

# Volunteer Notes

## FROM THE EXECUTIVE DIRECTOR:

September 11th was a terrible day for all of us, in terms of sheer loss, despair at the state of the world, and dread of what would surely follow. As someone from the East Coast, I have many close friends and family in New York and Washington. It was unbearable as I waited hours and days to learn whether everyone was alright, and I ached for being so far away from the ones I love. During those first days, all I could do was try to reach people in the affected cities and cry. As an activist, I run in a fairly progressive circle here in the Bay Area, and many people around me (most of whom did not know anyone directly affected by the attacks) immediately began debating international politics and criticizing the US policies and practices that contributed to inviting such hatred against us. It made me want to scream because all I could think about was the loss of humanity. At the same time, I resented the media and government manipulation of our grief as a justification for "hunting down" not only the "evil" people who perpetrated these crimes, but also those who supposedly harbored them.

Our hopes for the future of humanity and our desire for justice rather than retribution must drive our debates and actions today. We cannot let our grief and fear allow us to be uncritical of our government's response to this tragedy. We must speak our minds and focus our concerns on the innocent people - both here and abroad - who have been and continue to be caught in the crossfire. In peace, Parker

## October is Abortion Access Month!

Since 1995, October has been designated Abortion Access Action Month. October was chosen because October 3rd is Rosie Jimenez Day. Rosie Jimenez is believed to be the first woman to die of an illegal abortion after Congress passed the Hyde Amendment and denied public funding for abortions in 1977.

This is a time to let abortion providers in California know that we appreciate their bravery and commitment to the crucial services they provide. On behalf of our staff, board, volunteers and donors, ACCESS is sending thank you cards to the abortion providers we work with as well as flowers to San Francisco General Hospital and Family Planning Associates in Los Angeles - the two remaining providers who work with ACCESS clients and accept Emergency Medi-Cal for all second trimester abortions. When you send a donation to ACCESS, we will add your name to the thank you cards. Please show your support to the people who truly make women's choices possible!

## THE BAPTIST, THE MARKSMAN AND ME

by Fred Herman

*Fred Herman is a member of Modesto People For Choice, which in 1990 organized volunteer patrols that escorted patients from their cars in parking lots past anti-choice harassment. A retired journalist, in the early-to-mid nineties, Fred came out almost daily to escort, when he was not dividing his time between Modesto and Mexico. In honor of Abortion Access Month, we asked Fred to write about his experiences in the bad old days of clinic escorting.*

"They kill babies in there," the self-styled "pro-lifers" used to yell. Tiny eyes widened in horror, tiny hands tugged anxiously at mothers. The kids thought their end was near, but their moms inevitably did enter a Family Planning Associates clinic that sometimes did abortions. The tactic victimized children and women needing pregnancy tests or contraceptives - clinics don't allow children inside during abortions.

So-called "sidewalk counselors" videotaped patients, claiming to make "training" films. Escorts blocked their Camcorders. At first these supposed "Christians" only picketed the lone such clinic between Stockton and Fresno, an area of chronic unemployment where few women

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## The World Is Our Clinic

by Kate

Since September 11, the whole country knows what it feels like to work in an abortion clinic. "The Christian right may not be your cup of tea, but they're not blowing stuff up," said a character on the recent season premiere of "The West Wing." Either abortion clinics don't count as "stuff" or the producers never heard of the "Army of God". The anthrax scare has shocked

most Americans, but not members of the National Abortion Foundation, who receive reports of anthrax threats to clinics almost weekly. In fact, NAF reports, over 100 clinics and at least one abortion fund have received envelopes dated October 12 containing a white powder which the letters claimed was anthrax. None of them in fact contained the bacteria, but all the clinics

had to be shut down pending investigation.

When I first visited a clinic where abortions are performed, I barely noticed the security guard posted outside the door. Only later did it occur to me that when I go to my gynecologist, there is no such guard. Those who are committed to ensuring women's access to choice have

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# Medi-Cal and Access to Abortion: Victories, Challenges & Continuing Advocacy

by Parker

As this newsletter goes to press, San Francisco General Hospital remains the only provider in northern and central California that accepts Emergency Medi-Cal for abortions after 18 weeks. Since Medi-Cal pays for an estimated 41% of abortions in California each year,<sup>1</sup> the lack of providers who will accept Medi-Cal is nothing less than a crisis for low-income women.

