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Thursday, May 31, 2012

3 Years After George Tiller's Murder, Reproductive Rights Face New Legislative Attacks, Hate Crimes

Three years ago today, abortion provider Dr. George Tiller was shot dead while attending church in Wichita, Kansas. Reproductive healthcare providers remain the target of violence amid a wave of new legislation curtailing access to safe abortions. Last week, two clinics in Georgia and a women's organization in New Orleans were set ablaze. Today, the House of Representatives votes on the Prenatal Nondiscrimination Act to ban abortions based on the sex of a fetus. Bills are also in the works to ban abortions 20 weeks after fertilization in Louisiana and Washington, D.C. We speak with Vicki Saporta of the National Abortion Federation and abortion provider Dr. Willie Parker. "It's in [Dr. Tiller's] spirit that I seek to maintain that level of commitment to women in their care," Parker says. Addressing the latest wave of attacks against reproductive healthcare, Saporta comments: "There's an unprecedented number of bills being enacted in the states to limit women's access to abortion care. And it's part of an overall agenda that's very well articulated by those who oppose abortion: if they can't make abortion illegal again in this country, they intend to make it inaccessible for women." [includes rush transcript]

Filed under [Women's Health](#), [Vicki Saporta](#), [Dr. Willie Parker](#)

Guests:

[Vicki Saporta](#), president and CEO of the National Abortion Federation. She was friends with former abortion provider Dr. George Tiller, who was murdered three years ago.

[Dr. Willie Parker](#), physician, abortion provider and a board member of Physicians for Reproductive Choice and Health.

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Rush Transcript

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Transcript

AMY GOODMAN: Today marks the third anniversary of the death of Dr. George Tiller, a 67-year-old abortion provider who was shot point blank in the forehead as he attended services in his Wichita, Kansas, church. Dr. Tiller's clinic was one of a handful in the nation that performed abortions after the 24th week of pregnancy. He faced constant threats and incidents of violence and vandalism in the decades leading up to his death. His clinic was bombed in 1985. In 1993, Dr. Tiller survived an assassination attempt with gunshot wounds to both arms. Speaking to the Feminist Majority Foundation in 2008, he described the danger he faced.

DR. GEORGE TILLER: While I was developing this practice between 1973 and 1985, I thought I was just Joe Blow family physician, raising my kids, stamping out disease, and taking family vacations. But that's not true. There are a lot of—it has been impressed on me that there are a lot of people in the United States that don't like what we do.

And this is what an office looks like when it's been bombed at about midnight. Our response was, and still continues to be, "Hell, no, we won't go!" I put up \$10,000 as a reward. Nobody ever collected on it. That was 1986.

We tried to get back to being a normal clinic, but we had to put up some gates and take other security arrangements. And again, I had my head in the sand. I'm taking care of people, one patient—you know, we were trying to make the world a better place to live, one woman at a time. And I said, "No, this stuff isn't going to happen again in Wichita." Well, I was wrong.

AMY GOODMAN: That was Dr. George Tiller speaking in 2008, a year before he was assassinated. The gunman, Scott Roeder, is now serving a life sentence.

The anniversary of Dr. Tiller's murder comes at a time of renewed violence against reproductive healthcare providers. Last week, two women's clinics in Georgia, one of which provided abortion, were hit by apparent arson attacks. A New Orleans group that offers services and education to sex workers, transgender women and poor women of color was also struck by an apparent arson attack last week. According to one report, the arsonist targeted a room with sexual health education materials, including models used to teach self-breast exams and boxes of condoms.

Well, today reproductive rights activists are organizing to honor George Tiller's work and to mobilize against a wave of new legislation curtailing women's ability to access to safe abortions. Today, the House of Representatives votes on new legislation to ban abortions based on the sex of a fetus. The Prenatal Nondiscrimination Act would impose possible fines and prison sentences of up to five years on doctors who knowingly perform abortions based on sex.

At the state level, the latest round of restrictions are bans on abortion in later pregnancy. In Louisiana, two bills appear close to final passage. One bill bans abortion 20 weeks after fertilization, except in cases where the mother's life is in danger. Under the new bill, doctors who perform an abortion after 20 weeks could face a prison sentence of up to two years. At least seven states now ban abortion after 20 weeks of pregnancy based on the medically contested notion that a fetus can feel pain at that stage.

