# U.S. FUNDING FOR THE UNITED NATIONS POPULATION FUND (UNFPA)

A letter to Congress regarding the proposed withholding of UNFPA funding from the U.S. Supplementary Budged: Fiscal Year 2002.

By

Scott Church & Audrey J.L. Church

June 6, 2002.

Distributed to members of the U.S. Senate and House and their staff with the assistance of the Sierra Club and Population Connection.

Dear Senator/Representative,

My name is Scott Church, and my wife's name is Audrey Church. I am an engineer and landscape photographer, and Audrey is a psychiatric nurse practitioner and a clinical preceptor at the University of Washington Graduate School of Nursing. We live in Seattle, WA and have been active in working with girls at risk for female genital mutilation (FGM) in Uganda. In this capacity, we represent the US-Uganda Godparent's Association (www.godparents.net). The Godparent's association has been running a high school for such girls in Kampala for some time. We have also been active in public awareness and education about FGM in the Pacific Northwest region. In our efforts we have worked with the United Nations Population Fund's REACH program in Africa and have greatly appreciated their worldwide efforts on FGM education. In our capacity as public reproductive health educators and field workers, we are greatly disturbed by the Bush Administration's decision to cut off funding for the United Nations Population Fund (UNFPA). As Christians, we are disturbed by the worldwide prevalence of abortion, especially its frequent use by some for either birth control or convenience. However, based on an extensive review of the Congressional testimony behind this decision and the support given for it by its advocates, we feel that the allegations against UNFPA have no merit. If we may, we would like to briefly review what we know about UNFPA and the issues they are addressing in the world. Then we will comment on what we've found regarding the allegations against them and outline why we are convinced that they do not justify a termination of U.S. dollars.

### **The Problem**

As you know, world population has risen significantly since the early nineteenth century. Between 1800 and 1900 the world's population grew from 1 billion to 1.6 billion. It reached 2.5 billion by 1950, and in just the last 52 years, has increased to 6.2 billion (U.S. Census Bureau, 2002). The population growth rate peaked during the 60's and has since been declining. However, according to some estimates, this decline will not reverse real growth until the middle of this century by which time world population will have reached 7.9 to 10.9 billion (National Academy of Sciences, 2000; United Nations, 2001). This population is projected to be primarily urban, tropical and of older average age than at present. The overwhelming majority of the increase in the last 100 years has been due to improved global access to public health, nutrition, sanitation, immunization and antibiotics. The decline in growth rate since the 60's has been due mainly to the advent of modern contraceptives. When these became globally available, women began having fewer pregnancies as infant mortality declined. Some countries, such as Italy and Ukraine, are actually shrinking (National Academy of Sciences, 2001).

Even so, this decline in fertility is not happening uniformly around the world. Average fertility rates are at replacement level or higher in over two thirds of the world's nations. The world's poorest nations in particular are expected to increase their populations dramatically in coming decades. The population of Africa alone is expected to increase from 800 million to 1.7 to 2.3 billion by mid century (National Academy of Sciences, 2001; United Nations, 2001). During the 60's, the average birth rate was 5 children per woman in developed countries, and 6 per woman in undeveloped countries. By the end of the 20th century, this had fallen to 3 per woman worldwide as the use of contraceptives increased approximately 600 percent (Khanna et al., 1992; PRB, 2001). But most of this decrease happened in the developed world (Khanna et al, 1992). It has long been known that poverty is the single best predictor of high birth rates. There are a variety of reasons for this, but lack of access to education and reproductive health care, and the lack of say women have in many cultures regarding the timing and frequency of their pregnancies, are widely recognized as the greatest factors. For instance, nearly two thirds of the world's illiterate are women (over 600 million). In sub-Saharan Africa and South Asia only 2 to 7 women per 1000 ever get to attend college (UNFPA, 2001). In many nations, such as Botswana, Chile and Namibia, women are under the legal guardianship of their husbands and have literally no right to manage property or divorce (Dollar & Gatti, 1999). Though accurate data are difficult to come by, some sources estimate that nearly 125 million poor women worldwide do not have access to contraception or reproductive health education, and nearly 350 million have no access to reproductive health care of any kind (Ross & Winfrey, 2001, UNFPA, 1999). Girls that have had at least 6 or 7 years of schooling (in which among other things, they receive basic health and sexuality education and at least some training for economic opportunities), almost always tend to have smaller families. In Egypt for instance, only 5 percent of women who remained in school past the primary level became pregnant as teenagers. The corresponding figure for those who did not is over 50 percent (Riley, 1997; United Nations, 1995). This has taken a terrible toll on women and poor communities worldwide.

The evidence is clear - access to education and reproductive health care for women, and the ability to choose the timing and frequency of their pregnancies, leads to lower birth rates and a higher quality of life. Educated women who have a say in their own reproductive futures almost always choose fewer children. These children then receive a higher quality of care and are typically raised in homes that provide a more stable economic environment than would otherwise be available. This in turn leads to slower population growth, better economies and less ecological impact on poor regions. The global denial of access to such benefits is a clear violation of human rights.

UNFPA was started precisely to bring these human rights violations to light and rectify them. Their Program of Action Charter, as adopted at the International Conference on Population and Development in Cairo in 1994, states, "Everyone has the right to the enjoyment of the highest attainable standard of physical and mental health. States should take all appropriate measures to ensure, on a basis of equality of men and women, universal access to health-care services, including those related to reproductive health care, which includes family planning and sexual health", and that "all couples and individuals have the right to decide freely and responsibly the number and spacing of their children, as well as the right to information and means to do so" (ICPD, 1994). UNFPA's work in bringing these basic rights to developing world women has not only alleviated great suffering and injustice, it has also brought the world closer to a truly sustainable future. This has been made possible through the demonstrated success of many programs, including the following.

## **Contraception and Counseling**

Not only is a woman's ability to plan her pregnancies critical to her quality of life, in many cases it is critical to her health and may even save her life. Without quality pre natal and emergency obstetric care, every pregnancy increases a woman's chance of death from complications. Likewise, a developing world child's chances of death at birth are significantly increased if it has been less than two years since the mother's previous annual pregnancy (PAI, 2001). In addition, by some estimates nearly a quarter of the world's pregnancies (over 52 million) end in abortion, and most abortions in the developing world are performed in unsafe conditions (UNFPA, 2000). Such abortions are seldom the end result of planned pregnancies where contraception was accessible. In fact, some studies have shown that lack of reproductive health care actually increases the prevalence of abortion (Rahman et al., 2001; Scientific American, April 4, 2001). Factors like these have been a strong motivator for women to seek contraceptives, and wherever women have been given access to them birthrates have declined. However, lack of education, health care and relational and civic freedom frequently prevents this from happening. The most commonly cited reasons for lack of contraceptive use are lack of access, lack of knowledge, and the opposition of spouses and family members (Bulatao, 1998). UNFPA funding provides extensive reproductive health care, access to a wide range of contraceptives, facilities for maternal and infant care, and facilities for the prevention and treatment of sexually transmitted diseases. These services translate directly into improved quality of life for women, infants and communities.

