



Written by [Rebecca Terrell](#) on September 6, 2022

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Dr. Christina Francis: Pro-life Missionary at Home and Abroad

Their job is to help bring life into the world, not to destroy it. It's why obstetrician-gynecologists love their profession, and was one of the reasons Christina Francis chose her specialty. She loves "the challenge of taking care of two patients at the same time," and told *The New American* that her goal is always "healthy mom, healthy baby."

Most of her associates agree. She quotes studies by abortion supporters that reveal an average 85 percent of OB-GYNs are not abortionists. "That's because we understand that elective abortion is not healthcare," she says.

By calling induced abortion "reproductive health," the mainstream narrative implies that pregnancy is a disease, and abortion is the remedy. It demotes a developing human life to the status of a tumor. "If it were healthcare, it would be performed by all OB-GYNs," Francis points out.

Hers is hardly a lone voice. As chairman of the board and CEO-elect of the American Association of Pro-Life Obstetricians and Gynecologists (AAPLOG), she speaks for nearly 7,000 members of that organization. It's a group that formed in 1973 shortly after the U.S. Supreme Court handed down its decision in *Roe v. Wade*, and in response to the American College of Obstetricians and Gynecologists' sudden and unexpected support of abortion on demand, first publicized the previous fall. AAPLOG works to continue the traditional Hippocratic stance of the college to safeguard both the mother and her unborn child.

Toward that goal, Francis testified in July before the U.S. House Energy and Commerce Committee in a hearing with the obviously biased title "Roe Reversal: The Impacts of Taking Away the Constitutional Right to an Abortion."

"The Constitution does not confer a right to abortion," maintains SCOTUS in its majority decision in *Dobbs v. Jackson Women's Health Organization*. That's the case that overturned *Roe* on June 24 and returned "authority to regulate abortion ... to the people and their elected representatives."

"We now have a chance for individual states to hear from the physicians that practice there and how we can, instead, provide true healthcare for all of our patients — not a band-aid for social issues that need to be addressed outside of the medical profession," Francis testified.

"Abortive procedures are more than detrimental to the life of the pre-born child," she warned. "They are also dangerous to the mother both in the short and long-term."

Citing hundreds of studies confirming the deleterious effects of abortion on women, she pinpointed increased risks in future pregnancies as well as the myriad mental-health problems that often manifest,



Christina Francis (AAPLOG)



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such as depression, anxiety, and drug abuse. “Women who had abortions show a seven-times increased risk of suicide compared to women who carried their pregnancies to term,” Francis stated.

However, patients are too often denied informed consent about these consequences. “Women considering abortion deserve to know that once they are ready to be mothers, they could face the possibility of losing a child to prematurity,” she declared.

Additionally, “over the last 50 years our maternal mortality rate has gotten worse,” Francis told *The New American*, “and we should be ashamed of that as a country.” Despite leftist claims to the contrary, it is obvious that “access to elective abortion has done nothing to improve maternal outcomes,” she noted.

Out of Africa



Missionary Spirit: Dr. Francis has cared for mothers and their babies in countries worldwide, including Romania, Myanmar, Afghanistan, and Kenya. (AAPLOG)

“When I lived and worked in Kenya, I saw first-hand what happens to women who don’t have access to good healthcare, and I saw what actually does make a difference in their health outcomes,” she continued. “That’s not abortion.”

Francis spent three years in rural Kenya, arriving there more than a decade ago to serve as the only OB-GYN for a mission hospital that tended a population of more than 300,000. She recounted her time in Africa in a speech on the steps of the Supreme Court building last December, when justices were hearing *Dobbs* oral arguments.

Francis credited Africa’s Marakwet people with teaching her gratitude for basic resources, which they often do not have, as well as the fact that “true hope for my patients doesn’t come as a result of my efforts as a physician, but from Jesus Christ, the Great Healer.”

Her journey to Africa began decades ago, at an inner-city mission in southern Indiana, which her parents helped run while she was growing up. “Mission work was kind of in my blood from a young age,” she relates in an interview on the Parkview Health blog. (She now serves as a hospitalist at Parkview in Fort Wayne, Indiana, and specializes in urgent pregnancy care.) “From a young age, I realized the importance of giving back and helping others.”



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She went on her first international expedition during the summer between high school and college, with a church youth group that traveled to Mexico to build houses. Next came a five-week mission taking care of children in a Romanian orphanage. “Even though I wasn’t specifically doing medical work, I was able to see the significant disparity in health care in a post-Communist country,” which she credits for cementing her determination to pursue medicine. She later went back to Romania, spending a year there between undergraduate and medical school, with additional missions to Myanmar, Afghanistan, and Kenya, before returning to the latter for her three-year post.

During a planned trip home she felt pulled toward yet another mission field, one even more needy than that of rural Kenya. Francis realized that the “policies and attitudes surrounding abortion in the U.S. influence policies around the globe,” and she made the decision to focus on exposing abortion as “the greatest injustice” faced by society and her profession. “I am still serving the Lord by caring for the vulnerable and the fatherless and helping others see the value of those whom society discards.”

Her experience has had a profound impact on the pro-life movement; out of her many stories, one in particular illustrates this fact. Soon after returning to the United States, Francis cared for an expectant mother who received devastating news in her first trimester. An ultrasound revealed her growing child had developed a potentially life-threatening tumor, a congenital heart defect, and fluid accumulation in areas such as the heart, lungs, and belly. The child had only a five-percent chance of surviving the pregnancy, and even less likelihood of surviving after birth. Over time, the baby’s condition worsened, so no one expected good news from the ultrasound at week 28.

“My ultrasonographer came into my office with a stunned look on her face. Knowing who she had just seen, I waited for the bad news. ‘Is she gone,’ I asked? ‘No,’ she responded, ‘All the fluid is gone.’”

Francis confirmed the findings and rejoiced with the mother that her tiny girl had grown and was looking better than ever. Today, the child is “a blessing not only to her family, but also to all who come in contact with her, including me.”

To Francis, that little miracle — and each child she welcomes into the world — is a living testament that all humans, pre- and post-born, are valuable, regardless of how current medical knowledge or societal prejudices classify them. For her, they exemplify the mandate that she lives by: “Speak up for those who cannot speak for themselves, for the rights of all who are destitute. Speak up and judge fairly; defend the rights of the poor and needy” (Proverbs 31:8-9).



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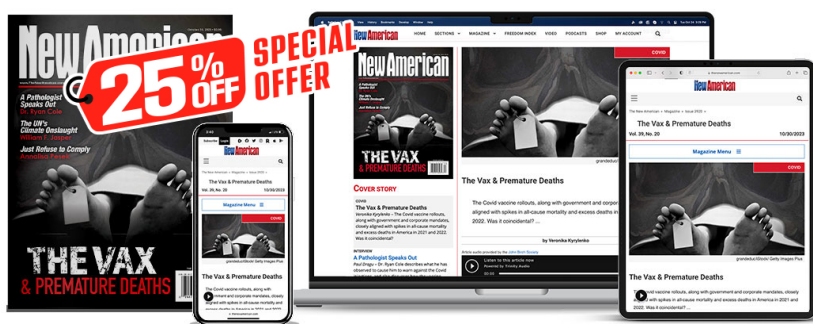
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