

IMPROVING WOMEN'S
TO QUALITY ABORTION

ACCESS
CARE



2008
ANNUAL REPORT



THE NATIONAL ABORTION FEDERATION'S MISSION

IS TO ENSURE SAFE, LEGAL,
AND ACCESSIBLE ABORTION
CARE TO PROMOTE HEALTH
AND JUSTICE FOR WOMEN.

MESSAGE FROM NAF'S BOARD CHAIR SALLY BURGESS, MBA



When I attended my first NAF meeting more than 20 years ago, I was so in awe of the conversations that were happening, the passion that was expressed, and the level of professionalism I encountered. I can honestly say that I continue to be awestruck each passing year. I have immense respect, admiration, and love for the people in this organization so it was with great pride that I accepted the opportunity to serve as NAF's Board Chair.

This has been a challenging and productive year. With the expansion of NAF's Hotline in 2008, we have been able to improve access to abortion care for more women than we ever dreamed possible. Together we are improving the lives and health of women and their loved ones every time we provide them with the abortion care they need.

NAF's ability to adapt and address the changing needs of providers and patients continues to be exemplary. We don't have a crystal ball to give us direction. We don't know what attacks we may face in the future, nor do we know what victories we'll achieve. But we keep moving forward despite the difficulties and challenges because we know that we will persevere together. It has been my pleasure to serve as NAF's Board Chair this year, and I am optimistic about what we can accomplish together in the coming year.

MESSAGE FROM NAF'S PRESIDENT AND CEO VICKI SAPORTA



Two-thousand and eight was an exciting year for NAF, our members, and the pro-choice community. We all celebrated in November when we elected a new pro-choice President, and voters struck down three anti-choice ballot initiatives in California, Colorado, and South Dakota. While these victories were critical in keeping abortion safe and legal, we also focused our work in 2008 on ensuring abortion was accessible.

Although abortion has been legal for 35 years in the United States and 20 years in Canada, too many women continue to face unnecessary barriers that prevent them from accessing quality abortion care. Low-income women are more adversely affected by funding restrictions. At the end of 2007, we received a significant donation to help us subsidize the cost of abortion care for low-income women through our toll-free Hotline. This gift enabled us to expand our Hotline operations in 2008, and help thousands of low-income women obtain the abortion care they need. This exciting program has had a tremendous impact on women's ability to access quality abortion care.

I'd like to thank our committed Board of Directors, staff, membership, and generous supporters for their many contributions that make our work possible. Together we are preserving the health and saving the lives of women every day by improving their access to quality abortion care.



IMPROVING WOMEN'S ACCESS IN MEXICO

SINCE MEXICO CITY LEGALIZED ABORTION IN MAY 2007, THOUSANDS OF WOMEN HAVE OBTAINED SAFE LEGAL ABORTION CARE AT THE CAPITAL'S PUBLIC HOSPITALS AND PRIVATE CLINICS.



Mexico City Secretary of Health Manuel Mondragón y Kalb, MD, describes the current legal landscape and the challenges ahead during the opening plenary at NAF's Annual Meeting.

LEGALIZED ABORTION IN MEXICO

In May 2007, Mexico City legislators voted 46 to 19 to require city hospitals to provide abortion care during the first trimester of pregnancy and allow for the establishment of private abortion clinics. Prior to this, abortion was illegal in Mexico except in cases of rape or life endangerment.

Before this law was passed, illegal abortions resulted in approximately 1,500 deaths in Mexico every year and were the third leading cause of death for pregnant women in Mexico City. Wealthy Mexican women facing an unwanted pregnancy often traveled to the United States to obtain abortion care, but many low-income women who could not afford this option were forced to resort to dangerous back-alley or self-induced procedures.

Within the first year of legalization, approximately 7,000 women obtained safe, legal abortion care at 14 of the capital's public hospitals. Mexico City Secretary of Health Manuel Mondragón y Kalb, MD, spoke at our Annual Meeting in April about the mechanisms in place at the Ministry of Health to ensure high-quality care, the impact of this historic legislation, and the challenges ahead in Mexico City.

