



FALL 2011

Your Donations At Work

Susan *(not her real name) is 32, a recent divorcee with a 6 year old, who just left a highly-abusive and violent relationship with her boyfriend to live temporarily with her parents. She was duped into her pregnancy by her abuser, who intentionally removed a condom during intercourse without her knowledge, and certainly, without her consent in an attempt to make her stay with him. A former office worker, recently laid off and uninsured, Susan and her young child are now homeless, receiving food stamps, and in the process of applying for Medicaid. Susan was able to terminate her pregnancy at 15 weeks with EMA's help.



Our mission is to help provide funding for abortions for women and girls who are faced with an unintended or problem pregnancy, which they cannot afford to terminate. EMA will preserve their privacy and dignity, and make sure they are provided safe medical care.

*"If you don't have money, you don't have a choice".
Harriette Glasner*

Letters from Recipients

"I am a 17-year-old mom of an 8-month-old baby. I dropped out of school and am currently going back but the baby I'm pregnant with will be hindering what I'm trying to accomplish in this trying time of my life. My mom already has a 1-year-old also and it is hard at home for us, being on welfare and depending on the State. I think, well, I'm grateful for your donations because it will help me get into school full-time, have more time for the baby, and let me see my future more better. Thank you, EMA, you are greatly appreciated."



"I'm not sure there's enough room on this page to express my gratitude for this center (Presidential Women's Center), its staff and this Fund (EMA). This has been the most stressful week of my life. The emotional struggle was difficult enough, but when I was faced with the financial aspect, it was more than I could bear. You already feel like you have to keep it a secret from friends and family, so who do you turn to for emotional support? And then you're supposed to ask them to help with a procedure that they don't approve of? Some people are lucky, I guess, and have that support, but I am definitely NOT one of them. When I called the clinic, I was preparing myself for the most difficult decision. I knew I didn't have the money to have the procedure, but I didn't have the money or resources to properly raise another baby either. When she told me there was help, I burst into tears. I could not believe that there were really people out there who understood and were willing to help. I was so emotional because I don't think people realize that no matter how small the gesture, it could mean the world to the person receiving it. And that is exactly what it means to me. This Fund has made it possible for me to continue to try and provide the best life I can to my 7-month-old and not have to deal with the burden of raising another baby when you aren't ready. From the bottom of my heart and soul, THANK YOU, EMA!!"

*The names of the patients have been changed to protect their privacy.

For more stories from our client base visit :
<http://emawpb.org/clientstories.html>
or www.facebook.com/EMAWPB

All patients are treated at National Abortion Federation approved facilities.

Year in Review

Board of Directors

EMA is run by an all volunteer Board of Directors

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- ◇ Our Annual Appeal letter was mailed at the end of 2010. It seems to have gotten lost in the holiday shuffle so we re-sent the letter in March with a much more robust response. Thank you to all who continue to support our work.
- ◇ In January, we participated in a celebration of *Roe v Wade* with the Pro-Choice Coalition. Fran Sachs spoke at this event.
- ◇ Also in January we had a friendraiser house party.
- ◇ In March, we had a very successful breakfast presentation by Linda Greenhouse, journalist for the *NY Times* for 30 years, winning a Pulitzer Prize for her coverage of the Supreme Court. Her most recent book is Before Roe v. Wade: Voices That Shaped the Abortion Debate Before the Supreme Court's Ruling.
- ◇ Fran Sachs and Marcia Halpern attended the biennial National Network of Abortion Funds conference in Denver CO. in June. They brought back many ideas for fundraising, organization, handling of the hotline, social networking and a renewed enthusiasm for the work of our organization.
- ◇ EMA is now on Facebook.
- ◇ In July, the board had its annual planning meeting to prepare a budget for next year and plan an event. Due to ever-increasing patient load during the economic downturn, we've set ourselves an ambitious goal to increase our fundraising targets by 25%.
- ◇ Summertime UnParty mailing.
- ◇ Fall Newsletter.
- ◇ Annual fundraising letter to go out in November.
- ◇ Tentatively scheduled March 2012 event with compelling speaker.

Visit our web site

Donate online

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On March 18, 2011, we were honored to welcome renowned Pulitzer Prize winner, Linda Greenhouse, author of Before Roe vs. Wade: Voices That Shaped the Abortion Debate Before the Supreme Court's Ruling (2010) and Becoming Justice Blackmun (2005) as our keynote speaker for our Spring fundraiser. Linda Greenhouse presented a comprehensive summary of the factors that led to the historical Supreme Court decision.

The more than 60 attendees were impressed by Ms. Greenhouse engaged the crowd and eloquently guided us through this formative piece of history. Mona Reis was gracious to host the event in her beautiful home. EMA, Inc. raised nearly \$4000.

