



Manual for

ADULTING



18

is just a number. A number used to mark the point at which a person “becomes” an adult. Most of us realize that even if a person reaches the magic “beginning of adulthood,” it’s still possible to not act like it. Culture shows us this through language. The word “Adult” has transformed from a noun: “*that young lady is such an adult,*” to a verb: “*my gas tank is low so I need to adult and fill it up.*” The latter statement really emphasizes the point that an adult is a person who makes responsible choices. Sure, each adult needs to make decisions that allow him or her to survive, but in order for society to thrive, those decisions need to have a positive impact on the culture. Culture is at its healthiest when the dignity of human life is respected. *Manual for Adulting* was designed as a guide for responsible decisions. It

won't tell you what decisions to make, however it will arm you with a wealth of solid information.

So, when it's time to “adult,” the choices you make will reflect the adult that you are.

is

1. Since legalization in 1973, abortion has extinguished approximately ____ lives of pre-born babies.¹

- A. 31.4 million
- B. 59.6 million
- C. 7.5 million
- D. 23.7 million

2. A developing baby's heart begins to beat at ____ days.²

- A. 21
- B. 60
- C. 45
- D. 30

3. Abortions are legal through the ____ month of pregnancy.

- A. 3rd
- B. 4th
- C. 6th
- D. 9th

4. ____ of women say that they felt pressured into their abortions.⁴

- A. 12%
- B. 15%
- C. 50%
- D. 64%



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How ADULT Your Brain?

Maturity requires knowledge
of the TRUTH. Take this
quiz to see where you're at.



5. Women between the
ages of ____ have the
most abortions.⁵

- A. 15–18
- B. 20–24
- C. 28–32
- D. 12–14

6. Women who have an
abortion are _____ more
likely to commit suicide
than women who carry
babies to term.⁶

- A. Two times
- B. Four times
- C. Six times
- D. Eight times

7. ____ of women will
abort their baby after
a prenatal diagnosis of
Down Syndrome.⁷

- A. 12%
- B. 92%
- C. 25%
- D. 30%

8. Most abortion
facilities are located
in ____.⁸

- A. Hospitals
- B. Medical
facilities
- C. Minority
neighborhoods
- D. Strip malls

9. _____ said, "Birth control
itself, often denounced as a violation
of natural law, is nothing more or less
than the facilitation of the process of
weeding out the unfit, of preventing
the birth of defectives or of those
who will become defectives."⁹

- A. Adolf Hitler, dictator of Nazi
Germany
- B. Mao Tse Tung, Chinese
Communist Revolutionary
- C. Margaret Sanger, Founder of
Planned Parenthood
- D. Hillary Clinton, Former Secretary
of State

PREGNANCY RESOURCES

Option Line – 24 hour
(English and Spanish)
800-712-HELP (4357)
optionline.org

Pregnancy Hot Line – 24 hour
800-848-LOVE (5683)
nationallifecenter.com

Birthright – 24 hour
800-550-4900
birthright.org

HELP AFTER AN ABORTION

Rachel's Vineyard – 24 hour
877-467-3463
rachelsvineyard.org

**National Helpline for
Abortion Recovery – 24 hour**
866-482-LIFE (5433)
nationalhelpline.org

Project Rachel
888-456-HOPE (4673)
hopeafterabortion.com

Abortion Recovery International
949-679-9276
Toll Free: 866-4My-Recovery
Text Us: 949-378-5149
abortionrecovery.org

humanlifealliance

1614 93rd Lane NE | Minneapolis, MN 55449
humanlife.org | 651-484-1040

Human Life Alliance (HLA) is a nonprofit
organization dedicated to creating a culture
in which all human life, from the process of
fertilization to natural death, is respected
and cherished.

Distribution of HLA's compelling
informational materials to high school and
college students, medical and community
organizations around the world have
reached 220.3 million people in all 50 states,
in 86 countries and on all seven continents
over the past 27 years.

Answers & Citations on page 15.



This publication and
citations can be found at
timetoadult.org



Don't Make the Same Mistake I Did

Since I had already enlisted in the Air Force, I thought I had to have an abortion in order to make something out of my life. My best friend drove me to the abortion clinic. It was like an assembly line.

When the ultrasound was being performed, I asked to see it, but this wasn't allowed. So much for "an informed decision." Then I asked how far along I was. I was told I was nine-and-a-half weeks pregnant. That hit me hard. I started doubting and wanted to talk to my friend, but I wasn't allowed to do that either.

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

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

Two-and-a-half years later, I ended up in the hospital with bulimia. I felt that no one had punished me for what I had done, so I was punishing myself. I was obsessed with women who were pregnant, and my life was in shambles! I was suffering from what I'd call post-abortion trauma. When I was 21 years old, I received help from a woman who was involved with pro-life activism. I went through a program called "Conquerors." Not only did I experience forgiveness, but I was also challenged to help others. I answered the challenge and started sidewalk counseling.

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

lexi

Read countless women's stories about the aftermath of abortion:

**SILENTNOMOREAWARENESS.ORG/
TESTIMONIES**

There is hope and healing after abortion. See page 1 for post-abortive resources.

