



MEETING

The Challenge

Annual Report
for 2000 & 2001

MESSAGE FROM NAF'S BOARD CHAIR: MAUREEN PAUL, MD, MPH

Significant new opportunities and new challenges had an unprecedented impact on NAF and our members in 2000 and 2001.



The long-awaited FDA approval of mifepristone allowed American women to benefit from one of the most exciting public health advances in our lifetimes. Our membership embraced the promise and potential

of this new technology and participated in record numbers in a wide range of NAF-sponsored educational forums in order to be able to introduce this option to their patients to supplement the surgical services for which we have long-standing expertise.

At the same time, we have also been challenged by the ascendance of a new Administration in Washington that is committed to promoting an anti-choice policy agenda on multiple fronts. More ominously, anti-choice extremists have demonstrated increased aggressiveness in their attempts to disrupt the operations of abortion clinics; harass physicians, clinic staff and patients; and intimidate abortion providers through threats or acts of violence.

Thanks to the far-reaching efforts of NAF on so many fronts, we have been able to meet each challenge and to enthusiastically embrace the opportunities that have come our way. It has been an honor and privilege for me to serve NAF in the capacity of Board Chair during this exciting period of change and growth.

MESSAGE FROM NAF'S PRESIDENT & CEO: VICKI SAPORTA

We're happy to share this report, which describes some of the many ways that the National Abortion Federation has met the challenges before us in 2000 and 2001.



By the end of 2001, the scope of NAF's programs was broader and more comprehensive than ever before. Thanks to the tireless efforts of our excellent and insightful Board of Directors, our talented

and committed staff, and, most of all, our remarkable and dedicated members, we have been able to meet the challenges before us and to produce results that have made a positive difference in the lives of American families.

The last two years have provided us with medical breakthroughs whose ultimate impacts we are only beginning to realize and appreciate. At the same time, political attacks against women's freedom to control their reproductive destinies, and domestic terrorism targeting abortion providers have required us to develop and maintain new and innovative initiatives to ensure that we can continue to fulfill NAF's mission of keeping abortion safe, legal, and accessible. It remains my greatest privilege to work with the thousands of devoted professionals affiliated with NAF to make our shared vision a reality.

NATIONAL ABORTION FEDERATION

MEETING CHALLENGES THROUGH INNOVATIVE PROGRAMS

The National Abortion Federation is the professional association of abortion providers in the U.S. and Canada. Founded in 1977, we serve the physicians, advanced practice clinicians, nurses, counselors, administrators, and other health care professionals who make choice a reality at more than 400 facilities in 48 states and eight Canadian provinces. On behalf of our members and the women they serve, NAF meets the many challenges involved in fulfilling our crucial and unique mission: keeping abortion safe, legal and accessible.

■ NAF provides the only ongoing program of accredited, abortion specific, continuing medical education, including the use of mifepristone (formerly known as RU-486) for early abortions.

■ NAF develops and disseminates research-based clinical publications, including clinical protocols, training curricula, and the field's most comprehensive and up-to-date clinical textbook on medical and surgical abortion.

■ NAF conducts an innovative and comprehensive quality improvement program for member clinics, based on the quality standards set forth in NAF's *Clinical Policy Guidelines*.

■ NAF facilitates abortion training opportunities for medical students and residents, and sponsors the only national grassroots program to organize and educate nurse practitioners, nurse midwives, and physician assistants as pro-choice advocates and potential abortion providers.

■ NAF provides essential security programs and services, including crucial liaison with law enforcement officials at all levels to protect providers and the women they serve.

■ NAF ensures that women can access the resources they need to make informed decisions about their pregnancies through our media outreach and public service advertising campaigns, our patient publications and web sites, our outreach programs, and our national toll-free abortion hotline that provides individual consultation, case management, and nonjudgmental support in both English and Spanish.

■ NAF puts a human face on abortion issues by bringing forward abortion patients to tell their personal stories to the media and to policy-makers; and by providing accurate, authoritative medical information through the voices of abortion providers.

■ NAF shares our array of educational resources with clinicians and public health advocates in the international community in order to support enhanced safety and quality of abortion and post-abortion care to women around the world.

NAF's contribution to the public health of women and families in North America and elsewhere continues to grow. The depth, breadth, and effectiveness of our programs and services are a source of pride to our members and supporters. The following pages highlight a few of our most significant accomplishments in 2000 and 2001.

MEETING THE CHALLENGE: EDUCATING PROVIDERS ABOUT NEW MEDICAL ABORTION OPTIONS



NAF's premier, evidence-based medical abortion education materials have been recognized and adopted for use throughout North America and around the world.



