

May 12, 2022

## **An Open Letter to State Lawmakers from America's Leading Pro-Life Organizations**

To all State Legislators in the United States of America,

With the leak of a draft U.S. Supreme Court opinion written by Justice Samuel Alito in *Dobbs v. Jackson's Women's Health Organization* that appears to show a majority of the Court may be in favor of reversing *Roe v. Wade* and *Planned Parenthood v. Casey*, there has been increasing news coverage of state-level momentum to enact laws that protect mothers and their unborn children from the tragedy of abortion.

Over the past 50 years, under the shadow of *Roe v. Wade* and *Doe v. Bolton*, abortion has taken the lives of more than 63 million unborn American children<sup>1</sup>. But the tragedy of abortion isn't limited to the unborn child who loses her life. The mother who aborts her child is also *Roe's* victim. She is the victim of a callous industry created to take lives; an industry that claims to provide for "women's health," but denies the reality that far too many American women suffer devastating physical and psychological damage following abortion.

The abortion industry tries to dismiss reports and studies of post-abortive trauma. But even as far back as the 1980s, scientific researchers and the mainstream media were documenting the reality of abortion's consequences.

Studies examining the records of over 50,000 California Medicaid patients from 1989-1994 found women who underwent abortions experienced 2.6 times more psychiatric admissions in the first 90 days following pregnancy than women who gave birth, and 17% higher mental health claims over the following four years.<sup>2</sup>

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<sup>1</sup> National Right to Life estimate based on data reported by the U.S. Centers for Disease Control and Prevention through 2019 and the Guttmacher Institute through 2017. See *The State of Abortion in the United States, 2022*, updated release May 5, 2022, [www.nrlc.org/uploads/communications/stateofabortion2022.pdf](http://www.nrlc.org/uploads/communications/stateofabortion2022.pdf).

<sup>2</sup> Priscilla Coleman, et al, "State-Funded Abortions vs. Deliveries: A Comparison of Outpatient Mental Health Claims Over 4 Years," *American Journal of Orthopsychiatry* Vol. 72, No. 1 (2002), pp. 141-152 compared claims for first time outpatient mental health treatment in California between 14,297 aborting women and 40,122 women who gave birth four years after the event and found the rate of care 17% higher among the aborting group. Another study by P. Coleman and colleagues, "Psychiatric admissions of low-income women following abortion and childbirth," *Canadian Medical Association Journal*, Vol. 168, No. 10 (May 13, 2003), available at [www.cmaj.ca/cgi/content/full/168/10/1253](http://www.cmaj.ca/cgi/content/full/168/10/1253), looked at the records of 56,741 women in the California Medical system and found aborting women having 2.6 times more psychiatric admissions than women giving birth in the 90 days following the event.

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A 1989 *Los Angeles Times* survey<sup>3</sup> found 56% of women who had abortions felt guilty about them, and 26% mostly regretted the abortion. Subsequent studies suggest that these numbers may be low, reporting that adverse emotional and psychological effects are sometimes delayed, not surfacing for 5 or even 10 years after the abortion<sup>4</sup>.

Despite promises from her partner to the contrary, a woman's relationship will often dissolve following an abortion<sup>5,6</sup>. The clinic staff is gone, and the woman has no desire to return to the place she associates with failure<sup>7</sup>. Even friends who know about the abortion hesitate to bring up the subject. When this happens, she is left to deal with her pain, her doubts, her questions all alone<sup>8</sup>.

**Women are victims of abortion and require our compassion and support as well as ready access to counseling and social services in the days, weeks, months, and years following an abortion.**

**As national and state pro-life organizations, representing tens of millions of pro-life men, women, and children across the country, let us be clear: We state unequivocally that we do not support any measure seeking to criminalize or punish women and we stand firmly opposed to include such penalties in legislation.**

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<sup>3</sup> George Skelton, "Abortion often causes guilt, poll finds," *The Sacramento Bee*, March 19, 1989, p. A7.

<sup>4</sup> J. Trybulski warns about uncomfortable emotions and thoughts that surfaced months or years later following a woman's abortion in "Women and abortion: the past reaches into the present," *Journal of Advanced Nursing*, Vol. 54, No. 6 (June 2006), pp. 683-90.

<sup>5</sup> Winfried Barnett, et al, "Partnership After Induced Abortion: A Prospective Controlled Study," *Archives of Sexual Behavior*, Vol. 21, No. 5 (October 1992), pp. 443-455. Barnett and colleagues found that 20 out of the 92 aborting couples, or 22%, in their study group had separated after one year. Among the 2,000 plus cases of post abortion trauma that Theresa Burke worked with, she encountered several women whose marriage dissolved as a consequence of their abortions. See Theresa Burke, *Forbidden Grief* (Springfield, IL: Acorn Books, 2002), pp. 208, 212, 217.

