

# What if...?



Not intended  
for children





Do you consider yourself to be a fair-minded person? Are you open to new ideas and information?

Sometimes a “what if” question can make us stop and think, to consider something in a new light, to have a conversation about a topic we’ve never taken the time to discuss before, or even to challenge our own assumptions.

Some of the most important conversations start with “what if?” So, here’s the “what if” behind this magazine:

**What if we talked about abortion?**

This magazine contains facts and perspectives on a topic so divisive we’ve almost lost the ability to rationally discuss it. Whether you consider yourself pro-choice or pro-life, are you open-minded enough to go beyond the rhetoric and consider the facts?

Nothing could be more contentious today. Nothing could be more important.

In the pages of this magazine, you can read how abortion affects everyone involved. We’ll examine common arguments from each side of the abortion debate and consider what they really mean.

With the Supreme Court’s reversal of the 1973 Roe vs. Wade decision – which returns the ability to regulate abortion to the voters of each state – knowing what abortion is and whom it impacts will help everyone understand if and how states should place restrictions on abortion.

California has some of the most permissive abortion laws in the world. What if we talked about it? Take a moment to read, ponder, and decide what you think.

Then, re-join one of the hottest debates in modern history.

Continue the conversation! Contact us:  
**California Right to Life Educational Fund**  
P.O. Box 4143, Napa, CA 94558  
[calrighttolife.org](http://calrighttolife.org)



*California Right to Life is a project of Life Legal Defense Foundation*

# What are the Facts?

1. Since *Roe v. Wade* legalized abortion nationally in 1973, there have been approximately \_\_\_\_\_ abortions in the U.S.<sup>1</sup>

- a. 31.4 million
- b. 63.8 million
- c. 7.5 million
- d. 23.7 million

4. After a pre-natal diagnosis of Down Syndrome, \_\_\_\_\_ are aborted.<sup>4</sup>

- a. 5-12%
- b. 67-92%
- c. 14-25%
- d. 28-49%

7. Before *Roe v. Wade* was overturned, there were \_\_\_\_\_ abortions in California every year.<sup>8</sup>

- a. Almost 7,000
- b. 22,000
- c. 57,000
- d. More than 130,000

2. Women between the ages of \_\_\_\_\_ have the most abortions.<sup>2</sup>

- a. 15-18
- b. 28-32
- c. 20-24
- d. 12-14

5. What percentage of women say they felt their abortions were pressured, coerced, or inconsistent with their values and preferences?<sup>5</sup>

- a. 20%
- b. 42%
- c. 14%
- d. 67%

8. In the 2021-2022 session, the California legislature passed bills that would use taxpayer funds to...<sup>9</sup>

- a. Pay travel costs of women coming to CA for abortions
- b. Build more abortion clinics in Los Angeles
- c. Give scholarships to abortionists-in-training
- d. All of the above

3. In some states, abortion is legal through \_\_\_\_\_ months of pregnancy.<sup>3</sup>

- a. 9 months
- b. 3 months
- c. 6 months
- d. 5 months

6. Which of the following is true about abortions in California?<sup>7</sup>

- a. They're funded by taxpayers through Medi-Cal
- b. They may be performed on minors without their parents' knowledge
- c. Insurance plans must cover abortion with no out-of-pocket costs
- d. All of the above

9. What happened when the U.S. Supreme Court overturned *Roe v. Wade* through the *Dobbs v. Jackson* decision in 2022?<sup>9</sup>

- a. Women's rights were taken away.
- b. Abortion became illegal in the U.S.
- c. Regulation of abortion returned to the people and their representatives.
- d. The Supreme Court started making laws about abortion.

(Find answers and sources on page 13.)

**Tell us what you think!**  
Continue the conversation  
at [calrighttolife.org](https://calrighttolife.org)





# Answering the “What Ifs” of Abortion

A question is often more than just a question—it’s important to hear the arguments and assumptions behind the questions people are asking and listen carefully to what is being said. What if we took a closer look at what both sides really mean?

## “What if it’s my body, my choice?”

### Pro-abortion:

A woman should control her own body and what happens to it. The fetus resides in the woman’s body, so she has the right to choose whether or not to abort just like any other medical procedure.

### Anti-abortion:

A fetus depends on a woman’s body to grow and develop; however she is not part of a woman’s body. Upon fertilization, the fetus has her own unique DNA separate from the mother’s (see page 8). She is a completely different human being. Shouldn’t one individual’s rights end where another’s begin?

## “What if abortion is healthcare?”

### Pro-abortion:

Abortion is essential healthcare and women suffer without it.

### Anti-abortion:

Abortion isn’t medically necessary (see page 6) and nearly all abortions are committed for elective reasons (see page 7).

## “What if she’s just not ready?”

### Pro-abortion:

A young woman isn’t ready to raise a child for 18 years. She’ll have to drop out of school. A pregnancy at this time will destroy the rest of her life.

### Anti-abortion:

A woman experiencing an unexpected pregnancy has many options and resources available to her, including a variety of public and private programs, grants, and services that offer financial and social support to young mothers. For a woman who really isn’t ready to raise a child, adoption is an option that cares for both mother and child. Safe Havens are also an option in all 50 states. These are fire stations, hospitals, and community service organizations where a birth mother can surrender her newborn child and immediately be relieved of any legal or financial responsibility.

## “What if there’s too much suffering?”

### Pro-abortion:

Why would you want to bring a baby into this world? There’s already too much suffering.

### Anti-abortion:

Why assume children born today will have the worst possible future? We have not legalized killing toddlers living in unhealthy or difficult environments. Instead, we try to help these children and their families. We should strive to eliminate the suffering, not those who might suffer.

## “What if bans lead to ‘back-alley’ abortions?”

### Pro-abortion:

Before *Roe v. Wade*, thousands of women died from unregulated “back-alley” abortions. Women will continue seeking abortions if they are banned. The only difference will be that it is unregulated and therefore unsafe.

### Anti-abortion:

After the introduction of antibiotics, the mortality rate of illegal abortions plummeted to 200 deaths, not thousands, in 1965.<sup>1</sup> Over 400 women died from legal abortions in the US between 1973-2019. Only 56 women died from illegal abortions during the same years.<sup>2</sup>

## “What if adoption is a bad alternative?”

### Pro-abortion:

Placing a baby for adoption means they’ll go into the foster care system and the birth mother will spend her life wondering what happened to her baby.

