

Life on the Front Lines

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--- Warren M. Pearse, MD, Editor.

The first abortion I performed was for a 17-year-old high school student who told me as I talked to her before the operation that she wanted to be a doctor and an anesthesiologist. I was terrified, and so was she. She cried after the operation for sadness and relief. Her tears and the immensity of the moment brought my tears. I had helped her change her life. I was relieved that this young woman was safe to go on with her life and realize her dreams. I felt I had found a new definition of the idea of medicine as an act of compassion and love for one's fellow human beings, an idea that I gained from learning about Albert Schweitzer. I had followed that ideal by working as a medical student at a Schweitzer-inspired hospital in the Peruvian Amazon in 1964 and later as a Peace Corps physician in Brazil. It was a long way from Schweitzer's primitive hospitals in the steaming jungles of Gabon and Peru to the operating room at Preterm Clinic in Washington, DC, in 1971. But to me, this was a renewed and compelling expression of that fundamental commitment in medicine that comes down to us from Hippocrates, Galen, and Ambroise Paré through Maimonides, the Jewish physician of 12th century Spain, who wrote "...and let me only see the suffering person, my fellow human being in pain."¹

That moment in Preterm, the first freestanding abortion clinic in the nation's capitol, led me to the tumultuous experience of providing abortion services through a time of great upheaval over this issue in our nation's history. I was working at the time at the Office of Economic Opportunity to change federal government restrictions on abortion funding,² and I began corresponding with various abortion rights groups such as the National Association for the Repeal of Abortion Laws and the Women's National Abortion Action Coalition. I was privileged to hear the Supreme Court arguments in the *Vuitch*, *Roe v Wade*, and *Doe v Bolton* cases and to know the doctors and lawyers involved with the cases. Although I was keenly interested in the public health and social justice aspects of abortion, I did not see myself providing services or even practicing clinical medicine.

After returning to Colorado, I worked part-time as the medical director of a family-planning training program under private contract with the US Department of Health, Education, and Welfare. Bringing doctors in the Rocky Mountain region information about new abortion methods was part of my work. In April, 1973, I was asked if I would be interested in helping start a nonprofit abortion clinic in Boulder. I said I would, because I now saw the main challenge before us as implementing the Supreme Court's recent *Roe v Wade* decision. The freedom to choose a safe and legal abortion meant nothing without someone willing to do it. I thought it would be a valuable thing to do while I was preparing to go back to graduate work in

epidemiology. It allowed me to put my beliefs about the need for this service into action. I did not feel highly prepared, but I felt confident of my basic surgical and medical skills.

After meeting with the group in Boulder and coming to an agreement about the project, I responded to their request that I write a program plan and set up the clinic. I made myself medical director reporting to the executive director, who was a sociology graduate student, and the board of directors, which was composed of dedicated individuals who were deeply concerned with safe abortion.

In trying to establish relationships with the Boulder medical community, I applied for privileges at Boulder Community Hospital to be able to admit patients with complications. The chairman of the obstetrics-gynecology staff had been one of my attending physicians when I was in medical school in Denver. He was deeply opposed to abortion, which I discovered at the first obstetrics-gynecology staff meeting I attended several days after we opened the clinic in November 1973. The conversation stopped as I entered the meeting area that had been set off by sliding screens in the hospital cafeteria. Several other staff doctors were also opposed to abortion. Other physicians on the staff, who regarded abortion as a menial operation but one that must be performed by someone specially trained in obstetrics and gynecology, did not think someone like myself without that residency training should do abortions. There were one or two who were silent and raised no opposition. They proved to be my allies in a long struggle.

About this time, a local newspaper reported attacks by the newly formed Fight The Abortion Clinic Committee (FTACC) in Boulder, which demanded that the city council close the clinic as a "clear and present danger" to community health. We were accused of "corrupting the youth" because the clinic was only a block from a public junior high school and a Catholic school. I thought of Socrates and felt solace.

