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OF AMERICA

THE
AMERICAN
FEMINIST[®]

MANIPULATION

Shattered Dreams | False Choices | Eternal Hopes

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THE AMERICAN FEMINIST®

A publication of Feminists for Life of America

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Established in 1972, Feminists for Life of America is a nonsectarian, nonpartisan, grassroots organization that seeks real solutions to the challenges women face. Our efforts are shaped by the core feminist values of justice, nondiscrimination, and nonviolence. Feminists for Life of America continues the tradition of early American feminists such as Susan B. Anthony, who opposed abortion.

Feminists for Life of America recognizes that abortion is a reflection that our society has failed to meet the needs of women. We are dedicated to systematically eliminating the root causes that drive women to abortion—primarily lack of practical resources and support—through holistic, woman-centered solutions. Women deserve better than abortion.

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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 THAT SHE HAS BEEN GREATLY WRONGED.

—Mattie Brinkerhoff,

The Revolution, 2 September 1869

FEMINISTS FOR LIFE
OF AMERICA

INTRODUCTION

MANIPULATION IS SEDUCTIVE



It can start slowly, sweetly—or sneak up with brutal force. It is artfully executed but always twisted and never for the benefit of those who are seduced.

The best manipulators twist their victims' vulnerabilities and make them believe it's their choice—while others make it clear that they have no choice at all.

The experiences shared within these pages—and the tactics of manipulators—may feel extreme to those of us who haven't walked in their shoes. So let me begin with thanks to all who shared truths with our outstanding writers—and a **warning to sensitive readers**. The following pages contain stories about those in “adult” entertainment, those who have worked in abortion clinics as well as clients coerced into abortions, and an international story of interpersonal violence. But it happens every day to women, teens, and girls in many forms.

In addition, we analyze Planned Parenthood's internal training for abortion workers—as well as laws to protect women from coerced abortions.

Some don't make it, and we remember one young woman who died on her son's first birthday.

To every woman we say, **don't allow yourself to be their prey**. There is hope, there is healing, and you will find no judgment here—only support. And ultimately, when you find the way back, you will find joy—perhaps by helping someone else who now walks on your former path.

Let us be the light helping to identify and ultimately protect them from manipulation in its many forms.

Because women deserve better,

SERRIN M. FOSTER
PRESIDENT

A woman with long dark hair is shown in profile, looking upwards. The background is dark with many out-of-focus, glowing bokeh lights in shades of blue, green, and white, suggesting a night cityscape or a festival. The overall mood is contemplative and hopeful.

SELLING OUR SISTERS: DESTROYING THEIR DREAMS

JOYCE MCCAULEY-BENNER

DREAMS

We sat in the car talking. It was a late summer evening, and Amy* was tired from a long day of running from appointment to appointment, trying her best to check off the neverending to-do list that Child Protective Services had set up for her.

She loved her kids, but it was taking a toll on her; I was there to offer case management and support.

We chatted about our dreams. She said she had never had a female friend before. She was always on edge, waiting for me to turn on her or turn her in.

I was incredulous that she would think I would.

I told her it was one of my dreams to see the northern lights in Alaska.

Now it was her turn to look incredulous.

She laughed. "I grew up in Alaska. Watched the northern lights all the time."

And with that, she got out of the car and headed inside the sobriety house where she was staying.

She left me stunned.

And we both checked down the street to make sure old pimps or johns were nowhere around. She was safe. For now.

THE INDUSTRY OF MANIPULATION

From Hollywood movies and advertisers to music videos and books, mainstream porn is everywhere. We have already slid so far down the slippery slope that what used to be taboo is now merely met with a shrug. Porn is manipulated to look easy, fun, and harmless. Countless jokes abound. It's about choice, people say. Your choice to work in it, your choice to buy it or your choice to view it. Choice is a simple word with complex meaning.

I met Rosie* in her house on a fairly quiet residential street. From the outside, nothing seemed that different. Rosie was in her 40s, had a mild learning disability, and had only ever worked in a prostitution ring. As a young teen, she grew up poor and had no interventions at school. It was easy for her to drop out, and she liked the security and lifestyle her pimp provided her. She knew nothing else. When her caseworker told her to apply for some "real jobs," Rosie stared at her blankly. She was the "bottom bitch," meaning the pimp's right hand woman: the woman in charge. It was her job to keep the other women in line and show them how everything was done.

Rosie was her birth name, but no one ever called her that. Her street name, Starlight*, was how most knew her. If you called her Rosie, you were clearly not in the game (meaning not part of the industry), and immediately, defense mechanisms were put up.

The house was clean and decorated with a piranha fish tank, a pit bull guard dog, and paintings of a pimp in all his glory. She had her pimp's name tattooed on her, a sign that she was owned by him. She had four boys by him, and this was seen as great status. She was allowed to maintain her pregnancies because they were going to be future pimps. Daughters would have been future bottom bitches. A trick's baby though, or a john's, probably would have ended in abortion.

When you were around Rosie, she presented what was to her a normal life. She could not understand why Child Protective Services took her sons away when no one ever intervened in her young life where rape and abuse were common. She did not do hard drugs. Most pimps won't allow them, since the girls start caring more about the drug than making money for the pimp. "I'm a good mom," she would tell me. "My kids have the best clothes, food. I love them."

She couldn't see that it wasn't normal that her 4-year-old was already swearing and threatening adult women, or that the toddler could have lost his finger in the piranha tank, and that exposure to constant danger was not in their best interest.

"But it's all I know. I don't know how to live any other way."

BLURRED LINES

Family Guy, the TV show chock-full of controversial pop culture parodies, tackled this issue with a tongue-in-cheek point:

"All right. Let's do it," the man says, handing cash to a woman, apparently a sex worker, as they stand in front of the bed in a seedy motel room.

Suddenly, the police kick open the door and draw their guns, and the man and woman raise their hands. One officer exclaims, "Both of you are under arrest for prostitution!"

"It's not prostitution," the man says.

"You paid her to have sex!" the officer responds.

"No, I paid her to have sex, and we're filming it," the man replies, gesturing toward a camera. "So, technically, it's not prostitution; it's a porno."

"Oh," the officer says, and he and his partner put their guns away. "Well, as long as you're filming and selling it, it's legal! Enjoy your day. Remember, kids: She's not a whore, if she's an actress."

Although simplified, the scene points to the blur that happens in the industry. Those on the outside think that the boundaries are clear. Street-based prostitution is illegal, and those women are "whores." Dancers in a strip club are just trying to make extra money. Trafficking is illegal, and those involved should be prosecuted. Actors in porn films are doing it by choice.

“

**Fantasy is what profits.
Reality is what costs.**

”

The reality is that those lines are much more blurred. A young girl may be lured into a trafficking ring. Assuming she is never helped, she will grow up in it. She might become a bottom bitch, and in that case, she may be prosecuted along with the pimp if the prostitution ring is busted.

Conversely, she may be kicked out by the pimp years later and, having had no intervention, may turn to street-based prostitution, which may lead to a life of jail time and drug use.

Or perhaps the pimp may put her in a strip club where illegal prostitution could be occurring in the back.

If she tries to break out on her own, she may turn to porn movies.

The industry is a masterful web that entangles many people. Once in, it's hard to get completely out, and nothing is ever what it seems.

Fantasy is what profits. Reality is what costs.

I remember first seeing Jessica* in a picture from the strip club. She was made up and beautiful, certainly a college-age woman. I was confused why we were going to her mom's house.

Jessica's mom was overwhelmed. She had four young children and she said Jessica was her oldest. She lived on a minimum-wage job and said her work kept her from keeping a good eye on Jessica.

She told us Jessica was 14. In the eighth grade.

Later, when Jessica got home, I met the shy girl who loved pink ribbons and bubble gum and carried a backpack like any girl in junior high.

I could not wrap my head around that this was the same girl in the picture from the club.

She had been lured to work there with money, jewelry, and attention. She knew her mom needed the help.

Her mom had no idea.

Many girls leave their families—even before they are mothers themselves—and find sex work to help out at home. Jessica knew this was her reality, and someone preyed on her, exploiting her and her mom's desperation.

But Jessica had no idea until it was too late, that more than just dancing would take place and that people knew and purposefully made her look older (and therefore "legal"), in order to offer a 14-year-old for secret, select customers.

The police were already involved in the case and we had hope to believe that Jessica would get out, especially now that her mom knew.

If only Jessica were the only one.

In some ways, Jessica was lucky. Her situation was discovered before it escalated. Most girls like Jessica start out in origin cities, which are places where traffickers find victims. Origin cities, like Jessica's hometown, are often beset with complex problems, places where racism, poverty, lack of opportunities, and key infrastructure intersect. Origin cities are often near main interstates, waterways, railways, and bus lines, all easily accessible to get to the destination cities or events, such as conventions and sporting events. There, customers are plentiful, and tourism and alcohol sales boom, a place where pockets never seem to empty.

Those who "make it" to destination cities like Las Vegas on their own (not trafficked) and think porn is their way up, most learn that they have a short shelf life. Customers demand fresh commodities/fantasies. Even those women making their own money often have high costs including their rent, wardrobe, makeup, and fees to promoters or managers. Money flows in and, just as quickly, flows out.

When Feminists for Life President Serrin Foster asked a social worker who helps women in the adult entertainment industry how women feel about their children knowing what they do, she said that was their deepest shame.

THE LONG ROAD HOME

When you drive by a strip club, and you think everyone there is having a good time, remember nothing is what it seems, and whether young or older, many, many of the dancers are mothers.

Dancers face odd and long hours, without any benefits. One mother danced up until she gave birth and was back within a few weeks.

Workers are constantly negotiating what they do with their values.

Amanda* was a mom of two girls who lived in a nice apartment and was very involved in her daughters' lives. After she divorced, she didn't know what to do and returned to escort work that she was exposed to as a teen: "I can make \$3,000 in a weekend, so I do that and come home."

“

**Desperation NEVER
leads to free choices.**

”

Selling Our Sisters: Destroying Their Dreams

“Do the girls know where you go?”

The tear streaming down her cheek and the look away told us no.

“I have to live a double life. The money is good, but you pay with your soul. You lose a piece of you with each client. There are just so many.”

When you drive down a shady street and you see a “hooker,” remember she could have been the young girl we missed so many years ago.

When you read in the newspaper about a trafficking ring being busted and you are disgusted by the women in the ring who were a part of it, remember that those on the bottom take all the blame for the top. Remember that sometimes it’s all they know. Or that often, choosing between hurting another woman/girl, or getting a beating, she chooses to hurt her, because she simply can’t take one more beating.