A similar measure banning abortion at 20 weeks in Washington, D.C., has also

been pushed by Republican Congressman Trent Franks of Arizona. The District's only elected representative in Congress, Eleanor Holmes Norton, was denied the chance to testify against the bill at a House subcommittee hearing earlier this month.

For more, we go to Washington, D.C., where we're joined by two guests. Vicki Saporta is president and CEO of the National Abortion Federation. She was a friend of Dr. George Tiller. And we're joined by Dr. Willie Parker, a physician, abortion provider and board member of Physicians for Reproductive Choice and Health.

We welcome you both to *Democracy Now!* Vicki Saporta, let's start off by—well, you knew Dr. George Tiller, who was killed three years ago today. Talk about what he did, his mission and what happened.

VICKI SAPORTA: He was a remarkably generous and compassionate physician, and we heard stories in memorial services all over the country from people who referred patients to him.

NAF runs a toll-free hotline, and we referred one woman in the winter. She was from a Southern state. She couldn't afford the care that she needed. And he offered to provide the abortion free of charge if she could get to Wichita. And so she drove there, and he found out she was sleeping in her car without a coat. And he instructed his staff to find her a hotel room, to provide her with a coat, with shoes, with food. And so, not only did he provide his care free of charge, he also provided her with lodging, food, and treated her with the dignity and compassion that she deserved.

In another case, there was a young rape victim, Annie, who lived in a large Eastern city where she should have been able to receive the care that she needed. Her care was delayed. She couldn't receive the care in her home state. And when Dr. Tiller heard about her case, he offered to take care of Annie. And when this very young rape survivor went to Wichita with her parents, she was greeted by Dr. Tiller and his entire staff wearing pink T-shirts with purple lettering that said "Friend of Annie."

And these are not isolated stories. We hear story after story about the incredible compassion that people were treated with, the excellent care that they received from Dr. Tiller and his staff. He was a remarkable physician, and we miss him every day.

AMY GOODMAN: And talk about what happened three years ago, who Scott Roeder was.

VICKI SAPORTA: We had an extremist who had been planning to murder Dr. Tiller for a number of years, based on his own testimony at his trial. And he went to Dr. Tiller's church twice prior to his being able to carry out his assassination attempt. And his testimony was absolutely chilling. This is a physician that was targeted, as you mentioned in your earlier remarks, and he put up with threats, violence and harassment every single day. And he did it because he knew how important the care he provided was to his patients. And he paid the ultimate sacrifice. He was an incredible physician, and he has left a huge void in our community that others are trying to fill.

AMY GOODMAN: I want to play a bit—

VICKI SAPORTA: But as I said—

AMY GOODMAN: —of what Scott Roeder said at his sentencing hearing back in April of 2010. Roeder repeatedly defended his crime.

SCOTT ROEDER: Had the courts acted rightfully, I would have not

shot George Tiller. The blame for George Tiller's death lies more with the state of Kansas than with me. The state of Kansas permits, protects and promotes the slaughter of these children. George Tiller was their hit man.

AMY GOODMAN: That's Scott Roeder. In fact, he had tried to go after another clinic, and a clinic worker there had reported what he had done, gumming up the locks. And yet, he wasn't stopped. Scott Roeder didn't just do this for the first time there at the Wichita church, murdering George Tiller, Vicki.

VICKI SAPORTA: Oftentimes these extremists start with lower-level criminal activity, and that activity escalates, which is why law enforcement response to clinic violence is so very, very important. Roeder tried to justify his actions, tried to put forward a justifiable homicide defense, which was not allowed, as it should not have been. There is no justification for murdering an abortion provider or any other healthcare professional. And in a civilized society, we can't allow people to settle political differences by murdering one another. And this was an abhorrent act. And he will spend the rest of his life in jail.

AMY GOODMAN: Can you talk about the void left by Dr. Tiller, the closing of the clinic, and access to abortion in Kansas now?