CHALLENGES TO THE LAW

Shortly after abortion was legalized, abortion opponents petitioned Mexico's Supreme Court to have Mexico City's law overturned on constitutional grounds. NAF submitted an amicus brief to the Supreme Court in support of the Mexico City law. In August, the Supreme Court voted 8-3 in favor of upholding the Mexico City law decriminalizing abortion. This ruling represents an important step toward improving Mexican women's access to quality abortion care. As the experience in many other countries has shown, decriminalization of abortion reduces mortality and morbidity among women seeking abortions and thereby improves public health.



Mexico City Secretary of Health Manuel Mondragón y Kalb, MD, and Patricio R. Sanhueza Smith, MD, discuss the legalization of abortion in Mexico City during the opening plenary at NAF's Annual Meeting.

EXPANDING NAF MEMBERSHIP

In addition to the public city hospitals, private clinics in Mexico City are also providing abortion care. We are hoping to welcome both the public city facilities and private clinics as NAF members in the near future.



MY STORY RESORTING TO ILLEGAL ABORTION

Last year, Mexico City struck down a 1931 law, which criminalized abortion. This historic legislation came in response to the number of women like Julia* who were forced to jeopardize their health or risk their lives through dangerous illegal procedures. Thanks to this legislation, women are now able to access safe, legal abortion care in Mexico City.

"I was pregnant in a time prior to abortions being legalized. The shame and humiliation at that time was unbearable. I learned of a doctor in Mexico that would perform an abortion. Many girls ranging in age from 16

to 29 were rounded up from motels in the middle of the night to proceed to this doctor in Mexico. The vehicles had to turn their headlights off and proceed up a dirt road for approximately one mile. The procedure took place in a boarded up old house. There was a man with a shotgun circling the house and directing us on where to enter. Inside was a small kitchen where another man, who also had a shotgun, sat drinking coffee.

After we were all in the house, they locked and bolted the door; no one was allowed to leave until all the procedures were completed. I was the last of 13 women. The doctor and the nurse spoke very

little English, so they would come down the stairs and look around, then point at whomever they chose to be next.

I developed a severe infection after returning home and miscarrying at a later time. I was afraid to go to another doctor. I am now 58 years old, and childless—I'm sure because of the infection I developed.

It's easy to say "I would NEVER," until you are in a situation that forces you to see another view."

—Julia

*Name changed to protect patient privacy



IMPROVING WOMEN'S ACCESS IN CANADA

CELEBRATING 20 YEARS OF LEGALIZED ABORTION

January 28, 2008 marked the 20th anniversary of *R v. Morgentaler*, the Canadian Supreme Court's ruling that decriminalized abortion in Canada. This landmark decision has undoubtedly protected the health and saved the lives of countless women, and was named as one of the most important and influential Charter cases of the last 25 years.

To commemorate the decision, NAF co-sponsored a symposium with The University of Toronto's Faculty of Law, with generous support from the Canada Research Chair in Health Law and Policy. The symposium brought together abortion providers, legal scholars, politicians, reproductive rights experts, and students to examine the core themes of the decision and the future of abortion rights in Canada. The lawsuit's plaintiff, NAF member Henry Morgentaler, MD, attended and spoke about the day the Supreme Court decided the case, which he called, "the best day of my life."

Several providers spoke about witnessing the devastation of illegal abortion and about their commitment to caring for women. NAF Member Garson Romalis, MD, spoke of the enormous personal and professional satisfaction he gets out of helping women by providing safe abortion care. His moving remarks were printed in the *National Post* following the symposium.

