

Association, left Virginia on a Mission of Mercy. They joined with 400 medical professionals and 150 support volunteers from thirty-eight different states and transformed the New Orleans Zoo into one large health care clinic. They will spend this week staffing this clinic, providing health care free of charge to anyone who needs it. The dentists from Virginia are not just providing checkups, but are performing extractions, fillings, partial realignments, and all other procedures that one would normally receive in a dentist's office. The 500 dental patients that will be treated daily are just a portion of the 1600 patients that will be triaged through the clinic coordinated by Remote Area Medical of Knoxville, Tennessee.

The doctors and support volunteers participating in the Mission of Mercy are paying for their own transportation and lodging. On top of those costs, many of them are forced to close their own practices in their home states in order to participate in the mission.

This simple gift to the people of New Orleans is a much needed one. The image of homes flooded by Katrina's waters is prevalent in our minds. It is easy to forget that businesses, such as doctor's offices, were also destroyed. For the parts of New Orleans that weren't flooded, many still lack power and portable water. For many of the brave citizens and aid workers that still inhabit the city, health care is a creature comfort that is either unavailable or too expensive. It is a necessity that sadly takes a backseat to more immediate concerns.

The federal government has yet to fully live up to its responsibility to the citizens whose lives were ravaged by Hurricane Katrina, and until the federal government fulfills this responsibility, the job is left to private citizens to put a great city back together again. I salute the medical professionals and volunteers from around the country and especially those from the Virginia Dental Association who are giving of their time, money, and expertise to help bring normalcy back to the lives of their fellow citizens. The entire Virginia Congressional delegation salutes the Virginia Dental Association as ambassadors of goodwill and Virginia values.

DISABLED VETERANS TAX FAIRNESS ACT

HON. SAM FARR

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Wednesday, February 8, 2006

Mr. FARR. Mr. Speaker, today Representative BILIRAKIS and I are introducing the Disabled Veterans Tax Fairness Act. This bipartisan bill serves disabled veterans who have been caught in the cross hairs of the bureaucracy at the Department of Veterans Affairs and an Internal Revenue Service statute of limitations. The Disabled Veterans Tax Fairness Act would add an exception to the IRS statute of limitations that would allow disabled military retirees whose disability claims have been pending for more than 3 years to receive back taxes for all the years that their claim was pending.

This issue was brought to my attention by a constituent who had a disability claim pending at the VA for 8 years. After he finally won his

disability claim and was awarded retroactive disability compensation, he was denied 5 years of back taxes due to the IRS 3-year statute of limitations. This veteran and perhaps thousands of others are being penalized through no fault of their own.

To determine the scope of the problem, I requested a report in the FY06 TT/HUD appropriations bill directing the IRS to tell the committee how many disabled military retirees have been and will be penalized by this IRS statute of limitations. I look forward to the results in mid-March.

Those who have dedicated their lives to the security of this country should not be penalized by the IRS for bureaucratic inefficiency by the VA disability claims process. This bill is supported by the Military Officers Association of America and The Military Coalition. Please join Representative BILIRAKIS and me as a co-sponsor of H.R. 4727.

PLANNED PARENTHOOD: TIME TO TAKE A SECOND LOOK AT CHILD ABUSE INC.

HON. CHRISTOPHER H. SMITH

OF NEW JERSEY

IN THE HOUSE OF REPRESENTATIVES

Wednesday, February 8, 2006

Mr. SMITH of New Jersey. Mr. Speaker, I rise tonight to set the record straight about significant misinformation that continues to be disseminated concerning an amendment I offered last summer. Planned Parenthood has refused to admit the truth about the true genesis of this amendment. Because Planned Parenthood boasts that "trust is the cornerstone of why people choose [them]," I cannot allow its lies to continue unanswered. And I believe it's time Americans take a look at Planned Parenthood on other issues as well, including abortion.

Several years ago I became aware of a devastating condition called fistula. Fistula is a terribly painful disorder that marginalizes women in many parts of the developing world, yet is relatively inexpensive to treat. I authored legislation to authorize USAID to provide much-needed assistance to women desperate for treatment. Unfortunately, with the help of organizations like Planned Parenthood, some of my colleagues tried to weaken the authorization by adding language that would have prevented crucial faith-based health care providers from helping women through this program.

Women suffering with fistula need treatment, and provisions mandating contraceptives would have prevented some health care providers most suited to provide treatment from doing so. These women need speedy treatment, not politicized language.