<sup>6</sup> Linda Bird Francke gives classic accounts on pp. 74 and 97 of *The Ambivalence of Abortion*. Burke offers examples from cases in *Forbidden Grief* on pp. 34, Ann Speckhard's study of thirty high stress aborters in *Psychosocial Stress following Abortion* (Kansas City, MO: Sheed & Ward, 1987) found 46% of her subjects reporting a subsequent break up with her impregnating partner, Speckhard observes: As the male partner was often the only other one who knew of the abortion, ending the relationship left a large void in the subject's life, which contributed to feelings of loneliness, isolation, and alienation (p. 54).

<sup>7</sup> Even forty years after her abortion, "Elsa" tells Linda Bird Francke that "even now I have trouble driving by the 72nd Street entrance to the West Side Highway in New York where his office was." Linda Bird Francke, *The Ambivalence of Abortion* (New York: Dell, 1978), p. 313. Burke quotes a woman in *Forbidden Grief* who says "I just can't go near that place. It freaks me out. I'd rather drive a hundred miles than have to pass that place. I just can't do it. It makes me sick" (p. 94; see also pp. 38-39). Also see Magyari, et al, 1987.

<sup>8</sup> An example of such isolation is found in Burke's *Forbidden Grief*, p. 189.

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If the Supreme Court does overturn *Roe v. Wade*, they will be honoring the unambiguous division of powers described in the Constitution, returning abortion policymaking back to our elected state and federal legislators. This will be a tremendous opportunity for states to create durable policy that can stand the test of time. But in seizing that opportunity, we must ensure that the laws we advance to protect unborn children **do not harm their mothers.**

We are America's leading advocates for life. We come from very different backgrounds and perspectives, but we are united in our mission to protect unborn children and American women from the greed of the abortion industry. We have been in this fight for decades – many of us have dedicated our lives to this cause. We understand better than anyone else the desire to punish the purveyors of abortion who act callously and without regard to the dignity of human life. But turning women who have abortions into criminals **is not the way.**

In 1977, then-National Right to Life President Dr. Mildred Jefferson observed in her welcome letter to those attending the annual National Right to Life Convention:

The fight for the right to life is a people's fight for its existence and its continuity. It is a country's fight for its survival and its future. The right-to-life cause is not the concern of only a special few but it should be the cause of all those who care about fairness and justice, love and compassion and liberty with law.

Our charge as a movement has not strayed from those words written by Dr. Jefferson. In fighting for our country's future generations, we are called to act with love and compassion as we seek fairness, justice, and liberty for unborn children and their mothers.

Criminalizing women is antithetical to this charge.

We will continue to oppose legislative and policy initiatives that criminalize women who seek abortions, and we will continue to work for initiatives that protect unborn children and policies that provide and strengthen life-affirming resources for abortion-vulnerable women.

We call upon all pro-life legislators to stand with us. We ask you to continue to act with love and compassion toward abortion-vulnerable women. We urge you to reject any measure that seeks to criminalize women who have abortions.

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Sincerely, for Life,

Carol Tobias  
President  
National Right to Life

Marjorie Dannenfelser  
President  
Susan B. Anthony List

Archbishop William E. Lori, Chairman  
Committee on Pro-Life Activities  
U.S. Conference of Catholic Bishops

Eric J. Scheidler  
Executive Director  
Pro-Life Action League

Dr. Gregory P. Seltz  
Executive Director  
Lutheran Center for Religious Liberty

Ralph Reed, Founder and Chairman  
Timothy R. Head, Executive Director  
Faith & Freedom Coalition

Aaron Lara  
Presidente  
Congreso Iberoamericano  
por la Vida y la Familia

José L. González  
Founder and President  
Semilla

Marie Ashby  
Executive Director  
National Association of Pro-Life Nurses

Destiny Herndon-De La Rosa  
Founder and President  
New Wave Feminists

Catherine Glenn Foster  
President and CEO  
Americans United for Life

Jeanne F. Mancini  
President  
March for Life Action

Brent Leatherwood  
Acting President  
Ethics and Religious Liberty Commission  
Southern Baptist Convention

