INTRODUCING THE SIA LEGAL TEAM

Movement Lawyers
RJ Values
Bold Vision

WHY YOU SHOULD CARE ABOUT SELF-INDUCED ABORTION

Cost of an early Number of U.S. states the \$504 medication abortion in a Guttmacher Institute reports 27 U.S. abortion clinic prior to have laws that are extremely 10 weeks hostile to abortion rights Cost of an FDA-approved Number of laws potentially medication commonly used \$1.09 violated when someone self-40 as an abortifacient, when induces an abortion in the U.S. purchased through a pet with the support of an advocate pharmacy or caregiver Number of years Purvi 20 Patel could spend in jail 17 Number of known arrests or for an alleged self-induced convictions in connection with abortion self-induced abortion

While Florida's population is only



percent of the pregnancy-related criminal cases in Florida were brought against African Americans.

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percent African-American,

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The overpolicing of our neighborhoods and persistent racism of the justice system already penalizes Black communities. Allowing the police to prosecute Black women who have experienced pregnancy loss based on the suspicion they have done something to prompt it is a dangerous trend that must be stopped.

-- Marcela Howell, In Our Own Voice: National Black Women's Reproductive Justice Agenda

WHO IS THE SIA LEGAL TEAM?

A growing number of pregnant people self-administer traditional herbs or pharmaceutical pills, including the same abortion medications available at abortion clinics, in order to end a pregnancy outside of the formal health care system. This practice is sometimes referred to as "self-induced abortion" and is the only available or acceptable method of abortion for growing numbers of people. The Self-Induced Abortion (SIA) Legal Team is a consortium of organizations using law and policy tools to ensure people throughout the U.S. can end their own pregnancies outside of the formal health care system with dignity and safe from the threat of arrest for themselves or anyone who assists them.

OUR BOLD STRATEGIES

1	Improve Information Relay	Expand access to reliable information on how abortion pills can safely and effectively end a pregnancy outside of the formal health care system by identifying mechanisms for advocates to legally share this information.
2	Halt Criminalization	Develop innovative ways to use litigation and legislation to fight back against efforts to arrest and jail people in connection with self-induced abortions.
3	Support Self-Help Distribution	Develop cutting-edge theories, strategies, and other law and policy tools for improving self- help or community-based access to abortion medications.
4	Shift Culture	Engage our legal community on self-induced abortion and build a cadre of lawyers and scholars poised to fight for self-determined
		abortion care. © The SIA Legal Team

PROBLEMS AND SOLUTIONS Our 5-Year Plan

IMPROVE INFORMATION RELAY

PROBLEM: There is an urgent need for accurate medical information on self-induced abortion, but public health advocates do not know what they can legally say to pregnant people.

SOLUTION: Expand access to reliable information on how medication can safely and effectively end a pregnancy outside of the formal health care system by identifying mechanisms for advocates to legally share this information.

We know people are ending their own pregnancies. The SIA Legal Team is well positioned to work with public health professionals and advocates to ensure people are fully supported and have the information and resources to safely end a pregnancy with dignity and without threat of prosecution.

-- Dr. Daniel Grossman, Advancing New Standards in Reproductive Health

Access to Accurate Medical Information

Public health advocates recognize there is an urgent need for accurate medical information that helps people avoid any negative consequences of selfinduced abortion. Many advocates are concerned about the legal consequences of sharing this information. When educating on self-induced abortion, advocates do not know if they are approaching, crossing, or are sitting miles away from the line of what can legally be shared. The SIA Legal Team conducts state-by-state legal research on how to share information on self-induced abortion. Armed with this legal information, advocates, doulas, midwives, abortion hotlines, community health workers, promotoras, and grassroots organizers can feel confident sharing quality information about how medication can safely and effectively end a pregnancy.

The SIA Legal Team is a consortium of organizations using law and policy tools to ensure that people throughout the U.S. can end their own pregnancies outside of clinic settings with dignity and safe from the threat of arrest for themselves or anyone who assists them.

2 HALT CRIMINALIZATION

PROBLEM: Overzealous lawmakers, prosecutors, and judges have been undermining the abortion right by criminalizing self-induced methods of abortion. We are aware of **17** arrests or prosecutions involving self-induced abortion.