Industries that profit over women’s bodies—including the abortion and porn industries—are always based on manipulation, lies, and a false sense of reality and choice. What seems like “choice” can be layers of manipulation, such as when women are forced to have abortions—or have children—as a means to further control them. To abort or not is decided in direct relation to how it impacts profit and capital.

These industries are a reflection that we have not met the real needs of women.

But they are also a reflection of the lost dreams and the long road home all of us are symbolically traveling. We all long for connection, to feel safe and loved, but desperation takes us to some dark places. Desperation NEVER leads to free choices.



SUSAN B. ANTHONY
SOJOURNER TRUTH
LUCRETIA MOTT
ALICE PAUL
ELIZABETH CADY STANTON

CENTENNIAL CELEBRATION

Help us urge the U.S. Treasury to get abolitionist and pro-life feminists on the \$10 in time for the 2020 Centennial Celebration of the 19th Amendment!

Go to <https://www.change.org/p/us-department-of-treasury-put-women-on-10-by-centennial-of-19th-amendment>

Men and boys are victims and caught up in this industry, too. Customers develop unhealthy behaviors and attitudes towards women, and some develop addictions that rip families apart.

Remember all this the next time someone makes a joke about women who engage in prostitution. And remember this when someone you know or even you yourself want to go to a strip club or watch a porn film.

When we participate in these industries—no matter how casually—we exploit these women and all victims every single time—no matter the legal status or form of exploitation.

I thought my dream was to see the northern lights, and sure, I still do. But meeting Amy, Rosie, Jessica, and Amanda opened my eyes to their dreams. □

**Name changed to protect identity*



FFL speaker **Joyce McCauley-Benner** has worked for over 15 years with low income and vulnerable populations, including sex trafficking and domestic violence victims. Joyce shares her story, “Pregnant by Rape? Victory Over Violence” and also presents “Slaves Among Us: Women & Children Enslaved Among Us” and speaks about poverty issues internationally.



COERCED INTO UNWANTED ABORTIONS

SHARON SERRATORE | BOARD MEMBER

When one thinks of the practice of coerced abortion, China’s bullying one-child-per-couple policy likely comes to mind. Government-coerced or “forced” abortion is used to impose this policy on those who violate it: pregnant women who have already borne a child. China’s now expanded but equally coercive two-child-per-couple limit is no less cruel. Consider the story of Sun Mingmei, who shared her story with CNN. Although wanting to keep her second child and grow her family, she aborted rather than pay the strict fines and suffer other penalizing consequences of the second birth. Less than two months after she aborted, China expanded its birth regulation policy to two.

“More stunning perhaps is that coerced abortions are happening here in the USA. Instead of a government mandate, it is more cultural—and secretive,” says FFL President Serrin Foster.

While not state-imposed in this country, the manner of forcing abortion upon pregnant women—particularly those young and vulnerable—occurs with such frequency that some states are debating, and now adopting, laws to criminalize this coercive action. Who are those who coerce? Husbands, unmarried partners, and parents, namely, though peers, school authorities, and employers may also pressure women to abort. And with nearly 3,000 abortions performed each day in the U.S., it is reasonable to conclude that large numbers of these occur because of coercion.

“There is no question that women are being coerced (into having abortions),” stated prominent pro-life attorney Harold Cassidy in a 2012 article cross-posted at *Rewire* and the American Independent Institute. Cassidy has successfully represented pregnancy centers and pro-life organizations, and he confirms their reports that “vast instances of women (claim) to have been coerced into having abortions.”

An internet search of “coerced abortion” yields dozens of sites that post wrenching testimonials from women who have been forced into having an abortion, sometimes more than once. These are sorrowful reflections, often written long after the abortion has occurred, and they express the lasting pain and depression that plague and isolate the women for years.

On the Rachel’s Vineyard website (rachelsvineyard.org), Melissa shares about the forced abortion that changed her life and led to her many years of depression and, in her words, “heart-wrenching grief.” It was shortly after informing her boyfriend of the positive pregnancy test

result, she writes, that “he coerced me into aborting our child because he didn’t want to get in trouble.... That left me knowing my relationship with him was through.” Recognizing that she was “the only one who wanted to protect this baby,” she canceled the initial appointment at the abortion clinic, though she followed through with a second one. Melissa recalls that appointment and describes how, when asked if she would proceed with the abortion, her “heart kept screaming NO,” though she replied with an audible “yes,” feeling pressured in the company of her looming boyfriend.

In an anonymous posting on the same site, one post-abortive woman shares her anguish at learning her beloved not only lied about their future, but then forced her to abort the child he persuaded her to conceive.

“He didn’t want a baby, no way, shape or form. I had to get an abortion. That was final! He wouldn’t discuss anything any further.... The next day we called Planned Parenthood for the appointment... my name was called and I was led to the back. I remember this time though, hearing sobbing, and crying. I was wondering what was that all about, what’s going on. I was scared, I felt paralyzed. I felt like I wasn’t even there while this was happening.... I really am a monster.”

Coercion from a parent can be even more devastating. One woman, posting on the same site and wishing anonymity, describes the coercion she faced from her mother—first to abort the child, then to keep silent about it. Initially relieved when her boyfriend agreed *against* aborting the baby, she shares the later dread at hearing her mother’s reaction to the pregnancy.

“My mother was furious.... She hated me for what I had done. She took me immediately to have an abortion. ‘Wait a minute.... I don’t want an abortion.’ I thought to myself. She said I had to do it. She took me and promised not to tell my father. I could not stand for him to know.... I was so

“

Coerced abortions are forms of violence against women.

”

embarrassed and ashamed. I could not stand to look at myself in the mirror.... from that day on, I hated my mother. I turned to drugs, boys, sex, lies, and alcohol. I dropped out of school.... became a stripper and a prostitute on drugs. Had a total of 4 more abortions... 2 of which I was forced to do and the last two of which I chose to do on my own because I had no feeling in me left... I was so far gone. My life was hell.”

“This happens more often than you might think,” according to JoAnne Crough, a licensed professional counselor at the Meier Clinics office in Pittsburgh. “In many cases, it’s the teen or woman’s parents who suggest this way of dealing with the pregnancy. They make it clear that an abortion will ‘solve everything.’ They typically keep the entire process as secretive as possible. The young woman in this situation is extremely vulnerable to being coerced to make the others in her life happy. She has upset those closest to her with the news of her pregnancy. She feels confusion, shame, and fear. She becomes isolated from other forms of support. Combined, these put tremendous pressure on her to comply.”

Fortunately, several states are beginning to regard coercion to abort as criminal.

In June 2016, the Michigan legislature passed the Coerced Abortion Prevention Act (CAPA), which makes it a crime to cause “emotional distress, harassment, and stalking,

unconsented contact.” Similar laws exist or are being discussed in several states.

According to an Americans United for Life report, “at least 11 states have considered abortion bills that deal with coercion.” Among them are laws requiring abortion providers to post signage in the waiting rooms of the abortion clinics advising of the unlawfulness of pressuring a woman into having an abortion.

In South Dakota, the case of Brittany Weston is especially telling. She described the extreme pressure from her boyfriend to abort: “I was very emotionally dependent on Joe and I thought I needed his approval.” Confused and vulnerable, she wrote of her emotional and mental stress: “(W)hatever consent, if any, was given at all, it was under pressure, against what I wanted, and it was not informed in any meaningful way.”

Weston continues: “I suspect it must be hard for others to understand this phenomenon about how I was pressured into going to Planned Parenthood’s clinic against my desires, because I struggle to understand it myself. But my experience should be understood, not dismissed, because I am now certain it is a common experience for women. I now understand that it is common for women to have abortions they don’t want, especially when the father of their child wants it for himself.”

The high incidence of coerced abortion is consistent with another gruesome sign: the high level of violence and aggression against pregnant women. In 2007, an ABC News story shared “homicide is one of the leading causes of death for pregnant women in the United States,” and that “about 20 percent of women who die during pregnancy are murder victims.”

A 2002 American Congress of Obstetricians and Gynecologists report states that femicide against pregnant women often goes unreported; it also claims to be the first

Coerced into Unwanted Abortions

at reporting the “definite link between abuse during pregnancy and attempted/completed femicide. This research documents the immediate need for universal abuse assessment of all pregnant women.”

This degree of violence against pregnant women, along with the thousands of abortions performed across the United States each day, make clear the need for anti-coercion laws to be enacted in every state—indeed, in every country.

Feminists for Life of America was the only pro-life group to support the original Violence Against Women Act. FFL President Serrin Foster was the only feminist to testify in support of the Unborn Victims of Violence Act, aka Laci and Conner’s Law, and was an early advocate of laws to prevent coerced abortions. “We need to see that forced pregnancies and coerced abortions are forms of violence against women,” Foster says. “While we would hope that all feminists would support efforts to legally protect women from these forms of violence, unfortunately, abortion appears to be the priority, not women’s health and safety.”

Although some still rigorously advance the idea that abortion is “normal” and always freely chosen, the voices of those coerced refute that notion, as do health care professionals. Greg Scandlen, an authority on health care and insurance who writes about such matters, shared in a 2015 article in *The Federalist* his understanding about the frequency of coerced abortion. The abuse and strong-arming is significant enough, he writes, that “not-small numbers of the victims are newly pregnant women and girls who are not allowed to be ‘pro-choice’ because someone else has already decided their fate.”

The sad reality is that when a woman succumbs to coercion to abort her child—whether by a husband, unmarried partner, parents, or other authority figures—the consequences for her are horrifically life-changing.