When the FDA announced its long-awaited approval of mifepristone (formerly known as RU-486) in September 2000, NAF had already developed a comprehensive program to deliver medical abortion education to clinicians throughout the country. NAF's evidence-based medical abortion educational materials include a supplement to the *American Journal of Obstetrics and Gynecology* on medical abortion, a comprehensive 8-module slide program on CD-ROM, a training and resource binder, a curriculum module, a CME-accredited self-study guide, and a five-tape video series covering ultrasonography, patient management, counseling, administrative and legal issues, and medical abortion regimens. These materials have been widely disseminated and adopted for use and reference by medical schools and residency programs, reproductive health care clinics, researchers, and clinicians throughout the US as well as internationally.

To complement the medical abortion education materials that NAF introduced in 2000 and 2001, we posted a new NAF web site: www.earlyoptions.org, with detailed educational information for health care professionals and special sections, in both English and Spanish, for women interested in learning more about this new option.

“It was truly empowering to have the AB staff attend a seminar like this and to meet some experts . . . Thanks to you all for allowing that opportunity.”



NAF brought individualized training programs on medical abortion to staff of member clinics.

In 2000 and 2001, more than 3,600 health care professionals, including physicians of various specialties, advanced practice clinicians, nurses, counselors, and clinic administrators, participated in national and regional medical abortion seminars or workshops conducted or supported by NAF. Through a significant and productive train-the-faculty collaboration, NAF worked in coalition with other associations of providers of women’s health care to facilitate lectures, grand rounds presentations, and workshops at medical conferences that reached another 1,800 interested clinicians.



NAF exhibited new medical abortion educational materials at medical conferences around the country.

“Our medical abortion program in Chicago has been so successful; a full 40% of women 7 weeks and under are choosing medical abortion.”

MEETING THE CHALLENGE: EDUCATING THE PUBLIC ABOUT NEW MEDICAL ABORTION OPTIONS

In the summer and fall of 2001, NAF launched a public service advertising campaign to educate women about the safety and availability of medical abortion. The print ad included NAF's hotline number and Early Options web address so that women would be able to access accurate information about this new abortion option.

Our ad campaign, designed to reach 70% of American women between the ages of 18 and 49, ran in multiple issues of *People*, *Self*, *Cosmopolitan*, *Fitness*, *Health*, *In Style*, *Jane*, *Mademoiselle*, *Glamour*, *Marie Claire*, *First for Women*, *Essence*, *Vanity Fair* and *Latina* magazines from July to November. A follow-up survey confirmed that before seeing the

ad, the majority of a randomly-selected sample of pro-choice women were unaware that the FDA had approved mifepristone and didn't know how to access information about medical abortion. Calls to NAF's hotline and hits to our website increased significantly during the campaign.

NAF's public service advertising campaign also generated significant media interest. First reported in the *Wall Street Journal*, additional articles appeared in newspapers across the country and on the Internet, where the ad was featured on the Yahoo home page. NAF's President & CEO, Vicki Saporta, was also interviewed extensively on TV and radio about the ads.

THE WALL STREET JOURNAL
WEDNESDAY, MAY 23, 2001 B1

Ads for Controversial Abortion Pill Set to Appear in National Magazines

By RACHEL ZIMMERMAN
Staff Reporter of THE WALL STREET JOURNAL

After years of bitter abortion politics and a torturous regulatory review, the first national consumer ad campaign for the so-called abortion pill is about to hit the nation's newsstands.

The \$2 million campaign for the pill mifepristone, or RU-486, is being paid for by the National Abortion Federation, a Washington, D.C., professional group of abortion providers. The ads are set to start running in July issues of top-selling magazines like *Cosmopolitan*, *People* and *Vanity Fair*. One magazine, Hearst Corp.'s *Redbook*, has refused to run the ad.

The ads take a soft-sell approach, with a picture of a crisply dressed woman gazing out a window. "You have the freedom to choose. And now, you have another safe abortion choice," the text says, directing readers to an information hotline the federation operates. The ad refers to

Coming soon to newsstands: An abortion-rights group is paying for ads for the drug mifepristone

possible side-effects and other details of how the drug works.

Redbook, at least so far, is the only magazine to refuse the ad, the federation says. Magazines including *People*, *Vanity Fair*, *InStyle*, *Jane*, *Mademoiselle*, *Glamour*, *Fitness*, *Health*, *Self*, *First for Women*, and *Essence* have agreed to run it, as have two other Hearst magazines, *Cosmopolitan* and *Marie Claire*, the federation says.

According to an e-mail the federation received from a *Redbook* ad sales representative, the magazine wanted to avoid provoking "negative reader and retailer reaction."

"While *Redbook* prides itself on an open dialogue about sex, we must also walk a tightrope to satisfy regional mores that if engaged would negatively effect [sic] our business model," the e-mail said.