As the prime author of H.R. 2601—The Foreign Assistance Authorization Act of FY 06 and 07—I personally wrote the section in the bill, (Sec. 1001) that authorizes the President to establish at least 12 treatment centers to provide surgery and healing therapies for women suffering from a devastating condition known as obstetric fistula. The bill also provides for the dissemination of educational information so that women will know where to go for affordable treatment and how to protect against the occurrence of this preventable, curable condition.

Obstetric fistula is an excruciatingly painful hole or rupture in tissues surrounding a woman's birth canal, bladder, or rectum that is caused by rape, physical abuse or untreated, obstructed labor. Tragically, the constant leaking of urine and feces leads to sickness, desertion by husbands and family, extreme social isolation, and poverty.

Amazingly, for \$150—\$300, a woman victimized by fistula can obtain a surgical repair which gives her back her life. No woman should be denied this minimal, life-saving surgical repair. For several years now, I have asked USAID and the Congress to establish a program to assist women who suffer from obstetric fistula. According to USAID, an estimated 2 million women suffer needlessly from fistula, with 50–100 thousand new cases added every year, mostly in Africa.

USAID has begun to provide support for fistula centers, and that's great. They hoped to put \$3 million into the program by the end of 2005 and they have already identified a dozen medical facilities ready to participate and help these women. My bill, which originally authorized \$5 million for 2006 and \$5 million in 2007, ensures that the program is properly implemented and able to aid as many women, and young girls, as possible.

During committee mark-up on H.R. 2601, Rep. JOE CROWLEY (D-NY) amended my language in H.R. 2601, to mandate that the new centers "expand access to contraception." At first blush, the language looked OK, but it became very clear that it would have had the dire consequence of excluding certain faith-based health providers who, while deeply committed to mitigating the pain of fistula, would be barred from receiving funds. For example, the Crowley language would have excluded NGOs and church-based organizations opposed to chemicals that act as abortifacients—those that prevent implantation of a newly created human life—from getting any U.S. funds. Had my amendment not succeeded, several hospitals selected by USAID as "fistula centers" would have lost funding.

The amendment I offered that passed on the floor in July corrected this problem so that the faith-based sites including those already identified for the program by USAID—and perhaps others in future—could participate and provide assistance to women in need. My amendment to my own bill also increased the funding in 2007 to \$7.5 million, since it is obvious that once the centers are up and running the demand for the cure will be even greater. To participate in the program, providers must offer critical treatment care—including increased access to skilled birth attendants—and may offer information about a number of preventative practices such as abstinence education, encouraging postponement of marriage and childbearing until after teenage years, and family planning services for women whose age or health status place them at high risk of prolonged or obstructed childbirth.

Nothing in my original fistula language or my amendment adopted on the floor restricts access to family planning services. Rather, my amendment made a variety of preventative practices optional and as such is sensitive to and consistent with the values of the people—and the hospitals that serve them—in developing countries.

Despite all this, Planned Parenthood still insists on praising the people who would have killed the amendment and attacking me. The

headline on its website reads: “Rep. CHRIS SMITH’s Latest Political Attack on Women.” The closing line of its story says, “The gentleman from New Jersey would do well—just once—to try and feel the pain of others.”

I have authored numerous laws—that is to say, I am the prime sponsor of laws—that directly benefit women, including the Victims of Trafficking and Violence Prevention Act of 2000 (P.L. 106–386), the Trafficking Victims Protection Reauthorization Act of 2003 (P.L. 108–193), the Trafficking Victims Protection Reauthorization Act of 2005 (P.L. 109–164), the Results and Accountability in Microenterprise (P.L. 108–484), and the Microenterprise Enhancement Act of 2003 (P.L. 108–31), just to name a few. I helped secure the passage of the Violence Against Women Act Reauthorization in 2000 by incorporating its major provisions into my law, the Victims of Trafficking and Violence Prevention Act of 2000. I have fought for human rights and health care my entire career.

