



Abortion Care Network
WE ARE STRONGER TOGETHER

network News

The Newsletter of the Abortion Care Network | Spring 2016

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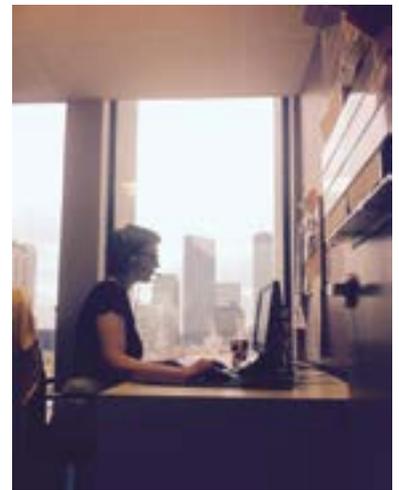
Megan Smith, Repeal Hyde Art Project, MA

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Empowering Abortion Access from Texas to Minnesota

Targeted Regulation of Abortion Provider (TRAP) laws have been wreaking havoc on abortion access throughout the nation, closing abortion care clinics at an unprecedented rate. The impact on Texas women and families has been well documented by journalists, research organizations and through the powerful personal abortion stories in the wake of HB2 – an anti-abortion bill developed with the intent of closing abortion clinics.

As we wait patiently to hear how the US Supreme Court rules on Whole Woman's Health v. Hellerstedt (the legal challenge to HB2) this June, the physical and emotional toll of these TRAP laws and legal battles continue to have a real impact on the lives of people in need of abortion care throughout the country as well as the staff who work at clinics, physicians' offices and hospitals that provide abortion care.



EmpowerLine phone team member at WWH

Over one thousand miles north of the Lone Star state sits the EmpowerLine, the Whole Woman's Health phone team that helps patients across the country access abortion care. Several EmpowerLine team members have been with the company throughout this entire legal fight and have felt the stress of HB2 just as personally as those who live in the areas most affected by the restrictive law.

“It's my job to help the people who call us get the care and resources they need but sometimes it feels helpless.” - Samira

“We all feel anxiety over our job security and that compounds with feelings of responsibility for our patients but also still feeling like everything is out of our hands,” said EmpowerLine administrator, Angelica Perez.

“It is the worst. Because of the stigma caused by the Texas legislature, we have to spend twice the amount of time reassuring patients that

abortion is safe and that they will be in good hands,” added Shayla Walker, EmpowerLine administrative coordinator. “It's exhausting.”

Abortion Care Network supports independent abortion care providers in offering the most exceptional care possible.

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When speaking with the staff it is clear that they feel a powerful sense of responsibility for the people calling them to access abortion care. "This is just the reality of the situation. We can't quit and leave our patients hanging. It's not an option," said Emily.

"Sometimes I have anxiety dreams about calling abortion funds, making sure that the people who contact me are approved for funds and can get care. It can be difficult when many of my friends don't understand why I care so much," said Kayla.

Staff at abortion clinics throughout the nation are feeling the emotional and physical stress of TRAP laws as they work to ensure patients can access the care they need while also trying to navigate anti-choice laws and legislatures that are trying to close the doors to their clinics.

Whole Woman's Health is working to combat the stress and feelings of powerlessness by assigning projects

that increase agency and autonomy, encouraging self-care and monthly meditations.

But, it is all of our responsibilities to ensure abortion care workers feel our love and support for the essential human rights work they do each and every day.

Abortion Care Network's recently-completed strategic plan refocuses our work and resources to provide direct support resources to staff throughout the clinics – from front-line staff who answer the phones to clinic managers. We need your support to help us ensure clinic staff like Angelica, Shayla, Emily, Samira and Kayla receive the professional development and emotional supports they need to continue safeguarding abortion access.

Staff like Matthew, who started at the EmpowerLine right after the Wendy Davis filibuster, who cites the direct patient

contact as inspiration to continue forward. "Every week you get that one person who you know you actually really did something for. You speak with them several times and you know that they are thankful for your help. That's what keeps me going. It gives me hope."



That is why every dollar donated to Abortion Care Network between now and July 31st, 2016 will go to our new staff support fund – which will provide emotional and professional development supports to staff that work at our member clinics.

Abortion clinic staff that feel supported and valued are key to abortion clinics' sustainability and ensuring patients receive exceptional care. Help us ensure that every front-line worker, counselor, nurse, clinic manager and physician receives the love and respect they deserve.

New Report Reveals Increasing Threats to Providers

"I'll pay ten large to whomever kills Doctor _____. Anyone. Go for it."

"One person setting fire to an abortion clinic will not do anything but thousands setting fire to an abortion clinic will speak volumes... It is not violent to set a building on fire... If thousands rallied together to set each murder house on fire, we would see the end of abortion."

"Pull a Columbine and wipe everyone out."