Paul Luthringer, a *Redbook* spokesman, says in

Please Turn to Page B1, Column 6

A woman with dark hair is looking out of a window, her hand resting on the frame. The scene is brightly lit, suggesting a sunny day.

You

have the freedom to choose.
And now, you have another
safe abortion choice.

The Early Option Pill has
been approved by the FDA.

It safely and effectively terminates a pregnancy, and offers yet another option for women: Mifepristone, the medical breakthrough known as RU-486 in Europe, is now available in the U.S. Taken in the first 49 days of pregnancy, the Early Option Pill works to block the effects of a hormone needed to sustain pregnancy. In U.S. clinical studies, 96% of women said they would recommend it to a friend. To find out if the option used by over half a million women in Europe is right for you—or for a referral to a quality provider—call the National Abortion Federation (NAF) hotline. At NAF, our members have provided quality care to women for over 20 years.



Find out if the Early Option Pill is an option for you: 1-800-772-9100 | www.earlyoptions.org

MEETING THE CHALLENGE: SETTING THE STANDARD FOR QUALITY ABORTION CARE

In order to provide the resources our members need to ensure that they can provide the highest quality reproductive health care to their patients, NAF conducts a comprehensive and innovative Quality Assessment and Improvement program. The program is based on NAF's *Clinical Policy Guidelines*, which set the standard for quality abortion care in North America. The program includes on-site consultations to provide technical support and to assist in ensuring compliance with these guidelines.

[e-mail]

“As providers, we cover a wide spectrum of viewpoints, interests, and philosophies . . . Despite our differences, we stand together for what we do. I am proud to be a member of this community, and I can say that I have never felt better served by an organization I have belonged to.”



Molly Rawling (right) being presented with one of NAF's 2001 C. Lalor Burdick Awards, later wrote to us: “NAF has given me the support, education, and encouragement which enabled me to carry on even when times were tough.”

“NAF has been crucial to ensuring that [our clinic] will have the opportunity to fulfill its ongoing commitment to providing safe and affordable abortions and continuing its role as a leader in reproductive health care. Your support, along with the unrelenting assistance and guidance of [your staff] has helped [us] endure through these most difficult times. We continue to be grateful for NAF's

Letter

NAF provides North America’s only on-going program of abortion-specific, accredited continuing medical education. Our long-standing commitment to these educational programs ensures that abortion providers are able to keep abreast of the latest advances and best practices in their field. Presentations at NAF conferences include reports on new research related to the practice of abortion as well as seminars on other clinical aspects of surgical and medical abortion. These conferences also feature counseling and administrative workshops, public policy updates, and seminars for legal professionals on reproductive health issues.

[e-mail]

“Absolutely the best CME experiences on earth, with the best people I know. I am truly honored to walk with all of you.”



Philip Stubblefield, MD, shared memories of the progress of reproductive medicine and the history of NAF at the Risk Management Meeting in Toronto.



In 2000, NAF’s Annual Meeting and Risk Management Seminar were held in Pittsburgh and Palm Springs, respectively. In 2001, Our 25th Anniversary Annual Meeting was held in Chicago, and our Risk Management Seminar was presented in Toronto.

MEETING THE CHALLENGE: UNDERSTANDING THE CULTURAL REALITIES OF ABORTION AT HOME AND ABROAD

In order to encourage better understanding of abortion among the general public, NAF encourages realistic and sensitive portrayals of abortion providers and the women they serve in a variety of popular media. At NAF's Annual Meetings in both 2000 and 2001, we acknowledged and honored the creators of complex and nuanced fictional treatments of abortion in books and movies.



In 2000, John Irving won an academy award for his screenplay adaptation of his novel, the Cider House Rules. That year he was the keynote speaker at NAF's Annual Meeting in Pittsburgh.



Richard North Patterson, author of the best-selling novel, Protect and Defend, was the keynote speaker at NAF's 2001 Annual Meeting in Chicago.

In order to understand abortion care in international settings and make NAF's educational resources available to a wider audience, we brought international participants to NAF conferences, broadened our offering of Spanish language publications and on-line resources, and launched a new clinical training program in Moldova.



Jorge Villarreal, MD and his daughter, Christina Villarreal, PhD, whose professional lives have been devoted to reproductive health care in Colombia and Latin America, addressed attendees at NAF's 2000 Annual meeting.



In 2001, NAF launched a training initiative to introduce manual vacuum aspiration techniques to abortion providers in Central and Eastern Europe and the former Soviet Union. NAF staff and faculty traveled to Moldova in December, 2001 to begin our collaboration with faculty at the Chisinau Municipal Perinatal Center Clinical Hospital.



Khama Rogo, MD, PhD, lectured on reproductive health care in his native Kenya and other African countries at the 2001 Annual Meeting.