Linda Greenhouse closes Before Roe vs. Wade with this final thought, "The future of abortion rights under the United States Constitution remains uncertain. The Supreme Court will again speak to the question, but the record suggests that it is not likely to have the last word. The future lies in the Court's ongoing dialogue with the American people. And the documents that tell *that* story remain to be written."

The Truth About Late Term Abortions

Each year in the United States approximately 120,000 women obtain abortions after the first trimester of pregnancy. Indeed, for nearly 25 years the proportion of abortions occurring after the first trimester has remained relatively constant at about 10%. **Late-term abortions are very rare.** About one percent of all abortions performed in the United States occur after 21 weeks. There are different definitions of what constitutes a "late term abortion," but most definitions refer to abortions at or after 24 weeks or in the third trimester.

The women who seek later abortions are disproportionately young, low-income, have less education, and are from communities of color. These women often face numerous barriers to accessing services. Restrictive waiting periods, high costs, travel requirements, and the shortage of providers limit the availability and accessibility of second trimester services, particularly after 16 weeks of pregnancy. While the need for later term abortions remains constant and compelling, public support is far lower than for abortion generally.

The dominant narrative is one which perpetuates an assumption that people are electing to have late-term abortions for the sake of convenience. This public perception is shaped by the constant litany that Dr. Tiller was "killing babies." The narrative is one in which women are shamed for choosing abortion, no matter the circumstances, and in which Dr. Tiller was portrayed even indirectly as a despicable aide in their shame. This narrative is so pervasive that even among those who consider themselves pro-choice, many people are left to wonder: Are these women just waking up one day, deciding over coffee they are tired of being pregnant, and opting for an abortion at 24 weeks? No one hears the heartbreaking stories that lead many women to seek a late term abortion.

Ten Pro-Choice Realities to Counter Opponents of Choice.

1. Almost 90% of abortions take place early in pregnancy.
2. If not for anti-choicers, even more women would get abortions much earlier in their pregnancies.
3. Doctors perform late term abortions because of medical indications, usually on women who desperately wanted the baby.
4. Women who get abortions aren't afraid of being mothers. Many are already mothers.
5. Abortion is physically safe.
6. Abortion is mentally safe.
7. Women who get abortions take responsibility for their decision.
8. Abortion providers are responsible medical professionals who work to make sure their patients are healthy and help them avoid future unintended pregnancies.
9. Women get abortions because they're being responsible.
10. Conservative policies cause the abortion rate to be higher than it needs to be by restricting birth control availability.

The State of the State



From the desk of
State Representative Mark S. Pafford
District 88

House Bill 501; titled *Choose Life License Plates*, requires that profits made from these plates must be transferred from the Department of Highway Safety and Motor Vehicles directly to Choose Life, Inc. Previous to this legislation profits were distributed to non-profit organizations of the county's choice. This bill also changes the distribution of funds to non-profits which aid pregnant women.

House Bill 1127; titled *Abortions*, requires a woman to have an ultrasound before she consents to have an abortion. The physician is required to offer to review and explain the ultrasound images. Written materials must also be provided to women explaining the stages of fetal development. Women can deny the viewing and explanation, but must sign a waiver stating that she has declined the opportunity.

This past legislative session, Florida saw the most damaging anti-choice legislation filed since the passage of *Roe v. Wade*. The majority party filed 18 bills intended to erode a woman's access to basic health care under the guise of providing women information and quality of care.

Among the changes was the passage of what has become known as the ultrasound bill. This bill requires that a woman has an ultrasound, even if not medically necessary, prior to having an abortion procedure. Proponents insisted this measure would provide women with the best medical information, though opponents know that it is simply a way to intimidate and shame women. Also noteworthy, is that these ultrasounds must be paid for by the client, placing a greater financial burden on a woman seeking abortion services.

Additionally, the State passed legislation which prohibits private insurance plans from paying for abortion services if any state or federal funds were utilized to subsidize the plan. This creates a severe hardship for many women seeking abortion services. Floridians will also see an initia-

tive on the 2012 ballot which, if passed, will amend the state constitution to prohibit government funded programs such as Medicaid for paying for any type of abortion service even though federal law already prohibits the use of federal funds for abortion services.

Access to services was made increasingly more challenging for teenagers as well. Those teenagers who seek a judicial bypass in lieu of parental notification will have a more difficult time under the new law. Teens face new definitions of “maturity” and long deliberations prior to obtaining a bypass.

