The National Abortion Federation’s mission is to ensure safe, legal, and accessible abortion care to promote health and justice for women.

NAF is a 501(c)(3) non-profit organization. Gifts to NAF are tax-deductible in the U.S. to the extent permitted by law.
Message from NAF’s Board Chair  Pat Smith, MD

Thirty years ago, a group of advocates and abortion providers envisioned a national professional organization of their own. Their vision became the National Abortion Federation. We’ve come a long way in 30 years, and made many changes, but one thing that hasn’t changed is our commitment to meeting the needs of abortion providers and patients.

What started as a two-person office has grown into an international organization with members in the U.S. and Canada. Today, NAF sets the standards for quality abortion care in North America and provides members with a variety of programs including continuing medical education, group purchasing, on-site security trainings and support, as well as a sense of community. Through our toll-free Hotline, NAF is able to offer unbiased information about abortion and referrals to providers of quality care for women in both countries.

NAF has a proud history and has accomplished so much in the last 30 years. It has been my great pleasure to serve as NAF’s Board Chair, and I am confident that with such outstanding membership, there is no limit to the ways we can support each other and serve women for years to come.

Message from NAF’s President and CEO  Vicki Saporta

As NAF celebrates 30 years of ensuring that abortion is safe, legal, and accessible, I am proud to continue to serve our dedicated membership—many of whom have been involved in NAF since the very beginning. It is my privilege to present this Annual Report, which commemorates NAF’s many accomplishments and rich history.

In addition to our 30-year anniversary, we had another reason to celebrate in 2007. In November, NAF received a multi-million dollar donation that has enabled us to subsidize the cost of abortion care for low-income women through our toll-free Hotline. This gift has far surpassed any we’ve ever received, and enabled us to help women on a larger scale than we ever thought possible. We have received so many letters from women thanking us for helping them obtain the abortion care they need. This is an extremely exciting program, which helps us make a difference in the lives of thousands of women every month.

I’d like to thank our Board of Directors, staff, membership, and all of our generous funders and supporters for their many contributions, which help ensure NAF’s continued growth and success as we prepare for the next 30 years and beyond.
Since 1977, NAF has filled the traditional role of the medical “establishment”—to ensure the safety and high quality of abortion practice—with standards of care, protocols, and medical education.

The vision for NAF took shape at the first national symposium on abortion after Roe v. Wade held in Knoxville, TN in March 1975. During the symposium, two providers, Penny Steenblock and Joan Crowley, suggested those interested in founding a national organization of abortion providers meet together immediately following the last session. The 25 or so people who stayed, a mixture of non-profit providers, independent clinic owners, and other interested parties, discussed the need for a provider-driven organization. A committee was formed to plan the creation of the National Association of Abortion Facilities (NAAF).

At a meeting of the NAAF group in May 1975 in Cleveland, committee member Frances Kissling announced that her vision of a national professional association concerned primarily with standards of care and access for all women was at odds with the emerging mission of NAAF as primarily a provider service organization, and she resigned from the committee. Subsequently she met with a small group of like-minded providers and supporters who decided to found a national professional organization to be called the National Abortion Council (NAC). With Kissling as Chair, the NAC organizing committee expanded to include a variety of providers, researchers, and advocates.

Kissling’s home in Huguenot, NY became NAC’s first office. Alice White was hired to be the first secretary, and when the office later moved to New York City, Alice moved with it. Early NAC activities included working on the American Women’s Petition, recruiting clinics for membership, and planning for the first annual meeting held in Atlanta, GA in September 1976. At that meeting, the membership attended sessions on medical, legal, and social issues affecting abortion care, and elected a board of directors. Two months later, NAAF held its first annual meeting in Chicago.

According to Kissling, the impetus for founding NAAF came from independent, free standing clinics who felt excluded from various national configurations of providers.

“We faced many challenges in the early years. Among the most challenging were these: learning to bridge the gaps between the for-profit providers and the non-profits and the Planned Parenthoods; deciding on our priorities, given our almost total lack of funding; balancing the need for standards with the desire to create as much access to services as possible. We overcame them, over time, with patience, endless discussions, and the strong desire to create a lasting Federation to serve the provider community.”

