



Medication Abortion

for New York Campuses

Purpose

We are the Reproductive Justice Collective @ Columbia University and New York City. Our members are students and young people from across New York who are committed to defending reproductive freedom. We do work throughout New York City around legislative advocacy, doula work and abortion support, self-managed abortion awareness, and access to gender-affirming care.

We believe that incorporating abortion care into the routine services provided at campus clinics will increase youth abortion access and decrease stigma related to seeking full-spectrum reproductive healthcare. This is especially urgent as New York becomes a destination state post-Dobbs, and our abortion clinics and funds experience increased demand from patients from restricted states. Anti-abortion groups have also started focusing increasingly on New York City, leading to clinic harassment and invasions.

We cannot be complacent about abortion access.

You can learn more and join our campaigns at reprojusticecolumbia.org.

Written December 2022

Abortion Pills on Campus

SCAN TO SIGN OUR PETITION DEMANDING

NY STATE REQUIRES ABORTION PILLS ON

PUBLIC CAMPUSES!



HAVING ON-CAMPUS ACCESS TO ABORTION MAKES THE COSTS MORE TRANSPARENT, INSURANCE COVERAGE EASIER, AND REDUCES THE BARRIER TO ACCESSING REPRODUCTIVE HEALTHCARE.

Contents

| \bigcap |
|-----------|
| 0 |

| I . | MED | ICATI | ON | ABO | RTIC | ON 101 |
|------------|-----|-------|----|------------|------|--------|
|------------|-----|-------|----|------------|------|--------|

| New York Resources | 1 |
|-------------------------------|---|
| Quick Facts | 2 |
| Background | 3 |
| Campaigning for MAB on Campus | 4 |

II. BEFORE

| What To Have Around | 5 |
|---------------------|---|
| Doula Options | 6 |
| Talking to People | 7 |

III. DURING

| Playlist | 8 |
|--------------------------------|----|
| What To Expect | 9 |
| Hotlines | 10 |
| When To Seek Medical Attention | 11 |
| Yoga Poses | 12 |

IV. AFTER

| Next Steps | 13 |
|--------------------------|----|
| FAQ | 14 |
| Reading List & Resources | 15 |

New York Resources

Title X Clinics for free + confidential emergency contraception, birth control, and family planning services: opa-fpclinicdb.hhs.gov

NYC Sexual Health Clinic Hotline: (347) 396-7959

The New York State Coalition against Domestic

Violence's 24-Hour Domestic & Sexual Violence Hotline

English: 1-800-942-6906 Spanish: 1-800-942-6908

NYC Family Planning Benefit Program for free, confidential sexual and reproductive health

services: nyc.gov/famplan

New York Abortion Access Fund for help paying for an abortion in New York State:

212-252-4757 (leave a detailed message). Email at info@nyaaf.org.

New York City Gay and Lesbian Anti-Violence Project (AVP) hotline:

1-212-714-1141

Quick Facts

1 in 4 people with the ability to get pregnant will have an abortion.

The abortion pill is a common name for mifepristone and misoprostol, which are used in conjunction in a medicated abortion. Mifepristone is taken first to stop your body's production of progesterone (this stops the pregnancy from growing). Misoprostol is taken next (after up to 48 hours) to empty the uterus.

Medication abortion with the two pills is typically used up to 11 weeks from the first day of your last period. This is the most effective method of abortion with pills -- 98% of the abortions are without complications.*

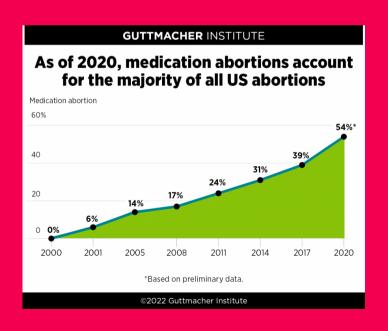
*According to a comprehensive review of the science related to the provision of abortion care in the United States conducted by the National Academies of Sciences, Engineering, and Medicine. It confirmed that medication abortion has a very low rate of serious complications and is effective at ending an early pregnancy.

Background

Abortion pills have been approved for use by the FDA for more than 20 years (since 2000).

It has been used worldwide for more than 30 years (starting in France in 1988).

In 2021, the FDA permanently approved access to medication abortion via telehealth/mail.



How to campaign for medication abortion on your campus:

(if not covered by the state-wide CUNY/SUNY bill)

- 1) Build or identify a coalition or student club that can act as an advocacy base (e.g. a YDSA, PPGen Action)
- 2) Identify a clear target for your campaign -- who can make the decision to allow MAB on campus? This could be the Director at your campus clinic or a member of the university's administration.
- 3) Develop key messaging. Why does access to medication abortion matter? What are existing barriers to access on campus? How are students being affected by the post-Dobbs reality? (@reprojusticecollective on IG for examples!)
- 4) Coalition build with groups across campus. This could include student governments, faculty, staff, other student clubs, and unions.
- 5) Create a timeline for tactics and campaign actions. Examples include tabling, creating a petition, writing op-eds in your campus newspaper, teach-ins, email floods, chalking, postering/wheatpasting, rallies, and speaker events. Keep touching base and reaching out to the campaign target what do they need to see and who do they need to hear from in order to support medication abortion on campus?



II. BEFORE



- 2. hot water bottle
- 3. foods rich in iron: spinach, oatmeal, almonds, quinoa
- 4. your favorite dessert
- 5. Tea: nettle & rasberry tree leaf.
- 6.Books, movies, crayons.

Doula Options

Reproductive Justice Collective can connect you to volunteer abortion doulas/ support people or companion. These people can physically, emotionally, and/or spiritually hold space for someone before, during, and/or after their abortion.