ACCESS has been working to bring this crisis to the attention of policy-makers, Medi-Cal officials and other reproductive rights advocacy organizations. Our partnership with the California Coalition for Reproductive Freedom (CCRF), a statewide coalition of reproductive rights lobbying groups, has been a key means of advocating for the interests of women with Medi-Cal. In June, CCRF organized a meeting with the California Department of Health Services to discuss the problems women with Medi-Cal face in getting second-trimester abortions. I was there to represent ACCESS and the interests of the women we work with everyday, giving expert testimony on the dwindling number of providers who accept Medi-Cal and the burden this places on women.

At the June meeting, the DHS expressed their commitment to ensuring access to second trimester abortions and were receptive to our recommendations for how to improve the situation. They were clear, however, that we should not expect any increase in the Medi-Cal reimbursement rate for abortions because of the impact the 'Energy Crisis' was having on the state budget. (Given recent national and international events, we should now assume that any money left over from military spending will be directed toward the energy crisis, leaving nothing for social issues.) Unfortunately, raising the Medi-Cal reimbursement rate is probably the single most important factor in increasing access to abortion, because more providers would accept Emergency Medi-Cal for second trimester abortions if the reimbursement rates were higher.

Even though we haven't won a rate

increase yet, there are three recent Medi-Cal policy changes to celebrate – thanks in part to our advocacy efforts with the California Coalition for Reproductive Freedom. These changes reflect important progress toward ensuring that women with Medi-Cal have real access to quality abortion services.

1. Medi-Cal now covers medical abortion (mifepristone or RU486), allowing low-income women to make a personal choice between surgical and non-surgical abortion. Although mifepristone has been available at many clinics in California since early this year, until now most women with Medi-Cal had to opt for the surgical procedure (which is free when covered by Medi-Cal) because choosing mifepristone meant paying \$400 or more out of pocket.

2. Medi-Cal regulations no longer require a woman to bring proof of pregnancy from a clinic when she applies for Emergency Medi-Cal. Medi-Cal offices are now able to accept a woman's word that she did a pregnancy test and got a positive result. This means women who already know they are pregnant no longer have to waste time going to a clinic simply to get a piece of paper. We also hope fewer women will accidentally go to anti-abortion Crisis Pregnancy Centers – which offer free pregnancy tests as a means to attract women – while

they are trying to gather documents to apply for Medi-Cal.

3. Presumptive Eligibility for Medi-Cal can now be used to pay for both medical and surgical abortions. Presumptive Eligibility (PE) is a special program that allows providers to do a basic financial screening and approve a woman for Medi-Cal right in their office, rather than sending her to the local DSS office to sign-up, so that they can provide her with care immediately. PE was created to increase timely access to prenatal care and, until now, it could NOT be used for any abortion services. The bad news? Only prenatal care providers can currently enroll in the PE program, so most abortion providers aren't affected by this

policy expansion. However, there are several clinics and doctors who provide the full spectrum of reproductive health care and are taking advantage of the new PE regulations, including San Francisco General Hospital. ACCESS and CCRF will also continue our advocacy efforts to allow abortion providers to participate in this program.

Although ACCESS cannot take direct credit for these recent changes in Medi-Cal policy, we know that our advocacy efforts with CCRF and the DHS played a crucial role in raising awareness of the barriers to abortion that women with Medi-Cal face. These victories will only encourage us to do more, and in time, we **will** achieve full abortion access for women with Medi-Cal!

<sup>1</sup> California Department of Health Services (2000). *Medi-Cal Funded Induced Abortions 1998*. Sacramento, CA.

# Life on the Line...

“Becky” called from Monterey county. Her doctor told her that a genital bump she found could possibly be a genital wart. She felt stressed out about it which caused her body aches. Her next doctor’s appointment would not be for another month but she needed more information about genital warts and having sex. Our hotline volunteer **Phoebe** talked with her about the cause of genital warts, the human papillomavirus (HPV), the symptoms and risks. “Becky” wanted to continue having unprotected sex with her partner. Phoebe and “Becky” talked more about why and the risks involved. “Becky” decided to hold off and get more information when she visited the doctor next.

“Melinda” called from Sacramento county after going to Kaiser for an STD check up. At the appointment “Melinda” found out she was twenty four weeks pregnant by sonogram dating. She had been spotting for the past several months and the news shocked her. She knew the pregnancy resulted from a rape and she had not told anyone about it. “Melinda” did not want to be pregnant but her options for providers were expensive and far—Kansas and Colorado. She knew her boyfriend would not be supportive if she didn’t get the abortion. Phoebe spoke with “Melinda” about where she could find support and encouraged her to talk to her mom as soon as possible about the rape, the pregnancy and to ask for her help. They talked more about the possibility about adoption and ways to handle her unsupportive boyfriend.