I am currently the chairman of the Subcommittee on Africa, Global Human Rights, and International Operations and the Co-Chairman of the Commission on Security and Cooperation in Europe (also known as the United States Helsinki Commission), which works to promote and foster democracy, human rights, and stability in Eastern and Central Europe. I served as the Chairman of the Veterans Affairs Committee until 2005, where I authored laws that are helping veterans to this day and will for as far as the eye can see in the areas of health care, college education, widows’ benefits, and the creation of a new comprehensive program to help homeless veterans. I also presently serve as the co-chair and co-founder of the Congressional Task Force on Alzheimer’s Disease, the founding co-chair of the Congressional Spina Bifida Caucus, the co-founder of the Coalition for Autism Research and Education, the co-chair and co-founder of the Congressional Refugee Caucus, and the co-chair of the Congressional Pro-Life Caucus. Having served 26 years in Congress, I could continue this list, Mr. Speaker. I set forth my dedication to these causes here not to promote myself, but to show Planned Parenthood’s deceptions. Planned Parenthood’s vicious attacks on me are, at best, misinformed; at worst, libel.

Sadly, this is a pattern of conduct with Planned Parenthood, seeking to discredit anyone who includes the protection of the unborn along with fundamental human rights. When one stops to consider the big business that is abortion, it is no wonder.

ABORTION AS A BUSINESS

Planned Parenthood makes millions of dollars plying its lethal trade at nearly 850 clinics in the U.S. alone. Judith Fetrow, a former Planned Parenthood worker, verifies this fact: “It is extremely difficult to watch doctors lie, clinic workers cover up, and hear terrifying stories of women dragged out of clinics to die in cars on the way to the hospital without beginning to question the party line. I began to wonder if we were really caring for these women, or if we were just working for another corporation whose only interest was the bottom line.”

Tragically, the seemingly benign Planned Parenthood is in the grisly business of dismembering the fragile bodies of unborn children with sharp knives and hideous suction machines that are 25 to 30 times more power-

ful than a vacuum cleaner used at home. Planned Parenthood ought to be known as “Child Abuse, Incorporated,” for the large number of children that it has killed and continues to kill, all the while being subsidized by American taxpayers. This is not a business of healing, nurturing, or caring—this is a business of killing.

For Planned Parenthood, business is good. Violence against children pays handsomely. In 2004, it increased the number of abortions it performed by 10,000—while abortions nationwide have declined—for a total of 255,015, a new pathetic record of kids killed even for Planned Parenthood. For “medical abortions,” Planned Parenthood quotes prices from \$350 to \$650. For first-trimester vacuum and D&E abortions, the only type of surgical abortions for which they provide a price range, Planned Parenthood earns \$350 to \$700 apiece.

To put the number of child deaths in perspective, picture this: 67,500 fans filled Ford Field to watch the Super Bowl last Sunday night. Planned Parenthood performed 255,015 abortions in 2004. The number of unborn babies whose lives were taken from them before they could take their first breath by this one corporation in one year could have filled that stadium nearly four times over. Planned Parenthood is now responsible for committing nearly one out of every five abortions performed in the United States, with its numbers steadily rising while the overall totals in the U.S. have been declining. Over the course of time, Planned Parenthood’s tally in the taking of innocent children’s lives has exceeded the three million mark.

If the number of abortions performed alone doesn’t convince you of Planned Parenthood’s agenda, Mr. Speaker, just compare it with the other services it provided in the name of “family planning.” Planned Parenthood—parenthood, Mr. Speaker—provided a mere 17,610 clients with prenatal care. That’s a ratio of one parent to every 14 women who lost their children to abortion. Planned Parenthood referred a meager 1,414 clients to adoption services. That means it killed 180 babies for everyone it referred to be placed with a couple desperately seeking a child. To me, Mr. Speaker, this record doesn’t seem to be that of an organization dedicated to preserving women’s “choices.”

And if that is not enough, this so-called “pro-choice” organization does everything within its power and massive budget to prevent women from knowing all their options and being certain that their choices are truly informed. Planned Parenthood both lobbies and litigates against virtually every child protection initiative at both the state and federal level, including parental and spousal notification, women’s right to know laws, waiting periods, partial-birth abortion bans, unborn victims of violence laws, statutory rape reporting laws, and abortion funding bans. It inflates statistics to promote its own agenda.

