



Third Sunday of Ordinary Time January 24, 2016 C

Behind the Mask of Planned Parenthood

This past Friday, January 22, was the 43rd anniversary of one of the saddest days in US history—the day our Supreme Court legalized abortion, the killing of unborn children.

As tens of thousands prepare to gather for the annual March for Life on Jan. 22 under the theme “Pro-Life and Pro-Woman Go Hand-in-Hand,” the pro-life movement has been joined by a rising chorus of voices calling to defund the Planned Parenthood Federation of America, the nation’s largest abortion provider. Contributing to this outcry have been a series of undercover videos and a congressional investigation into the abortion giant’s practices.

Jeanne Mancini, president of the March for Life Education and Defense Fund, is among the leading voices in the pro-life movement today and in the ongoing national debate about Planned Parenthood. *Columbia Magazine* recently spoke with Mancini about Planned Parenthood’s role in “women’s health,” its massive taxpayer subsidies and the public reaction to the controversial video footage. The interview appeared in the magazine’s January 2016 issue.

Columbia: Proponents of Planned Parenthood argue that the organization offers women a full spectrum of health care and that abortion only accounts for a small fraction of its services. What health care does Planned Parenthood actually provide, and how much of their business is related to abortion?

Jeanne Mancini: In its 2013-2014 annual report, Planned Parenthood included and tallied the following health services: contraception, manual breast exams, pregnancy tests, urinary tract infection (UTI) treatment; sexually transmitted disease (STD) testing and treatment; Pap tests; human papillomavirus (HPV) vaccinations; and abortion “services.”

Putting aside for a moment that abortion could never be authentically defined as “health care” because it is inherently destructive rather than protective or intrinsically health-related, Planned Parenthood

frequently claims that abortion is only a very small part of what the organization is about, providing a statistic of 3 percent. Yet Planned Parenthood reported performing a staggering 327,653 abortions in 2013—about 1 in 3 of all abortions in the United States.

Even the *Washington Post* called the organization’s bluff on this 3 percent statistic, awarding its truth factor “Three Pinocchios” (out of a possible four), for the way it compares abortion to every other service that it provides. “The organization treats each service—pregnancy test, STD test, abortion, birth control—equally,” the article stated. “Yet there are obvious differences between a surgical (or even medical) abortion, and offering a urine (or even blood) pregnancy test. These services are not all comparable in how much they cost or how extensive the service or procedure is.”

The same annual report also revealed that in comparison to 18,684 “prenatal services” and 1,880 adoption referrals provided by Planned Parenthood, abortions outnumbered these services for pregnant women 16:1. More-over, former Planned Parenthood clinic workers describe a quota system for abortions because they are so lucrative for the organization. In fact, it is estimated that Planned Parenthood nets over \$165 million annually from abortion income, hardly a negligible component of their mission or budget.

Columbia: Planned Parenthood Federation of America traces its origins back 99 years to Brooklyn, N.Y., where its founder, Margaret Sanger (1879-1966), opened the first birth control clinic in the United States. How have the philosophy and mission of Planned Parenthood changed or remained consistent since that time?

Jeanne Mancini: Though she was born into a Catholic family, Margaret Sanger became a vehement opponent of the Catholic Church. She identified with political anarchists and socialists, and she sought to liberate women from “sexual servitude” through contraceptive pills and devices. Sanger coined the term “birth control” and in 1921 founded the American Birth Control League (ABCL), the predecessor to Planned Parenthood Federation of America.

Coinciding with her birth control crusade, one of Sanger’s primary goals was to eliminate what she and

Planned Parenthood described as “unfit” and “eugenically unsound” populations—certain immigrants, African-Americans, disabled people, orphans, people with hereditary disease, those with lower intelligence. In 1922, she wrote, “Organized charity is itself the symptom of a malignant social disease.”

Today, Planned Parenthood tries to distance itself from its founder’s promotion of eugenics, even as certain populations continue to be disproportionately impacted by abortion, including African-Americans and people with disabilities. And as its name indicates, the organization continues to very much focus on the need for a woman to control her fertility at all costs, even when it involves the taking of the life of her developing baby.

Columbia: Does the scope of Planned Parenthood’s support for abortion go beyond a woman’s so-called “right to choose”?

Jeanne Mancini: It is interesting to observe how Planned Parenthood in recent years has moved away from the term “pro-choice,” insisting instead that contraception and abortion are basic “health care” to which all women should have access.

Planned Parenthood opposes even modest and widely supported laws to reduce or regulate abortions, including those related to informed decision-making or to protect women’s health. Internationally, too, the organization has aggressively promoted pro-abortion policies—even the Chinese population program, which involves coerced abortion and involuntary sterilization.