MEETING THE CHALLENGE: MAKING ABORTION TRAINING AVAILABLE TO THE NEXT GENERATION OF CLINICIANS

NAF has worked for more than a decade to ensure that the next generation of doctors and advanced practice clinicians have meaningful opportunities to get the didactic and clinical abortion training they will need in order to provide their future patients with the full range of reproductive health care.

Evidence of our success in meeting this challenge came in 2000 with the publication of NAF's study, *Abortion Training in US Obstetrics and Gynecology Residency Programs, 1998*.^{*} The survey results suggested dramatic improvements in the availability of abortion training for ob/gyn residents. In 2000 and 2001 we facilitated collaborations between individual trainees, residency program faculty, and experienced NAF clinicians

to ensure that medical residents in locations where abortion training still was not otherwise available could be exposed to high quality models of abortion service delivery.



Medical students, Matt Romberg (above) and Roseanna Gray-Swain (below) accepted NAF's 2000 and 2001 Liz Karlin Awards honoring their commitment to abortion training for medical residents and achievements in making that training a reality on their campuses.

"Thank you all so much for creating my Chicago rotation to finish learning to do abortion. I was able to learn exactly what I wanted to . . . and the preceptors were terrific teachers and mentors. You have taken part in adding an abortion provider to the dwindling stock in the physician community. You will have helped all the women I serve during my career."

[e-mail]



“Clinicians for Choice,” (CFC) the umbrella organization for our three advanced practice clinician groups — Midwives for Choice, Nurse Practitioners for Choice, and Physician Assistants for Choice – was created to enhance understanding about abortion and abortion service delivery among these professions, to foster and mobilize their prochoice activism, and to provide encouragement and resources for those who want to add abortion services to their practices. At the end of 2001, our program included a membership of over 4,300. We have developed educational resources and hold regular workshops for the grassroots leaders of these groups to help us meet these goals. We have worked successfully in several states to establish and ensure the rights of advanced practice clinicians to provide medical abortion services to their patients.

Shortly after attending a NAF workshop in 2000, one of the Clinicians for Choice State Contacts mailed an informational update letter to the nurse midwives in her state that began:

“I am writing to you as your State Contact for the National Abortion Federation Project “Clinicians for Choice.” I have just returned from a terrific meeting with the NAF staff and other state contacts, and am newly energized to work with you to promote the pro-choice agenda.”

The CFC membership also includes international clinicians from places as diverse as Bolivia, China, England, and Pakistan. When a South African midwife learned about our Midwives for Choice program, she contacted us for information about how to form a chapter in her country. Her abortion training group adapted our CFC model to provide a support structure as they returned to their workplaces after their training. Other CFC projects to assist the midwives who provide abortion in South Africa are ongoing.



NAF Midwives for Choice member, Alma MacIntosh, CNM, organized the first international chapter of Midwives for Choice in South Africa. Because the right to safe abortion is guaranteed to the women of South Africa in the nation’s constitution, and because midwives are the primary providers, we will have much to learn from one another.

MEETING THE CHALLENGE: ASSISTING ABORTION PROVIDERS WITH THEIR SECURITY NEEDS



Assisting our members in coping with the relentless threats and harassment directed against them by anti-choice zealots is one of NAF's most difficult challenges. We provide professional, on-site security audits and staff training; 24-hour access to emergency assistance; the services of an on-site emergency response team to facilitate effective communications with law enforcement agents, government officials, and the media when an attack has occurred; and post-trauma stress-management seminars.

We also work extensively and proactively with members of federal, state, and local law enforcement agencies. Our outreach to them has ensured that solving cases of domestic terrorism against abortion providers is a high priority. Our efforts resulted in three anti-abortion extremists being placed on the FBI's "Ten Most Wanted" lists in 2000 and 2001. Two of them were captured in 2001. We have also helped to ensure that US Marshals Service protection was available for abortion providers when it was needed, and that anthrax threat letters were designated as domestic terrorism and investigated as a top priority.

Our ongoing work to educate clinics about security procedures and handling suspicious mail paid off in mid-October, 2001, when over 260 facilities that provide reproductive health care services received mail with letters reading, "You've been exposed to Anthrax [sic]. We're going to kill you all. Army of God." In November, about 270 FedEx envelopes containing white powder and a letter signed by the Army of God were sent to clinics and women's organizations. In both instances, because NAF had been able to alert our members in advance that they could be targeted, most recipients turned the letters over to law enforcement officials unopened. The result was less disruption to the clinics and patients.

[e-mail]

"Dear NAF, I have just read about the focused attacks on you . . . I'm writing to express my support, encouragement, and gratitude to you. I am sad that you have been put on the frontline in this battle. Please be safe and well, and do not lose faith – your work makes life bearable for women, their men, and their children. Thank you."



