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Planned Parenthood: Setting the Record Straight

In 2015, a series of undercover videos showed officials of the Planned Parenthood Federation of America (PPFA) discussing how they perform abortions and traffic in the tissues and organs of abortion victims. The officials' matter-of-fact comments on destroying unborn human life, and on altering abortion methods to obtain more "intact" organs, led to a public debate on Planned Parenthood's role as a "women's health" organization receiving large government subsidies. That debate intensified in 2019 with release of the film *Unplanned*, based on a memoir of the same name by former Planned Parenthood clinic director Abby Johnson. Here are key facts.

1. PPFA is by far the largest abortion provider in the U.S.

In the year ending September 30, 2018, the last year reported, Planned Parenthood affiliates performed 345,672 abortions, both surgical and "medical" (using the abortion drug RU-486).¹ PPFA's share of the abortion "market" has expanded steadily over the years: It performed about one in five of all abortions in the United States in 2005, but now performs 40% of them.²

2. Every Planned Parenthood affiliate must perform abortions.

In 2010, PPFA announced that by 2013 every affiliate must have one or more clinics that perform abortions on-site. Some affiliates left PPFA rather than comply with the new abortion mandate.³ In 2017, PPFA's CEO Cecile Richards said it is "obscene and insulting" to suggest that the organization discontinue its abortion business in order to continue receiving taxpayer funds for its other activities.⁴ In 2019, new CEO Leana Wen reaffirmed that "providing, protecting and expanding access to abortion" is part of Planned Parenthood's "core mission."⁵ But largely because Dr. Wen also sought to present abortion as one part of "comprehensive" women's health care, she was forced to resign later that year.⁶ Her replacement is Alexis McGill Johnson, former chair of Planned Parenthood's political action committee, hailed by the organization as a "lifelong political organizer."⁷ In August 2019, Planned Parenthood abandoned the Title X family planning program rather than comply with new rules against providing elective abortions and abortion referrals in this federal program.⁸

3. Planned Parenthood provides 25 times more abortions than birth-oriented services or referrals.

While PPFA says abortions make up 4% of its services, this is misleading. PPFA says it served 2.4 million patients (women and men) and performed 345,672 abortions in the last reported year. This means that over 14% of everyone entering a Planned Parenthood clinic receives an abortion.⁹ And PPFA provided only 9,798 "prenatal services" (down from 17,610 in 2004) and 4,279 referrals for adoptions at other agencies. So 96% of its services dealing with pregnancy are abortions, outnumbering other options 25 to 1.¹⁰

4. Planned Parenthood promotes risky RU-486 abortions that have killed young women.

PPFA strongly supports the dangerous abortion drug RU-486, promoted its expedited approval by the FDA, and volunteered to conduct early U.S. trials. In early trials, young Californians Holly Patterson and Vivian Tran died from infections after RU-486 abortions at Planned Parenthood clinics.¹¹ In April 2011, the FDA reported 2,207 adverse events up to that time, including 14 deaths, 339 cases of blood loss requiring transfusions, and (in addition to deaths) 612 hospitalizations.¹² Actual figures are likely higher, as the FDA does not mandate reporting by providers. PPFA clinics flouted FDA protocols by, among other things, using RU-486 "off-label" for abortions up to 63 days after a woman's last menstrual period (two weeks later than the FDA found safe). When Ohio passed a law requiring clinics to follow FDA guidelines, Planned Parenthood sued to tie up the law in court; public data later showed 42 botched RU-486 abortions in Ohio, including 35 women who had to return for a surgical abortion.¹³ Despite these

deaths and other adverse events, in 2016 the Obama administration changed the FDA protocol to match what PPFA was already doing without authorization.¹⁴ By the end of 2018 the FDA had counted 4,195 adverse events, including 24 deaths, 97 ectopic pregnancies, 599 cases of blood loss requiring transfusions, and (in addition to deaths) 1,042 hospitalizations after RU-486 abortions.¹⁵

5. Planned Parenthood fights even modest laws to reduce or regulate abortions.

PPFA has opposed, and filed suit against, reasonable and widely supported measures on abortion, even those protecting women's health and informed decision making. These include:

