

AFRICAN ANTI-ABORTION COALITION

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Dear Honourable,

"Harmonisation of Health Bills" An Attempt to Pass Abortion into Law

The proposed "Harmonisation of Health Bills" by a committee of the House of Representatives led by Hon. Saadatu Sani, is another secret plan by pro-abortion organizations to integrate all reproductive health programs with primary health care, and achieve passing the Reproductive Health Bill under a different headline. In an article, titled "House Committee On MDGs Targets Harmonisation of Health Bills in Vanguard (Lagos) NEWS Posted to the web on 1st July, 2008 (enclosed), Hon. Saadatu Sani and Hon. Dr Patrick Asadu in collaboration with IPAS, IPPF and other proabortion organizations, attempted to misrepresent abortion to legislators, by looking for a word to replace abortion in the proposed bill. Their aim is to make the taking of life of the unborn child more "acceptable". The article mentions the formation of a committee, which the proabortion Ipas will control. Ipas intends to highlight the issue that maternal mortality will be reduced by passing abortion into law. This is contrary to the scientific evidence from all studies that, a fall in maternal mortality is dependent on improved per capita income and improved level of obstetrics care, rather than abortion on demand. All what legalized abortion has led to in Eastern Europe was high maternal mortality, due to post-abortion complications even when performed by skilled doctors. In Western Europe, abortion legalization targets unwanted rise in immigrant population.

Leading experts in Africa addressed these issues at a Prolife conference on the theme "African Child Under Extinction", where U.S. Congressman Christopher Smith was the guest speaker, held at the Pan African University, Lagos, on February 23rd, 2007. Here are some excerpts of the issues discussed:

According to an EU Policy Centre Report on Human Egg Trafficking, 2006 (attached), the "Harmonization of All Legislations on Health" is the standard approach developed by the pro-abortion European Consortium on Assisted Conception, to legalize abortion in developing countries. The real aim of the European Consortium on Assisted Conception is to facilitate trafficking in human eggs and aborted foetal tissues as sources of Embryonic Stem Cells from developing countries, for Stem Cell Research and Transplantation in industrialised countries. According to the EU Report on Human Egg Trafficking, 2006, the network for Human Egg Trafficking from developing countries has been put into practice in many African countries, the Report specifically mentioned Nigeria, South Africa and Uganda.

The unethical use of foetal tissues for Embryonic Stem Cell Transplantation has been extensively captured in a Report of the World Medical Association. The World Medical Association (WMA) in a Policy statement published at the official website warns that:

“Prominent among the currently identified ethical concerns is the potential for foetal transplant to influence a woman’s decision to have an abortion. These concerns are based, at least in part, on the possibility that women may wish to become pregnant for the sole purpose of aborting the foetus and either donating it to a relative or selling the tissue for financial gain. These concerns demand the prohibition of:

(a) the donation of foetal tissue to designated recipients;

(b) the sale of such tissue; and

(c) the request for consent to use the tissue for transplantation”

The prospects of success of Stem Cell Research in industrialised countries, has posed the ethical challenge for the use of Human Eggs and Aborted Foetal Tissues for transplantation. It has been estimated that, for clinical trials at a large laboratory facility, as many as 10 million human eggs, would need to be harvested from over 100,000 women, within one year. The dilemma for scientists in industrialised countries is on how to obtain this number of human eggs and foetal tissues. This is unrealisable in the industrialised countries, where strict laws allow only the use of imported human eggs for this type of research. Therefore, the biotechnology companies in collaboration with some Leaders of Governments in the industrialised countries hatched a conspiracy, to assure a steady flow of Human Eggs and Aborted Foetal Tissues from Africa, where no prohibitive laws exist, and the practice of abortions to derive foetal tissues could be legitimized. They contrived to make abortion rights, a human rights issue, and smuggled the relevant articles in vague language, into international protocols and conventions (Maputo, CEDAW). They unethically, raised this commercial venture to the level of foreign policy, against Geneva Convention, UN Human Rights Declaration, and Article 3 of the UN Human Trafficking Protocol. The G8 countries went as far as to *tie foreign aid to abortion rights* (see enclosed letter of protest to G8 President), as leverage for this policy to work in Africa. They recruited the services of international proabortion organizations Ipas, IPPF, UNFPA and others, to help enthrone a Trans-Atlantic Embryo and Foetal Tissue trafficking from Africa to Europe and the Americas.