VICKI SAPORTA: There is no abortion provider currently in Wichita, Kansas, so women have to travel some distance in order to obtain the abortion care they need if they live in Kansas. But Dr. Tiller cared for women from all over the world. Genetic counselors, perinatologists referred to his practice, because they knew that their patients would receive excellent and compassionate care. And others have extended their practices and have tried to fill the void by the closing of his clinic, and so we are able to refer women to obtain quality care later in pregnancy.

But Dr. Tiller and his staff and his facility were unique, and we, as a community, still miss him every day. Just listening to his voice reminded me of the many times that he came to our meetings and we spoke. And others were happy to be able to talk to him, to thank him and to get his advice on different cases in patient care. And he was equally generous with his colleagues as he was to his patients. He was a revered, respected and beloved physician.

AMY GOODMAN: Dr. Willie Parker, the issue of providing later-term abortions, which is also what Dr. Tiller was doing, you, yourself, do that, as well. This not only was murdering a physician who did this and taking out the possibility women had in Kansas, but other women would come to him from all over. Can you talk, Dr. Willie Parker, about legislation that would affect where you are, in Washington, D.C., and this unusual move of an Arizona congressman to limit abortions in the District of Columbia?

DR. WILLIE PARKER: Well, first, let me say, on the anniversary of Dr. Tiller's death, that I had the good occasion of meeting—

AMY GOODMAN: I'm sorry, Dr. Parker. We are not hearing—we're not hearing you speak.

DR. WILLIE PARKER: Can you hear me?

AMY GOODMAN: Oh, OK. Go ahead.

DR. WILLIE PARKER: OK. Can you hear me now? I'd like to say, on the anniversary of Dr. Tiller's death, I had the good—

AMY GOODMAN: Dr. Willie Parker—

DR. WILLIE PARKER: Hello? Can you hear me?

AMY GOODMAN: Continue with what you're saying.

DR. WILLIE PARKER: OK. I had the good fortune of meeting Dr. Tiller at the National Abortion Federation meeting three years prior to his death. And his generosity and his kindness was unrivaled. And he welcomed me, because I wasn't always an abortion provider. And it's in the spirit—his spirit that I seek to maintain that level of commitment to women in their care.

Practicing here in the District of Columbia, where—based on a bill introduced by Representative Franks, based on medically inaccurate information around fetal pain, bill that would outlaw abortion beyond 20 weeks, it has the potential to put us, as physicians and healthcare providers, in the position to have to deny care to women who are often in tragic situations and circumstances. What's incredible about this is that this demand for restricting abortion access to women in this situation is not being driven by the people of the District of Columbia, but by political ideology. And the impact on me as a physician is that bin of the tragic cases that I've encountered of women with wanted but flawed pregnancies, or with health issues, will be restricted if this bill is placed into law.

AMY GOODMAN: Why Arizona? Why a congressman from Arizona going after the District of Columbia?

DR. WILLIE PARKER: Well, it's the—it's an artifact of the fact that D.C., the District of Columbia, has not been allowed to achieve statehood and to be self-determining. And because of that, it's in a form of receivership to the federal government. And so, it creates the opportunity for people who are ideologically driven to do political mischief. This is not the first time Senator—or, well, Representative Franks has tried to legislate his very restrictive position on abortion. It has been the first time that he's been able to take it farther. And I think he's trying to capitalize on a strategy that's been very effective, the notion of trying to frame abortion restriction in terms of fetal pain, which, again, is not supported by scientific evidence. And he's basically doing it because he can, because of the situation.

AMY GOODMAN: Dr. Parker, can you talk about what it means to be a doctor who provides abortion up to 24 weeks? Who comes to you?