– Terry Beresford, founding NAF Member and 2nd Board President
notably the Pre-term and PPFA clinics. Original members of NAC and its board were drawn from that sector and from the abortion rights organizations. National leaders urged both organizations to work toward a merger and a merger committee comprised of the leaders of both groups as well as independent voices in the field developed a merger plan whose key provision was a complex and weighted system of board membership from the various provider groups (profit, non-profit, doctor’s offices, feminist clinics, Planned Parenthood clinics).

Among the members of the merger committee were Christopher Tietze, MD, of the Population Council, Jeannie Rosoff of the Guttmacher Institute, Judy Widdicombe of Reproductive Services in Missouri (NAC), Merle Hoffman of Choices in New York (NAAF), Frances Kissling, and Joan Crowley.

Agreement was reached to call the new organization the National Abortion Federation (thus almost preserving the NAAF initials) and to adopt the NAC model of equal representation for all types of providers. The two boards voted on January 29 in Washington DC to merge and become the National Abortion Federation (NAF) and the memberships approved by mail vote.

Kissling served as NAF’s first Executive Director. The NAF offices were moved to East 58th Street in NY, sublet from Population Services International. Plans were laid to recruit more provider members; committees went to work on issues related to standards, training, legal rights, and public education; and the board held long, often argumentative but productive meetings about abortion practice, diversity, organizational goals, and the needs and rights of women, providers, and the public. Other funding sources were solicited, by-laws were written, and more and more clinics decided to join NAF in an effort to promote access for all women to safe, legal abortion care.

In 1977, the newly formed NAF held its first annual meeting in Denver, CO. Seventy-five institutional members from the former NAC and NAAF groups participated. From the very beginning, NAF has been committed to developing quality educational resources and providing continuing medical education for members. The program in Denver included NAF’s first post-graduate courses: one on Counseling and one on Medical Aspects of Abortion. The 1978 Annual Meeting in San Francisco established the pattern for future meetings, which have continued to expand in content and in attendance every year.

Throughout the last 30 years, NAF has expanded member benefits and programming to include public policy work, quality assurance and security assistance for providers, and direct services for women through our toll-free Hotline. Our membership has also continued to grow and includes physicians, advanced practice clinicians, nurses, counselors, administrators, and other medical professionals at 400 facilities in 47 states and nine Canadian provinces. These health care professionals care for more than half the women who choose abortion each year in both countries.

Members of the first NAF Board of Directors

Judith Widdicombe
  President
Carole Dornblazer
  Vice President
Merle Hoffman
  Secretary
Jeannie Rosoff
  Treasurer
Ignatius DeBlasi
Karen Mulhauser
Frank Susman, Esq.
Joan Babbott, MD
Terry Beresford
Carol Bonosaro
Curtis Boyd, MD
Willard Cates, MD, MPH
Myron Chrisman
Betsy David
Carol Downer
Kenneth Edelin, MD
Karl Fossum, MD
Mildred Hanson, MD
Warren Hern, MD, MPH, PhD
Joseph O’Rourke
Linda Sandler
Leah Sayles
Francine Stein
Ralph Streeter, MD
Christopher Tietze, MD
Lynn Walker
Renee Ward
Roe v. Wade
Supreme Court decision strikes down state laws that made abortion illegal.

1970
Alaska, Hawaii, New York, and Washington liberalize abortion laws, making abortion available at the request of a woman and her doctor.

1972
Eisenstadt v. Baird Supreme Court decision establishes the right of unmarried people to use contraceptives.

1975
The National Association of Abortion Facilities (NAAF) and the National Abortion Council (NAC) were formed.

“I attended the first organizational meeting of the National Abortion Council in an Atlanta hotel in 1976. NAAF began around the same time, and with largely the same mandate. It was a tumultuous time. To have two parallel organizations working independently during this sea change in abortion practice made no sense; merger of the two organizations avoided splintering the small, dedicated group working to make Roe v. Wade a reality for women.”

— David Grimes, MD, former head of the Centers for Disease Control Abortion Surveillance Branch

1977
The NAAF and NAC boards vote to merge and become the National Abortion Federation (NAF). Frances Kissling serves as NAF’s 1st Executive Director (above left).