I was 15 when I found out I was pregnant

I had been with my boyfriend (now my husband) for only a year; he was 18 and in his freshman year at college. I was only a sophomore in high school. I was going to have an abortion, but I decided not to go through with it – I was more terrified of what would happen to me during the procedure than of giving birth. I decided to keep her. I gave birth to a beautiful baby girl, Taylor. I graduated from my high school with a 3.85 GPA and now I'm attending college, where I made the Dean's List last semester, and am majoring in psychology. I want to let people know that **just because you become pregnant and have a child does not mean that you can't accomplish the things you always wanted to do, or fulfill your goals.** Having a child makes it a lot more difficult, but it is so fulfilling. I still cry when I think that I could have taken such a precious thing away—her life. I do not believe that I have the right to take a life, nor do I believe that a child should suffer because of someone's irresponsibility. **If a 15-year-old girl can take responsibility, and strive and achieve her goals and dreams, anyone can.**

Rechel

They tell you, "It's a quick fix. It will solve your problems and allow you to get on with your life."

They're Wrong.

Few women have been told that having an abortion carries lasting physical and psychological consequences.

If they had been warned, would their "choice" have been abortion?

A**bortion is** >>>

Psychological Problems

- Depression and despair are common after abortion.
- Women who abort have a **six times higher rate of suicide** than those who carry their babies to term.¹
- Teenagers who abort are **10 times more likely to attempt suicide** than teens who have not had an abortion.²
- Compared to women who gave birth, women who aborted were **65% more likely to be at risk of long-term clinical depression**.³

Future Risks

- Women who abort are more likely to experience **future ectopic pregnancy, infertility, hysterectomy, stillbirth, miscarriage and premature birth** than women who have not had abortions.⁵
- Women who abort not only put their own lives and health at risk; they also endanger the lives of their current and future children.

"I thought the abortion would free me from a responsibility I felt I was not ready for. Instead, it held me in bondage to feelings of regret, remorse, depression and despair. My soul became a slave to self-hatred and worthlessness. My sanity was the price I paid. Women deserve better than abortion."

– Ann Marie, a Post-Abortive Woman

Physical Complications

Women can face:

- **Perforation of the uterus**
- **Hemorrhaging**
- **Cardiac arrest**
- **Endotoxic shock**
- **Major unintended surgery**
- **Infection**
- **Convulsions**
- **Undiagnosed ectopic (tubal) pregnancy**
- **Cervical laceration**
- **Uterine rupture**
- **Death**⁴

Citations on page 15.

- Women who abort are **144% more likely to physically abuse their children**.⁶
- Women who have undergone previous abortions have a **60% higher risk of miscarriage**.⁷



Get the Facts

Arguments for abortion get repeated all the time. They sound logical, but would an adult make these statements? Let's look at some ideas out there and contrast them with alternatives.

Some say: "It's my body, so it's my choice!"

OTHERS SAY: If the preborn child is just a part of her mother's body (like an organ) or growing on her mother's body (like a tumor), this rhetoric might make sense. However, the reality is that from the moment of fertilization, the child in the womb possesses her own individual, complex genetic makeup, separate from her mother's DNA. A preborn child is definitely not a part of the mother's body – she is her own self, with her own body.

Some say: "It's just a blob of tissue."

OTHERS SAY: Simple tissue does not have a beating heart, brain waves, fingerprints, or unique DNA. Medical science shows that human life begins at fertilization. "The development of a human begins with fertilization, a process by which the spermatozoon from the male and the oocyte from the female unite to give rise to a new organism, the zygote."¹ After fertilization, nothing new is added to the person except oxygen, nutrition, and time.

Some say: "But the child won't have a good quality of life."

OTHERS SAY: Having an abortion to end a person's life, rather than bringing a child into a difficult family situation is strange logic. We have not (yet) legalized killing toddlers living in unhealthy environments. Instead, we try to help these children and their families. Many organizations offer help for expecting mothers. Moreover, for each child who is adopted, approximately 36 couples are waiting, hoping and praying for a chance to adopt.

Reasons people do and don't support abortion



Some say: "But the baby has a fetal deformity."

OTHERS SAY: Abortion for fetal deformities is discrimination against disabled people. This can lead to eugenics or working to remove unwanted traits from society by preventing the reproduction of those deemed weak or unfit. Studies show that for prenatal Down Syndrome diagnosis, 84%-92% of those babies will be aborted.^{2,3,4,5} This happens despite waiting lists of people wanting to adopt special needs children.

Some say: "I'm personally opposed to abortion, but wouldn't tell someone else not to do it."

OTHERS SAY: What if our nation's founders said they were "personally opposed to slavery" but never stood up against it? African Americans might never have been recognized as persons deserving freedom and respect. Should children in the womb be slaves to the life and death decisions of others?

Some say: "It's about women's rights."

