the attorney for Jane Roe’s family said. “And I think a delay had something to do with it.” Jane died before sundown, leaving behind a promising college career, a grieving family, and a motherless little boy.

Sources: Hackensack Record, July 16, 1993

Attention Federal Employees!

If you or a friend or relative is a federal government employee or is in the military, you may make a donation to FFL through the Combined Federal Campaign. CFC donors provide essential support for FFL's Education Project, including FFL's innovative College Outreach Program.

FFL's Education Project is CFC #1907 (located in the Women’s Charities of America section of the CFC directory).

Electronic Transfer Form

Help FFL Help Women and Children! Your monthly electronic donations provide essential support as FFL works to bring about positive change for women and children. Electronic donors receive quarterly President reports, detailing FFL’s progress. To begin your monthly contributions, simply fill out the electronic transfer form and send it (along with a voided check) to FFL. It’s that easy! Donations will be debited on the first business day of each month and will be put to work immediately by FFL. Your participation helps FFL continue the tradition of the early feminists—pro-woman and pro-life!

I want my bank to transfer monthly donations to Feminists for Life of America. My authorization to charge my account at my bank shall be the same as if I had personally signed a check to FFLA. This authorization shall remain in effect until I notify FFLA, or notify my bank in writing that I wish to end this agreement, and my bank or FFLA has had a reasonable time to act on it. A record of each charge will be included in my regular bank statements and will serve as my receipt.

$_____________Amount of monthly pledge ($5 minimum).

Name ____________________________________________

Address ___________________________________________

City_________________________State_________Zip______

Phone: Day(____)______________Eve.(____)_____________

Signature__________________________Date____________

Please enclose a voided check from your account to show the bank’s address and your account number.

Send to: Feminists for Life, 733 15th Street, N.W., Suite 1100, Washington, D.C. 20005.

Electronic fund transfers will begin immediately upon receipt.

Thank you!

Membership

Is your FFL membership up-to-date?

Check the address label on the back cover of THE AMERICAN FEMINIST to see if it is time to renew your membership in Feminists for Life of America.
IN THE 19TH CENTURY, the unique powers of the female body were not celebrated, but despised as barriers to intellectual and public achievement. We know little today about the lives of Sarah F. Norton and Eliza Bisbee Duffey, but we do know that they, like other early feminist leaders, identified this view of the female body, and the discrimination it rationalized, as the real impediments.

Norton, a novelist and lecturer, often challenged gender-based economic disparities. She questioned the practice of marriage as the husband’s economic ownership of the wife. As president of the Working Women’s Association, she discovered that about half of New York City ragpickers were female. She wryly concluded, “This is the only business in which women have equal opportunities with men.”

Pointing out that children were not the property of their parents, to be denied schooling and forced to work at very young ages, she advocated compulsory education for both sexes. “If, by this means, every boy and girl could both be educated and made self-supporting…would it not be better for both parents and children?”

In 1869, Norton teamed up with Susan B. Anthony to “assail that stronghold of feminine prejudice, the Cornell University,” an institution quite typical in its refusal to admit women. Fortunately, Norton and Anthony won a sympathetic hearing from university founder Ezra Cornell, who began admitting women the next year.

Harvard Medical School professor Edward Clarke led a backlash against such changes. His highly influential book Sex In Education (1873) insisted that the rigors of higher education would cause women to suffer from such dire problems as prolapsed uteri, menstrual disturbances, hysteria and (perhaps most horrible of all) “abnormally active cerebration.” Many feminists could not resist the opportunity to challenge Clarke. Author Eliza Bisbee Duffey responded with a spirited book titled No Sex In Education. Clarke, she said, professed to be protecting women, but was actually furthering “those who oppose the advancement of women.”

In Duffey’s view, women deserved not only equal access to education, but also “a thorough acquaintanceship with the organs and functions of their own bodies, in order that they may guard against disease and suffering in themselves and that they may bring forth healthy children.” Her sex-education manual, What Women Should Know, was acclaimed by the likes of Elizabeth Cady Stanton and Julia Ward Howe.