1977
The first Annual Meeting of the newly formed NAF is held in Denver, CO. NAF’s first Board President Judith Widdicombe (opposite page) addresses the 75 institutional members from the former NAC and NAAF groups in attendance. Members of NAF’s first Board of Directors Kenneth Edelin, MD, and Jeannie Rosoff at the meeting in Denver (above right).

1976
Congress adopts the first Hyde Amendment barring the use of federal Medicaid funds to provide abortions to low-income women.
1977
A revised Hyde Amendment is passed allowing states to deny Medicaid funding except in cases of rape, incest, or “severe and long-lasting” damage to the woman’s physical health.

1979
NAF establishes a national, toll-free abortion hotline.

1979
NAF initiates a Group Purchasing Program and Group Malpractice Insurance Plan.

1978
Uta Landy, PhD, assumes the position of NAF’s 2nd Executive Director (above left).

1978
After a year and a half of debate and deliberation in the Medical Standards Committee, chaired by Warren Hern, MD, MPH, PhD (above right), the first edition of the NAF Standards for Quality Abortion Care is published.
1980
NAF initiates annual Risk Management Seminars.

The Accreditation Council for Continuing Medical Education (ACCME) accredits NAF to deliver continuing medical education in abortion practice.

As NAF continues to grow and expand our involvement in the public debate about abortion, the NAF office moves to Capitol Hill in Washington DC.

1983
NAF members testify in Toronto in the case that eventually went to the Canadian Supreme Court, resulting in abortion being decriminalized in Canada.

1984
Anti-abortion extremists bomb the NAF office (above), several abortion clinics, and the office of the American Civil Liberties Union. Army of God members Michael Bray, Thomas Spinks, and Kenneth Shields were responsible for the crimes and spent time in prison.

Training and Education Director Barbara Radford (left) becomes NAF’s 3rd Executive Director.

1988
NAF member Dr. Henry Morgentaler (opposite) wins his case before the Canadian Supreme Court, *R. v. Morgentaler*, which decriminalizes abortion.

“The Supreme Court decision of 1988, which legalized abortion was a revolutionary decision, really, with tremendous consequences for the health and well being of women. I think that’s the most important thing: the safety of women has increased a hundred-fold.”

— Henry Morgentaler, MD, pioneer for abortion rights in Canada and former NAF Board Member
1985
NAF organizes expert testimony for hearings on violence at abortion facilities, which are conducted by the House Judiciary Subcommittee on Civil and Constitutional Rights.

1989
A NAF delegation joins a record-breaking crowd of 600,000 marching in support of abortion rights during the March for Women's Lives in April (above). NAF co-sponsored the march held in Washington DC.
NAF is instrumental in advocating for the passage of the Freedom of Access to Clinic Entrances (FACE) Act in response to the 1993 murder of NAF member Dr. David Gunn.

In response to federal abortion ban proposals, NAF took the lead in bringing forward courageous women to tell their stories. President Bill Clinton’s decision to veto a federal abortion ban in 1996 was a direct result of the personal stories he heard from patients and families brought to the White House by NAF (above). He continued to cite these women in his decision to veto this dangerous legislation again in 1997.

NAF convenes a national symposium on the role of advanced practice clinicians—physician assistants (PAs), certified nurse midwives (CNMs), and nurse practitioners (NPs)—in providing abortion care and expanding abortion access.
1990 – 1999

1997

NAF founds Midwives for Choice, Nurse Practitioners for Choice, and Physician Assistants for Choice, which later become Clinicians for Choice, in order to organize and educate advanced practice clinicians as abortion advocates and potential abortion providers.

1998

Following the murder of NAF member Dr. Barnett Slepian, NAF and our coalition partners met with Attorney General Janet Reno and successfully advocated for the creation of the U.S. Department of Justice’s National Task Force on Violence Against Health Care Providers. In April 1999, Janet Reno (above) delivers the keynote address at NAF’s Annual Meeting and pledges her commitment to protecting abortion providers and patients.

1999

NAF develops the authoritative textbook on abortion care, A Clinician’s Guide to Medical and Surgical Abortion.

“When NAF published its first textbook on abortion in 1999, it quickly became the standard textbook on abortion care. NAF will launch its new state-of-the-art textbook, written in collaboration with 50 eminent contributors, at the 2009 Annual Meeting, continuing NAF’s leadership in educating providers, students, and residents to meet the health care needs of women.”