#### **Obstetric Health Care**

According to some estimates, every minute nearly 110 women worldwide experience a complication during pregnancy. Yet over 58 percent of all deliveries in the developing world take place without a skilled obstetric health care attendant of any kind present (UNFPA, 2000). This translates directly into a global loss of life. In 76 countries today, UNFPA provides obstetric training for health care attendants in all aspects of maternal care, prenatal care and emergency delivery room life saving procedures. This training includes hands-on instruction and reference materials covering emergency obstetric care, treatment protocols, record keeping, facility upgrading, delivery room procedure, postpartum complications, family planning services and obstetric referral systems.

## **Education Regarding Female Genital Mutilation (FGM)**

UNFPA is currently the only government funded agency providing worldwide education about the dangers of female genital mutilation (FGM) - an area of special concern to my wife and I. Today this practice affects an estimated 130-137 million women worldwide (WHO, 2000; Epstein et al., 2001). An average of 13,000 girls and women are mutilated each day, and an estimated 168,000 immigrant women here in the U.S. are at risk. FGM most commonly impacts Third World teenage girls between the ages of 13 and 20. Typically, the practice involves the partial or complete removal of female genitalia with crude instruments such as knives, razors, scythe like cutting tools, fire, tin can lids, sharp stones, broken glass, and in some cases, even teeth. In some areas it is practiced in hospitals with modern surgical instruments (e.g. Egypt), but most commonly it is practiced in impoverished rural areas by professional "Circumcisors" without the benefits of anesthetics or hygiene (Davis, 2001). In many cutting rituals, common instruments are used on multiple girls, resulting in the passing of blood-born disease. In the most extreme form, known as infibulation (the form practiced in Somalia and Ethiopia), the girl is sewn back up again after being cut, sometimes almost completely. Subsequent intercourse and childbirth will forcibly reopen the wound, requiring it to be sewn once again (Bosch, 2001; WHO, 1995). Short-term health complications include shock, massive bleeding, local and systemic infection, lameness (crucial tendons are often cut inadvertently during the practice), and severe pain. Over 15% of cut girls die within two weeks of shock, infection, dehydration or blood loss. For those who survive, long-term consequences include infertility, incontinence, lameness, massive scarring (keloids), fistulae, dermoid cysts, chronic urinary tract infections (often leading to kidney failure), prolonged painful menstruation, Hepatitis B and C, HIV/AIDS (due to the sharing of instruments), death in childbirth, chronic pain and many other health complications (WHO, 1995; WHO, 2000; Perez-Williams, 1999; Morrison et al., 2001). Various folk myths about FGM are common in cultures that practice it. Among other things, it is believed to promote fertility, maintain cleanliness, prevent incorrigible behavior and prevent physical deformities (for instance, proponents of FGM among the Sabiny people of Uganda have told my anti-FGM colleagues and I that without it, the clitoris would grow to below knee length). It is also seen as a passage to womanhood. In every case, it is believed that the health consequences just described are not related to it and FGM practicing cultures genuinely believe they are doing something positive for their girls. Such beliefs underscore the critical need for education (Morrison et al. 2001).

Recently we traveled to Uganda with the US-Uganda Godparents Association (<a href="www.godparents.net">www.godparents.net</a>) to work with girls at risk from FGM. While we were there, we received support and information from UNFPA's REACH program. REACH has been providing FGM education to rural areas of Uganda for years, directly addressing many of the myths and poor health care practices previously described. Our experiences there brought us face to face with what this horrifying practice does to the hearts, minds and bodies of its victims. The US-Uganda Godparents Association maintains a high school in Kampala that provides safe haven and education for girls who are at risk. In FGM practicing cultures such as the Kapchorwa District Sabiny in Uganda, girls who do not submit to the practice have few options. The Sabiny practice polygamy and the giving of dowries. Uncut girls are considered "dirty" and unmarriageable. Given their poverty (per capita income in Uganda is less than one American dollar per day), the potential loss of a bride price can put tremendous economic pressure on a Sabiny family, which will then feel compelled to have its girls cut. Many of these families wish the practice to end but feel trapped by such circumstances. Uncut girls are denied access to community resources and have few

options. Some are pursued by their families and forcibly cut against their will. Similar situations are common among other African FGM practicing cultures (Morrison et al. 2001). The provision of room, board and a high school education, allows these girls and their families to gain economic independence from their villages. Thus, they can make life choices that allow them to reject the practice. Funding comes from American donors who may sponsor a girl's education for an annual fee of \$325. Our goddaughter is named Chesha Juliet. She is a striking young woman, 16 years old, with an infectious smile and a gentle laugh that melted our hearts when we first met her. Today, because of the efforts of UNFPA's REACH program and organizations like the US-Uganda Godparents Association, girls like her can live free of fear and build a life for themselves.

#### **UNFPA's Presence in the People's Republic of China**

UNFPA has had a presence in China since 1979. Their latest program there, the Fourth Country Program, began in 1998. It has provided a badly needed baseline health survey and needs assessments for many rural Chinese population segments. Though the Chinese government still maintains demographic targets and a one-child policy, they have agreed to lift acceptor targets and birth quotas as a matter of policy in each county where UNFPA operates. Though formally agreeing to such policy shifts does not guarantee their immediate widespread implementation, or preclude rogue behavior by isolated offices, it is a huge step forward, and is a direct result of pressure from UNFPA. With UNFPA's assistance, China is beginning to shift from demographic targets to client-oriented services. This includes maternal health care, treatment of reproductive tract infections and sexually transmitted diseases, education and provision of contraceptives. UNFPA has also launched pilot projects on adolescent reproductive health education in urban areas UNFPA, 2002a). UNFPA has also put pressure on China to cease the circulation of steel ring IUD's because of the health risks they present. These efforts have largely been successful and benefited millions (Kristof, April 26, 2002).

UNFPA has also recognized the critical need for expanding civil freedoms and economic status for poor women in China. They have launched a program to provide access to credit for 15,000 women in 13 Chinese provinces. This project has been running since 1999 with the cooperation of China's Dept. of International Trade and Economy/Ministry of Foreign Trade and Economic Cooperation (DITEA/MOFTEC). Access to credit gives poor women a chance to form cottage industries and move toward economic self-sufficiency. The success of such programs elsewhere in the world has been clearly demonstrated (Yunus & Jolis, 1998).

#### **The Case Against UNFPA**

Despite these efforts and their many successes, UNFPA has been under attack since 1985 from several pro-life advocacy groups for allegedly supporting abortion and sterilization in the third world. Recently the most vocal of these groups, the Virginia based Population Research Institute (PRI), and a few of their allies gained the ear of several members of Congress. In 1998 the U.S. House Subcommittee on International relations heard testimony from a former Chinese population program official and representatives of the Laogai Foundation (U.S. House, 1998). In September of 2001 a team of investigators lead by PRI went to China and returned with evidence of a wide range of abuses, including coerced abortion and sterilization, coerced use of intrauterine devices (IUD's), fines, confiscation of property and psychological torture. In October of 2001, The House Committee on International Relations heard testimony from representatives of PRI, including PRI president Steven Mosher and Ms. Josephine Guy, regarding their findings on this trip. In this testimony it was alleged that UNFPA was aware of, and directly cooperated with, coercive enforcement of China's one-child policy (U.S. House, 2001). The presentation before the House included videotaped testimony of victims as well (U.S. House, 2001). As a direct result of this testimony, a bipartisan group of 55 members of Congress led by Rep. Chris Smith (R-NJ) sent a letter to President Bush in January of this year formally requesting that the United States withdraw its funding of UNFPA (Smith et al, 2002). He responded by suspending allocation of \$34 million for UNFPA until further notice.