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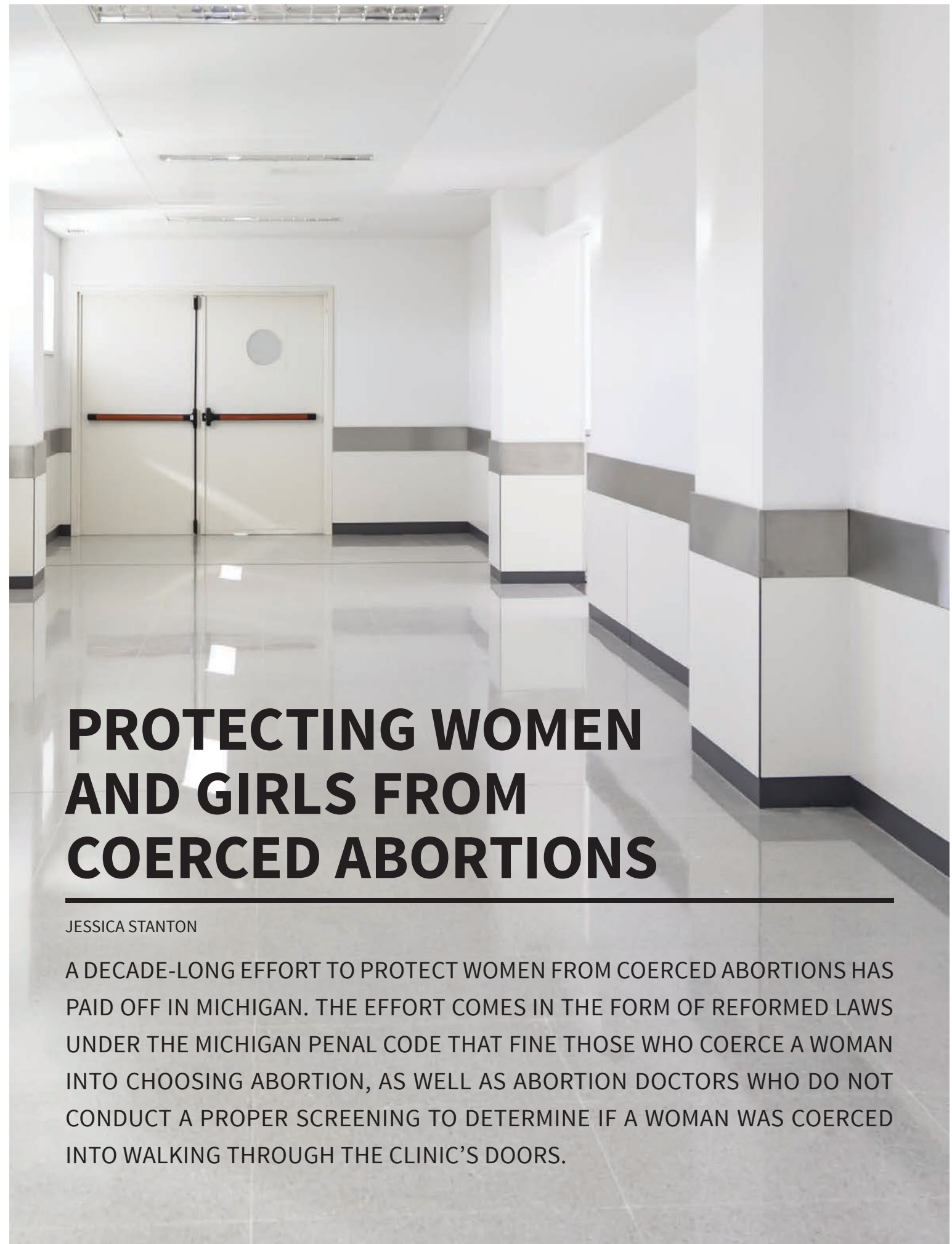
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No pregnant woman should ever experience intimidation, threats, or violence, period—and certainly not when making decisions for her unborn child. Just as unacceptable as the dearth of choices which force women to abort is the non-choice of coerced abortion. CAPA and other new anti-coercion laws and policies across the U.S. are making progress at criminalizing coerced abortion. These are vital laws for women and women’s freedom, and it is long past time that they are implemented. □



Sharon Serratore has been a member of Feminists for Life since 1996 and is now a member of its Board of Directors. She holds a master’s degree in Theology/Pastoral Ministry from Duquesne University and degrees in Communications and Economics from the University of Pittsburgh. Her work has appeared in the Pittsburgh Post-Gazette, Pittsburgh Tribune-Review, Writer’s Digest, and other online and print publications. She and her husband reside in Pittsburgh.



PROTECTING WOMEN AND GIRLS FROM COERCED ABORTIONS

JESSICA STANTON

A DECADE-LONG EFFORT TO PROTECT WOMEN FROM COERCED ABORTIONS HAS PAID OFF IN MICHIGAN. THE EFFORT COMES IN THE FORM OF REFORMED LAWS UNDER THE MICHIGAN PENAL CODE THAT FINE THOSE WHO COERCE A WOMAN INTO CHOOSING ABORTION, AS WELL AS ABORTION DOCTORS WHO DO NOT CONDUCT A PROPER SCREENING TO DETERMINE IF A WOMAN WAS COERCED INTO WALKING THROUGH THE CLINIC’S DOORS.

Many of the women who are coerced into choosing abortion do so because they are experiencing some form of intimate partner violence.

Coercion through intimate partner violence (IPV) to push a woman to abort is most prevalent among women aged 18 to 24. IPV can take the form of reproductive control, psychological manipulation, threats to abandon, or physical harm and causes about four out of 10 women to end their pregnancies in abortion.

The Coercive Abortion Prevention Act (CAPA) directly targets those who commit IPV against women because of pregnancy. The *Guttmacher Policy Review* has stated that IPV is a public health crisis in the U.S. In Michigan, CAPA was enacted to give justice to women who have experienced coercion or threats to terminate their pregnancies. When a woman is forced to terminate her pregnancy because she has been coerced, CAPA penalizes the abortion provider for not conducting a proper assessment to conclude that the woman is being coerced into having an abortion. In addition, CAPA requires that abortion providers inform the woman of her legal rights and refer her to a safe haven.

While there is some controversy surrounding the law, that is because an abortion provider could be penalized for not conducting a proper intake assessment of the pregnant woman walking through the door, thereby possibly preventing a woman from having an abortion and subjecting her to further violence from the person coercing her to have the abortion.

But that is not the intent of CAPA.

The law is designed to prevent a person from coercing a woman to make a decision she is unwilling to make. CAPA protects women from abuse—physically, emotionally, psychologically—and if women, through CAPA, are given the adequate resources to remove themselves from violent situations, unexpected pregnancy, reproductive coercion, and abortion will decline.



Dr. Angela Lanfranchi, M.D.

Thankfully, representatives like Amanda Price and Nancy Jenkins, who led the effort to pass the five-bill Coercive Abortion Prevention Act (CAPA), according to Michigan's Public Acts Legislative Bureau, understand the dire circumstances of many women who are wrongfully coerced into choosing an abortion.

The bill passed the Michigan House by a vote of 65-43 on March 24, 2016 and the Senate by a vote of 26-11 on May 25. CAPA was signed on June 8 by Gov. Rick Snyder. The act became effective as of Sept. 7.

To be charged under the new law, a person is required to have actual knowledge that the female is pregnant and is specifically prohibited by the statute's "shall not do with the intent to" language from committing, attempting to commit, or threatening to commit a violation against her in the form of "causing emotional distress, harassment, and stalking, unconsented contact."

It is now a crime to coerce a woman to have an abortion, and doing so is punishable by a misdemeanor or a fine of no more than \$5,000 if the coercer commits an assaultive crime.

If the person who coerces a woman into having an abortion against her will is the father or putative father of the unborn child, no matter what the age of the pregnant woman at the time of the violation, he will be charged with a

misdemeanor and a fine of no more than \$10,000. If a person is charged under the law, the court may order that person to serve jail time.

In a study conducted by Dr. Angela Lanfranchi, Dr. Ian Gentles, and Dr. Elizabeth Ring-Cassidy published in 2013 in *Complications: Abortion's Impact on Women*, the authors asked 101 women to share their abortion stories. When they were asked whether they were "coerced or pressured into have the abortion," 48 percent of the women answered, "Yes," and said that the pressure or coercion was in the form of violence or threat. Concerning adolescent abortion, 8 percent of minors whose parents learned about their pregnancies from a third party felt forced to abort; 6 percent of that group stated they were subjected to physical violence.

The Michigan act precisely defines what a threat is. Under CAPA, the 48 women from the *Complications* study who were coerced into choosing abortion would have received restitution and recourse for the coercion they experienced that placed them in a position to choose to abort their children. "This kind of crime happens all the time.... It will give women a tool to fight back against this so it doesn't escalate to murder," said Genevieve Marnon, spokeswoman for Michigan Right to Life.

Under the law, to "threaten" means to make two or more statements or "to engage in any course of conduct that would cause a reasonable person to believe that the individual is likely to act in accordance with the statements or course of conduct. Threaten does not include



Jessica Stanton is a third year law student at Liberty University School of Law (LUSOL). She has worked in indigent criminal and civil defense and is the current president of LUSOL Students for Life. Stanton is working on a master's in public administration and is a member of the first-ever National Black Law Student Association at LUSOL. She was a member of the Alternative Dispute Resolution Board and a Liberty Legal Journal Member in 2015. She holds a bachelor's degree in journalism specializing in broadcast media from George Fox University.

“
IPV can take the form of reproductive control, psychological manipulation, threats to abandon, or physical harm and causes about four out of 10 women to end their pregnancies in abortion.
”

constitutionally protected speech or any generalized statement regarding a lawful pregnancy option.”

The conduct of the individual attempting to threaten does not have to occur in successive acts. A person's conduct will be found to be an attempt to coerce or coercion if the court finds a series of two or more separate, noncontinuous acts which are evidence of a continuing purpose.

Such coercion might be more readily disclosed if the woman knew that by speaking up and not remaining silent because of IPV, she will find that the law will be on her side—which is exactly the protection CAPA provides to that woman. □

Editor's Note: *The Michigan law is just one of several state laws introduced recently that are designed to protect women from coerced abortions.*

AN INSIDER'S LOOK INTO THE ABORTION INDUSTRY

ELLEN J. REICH

When is a Thanksgiving turkey bone grinding in the disposal the same as a backfiring car? When the sounds trigger an emotional reaction associated with traumatic experience. We often associate the reactions to backfires or fireworks with soldiers suffering from PTSD. Grinding turkey bones, dead birds in the road, deep stainless steel sinks with high faucets, a friend's miscarriage, and certain smells—everyone mentioned the smell—are some of the triggers for women who worked in the abortion industry.

Interviews with 10 women who have left the industry do not, alone, create a damning case. They do, however, offer a glimpse inside an industry which many support but have never experienced. Half of the women interviewed for this article were nurses; the others either administrative or outreach staff. Eight of the women worked for Planned Parenthood, two in private clinics. Sarah, from Mobile, Alabama, considered herself a “warrior for women” and was enthusiastically pro-choice. Annette A., from Los Angeles, knew herself to be a passionate teacher and an idealist. She was eager to reach out to teens to help prevent accidental pregnancy.