— Maureen Paul, MD, MPH, textbook Editor in Chief (above)

1999

NAF launches our first public service advertising campaign with bus shelter and transit system ads in Washington DC, Miami, Seattle, San Francisco, Cleveland, Chicago, St. Louis, and New York City, and print ads in a number of magazines and publications.

1996

At our 1996 Annual Meeting, NAF unveils our new website, which features information for pregnant women, activists, members, and journalists.
In June 2000, the U.S. District Court rules that the Metropolitan Atlanta Rapid Transit Authority (MARTA) does not have a compelling state interest in violating NAF’s right to free speech by refusing to run NAF’s public service ads. After MARTA refused to run the ads, we held a protest at a MARTA subway station and distributed nearly 3,000 leaflet copies of our ads (left). With pro bono legal assistance, NAF filed a lawsuit against MARTA. Following the ruling, NAF settled the case with MARTA, and our ads began appearing in Atlanta for three months.

Food and Drug Administration (FDA) approves mifepristone (formerly known as RU-486) as an option in abortion care for very early pregnancy.

NAF launches an international medical education program to improve access and the quality of abortion care available to women in developing countries.

To provide affordable, sustainable medical malpractice insurance for members, NAF establishes the NAF Professional Liability Program, Inc.

NAF issues the second edition of *Clinical Training Curriculum in Abortion Practice*.

NAF convenes a security symposium to bring together legal experts, law enforcement, researchers, and clinic personnel to address the unique challenges facing providers.

**2000**

NAF launches accredited continuing medical education programs to deliver medical abortion education to health care professionals, including physicians of various specialties, advanced practice clinicians, nurses, counselors, and clinic administrators throughout the country. We conducted “training of faculty” programs for the Medical Abortion Education Project, which reached more than 8,000 participants. Nearly 16,000 health care professionals have participated in NAF-sponsored or supported medical abortion and ultrasound workshops since 2000. NAF’s evidence-based medical abortion education materials have been recognized and adopted for use throughout North America and around the world.

**2000**

In June 2000, the U.S. District Court rules that the Metropolitan Atlanta Rapid Transit Authority (MARTA) does not have a compelling state interest in violating NAF’s right to free speech by refusing to run NAF’s public service ads. After MARTA refused to run the ads, we held a protest at a MARTA subway station and distributed nearly 3,000 leaflet copies of our ads (left). With pro bono legal assistance, NAF filed a lawsuit against MARTA. Following the ruling, NAF settled the case with MARTA, and our ads began appearing in Atlanta for three months.
2001
In order to educate women about the safety and availability of medical abortion, NAF initiates a public service advertising campaign designed to reach 70% of American women between the ages of 18 and 49.

2001
As a result of our work with law enforcement, anti-abortion extremist Clayton Waagner is placed on the FBI’s “Ten Most Wanted” list for sending hundreds of anthrax threat letters to abortion providers. Waagner is the third anti-abortion extremist on the list, joining Eric Rudolph for his involvement in bombings including two abortion clinics, and James Kopp for the murder of NAF member Dr. Barnett Slepian. All three were caught, convicted, and imprisoned. NAF also worked with the media to focus public attention on these extremists and their crimes. Above: Vicki Saporta speaks to the media during the Kopp trial in Buffalo, NY.

2001
NAF successfully challenges the federal abortion ban in National Abortion Federation et al. v. Ashcroft for its failure to protect a woman’s health. The Justice Department appeals rulings by three federal district courts against the ban.

2007
NAF launches the Canadian Program. Above: Dawn Fowler, Canadian Director; Vicki Saporta, President and CEO; Penny Pridéy, MP; Dr. Carolyn Bennett, MP; and Pat Smith, MD, at NAF’s Canadian launch.

2004
Together with our coalition partners, NAF sponsors the March for Women’s Lives in Washington DC. NAF staff and members (right) join the estimated 1.15 million people marching in support of equal access to reproductive health care for women.

2007
National Abortion Federation Canada incorporates as a non-profit organization in Canada.

2003
A federal ban on abortion procedures is passed by Congress and signed into law by the President. NAF immediately challenges the law in court and is successful in obtaining an injunction, blocking enforcement of the law for our members.