In July 2000, a NAF physician in Vancouver, B.C. was assaulted and stabbed in the back as he arrived at work. This was the second violent attack on this physician, who had been shot by a high powered rifle in 1994. The day following the stabbing, another Vancouver NAF member received a death threat. NAF's emergency response team was on the ground in Vancouver within hours and an array of member assistance services was activated to assist them and ensure that they could continue to provide services to women.

[e-mail]

“I want to publicly thank the NAF staff for their very quick and timely action in notifying [the Northwest area clinics] about [the Vancouver assault]. Seattle is less than a two hour drive from Vancouver, BC, and NAF called us before the [general alert] was sent. It was GREAT to get the heads-up so quickly so we could talk, mobilize, contact the authorities, etc. My staff was worried, but information is power, and that is the point. Thanks, everyone, for what you do!”

[e-mail]

“[NAF's emergency response team] were run off their feet while in Vancouver, and did an incredible job. Such a quick and caring response was wonderful and just what we all needed. It's so important to feel supported at a time like this.”

“Thank you all, again, for your wonderful support – especially to NAF – . . . for the fantastic support that they offered to all of the providers in Vancouver. The assistance they provided with strategy, political and security issues was very valuable. THANK YOU!”

[e-mail]

MEETING THE CHALLENGE: BRINGING THE EXPERIENCE OF ABORTION PROVIDERS AND PATIENTS TO PUBLIC POLICY DEBATES

NAF ensures that the voices of abortion providers and the women they serve are heard in the media, in Congress, and in the nation's state houses. Those voices put a human face on the public health imperative of ensuring that women will have continued access to safe, quality abortion care when they need it, and protecting physicians' ability to give their patients the best possible care.

In 2000 and 2001 NAF played a key role in campaigns to defeat the legislative proposals in Congress that would have restricted women's access to abortion services or physicians' ability to provide the best possible care to their patients. We brought forward both women and their families, as well as abortion providers and researchers to meet with Congressional representatives and testify at hearings. They were effective advocates and as a result, we were successful in preventing passage of each of the bills we opposed.

On the legal front, when the Metropolitan Atlanta Rapid Transit Authority (MARTA) refused to run NAF's public service ads in 1999, we filed a lawsuit against the system for violating our First Amendment rights. In June 2000, the US District

Court ruled that MARTA did not have a compelling state interest in violating NAF's right to free speech. We settled the case, and our ads appeared in Atlanta for three months as originally planned.



NAF public service advertising ran in Atlanta in September, October, and November of 2000 after our successful lawsuit against the Metropolitan Atlanta Rapid Transit Authority.

Since Congress first began debate on the so-called “Partial Birth Abortion” ban in 1995, NAF has mounted sustained and vigorous opposition to this misguided and harmful legislation. We identified and brought forward medical experts and abortion patients who could give first hand testimony on Capitol Hill and in the media about their experiences and the importance of leaving medical decisions to women and their doctors.

In June, 2000, in its first abortion rights ruling in eight years, the Supreme Court’s decision striking down the so-called “partial birth abortion” ban in *Stenberg v. Carhart* was a major victory for NAF members and the pro-choice movement. NAF and four other medical associations filed a crucial friend-of-the-court brief in support of the challenge to Nebraska’s ban, originally brought by long-time NAF member Dr. Lee Carhart. The Supreme Court’s ruling in this important case effectively negated similar measures passed in other states, as well as those passed by Congress.



Long-time NAF member, Dr. Leroy Carhart, accepting NAF’s C. Lalor Burdick Award at NAF’s 2001 Annual Meeting in Chicago for his role in bringing *Stenberg v Carhart* to the US Supreme Court.

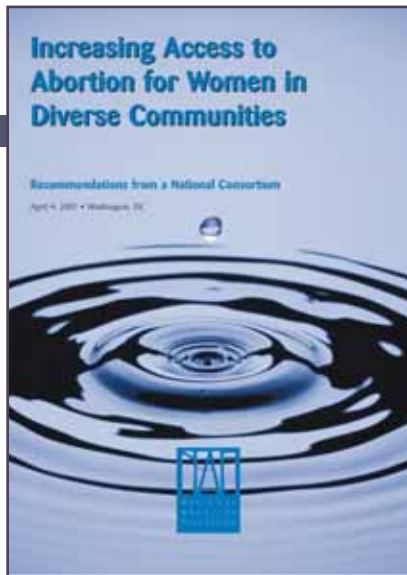


The 2001 Tietze Award was presented to Simon Heller, JD for his work with the Center for Reproductive Law & Policy to defend reproductive freedom in numerous cases that were critically important to NAF members. In addition to his successful argument of *Stenberg v Carhart*, his representation of Susan Cahill, PA-C led to the precedent-setting decision in *Armstrong v. Montana* in the Montana Supreme Court in 1999.