"WHY DO I DO ABORTIONS, AND WHY DO I CONTINUE TO DO ABORTIONS, DESPITE TWO MURDER ATTEMPTS? BECAUSE I CAN TAKE A WOMAN, IN THE BIGGEST TROUBLE SHE HAS EVER EXPERIENCED IN HER LIFE, AND BY PERFORMING A FIVE-MINUTE OPERATION, IN COMFORT AND DIGNITY, I CAN GIVE HER BACK HER LIFE."

— SYMPOSIUM REMARKS FROM NAF MEMBER GARSON ROMALIS, MD, WHICH WERE ALSO PRINTED IN THE *NATIONAL POST*



PROTECTING ABORTION RIGHTS

NAF's Canadian Program works to combat attacks on abortion rights at the federal, provincial, and territorial levels. At the end of 2007, an anti-choice MP introduced Private Member's Bill C-484, which would have amended the federal Criminal Code to create a new crime of causing injury to or the death of a foetus. This bill would have elevated the foetus—even an embryo only weeks old—to a status equal with that of an adult woman, and could have been used to erode abortion rights in Canada.

NAF opposed this bill because it did nothing to protect women and we believed it could cast doubt over well-established Canadian law. We worked to educate government officials about our concerns and the importance of ensuring abortion remains safe, legal, and accessible in Canada. On Saturday, April 26, the *Ottawa Citizen* published an op/ed by NAF President and CEO Vicki Saporta voicing our opposition to this legislation.

Although Bill C-484 passed two readings in Parliament, in June, Stéphane Dion, then leader of the Liberal Party, vowed to block passage of the legislation because he agreed with many of the bill's opponents that it would re-open the abortion debate. The Conservative government pulled Bill C-484 saying it would introduce a new bill in its place; however, no new bill has been introduced by the minority Conservative government.

ENSURING WOMEN'S ACCESS TO ABORTION CARE

In 2007, National Abortion Federation Canada incorporated as a non-profit organization in Canada, and this year, NAF Canada received charitable status.

Although abortion is covered under most provincial health plans in Canada, we continue to receive calls on our Hotline from Canadian women who need information about abortion and pregnancy options, referrals to quality providers, and funding assistance. To meet the needs of these women, NAF Canada established a Canadian Patient Assistance Fund at the end of 2007. In 2008, we held fundraisers in Toronto, ON; Halifax, NS; and Victoria, BC to strengthen this fund and ensure that women in Canada have access to the abortion care that they need.

Opposite page, far left: NAF members, Medical Students for Choice, and others attend a wine and dessert event at the Jacana Art Gallery in Vancouver, BC to launch the Canadian Patient Assistance Fund.

Near left: Sheila Dunn, MD, explains how access to abortion care varies throughout the provinces and territories at NAF's symposium to commemorate *R v. Morgentaler*.



MY STORY

ACCESSING COMPASSIONATE, QUALITY CARE

In Canada, access to health services is guaranteed by the Canada Health Act. Abortion is a safe, legal, insured, and funded service, meaning that a woman should not have to pay for abortion care in Canada, and many women like Amber* obtain abortion care in a hospital setting.

"I had an abortion because my baby was diagnosed with a multitude of problems. One of the things I am most thankful for is that when we made this heartbreaking decision, my husband and I went to our local hospital accompanied by our midwife and were given the most respectful, compassionate care imaginable by very professional people.

My heart always goes out to the poor women who have to face hatred and ignorance along with the unthinkable."

—Amber

*Name changed to protect patient privacy



IMPROVING WOMEN'S ACCESS IN THE U.S.

“HEARING ABOUT THE BARRIERS WOMEN FACE WHEN OBTAINING ABORTION CARE IN DIFFERENT STATES REMINDED US OF THE IMPORTANCE OF OUR WORK HERE IN SOUTH DAKOTA AND BACK IN DC.”