Contact the collective at: reprojusticebarnard@gmail.com

Diagram Heat Pack

- 1. Fill a sock with rice.
- 2. Leave enough room at the top so you can close the opening by either sewing it shut or tying it with a rubber band or string.
 - 3. Microwave on high for aprox 3 minutes.
 - 4. Tada! Reheat as needed.

Talking to People

From Hey Jane:

Whether or not you choose to tell people about your abortion is entirely your choice.

Only 1 in 3 people tell their families and 62% tell their sexual partner. This is obviously dependent upon the relationships you have with these people and whether or not you feel safe sharing information with them.

You should never feel obligated to justify your decision.

Look at pg.10 for emotional support hotlines if you need them.

III. DURING



Playlist

Sound & Color- Alabama Shakes

Say it Right - Nelly Furtado

Perdida - Biig Piig

Beautiful Strangers - Kevin Morby

Chocolate Town - Ween

Is it any wonder? - Durand Jones

Porcelain - Moby

Fly - FKJ Remix

What To Expect

First, The clinician will give you the pill, mifepristone at the clinic. They will also give you some antibiotics.

Second, You will be given the next pill, misoprostol to take at home 24-48 hours after you take the first pill. It's a set of 4 pills taken together.

Take it easy, The second medicine will cause cramps and clotted bleeding
It may feel like a very heavy period.
You will also experience a mild fever and nausea, but these symptoms should not last longer then several hours.

Get cozy! Get your hot water bottle, snacks and movies. Take ibuprofen and call a friend. Plan for up to two full days of cramping, bleeding, tender breasts, and fatigue. You may have a follow up appointment 7-14 days later.

Support Hotlines

Miscarriage + Abortion Hotline:

mahotline.org / 1-833-246-2632

Doctors and medical professionals available to answer questions for abortion seekers who choose self-managed or in-clinic medication abortions.

Reprocare Healthline:

reprocare.com / 1-833-226-7821

Call from 3pm to 3am for emotional support and information about abortion.

All Options Talkline

1-888-493-0092

Pregnancy options and counselling before, during, and after an abortion, pregnancy loss, adoption, infertility, and parenting.



When To Seek Medical Attention

FYI, the chance of being in need of emergency care is extremely low (1 in every 2000 people).

If symptoms of nausea and fever persist for more than 24 hours after taking the second pill, it may be a sign of infection and require medical attention.

How much is too much bleeding?

- soaking two or more maxi pads per hour for over two hours.
- blood clots larger than the size of a lemon.

If you ever feel uncomfortable saying you are having complications with a medication abortion (e.g. in a restricted state unlike New York), you can say you are having a miscarriage.

The symptoms and treatment of a complication with miscarriage is exactly the same as treatment for abortion.

Yoga for processing and centering



cat- cow



supine twist



childs- pose



inhale 1...2...3..4... hold 1...2...3...4... exhale 1...2...3...4... repeat <3

III. AFTER

Next Steps

Get a pregnancy test after two weeks. If you do one before, you may get false positive because it takes time for your hormone levels to go back to pre-pregnancy levels.

If you test positive, you may need to seek medical attention —— call the M+A hotline for more info.

Journal. Process your emotions: sadness, happiness, empowerment, anxiety, grief, relief, guilt, or all combined! Cry, Laugh.

Whatever you feel is valid.



I had my medication abortion 3-5 weeks ago, is it bad that I am still bleeding? On average, people bleed for 9 -14 days following a medication abortion. Some people bleed or pass clots for as long as 4 weeks.

How long after having a medication abortion can I use tampons or resume penetrative sexual intercourse?

In general, individuals are advised not to insert anything into the vagina for approximately one week after a medication abortion.

Are there psychological consequences to medication abortion?

There is no evidence that early medication abortion is associated with an increase in psychological problems such as depression, anxiety, or suicidality. A range of emotions is totally normal following abortion.

A Medication Abortion Repro Reading List reproit

links available at reprojustice columbia.org/guides

"Reproductive Justice" by Sister Song

"The Long, Disgraceful History of American Attacks on Brown and Black Women's Reproductive Systems" by Natasha Lennard

If/When/How Brief on Reproductive Justice in the Prison System

"We Must Promote Gender-Inclusive Reproductive Health Care" by Sophia Serrao

"Disability and the Right to Choose" by Jennifer Bartlett

Repro Resources

IF/WHEN/HOW HELPLINE: ATTORNEYS AND ADVOCATES PROVIDE LEGAL INFORMATION AND SUPPORT TO PEOPLE — INCLUDING HELP FOR SELF-MANAGED ABORTION, MINOR JUDICIAL BYPASS, AND NAVIGATING ABORTION RESTRICTIONS AND LAWS.

844.868.2812. REPROLEGALHELPLINE.ORG

PLANNED PARENTHOOD RESTRICTION TRACKER: CONSTANTLY UPDATED MAP OF ABORTION RESTRICTIONS BY STATE.

PLANNEDPARENTHOODACTION.ORG/ABORTION-ACCESS-TOOL/US

PLAN C: INFORMATION HUB FOR ACCESSING MEDICATION ABORTION IN PERSON, ONLINE, AND THROUGH TELEHEALTH.

PLANCPILLS.ORG

NATIONAL NETWORK OF ABORTION FUNDS: DIRECTORY OF LOCAL ABORTION FUNDS. MANY COVER TRAVEL OUT OF STATE IF NEEDED.

ABORTIONFUNDS.ORG

Thank you for reading!

with love,
The Reproductive Justice Collective at
Columbia University and New York City

reprojusticecolumbia.org
Instagram: @reprojusticecollective