In 2005, they obtained signature and accent to Maputo Protocol from Benin, Burkina Faso, Cape Verde, Comoros, Djibouti, Gambia, Libya, Lesotho, Malawi, Mali, Mozambique, Mauritania, Namibia, Nigeria, Rwanda, Senegal, Seychelles, South Africa, Togo, and Zambia. These twenty Sub-Saharan African countries are among the World’s poorest. To assure success of this policy, they used the Sinding’s Doctrine of *foreign aid for abortion rights*. Dr Steven Sinding was the former Director-General of the International Planned Parenthood Federation (IPPF) (see his CV at the website <http://www.globalhealth.org/news/article/1461>). Dr Steven Sinding devised the doctrine of *foreign aid for abortion rights*, which was formally adopted at the G-8 International Parliamentarians’ Conference on Development in Africa 2005: “*Donors should do all they can to enable universal access to sexual and reproductive health services*”. The Reproductive Health Services has been defined to include abortions at the World Summit on Children 2001, and further emphasized in the G8 Africa Action Plan document. Dr Sinding is now on the board of Abt Associates (<http://www.abtassociates.com>), a biotechnology conglomerate. Abt Associates with partners comprising many biotechnology firms are involved in Stem Cell Research. In other words, Dr Sinding after heading the proabortion IPPF, ends up to own a biotechnology company that will make use of the aborted tissues for transplantation. As exemplified by Dr Steven Sinding, a former World Bank consultant and USAID regional officer, there is a tight link between the international proabortion organizations like IPPF, Ipas, Bill and Malinda Gates Foundation with biotechnology conglomerates. According to Business Week Online of June 14, 2001 (http://www.businessweek.com/bwdaily/dnflash/jun2001/nf20010614_991.htm), Bill Gates has significant stake in major biotechnology firms.

In other words, the proabortion work of these international organizations, though purported as philanthropic aid to Africa, is in conflict with their interests in biotechnology companies. The African women's rights issues raised by these international proabortion organizations, is just a smoke screen, and we must disregard their smear campaign about Africa's backwardness, because of lack of abortion rights. We must endeavor to evolve a homegrown solution for genuine women's right reform, aimed at strengthening the African family within the framework of our culture and traditions, rather than propagation of death from abortions and contraception, that would spiral us into further social decadence and self-extermination.

The EU Policy Report on Human Egg Trafficking 2006, (page 3) identified, a Danish company called Nordica (see http://www.ivf.net/ivf/nordica_fertility_centre_lagos-01295-en.html http://www.boell.de/alt/downloads_uk/Tutkova_Workshop2a.pdf), which has the widest network of centres for human egg collection in Nigeria, sited in Abuja, Lagos, Port-Harcourt, Aba, Enugu etc. The Report also mentions that IPPF is involved in Human Egg Trafficking trade. According to the EU Policy Centre Report, 2006 on Human Egg Trafficking, these traffickers from Nigeria and other countries earn more than £11,000 pounds Sterling per Human Egg at the Bridge Clinic London.

It was estimated that Human Egg Trafficking and sale of aborted foetal tissues from Nigeria could have earned pro-abortion groups as much as \$5 billion US dollars a year for about 200,000 human eggs sold at £11,000, obtained from about 15,000 poor Nigerian women. The cost to Nigeria, would be not less than \$5 billion US dollars in healthcare services, man-hours lost to sick leave, compensation for mortality and disability. The medical complications resulting from human egg harvesting are the most serious and most expensive in health care services, and include kidney failure, liver failure, infertility, and infections.