We are writing to you today because after a detailed examination of this testimony and the press releases at PRI's web site (<a href="www.pop.org">www.pop.org</a>), we have grave reservations about the case against UNFPA. We believe that although the continued presence of at least some coercive activity in China is beyond dispute, a detailed examination of the evidence presented for UNFPA involvement reveals it to be based on little more than circumstantial claims and poorly researched falsehoods. Furthermore, because of PRI's history of highly partisan advocacy, the inflammatory nature of their published statements, and the fact that the campaign against UNFPA

is based almost entirely on their investigations, we believe this campaign to be little more than a witch-hunt. PRI and their allies have made a number of specific allegations regarding UNFPA activities including the following,

- UNFPA has consistently denied the existence of coercion in China in regions where it operates (U.S. House, 1998; U.S. House, 2001; Smith et al, 2002; PRI, Jan. 11, 2002).
- UNFPA has been operating in China with full knowledge of coercive practices being used to support China's One-Child policy, including forced abortion, forced sterilization, confiscation of home and property, psychological torture and prison sentences (U.S. House, 1998; U.S. House, 2001; PRI, Jan. 11, 2002). PRI has also alleged UNFPA sanctioned coercion in Peru, Kosovo and Afghanistan as well (PRI, Jan. 11, 2002).
- UNFPA has not only been aware of such practices, they have condoned them, and at times even directly supported them (U.S. House, 1998).
- Safe Delivery kits distributed by UNFPA in Kosovo, Afghanistan, El Salvador, and other countries contained abortifacient chemicals and Manual Vacuum Aspirators (MVA's) to be used for abortions (PRI, Nov. 12, 2001; World).
- These Safe Delivery kits also contained Morning After pills specifically for performing abortions (PRI, Nov. 12, 2001; World, Oct. 30, 1999).
- UNFPA has been attempting to hide its alleged direct involvement in coercion behind a "green front" based on "every environmental scare story known to Homo Environmentalis" (PRI, Nov. 2, 2001).

These allegations comprise the bulk of their case. We would now like to discuss each of them in turn.

## **UNFPA Knowledge of Coercion**

Numerous claims have been made in Congressional circles and in press releases from PRI and their allies that UNFPA has denied the existence of any and all coercion in China's population control programs. However, these statements have almost universally been made in general terms without specific citations to the alleged UNFPA statements. We have been unable to locate any documentation to support them. An extensive review of the Internet reveals numerous UNFPA statements regarding their opposition to coercive policies of any kind, but none that deny their existence. China's overall population program is large, complex and involves many agencies and offices spread across their nation of over 1.2 billion souls. In an interview by the Chinese English language periodical People's Daily, UNFPA Executive Director Thoraya Ahmed Obaid praised this overall program in general terms (People's Daily, March 15, 2001). However, nowhere in these statements is there anything that could be construed as a blanket blessing of virtually every aspect of it, or a denial that there is still need for progress. We have been in direct contact with UNFPA officials in their New York office. All of them readily acknowledge the continued existence of coercion in China and their desire to see it end (UNFPA, 2002b). All acknowledge that isolated incidents by roque local agencies and officials still occur in China. Furthermore, the U.S. State Dept. Bureau of Democracy, Human Rights and Labor has investigated the progress of China's cooperation with the UNFPA Fourth Country Program and reported mixed results. Some counties have informed the general public about UNFPA's programs and cooperated fully with them while others have not yet done so. However, significant progress is being made (U.S. State Dept., 2000; U.S. State Dept., 2001; U.S. State Dept., 2002). It does not follow from any of this that UNFPA denies the need for further compliance.

In fact, not only has UNFPA been aware of abuses, it has been an active voice for restraint there (UNFPA, 2002a; Kristof, April 26, 2002; Hardee, 2002). UNFPA was instrumental in pushing for the removal of many Chinese policies, such as birth quotas, that contribute to coercion and their pressure on the Chinese government to eliminate steel ring IUD's was instrumental in saving many lives (UNFPA, 2002a; Hardee, March 31, 2000; Kristof, April 26, 2002). Furthermore, PRI is hardly the only NGO to have worked in China in the last 20 years. Others, such as the Washington DC based Futures Group International (FGI) have also maintained a presence there, and it is worth noting that these groups do not independently corroborate PRI's allegations. While most agree that China has been, and in a few instances still is, heavy handed, they are quick to point out that significant overall progress has been made (Hardee, March 31, 2002). As has already been pointed out, the U.S. State Dept., concurs (U.S. State Dept., 2000; U.S. State Dept., 2001; U.S. State Dept., 2002). Remaining

abuses aside, it is precisely this overall progress that UNFPA officials have praised (People's Daily, March 15, 2001).

## **UNFPA Participation in Coercion**

A careful review of the evidence presented before the U.S. House (U.S. House, 1998; U.S. House, 2001; Smith et al, 2002) and in PRI's press releases (<a href="www.pop.org/briefings/">www.pop.org/briefings/</a>) reveals considerable evidence of coercive activity by Chinese officials, but nothing documenting any direct UNFPA involvement. There are numerous specific accounts of coercion from eyewitnesses, anecdotal accounts of alleged statements by Chinese officials, and testimony from a single former Chinese population program official. After presenting these accounts, it was then pointed out that UNFPA has a presence in the same area and has been working with the Chinese on the implementation of their fourth country program – therefore, they are guilty by association. However, not one single piece of evidence was presented which directly implicated any UNFPA official or activity in any of these incidents. The closest thing presented to a demonstration of actual UNFPA involvement was the claim that they had a desk in a building shared with Chinese population control officials. This is a textbook example of a post-hoc fallacy (i.e. – the argument that correlation implies causation). In the absence of more tangible evidence, such as incriminating UNFPA memos or eyewitness accounts of abusive UNFPA personnel, the mere presence of UNFPA activity in a region known for coercive incidents does not clarify the nature or extent of their involvement - whether they have been instigators of such activity or a voice for restraint. To date, no such evidence has ever been provided by PRI or anyone else.

In addition, though the evidence of coercion by Chinese government officials that has been presented is compelling, it is ultimately based only on the testimony of 2 or 3 dozen witnesses from a single Chinese county. While this documents the existence of some coercive activity, it is not a statistically significant sample even for the county in question, much less for the entire nation. As already mentioned, China is a nation of over 1.2 *billion* people geographically distributed over an area the size of the continental United States. Their reproductive health care programs are extensive, implemented nationwide, and cover a wide range of activities spanning a number of years. Proper documentation of institutionalized abuse at a national level requires far more than this, even without bringing up the subject of UNFPA involvement.