### Anti-abortion:

If a mother decides to place her baby for adoption, her child will be adopted at birth and not enter the foster care system. There are many more families waiting to adopt than babies placed for adoption.<sup>3</sup> A birth mother can work with an adoptive agency to choose the family that adopts her baby and choose the level of contact she maintains with the child and the adoptive family.

## “What if the world is overpopulated?”

### Pro-abortion:

If the population continues to grow, the earth’s resources will not sustain the human race. As a result, mass poverty, starvation and political breakdown will occur. This will cost many lives and those who have an interest in preserving human life should support controlling the population by eliminating excessive pregnancies through abortion.

### Anti-abortion:

The world is not overpopulated (see page 13). The fertility rate in the US has been consistently below replacement levels since 1971.<sup>4</sup> Over 150 countries are predicted to have fewer births than deaths by 2050. The global population is expected to decline between 2064 and 2100.<sup>5</sup> As a result, abortion will only exacerbate the economic and social problems which arise from a shrinking population.<sup>6</sup>

# 15 and 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 to strive and achieve her goals and dreams, anyone can."

— Sophie



## Local Pregnancy and Parenting Help

Find a free pregnancy care center or clinic near you:

**Call or text: 1-800-712-4357**  
**OptionLine.org**

## Thinking about Adoption?

800-923-6784  
LifetimeAdoption.com  
**soiwasthinkingaboutadoption.com**

## “What if it isn't a choice?”

“Choice” is often brought up in conversations about abortion, but did you know that only 33% of women identified their abortions as wanted?<sup>1</sup> 43% described their abortions as accepted but inconsistent with their values, and 24% said that their abortions were pressured or coerced.<sup>2</sup> Additionally, 60% said they would have preferred to give birth if they had more support.<sup>3</sup>

Coercion is a violating experience that leaves lasting scars. Women who had abortions and felt pressured do so have significantly worse mental health outcomes.<sup>4</sup> And yet, research shows that, despite feeling rushed, 67% of women who obtained abortions were not counseled, and 79% were never told about available resources.<sup>5</sup>

Is abortion really about choice if a majority of women seeking abortions would have chosen differently if not for the people around them? What if abortion isn't about women's choice?

***I pleaded, “We can't do this. This is our child, our flesh and blood. We can't kill our child.”... I wanted him to say, “You're right, we can't do this. I want this child; it is ours.” Oh, I wanted him to say this, but he didn't. He said, “You have to—there is no choice.” – Ada***

Answering the “What Ifs” of Abortion 1 “Lessons from Before Roe: Will Past be Prologue?” Guttmacher Institute, 2003, <https://www.guttmacher.org/gpr/2003/03/lessons-roe-will-past-be-prologue>. | 2 “Abortion Surveillance – United States 2020” Centers for Disease Control and Prevention, <https://www.cdc.gov/mmwr/volumes/71/ss/ss7110a1.htm>. | 3 American Adoptions, Inc. “How Many Couples Are Waiting to Adopt a Baby?” American Adoptions - How Many Couples Are Waiting to Adopt a Baby?, [www.americanadoptions.com/pregnant/waiting\\_adoptive\\_families](http://www.americanadoptions.com/pregnant/waiting_adoptive_families). Accessed 16 May 2023. | 4 “Births: Provisional Data for 2020,” Centers for Disease Control and Prevention, <https://www.cdc.gov/nchs/data/vsrr/vsrr012-508.pdf>. | 5 “Fertility, mortality, migration, and population scenarios for 195 countries and territories from 2017 to 2100: a forecasting analysis for the Global Burden of Disease Study,” The Lancet, [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(20\)30677-2/fulltext#secsectitle70](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(20)30677-2/fulltext#secsectitle70). | 6 Ibid. **What if it isn't a choice?** 1 Reardon, David C, et al. “The Effects of Abortion Decision Rightness and Decision Type on Women's Satisfaction and Mental Health.” *Cureus*, 2023, <https://doi.org/10.7759/cureus.38882>. | 2 Ibid. | 3 Ibid. | 4 Reardon, David C, et al. “Effects of Pressure to Abort on Women's Emotional Responses and Mental Health.” *Cureus*, 31 Jan. 2023, [https://www.cureus.com/articles/124269-effects-of-pressure-to-abort-on-womens-emotional-responses-and-mental-health?utm\\_medium=email&utm\\_source=transaction#](https://www.cureus.com/articles/124269-effects-of-pressure-to-abort-on-womens-emotional-responses-and-mental-health?utm_medium=email&utm_source=transaction#/). | 5 VM Rue et al., “Induced abortion and traumatic stress: A preliminary comparison of American and Russian women,” *Medical Science Monitor* 10(10): SR5-16 (2004)



## 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.

— Mia

### What if Abortion Isn't Medically Necessary?

Are women endangered by restrictions on late-term abortions? Former abortionist and practicing Ob-Gyn Dr. Anthony Levatino says, "You never need a late term abortion to save a woman's life."<sup>1</sup> Dr. Levatino goes on to explain,

*I was faculty at the hospital for nine years, and I saw hundreds of cases of really severe pregnancy complications—cancers, heart disease, intractable diabetes out of control, toxemia of pregnancy out of control. And I saved—in those nine years—I saved hundreds of women from life-threatening pregnancies... by delivery, either induction of labor or caesarean section, delivering the baby. And I always tell people, in all those years, the number of babies that I had to—that I was obligated to deliberately kill in the process—was zero. None.<sup>1</sup>*

The most common late-term abortion procedure is dilation and evacuation or D&E. This procedure takes two or three days to complete—sometimes even longer. A woman arrives at her first appointment to have laminaria inserted to dilate the cervix. She will then go home or to local hotel and return after the cervix is fully dilated. This allows the abortionist room to insert forceps or other tools into the uterus. The abortion is then completed by crushing the skull, tearing apart and removing the baby's body.

Approximately 12,000 – 13,000 late-term abortions (20+ weeks gestation) take place in the U.S. each year.<sup>2</sup> Research shows that late-term abortions are performed for the same reasons as early abortions.<sup>3</sup> In other words, the vast majority are performed for elective reasons that have nothing to do with the health of the mother or fetal anomalies.