Letter

The legislative director for a Member of Congress wrote to us: “[He] wanted you to be aware that he voted against final passage of the so-named ‘Partial Birth Abortion Ban’ legislation. He found the meeting with your organization to be both informative and inspirational. I sincerely believe that you touched something deep inside of him and wanted to bring that to your attention. It is rare that outside organizations are able to reach someone the way you did and to present such a clear and solid argument.”

MEETING THE CHALLENGE: PROVIDING RESOURCES AND DIRECT SERVICES TO WOMEN AND THEIR FAMILIES



NAF's 2001 Consortium on Abortion Access for Women in Diverse Communities brought representatives from both national and local organizations serving African-American, Latina, Native American, and Asian women together to discuss ways to overcome the barriers that underserved women face when attempting to access safe abortion services.

[e-mail]

"I just want to

thank you folks for the important work you are doing. If it hadn't been for organizations like yours, I would probably never have had the chance to meet my wife and father the 2 wonderful children I have today. I might have been tied to a child I didn't want and to a woman I didn't love. The right to choose is just as important to men as it is to women. Without this right none of us are truly free."

Our efforts to ensure that women can access the accurate information they need in order to make the reproductive health choices that are right for them include three major project areas: a national toll-free hotline, comprehensive web pages, and a vigorous outreach program.

NAF Hotline: The number of callers to NAF's bilingual hotline continues to grow. We have expanded our hours of operation and increased our case management capacity in order to provide callers with the accurate information and referrals they seek. We arranged for more than \$60,000 in abortion funding for low-income women in 2000, and nearly \$80,000 more in 2001. These funds were made available through contributions from NAF and other national, regional, and local abortion assistance funds. In addition, many NAF members donated their services or reduced their fees when we contacted them about urgent cases.

Outreach Program: In 2000, NAF launched a new initiative to meet the twofold challenge of educating women in diverse communities about how to access accurate information and quality abortion services, and ensuring that our members have the support they need to provide culturally sensitive and appropriate care to all their patients. In 2000 and 2001, our Washington DC pilot project provided an opportunity to test and model community-based outreach services for underserved women.

NAF Web sites: In 2000, we launched a totally redesigned and expanded web site, www.prochoice.org, as well as an all new educational site focusing on medical abortion, www.earlyoptions.org. In 2001, another new site, www.supremecourtwatch.org, focusing on public policy issues and judicial appointments joined the roster of NAF web sites, which also includes www.cliniciansforchoice.org, a resource for advanced practice clinicians. NAF's Web presence has been instrumental in allowing us to introduce our clinical, policy, and general educational materials to new audiences.



Because our web sites provide access to our resources in English and Spanish and reach women around the world, our hotline has received calls from Japan, China, Saudi Arabia, Mexico, Argentina, St. Maarten, Korea, the Virgin Islands, Germany, Brazil, Israel, Ireland, Albania, Venezuela, Bahamas, New Zealand, Australia, and France from women and men seeking information and assistance.

[e-mail]

“I really admire and, as a woman, APPRECIATE the work that you are doing . . . [I]t is important to me to have health care providers who are prochoice and who will care for me as a whole woman. It feels good to know that there are people out there fighting to keep my body my own – as hard as those others are fighting to make my body a subject of legislation. God Bless you all.”

“I recently decided to have an abortion. I wanted to thank you for this informative web site. I was scared and so I did some research on abortion. All the other sites I found, made me feel like I was an evil person. You provided a friendly environment filled with facts that made me feel secure about myself and my decision. Thank you very much for continuing to fight for my rights over my body along with the rights of the women across this country. You should be applauded and commended for your undying devotion and efforts to this cause.”

[e-mail]

“Congratulations on an excellent site, and thanks for your work in ensuring that women have unbiased information about abortions, and increasing their ability to access them.”

[e-mail]

MEETING THE CHALLENGE: RECOGNIZING EXCELLENCE IN ABORTION CARE AND ADVOCACY



Each year, NAF pays tribute to a few of the many women and men whose skills, commitment, dedication, and professionalism have resulted in achievements deserving of special honor and recognition from their peers.



The Christopher Tietze Humanitarian Award, NAF's highest distinction, honors significant, lifetime contributions in the field of abortion service delivery or policy.

■ In 2000, **Stanley Henshaw, PhD** was honored for his years of research that provided the empirical data that allowed providers and policy makers to better address the issues surrounding reproductive health care in the United States and abroad.

■ In 2001, we honored **Simon Heller, JD**, whose defense of reproductive health in state and federal courts, including the 2000 *Stenberg v. Carhart* Supreme Court case, has helped immeasurably to ensure that NAF members can provide their patients with the services they need.



The **C. Lalor Burdick Awards** honor “unsung heroes,” whose extraordinary, daily commitment to excellence in the practice of women’s health care exemplify the ideals of NAF membership.