To demonstrate the flaws in this reasoning, imagine how it might be applied here at home. By population, the United States is barely one-fifth the size of the People's Republic of China. Even so, it would be a simple matter to find two-dozen witnesses claiming to be victims of civil rights violations at the hands of local law enforcement agencies such as the LAPD (for instance, see LA Times, Feb. 8, 2002 or LA Times, May 3, 2002). It is also known that the LAPD has cooperated with various federal and local agencies on criminal investigations and public awareness programs, and with community-based groups on a variety of education, youth awareness, and community watch programs (LAPD Online, 2002). Based on these facts alone, logic similar to PRI's would require us to conclude that the FBI, the Los Angeles Mayor's office, and Los Angeles neighborhood block watch groups were all directly complicit in the beating of Rodney King and many other similar incidents simply because they work with the LAPD on public safety issues. Likewise, in past years the United States has provided aid to El Salvador at times when it had been demonstrated that there were death squads operating there, at least a few of which were thought to have ties to the government. In 1985, the Reagan Administration proposed increasing aid to El Salvador, and restoring military and security force training aid before such activity was known to have ended (for instance, see New York Times, Sept. 13, 1985 or Wall Street Journal, Feb. 27, 1984). Once again, without offering any further evidence of direct complicity or restraint by U.S. personnel or agencies in death squad activities, the same reasoning would compel us to conclude that the United States is a terrorist state. Indeed, many leftist advocacy groups have argued exactly this (without considering that the United States had linked the provision of this aid to demonstrated progress in human rights in El Salvador for over 11 years). Regardless of one's feelings about the U.S. presence in El Salvador, this is not acceptable scholarship or critical thought.

#### **UNFPA Safe Delivery Kits**

The suffering of poor women in war torn areas like Afghanistan, and the need for proper medical supplies including safe delivery equipment, has been well documented (Bartlett et al., 2002). In response to a number of humanitarian crises, UNFPA has distributed Safe Delivery kits in Kosovo and Afghanistan. Similar kits were also distributed in Peru, El Salvador, and other locations (UNFPA, 2002). PRI has claimed that these kits contain "morning-after" pills, abortifacient chemicals, and Manual Vacuum Aspirators (MVA's) for use in abortions (PRI, Nov. 12, 2001). World (<a href="https://www.worldmag.com">www.worldmag.com</a>), a fundamentalist news and commentary magazine affiliated with Bob Jones University that frequently covers PRI activities, ran a feature story in 1999 referring to these kits as "ethnic cleansing in a pill" in an attempt to suggest that UNFPA cooperated with the Milosevic regime in genocide (World, Oct. 30, 1999).

Every word of this is either misleading or false. No abortifacient chemicals chemicals have ever been included in these kits and no independent confirmation of PRI's or World's anecdotal claims to the contrary has ever been provided. Regarding MVA's, PRI claims that these devices can only be used for abortions and that their utility in safe deliveries is "medical nonsense" (PRI, Nov. 12, 2001). The only support cited for this statement was an anecdotal reference to a conversation with "local Planned Parenthood personnel" (who of course, were never named). But even a cursory review of the peer-reviewed medical literature demonstrates that such devices are not only suitable for safe delivery, they are widely used for such (ACOG, 1998; USFDA, 1998; Chan et al., 1999). There are issues surrounding their use, including possible complications for infants, and proper training is necessary (ACOG, 1998; USFDA, 1998). However, it has also been shown that they can reduce risk to mothers under certain conditions (Johanson & Menon, 2000), which is precisely why they are used in refugee and natural disaster scenarios. They are also widely used for delivery right here in the United States (Curtin, 1999; Ross et al., 2000; Kabiru et al., 2001). The claim that they are only suitable for abortions flatly contradicts easily obtainable facts. It is difficult to see how any responsible attempt at proper scholarship would not have exposed these errors and omissions.

The morning-after pill provides emergency contraception if taken within 72 hours of intercourse (Sarkar, 1999; Gold, 2000; Rodrigues et al, 2001). It is provided in refugee kits because of its utility in preventing pregnancy after rape – a common occurrence in war torn refugee areas. The pill works by interfering with a fertilized zygote's ability to implant in the uterine wall and become viable. Because both PRI and World hold to the doctrine that human life begins at conception, they have argued that the pill is abortifacient (PRI, March 22, 2002; World, Oct. 30, 1999). The referenced PRI press release presents expert testimony to defend this claim (despite the fact that it is widely known), but neglects to point out that in the normal human reproductive cycle, fewer than one out of three zygotes naturally implants anyway (Scott & White Ob. Gyn. Dept. Online, 2002; Creighton University School of Medicine Online, 2002). As any couple trying unsuccessfully to get pregnant will tell you, sex during a fertile period does not always result in pregnancy! If we accept the doctrinal framework held by PRI and World regarding conception, it follows that God "aborts" 2 out of 3 "infants" anyway - a position I doubt they would find acceptable. This does not say much for their arguments about the "abortifacient" nature of the morning-after pill.

#### **UNFPA's "Green Front"**

PRI has argued that UNFPA is "hiding [its] support of coercion behind a false front of environmentalism" based on "every environmental scare story known to Homo Environmentalis" (PRI, Nov. 2, 2001). The "scare stories" they cite include carbon emissions, global warming, resource depletion, and overpopulation – all of which they consider to be non-issues. They have praised the Bush administration for its opposition to the Kyoto treaty (U.S. Newswire, 2001) and regularly attack any suggestion that global warming is a real problem in their newsletter. PRI has also argued at length that not only is the world's population not increasing, it will soon be actually declining, even in developing nations (PRI, Nov. 2, 2001). According to them, if active measures are not taken to dramatically increase population, the world will enter "demographic freefall" by mid century (PRI, July 2, 2001; PRI, Mar. 23, 2002). Furthermore, this increase will not lead to resource depletion or any other environmental crises, but instead will lead to economic growth (PRI, March 23, 2002). One of the largest obstacles to development in Africa, they say, is the view that "unborn children in the world are an enemy to be attacked" (PRI, Mar. 23, 2002). This same press release also included a rather anachronistic pitch for property rights and lower taxes in the tradition of other American special interest groups. Exactly what this had to do with the point they were trying to make regarding population in the developing world was never clarified (PRI, Mar.

23, 2002). The real enemy, says president Steven Mosher, is depopulation – he points out that the large empty spaces encountered in a drive across the United States "prove" that America is depopulated (PRI, July 2, 2001).