OTHERS SAY: If it's all about "women's rights," why do 64% of women report feeling coerced or forced into their abortions?⁶ Another study shows homicide as the leading cause of death among pregnant women.⁷ Additionally, over 100 million girls in this world were never born due to sex-selective abortions.^{8,9} We have come too far to reduce a woman's "right" to mean the right to kill her own child. Shouldn't we protect the rights of ALL women, including girls in the womb?

Some say: "I don't care, it's still MY right."

OTHERS SAY: If a child in the womb is a developing human being, should another person really have the right to "kill" her? Abortion is a violent act (see pages 12 and 13). Does a pregnant woman have the right to dismember a child inside her body? Is it okay for a doctor to suck the baby out of the womb with a machine? Society shouldn't encourage anyone to engage in this type of extreme violence.

Before You Decide.

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Abortion & Breast Cancer

How does abortion affect this process?

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

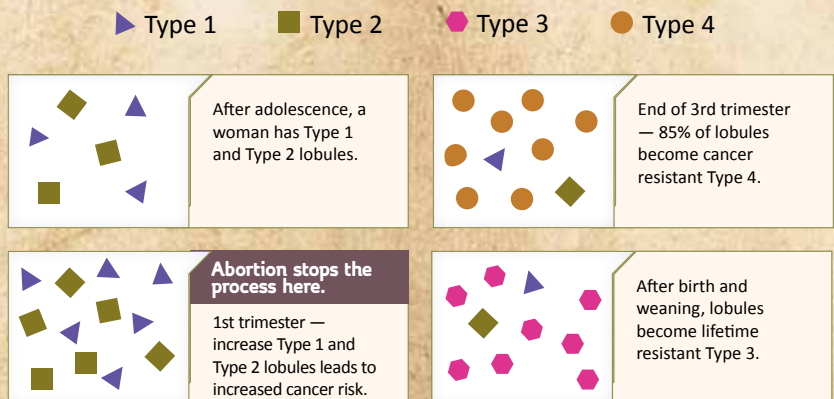
What about miscarriages?

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

A Woman's Natural Way of Resisting Breast Cancer

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

The Biology Of Breast Development



Citations on page 15.

ADOPTION IS A CHOICE

If you're not ready or able to be a parent, adoption can be a positive solution for you and your baby. You can research adoption without obligation and find out that adoption isn't "giving your baby away." Learn the facts about open adoption.

YOU MIGHT BE THINKING...

I don't want someone I don't know to raise my baby.

With open adoption you can choose from dozens of approved families waiting to adopt. You can get to know the family or families you like before your baby is born and decide how you want to keep in touch after the adoption. You can even plan future visits with your baby and the adoptive family, if you would like.

I couldn't handle wondering about my baby the rest of my life.

With an open adoption, you have the opportunity to always know how your baby is doing. If you want, you can choose a family who will keep in touch with you through pictures, letters, email, websites, phone calls, or even visits. The contact arrangement of your adoption can change over time with your comfort level. Your baby can know who you are and how she was given a life through your loving choice of adoption.

I don't want to deal with the father or worry about his role in the baby's life.

With adoption you can totally separate from your baby's father and provide a positive father figure for your baby's future. Your baby's father could also participate in the adoption process, if you agree, and can take part in future communication with the adoptive family you choose, even if you don't want to stay in touch.

I can't tell my family.

You can make a confidential adoption plan and hide your pregnancy. Only the adoption professionals you trust, the adoptive family you choose, and the loved ones you include will know about your pregnancy and your plans. If needed, you could even relocate temporarily to keep your situation private.

I can't afford this pregnancy.

Adoption services are FREE to you. If your insurance doesn't pay for medical care, you can get your pregnancy-related expenses covered through the adoption process. When choosing adoption, it is also possible to get help with other expenses during pregnancy, if allowable by your state law.

For information about open adoption:
800-923-6784
LifetimeAdoption.com

Request a free book for women facing unplanned pregnancy at:
FreeAdoptionBook.com

The Overpopulation

Ominous warnings of millions starving to death in a world overcrowded with people were prevalent in the late 20th Century. Panic struck. It was no coincidence that family planning programs—including abortion procedures—were developed and accepted at the height of this scare.

However, the 21st century brought the realization that the increase in population was actually due to dramatically increased life expectancies. Earth Report 2000 acknowledged that, **“World population increased not because people were breeding like rabbits, but because they stopped dying like flies.”**¹

Although the world’s population has continued to grow, the number of children has decreased drastically and will therefore cause an eventual population decline.