DR. WILLIE PARKER: Well, as I said, providing abortion up to the legal limit allows me to respond to the needs of women who are albeit a small percentage of women who actually have abortions. In fact, the percentage of women over 21 weeks who have abortion is only 2 percent. Often—2 percent is not a small number. That means approximately 150,000 women annually in the country need this care. And the women who often find out late that their pregnancies are—that they are pregnant or that there's a problem with their pregnancy are often very much desirous of continuing their pregnancy, but when they figure out that the pregnancy that they're carrying is fatally flawed, those women—oftentimes women who are at reproductive age extremes, like extremely young women who have unreliable periods and have difficulty recognizing that they're pregnant, as well as women over the age of 40 who are in the highest risk for having abnormalities of their pregnancy—they are the women who are also in sometimes very chaotic life circumstances. So the pictures vary, but the reality is all women are at risk for an unplanned and potentially unwanted pregnancy, so the reality of needing abortion after 20 weeks cuts across all demographics.

AMY GOODMAN: Vicki Saporta, the arson attacks on women's health clinics just in the last weeks, can you talk about what's happened in Georgia, as well as what's happened in New Orleans?

VICKI SAPORTA: We're very concerned about the escalation of violence in Georgia. We started out with burglaries against some clinics. They escalated to arsons. And the last arson was set not in the middle of the night, as is the usual

pattern, but during the day when patients and staff were at the facility. And we were very lucky that no one was injured or killed in that fire. And the perpetrator showed a complete disregard for human life. And we are working with law enforcement to try to help identify the perpetrator and help in their investigation in any way that we can, so that this person can't do harm to any other facilities or people. We often see that when things escalate, they continue to escalate, unless we have strong law enforcement response, which we do in this case. And we need to find the perpetrator of those crimes.

AMY GOODMAN: Let me ask you about the New Orleans advocacy service organization called Women With a Vision, which provides healthcare and other support for poor women of color. It was the victim of a break-in and arson late Thursday night. I want to go to a clip of the group's executive director, Deon Haywood, explaining what happened.

DEON HAYWOOD: I think I've cried as much as I'm going to allow myself for today. I feel violated. More than anything, I'm concerned about our clients not having a place to come. But the work will continue. It's not going to stop us from speaking out for people who don't have a voice. We've had some issues with people not liking our work or feeling like, why are we helping certain populations of people—you know, formerly incarcerated people, people struggling with addiction, or poor women or low-income women of color and the transgender community. This just gives us more fuel to continue to fight.

AMY GOODMAN: That was Deon Haywood. Vicki Saporta?

VICKI SAPORTA: Well, these are hate crimes. And these are terrorists who are committing these crimes. And we need to find out who's responsible, and we need to prosecute them to the fullest extent of the law. People need to understand that they can't get away with using violence to advance their own personal, private political agendas. And we're calling on law enforcement now to see if these two arsons are in any way related, because sometimes they are. They may not be, but we would like law enforcement to at least take a look at that possibility.

AMY GOODMAN: Dr. Willie Parker, the TRAP laws, can you explain what they are and how they affect abortion providers like you, your work?

DR. WILLIE PARKER: TRAP laws, the acronym actually stands for "targeted restrictions of abortion providers" or "targeted regulations of abortion providers." And, in essence, TRAP laws are rules and regulations that are enforced on abortion providers or clinics that, under the guise of making abortion care safer, they impose burdensome regulations in terms of reporting requirements or spontaneous visits that potentially compromise patient confidentiality, as well as potentially costly renovations of clinic space in ways that have nothing to do with patient safety. The TRAP laws, when they're implemented—and they take various forms in different states—often serve as to make abortion access practically impossible, because if they can't be complied with, the clinics often have to close, or they have a chill effect on providers being willing to provide abortion care.

AMY GOODMAN: And, Vicki Saporta, the House of Representatives voting on the new legislation to ban abortions based on sex of a fetus, people might say this is a good thing. They don't want tests done for a female fetus, and then abortion because the fetus is female. Talk about the origin of this and what it means.

VICKI SAPORTA: This is another bill being sponsored by Representative Franks. There are problems in the world with sex selection in Asian countries—China, India and others—but this is not a widespread problem in the United States. And it's aimed at regulating doctors' speech with their patients and criminalizing doctors for having open conversations that they need to have to provide the quality of care

that women deserve. And the bill wants to criminalize doctors for providing care and wants to have them violate patient confidentiality and turn in their patients if they learn something in the conversation and in the course of their care. This is against all medical ethics and the practice of medicine in the United States. And it's aimed at, again, making abortion care less accessible for women.