One of the abortion community’s own exposed them, though, when Ron Fitzsimmons, the director of the National Coalition of Abortion Providers publicly admitted that he “lied through (his) teeth” when he told a TV interviewer that partial-birth abortion was “used rarely and only on women whose lives were in danger or whose fetuses were damaged.” Fitzsimmons confessed that the myth about this horrific abortion procedure was deliberately propagated by the abortion lobby—in-

cluding Planned Parenthood and its research arm, the Alan Guttmacher Institute (AGI). In a 1995 letter to Members of Congress, Planned Parenthood, AGI, and other groups stated, “This surgical procedure is used only in rare cases, fewer than 500 per year. It is most often performed in the cases of wanted pregnancies gone tragically wrong, when a family learns late in pregnancy of severe fetal anomalies or a medical condition that threatens the pregnant woman’s life or health.” In truth, Fitzsimmons explained, the vast majority of partial-birth abortions are performed on healthy fetuses, 20 weeks or more along, with healthy mothers. The number of 500 partial-birth abortions a year that Planned Parenthood cited in its letter was also a complete falsehood. Fitzsimmons estimated that the method was used 3,000–5,000 times annually. I would argue that even this number is low—in just one New Jersey abortion mill, the Bergen Record newspaper reported that 1,500 children were killed by partial birth abortion in one year.

When Planned Parenthood can’t accomplish its deadly goals through the democratic process, it turns to the courts. It files approximately 50 lawsuits a year to protect its business interests in abortion. Then, Planned Parenthood fights tooth and nail to prevent judges who recognize the inherent value of human life at every stage, as well as the constitutional protections of that life, from getting on the bench. Luckily for us, the American people and our President and Senate have seen through that propaganda blitz.

INTERNATIONAL EFFORTS

Sadly, it does exactly the same thing overseas, and many foreign governments are eventually deceived by its arguments. The Planned Parenthood Federation of America-International is leaving no stone unturned in its misguided, obsessive campaign to legalize abortion on demand. If it succeeds, millions of babies will die from the violence of abortion. We cannot add to the body count.

In Planned Parenthood’s 2003–2004 annual report, the organization clearly admits its goal. It states that programs supported by Planned Parenthood Federation of America-International “guarantee the sexual and reproductive health and rights of individuals by providing... safe abortion and post-abortion care services. . .”

The use of family planning to cloak its real agenda—the use of family planning as a cover for permissive abortion laws—is now commonplace, and must be stopped. In over 100 countries around the world, the lives of unborn children are still protected by law. But in country after country, we find Planned Parenthood zealots partnering with well-financed NGOs from Europe to promote violence against unborn babies.

And as Planned Parenthood—the most prominent advocate, sometimes the only advocate—of legalizing abortion on demand—has said, “When abortion laws are liberalized, the number of abortions skyrocket.” That is Planned Parenthood’s word, skyrocket. So if we want more abortions—more dead babies and more wounded women—liberalize the laws.

TAXPAYER SUBSIDY

Over a third of Planned Parenthood’s income comes from the pockets of tax-paying Americans, through local, state, and federal governments. Sure, we have the Hyde Amendment in place, thankfully, which prevents taxpayer dollars from directly funding

abortions, but money is fungible. The millions of dollars we give to Planned Parenthood to provide so-called “family planning” services immediately frees up millions more to be used for the performance and promotion of abortion. Americans’ hard-earned money goes to keep the lights on and pay the heat bill for this industry that is literally making a killing taking the lives of the children they’ll never get the chance to meet. People who see that abortion is murder are still forced to subsidize the lawsuits and lobbying that keeps abortion legal.

Planned Parenthood’s 2003–04 annual report brags about how it helped increase Title X funding, for a total of \$273 million in taxpayer dollars. It also discloses that it received \$265.2 million in government grants and contracts from Title X and other sources during that period.

The abortion promoters never tire of reminding us that they promote abortion with what they call “their own money,” but this argument deliberately misses the point.

First, it ignores the fact that all money is fungible. When we pay an organization like Planned Parenthood millions of dollars, we cannot help but enrich and empower all of that organization’s activities, all that it does, even if the organization keeps a set of books that says it uses its money for one thing and our money for something else.

We must begin to stand with the victims, both mother and child, and against the victimizers. When we subsidize and lavish Federal funds on abortion organizations, we empower the child abusers; and Planned Parenthood, make no mistake about it, both here and overseas, is “Child Abuse, Incorporated.”

ABORTION CLINICS = TORTURE MILLS

Abortion mills do not nurture, they do not heal, they do not cure disease.

Abortion is violence against children. Some abortion methods dismember and rip apart the fragile bodies of children. Other methods chemically poison children. Abortionists turn children’s bodies into burned corpses, a direct result of the caustic effect of poisoning and other methods of chemical abortions.