According to Philip Longman of the New America Foundation, “Global fertility rates are half what they were in 1972.”² To merely maintain its population, a nation’s fertility rate must be at least 2.1 children per woman.³

Unfortunately, every developed country is currently at or below this level.⁴ While the average fertility rate of the U.S. is 1.87,⁵ the current rate in Europe is a dismal 1.5.⁶ In addition, one must consider that 60% of the U.S. population growth since 1990 has come from immigrants and their children.⁷ With the acknowledgment of looming

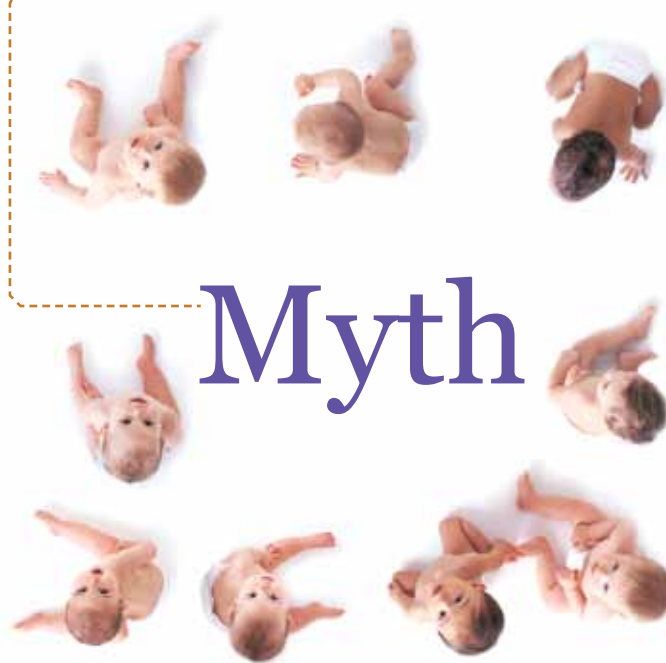
economic disaster, governments in Russia,⁸ Japan, Australia,⁹ and most European countries^{10,11,12} have initiated monetary “pronatal” incentives for having children—incentives that have not yet proven effective in raising fertility rates.

Global demographic trends are continually studied at the highest levels of leadership,

dominating any discussion of the United States’ long-term fiscal, economic or foreign policy direction.¹³ These studies show that **population growth, which supplies an increasing source of workers and consumers, is vital to maintaining a stable economy, national strength and security, and ultimately a free society.**¹⁴ However, this information isn’t getting to the average citizen.

Maintaining sufficient workers to share the economic burden of providing Social Security and medical care for the elderly proves crucial to a population that exhibits increased life expectancy. When considering that there are currently 26 elders (those 65 and older) for every 100 working-age adults (20–64), the future looks bleak. Predictions show 42 per 100 by 2030 and 49 per 100 by 2050.¹⁵ Carl Haub, of the Population Reference Bureau, believes tinkering with the economy and adjusting the retirement age will not solve the problem. He says, “You can’t keep going with a completely upside-down age distribution...you can’t have a country where everybody lives in a nursing home.”¹⁶

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Decision Types

Adult

SAVE A LIFE

If you have taken the abortion pill and have changed your mind, it may not be too late. **Please call the Abortion Pill Reversal nursing team immediately:** 877-558-0333 24/7 patient line abortionpillreversal.com apreversal@gmail.com office: 619-577-0997

Finding out I was pregnant was not the magical moment I envisioned it would be. I tried to convince myself that terminating the pregnancy was the best decision for the child.

I researched the abortion pill, decided that was the method I was going to use, and made my appointment. After being called back to the room, I was briefed on the pills, given information on what to expect, took the first dose and left.

All at once it hit me that I had just made the worst decision ever, but I had no idea what to do. **I jumped on my computer and found a site for help reversing the pill.**

The lady who answered gathered information and provided me the number of a doctor who would be able to help. The progesterone treatment was a success and months later I welcomed my perfectly healthy baby girl to the world.

Not following through with the abortion pill has been a tremendous blessing. My little girl is the joy of my life and I truly don’t know what I would do without her. I am so thankful God placed people in my path who were able to make sure my little angel had a chance at life.

—Anonymous

WHAT ABOUT RAPE & INCEST

Kathleen DeZeeuw's son, Patrick, was conceived in rape when she was 16.

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

As traumatic as rape is, abortion does not un-rape the mother. In fact, studies show that most women who become pregnant through rape don't want an abortion. Patricia, a victim of rape, said, **"In my experience, abortion only compounded the trauma and pain I was already experiencing... While it may seem to be the quickest and easiest solution to a painful, humiliating 'problem,' abortion is a band-aid approach. For me, the effects of abortion are much more far-reaching than the effects of the rape."**¹

In the only major study of pregnant rape victims ever done, Dr. Sandra Mahkorn found that 75-to-85% chose against abortion.² Joan Kemp, a rape crisis center counselor, said, **"I am familiar with no case of incest-related abortion that did not make matters worse for the victim."**³

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

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

Researchers David C. Reardon, Julie Makimaa, and Amy Sobie completed a nine-year study on pregnancy outcomes of sexual assault victims. As part of their research the authors found that after any abortion, it is common for women to experience guilt, depression, feelings of being "dirty," resentment of men, and lowered self-esteem. These feelings are identical to what women typically feel after rape.

Abortion only adds to and accentuates the traumatic feelings associated with sexual assault. Rather than easing the psychological burdens, abortion adds to them.