—NAF STAFF TRAVELED TO SOUTH DAKOTA AND BLOGGED ABOUT THEIR EXPERIENCES “IN THE FIELD” WORKING TO DEFEAT THE STATE'S PROPOSED ABORTION BAN

KEEPING OUR MEMBERS SAFE AND CLINICS OPEN

Since abortion was legalized, providers have faced harassment, threats, and violence. To address these issues, NAF's Security team provides our members with support including security assessments, security trainings, and emergency onsite response when they are targeted for violence and disruption. NAF's security services are one of our most requested and utilized member benefits, and our Security team has visited the clinics and homes of more than 130 of our members. NAF's Security team also tracks and travels to sites of major anti-abortion activity.

In addition to targeting providers, abortion opponents also attempt to harass, intimidate, and deter patients as they enter reproductive health care facilities. NAF's Public Policy Department works with our members and state pro-choice coalitions to provide legal research, strategies, and advocacy for abortion-related legislation that protects providers and preserves women's access to abortion care. This year, NAF worked with one of our members in Oakland, CA to make the case for the need to institute a local buffer zone ordinance, which would allow patients and providers to enter and leave clinics free from harassment and intimidation. In February, the Oakland City Council unanimously passed the buffer zone ordinance in spite of heavy anti-abortion opposition.

DEFEATING RESTRICTIVE BALLOT INITIATIVES

In November, voters in Colorado, California, and South Dakota defeated harmful initiatives that would have jeopardized women's access to abortion care. In Colorado, voters defeated an amendment which would have redefined “person” in the state constitution and granted constitutional rights from the moment of conception. California voters rejected a parental notification provision for a third time, and the citizens of South Dakota once again defeated one of the nation's most restrictive abortion bans.



Members of NAF's Public Policy and Communications Departments traveled to South Dakota in October to work with the South Dakota Campaign for Healthy Families (SDCHF) to campaign against Initiated Measure 11, which would have banned abortion in the state with limited exceptions. Our staff joined volunteers from neighboring states to educate voters and increase visibility for the “No on 11” campaign. Just as they did in 2006, voters in South Dakota once again defeated this dangerous initiative.

Top right: NAF's Receptionist Amy Whitehurst-Morrison helps ensure women are able to enter NAF member Planned Parenthood of Metro Washington during an anti-abortion protest.

Bottom left: NAF's Staff Attorney Andrea Irwin, JD, holds a “No on 11” sign at a downtown intersection in Rapid City, SD to increase visibility for the campaign against the proposed abortion ban.

Bottom right: NAF's Clinic Defense and Research Director Sharon Lau works to ensure that patients have safe access to abortion care and that services are unimpeded during an anti-abortion event in Atlanta, GA in July.

MY STORY MISTREATED BY A CPC

Crisis Pregnancy Centers (CPCs) present another barrier to women attempting to access abortion care. Many CPCs use deceptive advertising practices to trick women into thinking that they are legitimate medical clinics that provide a variety of reproductive health care services, including family planning and abortion care. In reality, most CPCs do not provide full options counseling and generally will not refer for abortion care or birth control. Women like Joanna* who mistakenly visit one of these centers, often report feeling harassed, bullied, and intimidated.

“I had a surgical abortion in April. When I discovered I was pregnant, I visited a Crisis Pregnancy Center (CPC). When I walked in, I was greeted warmly. They gave me a free ultrasound and seemed sweet and supportive. Then came the counseling session, during which I asked to be excused several times, and was told each time it was mandatory since they had given me an ultrasound for free. When I informed them of my decision to have an abortion, I was forced to watch a graphic video. I was suffering from morning sickness and I had to run out to vomit several times. They told me these were the consequences of sin. They warned me my fiancé would never be able to look at me as anything other than the woman who killed his first child. I'll never forget the way I felt leaving the Crisis Pregnancy Center that day.

I later visited a reputable abortion provider. My state required my provider to warn me about the supposed physical and psychological effects of abortion. I felt no shame, guilt, or depression resulting from my abortion. However, the CPC I visited brought me untold shame, stress, and confusion. My state legislators should have saved their mandated warning for the CPC.”