I would say to my colleagues, there is absolutely nothing benign or curing or nurturing about abortion. It is violence. It is gruesome. And yet the apologists sanitize the awful deed with soothing, misleading rhetoric. Abortion methods are particularly ugly because, under the guise of choice, they turn baby girls and baby boys into dead baby girls and dead baby boys.

I have drafted a bill that would inform women about the pain their unborn babies experience during abortions, the Unborn Child Pain Awareness Act, H.R. 356. This bipartisan bill requires that those performing abortions at or beyond the 20-week point provide the mother with certain information regarding the capacity of her unborn child to experience pain during the abortion, and offer the mother the option of having pain-reducing drugs administered directly to the unborn child to reduce his or her pain. Not surprisingly, the abortion lobby—including Planned Parenthood—has opposed informing women of this truth, though they do not deny that unborn children may feel pain after 20 weeks gestation.

CONSCIENCE

Forty-five States and the Federal Government protect the right of health care providers to decline involvement in abortion. Planned

Parenthood has launched an active campaign to abolish these legal protections, arguing on its website:

“While everyone has the right to their [sic] opinions about reproductive health care, including . . . abortion . . . Health care providers who object to providing certain services still have an obligation to respect the rights of their patients and to enable them to access the health care they need.”

Planned Parenthood wants to compel hospitals and health care providers of conscience to do abortions—it’s that simple. Not all of the hospitals and health care providers who oppose this plan are religious. There are people who are not religious who have deep, moral convictions, and they believe that abortion takes the life of a baby. We ought to be nurturing. We should not compel our places of healing to become killing fields.

PRO-CHOICE??

Planned Parenthood reasons that every child should be a wanted child. While the implication of this goal is valiant and an ideal I share, how we go about achieving it is much, much different. I agree, every child deserves to be loved with every ounce of her parents’ being—Planned Parenthood, however, would rather kill her than allow her to be born into a home that might not have planned for her or allow another loving family to adopt her. This philosophy turns children into a commodity that is owned—and if they aren’t wanted, they are expendable.

Planned Parenthood also claims to promote informed choice for women, but the reality of its words and actions belies this assertion. When describing abortion procedures on its website, it consistently talks about the emptying of the uterus, and the elimination of the “products of conception.” Even its clinic layouts aim to avoid the acknowledgement of the life of the unborn. One of their employees explained that “Planned Parenthood is set up so clinic workers never have to see the babies. It’s set up that way because having to look at the babies bothers the workers.” Although Margaret Sanger, Planned Parenthood’s founder, supported abortion, she did recognize that it was murder, admitting, “Abortion was the wrong way—no matter how early it was performed it was taking a life.” It is incredibly sad that the Planned Parenthood of today has entirely dismissed the humanity of the unborn, and works to delude women into doing the same.

Planned Parenthood’s website states that it believes: “Information about becoming pregnant and about postponing, preventing, continuing, or terminating pregnancy should be easily available; the choice of whether or not to parent should be free and informed,” and that: “People need accurate and complete information to make childbearing decisions that are appropriate for them. They want and need to know about abstinence, birth control, abortion, adoption, prenatal care, and parenting in an age-appropriate context.” They say that they believe “in trusting individuals and providing them with the information they need to make well-informed decisions about sexuality, family planning, and childbearing.”

If all that is true, why do the organization’s actions, services, and expenditures not reflect it? Why does it lobby against and sue to overturn every informed consent provision enacted? Why does it provide so many abortions, especially when compared to so few adoption referrals and so little prenatal care?

Mr. Speaker, why would Planned Parenthood and a virtual who’s who of abortion activists in America so vehemently oppose the Unborn Victims of Violence Act and promote a gutting substitute in its stead? Why would it take a position so extreme that 80 percent of Americans oppose it? The mothers of these babies have made their “choice” to have their babies, and someone else takes that decision from them. Should a mugger have unfettered access to maim or kill that baby without triggering a separate penalty for the crime?

Why would it oppose parental involvement in their daughters’ pregnancy decisions, in one of the most important decisions those young girls will ever make?

Because, Mr. Chairman, Planned Parenthood is not supportive of “choice”—it is supportive of abortion, because, after all, that’s how it stays in business.

PP’S TARGETS

Planned Parenthood has been very clever and self-serving in its business practices. Not only has it fought to keep abortion legal and to give it protection that is to be found nowhere in our Constitution, not only has it kept its income stream pouring in from local, state, and federal governments and from clients, but it has successfully brainwashed its target audiences so that its “services” remain in high demand.