**None are necessary to save a woman's life.**

### What About Miscarriage and Ectopic Pregnancy?

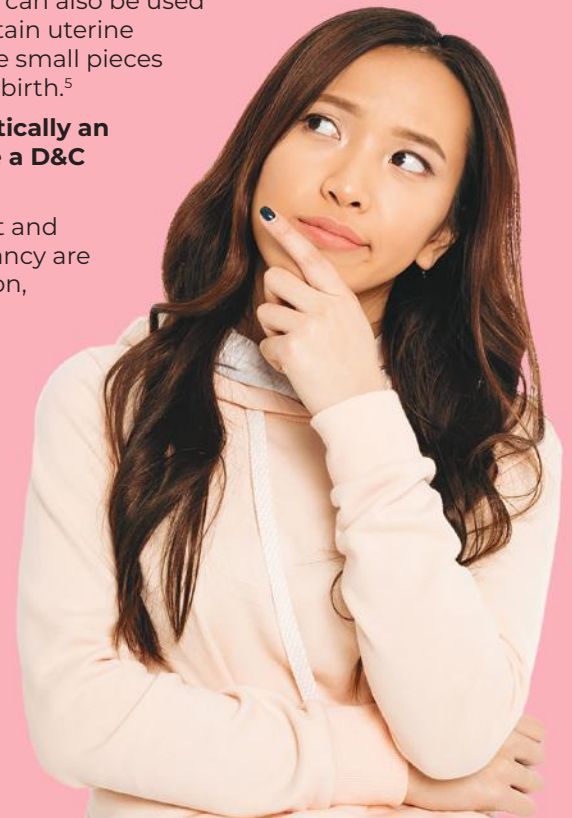
We have all heard claims that abortion restrictions prevent women who are experiencing miscarriages and ectopic pregnancies from getting medical care. Is this true?

**It's important to understand that ending an ectopic pregnancy and treatment after a miscarriage are both different from abortion.** In an ectopic pregnancy, the fertilized egg implants in the fallopian tube. It's impossible for the baby to survive there, and continued pregnancy can be life-threatening for the mother.<sup>1</sup> **Since the pregnancy is not in the uterus, none of the procedures used for abortion will end the pregnancy.** Instead, an ectopic pregnancy is ended either with a medication called methotrexate or a laparoscopic surgery.<sup>1</sup> The purpose of this procedure is to protect the life of the mother. Sadly, there is no way to re-implant the embryo in the womb, and at this stage it is unable to survive outside the womb. In over 90% of cases, the embryo has already died by the time ectopic pregnancy is detected.<sup>2</sup>

In cases of miscarriage, the baby has already died. Sometimes it is necessary to empty the uterus with a dilation and curettage (D&C) procedure after a miscarriage.<sup>3</sup> Although this procedure can be used for abortion (see page 9), that isn't its only purpose. D&C procedures can also be used to diagnose and treat certain uterine conditions<sup>4</sup> and to remove small pieces of the placenta after childbirth.<sup>5</sup>

**Something isn't automatically an abortion simply because a D&C was performed.**

Miscarriage management and ending an ectopic pregnancy are both distinct from abortion, which is the direct, intentional killing of the unborn child. No state prohibits women from receiving necessary medical care for miscarriage or ectopic pregnancy.<sup>6</sup>



# Why Do Women Get Abortions?



**95.9%**  
Elective and unspecified reasons<sup>1</sup>

**2.2%**  
Other physical health concerns<sup>2</sup>

**1.2%**  
Abnormality in the unborn baby<sup>3</sup>

**0.4%**  
Rape and incest<sup>4</sup>

**0.3%**  
Risk to the woman's life or a major bodily function<sup>5</sup>



## What if Abortion is Harmful?

Abortion is often presented as risk-free, but women experience physical and psychological complications, including effects that can last for years.

### Psychological Problems

Women who abort have a **six times higher rate of suicide** than those who carry their babies to term.<sup>1</sup>

Teenagers who abort are **10 times more likely to attempt suicide** than teens who have not had an abortion.<sup>2</sup>

Compared to women who gave birth, women who aborted were **65% more likely to be at risk of long-term clinical depression**.<sup>3</sup>

### Future Risks

Women who abort are more likely to experience **future ectopic pregnancy**,<sup>4</sup> **infertility**,<sup>5,6</sup> **preterm birth**<sup>7</sup> and **pregnancy loss**<sup>8</sup> than women who have not had abortions.

Women who abort are **144% more likely to physically abuse their children**.<sup>9</sup>

Women who have undergone previous abortions have a **60% higher risk of miscarriage**<sup>10</sup> and have a **44% increased risk of breast cancer**.<sup>11,12</sup>

## Hurt by abortion?

### Option Line

Call or text 1-800-712-4357  
or visit [optionline.org](http://optionline.org)

### Rachel's Vineyard

24/7 Call 877-467-3463  
or visit [rachelvineyard.org](http://rachelvineyard.org)

### National Helpline for Abortion Recovery

24/7 Call 866-482-LIFE (5433)  
or visit [nationalhelpline.org](http://nationalhelpline.org)

### Project Rachel

Call 888-456-HOPE (4673)  
or visit [hopeafterabortion.com](http://hopeafterabortion.com)

### Physical Complications

- Infection
- Hemorrhaging
- Damage to nearby organs
- Cervical laceration
- Perforation of the uterus
- Uterine rupture<sup>13</sup>
- Undiagnosed ectopic (tubal) pregnancy<sup>14</sup>
- Convulsion<sup>15</sup>
- Septic shock<sup>16</sup>
- Cardiac arrest
- Death<sup>17</sup>