—submitted by Joanna via our website

*Name changed to protect patient privacy

MY STORY

GOING ABOVE AND BEYOND

In addition to providing callers with options counseling, unbiased information about abortion, referrals to providers of quality care, and limited financial assistance, the NAF Hotline is also able to provide case management for women in difficult situations. This can include helping patients find additional funding sources, social service resources in their area, or even assisting with transportation, as was the case for Shawna,* who said:

“Initially I did not know how I would even be able to afford an abortion. After searching online, I found NAF’s website and called the Hotline. The NAF staff was kind, and I was relieved when they told me I could receive funding assistance.

Still, I didn’t have a way to get to the clinic, which was in another state. My Hotline Case Manager helped find a local woman who was willing to accompany me to the procedure. I was so grateful when she called saying she had found someone. I felt like a big weight had been lifted off my shoulders.

It is good to know that such an organization exists for women in need. I am so grateful for all NAF’s help, and thank my Case Manager for working so hard to assist me and get me to the clinic.”

**Name changed to protect patient privacy*



IMPROVING WOMEN’S ACCESS TO QUALITY ABORTION CARE

Every day, the NAF Hotline receives hundreds of calls from women who are struggling to obtain the abortion care they need. For nearly 30 years, the Hotline has been providing callers with unbiased, factual information about abortion; options counseling; assistance with understanding state abortion restrictions; referrals to providers of quality care; and in some cases limited financial assistance.

Through private donations to the NAF Hotline Patient Assistance Fund, we are able to help subsidize the cost of abortion care for low-income women. This fund has made it possible for us to help more women in 2008 than ever before. In order to meet the needs of women seeking our help, we expanded Hotline operations to include more physical space, hours of operation, and staffing.

This year we have had an unprecedented impact on low-income women who are attempting to access abortion care. Many of them have written to us and thanked us for not only providing financial assistance, but for the compassionate, respectful treatment they received from our Hotline staff and member clinics. Many of the women who call the Hotline thank us for giving them a second chance and even saving their lives.

NAF member George Tiller, MD, visits the NAF Hotline’s newly renovated office space in April.



There's so much I want to say to you guys, but the quickest and simplest thing I can think is... You're a blessing!

You have given me a second chance and words can't explain how appreciative I am to you. You didn't judge me and you didn't question me, you just gave me a helping hand... when everybody looked down on me.

We wanted to take this opportunity to express our gratitude for the special funding you made possible for us. The decision to come to the clinic came after many ultrasounds, an amnio and many discussions with the doctor. Following these tests, we learned our baby would have many health problems~ after countless days of talking and many sleepless nights we made the decision to terminate. This was not easy for us or our family. We are both deaf so now we needed to include an interpreter. This is hard for 2 reasons -the money, and having to share our pain with a 3rd party. Communication couldn't happen without her so we decided to go ahead with the expense.

Without foundations like NAF we would have never been able to have experienced this in the same warm, caring way that we did. Everyone was wonderful.

From the bottom of our hearts ~ Thank you!

This past year, NAF has received thousands of letters from patients, thanking us for helping them access the abortion care they needed.



2008 HONOREES

NAF MEETINGS

Providing professional education in abortion care is an essential component of NAF's mission to keep abortion safe, legal, and accessible to promote health and justice for women. We currently offer accredited continuing medical education (CME) credits through our two national conferences and online materials.

NAF's Annual Meeting and Risk Management Seminar provide members with an opportunity to learn about the latest abortion-related research, and a chance to come together as a community of abortion providers and pro-choice advocates.

This year, we held our 32nd Annual Meeting in Minneapolis, MN, and our Risk Management Seminar in Halifax, Nova Scotia, Canada.



Top: Matthew Reeves, MD, MPH, leads a hands-on ultrasound practicum for Risk Management participants.

Bottom: Attendees listen to a presentation on ultrasounds at NAF's Risk Management Seminar in Halifax, Nova Scotia.