The proabortion organization Ipas, designed the Ipas MVA Plus, showcased as an instrument for 'safe abortion'. The Ipas MVA Plus is a big vacuum syringe that requires little skill to use, for collection of aborted foetal tissues. The real rationale for the design of Ipas MVA Plus is to make it easy for retrieval of the foetal aborted tissues into the syringe to be recovered, preserved and processed at special collection centres for Stem Cell Transplantation. The World Medical Association warned against this at its official website. The Ipas MVA Plus is anything but safe, because it was designed for use and reuse, and many quacks in Nigeria with no medical skills use it, and reuse it on several patients without proper sterilization, leading to a rising rate of HIV/AIDS infection. The Prolife Groups in Nigeria called for the Ipas MVA Plus to be banned in Nigeria, because it is not safe.

The international proabortion organizations have misguided African policy makers on the need to control population; for example the United Nations Population Fund Agency (UNFPA) recommends that Sub-Saharan African countries with population density of 2 persons per sq km in Gabon to 110 persons per sq km in Nigeria, reduce their population with artificial family planning; while the same UNFPA recommends that European countries with population density of 350-450 persons per sq km increase their population. However, it is now firmly established that, ***for any country to economically and industrially develop, the human population density MUST attain above 300 persons per sq km*** in most of its major population centres. This was the underlying reason for the economic prosperity of the Asian Tigers, China and India, who all have just above 300 persons per sq km. The Western Industrial Revolution spiraled to success when mega-cities attained a population density of over 300 persons per sq km.

The UNFPA from 16th-19th July, 2008, would be organizing a conference involving 250 African traditional rulers, on so-called ways to reduce maternal mortality, by adhering to artificial family planning methods in Africa. They want to circumvent the African governments and grow grass root support for their policy of family planning with sterilization, hormonal contraceptives, intrauterine contraceptive devices (IUCD) and condoms. This is in absolute disregard of the health needs of the Nigerian women, who now because of the use of contraceptives has unprecedented levels of breast, ovarian and cervical cancers, strokes and heart attacks.

In view of these activities, the UNFPA has been declared by the United States Government as an organization committing crimes against humanity in the developing countries, and has stopped all US funding.

It must be remembered that before the Trans-Atlantic Slave Trade, Africa's population was 22% of that of World population, but by the end of slavery, Africa was only 9% of World population, with a dwindling economic output, while Europe and the Americas enjoyed economic boom and industrial revolution from African slave workforce. The African countries must not allow UNFPA, through a systematic Biological Colonialism and Slavery, to undermine their National Interests, to grow into economic giants, for which, the only essential ingredient is human capital development, with growing population density. If this were not so, why are there incentives to recruit educated African young men and women to migrate to USA, Germany, Britain and other European countries. Under the VISA Lottery system, we loose close to 50,000 educated people per year to the USA. The pace of human capital export during slavery was about 50,000 men and women per year. What UNFPA wants, is the repeat of the ugly slave trade history, which was then accomplished by deceiving our grand fathers. The UNFPA has borrowed the same tactics of slave dealers, by attempting to deceive our Royal Fathers to sign on the self extermination policy. We must not allow history to repeat itself again.

The danger of the widespread use of contraceptive pills is not limited to the human population, but also to the environment. The Associated Press Survey showed that, estrogens used in these contraceptive pills, is a stable compound that does not decompose in the environment and shows up in high doses in drinking and waste water, causing the death of fishes in coastal regions, rivers and streams. The female urine after intake of contraceptive estrogen compounds sinks into the ground water aquifers and destroys aquatic life. The reports on contraceptives destroying the aquatic life in the US and Britain has been certified by their Environmental Agencies and the report is accessible at BBC website of 10th October, 2004: http://news.bbc.co.uk/go/pr/fr/-/2/hi/uk_news/3882159.stm. These observations have been made also in African cities. There is need to ban or restrict significantly the use of oral contraceptives in Nigeria.