**What if Abortion isn't Medically Necessary?** <sup>1</sup> "A Conversation with a Former Abortifacient: Is Abortion Ever Medically Necessary?" YouTube, Live Action, 24 Feb. 2016, [www.youtube.com/watch?v=y5l1Rnk-igI](https://www.youtube.com/watch?v=y5l1Rnk-igI) | <sup>2</sup> "Induced Abortion in the United States." Guttmacher Institute, 1 June 2019, [www.guttmacher.org/fact-sheet/induced-abortion-united-states/](https://www.guttmacher.org/fact-sheet/induced-abortion-united-states/) | <sup>3</sup> Kimportl, Katrina. "Is Third-Trimester Abortifacient Exceptional? Two Pathways to Abortion after 24 Weeks of Pregnancy in the United States." Perspectives on Sexual and Reproductive Health, vol. 54, no. 2, 2022, pp. 38–45, <https://doi.org/10.1363/psrh.12190>. Barry, Matthew B. "Abortion At or Over 20 Weeks?" Gestation: International Research Service, 30 Apr. 2018. <https://sfp.fas.org/crs/misc/R45161.pdf>. Accessed 21 Apr. 2023. And Foster, Diana Greene, and Katrina Kimportl. 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SD does not include fetal abnormality as a reason, but separately reports the number of abortions performed on babies with abnormalities. | <sup>3</sup> Data from six states with 119,603 total abortions (AZ, FL, LA, MN, NE, OK). | <sup>4</sup> Data from six states with 101,433 total abortions (FL, MN, NE, OK, SD, UT). | <sup>5</sup> Data from eight states with 122,773 total abortions (AZ, FL, LA, MN, NE, OK, SD, UT). Reasons of domestic violence and abuse are included in these totals. The number of abortions performed on state residents in Utah in the case of rape is suppressed because it is so small. **What if Abortion is Harmful?** <sup>1</sup> Gissler, M., Karalis, E., Ulander, V.M. "Suicide rate after induced abortion decreased in Finland after Current Care Guidelines." The European Journal of Public Health, 31 October 2014. | <sup>2</sup> Garfinkel, B., et al. "Stress, Depression and Suicide: A Study of Adolescents in Minnesota." 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# What if This Really is a Life?

## Day 1: Fertilization

A human being's life begins at fertilization. When the father's sperm fertilizes the mother's egg cell, a new complete organism comes into existence: a member of the human species, with his or her own unique DNA. After fertilization, nothing new is added, and he or she needs only oxygen, nutrition, and time to grow.<sup>1</sup>



↑  
Day 1

## 1<sup>st</sup> Month: 1-4 Weeks

About a week after fertilization, he or she implants in the uterine wall. By day 21, the heart is beating regularly;<sup>2</sup> foundations of the brain, spinal cord, and nervous system are established; muscles are forming on the arms and legs; and eyes and ears have begun to show.

## 2<sup>nd</sup> month: 5-8 weeks

The baby's brain is operating by six weeks and he or she swallows and hiccups.<sup>3,4</sup> Taste buds form.<sup>5</sup> Swimming in the amniotic fluid, he or she now looks like a miniature human infant.<sup>6,7</sup>



← Week 4\*

## 3<sup>rd</sup> Month: 9-12 Weeks

Unique fingerprints develop.<sup>8</sup> The baby sleeps, awakens, sucks his or her thumb, and is very active. The baby's sex can be visually determined. Family resemblances may appear.<sup>9</sup> All organs function by the end of the month.<sup>10</sup>

## 4<sup>th</sup> Month: 13-16 Weeks

The baby is 8-10 inches long and weighs about half a pound. The baby can hear his or her mother's heartbeat and voice as well as other noises, like music.<sup>11</sup> Surgery has been performed on babies this age.<sup>12</sup>



← Week 8\*

## 5<sup>th</sup> Month: 17-20 Weeks

The baby may jump in reaction to loud noises.

## 6<sup>th</sup> Month: 21-24 Weeks

Oil and sweat glands are functioning. Babies born at this age have survived.

## 7<sup>th</sup> Month: 25-28 Weeks

The baby can now recognize his or her mother's voice. The baby exercises by stretching and kicking and uses the senses of hearing, touch, and taste.

## 8<sup>th</sup> Month: 29-32 Weeks

The baby swallows a gallon of amniotic fluid per day.<sup>13</sup> The mother may be able to feel an elbow or heel against her abdomen.<sup>14</sup>

## 9<sup>th</sup> 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 help with the journey down the narrow birth canal.<sup>15</sup>