Phoebe spoke with “Tamika” who wanted to find childbirth classes. She needed one that would be close to her home in San Leandro and that would work for her and her husband’s schedule. Phoebe helped her find three places where she could go to classes and then talked more about different child birth methods.

Lyn and her boyfriend called ACCESS in the early afternoon on the way to high school after being turned away from Planned Parenthood. She was 22 weeks pregnant, using Emergency Medical to cover the procedure and trying to figure out where else she could go for an abortion. Lyn couldn’t tell her parents the



*Access staff Efiya, Mona and Parker (front row, l to r) with summer interns Creagh and Lauren*

situation because in the past her parents told her she would get kicked out of the house if she had sex. **Efiya** gave Lyn San Francisco General Hospital’s (SFGH) phone number knowing that is was her only hope to get the abortion without traveling to Los Angeles. Lyn called back five minutes later in a panic because there was a two week waiting period and by that time Lyn would be too far along to be seen. Efiya talked with Lyn about the possibility of going to LA to get the procedure. Lyn ruled out the option because her parents did not allow her to go out of town unsupervised. She had tried to leave without telling her parents before and they called the police! To avoid breaking Lyn’s confidentiality and police involvement, Efiya called SFGH on Lyn’s behalf. Efiya worked out that if Lyn could get to the hospital within 40 minutes, she could get a sonogram and find

out if they could do the abortion for her that day. Efiya unsuccessfully attempted to contact Lyn, she was in class. Time was slipping away. Efiya then called the cell phone of Lyn’s boyfriend. She found him in his car on the way to work. She told him the urgent nature of the situation and if Lyn didn’t get to SFGH soon, she would have a really hard time getting the abortion. He flipped his car around, called in sick, and went straight to Lyn’s high school to pick her up. Efiya finally reached Lyn on campus and told her to wait by the curb for her boyfriend and then to go straight for the hospital. While en route, SFGH staff called Efiya wondering why Lyn hadn’t yet arrived-time’s running out. Efiya reassured them that Lyn would be there. After thirty excruciating minutes, Efiya finally received another call from the staff. Lyn made it in! And, she would be able to get the abortion! Record breaking work.

## New ACCESS Volunteers on the Way?

ACCESS is thrilled to announce that three of our supporters are expecting their first babies!! **Jody Steinauer, MD & Mike Richards** are expecting a baby on November 3<sup>rd</sup> (or any day now). Jody is a fellow in women’s health and family planning at UCSF, the founder of Medical Students for Choice and an ACCESS Advisory Board member. **Jill Herschman & Christian Rogers** are expecting their little one on the anniversary of Roe v. Wade – January 22<sup>nd</sup>, 2002. Jill is also on the ACCESS Advisory Board and is the web-mistress for CARAL as well as the creator of the very first ACCESS website. Finally, our new volunteers **Mark & Laurie Blair** are expecting in early May of 2002. Mark and Laurie are combining their internet and graphic design skills to create an updated look for the ACCESS web page, to be unveiled around the same time as Jill’s baby! *Please let us know of any announcements you’d like to share with the ACCESS community.*

# World Is Our Clinic

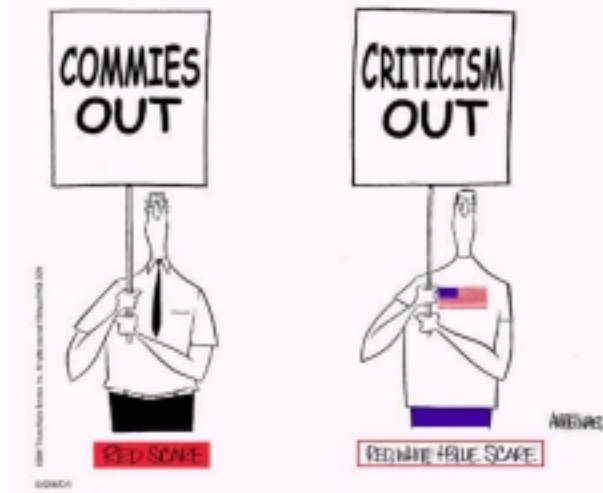
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grown accustomed to this extra security. We have all heard about the bullet-proof jackets worn by some of the few physicians who perform abortions in states like Michigan. Yet all of those providers also know that the precautions they take cannot really make them safe.

In the wake of the rash of bombings in the 1980s, clinics who survived knew they needed to take extra precautions to protect staff and clients. But they also knew they could not turn their facilities into armed camps, or clients would be too frightened to use their services. So committed people daily put themselves at risk because they believe in choice. Our country's leaders have unfortunately chosen another path.