Top left: Rebecca Gomperts, MD, Founder of Women on Waves, discusses her work at the second plenary at NAF's Annual Meeting in Minneapolis, MN. Women on Waves has used a Dutch ship to provide abortion care to women in countries where abortion is otherwise illegal.

Top right: NAF Annual Meeting attendees read thank you letters from patients who have received assistance from NAF's Hotline Patient Assistance Fund. Robin Rothrock from Hope Medical Group for Women in Shreveport, LA collected the letters and combined them into a quilt, which was displayed at our meeting.

THE CHRISTOPHER TIETZE HUMANITARIAN AWARD

is NAF's highest distinction, honoring significant, lifetime contributions in the field of abortion service delivery or policy. It was presented to Henry P. David, PhD.

THE C. LALOR BURDICK AWARD

honors "unsung heroes" whose outstanding daily commitment to excellence exemplifies the ideals of NAF's members. It was presented to Jane Bovard of North Dakota and Lucia Cies, MD, of New Mexico.

THE ELIZABETH KARLIN EARLY ACHIEVEMENT AWARD

honors medical students who demonstrate extraordinary commitment to ensuring the future of safe abortion care. It was presented to Lara Knudsen.

SCI INTERNATIONAL SCIENTIFIC PAPER AWARD WINNERS:

The Safety of Deep Sedation Without Intubation for Abortion in the Outpatient Setting; Gillian Dean, MD, MPH; Adam Jacobs, MD; Clifford Gevirtz, MD; and Maureen Paul, MD, MPH.

Provider Preference Among Abortion Clinics in Iowa: A Qualitative Exploration; Tara Shochet, PhD, MPH.

SCIENTIFIC POSTER AWARD WINNER:

Abortion Training Experiences Among Newly Graduated Ob/Gyn Residents; Courtney Jackson, PhD; Angel Foster, DPhil, MD, AM; and Samantha Charm.



Top row, from left: Henry P. David, PhD, Christopher Tietze Humanitarian Award; Jane Bovard, C. Lalor Burdick Award.

Bottom row, from left: Lucia Cies, MD, C. Lalor Burdick Award; Lara Knudsen, Elizabeth Karlin Early Achievement Award.



SUPPORT NAF



The support of individuals who are deeply committed to reproductive health and justice is essential to our ability to run vital programs that support abortion providers, keep clinics open, and ensure women have access to the abortion care they need. There are many ways you can support our important work. **To make an immediate impact on women's lives, visit www.prochoice.org/support and make a gift through our secure website; print a gift form and mail it to us; or call NAF at 202-667-5881 to make a gift over the phone.**

WAYS TO GIVE

RENEW YOUR ANNUAL SUPPORT OR MAKE A FIRST TIME GIFT TO NAF

Annual NAF donors help us carry out our mission to ensure safe, legal, and accessible abortion care to promote health and justice for women. Your gift will immediately be put to work where the need is greatest. You may make a secure online credit card donation at www.prochoice.org/support; print a gift form and mail it to us; or call NAF at 202-667-5881 to make a gift over the phone.

MONTHLY SUPPORT

Your monthly support will give us a reliable source of funds for critical new needs as they arise. These gifts are made by electronic funds transfer or automatic credit card deductions. To make a recurring donation, visit www.prochoice.org/support and make a gift through our secure website; print a gift form and mail it to us; or call NAF at 202-667-5881.

MEMORIALS AND TRIBUTES

You may make a gift to honor someone special who has touched your life or has made meaningful contributions to the pro-choice movement. We will send an acknowledgment card to the honoree or the family to let them know about your tribute. A space is provided for your memorial gift on our donation form at www.prochoice.org/support.



STOCKS AND SECURITIES

Gifts of securities such as stocks, mutual fund shares, or other appreciated assets can be a valuable tax-efficient method for making a gift to NAF. In the U.S., in many cases, you can take a tax deduction for the full fair market value of the gift. For more information, visit www.prochoice.org/support/stocks.html or call NAF's Development Director at 202-667-5881.