AMY GOODMAN: I want to turn to anti-abortion activist Lila Rose's group Live Action, which released a highly edited undercover sting video on Tuesday. The group claims Planned Parenthood is facilitating gender-selective abortions. This is a clip of the video on so-called "gendercide."

LILA ROSE: Even sections of America's population have distorted sex ratios. Gendercide exists on almost every continent. If experts are right and gendercide is taking place in our own backyard, what is being done to protect our girls from the most brutal form of discrimination, violent sex-selective abortion?

AMY GOODMAN: Your response to this, Vicki Saporta?

VICKI SAPORTA: Lila Rose has tried to do sting operations at many Planned Parenthood facilities, and she selectively edits her work. This is not a widespread problem in the United States. They were trying to also include race selection in the bill in Congress, and the outcry from the civil rights community and others forced them to basically take that out of the bill, because there was no basis for it. Congress has passed—the House of Representatives has passed a number of bills to restrict abortion and to make it more difficult for women to access abortion care. And we're seeing the same thing happening in many of the states. There's an unprecedented number of bills being enacted in the states to limit women's access to abortion care. And it's part of an overall agenda that's very well articulated by those who oppose abortion: if they can't make abortion illegal again in this country, they intend to make it inaccessible for women. And they pass a lot of legislation aimed at trying to improve women's safety, when in fact abortion is one of the safest medical procedures provided in the country today and doesn't need to be further regulated.

AMY GOODMAN: Finally, Dr. Willie Parker, you provide later-term abortions. Why do you continue to do this when abortion providers continue to be under such threat?

DR. WILLIE PARKER: Well, I'd like to be as committed as Dr. George Tiller was. And his commitment came from seeing firsthand the need that women have, that reproduction is not as clean and black and white as people like to make it, and tragic situations arise all the time. That need was there when Dr. Tiller rose to meet the occasion. And with his unfortunate assassination, that need has not gone away.

I take commonsense measures, and I'm concerned about my safety, like anyone else, but to be overly concerned about that, for me, represents a distraction. It doesn't leave me position to respond to the needs of women. And so, I, out of a sense of compassion and out of a sense that it's—abortion is healthcare, after not providing this service for women for the first 12 years of my career, I came to realize that it's important that abortion, along with all the other valuable healthcare that I provide for women, be a part of what I do. And I will continue to do that.

AMY GOODMAN: I want to end with the words of Dr. Tiller at an event organized by Feminist Majority in 2008. Dr. Tiller discussed his vision for a more just and humane society.

DR. GEORGE TILLER: I personally see a society that respects the integrity of its citizens to struggle with complex health issues and make decisions that are appropriate for them and their personal lives. I see a society that respects the religious differences of its citizens. I see

a society that rejects hate, rejects judgmental condemnation, and rejects prejudice and racism. I see a government that honors the privacy of its citizens without unwarranted surveillance. I see a society where war is not an option—thank you—and the negotiation with mutual respect is the hallmark, rather than mutual self-destruction. I see a society where the welfare of all—I see a society where the welfare of all is equally important as the riches of the few. I see a world that discusses solutions without demanding its own answers.

We have given war, pestilence, hate, greed, judgment, ego, self-sufficiency a good try. And it failed. We need a new paradigm that consists of kindness, courtesy, justice, love and respect in all our relationships.

Work hard. Be a leader. Your way of life depends on it. And just look at the rest of the world. That's the way the anti-abortion segment of our population wants the U.S.A. to be. And how do we do that? We do it the way we have always done things: we fail our way forward. We consider defeat a temporary inconvenience. And we never, ever, ever take no for an answer. Never take no for an answer. Work hard. Be a leader. The rest of your life depends on it, and the life of your sisters and brothers throughout the world depend on it. Thank you.

AMY GOODMAN: Dr. George Tiller was murdered three years ago today as he went to his church in Wichita, Kansas. Vicki Saporta, thank you so much for being with us, president and CEO of National Abortion Federation, and Dr. Willie Parker, abortion provider, board member of Physicians for Reproductive Choice and Health. We'll be back in a minute.



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