



Self-Managed Abortion Talking Points and Message Guidance

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Core Messages: When someone decides to end a pregnancy, whether they go to a health care provider or manage their own abortion, they should be able to do so safely and with dignity—and without fear of arrest, jail or investigation. Self-managing one’s abortion with pills is a safe way to end a pregnancy. **Nobody should have to fear going to jail for ending a pregnancy.**

Don’t:

Don’t equate self-managed abortion with illegal or unsafe abortion. That language is stigmatizing and can lead to further targeting and criminalization of people who self-manage their abortion as well as those who experience pregnancy loss.

Don’t solely talk about self-managed abortion as tragic, desperate, or an option of last resort. There are many valid reasons a person may self-manage their abortion. For some people, it is due to inability to access clinic-based care, for others it is a choice grounded in agency, autonomy, and self-care.

Don’t use coat hanger or knitting needle imagery. Thanks to the abortion pill, self-managed abortion today looks very different than it has in the past and when people have access to information, resources and support, self-managed abortion is safe. Symbols like the coat hanger create the false impression that abortion is unsafe and in need of regulation which can lead to surveillance and criminalization. As an image it was once powerful, but today it is outdated and could be harmful.

Do:

Do work to actively humanize people who self-manage their care by understanding and acknowledging the many reasons why someone may self-manage their abortion. People have been self-managing abortion care for as long as abortion has existed. Due to increasing abortion restrictions implemented on state and national levels, there are even more barriers that may lead people to self-manage their care.

Do name that the real risk of self-managed abortion care is legal, not medical. Use gavel imagery or other imagery depicting that criminalization is the real harm that people face.

Do emphasize that state-based legislation aiming to criminalize pregnant people, no matter their decision to continue or end a pregnancy, is rooted in the anti-abortion sentiments of controlling and punishing people’s bodies, families, and lives.

Do use gender inclusive language like “pregnant people” and “individuals.” Gender expansive and non-binary people are more likely to be criminalized for self-managed care.

Though abortion is legal, people who end their own pregnancies or those who help them may be targeted, reported, prosecuted, or even jailed. People living in poverty, people of color, and immigrants disproportionately face this risk.

- It may be surprising for many of us to consider that a pregnant person might decide to end their own pregnancy.
- We don't always know a person's circumstances or why they may seek to end their own pregnancy. For some people, ending their own pregnancy in the privacy of their homes fits with the reality of their lives.
 - Restrictions on abortion affect people of all backgrounds yet fall hardest on those who are most marginalized and likely to face financial and logistical barriers to care.
 - Many think it's easy to get an abortion in the U.S., but it's not. Some people must drive hundreds of miles or even out of state to get the care they need. Others can't afford the cost of an unexpected medical procedure that many insurance policies don't cover. Pregnant people are looking for options to end a pregnancy that are safe and fit their circumstances.
 - That's why thousands of people throughout the U.S. are ending their own pregnancies each year, using abortion pills. These pills - mifepristone and misoprostol, or misoprostol alone - are the same medications approved by the FDA for clinic-based abortions, but may be sourced online or elsewhere.

Abortion pills are a safe way to end a pregnancy.

- Research suggests that misoprostol used by itself or in combination with mifepristone is a safe and effective way to induce early abortion, provided the person has access to quality information and quality pills.
- Since 2000, nearly 3 million people in the U.S. have had safe medication abortions that are facilitated by a medical professional. There is already ample data on the safety of provider-directed medication abortion. There is also a growing body of research showing that self-directed use is safe and effective.
- International studies suggest with proper post-abortion support and quality means to end a pregnancy, people can safely and effectively end a pregnancy with pills without first consulting with a clinician.
- While some may choose to self-manage an abortion because of restrictions or barriers that make accessing care at a clinic impossible, for others, self-managing an abortion is an affirmative choice and personal preference.
- People always want to know about the physical safety of self-managed abortion, but we also need to consider the safety of being arrested, going to prison, or being deported. If people are truly concerned about safety as related to abortion, they should be considering how dangerous it can be for people's physical and emotional health to be ensnared in the legal system.
- People are already ending their own pregnancies, they deserve to be supported by the medical and legal communities.

But, unfortunately, across the country, hundreds of people have been criminally prosecuted based on an accusation that they did something to prompt their own miscarriage or stillbirth.

- These prosecutions have taken place in nearly every state, even those with robust protection for abortion rights. There have been prosecutions everywhere from Manhattan to Mississippi, even when there is no legal authority for a charge.
- There are as many as 40 different types of laws, from homicide to improper disposal of human remains, that have the potential to be misused by a prosecutor intent on punishing people for ending pregnancy or experiencing a pregnancy loss.
- Once a prosecutor has decided to punish someone for ending a pregnancy, they will do so, even when the law does not permit it.
- While it is impossible to prevent them from trying, the best thing lawmakers can do is [1] remove old laws that suggest there is something unlawful about abortion and 2] add clear provisions stating that people must not be prosecuted for ending a pregnancy. This gives people caught up in unlawful prosecutions the best arguments to avoid wrongful incarceration.

Why does this matter?

- While the number of arrests of people related to self-managed abortion is small in comparison to the vast number of people criminally prosecuted every year, each of these arrests represents a violation of a person's constitutional and human rights.
- There is no acceptable number of arrests of people for caring for their own health. It would be intolerable to suggest that people should be arrested for caring for their health in any other context.
- Like other criminalization, the people targeted are disproportionately people of color, immigrants, and people experiencing economic insecurity. People trying to meet health care needs in a system that undermines their humanity should not be targeted for arrest and punishment.

Abortion is a health issue, not an issue for the criminal legal system. Nobody should have to fear going to jail for ending a pregnancy. There is no circumstance where criminalization is an appropriate response.

For questions about legal rights and self-managed abortion: www.reprolegalhelpline.org

For constituents who have been arrested or prosecuted for having an abortion:

www.reprolegaldefensefund.org

For more information about the evidence of self-managed abortion and its medical safety: www.prh.org

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