In the name of protecting us from further terror, draconian security measures have already been instituted. The anti-terrorism bills passed by both houses of Congress allow secret searches of our homes and offices, "roaming wiretaps" of individuals and groups, detention of legal immigrants without charge, broad government access to student records of American-born and foreign students, and CIA spying on U.S. citizens. It creates an entirely new class of crime, "domestic terrorism," which is so broadly defined as to include political protest. *Past* financial contributions to an organization now deemed "terrorist," could get one locked up for 20 years.

It's been a month since the attacks on the World Trade Center and the Pentagon, and our country is at war. The armed forces, the CIA and FBI are desperately trying to recruit people who speak Arabic, Farsi, Urdu and other Middle Eastern languages, at the same time that at least 700 U.S. residents who speak those languages are being held for questioning by the FBI because of their ethnicity, their religion or their country of origin. Dozens if not hundreds of political activists, including myself, have also been called for questioning, based on our political affiliations or who someone thinks we might know in the Middle East. More than 100 people have been pulled off of airplanes because they were deemed suspicious by passengers or crew members; dozens have been arrested in airports. None of these people have been found to be guilty of any terrorist activity.



Over 5,000 people remain missing in the rubble in New York. They include: 200 Pakistanis, 200 Filipinos, 350 Bangladeshis, 60 Israelis (no, the story that all the Israelis were mysteriously warned to be out of the building turns out to be a hoax), 400 Puerto Ricans. At least 100 civilians have been killed and hundreds injured so far in the bombing of Afghanistan. Most of these are the result of bombs which missed their targets. Some are "collateral damage" – people who had the misfortune to live or work too close to a military target, such as an airport or a satellite communications tower. Among the first such casualties were four U.N. food aid workers. As I write, a Red Cross office sits in ruins, a casualty of yesterday's bombing.

In our own communities, the casualties have been women and children who wear traditional Muslim garb, Sikh men who wear turbans similar to that ostensi-

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***In Alameda, a Pakistani woman was severely beaten and hospitalized with a concussion and blurred vision. The men who attacked her were released for lack of evidence, despite the testimony of several witnesses.***

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bly worn by Osama bin Laden, and many other darker-skinned people in no way connected to the attacks. In Fresno and Fremont, Arab Americans have been shot. In San Francisco, a Latino man taken for an Arab was beaten and his white friend stabbed by five men while their girlfriends looked on. In Alameda, a Pakistani woman was severely beaten and hospitalized with a concussion and blurred vision. The men who attacked her were arrested but released for lack of evidence, despite the testimony of several witnesses.

The administration has pointed to the misogyny of the Taliban as a justification for their "crusade" against Afghanistan. This is ironic to women's groups, who have been trying to get the United Nations to address the repression of Afghan women for five years, while the U.S. gave billions in aid to the Taliban. As Katha Pollitt writes in the *The Nation*, "Until September 11, this situation received only modest attention in the West—much less than the destruction of the giant Buddha statues of Bamiyan." U.S. coalition members Egypt and Saudi Arabia still do not allow women to travel outside the country without permission from their husbands or fathers. Egyptian women recently organized to protest this restriction.

Here at home, the anti-woman politics of the Bush administration and its supporters are evident even in wartime.

Days after the attack, Jerry Falwell asserted that the attacks were the fault of gay people, abortionists and feminists. Recently, Lou Sheldon of the Traditional Values Coalition here in California, said that the Red Cross and other relief organizations should not give assistance to surviving gay or lesbian partners. The organizations "should be first giving priority to those widows who were at home with their babies and those widowers who lost their wives," Sheldon said. Assistance "should

be given on the basis and priority of one man and one woman in a marital relationship."

The American Life League ran an ad in the Washington Times headlined "Defend America! De-fund Planned Parenthood!". The ad concludes, "Abortion is the ultimate terrorism." and urges the government to take the estimated \$142 million Planned Parenthood receives for various programs and reallocate it to the new homeland security effort.

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# The Shot – Who Chooses?

by Efiya

Angela is fifteen years old and sitting in a family planning clinic. She's trying to decide on a birth control method. It has been two weeks since she had an abortion and she has managed not to have her mother find out. The doctor, who has just walked in the room, sits down and looks over Angela's file. "I think you should try the Depo Provera shot," she gets right to the point. Angela's interest is piqued. "What's that?", Angela asks. It's birth control in the form of a shot, it prevents pregnancy for over twelve weeks. What, no pills? No trying to get her boyfriend to use a condom? And best of all there is no way her mother would find out. Angela is sold. "I'll try it."