The FTACC requested a special meeting of the Colorado Board of Health, to which the FTACC alleged virtually that we were running a butcher shop. I came to the meeting prepared with the statistics, including complication rates and follow-up rates, for our first month's patients. I also informed the Board that regulations requested by the FTACC would probably violate the *Doe v Bolton* companion decision to *Roe v Wade*. The meeting was widely (and favorably, from our point of view) covered by the regional news media. The board decided to leave us alone.

At the November meeting of the Boulder County Medical Society, a group of antiabortion doctors formed a committee with the purpose of getting the society to pass a resolution asking the state and county health boards to declare the clinic a "clear and present danger" to public health and requesting the boards to shut down the clinic. One of my classmates from medical school recommended an investigation of the clinic before deciding on the resolution. On the day of the December meeting, we were visited by a delegation from the committee, two antiabortion physicians (including the hospital obstetrics-gynecology department chairman). I took them on a guided tour and explained our procedures. At the meeting that evening, the committee chairman (also strongly antiabortion), to the astonishment and dismay of our opponents, announced that our standards of medical care were "exemplary and commendable" and "equal to the highest standards of medical care in the community." The resolution opposing us was derailed by a friendly pediatrician.

In December, the day after the Colorado Board of Health meeting and the week after the medical society meeting, I went to a quarterly meeting of the Boulder Community Hospital Medical Staff, where my request for hospital privileges would be decided. A rancorous debate over my privileges went on for 45 minutes. The antiabortion department chief argued against my staff appointment on several grounds. He said I lived too far away to see a sick patient in an emergency, which was necessary before a consultant would see her. Someone pointed out that this had not been a problem for a neurosurgeon from Denver who had requested and received privileges the year before. The debate ended when an obstetrician-gynecologist whom I had met,

and who was strongly pro-choice, stood up and guaranteed his consultation if I needed it at any time. My appointment was approved by a narrow majority.

When we started in the first week of November 1973, we were the only freestanding abortion clinic in Colorado. The pickets began. The Boulder Valley Right-to-Life Committee sent out lurid brochures covered with pictures of dismembered fetuses to every household in Boulder County. I began to get threatening phone calls at home, every night I was home, all night. I was afraid to get out of my car when I got home. I got a rifle and kept it by my bed. Two nights a week, in order to be available for patients who might have problems from the first day of laminaria insertion to the next day of abortion procedure, I slept on one of the cots in the clinic's recovery room. In the evenings, I worked on charts and wrote letters to people who referred patients. I knew hardly anyone in Boulder and had no friends in town except for a couple of classmates from medical school, and our lives were very different. They had normal medical practices, they had families and friends, and they were already leaders in the community.

When the weekend came, I went to my mountain home to relax. It did not seem to me that the people I met in Boulder, save those at the clinic, were very supportive of what we were doing, although they may have been more supportive than I knew. I just saw the hate letters and got the threatening phone calls.

Picketers would walk in front of the clinic during work hours from time to time. I would go out in my green scrub suit and ask them what they were doing. Sometimes I would just make pleasant remarks. They carried signs saying I was a murderer. It gave me some satisfaction for a time to know that I was irritating them.

In the summer of 1974, a Denver television station decided to have a major program on abortion set up as a debate. I debated a family doctor who was head of the Boulder Valley Right-to-Life Committee. Each of us was flanked by two supporters. I have no idea how many people saw the program, but it seemed to help make me a target of opprobrium of the antiabortion fanatics. After a subsequent debate, I had to be taken out the back door to escape the antiabortion mob that threatened to come up over the desk separating the speakers from the audience.

That summer of 1974, the Denver chapter of the National Organization for Women held an outdoor rally at East High School in Denver to honor those who had helped women's rights and progress. I was one of those they chose to honor.

At the rally, the antiabortion fanatics showed up shouting my name and calling me a murderer. They had numerous signs showing my name and various descriptions of me, none of them flattering. As I began to speak, they began to shout. I spoke above them. It was a little frightening, it was exhilarating, and I was all but overcome with emotion. There was really something fearsome about people who hated me so much and who would go after me in a personal way. I spoke of the need for safe and legal abortions for the sake of women and their families. I said we would not return to back-alley abortions for the same reasons that we would not go back to slavery, public flogging, and the bubonic plague. That barbaric time in history is over. I felt defiant. But also felt afraid of what those people might try to do to me. It was a defining moment.