- Anti-abortion threats

These and other threats were part of the detailed report released by the National Abortion Federation (NAF) in early April showing a huge spike in anti-abortion violence, harassment, threats and terrorism. According to the report: "2015 statistics reflect a dramatic increase in hate speech and internet harassment, death threats, attempted murder, and murder, which coincided with the release of heavily-edited, misleading, and inflammatory videos beginning in July."

Obviously, the worst of the spike in terrorism came on November 27, 2015, when Robert Dear attacked the Planned Parenthood clinic in Colorado Springs, shooting twelve people, three of whom were killed. Dear was ruled incompetent to stand trial for the time being while he undergoes mental health treatment, but it is clear from investigations into his past

that he was an extremist and that his well-planned attack was an act of anti-abortion terrorism.

But there's far more to recent anti-abortion fanaticism than the Colorado fatalities. By almost every measure, anti-abortion extremism has skyrocketed since the Center for Medical Progress released the highly manipulated and deceitful videos about fetal tissue donation practices last summer. For instance, death threats increased following the videos, with one reported in 2014 but 94 threats of direct harm reported in 2015. Online threats ballooned, so much that an outside security firm was brought in to track them. The firm started work in mid-November and recorded over 25,000 incidents of hate speech and threats online between then and the end of the year.

Harassment and targeting at facilities also increased. There were four arsons in the months following the videos, and 67 acts of clinic vandalism over the course of the year, more than the previous four years combined. Blockades doubled from 2014, and picketing went up by four-fold, from 5,402 incidents in 2014 to 21,714 in 2015 – higher than in any other year recorded. The number of suspicious packages and hoax devices found in or near clinics also increased by a multiple of four from 2014.

2016 statistics are not yet available, but anti-abortion violence continues to be an important issue. Extremist David Daleiden, the man behind the Center for Medical Progress who has been indicted in Houston for using fake government documents, will soon be on trial. And separately, Congress's investigations into fetal tissue donation have led to subpoenas of clinics and providers, threatening their personal information and safety.

These statistics document what Abortion Care Network and abortion care providers have known for a long while: there is no excuse whatsoever for politicians to continue to ignore the issue of anti-abortion extremism.

ACN Provider Spotlight: Mona Waila, Director of Operations, Cedar Rivers Clinics

When and why did you begin working in abortion care?

Funny question, I don't think anybody wakes up and decides they want to be an abortion provider when they grow up. For me, I was young, fresh out of school and had no idea where the school sent my resume. I sat at an interview and smiled and nodded "yes" to several questions. On my second interview, I realized what the clinic was. I had no views on abortion and needed a job. 17 years later, here I am. This is where I truly was meant to be.



What do you find most rewarding about your work? Most challenging?

Wow, what is not rewarding?! I love sharing in the intimate moments of people's lives. My staff is sensational — coming to work feels like a "get together" with friends working toward a common cause.

I love working to remove the stigma around abortion and LGBTQ services and normalizing healthcare for all individuals, and hearing clients talk about how well they were treated or how nice our office is. The most challenging part of my work is the continued fight — because it shouldn't have to be a fight. The politics that come with this work shouldn't be an issue. What we do is just as essential as all other types of healthcare.

What services are provided as a part of Cedar Rivers' LGB and Trans* health program? How has the program changed or enhanced your work?

We provide Well Person and Hormone Therapy services. Learning about the lack of services available and the huge public demand has lit a fire in me to continue the battle for reproductive freedom for all people. We all deserve to receive quality healthcare in a non judgmental

environment, and Cedar River Clinics is opening the door to normalize Well Person services in the same way we work to remove the stigma surrounding abortion services. That's why we created our on-line Transgender Health Care Toolkit for medical providers and we are so excited to see that providers from around the United States, Canada, England and Sweden have begun accessing it. Our goal is to make transgender care more accessible, everywhere.

How do your loved ones feel about your work?

A good friend once said, "Saying what you do for a living is like coming out of the closet." Meaning that I use to spend a good part of my life avoiding the question "What do you do for work?" Since I've come out – it's been liberating, my family and friends are supportive, and many are curious about my work. I'm fortunate to be surrounded with people that have the same values and morals I have. I love that I can educate people about the work we do.

Congratulations to ACN 2016 Awardees!



Whole Woman's Health (above)

Center for Reproductive Rights (above)

David Cohen and Dr. Willie Parker (left)

In 2015, Abortion Care Network member clinics provided abortion care to more than

100,000 people.



Abortion Care Network

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Location of Independent Abortion Care Clinic Closures since 2012



Data compiled by Bloomberg
and Abortion Care Network.

Not since the passage of Roe v. Wade has abortion access been more dependent on an individual's economic resources and zip code. In just the past 4 years, 25% of local, independent abortion care providers throughout the US have been forced to close their doors by state lawmakers passing extreme TRAP law legislation as well as health insurance reimbursement rates that do not reimburse clinics fairly for the cost of care. **Abortion Care Network works every day to help providers keep their doors open.**

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