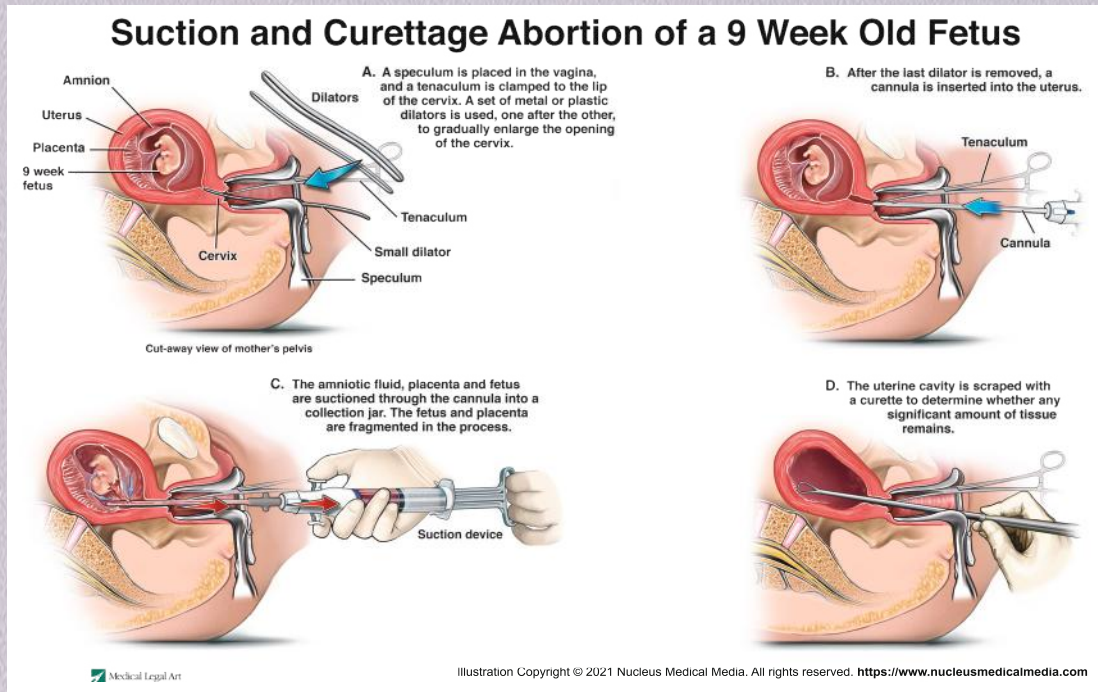
← Week 10\*

\*Images are actual size

**What if This Really is a Life?** <sup>1</sup> "The Drama of Fetal Development", American Baby, Jan. 1989, p. 45. Print. | <sup>2</sup> Moore and Persaud, The Developing Human-Clinically Oriented Embryology, 2nd ed. W.B. Saunders Company 1973 p. 310. Print. | <sup>3</sup> Hamlin, H. "Life or Death by EEG", JAMA, Oct. 12, 1964, p. 113. Print. | <sup>4</sup> deVries, J.I.P. et al, "The Emergence of Fetal Behavior." Early Human Development. Vol 12. 1985, p. 108. Print. | <sup>5</sup> Sadler, T.W. Langman's Medical Embryology, 7th ed., Baltimore: Williams & Wilkins, 1995, p. 341. Print. | <sup>6</sup> Valman, Pearson. "What the Fetus Feels." British Medical Journal. p. 234. Print. | <sup>7</sup> Mayo Clinic Family Health Book, 3rd ed. Harper Resource, 2003, p. 269. Print. | <sup>8</sup> Britt, Robert Roy. "Lasting Impression: How Fingerprints Are Created." LiveScience, Purch, 2 Nov. 2004, www.livescience.com/30-lasting-impression-fingerprints-created.html. | <sup>9</sup> Flanagan, Geraldine Lux, Beginning Life, DK Publishing, 1996 pp. 59-65. | <sup>10</sup> Cunningham, MacDonald, Grant, Williams Obstetrics, 18th ed., p. 90 & 103. Print. | <sup>11</sup> Flanagan, Geraldine Lux, Beginning Life DK Publishing, 1996 Limited p. 68. | <sup>12</sup> "Fetal Surgery." Edited by Cleveland Clinic, Cleveland Clinic, 1 May 2024, my.clevelandclinic.org/health/treatments/24945-fetal-surgery. | <sup>13</sup> Gordon, Debra MD. "Pregnancy." The Gale Encyclopedia of Medicine, 2nd ed., pp. 2694-2695. | <sup>14</sup> Ibid. | <sup>15</sup> Ibid.

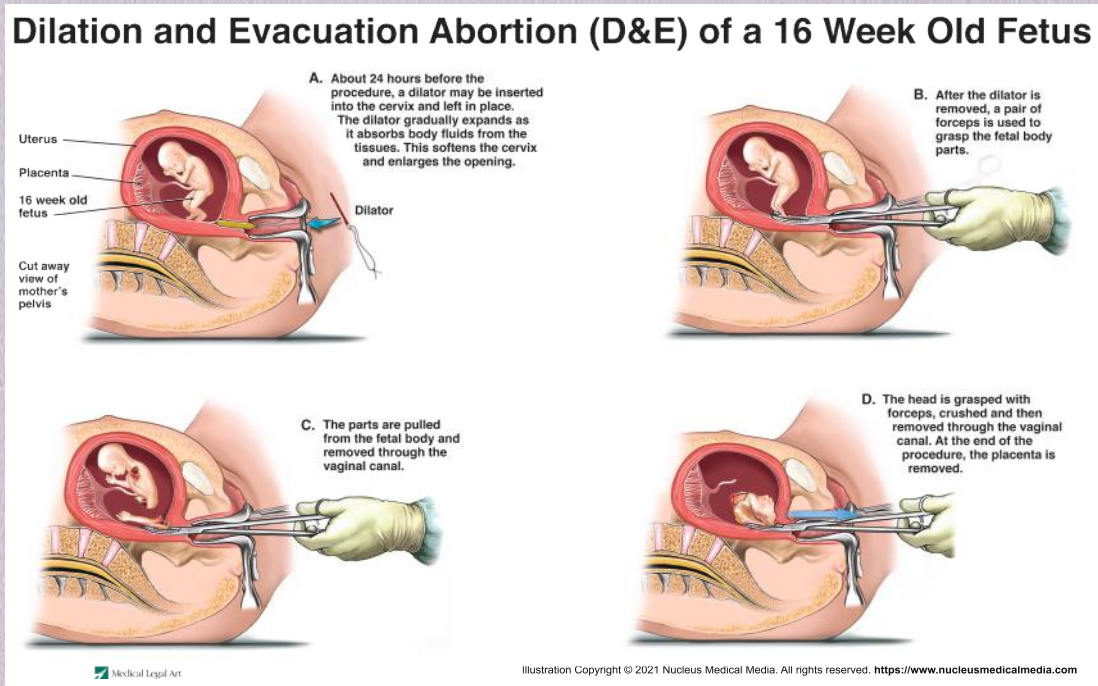


# What is abortion?



**Typically committed: 1st trimester Preborn age: 3-11 weeks old**

The uterus is emptied by a vacuum or syringe, the baby is torn into pieces as he or she is pulled through the hose.<sup>1,2,3,4</sup>



**Typically committed: 2nd trimester Preborn age: 11-22 weeks old**

The baby's body is torn apart with forceps. The spine is snapped, the skull is crushed and the remains are sucked out.<sup>5,6,7,8,9</sup>

### INDUCTION OR PROSTAGLANDIN

**Typically committed : 3rd trimester Preborn age: 22 weeks - full term**

Saline or urea may be injected into the womb to kill the child by suffocation and burning. Digoxin or potassium chloride may be injected into the baby's body to induce cardiac arrest. Labor is induced. The baby may be delivered alive and left to die.<sup>10</sup>

**Abortion Procedures** | 1 Marshal, Sarah, MD, Rebecca H. Allen, MD, MPH and Kirtly Jones, MD. "Manual and Vacuum Aspiration for Abortion." Women's Health. WebMD, 14 Nov. 2014. Web. | 2 Ibid. | 3 Ibid. | 4 Jatlaoui TC, Boutot ME, Mandel MG, et al. Abortion Surveillance – United States, 2015. MMWR Surveill Summ 2018;67(No. SS-13):1–45. DOI: <https://www.cdc.gov/mmwr/volumes/67/ss/ss6713a1.htm>. | 5 "Induced Abortion in the United States." Guttmacher Institute, 1 June 2019. [www.guttmacher.org/fact-sheet/induced-abortion-united-states/](http://www.guttmacher.org/fact-sheet/induced-abortion-united-states/). | 6 "An Abortion Doctor Describes a D&E." ClinicQuotes, 26 Nov. 2014. [clinicquotes.com/an-abortion-doctor-describes-a-de/](http://clinicquotes.com/an-abortion-doctor-describes-a-de/). | 7 Ibid. | 8 Ibid. | 9 Ibid. | 10 United States. Cong. House. U.S. House Committee on the Judiciary Subcommittee on the Constitution and Civil Justice. Testimony of Jill L. Stanek, RN HR 1797, Pain - Capable Unborn Child Protection Act U.S. House Committee on the Judiciary Subcommittee on the Constitution and Civil Justice May 23, 2013. 113th Cong. H. Bill. Print.