Young women like Angela with little knowledge of their bodies appear like great candidates for a method like Depo Provera. Her main objective is to prevent pregnancy. However, there are many other considerations when making a decision to use Depo Provera.

Depo Provera is the injectable synthetic female hormone Progesterone. It was approved for use in the US about nine years ago. It works by suppressing ovulation, thickening the cervical mucus and making the uterine lining unsuitable for implantation. It prevents pregnancy for about twelve weeks, so a woman would need to get a shot every three months.

Here are some of the pros and cons of Depo Provera: The 'shot' is highly effective and long-acting for women who use it correctly. Its failure rate is on average about four percent. For women who need discretion, it is easy to use and private.

On the other hand, Depo Provera has several downsides. It does not provide protection against HIV and other STDs, including chlamydia, gonorrhea, or syphilis. Some of its side effects include very heavy periods, irregular periods, or no periods at all. Some women have menstrual bleeding for weeks at a time. The longer a woman uses it, the greater likelihood of menstrual irregularities.

Other side effects include weight gain, dizziness, hair loss, breast tenderness, backache, mood swings, depression, diminished sex drive, and breast discharge.



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***The National Black Women's Health Project, The National Latina Health Network, The National Women's Health Network, and many women health activists oppose the use of Depo-Provera because of its potential for inappropriate use and its long term side effects.***

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Unfortunately once the Depo Provera shot is administered it is not immediately reversible. If any of these side effects occur they can take three to six months to wear off. After prolonged use of the Depo shot, side effects can sometimes take over a year to wear off.

Some studies show that Depo Provera slightly increases the risk of breast cancer for women who use it for more than six months.

The National Black Women's Health Project, The National Latina Health Network, The National Women's Health Network, and many women health activists oppose the use of Depo-Provera because of its potential for inappropriate use and its long term side effects. Because Depo Provera must be administered

by a medical practitioner, it can be easily given coercively to young women, women of color and low income women. For some of these women, doctors and health care practitioners may assume they are not able to comply with other birth control methods. So instead of exploring different birth control options, they immediately encourage them to use Depo Provera. Incidents of coercive use have been reported among Black women in Zimbabwe and South Africa. In the US several women's health groups, one being the National Latina Health Organization, have documented disproportionate use of Depo Provera in low income women and women of color. The National Black Women's Health Project maintain that in the early 1980's in a Depo Provera study in Atlanta, African American women were not given informed consent or follow-up.

What if Angela had all of this information available to her when making her decision about birth control? Would she still choose Depo Provera? It's possible, but her decision would be informed and she might want to look more closely at other methods.

**THANK YOU to all our summer interns and volunteers: Lauren Vose, Creagh Miller, Lauren Briskin, Karen Kayfetz, Valerie Green and Susie Whitlock. We miss you!! Also a shout out to continuing hotline volunteer Phoebe Grott and Tuesday night regulars Cara Cipollone, Jen Bobrow and Melissa Moran. Welcome new volunteers Mark & Laurie Blair and new practical support volunteers Zoe Garvin, Karen Guffy, Kristin Heavey, Sue Holper, Meredith King, Kimberly Miles, Sholeh Miresghhi, Lindsay Nako, Cortney Rock, Shelley Sella, Malia Timmerman, Victoria Valentine, Kathy Vestal, Kyoko Yokoyama, Teegan Zimmerman**

# Clinic Escorts on the Front Lines

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can afford private reproductive health care. When picketing failed, they harassed a gynecologist who performed occasional abortions, but his practice, safe in a McHenry high-rise set well back from the street, only gained patients from the attention. Soon up to 20 people began to trespass on Modesto clinic parking lots and access ways, blocking women exercising their Roe v. Wade rights. Clinic staff were reminded that branches in Bakersfield and Newport Beach were bombed and burned down, but clinic management did not want to offend even its own antagonists. The property owner was reminded we were protecting his place. He was "too busy to remember anything."