A few entered the industry with pro-life views. They were hired with either a welcoming “We’ll agree to disagree” response or an enthusiastic “No problem!” These women were not undercover plants. They appreciated Planned Parenthood’s push for birth control access and were committed to preventing unwanted pregnancies. The interviewees also worked in Boulder, Colorado; Wilmington, Delaware; Denton, Texas; St. Louis, Missouri; Chapel Hill, North Carolina; Overland Park, Kansas; and Storm Lake and Le Mars, both in Iowa. One woman, using the pseudonym “Margo,” only wanted to be identified as “from the Midwest.”

Each of these 10 women is relieved to be doing other work. Some crawled away numbed, or feeling broken or betrayed. Some marched out the door fueled with righteous anger.

All 10 sing the praises of a nonprofit organization called And Then There Were None (ATTWN), founded in 2012 by former Planned Parenthood worker and author Abby Johnson (See page 27). The isolation felt by women who have worked in the abortion industry is painful; ATTWN creates bridges for women to move through the pain and find community and acceptance.

Julie, 58, described her six years in the industry as a “dark secret.” Only five people knew what she really did. She told everyone else she worked at a family planning clinic. “Working at an abortion clinic was not fulfilling any feminist goal,” she said. Julie described herself as, for many years, “too intellectually lazy to make the switch” from pro-choice to pro-life. Fun and supportive coworkers made it easy to stay.

In her private clinic, the products of conception were drawn into a bottle “covered with a cute calico cover” so the woman wouldn’t inadvertently catch a glimpse of a foot or an arm. Much of her job became numbingly familiar. One scenario is still vivid, one that shocked both Julie and her coworkers. An apparently well-off young couple came to the clinic. The wife was noticeably pregnant, informing all she was carrying twins. The babies were healthy, and she was not experiencing complications. The couple were earnestly researching parenting twins. As first-time parents, they weren’t sure they could handle twins. They had been reading, talking to parents of twins, and were now touring the abortion clinic to explore that option. At a later date, the couple returned to “terminate the pregnancy,” with the plan to try again and begin their family with the convenience of a single child.

Shortly before making the decision to leave, Julie experienced an internal jolt from a casual comment. The mother of a man she was dating, not knowing much about her job, once said, “It must be so neat to be around all those babies!” Perhaps it was more of a prescient calling;

after Julie left the clinic, she spent years working with preemies and loved it.

Sarah too enjoyed a strong collegiality with coworkers at her job in a private clinic. She was proud of her abortion work, motivated to protect a woman's legal right to choose. Her friends admired her work: "It was an ego-boosting industry, especially for someone interested in medicine."

Why did she leave? "A heaviness grew. The fire to help women that way was gone." She recalled the loudness of the suction machine, and the smell of the blood. The clinic would do 30 procedures in a day. She assisted in over 6,000 abortions. Like Julie, twins stick out in her memory. There was just something about aborting twins that got to her. Her triggers are any kind of rusty smell or the shape of a dead animal in the road. "We all make mistakes," Sarah said. "We all do the best we can with what we've been given."

Margo is a nurse who spent five years working at both a Planned Parenthood and a private clinic. She stayed silent and withdrawn for 12 years after leaving the industry in 2002. She developed a drinking problem to numb pain she now knows she was refusing to acknowledge. It is her stomach that flips when a turkey bone goes down the disposal. "At the end of the day, after all the patients were gone, all the products of conceptus went through an industrial strength InSinkErator." Abortion remains included those of fetuses up to 20 weeks.

"We would lie to them!" she recalls with shock that still sounds fresh. "We lied to patients all the time!... People asked, 'What's going to happen to my baby?' We were told to tell them whatever made sense, that it's like if someone is in a bad car accident and lost a leg. It's medical waste and goes into an incinerator.... We didn't use biohazard bags back then." Instead, they ground up the remains and sent them down the sewer.

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‘We lied to patients all
the time!’**

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When Margo began her healing journey, she estimated that she participated in “tens of thousands” of abortions. “It literally took my breath away.... I helped murder almost a football stadium of people.” She likens the process of “moving on” as similar to that of living with PTSD and stresses that “this is a normal human reaction: You should feel!” Coming home from her first ATTWN retreat, she recalls tears streaming down her face. She felt completely loved and accepted. A door had opened, and a journey had begun.

Rhyan spent only four months at a Planned Parenthood in Overland Park, Kansas, in 2016. She was hired as an appointment scheduler but quickly discovered her real job was “selling abortions.” The sales began with the automated answering system that picked up all calls first. The pleasant, recorded voice invited callers to press one number on the keypad if they wanted birth control, another for a well-woman exam, and another for abortion. All abortion calls were automatically jumped to the front of the calling queue. Rhyan added that “if you were calling for birth control, you could wait 20 minutes to get a phone operator.” “Closing the sale” on abortions was also supported by Planned Parenthood’s policy of requiring callers to set an appointment prior to discussing costs.

Screening for financial assistance was an important part of Rhyan’s job. However, she soon observed that she was supposed to screen and offer assistance to callers “who sounded ‘hood’ or ‘ghetto’” but not to ask callers who sounded “white or preppy” if they might need financial assistance. This was never explicitly stated, Rhyan said, but “I’m human. I can figure out the pattern.” Her supervisor would listen to calls; anytime she offered financial screening to a client who sounded white or “valley girl,” her boss would say, *Why did you ask her that?* “I realized it was a certain type of person they were asking me to screen,” Rhyan said. They were expected to schedule about 40 abortions daily, so if a client sounded black, Rhyan, who is black, would hurry up and screen her to keep calls moving.

“The only place that white privilege doesn’t exist is at a Planned Parenthood,” she said with certainty. “If white people knew, they would be mad!” Rhyan now refers to her former employer as “Plantation Parenthood.”

Rhyan’s experience convinced her that Planned Parenthood is influenced today by the eugenics embraced by its founder, Margaret Sanger. While debate rages over Sanger’s attitude toward blacks, it is universally accepted that Sanger was a proponent of eugenics, the philosophy of improving the human gene pool by promoting reproduction of people with desired traits and reducing reproduction of people with undesirable traits.

“I woke up one day,” Rhyan explained, “and realized I was no different than a slave trader.” She took a leap of faith and left. ATTWN was her life raft.

Annette A., the passionate Planned Parenthood program assistant in community education in Los Angeles, experienced a different kind of disillusionment. Watching her 14-year-old niece deal with a pregnancy further affirmed her desire to help teens. She wanted to be that

teacher. After a year of volunteering, she was an employee for five years.

Her mission in the teen community was prevention, prevention, prevention. She taught abstinence first, then birth control. If these fail, Annette told teens, Planned Parenthood will tell you about your options: adoption, parenting, or abortion. She believed this to be true. She believed abortion was treated as the last choice.

Annette believed in Planned Parenthood until she began shadowing clinic workers a week before she quit. In 2010, a new manager ruefully gave her a wakeup call: If funding got tight, her position would be one of the first to go. For job security, she was invited to train at the clinics.

A week in the clinics left her horrified and broken. Abortions were pushed front and center. For five years, she had been telling teens that Planned Parenthood was their safe haven. She had recruited teens, even family members, to work for them as peer advocates. Worse than feeling betrayed by Planned Parenthood, Annette felt she had betrayed all the youth she spent six years trying to help.

Meagan Weber, a client manager at ATTWN, participated in the interviews and shared why she finds Annette’s story so powerful: “Annette was a pure advocate who was lured in. There’s two huge sides to Planned Parenthood: There’s their facade which they’re pulling off through people like Annette, their community advocates and peer counselors, and by going and cleaning up a little old lady’s yard on a Sunday.... That’s what people are seeing!” Meg was referencing the regular volunteer work Planned Parenthood orchestrated with their teen groups. Annette too reinterpreted these “good works” as “good PR.”

Annette’s story is key to letting people know “there’s someone out there making Planned Parenthood an approachable place,” Meg said. “There’s someone out there who’s making you feel comfortable to go there.



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We don't let them listen to their baby's heartbeat because we don't want to sway their opinion of what they're going to do with their pregnancy.
”

There's someone out there who's grooming, in a sense, because they've been groomed themselves.... There are not just all these evil people lurking around. There are good, wholesome, family-oriented people.”

Annette brought pro-life teen advocates to Planned Parenthood, assured that it was not a problem. Abby Johnson, ATTWN founder, got involved in this way. She told a Planned Parenthood recruiter that she was pro-life and received a welcoming “That's great!” Abby says it was what she *didn't* know about Planned Parenthood that got her through the door.

So what are some things going on inside that people don't know about? Angie was a pro-life nurse practitioner who went to work for Planned Parenthood of North Texas in 2003. She did well-woman exams and treated patients for STDs at a clinic that did not perform abortions.

One day, a client came in five months pregnant and bleeding. While this clinic did not have an ultrasound, Angie had her own Doppler ultrasound in her office. She checked the woman and found there were no heart sounds in her uterus. She sent her to the emergency room across

the street with suspected fetal demise. The woman was distraught; she did not want to lose her baby.

A few days later, “the head lady (of Planned Parenthood North Texas) stomped into my office and said, ‘*Who do you think you are, using an ultrasound on our patients? We didn't give you that piece of equipment!*’ And I said, ‘No you didn't, and I was wondering why you didn't because I had a pregnant patient with a complication.’”

The woman responded, “We don't let them listen to their baby's heartbeat because we don't want to sway their opinion of what they're going to do with their pregnancy.”

“Well, I guess in this case,” Angie responded, “I did the right thing because I got her where she needed to be. She was having a miscarriage or a fetal demise.”

“No, you didn't,” the supervisor responded, “Why didn't you send her to Dallas for an abortion?”

“I said, ‘Well, she wasn't here asking for an abortion. She was here with a problem with her pregnancy,’” Angie said. “‘If I had sent her to Dallas, you would have done an ultrasound and told her that her baby was dead.’ And she said, ‘No, we wouldn't have.... We do the ultrasound to size the pregnancy. We don't tell them if their baby is dead or alive or if it's twins or triplets.’”

“I almost projectile vomited on that lady across the table. I was thinking, *Are you freakin' kidding me?*”

Soon thereafter, Planned Parenthood began making her work life miserable. The higher-ups told her, “You don't have the same goals we do,” and sent her all over the area filling in at other locations. Within two weeks, Angie left and then spent the next 10 years working as a traveling labor and delivery nurse.

Angie hadn't realized she was violating Planned Parenthood's practice of never referring clients to crisis

pregnancy centers, even if the woman had no interest in abortion. Dana, with Planned Parenthood in St. Louis, heard this message loud and clear. She worked in administration for four months and soon realized the “Resources” notebook was woefully out of date. When women called asking for help when they planned to keep their babies, Dana referred them to the Thrive Women's Clinic across the street. When her boss heard her one day, she got “chewed out.” *We don't do that here*, she was told.