Similarly, the use of intrauterine contraceptive devices (IUCDs) is a leading cause of uterine bleeding, and infectious complications in women. The IUCDs do not prevent pregnancy; they kill the foetus after conception by intoxication with heavy metal copper and impregnated contraceptives. The dead foetus has to be eliminated by the body's immune system. Many diseases of autoimmune origin are directly related to the monthly death of a foetus in a woman carrying an IUCD. The tissues of the woman are later attacked by her own rooming auto-antibodies, causing all forms of rheumatic diseases including rheumatic arthritis and rheumatic heart valve diseases, all on the rise in Nigeria. The IUCDs should also be banned in Nigeria and replaced by scientific natural family planning, which is 100% effective if followed by a combination of methods. The Prolife organizations have already demonstrated to the Senate and Heads of States in Africa that, based on WHO database, *the more condoms used by any African country, they higher the HIV/AIDS prevalence*. The Ghanaian Food and Drug Board was first to certify that Gold Circle condoms used in Africa were not protective against HIV infection. Abstinence rather than condom use should be the main stay of HIV/AIDS prevention strategy as was demonstrated in Uganda.

The reach of these international proabortion organisations is extensive. They have sort through grants to change the educational curriculum in secondary schools in Nigeria, to include issues of so-called sex education; which just amounts to teaching the biology of the sexual reproductive system to condition children to do it yourself abortion and contraceptive mentality. At present Ipas is promoting the use of a drug called misoprostol in Nigeria; it allows a young girl to induce abortion by herself. Such a drug has to be taken off the self by NAFDAC. The so-called sex education already in the new curriculum in schools, promoted by the new education grants, makes it feasible to achieve this objective of self induced abortions, deceptively called 'miscarriages' by Ipas.

The grants given for health issues to Nigeria, by these international proabortion organizations are worthless, since they aim at skewing the primary health system towards reproductive health services, to the detriment of many important and successful programs. For example, the health personnel involved in diarrhoeal disease prevention using the highly acclaimed ORT, have now been diverted to family planning services, leaving Nigeria with rising child mortality from diarrhoeal diseases. In other words, accepting grants that skew the health system to the areas of interest to donors takes us farther away from attaining MDG goals. These aid programs are sometimes even dangerous, especially when related to vaccines for malaria and other tropical diseases. It has been reported that, proabortionists used the opportunity to merge the vaccines with immunogenic strains, which could cause infertility in African women. One incident, described the use of tetanus vaccine that caused infertility in poor African women (see www.fathersforlife.org <http://fathersforlife.org/health/abortion.htm>). If this is successful on a large scale done say for malaria vaccine in women, it will trigger off a boom for IVF egg donations programs as plausible solution to the infertility, and enhance Human Egg Trafficking trade.

The proabortion groups have penetrated all aspects of Nigerian society, including the professional associations in law, medicine, media, legislative bodies, Religion, traditional institutions, governmental ministries and institutions. As a result of this extensive reach, the National of Assembly must be cautious to assess interests of those presenting evidence on the matters concerned. For example, doctors with IVF clinics would not be expected to provide an objective view, on the issue of Human Egg Trafficking, because they are involved. However, there is need for an extensive probe by the National Assembly, to uncover to what extent these international organizations have undermined our National Interests and National Security.

The best defense of our National Interests would be for:

- A. the National Assembly to hold extensive public hearings on all related issues, including several committees (Health, Education, Internal Affairs, Information, Women Affairs, Foreign Affairs, Judiciary, House Ethics, Culture and Religion, etc).
- B. the House may recommend to the Attorney General of the Federation to file a Class Action Lawsuit against the Danish Company Nordica, joining Ipas, IPPF, IVF Clinics, and other international proabortion granting agencies, who by their work have aided this Human Egg Trafficking trade. Of particular mention are the biotechnology firms that have used these Human Eggs in research and transplantation to realize significant developments, with hundreds of billions of US dollars in investments. It may be difficult to trace all the biotechnology firms involved. However, the biotechnology firms use clinical trial companies to coordinate research supplies.