# What if it's Not the Easy Way Out?



**\*Warning, content may be disturbing for some readers**

I had recently removed my IUD due to it causing me problems, and within a couple of weeks, I found myself pregnant... My new boyfriend was a care-free 22-year-old with no children of his own. I knew he wouldn't want to have a baby with me after only a couple months of dating. After a few torturous days, I made an appointment with Planned Parenthood. At that appointment, I was given an ultrasound, and confirmed to be about 6 weeks along. My experience with the staff at Planned Parenthood was not a great one. They were all very cold and uncaring, which I guess should be expected from an abortion clinic. After being given the different abortion options, I decided on the "abortion pill" which at the time I viewed as an "easy way out."

One week later, I returned to Planned Parenthood and spoke with the clinic doctor, where he confirmed that I wanted to take the pills, and explained the process of how they work, and how they would affect my body. He told me that there was nothing to worry about, that I would have "some bleeding, and possibly clotting," and that complications resulting from pills were rare, I believed him.

The next day, at home alone with my infant son, I took the abortion pills. Within one hour I knew that everything the doctor had told me was a lie. I was bleeding so heavily, I believed I was dying. I was passing clots the size of baseballs, and I was in the worst physical pain of my life, worse than childbirth. The worst part of my experience was when I was sitting on the toilet and I felt myself pass a clot that felt strange. I looked into the toilet and saw my baby. It had a head, body, and tiny arms and legs. The shame and guilt that I felt at that moment, as I was forced to flush my aborted baby down the toilet, is impossible to describe.

Eventually the physical effects of the abortion had diminished, but I was left with a crippling depression in private, and forced to pretend that I was okay in public, since no one in my life, besides my boyfriend, knew of my abortion. About 3 weeks later, I woke up from a nap covered in blood, and still bleeding. I rushed to the ER where I was informed that my body had not passed all of my former pregnancy. A doctor used several giant q-tips to scrape my insides, and I had weekly visits to my OB-GYN after that to confirm that my HCG levels were steadily going down.

*- Mikayla*

[abortiontestimonies.com](http://abortiontestimonies.com)

## Abortion Pill Reversal

Did you know that a pill abortion can be interrupted and even reversed if the mother has only ingested the first set of pills?

### How It Works

1. The first set of abortion pills, Mifeprex/mifepristone, blocks the action of progesterone, the pregnancy hormone that is necessary to sustain the lining of the uterus and allow the baby to receive oxygen and nutrients. However, it does not act immediately. The baby may live for days.
2. The abortion pill process may be reversed if the mother does not take the second set of pills, misoprostol, and instead is prescribed extra progesterone to counteract the effects of the mifepristone. There is a 64-68% chance of a successful reversal if the woman begins the progesterone within 72 hours of ingesting the abortion pill.<sup>1</sup>



**Changing your mind? There's help. 1-877-558-0333 | [abortionpillreversal.com](http://abortionpillreversal.com)**



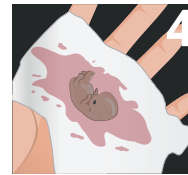
# Pills, Pills, Pills

## RU-486 or the Abortion Pill

This abortion method takes place in a woman's own home. It's a chemical cocktail of pills (mifepristone and misoprostol) designed to expel the fetus.

### How It Works

1. Pregnant women produce progesterone, the hormone needed to maintain the uterine lining which provides oxygen and nutrients for the baby.<sup>1</sup>
2. The first pill, Mifeprex/mifepristone (RU-486) blocks the action of progesterone - without it, the baby dies.<sup>2</sup>
3. 24-48 hours later the second dose of pills, Cytotec (misoprostol), is taken, causing uterine bleeding (sometimes profusely) and strong contractions to expel the baby.<sup>3</sup>
4. The mother delivers the fetus over the toilet at home. If she were to look closely, she would see her dead child. Even at only seven weeks, she will likely see his or her fingers and toes.<sup>4</sup>



## Emergency Contraception Pill

This method of contraception is also known as the morning-after pill. It's a large dose of the common birth control pill. EC is designed to be taken as a single dose within 72 hours after "unprotected sex."

### How It Works

1. It may stop ovulation. Depending on where a woman is in her cycle, an egg may have been released from the ovary before EC was taken.
2. It may stop fertilization by impeding the transportation of the sperm to the egg.
3. It may stop the implantation of a newly conceived embryo by altering (thinning) the lining of the uterus so the embryo cannot implant or receive nourishment from the mother.

Increased access to EC does not decrease the rate of pregnancies and surgical abortions.<sup>1</sup> Also, studies show that the rate of sexually transmitted infections has increased significantly since EC became widely available.<sup>2</sup>

## Birth Control Pill

According to the CDC, 9 out of 100 women each year who take the pill as directed will get pregnant.<sup>1</sup> All hormonal contraceptives (the pill, the patch, and the shot) have side effects—ranging from minor inconveniences to major, even life-threatening, complications. The steroidal hormones used in the combined birth control pills are classified as a Group 1 carcinogen<sup>2</sup> by the World Health Organization's International Agency for Research on Cancer. They're listed in the same category as plutonium. Is it worth taking a cancer-causing agent to suppress fertility?

### How It Works

1. The pill and other hormonal contraceptives contain steroidal estrogen that may stop ovulation.
2. It may stop fertilization by impeding the transportation of the sperm to the egg by thickening the cervical fluids.
3. It may kill a newly conceived human being by thinning the lining of the uterus so the embryo cannot embed in the uterine wall and receive nourishment from the mother.