In many ways, the “right to choose” does not apply to those who disagree with Planned Parenthood. For example, the organization opposes laws recognizing conscience rights of doctors, nurses and health facilities with moral or religious objections to abortion; of pharmacists who object to providing “emergency contraception” and abortifacient drugs; and of groups like the Little Sisters of the Poor, who do not want to be forced to include such drugs in their healthcare plans.

Columbia: In July 2015, the Center for Medical Progress released the first in a series of undercover videos in which Planned Parenthood officials discuss the sale of aborted baby body parts for profit, which is illegal. What have the videos revealed, and what should people make of the claims that the videos lack credibility?

Jeanne Mancini: Since mid-July, the Center for Medical Progress has released 11 videos, and the remainder were

improperly obtained and released online. The videos have provided an eye-opening look into the abortion industry. Even those who self-identity as pro-choice have found the videos very difficult to watch.

Many questions have arisen from the video footage, such as: Is Planned Parenthood involved in the unlawful activity of harvesting and selling baby parts? Is the organization obtaining informed consent agreements from the mothers whose babies’ hearts, lungs, livers and brains are being obtained? Are their medical practitioners altering abortion procedures to obtain intact baby parts or whole babies? Is Planned Parenthood performing illegal partial-birth abortions to facilitate obtaining those organs? These questions are currently being taken up by the U.S. Congress.

The claim that the videos lack credibility is simply false. Coalfire, an internationally recognized third-party digital security and forensics firm used for civil and criminal investigations, released analysis in September affirming that the recordings were authentic and showed no evidence of manipulation or editing. In its assessment, Coalfire had access to the entire audio and video footage recorded by the Center for Medical Progress. According to the report, which is freely available online, all four devices utilized in recording conversations were cross-referenced and “found to be consistent.” Abortion advocates continue to rehash this talking point about the credibility of the videos, but in reality it is baseless rhetoric.

Columbia: What has been the result of the congressional hearings to determine whether Planned Parenthood had been involved in illegal activities?

Jeanne Mancini: In light of the disturbing videos, the House of Representatives reacted by opening investigations in three different committees: Energy and Commerce, Judiciary, and Oversight and Government Reform. During the month of September, each of these committees held hearings looking at the issues of abortion, tissue procurement and Planned Parenthood finances. One direct result was that on Oct. 7, 2015, the House created a select panel for the sole purpose of investigating abortion and fetal tissue procurement.

Though investigations can take time, the House of Representative’s inquiries have already yielded some telling results. For example, it is now clear that at least six Planned Parenthood affiliates had a fetal tissue program; that these affiliates received money for baby body parts; that Planned Parenthood lost contracts because of the scandal; that Planned Parenthood opposes protections for abortion survivors; and that

Planned Parenthood and their supporters do not object to dismemberment abortion procedures as described in the CMP videos.

We have also learned that the more the general public is made aware of what Planned Parenthood supports and practices, the more the organization's favorability decreases. Message testing has confirmed that Planned Parenthood's brand loses credibility when people learn about the content of the videos as well as about Planned Parenthood's history of covering up the sexual abuse of minors or the organization's fraudulent use of taxpayer funds. Congressional investigations will continue to bring these issues even more into the light.

Columbia: Congress and a number of states have begun taking measures to end taxpayer funding for Planned Parenthood. How do you respond to the claim that if the organization loses these government subsidies, many lower income women will have nowhere to go for health care?

Jeanne Mancini: There are already more than 13,000 community health centers and other federally qualified health centers (FQHC), as well as rural health centers (RHC), which serve 22 million patients in all 50 states. FQHCs and RHCs offer the services that Planned Parenthood provides—pap smears, UTI tests, STD testing, manual breast exams—in addition to being required to provide other services, such as mammograms, immunizations, cholesterol screenings, diabetes and glaucoma screenings.

Moreover, these centers outnumber Planned Parenthood clinics at a ratio of 20:1 (13,540 to 665). They are better choices for women and are typically less than five miles away from the nearest Planned Parenthood Center. A map of alternative centers throughout the United States is available at getyourcare.org.

Columbia: What do you make of the claim that the late November shooting at a Planned Parenthood clinic in Colorado Springs was in some way a result of the work of the pro-life movement?

Jeanne Mancini: This is an outrageous claim because the essence of the pro-life movement is respect for the dignity of every human life.

The tragic situation in Colorado Springs involved a deeply troubled individual, unknown to the local pro-life community, and his violent acts are opposed to all that the pro-life movement stands for. I find it abhorrent that certain groups and legislators have sought to capitalize on this horrific scenario for political and even financial gain.

Our movement is peaceful, prayerful and joyful. And our opposition to Planned Parenthood and the abortion industry is based on nonviolence, reason and compassion.

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Have a blessed week,