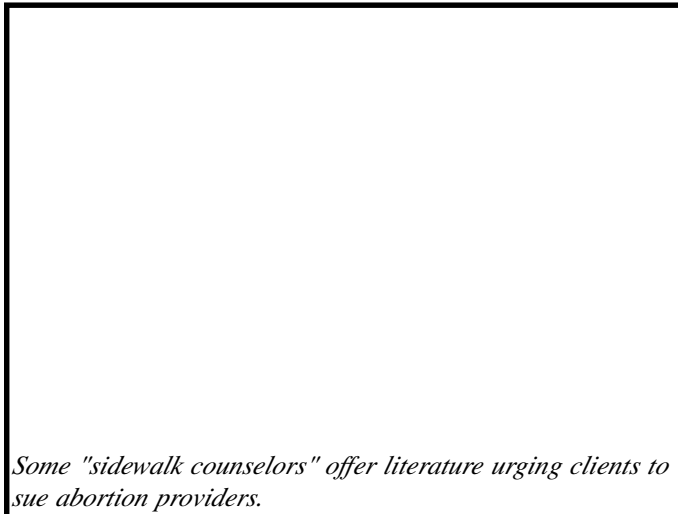
On Tuesdays a shop owner's piously chirpy wife called patients "sweetheart" and pledged to adopt any fetuses they carry to term. "Linda The Good" invoked Jesus and Mary at Christmas, but soon went back to "we're Christians, and we care about you, sweetie."

Linda warned about eternal guilt feelings. We said that the only post-abortion stress we've seen is laid onto people by their harassers. Police led a trespassing Linda off in hand-

cuffs once that summer... Charlene may have been her side's worst enemy with her drawling evangelism and a tendency to drop their visual aids - plastic fetuses - onto sidewalks.

Don the Baptist reigned on Wednesdays. That name is embossed in genu-wine imitation gold on the genu-wine imitation leather cover of a Bible he totes when not reading Rush Limbaugh's latest polemic. This fiftyish bear of a man is paid (by a

fundamentalist Stockton church) to harass clinics throughout northern California. He



*Some "sidewalk counselors" offer literature urging clients to sue abortion providers.*

"does" Modesto one morning each week; he eyes his watch and leaves on the dot.

"Mother, don't kill your baby," and "dad, have the courage to come out," he'd intone after doors close behind patients. No one ever did. He flashed soft rubber wombs with fake embryos inside. A few women heard his lip-smacking, graphic (and quite inaccurate) descriptions of forceps penetrating vaginas:

"They hold you down, pry open your thighs with tongs and tear out your baby. You'll hurt forever..." His eyes glazed over. Was he salivating? He periodically exiled himself to the street, where he still waves nine-foot placards purporting to display dismembered fetuses at cars.

In Don's home town, Stockton, Planned Parenthood says he's harassed women for 18 years. In 1988 he and a few Operation Rescue pals were fined \$100,000 for blockading a Sacramento clinic. Surely entertaining no serious thought of changing a mind, he still insults patients, their escorts, clinic defenders and anyone else nearby. He does reduce an occasional teen to tears, and that payoff satisfies him. Cries of "get a life" (even physical attacks) never faze him.

In Stockton, two Catholic ladies who periodically say their rosaries outside a clinic told escorts that Don embarrasses them, doesn't speak for them and has scared away half their movement. Once I told Don that four mainstream denominations were represented on escort duty that morning - Methodist, Episcopalian, Congregational and this one gray-haired Unitarian-Universalist. "Oh, those aren't Christians," Don responded. "They are counterfeit religions. We're the only ones with the real truth." That story soon helped Modesto school trustees drop the abstinence-only Sex Respect text. Leaving sex education to these people, I told the board, is like leaving geography classes to the Flat Earth Society.

Thursdays used to start with "Katy," a never-wed young mother of three who found The Lord, button-holing people with "We're Christians. We're not here to hassle you, but there's an alternative place..." The McHenry Avenue bogus clinic she pushed has no physicians; it has home pregnancy tests, sermons and free diapers, it accepts babies for adoption. Mothers never see the \$10,000 adoption fees that are possible. It's like standing outside Sears, leafleting customers with Wards ads. Widely condemned, such deceptive "pregnancy centers" have sprung up around the land. They even have advertised in Modesto area high school papers. Most women who try them eventually return to real clinics.

The Marksman, a regular who stomped on and threatened escorts, was gone for six months. We suspect the police had a little talk with him. I reported his graphic threat to shoot me between the eyeballs; as a Vietnam veteran, he said, he knew just how to do it. It was soon after the first Pensacola murder and at that time Modesto police took such threats more seriously than they seem to now, even though recent "pro-life" setbacks make their adherents more dangerous than ever.