Annette B. spent eight months at the Chapel Hill, North Carolina, Planned Parenthood as a health center manager. She did not have any medical training, but within a few weeks of starting her job she was operating the abdominal ultrasound during abortion procedures. Her in-house “training” for this was during the abortions: “I went in blind and got better as I kept doing it.”

Annette described herself as becoming an “abortion doula.” She comforted women with affirmations. “I would tell her how beautiful she was, how strong she was, that she was a wonderful woman for going through this, that her other children would benefit from this, giving her all positive affirmations.”

“Emotional manipulation” is Annette's overwhelming impression of Planned Parenthood. On many occasions, she saw women expressing doubts, but observed the staff response as uniformly encouraging, both emotionally and behaviorally. Once, Annette observed the clinic director meeting with a client. To Annette, the woman was asking endless questions and seemed anything but certain about her decision. The patient kept repeating, “I'm really not sure.”

When Annette and the director left the interview room, the director told the staff that the patient was “just fine” and ready to proceed. Annette spoke up and said she didn't see it that way. The director responded, “She's here. If she



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doesn't want it done, she'll say so.” Annette got such heat for speaking up she did not do it again.

While Annette didn't again challenge another staff member's assessment of a client's readiness to proceed, she did routinely tell clients to reschedule if they were uncertain about going ahead. “I got reprimanded for that because I wasn't scheduling enough abortion procedures.” She was supposed to schedule 40 abortions a day.

“We were always *told* that it's all up to the woman,” Annette said, yet the behaviors at Planned Parenthood were designed to encourage women to choose abortions. “The emotional manipulation of others is what got to me the most.”

Shortly before she left, she spoke up at an April 2016 staff meeting. It was a bold move, as an unusually large number of higher-up management was present, due to a new transition from paper to electronic records.

“Do I have an abortion quota?” she asked. “Because that's really what it feels like.”

“I was livid at this point, and I had no more filter. I just kept saying, ‘**This really feels like you're running a herding clinic.**’ All of the other staff chimed in and said, ‘Yes, that's exactly how we feel,’ and we were told *absolutely not*. There

is no abortion quota. We're here for the patients... We're not here to force anybody. They're here of their own free will." Annette went back and forth with them for almost an hour. The conclusion of the conversation was, "Yes, they expect a certain number of procedures a day, but no, this is not a quota."

Jayne's concerns were hardcore, nuts-and-bolts objections. A nurse for 28 years, she spent 23 days at Planned Parenthood in Wilmington, Delaware. She would not continue to work there with the lack of standards she found.

The obligatory crash cart was filled with medicine that was not just out-of-date but "way out of date." The oxygen mask on the cart was so old, it was no longer pliable.

The medications, from abortion pills to antibiotics, were pre-poured. Having medication out of its marked container greatly increases the chance of error in administration.

The HIPAA law was routinely broken because the recovery room had eight beds with no curtains or other attempts to provide privacy. Medical conversations were heard by everyone in the room. Changing a woman's bloody pads was essentially a communal activity.

The lab techs were not nurses. Jayne witnessed an error one day that could have seriously impaired a patient's fertility. As Jayne was about to release the patient, the woman asked about getting a shot, like one she'd received after an earlier pregnancy. Jayne wondered if it might be a RhoGAM shot, but the blood type on the chart indicated Rh-positive, making the RhoGAM unnecessary. On a hunch, she asked the lab to run the patient's blood again. Sure enough, the woman was actually Rh-negative.

Jayne was shocked that the clinic had no medical manuals of procedures and guidelines. She had never worked at a medical facility before that did not have those reference manuals. Early on, she was asked to start an IV and "push



Sue Thayer.

Versed," a sedative. She asked for the IV manual. She asked for the medical manual. None and none. She started the IV using the same procedure she used at the hospital. When she asked about guidance on Versed, she was told to "push it slow."

"There is no *slow*," Jayne said. A manual would say how much time to take to push a specific amount of the drug. A manual would say whether or not to dilute it to avoid burning a vein. A manual would have a list of contraindications. "This was very disturbing. Planned Parenthood should have its own IV manual."

Sue Thayer spent 17 years at Planned Parenthood in Storm Lake and Le Mars, Iowa, leaving in 2008. Within weeks of her initial hire, she moved up from a clinic assistant to the clinic manager. She even served two years on Planned Parenthood's Quality Assurance Committee, meeting monthly. The "quality" this committee was assuring was actually, Sue said, "clinic efficiency."

Efficiency and productivity were important in these Iowa clinics: "Every service had a monthly goal." It was charted,

Sue continued, with a green line for those reaching their goal and a yellow line for those 5 percent under their target. Below that resulted in an employee undergoing a performance plan. "It was all about the bottom line. The inflow had to be more than the outflow."

"Webcam abortions," described below, ultimately became Sue's breaking point. It disgusted and angered her enough to initiate a whistleblower lawsuit. She also testified before the Judiciary Committee of the U.S. House of Representatives on Oct. 6, 2015. Portions of her testimony are so well-stated they are included here:

"I justified working at Planned Parenthood because my own clinic didn't perform abortions. In fact, like most other rural Planned Parenthood locations in Iowa, we rarely had any medical professional present at all. A nurse practitioner would stop by for two to three hours per week to sign off on birth control prescriptions accumulated during the week. So the idea of us performing abortions seemed impossible. But in 2007, leadership implemented webcam abortions. The plan was to make every Iowa clinic into an abortion clinic by having a doctor in a remote location talk to women by video. They solved the problem of needing to determine gestational age of the unborn child by having non-medical staff perform transvaginal ultrasounds (where the ultrasound wand is inserted in the vagina) with minimal training. In response to our concerns, the project manager, Todd Buhacker, told us, **'If you are breathing, you can do this. It helps if you've played a video game. It's just like running a joystick.'**"

Sue interjected into our interview, "Ask the men, would you want your prostate checked by the person who answers the phone?"

In these webcam abortions, "(t)he doctor would then push a button and a drawer would open with the first abortion pill. She would then take the second pill at home, completing

the abortion. We were told to tell women who experienced complications at home to report to the ER and just say they were having a miscarriage. This avoided attention from the local medical community when we would be outsourcing complications to others. Planned Parenthood cut costs to the bone by performing abortions on a shoestring budget with little medical involvement."

"But none of this was focused on the woman's health or her best interests. When I raised concerns about this, I was forced out. Echoing my concerns, the Iowa Board of Medicine later adopted a rule that required a physician to personally examine every patient before a webcam abortion to determine the gestational age of the unborn child, and to abide by FDA limits on the use of Mifeprex, the abortion-inducing drug used by Planned Parenthood. The FDA regime (in 2015) limits the use of Mifeprex to 49 days gestation. Planned Parenthood administers this drug for up to 70 days gestation. But Planned Parenthood successfully challenged this common-sense rule and the Iowa Supreme Court sided with Planned Parenthood."

When Sue questioned the webcam abortion protocol before she left she was told, "We've never had any complaints."

"Well, is a mom returning to the clinic with a 10-week baby in a zip lock bag, saying *you told me it was just a blob of tissue*, is that a complaint?" Sue asked. "In my book, that would count as a complaint, but not for Planned Parenthood."

Every service had a
monthly goal.

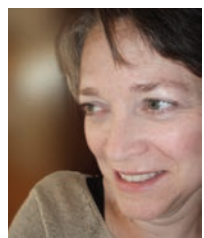
An Insider's Look into the Abortion Industry

Webcam abortions are currently used by Planned Parenthood in Iowa, Maine, and Minnesota. Up to 19 states have passed legislation banning the practice, but Sue reports that these laws are constantly being challenged.

Sue also testified about questionable financial practices at Planned Parenthood: “Even though we served a low-income clientele, we were required by upper management to solicit payment even though Medicaid was billed in full. Our leadership trained clinic staff to inform each client of the total amount of the bill for services rendered during a clinic visit, then ask the client to pay 50 percent of the amount. We were told to ask, *How much are you planning to pay today? Will that be cash or credit?* Nearly all clients made some payment of \$10 or more either during the visit or later by mail. Planned Parenthood counted those payments as voluntary donations and billed the full amount to Medicaid.”

Her lawsuit, *Thayer v. Planned Parenthood of the Heartland*, is in litigation. They are waiting for a trial date.

Sue has been to a couple of ATTWN Retreats. “It’s nice to be with people who know, who’ve been there.... Just talking about it with others is powerful.” She knows that “God forgives, but in such a small town, it’s been hard.” □



Ellen J. Reich lives in Charlotte, North Carolina. She is a lawyer by training but worked in print journalism after passing the bar in 1982. She has been married to Rick Glaser since 1985 and is a proud mother of two sons. One is serving as a rescue swimmer in the Coast Guard, and the other is a firefighter-paramedic. She has written two books: *Waiting: A Journey of Loss & Hope in Pregnancy* (Haworth Press) and *Beginning at the Well: Jewish, Feminist & Pro-Life* (unpublished). In addition to tutoring reading through the Augustine Literacy Project, she enjoys sharing her rescue greyhound, Scout, on pet therapy visits.



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and THEN THERE WERE NONE | Abby Johnson

ABOUT AND THEN THERE WERE NONE

ELLEN J. REICH

And Then There Were None (ATTWN) is a registered nonprofit founded in 2012 by Abby Johnson, a former clinic director at Planned Parenthood. Its goal is to end abortion from the inside out by unconditionally supporting abortion workers who want to leave the industry.

In addition to support counseling by phone and at their retreats, ATTWN offers significant practical assistance. They will pay a worker leaving the industry 75 percent of one month's salary and help her find a new job. When funding permits, ATTWN gives clients 100 percent of their monthly salary. Donors also function as a network for finding new jobs.

When former abortion workers go to a retreat, everything is paid for by the organization: airfare, pickup at the airport, a welcome bag, and room and board for the weekend.

Reaching out to abortion clinic workers is also part of the mission. ATTWN posts fliers and drops cards throughout clinic neighborhoods. They have printable resources on their website and are committed to gentle, loving outreach. Meagan Weber, an ATTWN client manager, said they have on occasion written notes of apology to clinic staff in response to the hostility displayed by protesters. ATTWN demonstrates nonviolence in everything they do.

The group values confidentiality and vigilantly guards client identity. Not only will they never release a client's name without explicit permission, they also request that reporters and clients not publicize the names of those who are still in the industry. They see nothing gained by

public shaming—and see everyone as a person who may choose to leave the industry one day.