The scientific illiteracy displayed in these statements is almost beyond belief, and PRI offers no support for any of them. In fact, as has already been pointed out, solid science has demonstrated that though fertility rates are falling, world population will continue to grow until the mid century and may peak as high as 10.9 billion (National Academy of Sciences, 2000; United Nations, 2001). There is no evidence to suggest that a "freefall" will occur after stabilization (National Academy of Sciences, 2000). This increase in population will almost certainly have an alarming effect on a wide range of natural resources, including the availability of food and fresh water (NRC, 2001; Hanna & Coussens, 2001), biodiversity (National Research Council, 2000; National Research Council, 1995a; National Research Council, 1995b; Reaka-Kudla et al, 1996), forests and wetlands (National research Council, 1995c), and a wide range of other critical environmental indicators (National Academy of Sciences, 2001). There is also general agreement in the scientific community that global average temperatures are increasing at a significant rate, and that this is almost certainly due at least in part to human activity (IPCC, 1994; IPCC, 1995; IPCC 2001). The only serious opposition to this has come from a small handful of scientists and advocates, virtually all of whom have direct ties to industry, fundamentalist or other highly partisan groups. Several are being paid large consulting fees by these groups for their services. In most cases however, their research on this issue has not survived peer-review, and what little has does not alter any basic conclusions regarding future climate change scenarios (Beder, 1999). In fact, even the Bush Administration now admits the reality and seriousness of global warming (Seattle Times, June 4, 2002). Even apart from climate change, numerous global natural resources are already badly stressed and significant population increases will only make this worse (National Research Council, 2000). Furthermore, these stresses will exacerbate existing problems with infrastructure, education, and public health in developing world nations, and there is a growing body of evidence to suggest that poor communities will bear the brunt of any resulting environmental hardships (National Academy of Sciences, 1999). Though population growth may stimulate economic growth under some circumstances, in the developing world, rather than vitalize their economies as PRI suggests, it will most likely cripple them. One recent, and very typical study done at Harvard has shown that between 1965 and 1990 reduced population growth accounted for nearly one third of the economic growth of several east Asian countries including Taiwan and South Korea (Bloom & Williamson, 1998). All this is easily obtainable in the public domain, but once again, there appears to have been no attempt by anyone at PRI to obtain any of it.

#### **PRI's Platform**

"Homo Environmentalis", "whitewashing", "UN Butchers" – inflammatory terms like these appear repeatedly in PRI press releases and articles (<a href="www.pop.org/briefings/">www.pop.org/briefings/</a>). President Steven Mosher tells us that "secular humanists have twisted the virtue of childbearing into the vice of overpopulation". He then suggests that we need to have as many children as possible so that, among other reasons, we can "counter global depopulation" and "help populate heaven" (PRI, July 2, 2001). With all due respect senator/representative, regardless of one's opinions about abortion or contraception, this is not the language of objective science. It is the language of advocacy, even zealotry. PRI and their allies have repeatedly presented themselves to Congress and the public as a professional, non-profit research community dedicated to providing objective scientific information on demographics. In fact, they are actually a highly partisan advocacy group. PRI originated as a spin-off of Human Life International, one of the world's largest pro-life groups, and has since developed strong ties with the fundamentalist evangelical movement in America. Its original charter was to "conduct research exposing the population control movement" (U.S. Newswire, 2000). According to HRI (who still provides the lion's share of PRI's funding), PRI "will continue to provide a counterbalance to the horrific population control movement so intimately tied with the evils that HRI fights such as contraception, sex education, abortion and euthanasia" (U.S. Newswire, 2000).

PRI has also received extensive coverage and support from the previously mentioned World Magazine. World (<a href="www.worldmag.com">www.worldmag.com</a>), which as of fall of 2000 had a circulation of around 100,000, has become a leading voice in the fundamentalist and pro-life communities. They regularly feature a wide range of pseudo-scientific and highly partisan views that are popular with many readers in these circles. They have also been the focus of numerous controversies involving slander and spurious journalism. Few of these incidents have resulted in retractions, corrections or apologies. For example, in 1998 they were involved in a scandal regarding their reporting of alleged incidents of coerced abortion in Honduras – a story that is strikingly similar to the current UNFPA issue. The allegations were never independently corroborated and World was widely criticized for the poor quality of their investigation (see Footnote 1). More recently, they were criticized for editorials by Joel Belz

"pluralism" (World, Sept 22, 2001).

and Marvin Olasky (Bush's "compassionate conservatism" mentor) in which it was argued that the United States deserved the 9/11 World Trade Center terrorist attacks because of its "sins", including "nominalism" and

None of this disproves any of PRI's allegations against UNFPA of course. PRI and their allies have every right to their views and an opportunity to have them heard in Congressional circles and public forums. But they can hardly be called an objective source of non-partisan research, and the fact that most of the case against UNFPA comes from them and their allies should concern us. I'm sure you'll agree that given allegations as serious as these, nothing is more important to an investigation than thoroughness and professional objectivity. But the errors and omissions documented above, and the lack of tangible, independent support of the allegations raises many questions about how objective this investigation has been. Throughout this letter, we have provided numerous citations for the information given, but it should be noted that these citations are nowhere near exhaustive. A wealth of accurate information on all the issues discussed so far is easily available from a wide range of peer-reviewed scientific journals and credible moderate news sources, yet none of it appears to have been consulted by anyone at PRI, HLI, World, or any of the other fundamentalist forums and special interests opposed to UNFPA. We have to wonder why not. The evidence suggests that these interests maintain their views in this matter because they are conducive to a radical pro-life agenda, not because they have proper scientific or journalistic support.

#### Conclusion

As already mentioned, we are disturbed by the worldwide prevalence of abortion, especially its frequent use by some for either birth control or convenience. We hope to eventually see a real solution to this. But we only have faith in solutions that are based on compassion and reason. Admittedly, many women today do use abortion for birth control or convenience. However globally, the vast majority do not. Over 52 million abortions are performed worldwide each year. Most are sought by poor women who do not enjoy civic freedoms, access to safe reproductive health care, contraception, education or obstetric services – services UNFPA has led the world in providing. No lasting solution to abortion or any of the world's population ills will be possible until we recognize these women. When we demonstrate our willingness to walk beside them and offer viable and accessible alternatives to abortion, then, and only then, will it end. Mere moralistic sermons and calls for denial of funds to those who are trying even imperfectly to do this are a poor substitute.

It is a basic principle of critical thought that extraordinary claims require extraordinary proof. But to date, neither PRI or their allies have provided any. In addition to a few anecdotal claims and impassioned pleas for opinions that are flatly contradicted by easily available science, they have only offered us a couple dozen witnesses to coercion in China. Not one of these witnesses ever directly identified any UNFPA worker or any specific UNFPA activity. Nor has any PRI claim ever been independently confirmed by anyone outside of their circle of friends. Beyond that, given the errors and omissions cited above, it appears that PRI has never even attempted any responsible research of the relevant peer-reviewed medical and scientific knowledge base. Given the seriousness of the charges, we believe we have a right to demand a more professional and competent investigation. PRI and their colleagues may not have given us any independently verifiable testimony of specific UNFPA activities, but we offer you millions of witnesses who can. We offer you the women at UNFPA's fistula hospital in Addis Ababa, Ethiopia. We offer you the refugee women and families that have received education, reproductive health care and obstetric services in war torn areas like Afghanistan and on every continent. We offer you our friend and colleague Jackson Chekweko of UNFPA's REACH program in Uganda, based at Makerere University in Kampala and tirelessly working to provide education on female genital mutilation to the Sabiny people of Uganda. Finally, we offer you our own Sabiny goddaughter Chesha Juliet, herself rescued from the horrors of FGM in no small part because of the education efforts of REACH in Uganda's Kapchorwa District. When we first met last summer she could not contain her tears of joy, and neither could we. Those tears are the best testimony to UNFPA's work in the world we can offer you!