People For Choice, a grass roots local advocacy group, has about 20 active members but a mailing list of hundreds. It

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# Clinic Escorting

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began in the wake of the 1989 Webster decision that limited Roe v. Wade rights. PFC signed up voters interested in reproductive issues and identified pro-choice candidates. Its petitions surely kept one wobbly member of Congress on the choice side. Rep. Gary Condit [remember, this was written a while ago] heeds his constituency. More light-heartedly, PFC occasionally counter-picketed anti-choice demonstrations and the bogus clinic itself. No staff ever showed up. Escorting began largely with teachers and students, but soon included senior citizens and professionals taking mornings off. Two were retired PhD chemists; one once headed county welfare child protective services. In bright yellow vests, much like highway maintenance crews, "CLINIC ESCORT" stenciled in black on the fronts, escorts greeted patients and warned of impending harassment: "Stop to chat or accept leaflets if you like. If not, keep moving and we'll shield you ..."

The non-violent, protective tactics by a few against many worked!

Our presence soothed patients. Fewer anesthetics and tranquilizers were needed. Patients were "glad you're here." A school nurse who escorts teen girls from a nearby city to the clinic on her own time told us that when harassers had things to themselves, one of the worst was a woman she had often reported for child abuse.

A woman who came outside to chat while waiting for a patient inside gave us more than the usual warm fuzzies. "I'm so grateful for what you're doing," she said. With no abortion services in Tracy 30 miles away, she drives young women to the Modesto clinic when that service is needed. The year before escorts she and a 14-year-old daughter fought through a blockade and briefly considered not going in. Mother and daughter figured that was the end of it. The next day a clinic official phoned. At first, she'd speak only to the girl, but the youngster didn't understand and mom took the phone. "Your daughter wasn't really pregnant," they told her. "She had a rare but fast moving cervical cancer. We scraped it all out, but if she'd been kept out of here, she'd have been dead in a month."

"They kill babies in there," the harassers yelled. "They haven't killed one yet," escorts grinned in response. Indeed,

at times they may even have helped save a life.

## Things Are Much Better Now

Fetal rights advocates no longer do that. Volunteer escorts, women and men who gave up to three mornings a week to guide patients past harassers, convinced them the practice stank. And then in summer 1994:

- President Clinton signed the Freedom of Access Bill.
- The State Supreme Court ruled that San Jose's *Pruneyard* decision did not give harassers free reign over private clinic property.
- The U.S. Supreme Court said RICO anti-racketeering statutes may be applied to those who conspire with "Operation Rescue" terrorists.
- Right-to-lifers" killed again in Florida, the OR caravan came through Modesto with but one minor riot, and most importantly...

- A new property manager sealed off the area on which harassers congregated and successfully called police when they did trespass.

So after a year the patient protection program called it a victory and the illegal parts of the harassment ground to a halt. A tiny fraction of the original group still wave sickening, grossly doctored bloody fetus photos on the sidewalk, but may no longer assault patients.

Mary Brown, one of Stanislaus County's Ten Outstanding Women in 2000 for her role in organizing these volunteers (I wrote the nomination) and I still go out on Tuesdays or Wednesdays for an hour on days pregnancies are terminated (question A - why is business down so? Not the loonies but RU486, better sex ed, more services available elsewhere?), but the atmosphere is a great deal less threatening and confrontational. It's been incredibly rewarding. In "my community" I'm a hero, but I do not think that Modesto's three big fundie temples pray for me.

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## California to let pharmacists give morning-after pill

*Associated Press, October 18, 2001*

California pharmacists will be authorized to dispense emergency "morning-after" contraceptive pills without a prescription beginning Jan. 1 under a bill signed into law this week by Gov. Gray Davis. The morning-after pill is a heavy dose of ordinary birth control pills that can prevent pregnancy if taken within 72 hours of unprotected sex.

California will join Washington state in allowing women to get the drugs without a doctor's prescription, a move that will have a "clear impact in California in preventing abortions," said Jane Boggess, director of the Public Health Institute's Pharmacy Access Partnership.

Planned Parenthood Affiliates of California, a supporter of the law, estimates that about half of all U.S. pregnancies are unintended, and about half of those will end in abortion.

However, opponents say the law allows pharmacists to act beyond their training and could give access of the drugs to

minors, who may need more counseling to decide to take the pills.

Pharmacists will be able to "prescribe this morning-after pill to children without the parents' knowledge or involvement," said Christine Thomas, acting executive director of California Right to Life. California Right to Life would have opposed the bill, even if excluded minors, because it believes the drug induces abortion, Thomas said.

At least 11 states considered the issue of emergency contraceptives in the past year, said Leah Oliver, a researcher with the National Conference of State Legislatures, but only California passed a law. Washington used existing laws to implement its program.

The nine other states were Hawaii, Illinois, Kansas, Maryland, Minnesota, New Hampshire, New Jersey, Oregon and Virginia. Among the bills they considered were measures to require hospitals to provide the drugs to rape victims, establish studies or start education campaigns.