“We meet people where they are,” Weber said. Clients don't have to have any particular beliefs in order to receive counseling and financial assistance. If someone is extremely pro-choice, she might not be a good fit for a retreat, but all other services are lovingly offered.

ATTWN recognizes healing “not as a destination, but a journey. Former workers often hold a place of gratitude for the experience (of working in the industry), so they can now use it to end the practice (of abortion).... Some of us are walking around with a missing arm. Acceptance doesn't mean complete healing. Forever I will be changed, and there is a sorrow that goes with that,” Weber said. Johnson describes healing as a series of bridges and platforms: No matter where you are, someone will be reaching out to you, as you can reach out to someone else.

Each of the 10 interviewees had only praise for ATTWN.

“I was so shocked to be so understood,” Jayne said. Abby Johnson herself called her. “It was so refreshing and nonjudgmental. It was like a resting place.”

Margo recalled coming home from her first retreat. “Tears were streaming down my face. I felt so loved and accepted.”

“Anybody working in that environment that is not comfortable shouldn't wait another day,” Dana advised. She had only been out of the industry a few days at the time of her interview but felt like she had been away for months. The relief is that great. □

WHAT TO EXPECT WHEN YOU'RE EXPECTING AT PLANNED PARENTHOOD

SERRIN M. FOSTER | PRESIDENT

The following materials document some of the internal training developed by Planned Parenthood Federation of America (PPFA) and CAPS, the Consortium of Abortion Providers, as they attempt to normalize abortion. Some formatting changes were made to their interactive DVD and we have highlighted some more telling sections.

Their words are their own and speak for themselves, many times leaving us speechless, although we could not resist more than a few comments of our own.

Nor will you.

Most chilling is what is not addressed—the lack of solutions or even referrals to organizations that could address their unmet needs.

And as for “choice,” we never see them suggesting a woman not go through with an abortion. While Planned Parenthood fights legislative efforts to protect women from abusers who coerce girls and women into abortions, abortion clearly supports the very abusers that drive them to their clinics and covers the crimes of statutory rapists.

Abortion solves nothing.

Girls and women return to the same unsupportive families and friends, schools, and employers. This is why Feminists for Life chooses to solve real problems through holistic, woman-centered solutions.

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FFL President Serrin M. Foster is the creator of the Women Deserve Better® campaign. Her landmark speech, “The Feminist Case *Against* Abortion,” has been recognized as one of the “great speeches in history” in an anthology called *Women’s Rights*. Since 1994, she has led the effort on developing on-campus resources and support for underserved pregnant and parenting students and is an outspoken opponent of pregnancy discrimination.

Serrin served on the National Taskforce Against Sexual Assault and Domestic Violence, which worked to pass the Violence Against Women Act, and she also testified before the U.S. House Judiciary Committee in support of the Unborn Victims of Violence Act, also known as “Laci and Conner’s Law.”

Editor’s Note: All text in italics is for emphasis.

*All text in **bold** is ours.*

All text highlighted in blue is also ours.

Background

In 2007, CAPS and PPFA hosted a meeting of internal and external stakeholders to talk about abortion and what was needed to address the emotional issues.

Philosophy

PPFA/CAPS wants to normalize abortion, telling staff that “The training frames abortion as a ‘life event’, similar to other life events of *having a baby, getting married, getting divorced or losing a loved one.*”

They state their “goal of addressing a client *holistically.*” **But nowhere is there any mention of addressing financial issues that, according to the Guttmacher Institute (the former research arm of PPFA), is the reason why 75 percent of women have abortions.**

Nowhere do we find solutions or referrals to other organizations to address issues in the workplace or school. So these women go back to the same situation that drove them there. What is “holistic” about this?

“Addressing emotional issues is similar to addressing physical ones. So, just as we provide antibiotic prophylaxis to prevent infection, this training supports giving clients ‘emotional prophylaxis.’” **This pacifies rather than addresses real issues or treating both patients, explaining,** “Prophylaxis means to take measures to preserve health and prevent disease. Giving emotional prophylaxis means the ability of staff to proactively and routinely give all clients having or considering an abortion the emotional support and context they need to help promote coping and *decrease the stigma of abortion.*”

Intended Audience

“This training is intended for all staff that talk to women about abortion. *This includes those that do not provide abortion services.*”

According to former Planned Parenthood clinic director Abby Johnson, who left PP after witnessing an abortion and founding And Then There Were None (See page 27), PPFA and CAPS recognize that even some of their own staff have real reservations about abortion—especially those who work in clinics that do not perform abortions. According to Johnson, the goal is to get all clinics willing to perform abortion—and all staff comfortable with it.

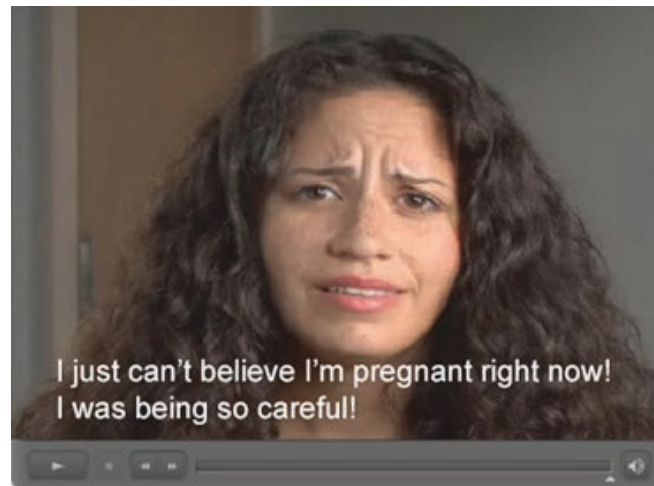
They urge them to prepare and practice writing, “Know how you feel and what you believe—participate in a *values clarification exercise.*”

[PPFA/CAPS identifies commonly asked questions – which we should answer before they ever get near the place!]

- Will my baby feel pain?
She knows and they know, “it’s” a baby!
- What happens to the baby?
- Can I see the ultrasound?
No, that might stop the abortion, but that’s not what they say.
- Which is better, the abortion pill or surgical abortion?
- The abortion pill is just like a miscarriage, isn’t it?
- Will it hurt?

What to Expect When You're Expecting at Planned Parenthood

Editor's Note: The following Q&A is from the PPFA/CAPS interactive training DVD. Planned Parenthood's "correct" answers for staff are highlighted in pink.



- I can note that you need some better form of birth control. Are you ready to go over your options?
- The test is 99.9 percent accurate. We can repeat it if you like.
- This news must feel like a bit of a shock, especially when you were so careful. I understand how you can be in disbelief.



- It sounds like you did everything you possibly could to prevent a pregnancy. For a lot of women, that can feel so unfair.
- You wouldn't believe how many people who say they're against abortion are suddenly for it when they need it.
- I hear you have some strong feelings against abortion. If you like, we can talk about your other options.



- Your family, luckily, has no say about this, and neither does your husband. This is your decision and yours alone.
- Some people are very judgmental about the hard choices we face. And others... they're going to support you because they know you're trying to do what's best for your family.
- Three kids are definitely a struggle, especially in this day and age. I don't see how anyone can do it.

- Does this make me a bad person?
- Does this mean I will go to Hell?
- Will God forgive me?

If it's not wrong, what's to forgive?

Key Messages and Screening for Risk

In addition to answering tough questions, PPFA wants their staff to repeat the following messages:

Abortion is a common experience.

Women are not alone.

A range of emotions is normal.

Most women do fine.

Women have abortions for a variety of reasons.

Including *because they care* about themselves, their families or their future families.

Planned Parenthood knows that most women who have abortions are *already* mothers. They can't keep calling it a "blob of tissue." The sonograms are out there. So now they talk about having an abortion because of the children they previously had or will have. But you don't hear them offering help that would alleviate the poverty that drives three out of four women there. So they support a "Sophie's choice," pitting one child against the other.

Screening for a History of Abuse or Coercion

- Given how common violence is, I ask all my clients about it. If you have been hurt we can help you. Would you like more information about where to go for help?
- Are afraid that your partner may hurt you if they find out you had an abortion?
- Have you ever been slapped, kicked, punched or otherwise hurt by a partner?

Live the Legacy. Leave a Legacy.

Susan B. Anthony and Elizabeth Cady Stanton worked for women today. You too can leave a living legacy for future generations of women and their children.

Please consider leaving a legacy by including Feminists for Life of America as a beneficiary of your estate so that our work may continue. Let us know so that we may properly acknowledge your gift.

Thank you!

Multiple abortions are common now because abortion solves nothing.

Evidently, PPFA and CAPS acknowledge the link between interpersonal violence and abortion. So why does Planned Parenthood oppose legislation to prevent coerced abortions?

What to Expect When You're Expecting at Planned Parenthood



- At 10 weeks, this is classified as a fetus, but yes, abortion will end your pregnancy, if that's what you mean. Did they not cover fetal development in your counseling session?
- If you're worried about that, maybe you're not ready to have an abortion and you need to take more time to think about your decision.
- Good question. Actually, at this point in the pregnancy, the nervous system is not fully developed, and there is no ability to experience pain.



- That's a good question. The doctor inspects everything that was removed during the procedure. The doctor wants to make sure that the abortion was complete and nothing is left in the uterus. Sometimes, it's sent to a laboratory. Eventually, it is disposed of, just like other blood and tissue that's removed during medical procedures.
- That's confidential.
- It is cremated.



- Your friends are wrong. That is a fear tactic of the anti-abortion movement, and they're just trying to scare people away from choosing abortion.
- I'm glad you brought that up. A lot of people say they've heard that, but you know what? Abortion is actually quite safe and won't affect your ability to have kids in the future.
- It sounds like you're really interested in being a parent later in life. You want to talk about that?

- Have you ever been raped or forced to have sex when you didn't want to? If she reveals a history of violence/assault or if there are immediate safety concerns:
- Assess safety and
- Call police now if client believes she will be in imminent danger when she leaves the clinic
- Offer support and resources
- Document resources and referrals given

What is *not* normal after two weeks?

- She is not able to do her normal activities
- She is feeling worse and not better
- She does not feel she has returned to her "normal" sense of self

Women need to know to look for specific serious issues like excessive bleeding, fever indicating infection, expelling the remains of the baby, and the need to take their antibiotics faithfully, etc.