2004
NAF successfully challenges the federal abortion ban in Gonzales v. Carhart, resulting in NAF’s injunction being lifted.
Since 1979, NAF has run a toll-free Hotline to provide callers with unbiased, factual information about abortion; options counseling; help in navigating state restrictions; referrals to abortion providers offering quality care; and limited financial assistance. In November, NAF received a multi-million dollar donation that has enabled us to help more women than ever before by subsidizing the cost of abortion care for eligible low-income women. This donation has allowed us to help meet the tremendous unmet needs of low-income women attempting to access abortion care, and profoundly changed the way NAF and our members directly serve women.

The response has been overwhelming and we have already started to receive many letters from patients, thanking us for helping them access the abortion care they so desperately need. In order to meet the demands of this new program, we are increasing our Hotline staff and will be expanding our Hotline office space in 2008.

“As a social worker, I have spent years saying ‘no, that resource does not exist.’ It is so amazing to be able to start saying ‘yes’ to patients in need.”

– Kira Baughman, MSW, Lead Hotline Case Manager
Letters to the NAF Hotline from patients.

To Whom it May Concern;

I am very thankful for your gift. It has helped me get a whole lot. I already had 5 kids and have a lot of complications with my pregnancy. I couldn't go through that anymore. It broke my heart, but couldn't afford the procedure alone, and couldn't get your help. It is a personal choice to have or keep a baby. You are doing the right thing by helping those who need it and affordable. May you help many more women on having their own choice.

I found myself in a desperate situation. I became pregnant at a horrible time in my life; when I was short on money due to an illness. There was no way my body could handle this due to an RSD diagnosis, which is chronic nerve pain. This involves numerous surgeries including a spinal cord implant. I truthfully felt my body could not handle a pregnancy yet my insurance chose not to cover or help with the procedure. Thank you very much.

Dear National Abortion Federation,

It was so nice of you to help me when your generous amount of help was paying for this would have been next to impossible. I'm glad that with your help I was able to be given a second chance to be more responsible and take better control of my life. My desire to be a nurse will actually be easier to achieve now than before. There is a mass amount of people who don't really agree with the decision I made. But until now have waited in my shoes of possibly becoming a teenage mother. Your opinion doesn't matter. Thank you again and your help was greatly appreciated.

Thank you so much for being so prompt in returning my call and answering me in my desperate situation. I don't have any idea what I would have done without your kind words or the help from your organization. It's nice to know there are still people like you that really do their jobs well and make an impact on people's lives.
**Condensed 2007 Financial Information**

### Revenues

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<th>Source</th>
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<tr>
<td>Grants and Contributions</td>
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<td>Membership Dues</td>
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<td>Malpractice Insurance Premiums</td>
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<td>In-kind Contributions</td>
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### Expenses

#### Program Services

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#### Support Services

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<td><strong>Total Expenses</strong></td>
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### Combined Change in Net Assets

$6,058,790

### Net Assets

- Beginning of Year: $2,533,647
- End of Year: $8,370,187

### NAF/PLP Retained Earnings

- Beginning of Year: $622,866
- End of Year: $845,116

*National Abortion Federation 2007 Annual Report*
Recipients of the Christopher Tietze Humanitarian Award

In recognition of the life and many contributions of Christopher Tietze, MD, the NAF Board of Directors renamed the NAF Humanitarian Award, the Christopher Tietze Humanitarian Award in 1984. The Tietze Award is NAF’s highest distinction and honors significant, lifetime contributions in the field of abortion care or policy. Dr. Tietze was active in the founding of NAF and a member of our first Board of Directors.

<table>
<thead>
<tr>
<th>Year</th>
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<td>Benjamin N. Berger</td>
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<td>Judith Widdicombe</td>
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<td>Janet Benshoof, JD</td>
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<td>Terry Beresford</td>
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<td>Suzanne Poppea, MD</td>
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<td>Dennis Christensen, MD</td>
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<td>2005</td>
<td>American Civil Liberties Union Reproductive Freedom Project and Wilmer Cutler Pickering Hale and Dorr, LLP</td>
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<tr>
<td>2006</td>
<td>Felicia Stewart, MD</td>
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<td>2007</td>
<td>Theodore Busheikin, MD</td>
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