

ABORTION - Abortion is the intentional termination of a pregnancy by either medical or surgical means. It is very common (more than 1/3 of American women will have an abortion by the time they are 45), and generally safer than carrying a pregnancy to term.

❖ **Medical Abortion (RU-486)**

A medical abortion is brought about by taking medications (mifepristone or methotrexate, either of which is taken with misoprostol) that will end a pregnancy. Because the drugs are more effective the earlier they are taken, they are not used more than 9 weeks (63 days) into a pregnancy. When done correctly, medical abortion is between 92-97% effective.

❖ **Surgical Abortion**

A surgical abortion is the physical removal of the fetus from the uterus. Most abortions are performed in the first trimester of pregnancy, although in this country they can also be performed through the second trimester at the behest of the woman, and at any time during a pregnancy to protect the life of the woman. When done correctly, surgical abortion is nearly 100% effective.

Methods of Legally Restricting Access to Abortion:

❖ **Mandatory Waiting Periods/Counseling**

State laws that require a woman seeking an abortion to wait a specified period of time before actually obtaining one, usually 12-48 hours. These laws serve no medical purpose, but by increasing the amount of time a woman would have to take off work, get child care, get housing, etc., they are enacted to make attaining an abortion more difficult. For detailed information by state, please visit http://www.guttmacher.org/statecenter/spibs/spib_MWPA.pdf

❖ **Parental Notification**

Laws that require minors to notify their parents before obtaining an abortion. Again, these laws have no medical basis, and result in further restricting young women's access to abortion. For detailed information by state, please visit <http://www.ncsl.org/programs/health/aborlaws.htm>

ANTI-CHOICE - The philosophy that abortion is always wrong and women do not have the right to terminate a pregnancy for any reason. Sometimes this also includes hostility to birth control, as some in the anti-choice community mistakenly believe hormonal birth control causes abortions.

BIRTH CONTROL - Any method, device or practice designed to prevent pregnancy. This includes oral contraceptives, barrier methods (such as male and female condoms, cervical caps, and diaphragms), implants (such as the IUD and Norplant), and practices (such as the rhythm method), among others. For a full list with descriptions, see Planned Parenthood's web site: <http://www.plannedparenthood.org/health-topics/birth-control.htm>

EMERGENCY CONTRACEPTION (Plan B, the Morning After Pill) - Emergency contraception is essentially high dose birth control that can help prevent pregnancy if taken within 120 hours after unprotected vaginal intercourse. While it can prevent pregnancy from occurring, it does not affect one that is already established. For further information on use, safety and efficacy of emergency contraception, see Planned Parenthood's web site: <http://www.plannedparenthood.org/health-topics/emergency-contraception-4363.htm>

FEDERAL ABORTION BAN - The Partial Birth Abortion Ban Act, enacted in April 2007, bans abortions done by a method known as intact dilation and extraction, a method usually but not exclusively used during the second trimester. Unlike all previous post-*Roe v. Wade* abortion restrictions, this one does not include an exception to protect the health of the woman.

ROE V. WADE - The 1973 Supreme Court decision that made abortion legal until the fetus was viable (able to live on its own). This paved the way for legal abortion in every state.

PRO-CHOICE - The philosophy that all women have the right to decide if and when they want to have children, and that they shouldn't be forced to continue unwanted pregnancies. This idea inherently requires access to both abortion and birth control.

Pro-Choice Legislation:

- ❖ **Freedom of Choice Act (FOCA)** - The Freedom of Choice Act is a federal piece of legislation that would prevent the government from discriminating against a woman on the basis of her reproductive decisions, including the use of birth control, having a child, or terminating a pregnancy. Senator Barbara Boxer (D-CA) and Representative Jerrold Nadler (D-NY) introduced this landmark piece of legislation as the nation marked the 31st anniversary of the U.S. Supreme Court's monumental 1973 decision in *Roe v. Wade*. To date, more support is needed to move these bills forward.
- ❖ **Reproductive Health Act (RHA)** - Introduced into the New York State Legislature in 2007, the Reproductive Health Act would enshrine the protections of *Roe v. Wade* in New York State law. While abortion was legal in New York State before *Roe*, it had previously been placed under the criminal code. The Reproductive Health Act seeks to move women's right to abortion to public health law, and would safely protect that right should abortion become criminalized under federal law.
- ❖ **Prevention Through Affordable Access** – Representatives Joseph Crowley (D-NY) and Nita Lowey (D-NY) introduced the Prevention Through Affordable Access Act (H.R. 4054/S. 2347) to restore and protect access to discount drug prices for university-based and safety-net clinics. Senators Barack Obama (D-IL) and Claire McCaskill (D-MO) introduced the Senate companion bill. Nearly a quarter of senators and representatives have already signed on as cosponsors, but more support is needed to move these bills forward.