Birth control manufacturers insist that their products do not "terminate existing pregnancies." However, they have redefined the terms "conception" and "pregnancy" to mean after the baby implants or embeds in the uterine wall, rather than when the human being is conceived at fertilization (implantation happens 7-10 days after fertilization).<sup>3</sup>

Studies have shown that ovulation rates in women taking oral contraceptives are as high as 28% per cycle. For women taking progestin only pills (the mini-pill) ovulation rates range are as high as 65%.<sup>4</sup>

**Abortion Pill Reversal** <sup>1</sup> Davenport M, Delgado G, Khaou V. Embryo survival after mifepristone: review of the literature. *Issues in Law and Medicine* 2017, 32 (1): 3-18. **RU-486** <sup>1</sup> "What Is Mifeprex?" Mifeprex - Mifepristone - Abortion Pill - RU486 - Early Option Pill, 2019, [www.earlyoptionpill.com/what-is-mifeprex/](http://www.earlyoptionpill.com/what-is-mifeprex/). <sup>2</sup> Ibid. <sup>3</sup> Ibid. <sup>4</sup> Mayo Clinic Family Health Book, 3rd ed. Harper Resource, 2003, p. 268. **Emergency Contraceptive Pill** <sup>1</sup> Polis, Chelsey B., Kate Schaffer, Kelly Blanchard, Anna Glasier, Cynthia C. Harper, and David A. Grimes. "Advance Provision of Emergency Contraception for Pregnancy Prevention." *Obstetrics & Gynecology* 110.6 (2007): 1379-388. Print. <sup>2</sup> Paton, David. "Random Behaviour or Rational Choice? Family Planning, Teenage Pregnancy and STIs." *Proc. of Royal Economic Society Conference*, Swansea, Apr. 2004. Web. **Birth Control Pill** <sup>1</sup> "Products." Janssen United States. 2016. Web. <sup>2</sup> World Health Organization, 2021, Agents Classified by the IARC Monographs, Volumes 1-129, [monographs.iarc.who.int/list-of-classifications/](http://monographs.iarc.who.int/list-of-classifications/). <sup>3</sup> *Obstetrics & Gynecology* 26.3 (1965). Print. <sup>4</sup> Larimore, W. L., and Joseph B. Stanford. "Postfertilization Effects of Oral Contraceptives and Their Relationship to Informed Consent." *Archives of Family Medicine* 9.2 (2000): 126-33. Print. **Abortion Pill Reversal** <sup>1</sup> Davenport M, Delgado G, Khaou V. Embryo survival after mifepristone: review of the literature. *Issues in Law and Medicine* 2017, 32 (1): 3-18.

# What if Adoption is an Option?

People often dismiss the idea of adoption due to myths and outdated stereotypes. These misconceptions don't help anyone. They're harmful to adoptees, birth mothers, adoptive parents, and women who are weighing their options in an unexpected pregnancy.

Modern adoption differs from adoption of the past. Knowing the facts could help you or a friend make an informed decision someday. It can also help you understand the experiences of adoptees and their parents.

Adoption isn't "giving your baby away." **It's a courageous and loving choice.** Furthermore, adoption isn't one-size-fits-all. Modern adoption plans are confidential, respecting a woman's right to privacy, and are customized for her circumstances and preferences. A woman placing her child for adoption gets to choose every element of her adoption plan. From selecting an adoptive family, to deciding the amount and frequency of future contact, her choices are honored every step of the way.

Adoption services are FREE to women placing for adoption. Pregnancy-related medical expenses may be covered as well. Depending on which state she lives in, financial assistance to cover food, housing, and living expenses may also be available.

**Not everyone is in a position in life to raise a child. Modern adoption is an option that cares for both the birth mother and her baby while treating them both with dignity and respect.**



**Learn more about adoption:**

800-923-6784 | [LifetimeAdoption.com](https://LifetimeAdoption.com)

**Get a free book for women considering adoption:**

[FreeAdoptionBook.com](https://FreeAdoptionBook.com)



## I FAILED HER...

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.

— Aaron



# What if Overpopulation isn't the Real Problem?

To listen to some, it would seem the world's population has our planet on the brink of disaster—the earth is at capacity and more babies means more people starving to death.

These attitudes promote the idea that overpopulation is a real problem and abortion is the solution. What if that isn't the case? The population has increased because people are living longer, not because they are having "too many kids."

In 1950, the average worldwide life expectancy was 46.9 years old. Based on projections, in 2050 the average person will live until 77.<sup>1</sup> In 1950, the average woman had 5 births. Now, the average woman has 2.<sup>2</sup>

1950: 5 births per woman



Now: 2 births per woman



According to the U.N., **8.04 billion people** currently live on Earth.<sup>3</sup> If we were to give every person on the planet a **30.5x30.5 ft. plot of land** on which to live, we would need **268,597 square miles of land**. That's the size of the state of Texas.<sup>4</sup>

To sustain its population, a nation's fertility rate must remain at or above 2.1 children per woman.<sup>5</sup> In 2021, the U.S. fertility rate was 1.66 children per woman.<sup>6</sup> Out of 227 countries reporting, only 97 are above replacement level.<sup>7</sup>

Maintaining sufficient workers to share the economic burden of providing Social Security and medical care for the elderly is a hurdle for populations with increased life expectancy. What if the real problem isn't overpopulation, but declining birth rates?

Elderly To Working Adults<sup>8</sup>

2019: 25 PER 100



2030: 30 PER 100



2050: 53 PER 100



*What do you think?*

Join the conversation at [calrighttolife.org](http://calrighttolife.org)