PLANNED GIFTS

The most common way to provide a planned gift to help ensure NAF's future vitality and effectiveness is to include NAF in your will through a bequest. Other ways to help NAF plan for the future are to name NAF as the beneficiary of your retirement fund, life insurance policy, or through life income gifts. For more information, visit www.prochoice.org/support/planned_gifts.html or contact NAF's Development Director at 202-667-5881.

WORKPLACE GIVING

UNITED WAY AND COMBINED FEDERAL CAMPAIGN

Designate Abortion Federation, National (NAF) in the United Way and the Combined Federal Campaign. If we aren't listed in your area campaign, write in Abortion Federation, National (NAF); 1660 L Street, NW, Suite 450; Washington, DC 20036 on your pledge form.

MATCHING GIFTS

Many employers will match your gift, or your spouse's contribution to NAF (or even double or triple it) through workplace giving programs. Ask your human resources department for a matching gift form and send it to us.

WE NEED YOUR HELP TO SUPPORT OUR MEMBERS, AND ENSURE THAT WOMEN CAN ACCESS QUALITY ABORTION CARE.

2008 FINANCIAL INFORMATION



RACHEL FALLS
1968 – 2008

NAF suffered a great loss this year when our former Hotline Director Rachel Falls passed away following a battle with brain cancer.

Rachel joined the NAF Hotline in 2000 as a hotline operator while completing her graduate work at the University of Maryland. Working part-time at the Hotline allowed Rachel to work for a cause she cared deeply about while obtaining her doctorate in education. But Rachel soon found that her part-time job had become her passion and she went on to join the NAF staff full-time and serve as the Hotline Director until June 2008.

Under Rachel's leadership, the NAF Hotline grew and changed the lives of thousands of women each month. Rachel knew the importance of her work and once said that "at the Hotline, we save women's lives every day."

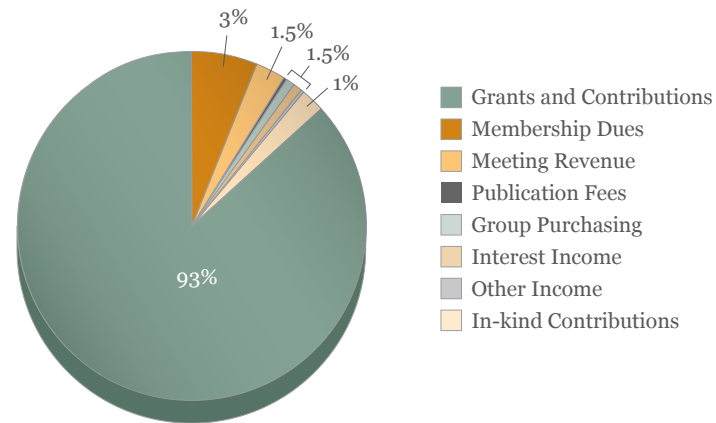
Rachel advocated for NAF to start our first patient assistance fund in 2001. Following her death, and with her family's blessing, NAF renamed this fund the Rachel Falls Patient Assistance Fund. This fund helps women who call the NAF Hotline who would otherwise not be able to afford the abortion care they need, and honors the many contributions Rachel made to the NAF Hotline and to the reproductive justice movement.

Rachel was committed to preserving a woman's right to choose abortion and to access that care with ease and dignity. In addition to her work on the Hotline, Rachel was an active member of the Washington Area Clinic Defense Task Force where she worked as a clinic escort for nearly ten years.

In addition to the Rachel Falls Patient Assistance Fund, the Rachel Henderson Theater Award at Wesleyan University and the Rachel Falls Compassion Award at Exhale have been established in her honor.