Planned Parenthood/CAPS asks staff to tell clients to "call EXHALE, a free confidential talk line for women who have had abortions. Call 1-866-4-EXHALE (1-866-439-4253) to speak to an experienced peer counselor. Or you can call Backline (1-888-493-0092), a free confidential talk line, to talk with a volunteer advocate about pregnancy, parenting, abortion and adoption."

Instead of "EXHALE," FFL recommends that if you are in mourning after an abortion, reach out to:

- Rachel's Vineyard, 877 HOPE-4-ME (877-467-3463)
- Project Rachel. Hopeafterabortion.com
- Reclaiming Fatherhood menandabortion.info

Clinic workers who mourn the losses that they participated in are urged to contact And Then There Were None at abortionworker.com

Those who were aborted and "born alive" are encouraged to contact theabortionsurvivors.com



PEACE BEGINS IN THE WOMB™ bumper stickers now available in two sizes for your car—or laptop!

Thanks to a generous supporter, pro-life student groups will receive them in their new Grow Your Group Kit and every FFL member in his or her year-end mailing. (Contact info@feministsforlife.org if you didn't get yours!)

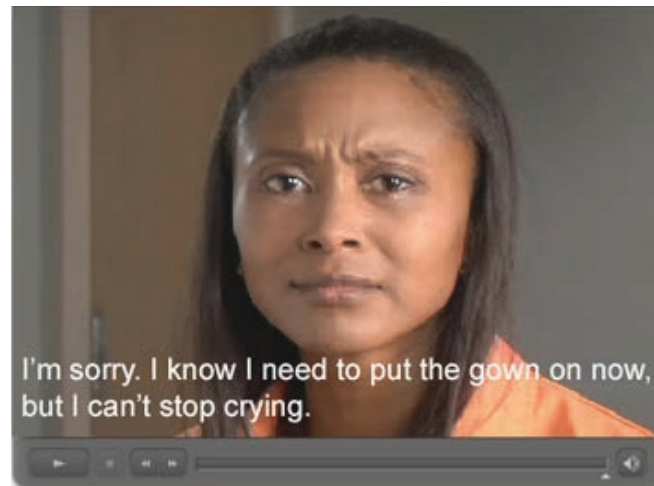
Buy extras to pass around.

www.feministsforlife.org/covetablestuff

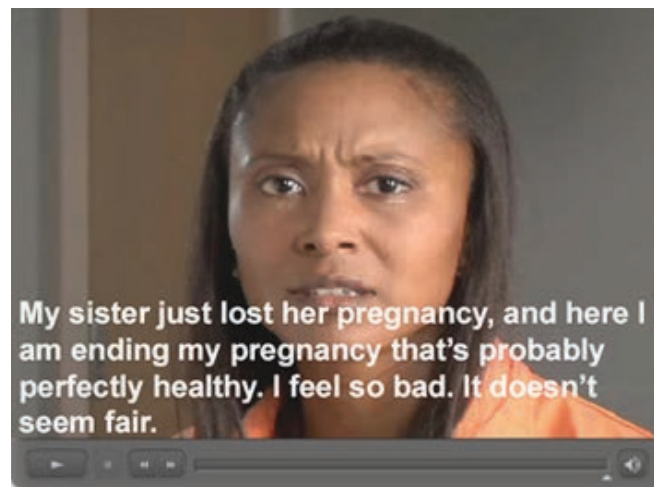
Send a "Grow Your Group" Kit to Campus for \$100.

www.feministsforlife.org/support

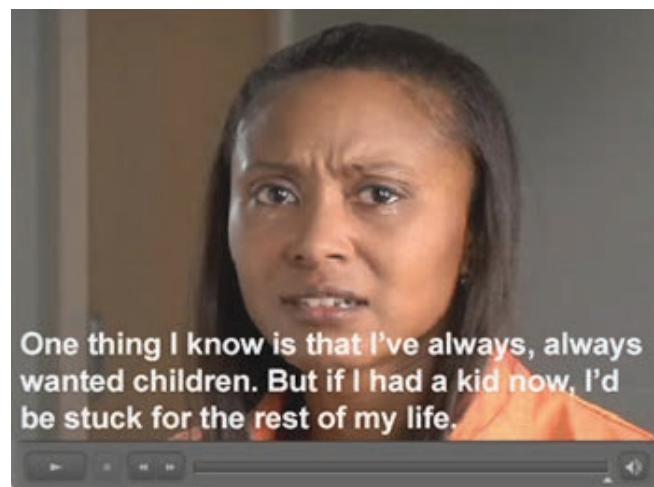
What to Expect When You're Expecting at Planned Parenthood



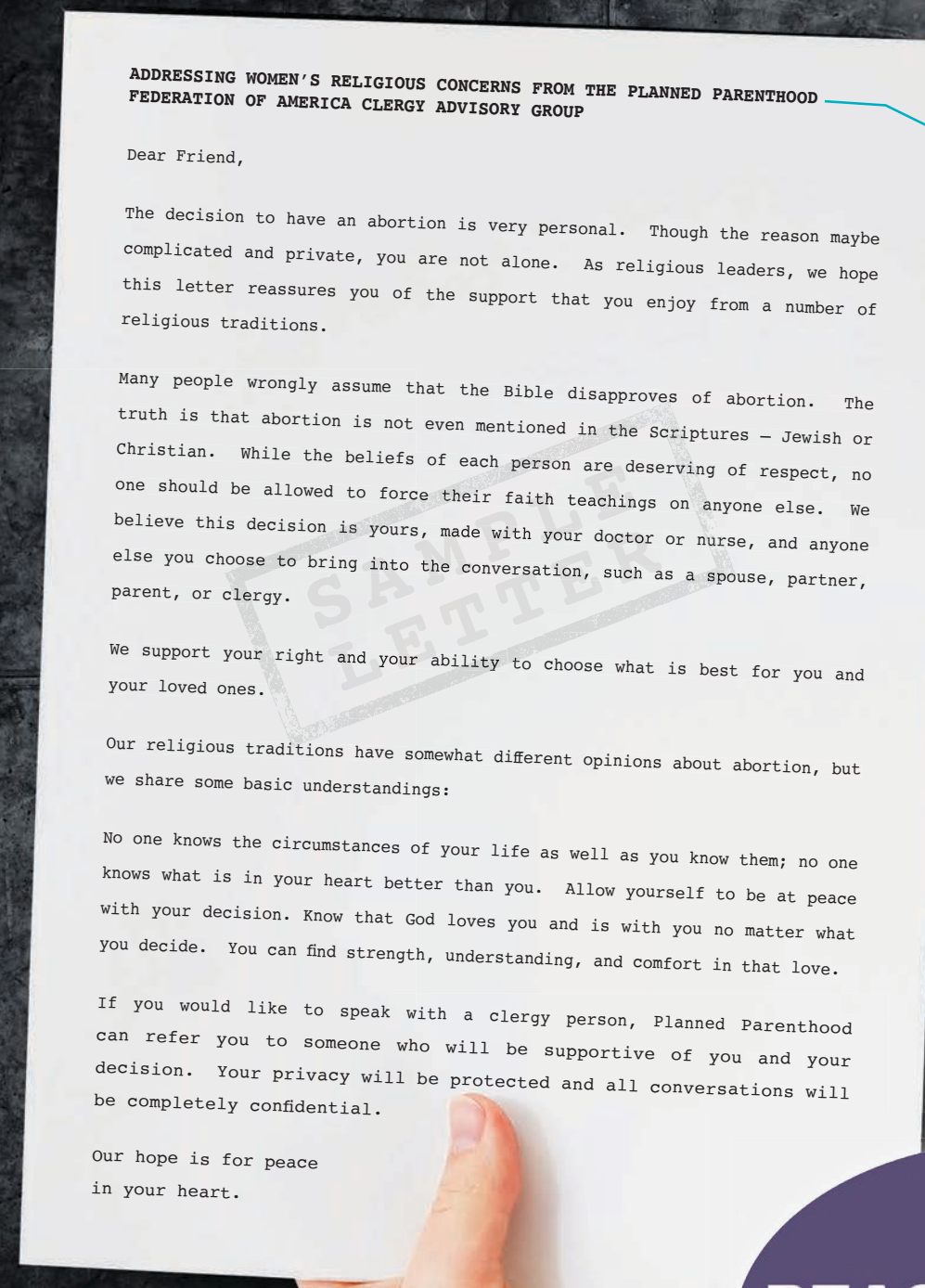
- That's OK. The doctor will be coming in any minute. You can fold up your clothes and put them in that chair.
- That's OK, crying is totally normal. Would you like to talk, or take some time?**
- It sounds like you're not clear about your decision. Let's go back to the counseling room and talk about some of your other options.



- You don't know for sure that your pregnancy is healthy. All you know is that it's not right for you right now.
- I'm sorry to hear about your sister's loss. And I'm sorry for what you're going through, too! Being a woman involves some hard choices sometimes.**
- Do you want me to have the doctor see a different patient first so we can get you some more counseling?



- Good for you for realizing that. It sounds like you know exactly what you're doing.
- You wouldn't be stuck; lots of women say there's never a time when they're really "ready" to have a baby, yet somehow we're all here.
- It sounds like you are preparing to be the best mother you can be someday.**



Feminists for Life is a nonsectarian (and nonpartisan) organization. But apparently, Planned Parenthood lets clergy speak for them. See their sample letter to clients who raise religious concerns.





WE REMEMBER: CREE ERWIN (1992-2016)

DAMIAN J. GEMINDER | EDITOR

THE FOURTH OF JULY IS A DAY WHEN MOST AMERICANS CELEBRATE THE BIRTH OF OUR COUNTRY. THIS YEAR, HOWEVER, TANYA SPENT THAT DAY MOURNING HER DAUGHTER'S DEATH INSTEAD.

On June 30, 2016, 24-year-old Cree Erwin received an abortion at the Planned Parenthood facility in Kalamazoo, Michigan. On July 2, Cree's mother, Tanya, took her to the emergency room at Bronson Battle Creek Hospital after she began complaining of abdominal pain. The young woman was given pain medication, instructed to see her personal physician, and discharged just after midnight on July 3. Cree spent the rest of the day sleeping in her mother's bed.

She would never wake up.

Tanya discovered her daughter's body shortly after midnight on July 4 and frantically called 911. The dispatcher gave instructions for how to revive her. Tanya attempted to follow the directions, but she had difficulty rolling Cree onto her side to perform chest compressions.

"She's as cold as ice!" Tanya is heard crying on the call before the dispatcher says that medical assistance is on the way. Unfortunately, it was not enough.