Duffey risked legal prosecution to provide women with such information. As part of this work, she firmly opposed abortion, believing that “no one has a right to jeopardize a life which has already begun ever so brief an existence.” She saw abortion as the result of men’s irresponsibility and coercion, the dreadful mistreatment of single mothers, and women’s enforced ignorance about their bodies and about those of their unborn children. Like many women, she once felt there was no real harm in abortion—“until I became thoroughly acquainted with sexual physiology and comprehended the wonderful economy of nature in the generation and development of the human germ.”

In her Relations of the Sexes (1876), she demanded respect for women as moral agents: “Knowledge among women will do much towards decreasing this crime” (meaning abortion). “Do not be content to tell women it is wrong, and then stop there. Women are impatient of being treated like children, or unreasoning beings; nor do they like to be dictated to. Tell them the how and the why of the whole matter, and they will discover the wrong themselves, and feel the full force of it, far more than they ever can by taking it merely on the say-so of men.”

Sarah Norton offered a similar view of abortion as “antenatal child murder” stemming from women’s oppression. She looked forward to the “blessed time” when motherhood would be truly supported and “when the right of the unborn to be born will not be denied or interfered with.”

That “blessed time” has not yet arrived. Women certainly have more educational opportunities than in the past, but continue to struggle with no-win “choices” between motherhood and simple economic survival, let alone professional achievement. These “choices,” especially abortion, are still presented as an inevitable consequence of women’s “defective” biology. As Sarah Norton and Eliza Bisbee Duffey recognized so long ago, women deserve other and better possibilities.

Mary Krane Derr was a 1980 Telluride Scholar at Cornell. She graduated from Bryn Mawr in 1985—its centennial year—and gave birth to her daughter in 1987.
**Teaching Intolerance**

Pro-life college students face mounting pressure not only from unfriendly administrations and professors but also many times from fellow students. In the spring issue of *commonQuest*, columnist Nat Hentoff writes, “As I have gone to various campuses...I have been struck by the intensity of the students, most of them liberal, who insisted on the urgency of punishing ‘bad’ language. ...Students were also bitterly intolerant of views they themselves did not hold.” Hentoff goes on to write that “in other colleges, pro-life students have been mocked and scorned.” Alan Dershowitz, a Harvard law professor, echoed Hentoff’s views, saying, “I am appalled at the intolerance of many who share some of the views I myself hold.”

*The Washington Times, May 6, 1999*

**British Feminist Speaks About Roe v. Wade**

Germaine Greer, noted feminist and author of *The Female Eunuch*, asserts in her recent book, *The Whole Woman*, that the Supreme Court’s *Roe v. Wade* decision is a tool of an insensitive male medical system eager to make money from women’s suffering. In her chapter on “Mothers” Greer writes, “It may be that persecution of mothers is a permanent feature of patriarchal societies, but at the end of the millennium contempt for the mothers seems to have assumed a new dimension.”

*The Washington Post, June 12, 1999*

**Child Custody Protection Act**

On June 30, 1999, the House passed the Child Custody Protection Act (HR 1218). The act makes it a federal offense to transport a minor girl across state lines to obtain an abortion if this action circumvents the parental involvement law of the girl’s home state. The prohibition does not apply when the abortion is necessary to save the minor’s life.

FFL President Serrin M. Foster joined sponsors Rep. Ileana Ros-Lehtinen (R-FL) and Rep. James Barcia (D-MI) and representatives from National Right to Life Committee, Mothers Against Minors Abortions, the Susan B. Anthony List and other pro-life organizations in speaking out in support of the Child Custody Protection Act. According to Foster, “The abortion industry often pits women against their unborn children. By opposing CCPA abortion advocates pit women against their teenage daughters.”

Senator Spencer Abraham (R-MI) introduced the Child Custody Protection Act (S. 661) in the Senate where it has 23 cosponsors.