Answers to the quiz: 1.b, 2.c, 3.a, 4.b, 5.d, 6.d, 7.d, 8.d, 9.c

**What If... You Know the Facts?** | 1 "Number of Abortions - Abortion Counters." Number of Abortions in US & Worldwide. Web | 2 "Characteristics of U.S. Abortion Patients in 2014 and Changes Since 2008." Guttmacher Institute. Web | 3 "An Overview of Abortion Laws." Guttmacher Institute, 26 Apr. 2023, [www.guttmacher.org/state-policy/explore/overview-abortion-laws](http://www.guttmacher.org/state-policy/explore/overview-abortion-laws). | 4 "New Study: Abortion after Prenatal Diagnosis of Down Syndrome Reduces Down Syndrome Community by Thirty Percent." Charlotte Lozier Institute, 21 Apr. 2015, [lozierinstitute.org/new-study-abortion-after-prenatal-diagnosis-of-down-syndrome-reduces-down-syndrome-community-by-thirty-percent/](http://lozierinstitute.org/new-study-abortion-after-prenatal-diagnosis-of-down-syndrome-reduces-down-syndrome-community-by-thirty-percent/). | 5 Reardon, David C, et al. "The Effects of Abortion Decision Rightness and Decision Type on Women's Satisfaction and Mental Health." Cureus, 2023, <https://doi.org/10.7759/cureus.38882>. | 6 <https://files.medi-cal.ca.gov/pubsdoco/publications/masters-mtp/part2/abort.pdf> American Academy of Pediatrics v. Lungren 16 Cal.4th 307 (1997) Cal. Health and Safety Code Section 1367.251, Insurance Code Section 10123.1961 | 7 <https://www.guttmacher.org/fact-sheet/state-facts-about-abortion-california> | 8 Cal. SB-1142 Abortion services (2021-2022) Cal. SB-1245 Los Angeles County Abortion Access Safe Haven Pilot Program (2021-2022) Cal. AB-1918 California Reproductive Health Service Corps (2021-2022). | 9 Dobbs, State Health Officer of the Mississippi Department of Health, et al. v. Jackson Women's Health Organization et al. [https://www.supremecourt.gov/opinions/21pdf/19-1392\\_637.pdf](https://www.supremecourt.gov/opinions/21pdf/19-1392_637.pdf). | **Overpopulation** | 1 United Nations, Department of Economic and Social Affairs, Population Division (2019). World Population Prospects: The 2019 Revision, <https://population.un.org/wpp/Download/Standard/Mortality/>. | 2 United Nations, Department of Economic and Social Affairs, Population Division (2019). World Population Prospects: The 2019 Revision, <https://population.un.org/wpp/Download/Standard/Fertility/>. | 3 United Nations Population Fund, Population Dashboard <https://www.unfpa.org/data/world-population-dashboard> (Accessed May 5, 2023) | 4 "Environment," Texas Almanac, 19 Nov. 2017, [www.texasalmanac.com/topics/environment/environment](http://www.texasalmanac.com/topics/environment/environment). | 5 "World Population Prospects: The 2004 Revision Analytical Report" United Nations Department of Economic and Social Affairs Population Division 2004. Web. | 6 Center for Disease Control, 2022, Births: Provisional Data for 2021, <https://www.cdc.gov/nchs/data/vsrr/vsrr020.pdf>. | 7 CIA World Factbook, 2021, Total Fertility Rate, [www.cia.gov/the-world-factbook/field/total-fertility-rate/country-comparison](http://www.cia.gov/the-world-factbook/field/total-fertility-rate/country-comparison). | 8 OECD (2022), Old-age dependency ratio (indicator). doi: 10.1787/e255c9e8-en, <https://data.oecd.org/pop/old-age-dependency-ratio.htm#indicator-chart> (Accessed on 12 July 2022).



# What About Rape and 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."<sup>1</sup>

In the only major study of pregnant rape victims ever done, Dr. Sandra Mahkorn found that 75-85% chose against abortion.<sup>2</sup> 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."<sup>3</sup>

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 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 a 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.

These stories 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*.<sup>4</sup>

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.

## "I feel trapped"

If a woman gets an abortion because she feels like she has no other choice, is she really empowered? Apply that reasoning to any other crisis situation. If someone told you that they were struggling financially and had to go to a loanshark—would you say, "Yep, you have no other choice"? If a friend was in an abusive relationship and told you she felt trapped and couldn't leave her abuser, would you agree with her? True compassion doesn't reinforce someone's feelings of panic; it helps them see more options are available. So why is abortion different? Why is the response to a woman who feels like she has to have an abortion, "Yes, do what you have to"?

**What if abortion isn't empowering?**



What About Rape and Incest? 1 "The 'Hard Cases' of Abortion: A Pro-life Response 2000." The Family Research Council, 801 G Street, NW Washington, DC 20001. Print. | 2 Mall, David, Watts; Walter F. The Psychological Aspects of Abortion. Stritch School of Medicine, Department of Obstetrics and Gynecology, Washington D.C. University Publications of America, 1979. | 3 "The 'Hard Cases' of Abortion: A Pro-life Response 2000" by the Family Research Council, 801 G Street, NW Washington, DC 20001. | 4 Reardon, David C. Makimaa, Julie, Sobie, Amy, Victims and Victors: Speaking Out about Their Pregnancies, Abortions and Children Resulting from Sexual Assault, Acorn Books. January 1st 2000.



# California, Abortion “Sanctuary”?

Two years ago, Governor Gavin Newsom announced that he wants our state to be an abortion “sanctuary.” Today, he’s almost achieved that goal.

While people in other states work to legally restrict abortion, the California legislature has passed dozens of bills to promote and fund the abortion industry and to increase the number of abortions in California.

What does an abortion “sanctuary” look like?

It is a place where abortion is treated as something sacred, untouchable -- and unregulated. Abortionists in training will get special legal and financial benefits, including scholarships and stipends not available to other health care specialties.<sup>1</sup>

Practicing abortionists will receive state funding to provide free abortions to women with incomes well above the threshold for public assistance. Churches and other employers who object will be forced to advertise free abortions to their employees.<sup>2</sup>

Women will be allowed to self-induce abortion at any stage of the pregnancy by any means. Anyone may assist women in attempting to abort at any stage or pregnancy, by any means, and will have legal immunity even if the baby is born alive and then dies from his injuries.<sup>3</sup>

The state will advertise its abortion services to the world through taxpayer-funded advertising. A state-run website will tell women how to get free abortions, transportation, housing, meals, and childcare when they come to California’s abortion sanctuary.<sup>4</sup>

The legislature and abortion industry are also working together to build and expand abortion facilities for women from out of state. Planned Parenthood is a sponsor of all of the abortion-expansion bills. “We’re looking at how to build capacity and build workforce,” Jodi Hicks, CEO of Planned Parenthood Affiliates of California, told Associated Press. “It will take a partnership and investment with the state.”

Abortions on women from out of state will “likely be later term procedures, which are more complicated and expensive,” said Fabiola Carrion, director for reproductive and sexual health at the National Health Law Program.

***What if abortion isn’t good for our community? What if we talked about it?***

## Resources:

### Pregnant?

#### Unsure about your next steps?

Call or text 800-712-4357  
or visit [OptionLine.org](http://OptionLine.org)

#### Took the first abortion pill? Having second thoughts?

Call the 24/7 Hotline 877-558-0333  
or visit [AbortionPillReversal.com](http://AbortionPillReversal.com)

#### Had an abortion and regret it? Looking for help, hope, and healing?

Call 877-467-3463  
or visit [RachelsVineyard.org](http://RachelsVineyard.org)

OR

Call or text 866-721-7881  
or visit [H3helpline.org](http://H3helpline.org)

#### Work at an abortion clinic? Looking for a way out?

Call or text 888-570-5501  
or visit [AbortionWorker.com](http://AbortionWorker.com)



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