■ In 2000, honors went to the **staff of Buffalo GYN WomenServices**, for their remarkable perseverance and determination in the aftermath of the tragedy of the assassination of their colleague, Dr. Barnett Slepian; and to **Robin Rothrock** for her vision and follow-through in helping to create and maintain NAF's much valued “virtual community” for the furtherance of quality abortion care.

■ In 2001, we honored **Lee Carhart, MD**, **Molly Rawling, MD**, and **Gary Romalis, MD** for their steadfast determination to stand-up to the opposition and to ensure that sensitive and comprehensive reproductive health care will continue to be available; and **Fay Clayton, JD**, for her insightful and continuing efforts to defend abortion rights in legal forums.



The Liz Karlin Award for Early Achievement honors medical students who demonstrate extraordinary creativity and commitment to ensuring the future of safe abortion care.

■ We honored **Matthew Romberg**, a medical student at Texas Tech University in El Paso in 2000, and **Rosanna Gray-Swain**, a medical student at Washington University School of Medicine in St. Louis in 2001. Their personal efforts to ensure that abortion training is available to aspiring health care providers on their own campuses and to all medical students have been extraordinarily innovative and successful.



NAF encourages empirical research on all aspects of abortion care, and provides an array of forums for the direct dissemination of that research to providers of abortion services. **Best Scientific Paper Awards** were granted in 2000 and 2001 to the following investigators for their original research.

In 2000 we honored:

■ **Lucy Picardo & Carolyn Westhoff, MD** for their study, “Cost-Effectiveness and Quality of Life Assessments of Medical versus Surgical Termination of Pregnancy.”

■ **Mitchell Creinin, MD, JL Schwartz, MD, and HC Pymar, MD**, for their paper; “Efficacy of Mifepristone Followed on the Same Day by Misoprostol for Early Abortion.”

■ **Rebecca Allen, Lara DeNonno, Carolyn Westhoff, MD, and Eric Schaff, MD** for their paper, “Timing of Symptoms Onset After Mifepristone and Misoprostol Used at 24, 48, or 72 Hours After Mifepristone.”



The 2001 awards went to:

■ **Elyse Lackie, MD; Maureen Paul, MD, MPH; Caroline Mitchell; Angela Rogers; and Michelle Fox, MD** for their study, “Is Pathology Examination Useful After Early Surgical Abortion?”

■ **Rachel Jones, PhD & Lori Gerstein** for their paper, “Characteristics and Contraceptive Use of US Abortion Patients 2000-2001.”



Winners of Best Scientific Paper Awards with presenters, Paul Blumenthal, MD and Mark Nichols, MD.



2000 AND 2001 DONORS

Annual Support Received between January 1, 2000 and December 31, 2001

\$500,000 or more

The David and Lucile Packard Foundation
Danco Laboratories, Inc

\$250,000 to \$499,999

The William and Flora Hewlett Foundation
Open Society Institute

\$100,000 to \$249,999

Robert Sterling Clark Foundation, Inc.
The John Merck Fund
Multiple Foundations, for the Joint Emergency
Campaign to Save Roe
Estate of Sarah L. Tietze

\$50,000 to \$99,999

The Richard and Rhoda Goldman Fund
The George Gund Foundation
Turner Foundation
The Huber Foundation

\$25,000 to \$49,999

The Alki Fund of the Tides Foundation
Compton Foundation
General Service Foundation
The Harris Foundation
The Wallace Alexander Gerbode Foundation
The Moriah Fund
Tortuga Foundation
The Scherman Foundation, Inc.

\$10,000 - \$24,999

The Brico Fund, Inc.
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Anonymous
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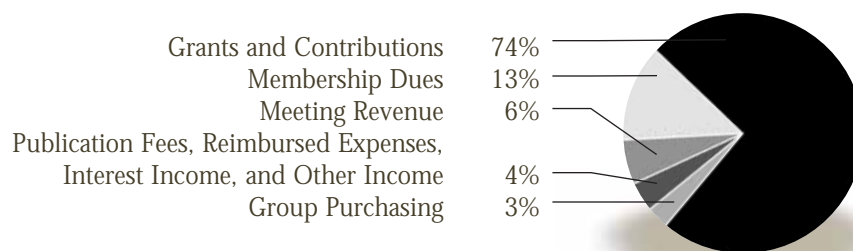
2000

CONDENSED FINANCIAL INFORMATION

REVENUES

Grants and Contributions	\$ 3,132,052
Membership Dues	526,839
Meeting Revenue	250,406
Publication Fees	12,193
Group Purchasing	115,408
Interest Income	144,521
Other Income	16,610