The stories mentioned are just the beginning of what is being exposed surrounding the tragedy of abortion due to rape and incest. Reardon, Makimaa, and Sobie identified testimonies from 192 women who became pregnant as a result of rape or incest and 55 children conceived in sexual assault

and compiled them in their provocative book, *Victims and Victors*.⁴

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

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Not Adult

I still remember a week-long horror of a rollercoaster ride when my then-fiancée found out she was pregnant. She asked if I'd like to do the nursery in a Warner Brothers or Disney theme. My first thought was, "Oh NO! NO!!!!!!!" I was terrified. I immediately regretted that conversation we had at the very beginning of our relationship—that we would never get an abortion should she become pregnant. Now I was stuck. I wanted an escape hatch. I wanted out ... any way out. Although I said I would support her, I was really trying to find that escape hatch.

Telling my parents was hard. My father encouraged us to have the baby; my mom cried, not knowing "whether to

be happy or sad" for us. Her parents were worse. After we told them the news, her father demanded that we "take care of this" because he didn't want there to be unseemly appearances in his family. I had found my escape hatch. Even though I argued fiercely with him before we left, once we were alone I started gently emphasizing her father's positions. What would everyone say? Are we really ready for this? What about the wedding? What about our plans? **I didn't think of the baby ... not really. Not then. I was in a panic and I wanted out and that was the way I was playing it.**

I don't remember how I finally changed her mind—it took about a week, but I did it. I remember being

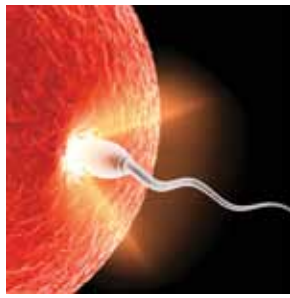
with her at the clinic, with one of her friends, smoking outside and then driving her home thinking, "Thank God it's over!"

The child would be about 13 or 14 years old now. When I look at our two children, I know there ought to be three. I don't know if the baby was a boy or a girl. I keep thinking it was a girl, probably because my wife wanted one so badly. **Although I still struggle with depression and guilt, I eventually found forgiveness. My wife is not ready to take that step. So I must continue to try and help her bear that burden and make up for the crucial time I failed her.**

Christopher

Day 1: Fertilization

The sperm joins with the egg to form one cell. This single cell contains the complex genetic makeup for every detail of a new human being. After fertilization, nothing new is added but oxygen, nutrition and time.¹



1st Month: 1–4 Weeks

The first cell divides in two, and cell division continues as it travels down the fallopian tube to the uterus. Foundations of the brain, spinal cord, and nervous system are already established and by day 21 the heart begins to beat in a regular fashion.² Muscles are forming, and arms, legs, eyes, and ears have begun to show.



2nd Month: 5–8 Weeks

By six weeks, brain waves can be detected.³ The jaw forms, including teeth and taste buds.⁴ The baby begins to swallow amniotic fluid, and sometimes hiccups.⁵ Fingers and toes are developing and at seven weeks the chest and abdomen are fully formed.⁶ Swimming in the amniotic fluid, she now looks like a miniature human infant.^{7,8}



3rd Month: 9–12 Weeks

Unique fingerprints are evident and never change.⁹ The baby now sleeps, awakens, and exercises her muscles. The baby is very active. The gender can be visually determined and family resemblances may appear.¹⁰ By the end of the month all the organs and systems of her body are functioning.¹¹



4th Month: 13–16 Weeks

By the end of the fourth month, the baby is 8–10 inches in length and weighs about one-half pound. Her ears are functioning and she hears her mother's heartbeat, as well as external noises like music.¹² Lifesaving surgery has been performed on babies at this age.



When Does

A 2-year-old vs.
a baby in the womb:
**What's the
difference?**

Level of
Development

True, embryos and fetuses are less developed than you and I. Should older children have more rights than their younger siblings? Some people say that self-awareness makes one human. If that were true, newborns would not qualify as human beings.

Size

Yes, embryos are smaller than newborns and adults, but why is that relevant? Men are generally taller than women, but physical size doesn't equal value.



Life Begin?

Why is the only difference between abortion and the unjustified killing of a child the short distance of the birth canal?

Stephen Schwarz uses the acronym **"SLED"** to show there are only four differences between a preborn child and a newborn: size, level of development, environment and degree of dependency. Although humans differ immensely with respect to talents, accomplishments, and degrees of development, they are equally valuable because they share a common human nature.

E

Where you are has no bearing on who you are. Does your value change when you cross the street or roll over in bed? Location cannot change the essential nature of the preborn from non-human to human. If the preborn are not already human, merely changing their location, moving them eight inches down the birth canal, can't make them so.

D

Degree of Dependency

If viability makes us valuable human beings, then all who depend on insulin or kidney medication are not valuable. Conjoined twins who share blood type and bodily systems would also have no right to life.

Citations on page 15.