**U.S. Funding for Coercive Abortion in China**

Pro-life amendments to the American Embassy Security Act—originally titled the Foreign Relations Authorization Act—failed on July 20, 1999. Pro-life representatives Chris Smith (R-NJ) and James Barcia (D-MI) offered an amendment to the legislation prohibiting funding of the United Nations Population Fund, known as UNFPA. UNFPA has been deeply involved in supporting and promoting a one-child per couple family planning policy in the People’s Republic of China. This policy is enforced through coercive abortion and compulsory sterilization.

The legislation authorizes $25 million for UNFPA as long as no U.S. money goes to China. Yet money supporting UNFPA’s program in any way inevitably supports the whole program—including coercive anti-woman abortion policies in China.

U.S. funding of UNFPA was cut off from 1985 through 1992 due to the agency’s support of coercive abortion practices in China. However, in 1993, the Clinton administration directed U.S. funding of UNFPA to resume. In 1998 Congress was successful in restoring a prohibition on UNFPA funding.

**Contacting Congress**

Call the Capitol switchboard: 202-224-3121

or write to:

The Honorable___________
U.S. Senate
Washington, DC 20510

The Honorable___________
U.S. House of Representatives
Washington, DC 20515
**Victory Over Violence**

Your “Victory Over Violence” newsletter issue was fabulous. I myself am a rape survivor and it hit home in many ways, sometimes bringing me to tears. I still reread many of the stories.

A few years ago I was in a brief but abusive relationship with a man who raped me several times. I was lucky enough to have never gotten pregnant but I’m so glad you consistently remind the rest of the pro-life community that raped women do get pregnant. And like you pointed out, many aborted women do not reveal that they’ve been raped. Often this is because they have not yet defined the “sex” as rape. I can relate to them. It took me almost two years to affirm my intuitive perception that I had been raped; that I in no way asked for it or wanted it.

My biggest fear surrounding pregnancy was that the rapist would pressure me into having an abortion. He knew I was pro-life and that an abortion would drive the final nail into the coffin of my spirit, which was then flattened from being treated like an object. Though we were dating, I clearly meant nothing to him and the coercion would have been relentless. Almost two years later, when I was strong enough to come out of denial and the rapes came to the surface, I realized how much he feared I would press charges (which I have since done) and that a baby would have been evidence.

However, I am also aware of the common perception that any woman pregnant from rape would have an abortion. This prejudice would certainly have hurt my case and must present a cruel hurdle in the legal actions of rape survivors who did become pregnant. I am already dealing with enough people in the legal system who apparently do not believe me or believe my rape to be a “lesser” form of rape because the perpetrator was a boyfriend. It is vital that we as pro-life activists offer ourselves as advocates for all rape survivors, particularly those who become pregnant. I also call on my fellow anti-rape activists to openly acknowledge that one does not have to be pro-choice to affirm our rights as survivors to make our own decisions to regain control over our lives.

As a survivor active in both the pro-life feminist and rape crisis movements, I contend that if we all work together, we can achieve our shared goals of a world without rape and universal respect for all survivors.

**Anonymous**

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**Check out FFL on the Internet:**

[www.feministsforlife.org](http://www.feministsforlife.org)

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**Feminist Message, Feminist Solutions for Today’s College Students**

**FFL President Serrin M. Foster** will present “The Feminist Case Against Abortion” at the following location:

- University of San Francisco, November 20, 1999

Foster will moderate Pregnancy Resource Forums at the following locations:

- University of Notre Dame, South Bend, Indiana, September 28, 1999
- University of Kansas, Lawrence, Kansas, October 5, 1999

**FFL Public Education Coordinator Molly Pannell** will present College Outreach Program workshops at the following locations:

- Right to Life of Michigan Annual Conference, Detroit, Michigan, September 25, 1999
- Pregnancy Support Providers of Maine, Portland, Maine, October 17, 1999

Pannell will present “Feminists for Life: Women-Centered Solutions” at the following locations:

- Holy Family College, Philadelphia, Pennsylvania, October 25, 1999
- Washington Semester Program, American University, Washington, D.C., November 10, 1999
**Membership/Subscription**