# A New Tactic from the Antis

An October 1st article by Bill Berkowitz at WorkingForChange (<http://www.workingforchange.com/article.cfm?itemid=12044>) alerted ACCESS to a new campaign put on by a coalition of anti-abortion groups, entitled "Shake the Nation Back to Life." Led by the Center for Reclaiming America (a division of Coral Ridge Ministries, best known for thinking up and putting on the big gay-conversion campaign), Shake the Nation involves more than two dozen anti-abortion groups. The campaign's goal is to overturn *Roe v. Wade* by ensuring the placement of anti-abortion judges on the Supreme Court. The campaign's signature item? Baby rattles.

One component of the campaign is sending rattles to members of Congress, with a note attached that reads "Please vote to confirm pro-life justices to the Supreme

Court, and do everything within your power to protect children from all the brutal methods of abortion." The Shake the Nation web page (<http://64.29.199.63/default.asp?ID=&>) suggests that nearly 40,000 rattles have been sent so far.

The other component is a commercial ad, which you are supposed to be able to view at the Shake the Nation Back to Life web page. (You can see the still image, but the link to Real Player hasn't been working.) According to Berkowitz, the Conservative News Service (CNS) said the commercial "features numerous infants, holding rattles and pro-life placards, superimposed into video of the National Mall and other landmark locations in Washington, DC." The children in the picture are all "laughing and smiling until a gavel drops and viewers see a mock newspaper headline reading 'Supreme Court Okays

Abortion,'" and then the children begin crying, drop their rattles and slowly disappear from the screen. The commercial ends with a voice-over that says "Tell your Senator to Shake the Nation Back to Life."

What can we do to counter this effort? My first thought is that every woman who has ever had an abortion should write a letter to her Senator and/or Representative, telling her own story and why she believes it is crucial that women have the right to make the reproductive choices that are best for them and their families. We know that 43% of women will have at least one abortion in her lifetime – if every one of these women wrote a letter, they would bury the 40,000 rattles that Shake the Nation has sent. We cannot let women's voices be drowned out by this sort of anti-abortion imagery – we must speak out!

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## Aftermath of Terrorism

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One survivor of the crisis was the little-publicized plan by Health & Human Services Secretary Tommy Thompson to allow states to provide "health care for the unborn," rather than for pregnant *women*, with federal funds. The Oregon Health Program already states that "Pregnant women and their unborn children may be eligible for care ..."

On the eve of battle, the House defeated an amendment to the Department of Defense authorization bill offered by Rep. Loretta Sanchez (D-CA) that would have repealed the current law, which bans privately funded abortions at overseas military facilities.

Politically, these events have turned a barely legitimate president into the most powerful man in history. The Bush social agenda, including more cuts in critical social services such as health care, has received an unexpected boost, as the economy continues to worsen and more money is diverted to military buildup. Adding to the concern that people will be hungrier, sicker and colder this year is the fear that the enormous sums donated to the Red Cross and other relief organizations in New York will be coming out of the year-end contributions other non-profits, such as ACCESS, count on to keep them going.



### What We Can Do

Clinic escorts and women's health activists have joined the front lines of people organizing to protect mosques, Arab cultural centers, Sikh temples and members of our communities who are being harassed, attacked or threatened. ACCESS volunteers and clinic escorts are natural participants in the community defense projects which have sprung up in numerous California communities. To find out who is providing these services in your own community, call Leila or Eman at Global Exchange (415) 255-7296.

To report a hate crime (anonymously, if you wish), call toll-free Arab/Muslim Community Hotline, 1-877-282-2288 (24-hour, bilingual Arabic/English).

If you or anyone you know is approached by the FBI, INS or any police department for questioning, you or they should immediately call the National Law-

yers' Guild (415) 285-1055 (24-hour). You have the right to talk to an attorney before answering any questions.

Support the Revolutionary Association of Women of Afghanistan, who have been struggling for a democratic secular society against all the fundamentalist factions in their country running secret schools for girls, delivering medical aid, documenting and filming Taliban atrocities. Contact them at [www.rawa.org](http://www.rawa.org).

Give to organizations who are trying to alleviate the horrible conditions in the Afghan refugee camps in Pakistan and Tajikistan. These include American Friends Service Committee ([www.afsc.org](http://www.afsc.org)) and United Nations Children's Fund (UNICEF) ([www.unicef.org](http://www.unicef.org)).

**Keep our own social programs alive. Give to WHRC/ACCESS as generously as you can. (See enclosed reply card.)**