Senator/Representative, the best defense there is against what is bad, is *to demonstrate something better*. Vicious attacks and guilt-by-association arguments do not do this. Anyone can moralize, anyone can demand that someone else be denied funds – especially when this is done from a position of privilege and perceived moral superiority. This costs nothing and it sets no worthy example. Real moral leadership demonstrates something better – it shows us what caring looks like in tangible ways. Real justice struggles to provide solutions, even if it can only do so imperfectly. Lastly, real moral leaders would never attack others based on a lower standard of proof than they would demand for themselves. We doubt PRI or any of UNFPA's other critics

would consent to being punished for any alleged crimes on their part based only on circumstantial evidence, post-hoc arguments, and a nearly complete neglect of peer-reviewed science and independent verification. We can, and *must*, have higher standards than this. Until tangible evidence of direct UNFPA involvement in coercive activity is presented, until PRI and other anti-UNFPA advocacy groups demonstrate higher standards of research and critical thought, we implore you to be a voice for reason and compassion toward the world's poor women. Please demand that U.S. funding of the United Nations Population Fund be restored. Thank you for considering this issue!

Sincerely,

Scott Church, MS Audrey J.L. Church, MN, ARNP

E-mail: scott@scottchurchimages.com

Web Site: www.scottchurchimages.com

#### **Footnotes**

1) World Magazine is no stranger to controversy regarding the quality of their reporting. Since their advent, dubious journalism on their part has resulted in a number of incidents. For instance in March of 1998, in an incident that bears striking resemblance to the current controversy regarding UNFPA, they published a story alleging that World Relief (the relief agency of the National Association of Evangelicals) had been cooperating with the government of Honduras in coerced abortion programs (World, March 28, 1998). Further investigation however revealed that the story had been based only on a small handful of very indirect links between World Relief and a few Honduran agencies that support contraception, but had never been independently shown to be involved with coercion. Defending World's research of the story in another forum, World Cultural Editor Mindy Belz cited an anecdotal statement from a "World Relief health officer" (who of course, is never named) allegedly supporting "all forms of family planning" (First Things, 1999) – a claim that was then interpreted by World's editorial staff in the broadest and most incriminating terms and of course, never independently verified. In fact, there was never any truth to the allegations and no further proof was ever provided by World or anyone else. Despite widespread criticism of their scurrilous reporting and numerous demands for retraction, World has never made any attempt to correct the error or apologize to World Relief. For more information, see the correspondence between Ms. Belz and Wheaton Professor Alan Jacobs (whose wife works with World Relief) on this controversy in the Christian journal First Things (First Things, 1999).

Likewise, in March 1995, World published another story by Mindy Belz titled "Unspeakable Delicacy, Cannibalism Makes the Chinese Communist Crime List". In this story it was alleged that there was a large underground black market in China that supplied aborted fetuses to restaurants as "health food" (World May 20/27, 1995). The story created quite a furor in pro-life circles after it was published. It was even picked up and widely circulated by Human Life International (HLI, 1996) – PRI's parent organization and largest benefactor! But despite the furor, independent verification of the claims never materialized. A photograph alleging to show a man eating a fetus was later proved to have been faked (Taipei Times, March 23, 2001), and repeated inquiries among official and non-official sources within China produced nothing. Further investigation revealed that Ms. Belz's only source was a Hong Kong based English language tabloid called the Eastern Express (Eastern Express, April 12, 1995), which went defunct shortly after the original story was published. Today it is widely regarded as an urban legend and is even written up at the San Fernando Valley Folklore Society's Urban Legend Home Page (<a href="www.snopes.com">www.snopes.com</a>) under their "Horrors" section (the article can be directly linked without the HTML Frames at <a href="www.snopes2.com/horrors/cannibal/fetus.htm">www.snopes2.com/horrors/cannibal/fetus.htm</a>). In fact, the Snopes write-up even includes the infamous photo of the man allegedly eating a fetus. A close examination of the image reveals that the "fetus" is most likely a doll head attached to a roasted duck.

As before, neither World nor Ms. Belz has ever offered a retraction or an apology for their reporting of the issue. Questionable and even slanderous journalism of this sort has been a common occurrence in World's

pages, which no doubt is one reason why their circulation has not grown much outside of the communities that already share their belief system.

#### References

American College of Obstetrics and Gynecology (ACOG). 1998. Committee Opinion 208. Obstetrics & gynecology, Sept. 1998.

Bartlett, L.A., Jamieson, D.J., Kahn, T., Sultana, M., Wilson, H.G. 2002. Maternal Mortality Among Afghan Refugees in Pakistan. *Lancet.* Feb. 23, 2002; 359. Pgs. 643-9.

Beder, S. 1999. Climatic Confusion and Corporate Collusion: Hijacking the Greenhouse Debate. *The Ecologist.* March/April 1999. Pgs. 119-122. Available online at <a href="http://www.uow.edu.au/arts/sts/sbeder/ecologist.html">http://www.uow.edu.au/arts/sts/sbeder/ecologist.html</a>.

Bosch, X. 2001. Female Genital Mutilation in Developed Countries. Dept. of Internal Medicine, Hospital Clinic, Villarroel 170, 08036, Barcelona, Spain.

Bulatao, R.A. 1994. The Value of Family Planning Programs in Developing Countries. (Washington DC: Rand, 1998).

Chan, C.C., Malathi, I., Yeo, G.S. 1999. Is the vacuum extractor really the instrument of first choice? *Aust N Z J Obstet Gynaecol*, 1999 Aug; **39** (3): 305-9.

Creighton University School of Medicine. 2002. Ultrasound of Early Pregnancy. Available online at <a href="http://medicine.creighton.edu/radiology/ultraofearlypreg.html">http://medicine.creighton.edu/radiology/ultraofearlypreg.html</a>.

Curtin, S.C. 1999. Recent changes in birth attendant, place of birth, and the use of obstetric interventions, United States, 1989-1997. *J Nurse Midwifery,.* 1999 Jul-Aug; **44** (4):337-40.

Dollar, D. & Gatti, R. 1999. Gender Inequality, Income, and Growth: Are Good Times Good for Women? Washington DC: World Bank Development Research Group, 1999.

Eastern Express. March 1995. Aborted Babies Sold as Health Food for \$10. By Bruce Gilley.

Epstein, D., Graham, P. & Rimsza, M. 2001. Medical Complications of Female Genital Mutilation. *J. Amer. College Health*, May 2001; **49** (6). Pgs. 275-280.

First Things. 1999. Correspondence between Alan Jacobs and Mindy Belz. Available online in First Things Correspondence section at <a href="https://www.firstthings.com/ftissues/ft9901/correspondence.html/">www.firstthings.com/ftissues/ft9905/correspondence.html</a> and <a href="https://www.firstthings.com/ftissues/ft9905/correspondence.html">www.firstthings.com/ftissues/ft9905/correspondence.html</a>.

Gold, M.A. 2000. Emergency contraception. Adv Pediatr, 2000; 47: 309-34.

Hanna, K. & Coussens, C. 2001. Rebuilding the Unity of Health and the Environment. Institute of Medicine. *National Academy Press*.

Hardee, K. March 31, 2002. Stranglehold on Population Fund Ignores China's Positive Strides. Op-Ed piece. Available online from the Seattle PI at <a href="mailto:seattlepi.nwsource.com/opinion/63928">seattlepi.nwsource.com/opinion/63928</a> popop.shtml. Human Life International (HLI). 1996. Does 'Partial Birth' abortion Portend the Return of Pre-Historic Cannibalism?