- laws to ensure a woman's informed consent, allow her to view an ultrasound before the abortion, or provide a waiting period for her to consider her decision
- parental notification or consent before a minor daughter's abortion
- bans on the gruesome partial-birth abortion procedure or on other late-term abortions
- health and safety regulations for abortion facilities
- requiring abortion practitioners to have admitting privileges at a hospital in case of complications
- safety standards for the abortion drug RU-486.¹⁶

6. Planned Parenthood doesn't believe in a “right to choose” against abortion.

“Freedom of choice” does not apply to those who disagree with PPFA. The organization opposes laws recognizing conscience rights for doctors, nurses and health facilities with moral or religious objections to abortion, dismissively referring to conscience clauses as “refusal laws” that “enable discrimination.”¹⁷ Planned Parenthood strongly supports U.S. funding of the U.N. Population Fund (UNFPA); in 2013 it announced “a new level of partnership” with that agency internationally, despite its involvement in the Chinese population program using coerced abortion and involuntary sterilization.¹⁸ Such coercion is recognized internationally as a crime against women.¹⁹ PPFA also opposes conscience rights for pharmacists who object to providing “emergency contraception” drugs due to their abortifacient potential, and it urges the government to force even religious orders like the Little Sisters of the Poor to include these in their health plans.²⁰ In its 2017-2018 annual report, PPFA celebrated its role in passing a Washington state law forcing women in the state who want maternity coverage to purchase elective abortion coverage.²¹

7. Planned Parenthood is not “pro-choice” for women.

In light of the failure of contraceptive programs to reduce unintended pregnancies or abortions, Planned Parenthood has increasingly promoted “LARCs” (long-acting reversible contraceptives)—implantables, injectables, and intrauterine devices—that can sterilize women for months or years at a time. These now make up over 35% of its contraceptive services.²² Most women had rejected these methods in the past due to their inflexibility and side effects.²³ But supporters favor them for “eliminating adherence and user dependence from the effectiveness equation” because their effectiveness is “independent from... user motivation”²⁴— that is, LARCs disregard a woman's own changing reproductive goals, and IUDs and implants cannot be discontinued by women without medical assistance. PPFA has even abandoned “pro-choice” as a slogan, insisting instead that contraception and abortion are basic “health care” that all women need access to -- whether women ask for that or not.²⁵

8. Planned Parenthood's role in serving women's health is compromised at best, and is better taken over by others.

Planned Parenthood's supporters cite its “cervical and breast cancer screenings,” which make up only 6% of its services²⁶—but its heavily promoted contraceptive services, 26% of PPFA's activities, are associated with an increased risk of cervical and breast cancer.²⁷ Planned Parenthood's “screening” for breast cancer is a preliminary screen that a woman can do for herself—it offers no mammograms or biopsies.²⁸ PPFA emphasizes its testing and treatment of sexually transmitted diseases,²⁹ but it heavily promotes contraceptive methods that may increase women's risk of contracting STDs, including AIDS.³⁰

Women’s comprehensive health needs are much better served by community health centers and other federally qualified health centers, which serve over 24 million patients in both urban and rural areas and outnumber Planned Parenthood clinics 15 to 1 (9,754 to “more than 600”).³¹

9. “Nonprofit” Planned Parenthood reaps enormous revenues, including tax revenues.

PPFA is legally a nonprofit organization but takes in enormous revenues: \$1.64 billion in the year ending June 30, 2019, netting \$110.5 million over expenses.³² \$616.8 million, or almost 38% of total revenue, is from taxpayers’ dollars, up from 34% the previous year.³³ This is more than double the \$305.3 million in government funds received in the year ending June 30, 2006.³⁴ This funding *increase* occurred while Planned Parenthood’s U.S. clientele *decreased* from a reported 3 million to 2.4 million people of both genders.³⁵

10. Even as Planned Parenthood’s government funding has increased, the number of medical services it provides has decreased—but not abortions.

From 2004 to 2018, Planned Parenthood reported a dramatic decrease in the following: Pap tests (down by 78%), breast exams (71%), total cancer screenings (74%), and even contraception/sterilization by any method (25%). By contrast, abortions have increased by almost 36% since 2004.³⁶ There has been a clear shift in the kinds of services Planned Parenthood provides, away from the other services it boasts of and toward abortion.