Again, Margaret Sanger, the founder of Planned Parenthood, laid the groundwork for this business plan back in the early 1900s. In her book, *Pivot of Civilization*, Sanger argued, “We are paying for and even submitting to the dictates of an ever increasing, unceasingly spawning class of human beings who never should have been born at all.” In Chapter 5 of that book, which is entitled the “Cruelty of Charity,” she pulls no punches in condemning those of us who seek to help poor, disadvantaged pregnant women get maternal health care:

“. . . Organized charity itself is the symptom of a malignant social disease.

Those vast, complex, interrelated organizations aiming to control and to diminish the spread of misery and destitution and all the menacing evils that spring out of this sinisterly fertile soil, are the surest sign that our civilization has bred, is breeding and is perpetuating constantly increasing numbers of defectives, delinquents and dependents. My criticism, therefore, is not directed at the “failure” of philanthropy, but rather at its success. . . .

But there is a special type of philanthropy or benevolence, now widely advertised and advocated, both as a federal program and as worthy of private endowment, which strikes me as being more insidiously injurious than any other. This concerns itself directly with the function of maternity, and aims to supply gratis medical and nursing facilities to slum mothers. Such women are to be visited by nurses and to receive instruction in the “hygiene of pregnancy”; to be guided in making arrangements for confinements; to be invited to come to the doctor’s clinics for examination and supervision. They are, we are informed, to “receive adequate care during pregnancy, at confinement, and for one month afterward. Thus are mothers and babies to be saved, “Childbearing is to be made safe.” The work of the maternity centers in the various American cities in which they have already been established and in which they are supported by private contributions and endowment, it is hardly

necessary to point out, is carried on among the poor and more docile sections of the city, among mothers least able, through poverty and ignorance, to afford the care and attention necessary for successful maternity. . . . The effect of maternity endowments and maternity centers supported by private philanthropy would have, perhaps already have had, exactly the most dysgenic tendency. The new government program would facilitate the function of maternity among the very classes in which the absolute necessity is to discourage it.

Such "benevolence" is not merely superficial and nearsighted. It conceals a stupid cruelty . . . Aside from the question of the unfitness of many women to become mothers, aside from the very definite deterioration in the human stock that such programs would inevitable hasten, we may question its value even to the normal though unfortunate mother. For it is never the intention of such philanthropy to give the poor over-burdened and often under-nourished mother of the slum the opportunity to make the choice herself, to decide whether she wishes time after time to bring children into the world.

. . . The most serious charge that can be brought against modern "benevolence" is that it encourages the perpetuation of defectives, delinquents and dependents."

In 1922, Margaret Sanger stated, "All our problems are the result of overbreeding among the working classes." The Planned Parenthood of today has stayed true to Sanger's school of thought, identifying its "core clients" as "young women, low-income women, and women of color." Planned Parenthood's research arm, the Alan Guttmacher Institute, has disclosed that this objective has been achieved: forty-five percent of women who have abortions are college-age, 18–24 years old. Women aged 20–24 have a higher abortion rate than any other group, followed closely by women aged 18–19. Black women are three times as likely as others to have abortions, and the numbers of poor women who have abortions are triple those of others. Since 1973, the year the unelected, lifetime-appointed justices on the Supreme Court made abortion legal on demand, at least 13.8 million minority babies have been aborted. Black and Hispanic women represent only a quarter of American women of child-bearing age, yet account for more than half of all abortions in the US.

Alveda King, the niece of the late Dr. Martin Luther King, Jr., was herself deceived by the lies of the abortion lobby in the wake of Roe v. Wade. Alveda experienced firsthand the tragic consequences abortion inflicts on women who undergo them—she had two abortions and now deeply regrets them—and to their entire families, and to society in general. Citing her uncle, who once said, "The Negro cannot win as long as he is willing to sacrifice the lives of his children for comfort and safety," Alveda asks, "How can the 'Dream' survive if we murder the children?" Today, Alveda is part of a courageous group of women, all of whom have had abortions and have come to regret that fact, called Silent No More. These amazing women help women who have had abortion find peace and reconciliation.