Reporting Officer T.M. Wirebaugh said Cree may have been experiencing agonal breathing, a form of labored respiration that left untreated will progress to apnea and death. Causes of agonal breathing include cerebral ischemia (insufficient blood flow to the brain), hypoxia (inadequate supply of oxygen to the body or a region of the body), or anoxia (complete deprivation of oxygen to the body or a region of the body). The formal autopsy results have yet to be released.

Although it is not known who performed Cree's abortion, Dr. Laura D. Castleman did prescribe her pain medication, to be filled at a separate pharmacy. Castleman's Drug Control Location License for the Kalamazoo Planned



Parenthood had lapsed on Jan. 31. In Michigan, medical providers must obtain a license for every facility where they routinely dispense drugs. According to Lynn Mills of Pro-Life Detroit, the clinic operated without proper facility licensing from September 2012 to January 2016.

The same facility was the site of another medical emergency last year. On Sept. 10, 2015, a 15-year-old girl was transported to a local hospital after experiencing breathing difficulties.

In addition, the same clinic currently employs Dr. Mandy Gittler, who was involved in the 2012 death of Tonya Reaves, another 24-year-old abortion patient, at Planned Parenthood's Loop Health Center, in Chicago. Reaves' death resulted in Planned Parenthood of Illinois paying a \$2 million settlement, most of which will go to her son, Alvin Jones III, who was 1 at the time of her death. It is not immediately clear if Gittler herself performed Cree's abortion.

Cree, like 59 percent of women who have abortions, was already a mother. **She died on her son's first birthday.** The boy was given to his grandparents' custody.

Feminists for Life remembers Cree Brianne Erwin-Sheppard and her unborn child—as well as Tonya Reaves and her unborn child—taken from us far too soon by legal but lethal abortion. □

Additional reporting by Elise Huntley.

(Sources: *Battle Creek Police Department, LifeNews, WWMT.com*)



HELD HOSTAGE BY HER HUSBAND

ANASTASIA ECONOMIDES

I need your help in any way to get out safe n sound back to usa. To make it short, my hubby cheated on me n started to abuse me here in Pakistan. He knows that he is out of usa. He hid all passports... I will die here if I keep on bothering him...

I received this message after months of not hearing from Amber, a 34-year-old Pakistani-American who decided to put her faith in Allah and make a move—a very big and risky move. All her life, she had done what was expected of her, from going through with an arranged marriage, to being a stay-at-home mom, to wearing a hijab to please her husband, to biting her tongue when she found someone else's lingerie in their home. She helped sell her house and car and transferred thousands of dollars to Pakistan, at her husband's request that they live a better life there with their three young children.

But it wasn't better.

Amber never saw *Not Without My Daughter*, the 1991 film starring Sally Field based on a true story of an American woman's dramatic escape from her abusive doctor husband in his native Iran. I thought about that movie with every vague message I received from Amber. While in Pakistan, her messages slowly devolved into despair and indicated serious trouble.

Amber's case of domestic violence is not isolated and cannot just be attributed to cultural differences. Educating both men and women to respect each other's basic equal human rights is a mantra we keep echoing, but there's nothing like an experience hitting close to home to make our resolve loud and clear.

Amber first reached out to me through a Facebook group. We only met once for a quick lunch in Manhattan. She chatted up a storm, smiled, laughed, and talked about her love for Dunkin' Donuts coffee. But her eyes kept searching into mine during our pauses. I had barely finished my meal when she told me that her husband of 15 years, Ali*, a Pakistani, was cheating on her and did not approve of her dressing modern.

Their parents arranged their marriage. She was 19 years old. They moved from New York to Fresno, California, where he worked as a dentist.

I didn't know how to respond to this. Once a pseudo-feminist in my youth, I smoothed out the jagged edges of injustice and anger and embraced a more refined concept of true feminism as I grew older. Amber knew I was a "Westerner," born and raised in the States. I attended liberal arts schools and worked as a journalist—something my own traditional European family hesitated on. So, I was careful in how I responded, gently nudging her to rethink the relationship and to not feel bad for wearing jeans and covering her arms with long-sleeved tops. She sadly responded that she had three young children, the eldest being 13 years old, and that Ali was the sole breadwinner of the family. She, a housewife who had never worked before, seemed more bothered by the appearance issue than the cheating one.

Amber was very active on social media, with selfies adorning her Facebook page. Then, she abruptly began posting photos of herself wearing dark hijabs, covering her dark mane. Friends praised her new look and devout faith.

Held Hostage by Her Husband

“He wanted me to wear one, so I did,” she later told me.

A few weeks later, she posted a quick goodbye, saying she was moving to Pakistan, leaving behind her six-bedroom Fresno home. There was a hiccup and Amber remained on Long Island with her parents while the rest of her family traveled ahead of her to their destination. She told me her husband misplaced her passport at the last minute and that she had to get a new one expedited. While she was in New York, he told her to sell the gold jewelry she had kept in a safe box. But she never did take the jewelry and was en route to Pakistan a few days later.

Ali’s family—his parents, three sisters, a brother, and their children—greeted her. There was her huge rental home, as promised. There were maids and a driver. What she didn’t expect was that they would all be living together and that she would soon be confined to a room in the basement.

Weeks passed. She randomly posted messages online saying she loved her kids.

In June 2015, Pakistan suffered a severe heat wave, with a death toll of around 2,000 people. Amber became dehydrated during those 120-degree Fahrenheit temperatures in Lahore and made trips to the local hospital.

I realized her Facebook account was no longer active when I attempted to reach out upon hearing the news about Pakistan.

Despite her bouts of dehydration, Amber still had to help out with chores. She often cooked for 20 to 25 people. Most of the rooms only had fans. For someone who used to have her own bank card and drive her own car, Amber now found herself being escorted whenever she went shopping and was not permitted to drive herself. Ali would hand cash over to the maids or driver, never to her directly.

She told me that two weeks after she moved in, Ali ordered his things to be moved from their bedroom to his mother’s.

He would come by at night to her unlocked door and have intercourse, without her really wanting to.

“Then he told me to go shower because I was dirty,” she said. “When I came back, he was gone.”

He threatened to divorce her during every argument, most of which she said were instigated over minor matters. They also intensified, so much so that her vocal cords became damaged from the screaming. (Doctors later found lumps, and she was urged to get them surgically removed.) She was also having more migraines.

Amber begged her mother-in-law to talk some sense into Ali. She was “as cold as a stone,” stating that “this is not America.”

Her lifeline was her iPhone. Ali took away her iPad, but she believes he had so much going on that he didn’t think twice about her phone. She would sneak it into the living room, where she would find a strong enough Wi-Fi signal around a certain couch. She had her messages already typed out and would hit send once she was online.

Amber contacted her parents on Long Island, and at first, they told her to be a good wife. She also reached out to me, under an alias Facebook page that only had one photo of the inside of an airport.

“I’m held hostage, plz I can’t imagine going through this.”

She pleaded with me to relay her message to the U.S. Embassy in Pakistan on her behalf, which I did. She could not go to the embassy, which is located in Islamabad, and her house calls were monitored.

When Ali threatened to take their kids away and to send her back to the United States alone, she feared he would do whatever it took to get rid of her.

“I was afraid he was going to throw acid on my face while I slept or poison me,” she said.



Amber (face obscured to protect identity).

She stopped protesting so as not to provoke her husband. She would not leave behind her children. She had to move fast.

Amber’s father reached out to Naila J. Dayal, the founder of the Christian Progressive Movement political party and a women’s rights activist, who was paid \$3,000 to guarantee the safety and transport of Amber and the children.

On the morning of Sept. 2, Amber waited for her mother-in-law to take her early nap before she ran out of the house with a plastic bag of belongings and into an unmarked taxi across the street. She passed by her children’s schools and picked them up. They resisted and could not understand the sudden trip of escape.

GET YOUR
DAILY
FEMINIST
FACEBOOK
FIX.



The five-hour drive ended at Dayal’s home at the Diplomatic Enclave in Islamabad, a highly-secured zone with high walls.

If this were a Hollywood movie, it would have ended here, happily ever after. But in reality, Amber received calls from Lahore the following day, saying that Ali was furious and that he went to the police to accuse her local family members of kidnapping.

A few days later, she received a summons via her family. She had to return to Lahore to attend trial and face Ali. She and the children stayed indoors all day at a cousin’s house, where no one went in or out.

Attaullah Hanif, Amber’s lawyer in Pakistan and another cousin of hers, admitted that a father can easily gain custody of his children after they reach a certain young age.

“It’s difficult to win custody for the mother. But by the grace of God, Amber got temporary custody,” Hanif said.

The trial lasted for weeks. The court asked Ali to hand over Amber and the children’s passports, but he refused, offering only to return hers. Meanwhile, despite the letters the consulate received from friends and family, Amber still had to go through red tape to receive duplicate passports. Ali contacted the embassy, claiming she was not a fit mother, but it fell on deaf ears.

Once they landed in Abu Dhabi as part of the layover to New York, Amber finally felt free.

A year later, Amber and the children moved to Maryland, thinking that it would be easier than living in New York. The divorce papers have yet to be finalized, but from an Islamic standpoint, she is no longer married to Ali.

Amber, now 36, is struggling to keep a job and pay rent. Her son, Abdul, takes medication for ADHD. She wishes she could return to school and get her associate degree; she stopped taking classes when she married.

Held Hostage by Her Husband

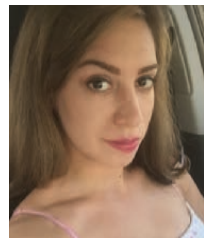
She receives \$1,800 a month in child support, which does not cover all expenses.

She is considering granting her ex-husband partial custody to “better care for my kids because he has money.” She is also dating—something she never did before, taking note of each suitor’s financial worth. However, she is still afraid Ali will come back in the middle of the night and hurt her.

Her latest online status described her mood as feeling down. She wrote: “Without struggle life is not interesting, without someone who loves you n think of u before himself life is nothing. If u have both, you have blessed life.”

I wish my response came from the Quran, as I’m such an outsider looking in, and it might have made a stronger impact. Still, my feminine instincts told me to say this: “You have the struggle part dear! Love yourself. Your children love you unconditionally, and whoever comes along, he will be lucky that you love HIM.” □

*Name changed to protect identity



Anastasia Economides is a staff editor at The New York Times. Her work has been featured in Newsday, The Star-Ledger, and amNY. The Queens native spends her time traveling, discovering new eats, and volunteering at Comfort Zone bereavement camp. You can follow her on Twitter @aecono.

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