Intergovernmental Panel on Climate Change (IPCC) – Working Group I, (1994): Climate change 1994 – radiative forcing of climate change" and "An evaluation of the 1992 emission scenarios, Houghton, J.T., Meira Filho, L.G., Bruce, J., Lee, H., Callander, B.A., Haites, E., Harris, N., Maskell, K. (eds.).

Intergovernmental Panel on Climate Change(IPCC) – Working Group I, (1995): Climate change 1995 – radiative forcing of climate change" and "An evaluation of the 1992 emission scenarios, Houghton, J.T., Meira Filho, L.G., Callander, B.A., Harris, N., Kattenberg, A., Maskell, K. (eds).

Intergovernmental Panel on Climate Change(IPCC) – Working Group I, (2001): Climate change 2001 – The Scientific Basis, Houghton, J.T., Ding, Y., Griggs, D.J., Noguer, M. van der Linden, P.J., Dai, X., Maskell, K., Johnson, C.C. eds. 2001. Cambridge University Press.

International Conference on Population and Development (IPCD). 1994. Report of the International Conference on Population and Development. Cairo, Egypt. Sept. 5-13, 1994. A/CONF.171/13: Report of the ICPD (94/10/18). United Nations. Available online at <a href="http://www.unfpa.org/icpd/reports&doc/icpdpoae.html">http://www.unfpa.org/icpd/reports&doc/icpdpoae.html</a>.

Johanson, R.B., Menon, B.K. 2000. Vacuum extraction versus forceps for assisted vaginal delivery. *Cochrane Database Syst Rev,* 2000; (2): CD000224.

Kabiru W.N., Jamieson D., Graves W., Lindsay M. 2001. Trends in operative vaginal delivery rates and associated maternal complication rates in an inner-city hospital. *Am J Obstet Gynecol*, 2001 May; **184** (6): 1112-4.

Khanna, J., Van Look, P.F.A., and Griffin, P.D. 1992. Reproductive Health: Key to a Brighter Future. World Health Organization Biennial Report, 1990-1991. Geneva: World Health Organization, 1992.

Kristof, N.D. April 26, 2002. Devastated Women. Syndicated Op-Ed piece published April 26, 2002. Available online at http://www.law.wayne.edu/cjpeters/Devastated%20Women.htm.

Los Angeles Police Department Online. 2002. Available at http://www.lapdonline.org/.

Los Angeles Times. Feb. 8, 2002. NAACP Criticizes Slaying by Police. By Wride, N. LA Times newswriter.

Los Angeles Times. May 3, 2002. No Indictment in Death of Immigrant. From Reuters Newswire.

Morrison, L., Scherf, C., Ekpo, G., Paine, K., West, B., Coleman, R., Walraven, G. 2001. The long-term reproductive health consequences of female genital cutting in rural Gambia: a community-based survey. *Tropical Medicine & International Health*, Volume **6** Issue 8. Page 643 - August 2001.

National Academy of Sciences. 1999. Toward Environmental Justice: Research, Education and Health Policy Needs. *National Academy Press*, 1999. Available online at <a href="https://www.nap.edu/catalog/6034.html">www.nap.edu/catalog/6034.html</a>.

National Academy of Sciences. 2000. Beyond Six Billion: Forecasting the World's Population. *National Academy Press*, 2000. Available online at <a href="https://www.nap.edu/books/0309075548/html/">www.nap.edu/books/0309075548/html/</a>.

National Academy of Sciences. 2001. Growing Populations, Changing landscapes: Studies from India, China, and the United States. *National Academy Press*, 2001. Available online at www.nap.edu/books/0309075548/html/.

National Research Council. 1995a. Science and the Endangered Species Act. *National Academy Press.* 1995. Available online at <a href="http://www.nap.edu/books/0309051347/html/index.html">http://www.nap.edu/books/0309051347/html/index.html</a>.

National Research Council. 1995b. Understanding Marine Biodiverity. *National Academy Press.* 1995. Available online at <a href="http://www.nap.edu/books/0309052254/html/">http://www.nap.edu/books/0309052254/html/</a>.

National Research Council. 1995c. Wetlands: Characteristics and Boundaries. *National Academy Press.* 1995. Available online at <a href="http://www.nap.edu/books/0309051347/html/index.html">http://www.nap.edu/books/0309051347/html/index.html</a>.

National Research Council. 2000. Nature and Human Society: The Quest for a Sustainable World. Raven, P.H. & William, T. eds. *National Academy Press.* 2000. Available online at <a href="http://www.nap.edu/books/0309065550/html/">http://www.nap.edu/books/0309065550/html/</a>.

National Research Council. 2001. Envisioning the Agenda for Water Resources Research in the Twenty-First Century. *National Academy Press.* Available online at <a href="http://bob.nap.edu/books/0309075661/html/">http://bob.nap.edu/books/0309075661/html/</a>.

New York Times. 1985. Salvador Rights Violations Charged. Sept. 12, 1985. Associated Press Newswire.

People's Daily. March 15, 2001. UNFPA Praises China's Family Planning Policy. *By* Du Minghua. Available online at <a href="mailto:english.peopledaily.com.cn/200103/15/eng20010315">eng20010315</a> 65094.html.

Population Action International (PAI). 2001. How Family Planning Protects the Health of Women and Children. Fact sheet no. 2. in second series. (Washington DC: April 2001).

Population Reference Bureau (PRB). 2001. 2001 World Population Data Sheet, wall chart. Washington DC, 2001.

Population Research Institute (PRI). July 2, 2001. Ten Great Reasons to Have Another Child. Available online at <a href="https://www.pop.org/briefings/wb110201.htm">www.pop.org/briefings/wb110201.htm</a>.

Population Research Institute (PRI). Nov. 2, 2001. UNFPA Hides Behind a Green Front. Available online at www.pop.org/briefings/wb110201.htm.

Population Research Institute (PRI). Nov. 12, 2001. Muslims Shocked by Western-led 'Genocide' in Refugee Camps. PRI Weekly News Briefing. Available online at <a href="https://www.pop.org/briefings/wb111201.htm">www.pop.org/briefings/wb111201.htm</a>.

Population Research Institute (PRI). March 22, 2002. At PRI's Global Family Life Conference Medical Expert Links `EC' with Abortion. Available online at <a href="https://www.pop.org/briefings/wb032202.htm">www.pop.org/briefings/wb032202.htm</a>.

Population Research Institute (PRI). March 23, 2002. Regarding World Population Prospects. Available online at <a href="http://www.pop.org/briefings/popprospects.htm">http://www.pop.org/briefings/popprospects.htm</a>.

Perez-Williams, Acosta, W., McPherson, H.A. 1999. Female genital mutilation in the United States: Implications for women's health. *American Journal of Health Studies*, Tuscaloosa; 1999. Pgs. 47-52.

Rahman, M., DaVanso, J. & Razzaque, A. 2001. Do Better Family Planning Services Reduce Abortion in Bangladesh? *Lancet.* Sept. 29, 2001. pp. 1051-56.

Reaka-Kudla, M.L., Wilson, D.E., Wilson, E.O., eds. 1996. Biodiversity II: Understanding and Protecting Our Biological Resources. *Joseph Henry Press.* 1996.