At the end of the first year of operation, it was clear that those who held power at Boulder Valley Clinic and I had very different ideas about what we were doing and why.³ They wanted no one person in charge of the clinic nor did they want a medical director. Among other things, they abolished my job and title but not my responsibilities. After long weeks of painful debate, I resigned.

I felt by this time that providing abortion services was the most important thing I could do in medicine. I took my last week's salary and used it as a deposit on a small office space, being careful not to tell the lease manager that I planned to do abortions. I knew that revealing this would make it impossible to find office space in Boulder. I went to a local bank to look for help. The banker expressed the view that my former employer, the abortion clinic, had brought a lot of

“undesirables” into town. I didn’t know if he thought or realized that I was one of the “undesirable” elements to which he referred, but I did not go to pains to explain to him the objectives of my medical practice. I borrowed \$7000, remodeled the office, and saw three patients on the second anniversary of *Roe v Wade*. Four years later, when the doctors upstairs moved to their own building, I took over their space and, with more loans, I bought the building so I could not be kicked out later by an anti-abortion owner.

Now we faced the street across from the hospital. The picketers began to make regular visits to my office. By this time, I had to change my home phone number and have it unlisted.

On one occasion, I went out to the parking lot to write down the license numbers of cars whose owners were picketing and harassing my patients. One of the picketers got in his car and tried to run over me in the parking lot. At the time, I was running about 5 miles a day and I could escape the car’s path, but it was frightening because I could see him coming after me. I reported this incident to the Boulder police, but there was no prosecution. The man was a regular demonstrator at my office.

The patients came from all over – first Colorado, then all of North America. Their stories were compelling. We gave each patient careful individual attention. I found that getting to know the patients and their families was the most rewarding part of the experience, and it was gratifying to see what a positive event this was for them in their lives. Each day, each patient, some more than others, convinced me of the absolute need for the service we were providing and the need for it to be as high a quality as we could make it.

We did not just provide a medical service. We had to solve important problems for individuals and families that frequently had nowhere else to turn. We dealt with problems of acute emotional need and suffering, acute family and social disorganization, frequently under circumstances of severe economic deprivation and social injustice, individual grief and loss, occasional psychiatric disorder, and wrenching religious and philosophical issues, all in a context of public controversy.

In my own way, I worked to find better ways of *doing* abortions safely, especially second-trimester abortions, because they seemed hard to get and more dangerous than early abortions.⁴⁻⁸ In 1984, my textbook, *Abortion Practice*, was published. The publisher was deluged with hate mail and threats of boycott. In 1989, the publisher destroyed more than 300 of the remaining 350 books and took it out of print. The next year, I formed my own publishing company and published the book in a softcover edition to keep it in print.⁹

The attacks on abortion rights had begun to escalate from civilized debates to personal and legislative attacks. Colorado was led by a strong pro-choice Governor, Dick Lamm, who had successfully introduced the nation’s first abortion reform law and saw it passed into law in 1967. But the Colorado legislature was increasingly controlled by those who were not pro-choice.

On November 5, 1980, the day after his election, Ronald Reagan held his first press conference. The very first thing he said was that he intended to make abortion illegal.¹⁰ After he took office and lent the power of the Presidency to the antiabortion fanatics, the violent attacks on clinics increased dramatically.¹¹⁻¹³ The demonstrators were literally on our doorsteps. Threats on my life and harassment of all kinds increased. The fetus became a fetish object for the antiabortion fanatics, a moral symbol that justified their actions.

Our only option for taking the high moral ground was to place our own lives and bodies on the line. We must risk our lives for our cause by continuing to provide safe abortion services in the face of these threats and attempts to intimidate. Only our own moral courage in doing what we see as right and ethical could be an effective counterpoise to the antiabortion movement.