5th Month: 17–20 Weeks

If a sound is especially loud, the baby may jump in reaction to it. Thumb-sucking has been observed during the fifth month.¹³



6th Month: 21–24 Weeks

Oil and sweat glands are functioning. She grows rapidly in size and strength while her lungs become more developed.¹⁴



7th Month: 25–28 Weeks

The baby can now recognize her mother's voice. She exercises by stretching and kicking. She uses the senses of hearing, touch and taste, and she can even look around with open eyes.¹⁵



8th Month: 29–32 Weeks

The baby swallows a gallon of amniotic fluid per day and often hiccups.¹⁶ The baby's kicks are stronger and mom may be able to feel an elbow or heel against her abdomen.¹⁷



9th Month: 33–36 Weeks

Gaining one half pound per week, the baby is getting ready for birth. The bones in her head are soft and flexible to more easily mold for the journey down the birth canal.¹⁸ Of the 45 generations of cell divisions before adult-

hood, 41 have already taken place. Only four more come before adolescence. Ninety percent of a person's development happens in the womb.¹⁹

4, 5, 6 & 7 month photos: © Life Issues Institute
Citations on page 15.

As a pastor's daughter, I knew little about abortion but believed that every woman had a "right to choose." When abortion became legal in 1973, many felt that women had finally been granted a certain freedom. Yet how many of us knew exactly how abortions were performed?

I became involved with Planned Parenthood (PP) through a group called the Coalition of 100 Black Women. When a speech I made at an international conference received media coverage, I was invited to join the Planned Parenthood board.

During the course of my five-year tenure, we received a lot of literature discussing population control and concern for the growing number of poor people in the United States and developing countries. **As a black woman, I wondered why abortion was more necessary for my ethnic group and why this organization fought so hard to give us this particular "right" when the rights for better education, better jobs, and better housing seemed paramount to me.** Continuing on the board, I learned about the biggest challenge that PP of New York City

I came to the next meeting horrified, shaking with disbelief, and filled with protestations. Holding up the papers, I said that these procedures were traumatic for both the mother and her baby. An older woman sitting across from me looked me coldly in the eye and said, "It is not traumatic!" I was stunned by her insensitivity and chilled by her icy stare. I was on the verge of resigning from the board but thought, "Who will speak up if I leave?" I remained until 1980, determined to be a thorn in their side and often cast the lone opposing vote.

REPRODUCTIVE RACISM

After attending a number of board meetings, I noticed that several board members arrived in chauffeured limousines. I wondered why these men of wealth were so interested in people who lived in the inner-city.

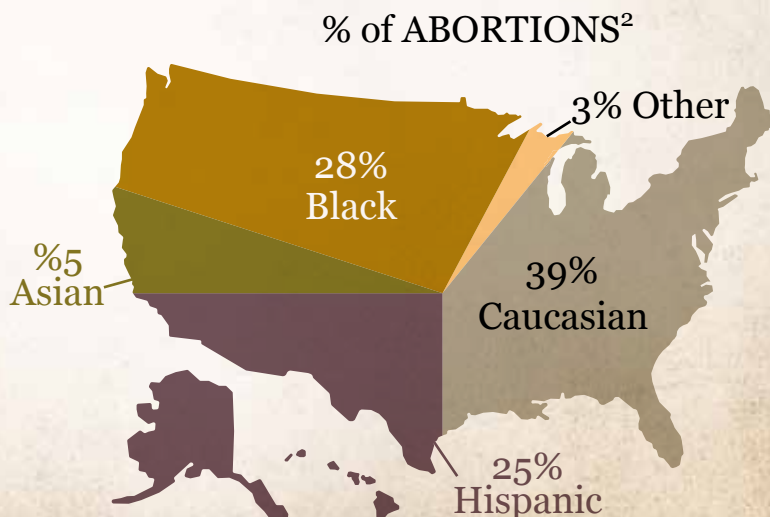
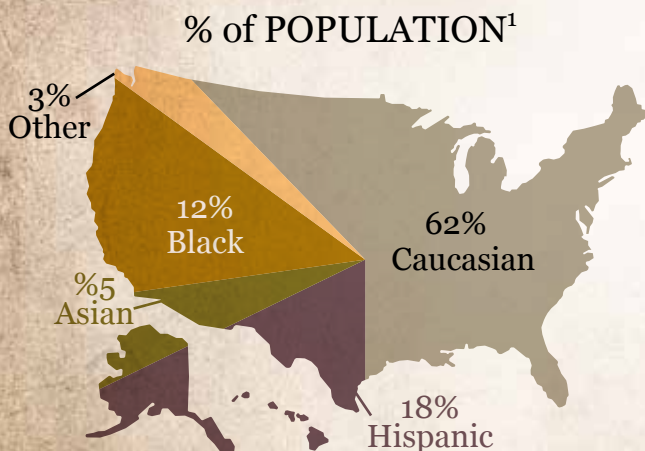
The majority of the board members were male, and the handful of women appeared to be much older than my twenty-seven years. I was the only person of color on the board.

faced. **For every abortion that was performed, the Department of Health had to issue a death certificate.** Death certificates? Did that mean the babies were alive? As board members, we were required to understand abortion procedures. **The viability debate ended for me when I read documents detailing how abortions were performed** (see pages 12 & 13).

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Does a connection between ABORTION & RACE exist?