Bradley Mattes  
President  
Life Issues Institute

Kelsey Hazzard  
President  
Secular Pro-Life

Kristen Day  
Executive Director  
Democrats for Life of America

O. Carter Snead, J.D.  
Director  
de Nicola Center for Ethics and Culture  
University of Notre Dame

Terrisa Bukovinac  
Founder and Executive Director  
Progressive Anti-Abortion Uprising

Herb Geraghty  
Executive Director  
Rehumanize International

Joe Kral  
President and Editor-in-Chief  
Society of St. Sebastian

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Cheryl Lewis  
Director  
Alabama Citizens for Life

Karen Lewis  
Director  
Pro-Life Alaska

Luis Howard  
Director  
Arizona State Right to Life

Rose Mimms  
Executive Director  
Arkansas Right to Life

Brian Johnston  
Director  
California Pro-Life Council

Chad Schnitger  
President  
Faith & Freedom Coalition of California

Steven Ertelt  
Director  
Colorado Citizens for Life  
Editor, LifeNews.com

Suzy Smith  
President  
Pro-Life Council of Connecticut

Rita Rinaldi  
Director  
Delaware Citizens for Life

Ross T. Gillfillan, National Director  
Derrick Jones, President  
DC Metro Life Alliance

Hon. Lynda Bell  
President  
Florida Right to Life

Martha Zoller  
Executive Director  
Georgia Life Alliance

Janet Hochberg  
Director  
Hawaii Life Alliance

Kerry Uhlenkott  
Legislative Coordinator  
Right to Life of Idaho

Dawn Behnke, Esq.  
President  
Illinois Federation for Right to Life

Mike Fichter  
President and CEO  
Indiana Right to Life

Kristi Judkins  
Executive Director  
Iowa Right to Life

Steve Scheffler  
President  
Iowa Faith & Freedom Coalition

Maggie DeWitte  
Executive Director  
Pulse Life Advocates

Mary Wilkinson, President  
Carol Dengel, National Director  
Kansans for Life

Hon. Addia K. Wuchner, R.N.  
Executive Director and CEO  
Kentucky Right to Life

Benjamin Clapper  
Executive Director  
Louisiana Right to Life

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Hon. Karen Vachon  
President and Executive Director  
Maine Right to Life

Darla St. Martin  
President  
Maryland Right to Life

Myrna Maloney Flynn  
President and CEO  
Massachusetts Citizens for Life

Barb Listing  
President  
Right to Life of Michigan

Scott Fischbach  
Executive Director  
Minnesota Citizens Concerned for Life

Barbara Whitehead  
Director  
Mississippi Right to Life

Susan Klein  
Executive Director  
Missouri Right to Life

Medora Nagle  
Director  
Right to Life of Montana

Sandy Danek  
Executive Director  
Nebraska Right to Life

Melissa Clement  
Executive Director  
Nevada Right to Life

Lance Lemmonds  
President  
Nevada Faith & Freedom Coalition

Roger Stenson  
President  
New Hampshire Citizens for Life

Anne M. Perone, Esq.  
President  
New Jersey Committee for Life

Angie Smith, President  
Ethel Maharg, Executive Director  
Right to Life Committee of New Mexico

Anne LeBlanc  
Chairman  
New York State Right to Life

Bill Pincus, M.D., President  
Barbara Holt, National Director  
North Carolina Right to Life

Jason Williams  
Executive Director  
North Carolina Faith & Freedom Coalition

McKenzie McCoy  
Executive Director  
North Dakota Right to Life

Michael V. Ciccocioppo  
Executive Director  
Pennsylvania Pro-Life Federation

Christopher Merola  
Executive Director  
Pennsylvania Faith & Freedom Coalition

Mike Gonidakis  
President  
Ohio Right to Life

Tony Lauinger  
State Chairman  
Oklahomans for Life

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Lois Anderson  
Executive Director  
Oregon Right to Life

Barth Bracy  
Executive Director  
Rhode Island State Right to Life

Lisa Van Riper, President  
Holly Gatling, Executive Director  
South Carolina Citizens for Life

Dale Bartscher, Executive Director  
Valerie Johnson, National Director  
South Dakota Right to Life

Stacy Dunn  
President  
Tennessee Right to Life

Mark Hoffman, Ph.D.  
Director  
Right to Life of Utah

Mary Hahn Beerworth  
Executive Director  
Vermont Right to Life Committee

Olivia Turner  
President  
Virginia Society for Human Life

Esther Ripplinger  
President & CEO  
Human Life of Washington

Wanda Franz, Ph.D.  
President  
West Virginians for Life

Heather Weininger  
Executive Director  
Wisconsin Right to Life

Larry Hell  
President  
Wyoming Citizens for Life