For example, Abt Associates, a clinical trial corporation owned in part by Dr Steven Sinding as director, lists clients at their website: www.abtiassociates.com on February 23, 2007, including representatives of biotechnology companies: Alexion, Amgen, AVANT, AVENTIS Pasteur, AVAX Technologies, Baxter, Biogen, BioMarin, Biopure, Cambridge Neuroscience, Cephalon, Chiron, Cubist, Genetic Institute, Genzyme, IDEC, ImmunoGen, Insmad, Milkhaus laboratory, SmithKline Beecham Biologicals , Tanox Biosystems, Transkaryotic Therapies, and Vertex. Other biotechnology firms with ties to proabortion organizations: Icos Corporation, Seattle Genetics (SGE), Corixa Corporation, Celtech merged with Chiroscience, owned in part by Bill Gates (see BusinessWeek Online June 14th 2001 at www.businessweek.com/bwdaily/dnflash/jun2001/nf20010614_991.htm), Curis Inc. owned by Douglas Mellon, SyStemix Inc and Stem Cells Inc owned by Irvin Weissman, NeuralSTEM owned by Ronald McKay (see <http://www.missourilife.org/news/2001/fall2001.htm>). The listed companies are only examples, on how to trace the biotechnology firms that may benefit from the work of proabortion organizations, it is not a proof of their implication in trafficking.

- Implication with trafficking could be established from submissions of the principal defendant Nordica, who was identified in the EU Report on Human Egg Trafficking, 2006 as the predominant owner of the human egg trafficking network in Nigeria.
- C. A claim of about one hundred billion (\$100 billion) USD would be appropriate compensation for the Nigerian Government. Human Egg trafficking is Human trafficking, under Article 3, of the UN Human Trafficking Protocol, so many Nigerians exported as Embryos and Eggs lost their lives in laboratories abroad. Moreover, in industrialised countries adoption of embryos is guided by the same laws as that of child adoption.
 - D. The cost estimate for compensation was arrived at, from the estimate of what this would be worth, based on the G8 foreign aid package valued at \$52 billion USD, if Africa was to sign on to abortion rights (G8 Africa Action Plan). The other \$48 billion was arrived at by the 10 years of operation of the Trans-Atlantic Human Egg Trafficking by Nordica and their associates.
 - E. The public should also be encouraged to file civil and criminal lawsuits against specific IVF clinics and companies that have denied them of good health by deceit in the IVF egg pouching trade. The claims should be patterned to that, filed by citizens against Pfizer's unethical drug trials in Nigeria.
 - F. Governments of industrialised countries that used foreign aid and foreign policy to skew the health system towards Reproductive Health services in Nigeria, and by so doing enhanced Trans-Atlantic Human Egg and Aborted Foetal Tissue Trafficking, should not be immune to criminal and civil lawsuits at the International Criminal Court, and also at the International Human Rights Court. They have contravened Article 3 of the UN Human Trafficking Protocol and must be liable.
 - G. Nigeria MUST BE BOLD and strong in the face of this international aggression and *Crimes Against Humanity*. We must not shrink away from this confrontation in the name of diplomacy, because our very survival depends on our ability as a Nation to stand against injustice, servitude and **Biological Colonialism**.

Could anyone imagine what it would mean for all Nigerians, if a group of Nigerian doctors and companies with knowledge of the Nigerian government go to collect and sell Human Eggs from poor women in industrialised countries? This problem presents us with a unique opportunity to uplift Nigeria's image abroad, and this can only be accomplished by the National Assembly rising in patriotic unity to defend our motherland.