Indicate number of items:
- $25 Annual Membership ( _ new _ renewal)
  includes “Pro Woman, Pro Life” bumper sticker and *The American Feminist*
- $25 Gift Membership (may not be anonymous to the recipient)
  Name of recipient:_____________________________________
  Address:____________________________________________
  City/State/Zip:________________________________________
- $15 Student Membership ( ___________ graduation date)
- $15 Student Gift Membership
  (may not be anonymous to the recipient)
  Name of recipient_____________________________________
  Address____________________________________________
  City/State/Zip________________________________________
- $35 *The American Feminist* subscription only,
  non-membership/institutional
- $30 Annual Membership Outside U.S. (U.S. currency, please)

$5.00 ea. Back issues of

**The American Feminist**

Indicate number of issues:
- Is Life Always Worth Living?: Assisted Suicide and Euthanasia
  Summer 1999
- Unplanned Pregnancy: You Have Choices
  Spring 1999
- Remarkable Pro-Life Women
  Winter 1999
- Victory Over Violence: Rape, Incest and Domestic Violence
  Fall 1998
- Work vs. Family: The Struggle to Balance Career & Family
  Summer 1998
- The Bitter Price of Choice: The Aftermath of Abortion
  Spring 1998
- She’ll Ask. Don’t Tell: Women’s Right to Know
  Winter 1997-98

**College Outreach Program**

**Send a Kit to Campus**

Indicate number of items:
- $35 Health Clinic Kit
- $35 Pro-life Collegiate Kit
- $35 Pro-life Advisor Kit
- $35 Campus Counselor Kit
- Pregnancy Decision Questionnaire (Free with SASE)

Please send kit to where the need is greatest
- A college of my choice

Name of kit recipient_____________________________________
Title___________________________
College_________________________
Address_________________________
Phone (          )                        day (          )                           eve
E-mail address_____________________

**Materials** Indicate number of items:
- $14.95 *Prolife Feminism Yesterday and Today*  
  (anthology of pro-life feminist essays)
- $17.50 *Swimming Against the Tide: Feminist Dissent on the Issue of Abortion* 
- $15 Different Voices
  (anthology of pro-life feminist essays)
- $2 “Peace Begins in the Womb” bumper sticker
- $2 “Question Abortion” bumper sticker
- $2 “Voices of Our Feminist Foremothers” poster
- $4.95 *Man’s Inhumanity to Woman*  
  (essays by 19th-century feminists)
  “You’re Not Alone” brochures:
  50 for $5; 100 for $10; 250 for $20
- What Women Really Want” brochure:
  Free with a self-addressed stamped envelope
- “You Have Choices” brochure:
  Free with a self-addressed stamped envelope
- $75 FFL Logo Pin
  _ sterling silver
  _ 24K gold plate over sterling

**Donations**

- Monthly pledges
  __ Please send monthly donor envelopes
  __ Electronic transfer form; see page 19.
  __ Tax-deductible donation to Feminists for Life

+ 15% shipping and handling for materials

$ TOTAL ENCLOSED

Please print:  __ Indicate if new address

Name_____________________________________________
Address____________________________________________
City/State/Zip________________________________________
Phone _____________________________________________
E-mail address_______________________________________

Please use enclosed envelope or mail to:
FFLA, Dept. 0641, Washington, DC 20073

Thank you!

GF9/99

**ORDER FORM**
Who’s afraid of Feminists for Life?

Planned Parenthood, the nation’s largest abortion provider, is warning its staff that Feminists for Life’s College Outreach Program is “the newest and most challenging concept in anti-choice student organizing” and “could have a profound impact” on college campuses “as well as Planned Parenthood’s public education and advocacy efforts.” *

Why the alarm? Every time a woman rejects abortion, Planned Parenthood loses revenue. Feminists for Life is empowering college women, the group at highest risk, with life-affirming choices and resources such as:

- On-Campus Housing & Child Care
- Maternity Coverage in Student Health Care
- Free help at Pregnancy Care Centers
- Paternity Establishment & Child Support

Pretty scary stuff.

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* Planned Parenthood’s newsletter, INsider, Spring, 1997