Riley, N.E. 1997. Gender, Power & Population Change. Population Bulletin, May 1997.

Rodrigues, I., Grou F., Joly J. 2001. Effectiveness of emergency contraceptive pills between 72 and 120 hours after unprotected sexual intercourse. *Am J Obstet Gynecol* 2001 Mar; **184** (4): 531-7.

Ross, M.G., Fresquez M., El-Haddad M.A. 2000. Impact of FDA advisory on reported vacuum-assisted delivery and morbidity. *J Matern Fetal Med*, 2000 Nov-Dec; **9** (6):321-6.

Ross, J.A., Winfrey, W.L. 2001. Unmet Need in the Developing World and the Former USSR. Unpublished manuscript available through Worldwatch Institute at <a href="https://www.wwpub@worldwatch.org">wwpub@worldwatch.org</a>.

Sarkar, N.N. 1999. Emergency contraception. *Int J Clin Pract*, 1999 Apr-May; **53** (3): 199-204. Seattle Times. June 4, 2002. U.S. calls warming a threat but urges no new actions. By Elizabeth Shogren, Los Angeles Times writer. Available online at <a href="archives.seattletimes.nwsource.com/cgi-bin/texis.cgi/web/vortex/display?slug=warming04&date=20020604&query=bush+warming.">archives.seattletimes.nwsource.com/cgi-bin/texis.cgi/web/vortex/display?slug=warming04&date=20020604&query=bush+warming.</a>

Scientific American. April 4, 2001. Aborted Thinking: Reenacting the Global Gag Rule Threatens Public Health. Available online at http://www.sciam.com/2001/0401issue/0401scicit1.html.

Scott & White Hospital Dept. of Obstetrics & Gynecology. 2002. Assisted Reproductive Technology (ART). Fact Sheet, available online at <a href="http://www.sw.org/depts/obgyn/clinical/rep\_art1.htm">http://www.sw.org/depts/obgyn/clinical/rep\_art1.htm</a>.

Smith, C. et al. 2002. Letter Signed by Bipartisan Group of 55 Members of Congress Asking President Bush to Zero-Fund UNFPA. January 31, 2002. Available online at <a href="https://www.lifesite.net/ldn/2002/feb/020201a.html">www.lifesite.net/ldn/2002/feb/020201a.html</a>.

Taipei Times. March 23, 2001. Baby-eating photos are part of Chinese artist's performance. Available online at <a href="http://www.taipeitimes.com/News/local/archives/2001/03/23/78704">http://www.taipeitimes.com/News/local/archives/2001/03/23/78704</a>. Accessed Feb. 4, 2007.

UNFPA (United Nations Population Fund). 2002. Humanitarian Response in Emergency Situations. Index of general press releases available online at <a href="https://www.unfpa.org/tpd/emergencies/index.htm">www.unfpa.org/tpd/emergencies/index.htm</a>.

United Nations, Population Division. 1995. Women's Education and Fertility Behavior: Recent Evidence from the Demographic and Health Surveys. New York: 1995.

United Nations. 2001. World Population Prospects: The 2000 revision. New York: 2001.

United Nations Population Fund (UNFPA). 1999. The State of the World Population 1999. New York: 1999.

United Nations Population Fund (UNFPA). 2000. The State of the World Population 2000. New York: 2000.

United Nations Population Fund (UNFPA). 2002a. China Country Programme. Available online at <a href="https://www.unfpa.org/regions/apd/countries/china.htm">www.unfpa.org/regions/apd/countries/china.htm</a>.

United Nations Population Fund (UNFPA). 2002b. Personal contacts between myself, Director of Information and External Relations Stirling Scruggs, and Media Services Chief Kristin Hetle via e-mail during May, 2002.

- U.S. Bureau of Census. 2002. Historical Estimates of World Population. Available online at www.census.gov/ipc/www/worldhis.html.
- U.S. Food & Drug Administration (USFDA). 1998. Public Health Advisory, May 21, 1998. U.S. House of Representatives. 1998. Forced Abortion and Sterilization in China: The View from Inside. Hearing before the Subcommittee on International Relations. June 10, 1998. Available online at <a href="mailto:commdocs.house.gov/committees/intlrel/hfa49740.000/hfa49740">commdocs.house.gov/committees/intlrel/hfa49740.000/hfa49740</a> Of.htm.
- U.S. House of Representatives. 2001. Coercive Population Control in China: New Evidence of Forced Abortion and Sterilization. Hearing before the Subcommittee on International Relations. Oct. 17, 2001. Available online at <a href="https://www.house.gov/international\_relations/75761.pdf">www.house.gov/international\_relations/75761.pdf</a>.
- U.S. Newswire, National Desk. 2000. HLI's Population Group gains Financial Independence. July 5, 2000.
- U.S. Newswire, National Desk. 2001. PRI Praises Bush for Tough Stand Against Disastrous Kyoto Treaty. July 25, 2001.
- U.S. State Dept., Bureau of Democracy, Human Rights, and Labor. 2000. China (Includes Hong Kong and Macau) United States Department of State's Country Reports on Human Rights Practices 1999. Feb 23, 2000.
- U.S. State Dept., Bureau of Democracy, Human Rights, and Labor. 2000. China (Includes Hong Kong and Macau) United States Department of State's Country Reports on Human Rights Practices 2000. February 2001.
- U.S. State Dept., Bureau of Democracy, Human Rights, and Labor. 1999. China (Includes Hong Kong and Macau) United States Department of State's Country Reports on Human Rights Practices 2001. March 4, 2002.

Wall Street Journal. 1984. Salvadorans Doubt Benefits Will Accrue From Coming Election. By Greenburger, R.S. & Nazario, S.L. Feb. 27, 1984.

World. May 20/27, 1995. Unspeakable Delicacy, Cannibalism Makes the Chinese Communist Crime List. By Mindy Belz.

World. March 28, 1998. Who's Calling the Tune? Available online at <a href="https://www.worldmag.com/world/issue/03-28-98/">www.worldmag.com/world/issue/03-28-98/</a>.

World. Oct. 30, 1999. Ethnic Cleansing in a Pill. Available online at <a href="https://www.worldmag.com/world/issue/10-30-99/">www.worldmag.com/world/issue/10-30-99/</a>.

World. Sept. 22, 2001. Sinflation. By Joel Belz. Available online at <a href="https://www.worldmag.com/world/issue/09-22-01/opening\_1.asp">www.worldmag.com/world/issue/09-22-01/opening\_1.asp</a>. Editor Marvin Olasky thoughts in the same issue

are at "Remarkable Providences: If We Call, God Will Answer". Available online at <a href="https://www.worldmag.com/world/issue/09-22-01/closing">www.worldmag.com/world/issue/09-22-01/closing</a> 2.asp.

World Health Organization (WHO). 2000. Female Genital Mutilation, Fact Sheet No. 241. Geneva: June 2000.

World Health Organization (WHO). 1995. Female Genital Mutilation: Report of a WHO technical Working Group. Geneva, July 17-19, 1995. World Health Organization, Geneva, WHO/FRH/WHD/96.

Yunus, M. & Jolis, A. 1998. Banker to the Poor. The autobiography of Muhammed Yunus, founder of the Grameen Bank. *University Press Limited*, 1998 & 2000.