SOLUTION: Develop innovative ways to use litigation and legislation to fight back against efforts to arrest and jail people in connection with self-induced abortions.

There is no question about it, criminal prosecutions for abortion self-induction are motivated by sexism, racism, classism, and xenophobia. We need the skilled lawyers in the SIA Legal Team fighting back against efforts to erode reproductive rights and evade justice for our communities.

-- Miriam Yeung, National Asian Pacific American Women's Forum

Impacts of Criminalizing Abortion Self-Induction

If lawmakers and the courts criminalize self-induced abortion or further restrict self-induced abortion, the right to abortion will be effectively cut off for many pregnant people. To help us identify where people who end their own pregnancies are the most vulnerable to prosecution, we have conducted a multistate legal landscape to plot the risks and opportunities. We will develop new and innovative ways to defend people who become ensnared in the legal system for ending their own pregnancies, and anyone who helped them along the way. Additionally, pregnant people and their caregivers will have access to trusted attorneys to counsel them.

Criminal Prosecutions Unfairly Target Marginalized Communities

If the justice system is allowed to criminalize self-induced abortion, it will have cascading repercussions, particularly for communities of color, immigrant communities, and lowincome communities - who are already subject to heightened surveillance by law enforcement, have more interaction with other government authorities, and may be the victims of racist and xenophobic stereotyping. The more pregnant people we put under a microscope, the more prosecutions for intended and unintended pregnancy loss there will be. The constant policing of people who experience pregnancy loss will greatly impact poor women who, because of their poverty, are more likely to have poor birth outcomes.

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Many prosecutors are becoming aggressive in bringing charges against women for pregnancy loss, prosecuting under theories and statutes that ignore the relevant science, the meaning of the relevant statutes, and constitutional rights. Criminal defense attorneys (and others) will definitely benefit from having access to legal experts on abortion self-induction who can bring a national context and body of knowledge to these charges.

-- Professor Lawrence Marshall, Pro Bono Counsel for Purvi Patel

3 SUPPORT SELF-HELP DISTRIBUTION

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PROBLEM: The average cost of an early medication abortion at a clinic is \$504, making that option too expensive for many people.

SOLUTION: Develop cutting-edge theories, strategies, and other law and policy tools for improving self-help or community-based access to abortion medications.

Distance, cost, language barriers, and immigration checkpoints are just some of the obstacles that may keep Latinas from accessing an abortion clinic. We need to expand access to a broader range of abortion options in order for our communities to regain control over their health and lives.

-- Jessica González-Rojas, National Latina Institute for Reproductive Health

Expanding Self-Help Access to Abortion Pills

The SIA Legal Team has charted the legal landscape of laws that may impact the distribution of abortion pills. We plan to provide legal tools, strategies, and support for entities developing self-help distribution mechanisms. We will also provide legal resources to support innovative prescribing practices and to change select state laws.

CULTURE SHIFT

PROBLEM: Pregnant people are selfinducing abortions outside of the formal health care system. They deserve to be supported with quality information and surrounded by caregivers who know they can rely upon a team of attorneys to defend them.

SOLUTION: Engage our legal community on selfinduced abortion and build a cadre of lawyers and scholars poised to fight for self-determined abortion care.

I'm so glad the SIA Legal Team is taking on these complex and critical law and policy issues. Movement lawyers guided by RJ values can help fellow advocates navigate the changing terrain in order to empower, shield, and defend those involved.

-- Angela Hooton, Center for Reproductive Rights

Uniquely Qualified

The advantage of the SIA Legal Team is care. No one is going to be more thorough, careful, or creative in this work than we are. This is more than a job for us – it's a cause. The people who could get ensnared in the system are not just our clients — they are our communities. And, in the case of providers, promatoras, advocates, and activists – they're also our friends and family. In order for the SIA Legal Team to get to work on our ambitious five-year plan, we need the support of the funding community. We plan to use a variety of law and policy tactics to improve circumstances for people who end their own pregnancies – until all pregnant people have access to the full range of provider-directed and self-directed care they need.

Meet the SIA Legal Team

Jill E. Adams SIA Legal Team Chief Strategist Center on Reproductive Rights and Justice at Berkeley Law

Sabrina Andrus Law Students for Reproductive Justice

Jessica Arons Reproductive Health Technologies Project

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