Surprisingly, two ethnic segments have abortions at disproportionately higher percentages than others.



* Hispanics make up 18% of U.S. society and have 25% of all abortions

*** Blacks make up only 12% of U.S. population, yet they account for 28% of abortions (2.3 times their total population percentage!).

Citations on page 15.

Doctors, nurses, staff and volunteers from abortion centers across the nation have learned that the Most Adult Thing to do is to Leave

"We were told to find the woman's weakness and work on it. The women were **never given any alternatives.**"

—DEBRA HENRY, FORMER ABORTION COUNSELOR

"It's a lie when they tell you they're doing it to help women, because they're not. **They're doing it for the money.**"

—NITA WHITTEN, FORMER ABORTION COUNSELOR

"Sorrow, quite apart from the sense of shame, is exhibited in some way by virtually every woman for whom I performed an abortion, and that's 20,000 as of 1995. The sorrow is revealed by the fact that most women cry at some point during the experience...**The grieving process may last from several days to several years...**Grief is sometimes delayed...The grief may lie sublimated and dormant for years."

—SUSAN POPPEMA, M.D., FORMER ABORTIONIST

"The picture of the baby on the ultrasound bothered me more than anything else. The staff couldn't take it. **Women who were having abortions were never allowed to see the ultrasound...because we knew that if they so much as heard the heartbeat, they wouldn't want to have an abortion.**"

—JOSEPH RANDALL, M.D., FORMER ABORTIONIST

"I am deeply troubled by my own increasing certainty that I have in fact presided over 60,000 deaths. There is no longer serious doubt in my mind that **human life exists from the very onset of pregnancy.**"

—BERNARD NATHANSON, M.D. FORMER ABORTIONIST

"My official title at the mill was 'health worker.' I did various duties—lab work, leading groups (deceiving women about their abortions), 'advocating' (deceiving women during their abortions), and assisting the abortionist, which included helping during the abortion and checking to make sure all the parts of the baby were there in the collection jar afterwards. **I will never forget, in the second-trimester abortions, holding those little feet up to a chart on the wall to make sure of the age of the baby.**"

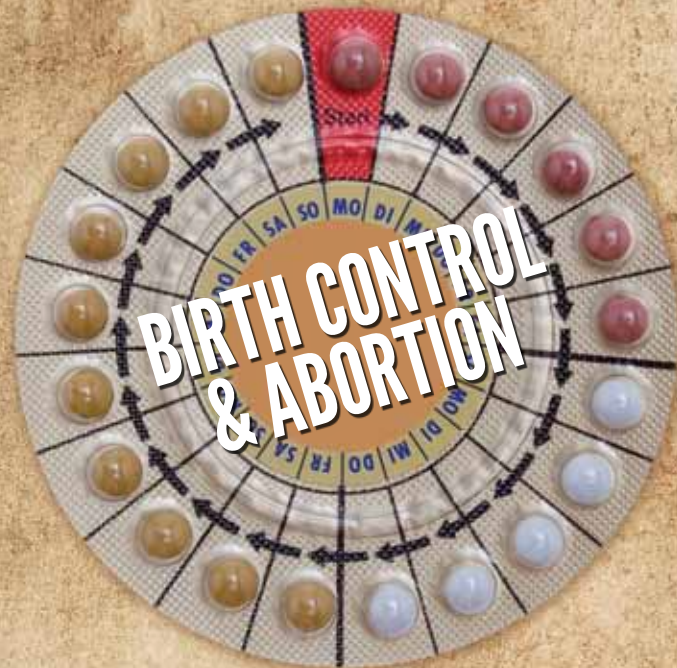
—DINA MADSEN, HEALTH WORKER

"I have been there, and I have seen these totally formed babies as early as ten weeks...**with the leg missing, or with their head off.** I have seen the little rib cages..."

—DEBRA HENRY, FORMER ABORTION COUNSELOR

"I found much distress in the clinic, but it involved not only the women. I saw the **pain of the babies who were born burned from the saline solution** used for late-term abortions. I saw the bits of feet, bits of hands, the mangled heads and bodies of the little people. I saw pain and felt pain."

—PAULA SUTCLIFFE, FORMER CLINIC WORKER



Like emergency contraception, **all hormonal birth control methods have the capability to cause**

an abortion (the pill,¹ patch,² mini-pill,³ shot,⁴ vaginal ring,⁵ intrauterine devices,⁶ etc.). Hormonal contraceptives attempt to stop the release of the egg from the ovary, thicken cervical fluids to prevent fertilization (pregnancy) and thin the lining of the uterus to prevent implantation. Hormonal contraception does not always stop ovulation. When breakthrough ovulation occurs, there is a possibility you can get pregnant (fertilization of the egg). Studies have shown that ovulation rates in women taking oral contraceptives ranged from 1.7 to 28.6% per cycle. For women taking progestin only pills (the mini-pill) ovulation rates range from 33 to 65%.⁷ When these contraceptives do not stop pregnancy, they are designed to cause an abortion by making it difficult for the embryo to implant and receive nourishment from the mother. Birth control manufacturers insist that their products do not terminate an existing pregnancy. However, they have redefined the terms "conception" and "pregnancy" to mean implantation rather than fertilization (implantation happens 7–10 days after fertilization).⁸

DOCUMENTED SIDE EFFECTS⁹

- Nausea
- Abdominal pain
- Fatigue
- Headache
- Dizziness
- Vomiting
- Diarrhea
- Breast tenderness

Citations on page 15.