11. Planned Parenthood promotes risky “emergency contraception” to minors.

PPFA distributed 593,586 kits of high-dose “emergency contraceptive” (EC) pills in 2018.³⁷ It has urged approval for “over-the-counter” sale of these drugs, even to minors, although lower-dose birth control pills require a prescription due to health risks.³⁸ Planned Parenthood’s claim that boosting access to ECs would reduce unintended pregnancies and abortions has been rebutted by numerous studies.³⁹

12. Planned Parenthood has promoted abortions worldwide, even where it is illegal.

PPFA exports its ideology to developing nations, promoting abortion as family planning, and declares it is “a founding member of the International Planned Parenthood Federation (IPPF).”⁴⁰ As long ago as 1983, the then-current president of PPFA co-authored and signed a notorious IPPF declaration urging affiliates to violate their own countries’ laws and perform illegal abortions: “Family Planning Associations and other non-governmental organizations should not use the absence of a law or the existence of an unfavourable law as an excuse for inaction; action outside the law, and even in violation of it, is part of the process of stimulating change.”⁴¹

February 13, 2020

¹ Planned Parenthood Federation of America, *Annual Report 2018-2019* (henceforth *2018-2019 Report*), p. 24, at https://www.plannedparenthood.org/uploads/filer_public/2e/da/2eda3f50-82aa-4ddb-acce-c2854c4ea80b/2018-2019_annual_report.pdf. Unless otherwise noted, all online sources were accessed January 29, 2020.

² Planned Parenthood Federation of America, *2005-2006 Annual Report* (henceforth *2005-2006 Report*), p. 4, at <http://liveaction.org/research/wp-content/uploads/2011/06/2005-2006-Planned-Parenthood-Annual-Report.pdf>; R. Jones et al., “Abortion in the United States: Incidence and Access to Services, 2005,” 40(1) *Perspectives on Sexual and Reproductive Health* (March 2008), p. 6, at <https://www.guttmacher.org/sites/default/files/pdfs/pubs/journals/4000608.pdf>; R. Jones and J. Jerman, “Abortion Incidence and Service Availability in the United States, 2017” (Guttmacher Institute, September 2019), p. 1, at <https://www.guttmacher.org/report/abortion-incidence-service-availability-us-2017> (“In 2017, an estimated 862,320 abortions were provided in clinical settings in the United States, representing a 7% decline since 2014 and the continuation of a long-term trend”).

³ M. Johnson, “Abortion mandate costs Planned Parenthood a few affiliates,” *NBC News*, Dec. 6, 2012, at <https://usnews.newsvine.com/news/2012/12/06/15702142-abortion-mandate-costs-planned-parenthood-a-few-affiliates>.

⁴ Steven Ertelt, “Cecile Richards: It’s ‘Obscene and Insulting’ to Suggest We Stop Killing Babies in Abortions,” *LifeNews.com*, March 13, 2017, at www.lifenews.com/2017/03/13/cecile-richards-its-obscene-and-insulting-to-suggest-we-stop-killing-babies-in-abortions/.

⁵ H. Berrien, “Planned Parenthood President Acknowledges The Truth: Abortion Is Indeed Their Core Mission,” *The Daily Wire*, January 8, 2019, at <https://www.dailywire.com/news/41929/planned-parenthood-president-acknowledges-truth-hank-berrien>.

⁶ “Planned Parenthood ex-CEO writes letter to board amid severance dispute,” *Fox News*, September 16, 2019, at <https://www.foxnews.com/us/planned-parenthood-former-ceo-letter-board-severance-dispute>.

⁷ “Alexis McGill Johnson,” Planned Parenthood Federation of America web site, at <https://www.plannedparenthood.org/about-us/our-leadership/alexis-mcgill-johnson>.

⁸ V. Richardson, “Planned Parenthood pulls out of Title X over Trump administration abortion restrictions,” *The Washington Times*, August 19, 2019, at <https://www.washingtontimes.com/news/2019/aug/19/planned-parenthood-pulls-out-title-x-over-trump-ad/>.