By December 1984, two dozen abortion clinics had been completely destroyed in that year alone. The head of the FBI, William Webster, declared that violence against abortion clinics was “not terrorism” because the FBI didn’t know the identities of the perpetrators.¹⁴

On October 19, 1985, a rock was thrown through the front window of my clinic, hurled by a follower of Joseph Scheidler, head of the Chicago Pro-Life Action League of Chicago, who was

due to arrive in Boulder the following week. Scheidler, whose 6'4" bulk towered over me, told me to my face in 1984 that he was coming to Boulder to "shut down" my clinic. He was now about to attempt to deliver on his threat. He was scheduled to speak at the University of Colorado at the invitation of a right-wing group and to work with the local Right-to-Life group to close my office.¹⁵

On the following Monday, the glass company was due to replace the plywood covering the empty frame with new glass. I cancelled the repair job, and when I got to the office, I made a hand-lettered sign, "THIS WINDOW WAS BROKEN BY THOSE WHO HATE FREEDOM.." The sign was at Scheidler's back as he spoke to the television cameras that afternoon.

Several months later, I was sued for slander by the antiabortion groups for publicly stating that they had created "an atmosphere of violence and confrontation."¹⁶ but I was defended free of charge by some of the best constitutional lawyers in Colorado, and the antiabortion groups had to pay attorney's fees.

The connection between attacks on abortion by Ronald Reagan and other high officials and antiabortion harassment and terrorism were increasingly plain for anyone to see,¹⁷⁻¹⁹ but it did not seem to be of much concern to the public or to opposition political leaders. On February 6, 1988, the day Ronald Reagan announced the "gag rule" and the day after Pat Robertson spoke to the New Hampshire legislature and accused Planned Parenthood of trying to create a "master race" by providing abortion services, five bullets were fired through the front windows of my waiting room with a high-powered rifle.^{20,21} The next day, I held a press conference on my front lawn to denounce the criminals who did it, and offered a reward of \$5000 for information leading to their arrest. We installed bulletproof windows and electronic security systems at a cost of tens of thousands of dollars.

The gunshots fired into my office occurred in the same week that my divorce was final. The two events were not unrelated, because the antiabortion harassment had a disastrous effect on my marriage of 6 years. The juxtaposition of the two events did nothing positive for my self-esteem.

On September 25, 1988, while campaigning for the Presidency, George Bush expressed the view that doctors who do abortions should be imprisoned. He was elected by a landslide.

On October 10, 1990, Joseph Scheidler's protégé, Randall Terry, national head of Operation Rescue, stood with his followers in front of my clinic and prayed for my death. CBS's "60 Minutes" showed a tape of Terry's prayer on their broadcast concerning the "Lambs of Christ" on February 2, 1992.

As of March 1, 1993, there had been 1285 acts of violence against abortion clinic facilities and doctors' offices. Over 100 facilities had been completely destroyed.

On March 10, 1993, Dr. David Gunn was assassinated by an antiabortion demonstrator in Pensacola, Florida. The murder was tacitly condoned by antiabortion leaders and condemned by President Clinton, in office for 6 weeks. Congressional leaders and Janet Reno, US Attorney General, called for federal protection for abortion clinic workers.

What did Dr. Gunn represent to the antiabortion fanatic who killed him? He represented individual dignity. He represented opportunity for women to become full citizens and participants in our society. He represented social change. He represented the value of the individual adult human being as opposed to state control of individual lives and fascist totalitarianism. He represented a thought. The man who killed Dr. Gunn tried to kill a thought.

Dr. Gunn's crime was not that he killed children, which he did not, but that he brought liberty and health to women. He saved their lives and futures. That's why every doctor in America who does abortions lives under a death threat.

On August 19, 1993, an Oregon woman active in antiabortion activities shot Dr. George Tiller in Wichita, Kansas in both arms in an attempt to assassinate him. He returned to see his patients the next day.

In November 1993, both houses of Congress passed legislation making it a federal crime to assault patients and health workers at abortion clinics.

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For further commentary by Dr. Warren Hern go to www.drhern.com