EFFECTS OF ABORTION ON WOMEN

Planned Parenthood also perpetuates the myth that abortion is safer than childbirth. Of

course its never safer for the baby. And the CDC abortion surveillance, however, doesn't even track morbidity, so data on injury and illness from abortion is obtained from the abortion mills—talk about a conflict of interest. Mortality—death to women from abortion—is likely to be underreported. That's true, in part, because women who have had abortions, suffering serious complications, often seek assistance at hospital emergency rooms rather than the abortion mill, and the death certificates, at times, list sepsis or infection, rather than abortion, as the cause of death. Moreover, national reporting of death to women from abortion is extremely passive, thus the likelihood of underreporting.

I would encourage anyone seeking the truth on this question to ask the family and friends of Holly Patterson, who died two weeks after her eighteenth birthday from septic shock after taking RU-486, the abortion pill. Her parents had no idea what she had done until arriving at the hospital the day she died. The abortion pill was provided to her at a Planned Parenthood clinic. A state of California investigation into her death found that that clinic failed to report her death to the state Department of Health, and that it did not give her full information and education on how to take the drug.

This is not surprising, considering that Planned Parenthood was involved in the sham trials that allowed RU-486 to be approved for sale by the Clinton FDA, something that needs to be seriously reconsidered and the drug pulled off the market. Between October 1994 and September 1995, the Des Moines, Iowa, Planned Parenthood clinic participated in these trials. Based on Planned Parenthood's accounting, news reports said no problems had been experienced in the trials. One Iowa doctor watching the news was in disbelief about what he was reading. This doctor, Mark Louviere, had attended to a woman who had participated in the trials and had suffered serious side effects two weeks later, as a result of taking the abortion pill. When Dr. Louviere arrived in the emergency room, the woman had lost between half and two-thirds of her blood volume, and she was in shock. Dr. Louviere immediately took her into surgery to save her life. In his own words, "If near death due to the loss of half of one's blood volume, surgery, and a transfusion of four units of blood do not qualify as a complication, I don't know what does." Planned Parenthood responded that they only reported what happened during the immediate time period of the trial—so the fact that this woman nearly died from taking a drug that they were responsible for reporting the effects of was of no concern to them.

In challenging Planned Parenthood's assertion that abortion is safer than childbirth, I'd also look into the story of Michelle Madden, an 18-year-old college freshman who decided to have an abortion after a doctor told her that the drugs she was taking for epilepsy would cause her baby to be deformed. Michelle collapsed three days after the abortion, and at the hospital, doctors found that pieces of the baby were still inside her. Michelle died of a blood infection resulting from the abortion three days after admission to the hospital.

I would suggest reading about what happened to Mary Pena, 43 years old, the mother of five children, who died after she underwent a second-trimester abortion and bled to death on the operating table.

You might also be interested in the story of Debra Ann Lozinski, who was 16 years old when she went in for an abortion in my home state of New Jersey. Due to a lack of oxygen caused by the general anesthesia she was given for her abortion, Debra fell into a coma, where she remained for several months before developing pneumonia and then going into septic shock. Debra died 12 days after her 17th birthday.

I'd also suggest learning about 22-year-old Tamika Dowdy, who sought an abortion when she was four months pregnant so that she could finish her college education. Paramedics were called to the clinic where Tamika's baby was being aborted, because Tamika was having problems breathing. They were unable to save her.

There are many, many more heart-breaking accounts just like those of these women—and those are only the ones we know about. Multiples of these exist, but the whole story hasn't been disclosed.

Justice Blackmun, the author of *Roe v. Wade*, helped create the safe abortion myth, based on studies and opinions of population control advocates, who were avidly promoting liberalized abortion laws. In reality, not only can abortions immediately kill women, through hemorrhaging, septic shock, uterine perforation, cervical lacerations, etc., but there are also long-term consequences of abortion that can lead to death, including suicide and breast, cervical, and ovarian cancer.

Beyond these deaths, the impact of abortion on women, both physical and psychological, is devastating. Women suffer from many adverse post-abortion reactions, ranging from bleeding, cramping, and infection to depression and substance abuse to breast cancer and infertility. The risk of these detrimental effects of abortion is greatly multiplied in teens, one of the groups Planned Parenthood specifically targets. The brave women in the Silent No More Awareness Campaign have shown us that abortion really does hurt both babies and women, and sometimes even kills both. Abortionist Warren Hern admits, "In medical practice, there are few surgical procedures given so little attention and so underrated in its potential hazards as abortion. It is a commonly held view that complications are inevitable." This is not a simple surgical procedure, the same as any other, and the baby being killed is not a clump of cells.