⁹ The discrepancy arises from the way PPFA counts each “discrete clinical interaction” during a visit as a separate “service.” Thus for 2018 it reports “more than 9.8 million services during nearly 4 million clinical visits.” *2018-2019 Report*, p. 22 note 11. A critic observes: “By Planned Parenthood’s math, a woman who gets an abortion but also a pregnancy test, an STD test and some contraceptives has received four services, and only 25 percent of them are abortion.” R. Lowry, “Planned Parenthood’s pathetic ‘3 percent’ lie,” *New York Post*, August 3, 2015, at <https://nypost.com/2015/08/03/planned-parenhoods-pathetic-3-percent-lie/>.

¹⁰ *2018-2019 Report*, p. 7 (2.4 million patients), p. 23 (claim of 4%), and p. 24 (number of abortions and other services for pregnant women). Cf. *2005-2006 Report*, p. 4.

¹¹ S. Russell, “Taker of abortion pill died due to infection,” *San Francisco Chronicle*, Nov. 1, 2003, <http://www.sfgate.com/health/article/Taker-of-abortion-pill-died-due-to-infection-2551286.php>; J. Muir, “Suit links death to ‘abortion pill’,” *The Orange County Register*, Oct. 7, 2005, at <http://www.ocregister.com/2005/10/07/suit-links-death-to-abortion-pill/>.

¹² See Food and Drug Administration, “Mifepristone U.S. Postmarketing Adverse Events Summary through 04/30/2011” (accessed May 2019 but no longer available online; see updated figures at note 15 below).

¹³ Supreme Court of Ohio Case Summaries, “State Law Restricts Administration of Abortion Drug to FDA-Approved Gestational Limit, Delivery Protocol,” July 1, 2009, at <http://www.sconet.state.oh.us/PIO/summaries/2009/0701/081234.asp>; Ohio Right to Life press release, “Botched RU 486 Abortions Injure 42 Women in Ohio as Planned Parenthood Defies FDA,” August 22, 2013, at www.lifenews.com/2013/08/22/botched-ru-486-abortions-injure-42-women-in-ohio-as-planned-parenthood-defies-fda.

¹⁴ C. Gacek and A. Grossu, “Issue Brief: The FDA Adopts the Abortion Industry Standards for the Mifeprex® (RU-486) Abortion Regimen,” Family Research Council, April 2016, at <http://downloads.frc.org/EF/EF16D38.pdf>.

¹⁵ See Food and Drug Administration, “Mifepristone U.S. Postmarketing Adverse Events Summary through 12/31/2018,” at <https://www.fda.gov/media/112118/download>.

¹⁶ On opposition to laws against abortion in the 6th to 9th month see *2018-2019 Report*, p. 19. A Westlaw search on February 12, 2020 shows Planned Parenthood as a party in over 400 abortion decisions in the federal courts alone. Examples: *Reproductive Health Services of Planned Parenthood v. Parson*, 389 F.Supp.3d 631 (W.D. Mo. 2019) (20-week ban); *EMW Women’s Surgical Center v. Beshear*, 920 F.3d 421 (6th Cir. 2019) (ultrasound); *Planned Parenthood of Ind. & Ky., Inc. v. Commissioner*, 896 F.3d 809 (7th Cir. 2018) (ultrasound); *Comprehensive Health of Planned Parenthood Great Plains v. Hawley*, 903 F.3d 750 (8th Cir. 2018) (admitting privileges; safety requirements); *Whole Woman’s Health v. Hellerstedt*, 136 S. Ct. 2292 (2016) (admitting privileges, safety regulations); *Planned Parenthood v. Abbott*, 748 F.3d 583 (5th Cir. 2014) (admitting privileges, RU-486); *Stuart & Planned Parenthood v. Camnitz*, 774 F.3d 238 (4th Cir. 2014) (ultrasound); *Planned Parenthood v. DeWine*, 64 F.Supp.3d 1060 (S.D. Ohio 2014) (RU-486); *Planned Parenthood v. Strange*, 33 F.Supp.3d 1330 (M.D. Ala. 2014) (admitting privileges); *Planned Parenthood v. Humble*, 753 F.3d 905 (9th Cir. 2014) (RU-486); *Comprehensive Health of Planned Parenthood v. Templeton*, 954 F.Supp.2d 1205 (D. Kan. 2013) (informed consent); *Planned Parenthood v. Van Hollen*, 738 F.3d 786 (7th Cir. 2013) (admitting privileges); *Planned Parenthood v. Daugaard*, 799 F.Supp.2d 1048 (D. S.D. 2011) (informed consent and waiting period); *Planned Parenthood v. Heineman*, 724 F.Supp.2d 1025 (D. Neb. 2010) (informed consent); *Planned Parenthood v. Rounds*, 686 F.3d 889 (8th Cir. 2012) (informed consent); *Gonzales v. Planned Parenthood*, 550 U.S. 124 (2007)