REVENUES

Grants and Contributions	\$ 19,867,982
Membership Dues	\$ 706,090
Meeting Revenue	\$ 323,125
Publication Fees	\$ 3,443
Group Purchasing	\$ 97,481
Interest Income	\$ 90,797
Other Income	\$ 28,425
In-kind Contributions	\$ 251,660
Total Revenues	\$ 21,369,003



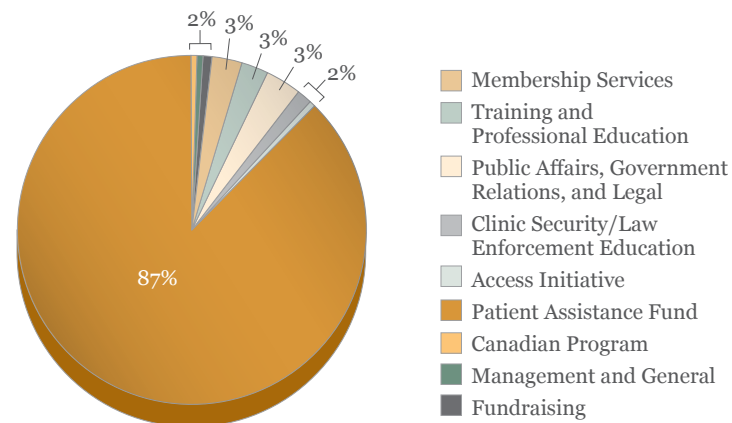
EXPENSES

PROGRAM SERVICES

Membership Services	\$ 775,630
Training and Professional Education	\$ 721,600
Public Affairs, Government Relations, and Legal	\$ 912,688
Clinic Security/Law Enforcement Education	\$ 370,560
Access Initiative	\$ 185,873
Patient Assistance Fund	\$ 23,991,115
Canadian Program	\$ 176,255

SUPPORT SERVICES

Management and General	\$ 150,180
Fundraising	\$ 170,224
Total Expenses	\$ 27,454,125



OTHER

Transfer of NAF/PLP Capital	\$ 1,039,358
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Combined Change in Net Assets	\$ (5,045,764)	NAF/PLP Retained Earnings, Beginning of Year	\$ 845,116
Net Assets, Beginning of Year	\$ 8,370,187	NAF/PLP Retained Earnings, End of Year	\$ 0
Net Assets, End of Year	\$ 3,324,423		

IN MEMORIAM

DALLAS A. BLANCHARD

1933 – 2008

Dallas Blanchard was a national authority on religious terrorism and anti-abortion violence. He co-authored several books including *Religious Violence and Abortion: The Gideon Project*, a case study of the 1984 bombings of three Pensacola, FL abortion clinics on the same day. Following the murders of three reproductive health care workers in Florida in the early 1990s, Blanchard became a vocal advocate for solutions to end the violence against abortion providers.

RICHARD HAUSKNECHT, MD

1929 – 2008

Dr. Richard Hausknecht had a distinguished career as a women's health and reproductive rights advocate for more than 50 years. He opened the first abortion clinic in New York City in July 1970, was a founding member of Physicians for Reproductive Choice and Health, and most recently served as the Medical Director of Danco Laboratories. Dr. Hausknecht's pioneering research on the safety and efficacy of medical abortion was instrumental in the introduction of this option for early pregnancy termination in the United States.

STANLEY ROEBUCK

1949 – 2008

Stanley Roebuck devoted his life to protecting others, first through the Marine Corps, then in civilian security and community service work. He most recently served as the Security Director at NAF member Planned Parenthood of the Rocky Mountains in Denver, CO where he worked to defend women's access to abortion care.

ALLAN ROSENFELD, MD

1933 – 2008

Dr. Rosenfield worked for more than four decades on global women's reproductive health issues. Most notably, he worked to expand access to family planning for women throughout the world, called attention to the public health crisis of maternal mortality, and started an initiative to address the mother-to-child transmission of HIV. Dr. Rosenfield served as dean of the Mailman School of Public Health at Columbia University from 1986-June 2008.