TOTAL REVENUES **\$4,198,029**



EXPENSES

Program Services

Membership Services	\$ 400,990
Training and Professional Education	275,818
Public Affairs, Government Relations and Legal	467,520
Clinic Security/Law Enforcement Education	225,632
Access Initiative	497,124
Medical Abortion Education Program	608,665

Support Services

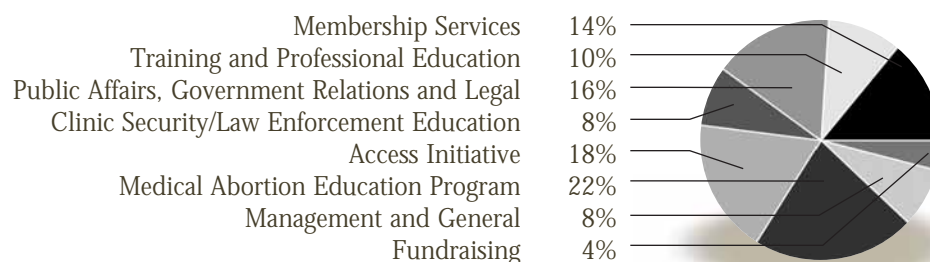
Management and General	227,224
Fundraising	114,908

TOTAL EXPENSES **2,817,881**

CHANGE IN NET ASSETS 1,380,148

Net Assets, Beginning of Year 1,974,829

NET ASSETS, END OF YEAR **\$3,354,977**



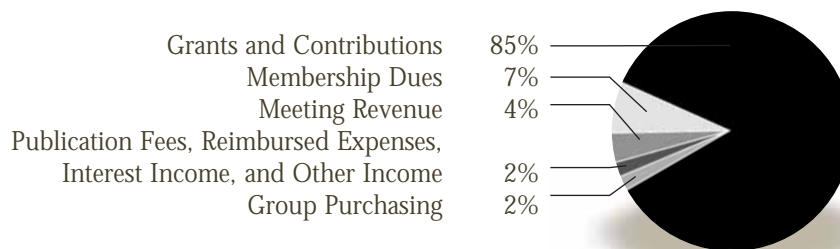
2001

CONDENSED FINANCIAL INFORMATION

REVENUES

Grants and Contributions	\$6,319,286
Membership Dues	517,313
Meeting Revenue	298,939
Publication Fees	13,037
Group Purchasing	149,609
Interest Income	123,578
Other Income	7,353

TOTAL REVENUES **\$7,429,115**



EXPENSES

Program Services

Membership Services	\$ 387,838
Training and Professional Education	460,614
Public Affairs, Government Relations and Legal	377,328
Clinic Security/Law Enforcement Education	267,697
Access Initiative	430,613
Medical Abortion Education Program	1,359,451
Medical Abortion PSA Campaign	1,952,869

Support Services

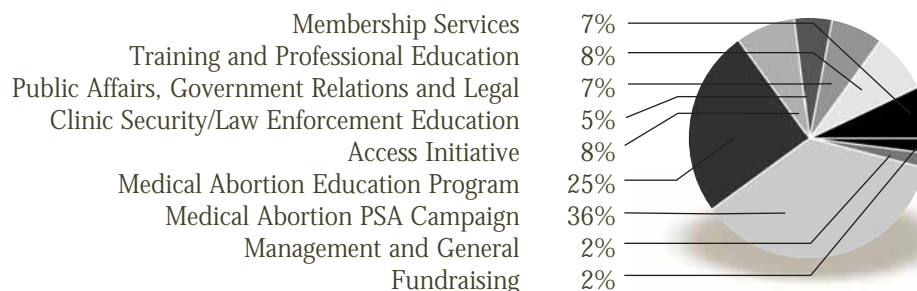
Management and General	135,375
Fundraising	112,386

TOTAL EXPENSES **5,484,171**

CHANGE IN NET ASSETS 1,944,944

Net Assets, Beginning of Year 3,354,977

NET ASSETS, END OF YEAR **\$5,299,921**



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IN MEMORIUM

MICHAEL S. BURNHILL, MD

March 7, 1928 – August 4, 2000



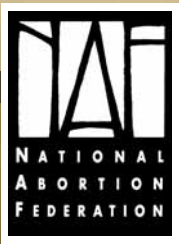
A tireless champion of women's health care, winner of the 1991 Christopher Tietze Award, and long-time member of the National Abortion Federation, whose contributions to medicine and to the principle of reproductive freedom, have enriched us all.

JORGE VILLARREAL, MD

August 11, 1927 – December 8, 2001



A man whose vast courage and perseverance were exceeded only by his kindness and dedication to the delivery of safe reproductive health care to the women of Columbia and all of South America. He was a great teacher, role model, colleague, and honorary lifetime member of the National Abortion Federation.



NATIONAL ABORTION FEDERATION

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