(partial-birth abortion); *Ayotte v. Planned Parenthood*, 546 U.S. 320 (2006) (parental involvement); *Planned Parenthood v. Casey*, 505 U.S. 833 (1992) (informed consent, waiting period, parental and spousal involvement).

¹⁷ See PPFA press release, “HHS Introduces Broad Rule to Enable Discrimination and Block Access to Care,” January 19, 2018, at <https://www.plannedparenthood.org/about-us/newsroom/press-releases/hhs-introduces-broad-rule-to-enable-discrimination-and-block-access-to-care>. On the continued effort to invalidate provider conscience clauses (“refusal rules”) see *2018-2019 Report*, p. 18.

¹⁸ PPFA press release, “Planned Parenthood Condemns Vote to Eliminate Funding for UNFPA in House Foreign Affairs Committee,” Jan. 30, 2014, at www.plannedparenthood.org/about-us/newsroom/press-releases/planned-parenthood-condemns-vote-eliminate-funding-unfpa-house-foreign-affairs-committee; International Planned Parenthood Federation, “New IPPF/UNFPA Initiative on Family Planning announced,” May 29, 2013, at www.ippf.org/news/New-IPPFUNFPA-Initiative-Family-Planning-announced.

¹⁹ Chris Smith, “China’s One-Child Policy: Massive Crimes against Women, Supported by the Obama Administration,” *The Public Discourse*, Oct. 20, 2014, at <http://www.thepublicdiscourse.com/2014/10/13942/>.

²⁰ PPFA, “Emergency Contraception: History and Access,” August 2013, at www.plannedparenthood.org/files/5713/9611/6188/Emergency_Contraception_History_and_Access.pdf, p. 5; K. Scanlon, “Rep. Diane Black Fires Back at Planned Parenthood for Characterizing the Little Sisters of the Poor as ‘Out-of-Touch Bosses’,” *The Blaze*, March 24, 2016, at <http://www.theblaze.com/news/2016/03/24/rep-diane-black-fires-back-at-planned-parenthood-for-characterizing-the-little-sisters-of-the-poor-as-out-of-touch-bosses/>; USCCB Secretariat of Pro-Life Activities, “Does the HHS Mandate Include Abortifacients?,” April 3, 2014, at <http://www.usccb.org/issues-and-action/human-life-and-dignity/contraception/upload/Does-the-HHS-Mandate-Include-Abortifacients.pdf>.

²¹ Planned Parenthood Federation of America, *2017-2018 Annual Report* (henceforth *2017-2018 Report*), p. 15, at https://www.plannedparenthood.org/uploads/filer_public/4a/0f/4a0f3969-cf71-4ec3-8a90-733c01ee8148/190124-annualreport18-p03.pdf.

²² *2018-2019 Report*, p. 23.

²³ C. Wetzstein, “American Women ‘Spurn’ Long-Lasting Birth Control,” *The Washington Times*, Aug. 22, 2000, p. A2, at www.questia.com/read/1G1-64454690/american-women-spurn-long-lasting-birth-control.

²⁴ American College of Obstetricians and Gynecologists, “Increasing Access to Contraceptive Implants and Intrauterine Devices to Reduce Unintended Pregnancy,” Committee Opinion Number 642 (October 2015), p. 1, 3, at <https://www.acog.org/-/media/Committee-Opinions/Committee-on-Gynecologic-Practice/co642.pdf?dmc=1&ts=20190810T2120035995>.