Planned Parenthood downplays the physical or emotional after-effects of abortion. Their website claims, "Most women feel relief after an abortion. Serious emotional problems after abortion are much less likely than they are after giving birth." While this may be true immediately after the abortion, a new study from New Zealand has shown that the long-term psychological consequences are much greater. Women who have had abortions are, in many cases, the walking wounded.

The people pushing the safe abortion myth are the same as those who inflate the statistics about back-alley abortions. They are the same ones trying to instill a sense of pride about abortion by marketing "I had an abortion" T-shirts. These people, the people behind the propaganda machine at Planned Parenthood, are the same ones who are making millions from abortion, from killing our babies.

Planned Parenthood cannot be trusted, and it appears that even it is starting to recognize that fact. Until July of 2005, its tagline read:

"Planned Parenthood Federation of America is the nation's largest and most trusted voluntary reproductive health organization." It has since dropped the reference to trust and replaced that line with this slogan: "Planned Parenthood Federation of America is the nation's leading sexual and reproductive health care advocate and provider." Mr. Speaker, the truth about Planned Parenthood's pattern of deceit and destruction of human life must at long last be brought to light. The cover-up is over.

TRIBUTE TO MARGARET HELLER

HON. JOE WILSON

OF SOUTH CAROLINA

IN THE HOUSE OF REPRESENTATIVES

Wednesday, February 8, 2006

Mr. WILSON of South Carolina. Mr. Speaker, the following resolution was passed in honor of Margaret Heller Percell by the South Carolina Human Affairs Commission.

RESOLUTION HONORING MARGARET HELLER
PERCELL

Whereas Margaret Heller Percell will retire on February 1, 2006, after thirty-eight years of service to the state of South Carolina and

Whereas Margaret began her service to the State of South Carolina in May, 1967, at South Carolina State University in the Career Planning and Placement Office and

Whereas Margaret became a member of the Governor's staff in August, 1968, as the first black since reconstruction serving under Governors Robert E. McNair and John C. West, respectfully, and

Whereas Margaret joined the staff of the South Carolina Human Affairs Commission

in September, 1975, as staff assistant to the Commissioner and was appointed to the position of Procurement Officer in 1978 where she has served for the past twenty-seven years and

Whereas Margaret has served as a member of the South Carolina Governmental Fleet Managers Association (SCGFMA) and the South Carolina Association of Governmental Purchasing Officers (SCAGPO), Bethune-Westside Chapter of National Council of Negro Women, the Daisy Dunn Johnson Foundation, Hope School Preservation/Restoration Committee, the Ryan Street Home Owners Association and a member of Brookland Baptist Church where she served as president of the Deaconesses for fifteen years.

It is hereby resolved that the members of the South Carolina Human Affairs Commission commend Margaret for her exemplary service to the Commission and the State of South Carolina.

PERSONAL EXPLANATION

HON. MICHAEL BILIRAKIS

OF FLORIDA

IN THE HOUSE OF REPRESENTATIVES

Wednesday, February 8, 2006

Mr. BILIRAKIS. Mr. Speaker, I missed roll-call votes numbered 5, 6 and 7. Had I been present, I would have voted "yea" on rollcall votes 5 and 6 and "nay" on roll callvote 7.

A TRIBUTE TO NASHVILLE
SCRAPPERS

HON. MIKE ROSS

OF ARKANSAS

IN THE HOUSE OF REPRESENTATIVES

Wednesday, February 8, 2006

Mr. ROSS. Mr. Speaker, it is with honor and great pride that I recognize and congratulate the Nashville Scappers of Southwest Arkansas, whose outstanding teamwork and dedication on the football field earned the team the Class AAA State Title at War Memorial Stadium in Little Rock on December 13, 2005. The Nashville Scappers embody the spirit of teamwork, determination, and dedication that defines a champion.

As a parent, I understand the important life-time lessons that teamwork teaches our students in pursuit of a lifetime of success. I have long been an advocate of sports and extracurricular activities as they complement academic excellence and inspire leadership, character, and perseverance as our students face the challenges of the 21st century.

It is a tremendous honor to once again congratulate the Nashville High School football program on winning the Class AAA State Football Title. I applaud the Nashville Scappers for their season of dedication. This victory is the result of hard work among the players, student body, coaching staff, Nashville High School faculty, and the community. I salute the coaches, parents, and players who stayed the course and rose to the occasion in becoming state champions.