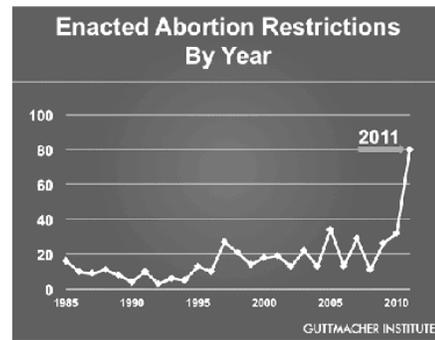
As the 2012 session approaches, Rep. Pafford states that, “Advocates for choice, privacy, and access to health care will have to remain on their toes. The days of thoughtful policy development and respect for our individual rights is over and vigilance will be critical in defending our basic freedoms.

The leadership in both chambers and the governor’s mansion are philosophically opposed to ensuring women remain free of government intrusion into their lives, their decisions, and their bodies.”

House Joint Resolution 1179; titled *Abortion/Public Funding/Construction of Rights*, proposes an amendment to the Florida Constitution. This amendment will ban the use of public funds for any abortion or any health care plan that covers an abortion. Current statutes do not allow public funds to pay for elective abortions. This resolution will be placed on the 2012 ballot, and if passed, will add this language to the Florida Constitution.

House Bill 1247; titled *Parental Notice of an Abortion*, modifies the parental notification law of any minor who wishes to have an abortion. This bill requires notifications by parents to be followed up on with written consent and requires that notifications be signed within 30 days of the abortion. Petitions must now go through the circuit court in the county where the minor lives. Additionally, judges are given a longer time to rule on the minor judicial bypass process.

The threats to choice are real and imminent! The attacks are skyrocketing at the state and federal levels. Many of the attacks are designed as direct challenges to *Roe v Wade*. The graph shows this disturbing trend. And it may get worse in 2012.



Keeping a Watchful Eye Across the Nation

472 Anti-Choice State Bills

In the first 7 months of 2011-nearly three times as many in the previous year.

Federal: Legislative Riders

Sneak attacks on choice like the anti-choice amendment by Sen. Orrin Hatch attached to a free trade bill.

Federal: Stupak on Steroids Bill

Manipulates the tax code to advance anti-choice policies and could spur IRS to audit rape and incest survivors who choose abortion.

Sadly, in the first committee week in Tallahassee for the 2012 session, they filed an omnibus anti-choice bill. **SB 290** introduced by Senator Flores includes a dozen restrictions targeting doctors who provide abortion care in Florida. The bill is part of a highly coordinated attack on women’s health care across the country, aimed at limiting access.

Ohio’s Heartbeat Bill

A direct attack on *Roe v Wade*. It would ban abortion as early as 7 weeks. That is before many women even know they are pregnant.

Other Outrageous State Bills

- Bans after 20 weeks without health exceptions
- Mandatory ultrasounds
- Forced counseling at anti-choice crisis pregnancy centers

50 State Personhood Initiatives

Would outlaw abortion and common forms of birth control by redefining personhood.

Acknowledgements

Thank You Mona Reis for making your birthday celebration a way to benefit EMA.



Attention all EMA Supporters
Please visit our spanking new and improved
Facebook Page at

www.facebook.com/EMAWPB

Our goal is to have 120 "Likes"
by Thanksgiving.

Kindly visit us and "Like" us so we can stay in touch!! Thanks!!

EMA would like to thank you all the volunteers who have had fundraising events, raised awareness with their friends, helped with tax returns, kept our web page up to date, and helped us get on Facebook.



More volunteers are needed with:

- Spring Fundraiser
- Grant research and writing
- Host a house party
- Build our mailing list— research and data entry
- Social Media—help with Facebook and Twitter

We would like to acknowledge the friends and family of

Adele Rogers

And

Mim George

For making donations to EMA in their memory

Many Ways to Support Our Work

1. ***Make a donation.***
2. ***Have your employer make a matching gift.*** Double your gift if your employer has a matching grant program.
3. ***Make a monthly donation.*** Monthly giving provides a stable flow of support for our critical work.
4. ***Make a tribute in honor of or in memory of someone special.*** Make a gift to Emergency Medical Assistance, Inc. to honor or memorialize a loved one whose life and interests reflect our mission of helping women. A Tribute Gift reflects your affection or admiration for a friend or family member and furthers our work. A special card will be sent to the honoree or the family of the deceased to let them know of your thoughtful gift.
5. ***Make a legacy gift.*** Please consider remembering EMA in your estate plans and become a member of the Harriette Glasner Legacy Society. Members are those who have included EMA in their estate planning so that their passion and commitment to reproductive rights lives on. This can be in the form of inclusion in a Will or Living Trust, purchasing a charitable Gift Annuity, making EMA a beneficiary of life insurance or an IRA.
6. ***Volunteer.*** Raise money. Help us expand our database of potential donors doing research and database entry. Have a house party to introduce your friends to EMA. Grant writing. Clinic escort. Event planning. We will match your skills and interest with a task.



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