Most importantly, there has to be a strengthening of the laws to stop this type of abuse by international and national pro-abortion organizations. Nigeria should lead the way in Africa, by strictly regulating all activities of Assisted Reproductive Health Services. The Prolife organizations in Nigeria at a Conference with theme "African Child Under Extinction" on February 23rd, 2007, at the Pan African University Lekki, Lagos, adopted a memorandum of action. This memorandum subsequently led to a draft law that, will establish the Nigerian Authority for Tissue and Embryology Regulation (**NATER**). Enclosed for all House Committee Chairmen, is a full draft proposal of the Law on In vitro Fertilisation and Embryology (**LIFE Act**). It is structured to accomplish the following national objectives: to protect the Embryo, Marriage institution and Family in Nigeria.

We Prolife organizations in Nigeria, call on all patriotic Nigerians to rise and say no to the international pro-abortion organisations, and reject their attempt to establish a "Trans-Atlantic Foetal and Embryonic Tissue Trafficking" in violation of Article 3 of the UN Protocol on Human Trafficking, Universal Declaration of Human Rights (1948), UN Declaration on the Rights of the Child (1959), International Covenant on Civil and Political Rights, Declaration on the Rights and Welfare of the African Child (1979), African Charter on Human and Peoples' rights (1981), African Charter on Rights and Welfare of the Child (1990), and the Constitution of the Federal Republic of Nigeria.

The Prolife organizations condemned the **Protocol to the African Charter on human and People's Rights on the Rights of Women in Africa (2003)** drafted by proabortion IPPF and Ipas, which broke grievously with one of the original human rights principles – to provide legal protection for the child before as well as after birth. This principle was recognized at Nuremberg, enshrined right from the beginning of the United Nations as a fundamental obligation in the International Bill of Rights and reaffirmed in the relevant subsequent international and regional human rights instruments. The Women's Protocol breaks with this human rights tradition when it instructs States to:

... protect the reproductive rights of women by authorizing medical abortion in cases of sexual assault, rape incest, and where the continued pregnancy endangers the mental and physical health of the mother or the life of the mother or foetus. Article 16 (c)

This language of “authorizing medical abortion” of “the foetus” means that, even in a case where the mother complains of headache (mental and physical distress) abortions could be authorized. This is incompatible with the language of all previous UN human rights instruments in which it was understood that “legal protection” was to be provided for the child “before as well as after birth”. To exclude the child before birth from the protection of human rights law is to return to Nazi concepts condemned by the international community at Nuremberg:

“...protection of the law was denied to the unborn children...” from Nuremberg Trials
Record: RuSHA/Greifelt Case 1947-8.

We call on all patriotic Nigerians to defend our motherland!

Long Live the Government of the Federal Republic of Nigeria!

Long Live the Senate of the Federal Republic of Nigeria!

Long Live the National Assembly of the Federal Republic of Nigeria!

Signed on behalf of Prolife organizations,



Prince Dr Philip C. Njemanze MD
Prolife Conference Action Committee Chairman.

Presentation to the National Assembly; before the Senate President on 13th November, 2007.

By Prolife Organisations in Nigeria:

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| 1. African Anti-Abortion Coalition (AAAC) | 14. Happy Home Foundation |
| 2. Amazing Care Foundation | 15. Heritage Network |
| 3. Association of Concerned Mothers | 16. Human and Family Commission |
| 4. Action Family Foundation | 17. Jumatu Nasul Islam |
| 5. Catholic Women's Association | 18. Mater Dei Communications |
| 6. Catholic Youth Organization | 19. Maria Gorathy Organization |
| 7. Care pf the Estranged for Social Development, Lagos. | 20. MediaWatch |
| 8. Central Mosque, Lagos. | 21. Muslim Youth Initiatives |
| 9. Concerned Mothers | 22. National Islamic Centre |
| 10. Confraternity of Christian Mothers | 23. Redeem International Community Health Consultants |
| 11. Conscience for Human Development | 24. Secretariat Catholic Bishops conference |
| 12. Council of Muslim Youths, Abuja | 25. Supreme Council for Sharia in Nigeria |
| 13. Doctors dot Life NGO | |