²⁵ J. Calmes, “Advocates Shun ‘Pro-Choice’ to Expand Message,” *The New York Times*, July 28, 2014, at <https://www.nytimes.com/2014/07/29/us/politics/advocates-shun-pro-choice-to-expand-message.html?partner=rss&emc=rss&r=2>.

²⁶ See, for example, Senator Bob Casey, “Casey Statement on Planned Parenthood,” August 4, 2015, at <https://www.casey.senate.gov/newsroom/releases/casey-statement-on-planned-parenthood>. Cf. *2018-2019 Report*, pp. 23, 24.

²⁷ See National Cancer Institute, “Oral Contraceptives and Cancer Risk” (2018), at <https://www.cancer.gov/about-cancer/causes-prevention/risk/hormones/oral-contraceptives-fact-sheet#q6>.

²⁸ J. McCormack, “After Lying About Providing Mammograms, Planned Parenthood Outraged That Breast Cancer Charity Cuts Off Grants,” *The Weekly Standard*, Feb. 2, 2012, at <https://www.washingtonexaminer.com/weekly-standard/after-lying-about-providing-mammograms-planned-parenthood-outraged-that-breast-cancer-charity-cuts-off-grants>.

²⁹ *2018-2019 Report*, pp. 23, 24.

³⁰ For example, J. Baetan et al., “The Influence of Hormonal Contraceptive Use on HIV-1 Transmission and Disease Progression,” 45(3) *Clinical Infectious Diseases* (August 2007), pp. 360-9, at cid.oxfordjournals.org/content/45/3/360.long. On Depo-Provera see P. Belluck, “Contraceptive Used in Africa May Double Risk of H.I.V.,” *The New York Times*, Oct. 3, 2011, at www.nytimes.com/2011/10/04/health/04hiv.html?_r=0.

³¹ National Association of Community Health Centers, *Community Health Center Chartbook* (January 2019), Figures 2-2 and 2-3, at <http://www.nachc.org/wp-content/uploads/2019/01/Community-Health-Center-Chartbook-FINAL-1.28.19.pdf>; *2018-2019*

Report, p. 6. On the high quality of care at community health centers see C.I.A. Oronce and R.J. Fortuna, “Differences in Rates of High-Value and Low-Value Care Between Community Health Centers and Private Practices,” *Journal of General Internal Medicine*, 19 November 2019 (advance online publication), at <https://link.springer.com/article/10.1007%2Fs11606-019-05544-z>.

³² *2018-2019 Report*, pp. 27-28.

³³ *2018-2019 Report*, pp. 26, 27; *2017-2018 Report*, p. 28.

³⁴ *2005-2006 Report*, p. 14.

³⁵ *Ibid.*, p. 4; *2018-2019 Report*, p. 7.

³⁶ *2005-2006 Report*, p. 4; *2018-2019 Report*, p. 24.

³⁷ *2018-2019 Report*, p. 24.

³⁸ Planned Parenthood Federation of America, Press release, “Planned Parenthood Hails Expansion of Plan B Access, but Cites Concerns About Teen Pregnancy,” January 30, 2014, at <https://www.plannedparenthood.org/about-us/newsroom/press-releases/emergency-contraception-otc>.

³⁹ When experts who support increased access to ECs reviewed 23 major studies on such programs, they admitted that “no study found an effect on pregnancy or abortion rates.” E. Raymond et al., “Population effect of increased access to emergency contraceptive pills: a systematic review,” 109 *Obstetrics & Gynecology* (2007), pp. 181-8, at www.ncbi.nlm.nih.gov/pubmed/17197603. Also see USCCB Secretariat of Pro-Life Activities, “Fact Sheet: Emergency Contraception Fails to Reduce Unintended Pregnancy and Abortion,” June 5, 2014, at www.usccb.org/issues-and-action/human-life-and-dignity/contraception/fact-sheets/upload/contrafactsheet.pdf.

⁴⁰ *2018-2019 Report*, p. 31.

⁴¹ IPPF, *Report of the Working Group on the Promotion of Family Planning as a Basic Human Right*, Nov. 1983, pp. 28-9.