ABORTION METHODS

SURGICAL

Vacuum Aspiration

In this first trimester procedure, the abortionist inserts a hollow plastic suction tube into the dilated cervix. The uterus is emptied by either a manual syringe or high-powered suction machine. **The baby is torn into pieces as he or she is pulled through the hose.**^{1,2,3}

Dilation and Suction Curettage (D&C)

This is similar to the vacuum aspiration but is generally used after 14 weeks. After the baby is suctioned out of the uterus the abortionist inserts a curette, a loop-shaped steel knife, into the uterus. With this the abortionist **cuts the placenta and umbilical cord into pieces and scrapes them out into a basin.** The uterus is again suctioned out to ensure that no body parts have been left behind. Bleeding is usually profuse.⁴

Dilation and Evacuation (D&E)

Once the cervix is dilated considerably farther than in first trimester abortions, the abortionist inserts a narrow forceps that resembles a pliers. This instrument is needed because the baby's bones are calcified, as is the skull. The abortionist inserts the instrument into the uterus, seizes a leg or other part of the body and, with a twisting motion, **tears it from the baby's body. The spine is snapped and the skull crushed. Body parts are then reassembled** and counted to make certain that the entire baby has been removed and that no parts remain in the womb.^{5,6,7,8}

Induction or Prostaglandin Abortion

Labor is induced using prostaglandin drugs, and the cervix is dilated. To ensure the baby will be dead upon delivery and to start uterine contractions, the abortionist may inject saline (salt water) or urea (a substance found naturally in urine and blood). To guarantee against a live birth and legal complications, doctors will inject the drug **Digoxin or potassium chloride directly into the baby's heart to kill the child before delivery.** Other times the baby is delivered alive and left without medical intervention until he or she dies.⁹ This method is used in the second or third trimester.¹⁰

Dilation and Extraction (D&X)

After the mother undergoes two days of dilation, the abortionist performs an ultrasound to locate the child's legs and feet. The abortionist then uses a large forceps to grasp one of the baby's legs. He pulls firmly, forcing the child into a feet-down position. Using his hands instead of forceps, the abortionist delivers the baby's body in a manner similar to a breech birth. The baby's head remains inside the birth canal. The abortionist uses **surgical scissors to pierce the child's head at the base of the skull.** The scissors are forced open to enlarge the skull opening. The abortionist then inserts a suction catheter into the brain and **vacuums out the child's brain tissue** with a machine 29 times more powerful than a household vacuum.¹¹

MEDICAL

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

EC is also known as the morning-after pill. It's a large dose of the common birth control pill and contains synthetic progestogen. EC is designed to be taken as a single dose within 72 hours after “unprotected sex.”

EC works in three ways:

1. It attempts to **stop ovulation.** Depending on where a woman is in her cycle, ovulation may or may not have already occurred before EC was taken.
2. It attempts to **stop fertilization** by impeding the transportation of the sperm to the egg.
3. It tries to **stop implantation** by altering (thinning) the endometrium (lining of the uterus) so the embryo cannot implant and receive nourishment from the mother.

Contrary to popular arguments, **increased access to EC does not decrease the rate of pregnancies and surgical abortions.**¹ In England, sexually transmitted infection rates have increased significantly since EC became widely available.²

The first two methods are contraceptive, but if they fail, the third method can cause an abortion because it occurs after fertilization.³

ella – Ulipristal Acetate (UPA)

Ella is a selective progesterone receptor modulator (SPRM). SPRMs block the action of the hormone progesterone, which is necessary for ovulation and implantation to occur. Progesterone also maintains the lining of the uterus and supports the embryo. Currently, the only other legal SPRM drug available in the United States is RU-486 (mifepristone). Although ella acts similarly to RU-486, it is being billed as an emergency contraceptive.⁴ ella is designed to be taken as a single dose within 5 days of “unprotected sex.” It is thought to inhibit and delay ovulation, attempting to prevent fertilization. However, ovulation may or may not have already occurred before ella was taken. Ella also alters the lining of the uterus, which, **if fertilization occurs, can prevent an embryo from implanting, causing an abortion.**^{5,6}

RU-486 – Mifeprex (The Abortion Pill)

Mifeprex blocks the action of the hormone progesterone which is needed to maintain the lining of the uterus and provides oxygen and nutrients for the baby. **Without it, the baby dies.** Mifeprex is used in conjunction with the drug Cytotec (misoprostol), which is taken two days after Mifeprex, causing uterine bleeding (sometimes profuse), strong contractions, and expulsion of the baby.

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

Citations on page 15.

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